

The Johannesburg Call to Action to Make Motherhood Safer by Addressing Obstetric Fistula

Obstetric fistula is a major injury and disability to women who survive childbirth, altering the lives of more than 2 million women worldwide, the majority of whom are in Africa. Fistula causes constant leakage of urine and/or faeces through the vagina resulting in serious physical and mental ill health and often leading to social isolation. It is associated with stillbirths and poor maternal and infant health. The failure of state health systems to provide access to preventive care and treatment implicates women's internationally recognized human rights. Major contributing factors include poverty, illiteracy, low status of women and gender inequality, malnutrition, adolescent pregnancy, lack of awareness, and low geographic, financial and socio-cultural access to family planning and emergency obstetric care.

As women with fistula survive the death of their baby and the near-death experience of delivery, they are living testimony to the challenges faced in maternal and newborn health. Globally, more than half a million women die annually of maternal causes. There are approximately four million stillbirths and four million newborn deaths each year. Attention to obstetric fistula is also uncovering the very serious problem of traumatic fistula stemming from sexual violence against women.

Obstetric fistula is preventable and treatable. Yet, to date, limited efforts have been made to address this scourge. We know what needs to be done, have effective interventions, and can take action immediately in any setting. We also know that fistula can be eliminated, even in countries with limited resources. Local health care providers and advocates, together with international efforts, such as the global Campaign to End Fistula¹, have brought this hidden issue to international and national agendas. These efforts are aimed at increasing support to countries that have shown political commitment; consequently, remarkable progress has been achieved in a short time.

Actions taken to eliminate obstetric fistula will strongly contribute to the achievement of the international commitments on development – in particular, improving maternal and newborn health and addressing gender and economic inequity (International Conference on Population and Development, Millennium Development Goals (MDGs) 1, 2, 3, 4 and 5, World Summit Outcome Document).

Participants of the *Johannesburg Meeting to Make Motherhood Safer by Addressing Obstetric Fistula*, including over 100 senior officials of ministries of health, international agencies, and non-governmental organizations (NGOs), urge governments of Africa - in particular ministries of health, women's affairs, education and finance - to urgently address the issue of obstetric fistula and maternal health.

Governments should ensure the rapid implementation and scale-up of national programmes to address maternal health and obstetric fistula, including *National Road Maps for Accelerating the Attainment of the MDGs related to Maternal and Newborn Health in Africa.*

¹ www.endfistula.org

Together with civil society and partners, governments should:

Strengthen health systems

- Ensure rapid scale up towards universal access to reproductive health, in particular family planning, including for young people
- Ensure the right of access to maternal health care, which includes attendance of all pregnancies and births by a skilled health professional, emergency obstetric and newborn care, and referral and transport for caesarean section for obstructed labour when required
- Specifically, ensure free or highly subsidized caesarean sections, delivery care and fistula treatment
- Urgently address the health human resource crisis due to lack of investment in human resource development and management and loss to AIDS and to brain drain, by addressing in particular the number of trainees and quality of training, recruitment and retention, geographic distribution, working conditions, remuneration levels, professional attitude and respect for clients
- Establish in each country at least one referral service / centre for fistula treatment to ensure high quality of care and training, so that all women with fistula have access to comprehensive treatment, including quality medical care, rehabilitation, counselling, mental health services and health education; additionally, ensure access for all women to social reintegration support, including partnership with women's associations, organisations involved in education, skills development and income generating activities, such as micro-finance
- Countries should have strong data collection, monitoring and evaluation systems: community-based notification of fistula cases and maternal and newborn deaths, addressing determinants, monitoring successes of prevention, treatment, and reintegration programmes, documenting lessons learned, and conducting necessary research and publication of results

Adopt a broad approach across sectors and involve all key actors

- Promote girls' education, delay of the age of marriage and childbearing, gender equality and programming sensitive to culture and religion; address harmful practices
- Foster community awareness and mobilization, particularly the participation of men, to be more involved in fistula elimination and maternal health
- Foster strong partnerships, including with civil society, religious leaders, women's and professional associations, NGOs and donors
- Intensify advocacy for increased resource allocation to strengthen health systems in order to ensure a continuum of skilled maternal health care, including appropriate measures for the prevention and management of fistula
- Specifically, ensure that maternal health national road maps are costed and properly financed, and that African governments implement their pledge to allocate at least 15 per cent of their annual budgets to the health sector (Abuja Declaration, 27 April 2001)
- Empower women living with fistula through advocacy and peer-support

By addressing gender equality, girls' education and strengthening health systems – in particular, access to family planning and maternal health services - together, we can make obstetric fistula history in every community in Africa.

We call on the Government of South Africa to transmit this *Call to Action* to the African Union for adoption.