



Hamlin Fistula UK

UK Registered Charity number 257741

The Only UK Charity Exclusively Supporting the Addis
Ababa Fistula Hospital in Ethiopia



(Patients names in stories are changed to protect their identities)

Ethiopia is a land of natural contrasts, from high mountains soaring more than 4000 metres, to the depths of valleys at 120 metres below sea level. The Danakil Depression is one of the lowest, hottest and driest places on earth.

The women with fistula injuries who arrive at our hospitals are from rural communities from every mountain and valley of this beautiful land and they are the poorest of the poor. They are reduced to poverty by the social consequences of their injuries. They are young with the future of their lives before them. Few have been to school, many have never left their native village before coming to us, others have been abandoned by husbands and are held at a distance by those they formerly associated with because of their horrific injuries caused by childbirth which has gone horribly wrong. They are in severe pain and have no baby to hold in their arms. Their only hope is in the help we offer them and to provide for them is a privilege.



Ethiopian countryside

Roads are few, terrain is rugged and medical help is not readily available in rural areas.

A mother with a small pelvis or a badly positioned child may be in labour for four days or for even up to a week without qualified help. It is estimated that there are about 9,000 new childbirth injuries per year in Ethiopia. Here at our Fistula Hospitals we have a cure rate of over 90% and most of the women treated are able to have their dignity restored, return to a normal life where they are often able to have a baby and therefore experience the happy role of motherhood. The wonderful dedication of all of the staff, who share in Dr Hamlin's joy as they see patients sent home to start a new life, enables this to happen.



Dr Hamlin with some of her staff

In the world where women like most of us live, a world of monitored pregnancies, foetal and maternal monitors and birth plans, it is hard to imagine the gulf that separates us from the Ethiopian woman. A young girl who understands neither her pregnancy nor the birth process can only rely on information from other women in the same position as herself.

In the end, prevention is the only real and best care for obstetric fistula and our hospitals are continuing to work on that dream.

Prevention and Training

Dr Reginald Hamlin once said, “*Prevention is the best thing, if only we had the money.*”

Here at the AAFH we focus on prevention. We have Public Health Officers in many of our Fistula Centres. These Health Officers have been training Health Extension Workers (HEW) for high risk identification and safe delivery, where to refer fistula patients and how to prevent obstetric fistulas. They have equipped HEW and traditional birth attendants (TBA) with basic delivery kits.



Students listening to HEW about maternal health issues

The Public Health Officers have trained more than 400 TBA and more than 5,000 kits have been delivered. There have also been training programmes for health officers, nurses/midwives and doctors in different Woredas (*districts*) and Zones where the Hamlin Fistula centres are located.

Desta Mender (Joy Village)

The primary objective of Desta Mender is to rehabilitate patients with long term injuries to independent living by teaching them different skills, so giving them confidence and self-worth. There has been an exciting development, two women who have mastered the art of sewing and tailoring have rented a house where they live and a shop where they can work with their skills for the neighbouring people and for us.



Learning the art of sewing

They have been given the responsibility of working hard and standing on their own to cover their expenses. We hope that other residents will follow in their footsteps, allowing them to reintegrate back into society. Eleven residents at Desta Mender have graduated after completing an “Attitude Changing” training course. The CEO, Mark Bennett, presented them with their certificates and he specially commended one of the residents, Yetimwork, for her decision to start her own café. Mark also congratulated Ato Ephrem, Sahlitu and Tigist for their remarkable achievement in making this training course a success.

Patients Stories

After three stillbirths, Sewnet now has two children

Sewnet Mengia (*not her real name*) is 33 years old and she came to us from western Ethiopia. Sewnet said, “I was married at 20 and had three stillbirths at home. As there is no health centre around our village I used to get help at home when I delivered my babies. After delivering the third stillborn baby I was left leaking urine uncontrollably. One of my relatives came and told me and my husband about the hospital here. He brought me here and I was cured of my big problem. I have been back to the hospital twice for Caesarean operations and I now have two babies, a girl and a boy. I ask God to give my babies good health.”

Mariye takes her Mother’s Advice.

Mariye Belay (*not her real name*) came to us from Debre Markos in Amhara Region. She was married at 16, soon became pregnant and after delivering a stillborn baby, she developed a fistula. She was soon deserted by her husband, so her father and brother took turns to carry her to our hospital in Addis Ababa. Mariye said, “My mum had previously been treated here and she insisted that I came here too.” She had to stay a long time in our hospital as she needed prolonged physiotherapy to help her to regain her strength before she was able to walk again and undergo surgery. Mariye’s surgery was successful. We thank God and we wish her success with her new start in life.

Medical Director of AAFH Receives OBE

***"Professor Gordon Williams. Medical Director, Fistula Hospital, Addis Ababa.
For services to urology overseas, particularly fistula surgery in East Africa."***

Prof. Gordon has spent most of his career as a consultant at the Hammersmith Hospital in London and during that time he published over 200 scientific papers in his specialist fields of Urology and Renal transplantation. He also helped set up transplant programmes in Poland, Syria, Burma and Nigeria.

"I first came to Ethiopia 25 years ago as an external examiner in surgery sponsored by the British Council. During these visits I used to come and have lunch with Drs Reg and Catherine Hamlin. The contrast of working in a famous London Post Graduate teaching Hospital and what they were achieving at the Fistula Hospital was an inspiration to me. Their care and devotion to their patients has influenced how I have managed my own patients throughout my career.



