**Introduction**

What is Obstetric Fistula?

During unassisted prolonged labor, the sustained pressure of the baby's head on the mother's pelvic bone damages her soft tissues, creating a hole—or fistula—between the vagina and the bladder and/or rectum. The pressure prevents blood flow to the tissue, leading to necrosis. Eventually, the dead tissue sloughs off, damaging the original structure of the vagina. The result is a constant leaking of urine and/or feces through the vagina.

At least 2 million women live with fistula in developing countries, with 50,000 to 100,000 new cases occurring each year. These figures are based only on the number of women who seek treatment. Researchers also estimate about 20,000 fistulas are repaired each year.

From the statistics, it is evident that there is a gap in demand for services. However, women cannot demand for services if they are unaware of treatment options or if the health system lacks adequate outreach services.

**Objectives & Purpose**

The objective of this systematic analysis is to assess outreach activities that identify women and girls who suffer from obstetric fistula. Outreach services includes providing information, increase awareness, access to health services and help find solutions to barriers that prevent women and girls from accessing health care. The goal is to show evidence how outreach activities can contribute towards closing the gap between new cases and surgeries performed annually. The positive outcomes of outreach services can also be duplicated or scaled up in different regions to reduce the prevalence of this condition. The result will be a decrease in the length of time women and girls suffer from this condition so they can resume a normal productive lifestyle. This benefit comes from an outreach approach to be able to conduct needs assessments to provide a national or subnational incidence rate to strengthen intervention efforts.

Why is outreach services for women suffering from obstetric fistula challenging?

Women and girls who suffer from this condition are among the most vulnerable population.

- They are often rejected, by their husbands and isolated from the community.
- They live in remote places where it is difficult to reach by bus or car. Only reachable by boat or walking miles.
- They lack knowledge & awareness of obstetric fistula.
- They lack health services that are beyond their control.
- Women, especially girls are not empowered to seek treatment.

**Methods**

A literature review was conducted using the following databases: PubMed, Medline, Scopus, AIPHI and other relevant sources without a specific date range to include any research ever published. Only original empirical research published in English was included and was conducted in March 2018.

The key word search included, interventions for obstetric fistula, outreach strategies for obstetric fistula, fistula community mobilization, coordination of obstetric fistula services, radio messages and obstetric fistula, communication campaign for obstetric fistula, knowledge and awareness of obstetric fistula.

**Results**

Outreach is a type of service delivery, organizing activities focused on a population who alternatively would not have access to those services. A key component of an outreach plan is that providers are meeting those in need of services within the where the beneficiaries are located. The outreach services included in the analysis all address the triple gap contributing to the problem of a high prevalence of women and girls who suffer from obstetric fistula: coverage, access to health care and workforce planning. A few of the outreach activities included in this systematic analysis are needs assessment to better understand how to screen for the fistula. The thirteen studies focused on outreach and are categorized in five groups, community mobilization, screening, increase knowledge & awareness, communication campaign, and fistula camps. Studies that conduct screening do not directly provide access to health services but indirectly, identifying who and where obstetric fistula patients are located will support program design to provide direct services. Each of the studies show the impact of outreach and how it contributes to reducing the gap.

**References**


