Columns
Social Justice



Supporting a new campaign on the global prevention of obstetric fistula include, from left, Spiritan Fr. Edward Flynn; Medical Missionaries of Mary (pictured are Janice Kelly and Nadia Ramoutar of the congregation's communications team); Sabina Higgins, wife of Ireland's president, Michael Higgins; and Toni Pyke of Leaders of Missionaries and Religious of Ireland. (Courtesy of Sheila Campbell)



by Sheila Campbell

Contributor

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Our work as Medical Missionaries of Mary, since our founding in 1937, brings us in contact with global health issues for women, exposing the horrifying conditions many girls and women face in childbirth. Many people are unaware of the risks giving birth still poses for girls and women in sub-Saharan Africa. We are involved with a new coalition, SafeBirth4All, recently launched in Ireland. Our mission is to let people know about the preventable dangers thousands of pregnant women face daily when they find themselves in a deadly birth situation for them, their child or both. We want to give a voice to these invisible girls and women who suffer deeply. The issue was addressed in the Western world about 100 years ago.

Obstetric fistula is caused by obstructed labor and accounts for up to 6% of all maternal deaths globally, according to the World Health Organization. The injury, a hole between the birth canal and bladder or rectum, causes constant urinary or fecal incontinence, WHO says.

Access to safe maternal care can prevent obstetric fistula, and access to fistula repair surgery can improve the lives of girls and women affected.

Often causing the death of the baby, the rupture or wounds caused in childbirth for at least half a million women comes with several undesirable impacts, leading to inhumane conditions. In addition to high rates of maternal or baby death, those who live with obstetric fistula are also subjected to tremendous pain, discomfort, social and emotional abuse and severe mental health issues. Torn vaginal walls from birth complications or obstructions lead to uncontrollable leakage of urine, feces or both. This causes the women to be ostracized, abandoned or abused due to the horrendous smell they cannot control. The women live in fear, shame and often isolation.

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Inspired by the story of the Visitation in the Gospel, we are inspired to support women in their hour of need, no questions asked. As Medical Missionaries of Mary, we have been pioneers in working to prevent and repair obstetric fistula for decades and today actively work to heal girls and women impacted. There are many grey areas in addressing this issue as even statistics on how many women are suffering with it now do not agree and are, at best, completely unreliable. It is grossly underreported. Some say that the waiting list for repair is so long, it would take over 87 years to catch up with the current demand. The frustrating part is that this could easily be prevented with basic antenatal care for all and improved education.

More than just being a medical issue, this is a human rights issue. Born out of frustration in our desire to see this condition be prevented, we are now working with Toni Pyke of Leaders of Missionaries and Religious of Ireland and Spiritan Fr. Edward Flynn to see how we can get safe childbirth to be acknowledged as a human right. The campaign was launched in May, and already several other parties are coming forward to get involved. We seek to coordinate the efforts on obstetric fistula, making it "history" for sub-Saharan Africa and not just for girls and women in the Global West. We are raising awareness so resources can be gathered to rewrite the stories of all women, not just the privileged ones.

The coalition behind the campaign is fueled by frustration. We are tired of seeing millions of women suffer needlessly and are working to prevent and to heal and to eradicate obstetric fistula. We believe that a safe birth is a human right all women deserve. It is our hope that through diplomatic efforts, this issue can be lifted from obscurity and gain support. We are interested in partnering globally with others who are working towards this important goal.

There are many contributing causes to fistula and one is the practice of young girls being married at a very early age, often to a much older man. The young girls' bodies are not ready for the trauma of childbirth. There are other factors too, which require more education, such as training for medical staff and the traditional birth attendants outside the medical system.

Our new coalition's goal is to raise public, national and international awareness around women's reproductive health and expand access to emergency obstetric and surgical services, supporting holistic and high-quality obstetric fistula care for all who need it. Services are also needed post-surgery for the women and girls to

regain quality of life.

Sr. Ursula Sharpe, our congregational leader, recently paid tribute to two late Medical Missionaries of Mary — Srs. Anne Ward and Maura Lynch — who worked for many years to repair and rehabilitate women and girls living with obstetric fistula. Over 40 years ago, Ward in Nigeria developed a simplified surgical approach to fistula as well as pre-op and post-op care. She treated more than 2,000 fistula cases and carried out more than 3,000 surgeries. Maura Lynch facilitated 1,300 operations in Uganda.

We hope to bring more attention to the people helping to prevent and eradicate fistula and prevent so much unnecessary suffering. Most women affected are ostracized by their families and society because of the side effects of the condition. But repair surgery enables them to go back to their homes. We are central to the campaign in raising awareness about the devastating impact fistula has on women and reducing the associated stigma through our website and other efforts.