



Evangelical Lutheran Church in America
God's work. Our hands.

Proposal: South Sudan Fistula Camp November 2023

Proposal amount: \$25,000
Proposal date: September 30, 2023
Project dates: November 25, 2023, through December 15, 2023
Project location: Juba, South Sudan

Background

One-in-twenty girls in South Sudan will die from complications of giving birth¹. Far more will suffer from those complications, among them obstetric fistula. It is often a result of obstructed labor, which is common when there is no health center nearby that can help women and girls in this condition. Fistula leaves them unable to control their urine and/or bowels. They leak and have a bad odor, causing many of them to be outcast from their families or communities. In a highly communal society, this is a fate worse than death.

The tragedy of fistula is compounded by culture. Girls are often married very young and many get pregnant immediately after menarche, before their bodies have fully developed. This is a determining factor for fistula, when the fetal head is stuck in position pushing against the vaginal wall, causing tissue to die and turn into a hole. Most communities in South Sudan are polygamous, and a woman's worth is often tied to her ability to bear children for a man's family. This keeps birth rates high, and also increases both the risk of developing complications and the psycho-social cost of those complications interfering with her ability to have more children.

The fistula camp at Reconciliation Lutheran Clinic has treated hundreds of women and girls since 2018. The operating surgeon, Dr. Andrew Browning, is among the world's foremost practitioners of fistula repair surgery. As such, the camp has developed a solid reputation and receives many patients who have been operated on multiple times in other facilities. Nationally, it is estimated that less than 30 percent of fistula surgeries are successful. The camp at Reconciliation so far in 2023 has a 64 percent success rate. In the most recent camp in June 2023, referrals came from as far away as Kordofan and Darfur in Sudan.

¹ Unicef, 2020. [Lifetime risk of maternal death \(1 in: rate varies by country\) | Data \(worldbank.org\)](#)

Statistics

In 2020, the lifetime risk of maternal death in South Sudan was 1-in-20. For reference, that is two times worse than the Sub-Saharan Africa average (1-in-41), 135 times worse than the US (1-in-2,700), and 650 times worse than Germany (1-in-13,000).

The burden of fistula in South Sudan is estimated to be between 40,000 and 60,000 women and girls². The prevalence is estimated to be a minimum of 30 per 100,000 women of reproductive age³ (10-100 95% CI). Most common causes of fistula are complications from obstructed labor (70 percent) and iatrogenic errors (26 percent)⁴.

Partners

Reconciliation Lutheran Clinic is owned by the Evangelical Lutheran Church Africa Mission in South Sudan (ELCAMSS), which is in turn a mission of the Evangelical Lutheran Church in America. They have partnered with the Barbara May Foundation in providing this life-changing service. The work has the enthusiastic approval of the South Sudan Ministry of Health. Referrals are provided by rural Christian mission clinics, Mediciens Sans Frontieres, International Committee of the Red Cross, Lutheran World Federation, government health providers, and others. These networks have been critical in connecting the need across South Sudan with the opportunity for high quality medical care. Some patients come in response to radio announcements about the camp.

The surgeries

The site of the fistula camp is Reconciliation Lutheran Clinic, on the northwestern edge of the capital, Juba. The surgical theatre was newly renovated in mid-2023. Patients are accommodated in three wards in the clinic, each accommodating about 12 patients. There is overflow space available as needed.

Patients are assessed on the day before the surgeries to confirm those who are eligible for surgery. Dr. Browning and team develop a schedule for the operating theatre for the next six days.

Fistula surgeries take anywhere between 15 minutes and 5 hours. The surgical team consists of a head surgeon, surgical nurse, physician student observers, an anesthesiologist, a sterilization nurse, and sometimes a runner. They perform in a surgical theatre (operating room) newly renovated in mid-2023.

² UN News Agency. [The Fight to End Fistula in South Sudan — Women and Girls \(thenewhumanitarian.org\)](https://www.thenewhumanitarian.org)

³ Adler et al, 2012. [Obstetric fistula in Southern Sudan: situational analysis and Key Informant Method to estimate prevalence - PubMed \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/)

⁴ Egziabher et al, 2015. [Obstetric fistula management and predictors of successful closure](https://pubmed.ncbi.nlm.nih.gov/)

After the surgery, patients are taken to the ward. They stay at the clinic for one to four weeks of post-operative care, with the goal of reducing the risk of infection that patients face when they go home.

During the post-op stay, patients have meals cooked for them and laundry washed for them. A pastor, nurses, and the clinic's two doctors make rounds morning and evening. This care is part of the mission of the church: showing the love that God puts in us to people who have been among the most marginalized in their communities.

Budget overview

NO.	ACTIVITY/ITEM	AMOUNT
1	Food	\$8,169
2	Transportation	\$5,770
3	Contracted labour	\$7,996
4	Drugs/disposables	\$3,065
	TOTAL	US\$25,000

Budget narrative

1. **Food budget** is allocated to provide healthy meals for all fistula patients, and any patient escorts who accompany them (in the case of minors or people unable to travel alone). Meals are also made available to the surgical team.
2. **Transportation budget** covers the costs of bringing patients and patient escorts (as needed) to and from the fistula clinic. Most come by flight due to road conditions, flooding, and insecurity.
3. **Contracted labor** is required to pay the surgical staff: anesthesiologist, sterilization nurse, and surgical nurse. For any contracted staff who are not local, costs also include their transportation and accommodation.
4. **Drugs / disposables** is budgeted for anesthesia, pain medication, antibiotics, and disposable items required for surgery such as gauze, iodine, catheters, and others.

Contact

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