Prof. Gordon with one of his patients

After visiting for a few years they asked me if I could help one of the staff who was inoperable and dying of renal failure. There was really no choice. I came out with some abdominal instruments and formed the first of over 130 ileal conduit diversions. This patient had to wear a bag on the abdominal wall but was dry and she was able to continue working at the hospital, supervising the outpatients department, for a further 17 years.

After this I used to come out regularly, one year I came 9 times. I would often fly out on Friday night, operate all day on Saturday on women who would otherwise die of renal failure and fly back to London on Sunday. The purpose of my visits was always to teach the Ethiopian doctors these operations.

The purpose of my visits was always to teach the Ethiopian doctors these operations. I had a very busy career in London and after chairing the committee that ran surgery in the UK for 4 years I realised there was going to be an enormous hole in my life. It was about 5 years ago that I decided to come permanently to Ethiopia. I came initially to set up a new medical school with the intention of training doctors. All was fine while under the Ministry of Health here, but it was downhill all the way when the School was transferred to the University. With no staff, no budget and no curriculum, I resigned after a year.

On the day that my OBE was announced I had been full time at the Fistula Hospital for 2 years 2 months 2 weeks and 2 days."

A New Tukul is Opened at AAFH

Some women are at the hospital for a year or more before they are able to have their surgery, due mainly to other health problems. The AAFH becomes almost like a second home to them, but the home back in their rural village is not square and does not have large rooms. We have celebrated the opening of a new tukul near to our chapel in the grounds of AAFH. This will be a place where they can have coffee ceremonies and gather together to talk about their previous traumatic experiences.



Ethiopian Coffee Ceremony

The coffee ceremony plays a significant part in their cultural life and it is the main social event in any village.

The tukul will also be used for psychological counselling sessions for the patients. In this setting, which is a similar building to their homes in rural villages, we hope the patients will be relaxed as they receive the loving kindness and help they so much need from Sr Belaynesh, the psychiatric nurse.

As Dr Hamlin says,

***“We must remember that love is better than any medicine,
just to hold a hand and encourage is better than any drugs.”***

The total expense of this project was met by Hamlin Fistula New Zealand.

Graduate Midwife - “My Story”

Abrehet Tesfay said, “I wanted to become a midwife because my mother told me that she had difficulty when she delivered me. She was in labour for two days at her home with a traditional birth attendant, I was not in a good position for my mother to deliver and she became very ill and weak. I know many women who have died while giving birth in my area and knowing this encouraged me to become a midwife. I want to prevent obstetric fistula and maternal death.

As a midwife, I hope to bring about a real and lasting change to the health care of women in my community in many ways including health education. I have already spoken in local schools in my home area, to Women’s Associations, to health centres, to mothers during home visits, in the church and in the

market place. I will tell people about the positive reasons to receive health care in pregnancy and to practice family planning. There is a danger in some traditional practices so mothers need to be prepared for the birth of their baby in case there is an emergency.



Graduation Day

The greatest challenge I have to face is convincing husbands and mothers-in-law that their wife or daughter-in-law will benefit from good antenatal care, skilled care during labour, post natal care and family planning. Because of their culture they may oppose these things and to change culture is a big challenge.

I was successful in my application to join the Hamlin College and from this point my life changed in that I was going to learn about the problems that face women in this country.

I have now returned to my own community to help prevent these problems and to improve the lives of local women. My life has changed so much, I am now completely compassionate about women's health and being a good midwife."

Students are selected from particular locations so that, when training is complete, they can return to their home areas and work among their own people. Two midwives work from a purpose-built clinic and are supported from the regional satellite hospitals.

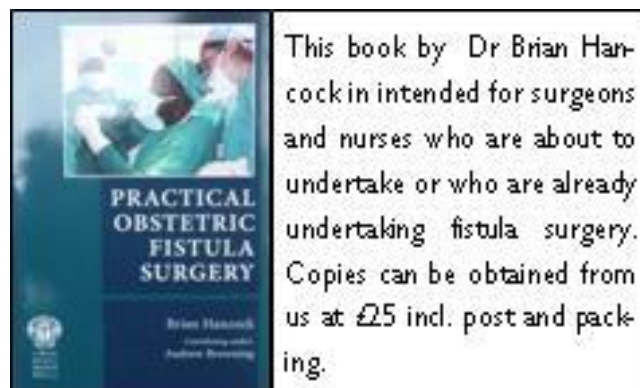


The promise of Abrehet and all of the Hamlin Midwives : I, *Abrehet Tesfay*, a midwife of the Hamlin College, commit myself before God and before you all, to practice with compassion, integrity and love. Using my skills and knowledge to value and protect women and children in my care, recognising that every mother is a family's richest possession.

UK News



Brian (*right*) being presented with the Hunterian Medal by Professor Chris Lavy, a member of the college council



This book by Dr Brian Hancock is intended for surgeons and nurses who are about to undertake or who are already undertaking fistula surgery. Copies can be obtained from us at £25 incl. post and packing.

One of our UK Trustees, Brian Hancock, has been awarded a prestigious Hunterian Professorship by the Royal College of Surgeons of England for his work with obstetric fistula patients in Africa. This involved giving a keynote address at the annual meeting of the College of Surgeons of East, Central and Southern Africa, which was held in Kampala.

Brian said, "It was a great opportunity to inform a large audience of Surgeons from all over Africa about the Addis Ababa Fistula Hospital and other initiatives to prevent and to help the hundreds of thousands of patients still suffering with fistula in almost every poor African country."

Thank You!

We would like to express the joy and gratefulness of our patients as they receive gifts of healing in many ways, thank you for your on-going contributions. We have been blessed with continuing monetary donations and shawls from around the UK and from places farther afield. Thank you for your prayers and support for the work we are doing with our poor patients.

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