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## Health & Environment

### Filmmaker Sharpens U.S. Focus on Fistula

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By Kristin Bender

WeNews correspondent

A U.S. filmmaker is hoping that her documentary will stir U.S. politicians to do more to alleviate fistula, an easily treated condition that has turned millions of African women into outcasts. Important screenings are planned for February and March.

OAKLAND, Calif. (WOMENSENEWS)--Like the lepers of the last century who were marooned on islands to suffer and die, women in sub-Saharan Africa and Southeast Asia who are stricken with obstetric fistula are often abandoned by their husbands and shunned by their family and community.



Self-portrait of Lisa Russell in Niger in 2004.

A lack of doctors, medical resources and education makes identifying women with the condition and finding doctors to repair the fistula a constant struggle in rural villages. Fistula primarily afflicts women in Africa and Asia, where early marriage, unassisted deliveries, gender inequality and lack of birth control are common.

Obstetric fistula typically occurs during difficult or prolonged labors. Women with the condition leak urine and or feces, but they learn to conceal it, constantly changing clothes and burning incense to hide the smell. Still, they soak mattresses rotten. And the smell is often so intolerable they are sent to live and work in isolation or at fistula compounds.

More than 2 million women worldwide suffer from the childbearing injury. Still, it is a silent epidemic for several reasons, including a lack of resources and commitment from the industrialized world.

Lisa Russell, a New York filmmaker with a background in public health, is breaking the silence.

It is up to the United States to help, Russell told Women's eNews recently, but policymakers, nonprofit organizations and funders know little about the condition, how to prevent it or what women's treatment options are. To broadcast the



answers to those questions, she has directed and produced a 15-minute documentary, "Love, Labor, Loss."

The film is part of Amnesty International's 14th Annual Human Rights Film Festival in Seattle Feb. 15-19, and the American Medical Student Association will show it at its annual convention in March in Chicago.

In the film, Russell and producer Carrie Svingen tell the stories of women who are only identified by their first names: Kaltumi, Zeinabou, Mariama and Gimba, who all live in Niger and either live with or are recovering from obstetric fistula. Last year the film made the rounds at universities, independent film festivals and conferences in California, Washington, D.C., Colorado, Boston and New York.

### **'More Than a Film, It's a Campaign'**

"It's really more than a film, it's a campaign to get people talking about these issues," said Russell at a winter screening here in Oakland. "We are using the medium of film to break down some of these barriers that come up when you start talking about fistula or other women's reproductive issues."

In addition to promoting the film, Russell is also working with Rep. Jim McDermott, D-Wash., to launch a legislative advocacy arm of the campaign to encourage others to use the video to inform government representatives and build support for a bill introduced by U.S. Rep. Carolyn Maloney, D-N.Y., to fund fistula treatments.

Last June, Maloney, along with U.S. Rep. Joseph Crowley, D-N.Y., and U.S. Rep. Bobby Rush, D-Ill., and other members of Congress introduced legislation that seeks to "mandate \$34 million to the United Nations Population Fund strictly to prevent, treat and renew the hopes of women suffering from obstetric fistula," Maloney's office said.

Maloney plans to reintroduce the bill this year and Russell is hoping for the best, although she expects it to face an enormous challenge.

"There is no doubt that people who know about fistula and who are compelled by the story of fistula agree that funding should go to help these women," she said. "But when you are talking about a reproductive health issue, that gets pretty political. But that's OK because I can get pretty political."

### **U.N. Fund a Major Player**

Throughout his administration, President Bush has withheld \$34 million annually from the U.N. Population Fund, a major player in the fight to eradicate fistula, based on allegations that the fund participated in coercive abortion and involuntary sterilization in China. Many leading experts have investigated the claim and found it baseless.

"Women shouldn't be suffering in the 21st century of something that was eradicated in the 19th century," Russell said.

Maloney's bill, H.R. 2811, would provide a U.S. voluntary contribution to the

fund only for the prevention and repair of obstetric fistula.

"This film is so very important to educate people about fistula, but it's also so very important to educate people about what we can do as a nation," said Diane Harrison, president and CEO of Planned Parenthood Golden Gate, one of the largest Planned Parenthood affiliates in the country.

The film, shot in cinema verite style, was produced by Governess Films, which is Russell's New York-based film company. It was filmed in 2004 in Niger, West Africa. It is narrated by Tony-award winner Tonya Pinkins, the star of the 2005 Broadway musical "Caroline, or Change," with music by Grammy-nominated Zap Mama.

Russell, 36, is willing to partner with any nonprofit, university or community organization that wants to use it as a teaching tool.

### **Responding to a Need for Education**

"Women's health is so under the radar," said Russell. "I'm hoping this film will help elevate it, at least a little bit. I feel I am responding to a need by some of these agencies who desperately need resources" for educating the public.

Obstetric fistula was eradicated in industrialized nations at the end of the 19th century, but in other parts of the world it leaves up to 100,000 women each year incontinent and childless. Caused by prolonged or obstructed labor, the constant pressure of the infant's head in the birth canal causes a hole to form between the bladder and the vagina or between the rectum and the vagina. The infant is often stillborn.

Many women suffer for three, four, even five decades because they can not afford the \$300 for the simple surgical repair. With a scarcity of medical resources and physicians in Africa--only six doctors in Niger, for instance, are trained to perform the necessary procedure--many U.S. doctors are lending assistance.

For three years, Amreen Husain, assistant professor in the Stanford University School of Medicine Department of Obstetrics and Gynecology, has been traveling to Eritrea with the Stanford Eritrean Women's Health Project, founded by Mary Lake Polan, named by Women's eNews as one of its 21 Leaders for the 21st Century 2005.

Last year, the Campaign to End Fistula, which is the population fund's first-ever global initiative addressing the pregnancy-related disability, sponsored the "Fistula Fortnight," during which 545 women were repaired in Nigeria.

During the two-week advocacy, treatment and training project, Nigerian surgeons partnered with volunteer doctors from the United States and the United Kingdom at four medical centers in northern Nigeria

Working with the Stanford Eritrean Women's Health Project, Husain's next surgical mission to Eritrea is scheduled for February 2006.

*Kristin Bender is an Oakland-based writer.*

Women's eNews welcomes your comments. E-mail us at [editors@womensenews.org](mailto:editors@womensenews.org).

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**For more information:**

"Advocates Battle Obstetric Fistula in Eritrea":  
<http://womensenews.org/article.cfm/dyn/aid/1942/>

UNFPA Campaign to End Fistula:  
<http://www.endfistula.org/>

Governess Films--"Love, Labor, Loss":  
<http://www.governessfilms.com/fistula/>

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