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Health Camps Offer Relief from Prolapse in the Mountains of Nepal



In need: 650 villagers attended the recent CWN health camp

examining gynecologist, obliged. (photo below)

Dhankuta District, Nepal: After living with a fallen uterus for 38 years, Sukmaya, 65, decided that enough was enough. She attended a health camp and was wait-listed for a hysterectomy. She seems relaxed at the prospect.

Narmaya, 71, had a different reaction when she also visited a camp last week and was told that she needs an operation. After giving birth to 12 children and living alone for 20 years, Narmaya found the idea of surgery terrifying and asked to be fitted with a ring pessary. The problem is that the pessary will have to be regularly cleaned at the local health post, which she never visits. But Dr Aruna Pokhrel the

These are just two of the many faces of uterine prolapse, a devastating condition which has taken a fearful toll on women in this region of soaring mountains and deep poverty. Both women learned of their condition at health camps organized by Care Women Nepal (CWN), a leading advocate for women's health in Dhankuta and partner of The Advocacy Project (AP).



Sukmaya shows how she gave birth to her children by pushing on a rope (*dori*). The practice may increase the risk from prolapse.

CWN has screened 6,420 villagers since 2014 and its camps represent one of the few bright spots in the battle against prolapse. Some feel the camps could even invigorate a district government health system which is - as its own officials admit - extremely weak.

Uterine prolapse is triggered by a perfect storm of primitive birthing practices, hard work, early marriage, poor nutrition and even domestic violence which combine to put pressure on the uterus. Sukmaya gave a graphic demonstration of one practice, known as *dori*, in which women push down on a rope when they give birth at home.

Under pressure from advocates the government has designated prolapse as a health "priority," but this has not translated into a workable program in Dhankuta. The Pakhribas health post - one of 37 posts in the district - has good birthing facilities but Mohammed Ismail, the post director, said that no-one in his team can even diagnose prolapse. His post has only given out seven ring pessaries in the past six months and he conceded that women with chronic prolapse probably "do not have confidence" in the government system.

The government offers free prolapse surgeries under a quota system. But Dr Phanindra Baral, the director of the Dhankuta district hospital, predicted that the entire eastern region of Nepal will only be allocated about 150 surgeries this year. His own hospital will not even be considered because it has no gynecologist and cannot conduct surgery. The hospital's records are also very weak. "There is a serious gap here," he agreed.



Gynecologist Aruna Pokhrel counsels Narmaya, 71, about prolapse at the CWN camp

CWN's health camps help to fill the gap by engaging hospitals from neighboring districts that have more resources than Dhankuta, and last week's camp was staffed by a team of young doctors from the Nobel Hospital in Biratnagar. In return, they gained valuable experience from working in the mountains of Dhankuta, which are very different from the flat plains where they normally work.

The Nobel hospital has also promised free surgeries if CWN can transport patients and provide counseling to allay the fears of women like Narmaya. After years of working with prolapse cases, Indira Thapa,

CWN's dynamic founder, described herself as more than ready.

Last week's camp offered other examples of CWN's value. A small army of CWN volunteers fanned out into the villages before the camp and held information sessions about prolapse. CWN also prepared files for most of those who attended the camp, as a first step towards creating medical records.

The question is whether such innovations can also strengthen the government services, which has to happen if village women are to be truly protected. This is certainly AP's hope and CWN has offered to hold a joint camp next year with the Dhankuta district hospital. This would allow nurses from health posts to work at the side of an experienced gynecologist, develop case files, and follow up with patients. Doctor Baral, the hospital director, welcomed the suggestion when he visited the CWN camp last week.



Partners in health: Indira Thapa from CWN at the recent health camp with nurse Tamang (left) and Dr Bharal from the district hospital

Many also feel that CWN's role as an intermediary between villagers and their government could become even more important as Nepal moves to a decentralized system under the new constitution - a change that will give more authority and resources to local officials.

AP's support for CWN's exciting program owes much to the 284 donors who have contributed \$33,146 to CWN through AP's appeals, and to four AP Peace Fellows who have put up with tough conditions in Dhankuta. This year's Fellow, [Rachel Petit](#), raised over \$2,500 for CWN and helped lay the groundwork for last week's camp. Rachel is currently interning at the UN

human rights center in Geneva.

* [Click here](#) to donate to CWN - and thank you!

* [Click here](#) to watch video of a 2015 CWN health camp

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