Telling the stories of women overcoming obstetric fistula in Madagascar

Why volunteering? Because I strongly believe in the values of volunteering.

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To me volunteerism is an authentic form of expressing motivation; it is an occasion to get deeply invested in a mission, to be able to contribute with our skills and competencies where really needed. Volunteering is about being part of the change, it’s an occasion for our human side to prevail upon our personal interests.
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By travelling and getting to know a bit more about the world, we often land in places and situations where the first thought is “here there is lot to be done”, and naturally get the reflex of rolling up our sleeves. This was the case once arrived in the South of Madagascar. A beautiful country of smiley and warm people, unfortunately affected by a severe humanitarian crisis related to chronic food insecurity.

I live in Ambovombe, a city at the extreme south of Madagascar, and cover with our activities an area that goes from Toliara (in the south-west of the country) to Fort-Dauphin (in the south-east).

Drought and poverty make these regions particularly tough places to live in, the poor infrastructure makes travel and displacements from a village to another extremely difficult, and as a result, isolation and desolation take their toll, with an impact on education and healthcare.

Many are the challenges to be faced and many UN entities support the Malagasy Government, in cooperation with local and international non-governmental organizations.

At least 15 out of 17 Sustainable Development Goals are broadly being addressed in the activities in the south.

UNFPA Madagascar is working to eradicate poverty, reduce hunger, ensure the access to healthcare, well-being and education, promote gender equality, give access to affordable and clean energy, reduce inequalities and engage in partnerships to work together towards the goals.

As part of my assignment, I have supported TOLISABO, a project under the leadership of the Ministry of Health of Madagascar, funded by the Japanese
Government and implemented by UNFPA in close collaboration with the Ministry of Health.

TOLISABO aims at facilitating access to free reproductive health care for the population in general, and in particular for the most vulnerable groups, namely women and teenagers, by assisting them during pregnancy, delivery and the post-partum phase, and providing information and support on family planning and contraceptive methods.

The project has many activities geared to provide a good standard of medical care, avoid preventable deaths and give back dignity to women suffering from issues related to the difficult access to reproductive healthcare services on the one hand, and gender-based violence on the other hand.

Particularly touching has been the experience of the reparation of obstetric fistula, an illness I heard of before only a couple of times while reading articles about humanitarian actions in Africa.

"An obstetric fistula is a hole between the birth canal and the bladder or rectum caused by prolonged, obstructed labour without treatment. It is almost exclusively a condition of the poorest, most vulnerable and marginalized women and girls. -- UNFPA"
Imagine the condition of living in a poor and landlocked village, where your priority is to feed yourself and your family, where children don’t go to school but work in the fields or pasture the flocks. A place where nobody will ever explain you what sexual education is, and by the age of 13 you easily and accidentally can get pregnant, often as a result of an early marriage.

As a teenager, the body is still not ready to carry a pregnancy to term and even less likely ready to give birth. The lack of appropriate and prompt medical assistance will only increase the risks. If the mother in childbirth is lucky enough to survive labor and the delivery, this may not be the destiny for her newborn.

This young mother can easily develop obstetric fistula, a condition that causes immense pain, as well as social exclusion and shame. If left surgically untreated obstetric fistula leaves permanent physical damages.

Last August, 90 women of all ages, coming from all around the south of Madagascar, travelled for days to reach Ambovombe and be hosted, treated, surgically operated and psychologically supported in dealing with obstetric fistula, and gain access to family panning.

“We listened to these women’s stories, we followed them during their treatment, we saw them standing again after years of illness and weeks of recovery, we recorded their smiles and their hopes for the future.”
Happiness is contagious, and seeing them smile again and be confident has been incredible. Emotionally, you are totally engaged, and you feel useful when you see the impact of your time and dedication.

What UNFPA Madagascar has been doing is fascinating. We need to appreciate the needs more and contribute according to our competences and resources, and this is what volunteerism is all about.

“All of us, from Asia to Europe, from West Africa to East Africa, can together voluntarily contribute our expertise as there is always much more to be done. Wouldn’t you roll up your sleeves? I do, I volunteer, I do it with passion, and not only because I am professional in what I do, but because we are simply human, and we all deserve dignity, care and possibilities.”

The only inconvenience when you deal with communication is that you often find yourself behind the lens of the camera. I therefore leave you with the amazing smiles of the brave women met during my journey through their stories, confident that they can represent one more reason for everyone to be part of the change.

Sub-Saharan Africa

• Italy • maternal health • obstetric fistula • #IVD2019 • #volunteer4inclusion

Sustainable Development Goal: SDG 3: Good health and well-being, SDG 5: Gender equality, SDG 6: Clean water and sanitation, SDG 10: Reduced inequalities