Zonta International has supported the Liberia Fistula Project since 2008. For the 2016-2018 Biennium, Zonta has committed an additional US$1 million to the United Nations Population Fund (UNFPA) for the project.

**GOAL**
Contribute to the elimination of obstetric fistula and the reduction of maternal mortality, morbidity and sexual violence against women while improving the health and socio-economic status of women and girls in Liberia.

**PROJECT DESCRIPTION**
The Liberia Fistula program was initiated to contribute to the elimination of obstetric and traumatic fistula and the reduction of maternal mortality, morbidity and sexual violence against women in Liberia and to improve the socio-economic status of fistula survivors. Specific objectives include, but are not limited to:

1. Preventing the occurrence of obstetric and traumatic fistula
2. Providing quality surgical and non-surgical treatment for obstetric and traumatic fistula victims
3. Rehabilitating and reintegrating fistula survivors into their communities by equipping them with skills for economic empowerment and sustainability
4. Providing support to fistula survivors with inoperable cases
ACTIVITIES AND ACHIEVEMENTS
The following activities took place 1 January – 31 December 2016.

- **112 patients** were treated—out of which 105 were surgically managed and seven were treated via catheterization.
- **59 survivors** were rehabilitated and reintegrated into their communities; 48 of them successfully completed their training cycle program.
- **25 fistula survivors**, including 20 inoperable cases, were followed up via mobile communication and home visits.
- Other indirect beneficiaries include about **300,000 women, girls, elders and husbands** who benefited from fistula prevention advocacy in 15 counties.
- **33 skilled health workers** were mentored on the use of catheters and partographs to prevent obstetric fistula.
- The project is presently conducting skills training and adult literacy programs for **11 fistula survivors** as part of its four to six months training cycle. The skills training curriculum includes tailoring, cosmetology (hairdressing/cosmetics), tie-dye, soap making, pastry making, interior decoration and the adult literacy program.
- The project also continued to advocate for increased access to quality reproductive health services through community awareness, strategic advocacy meetings with stakeholders and airing of fistula prevention messages through the local radio stations.
  - As a result, more than **4,000 community dwellers** in hard-to-reach areas were informed about the causes, prevention and availability of fistula treatment.

CHALLENGES
- Health facilities are not evenly distributed in communities, so patients’ access to health services is a challenge.
- Poor infrastructure and an inadequate transportation system have made parts of the country very difficult to access.
- The project’s only 4x4 vehicle needs to be replaced.
- Some patients are unwilling to get treatment because of shame, making mobilizing patients and tracking survivors a major challenge.
- High or frequent recurrent cases and/or inoperable: refusal to take advantage of other treatment options (e.g. porch, colostomy).

NEXT STEPS
In order to address the backlog of more than 5,000 cases, increased mobilization activities in hard-to-reach areas of the remaining 10 counties in 2017 is crucial. The following project activities are planned for the next reporting period:

- Increase strategic stakeholders meetings in rural and hard-to-reach communities to promote the prevention of fistula and support the mobilization of women suffering from obstetric fistula.
- Provide additional equipment, drugs and medical supplies to increase quality of care at the centers of excellence for fistula repair and training.
- Provide knowledge on family planning services for fistula survivors and link survivors with family planning service providers.
- Provide psychosocial counseling services for fistula survivors (both obstetric and traumatic) at all levels of care.