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NEW CAMPAIGN BY NEPALI WOMEN TARGETS SCOURGE OF UTERINE PROLAPSE

Caution: Some of the descriptions in this piece and related video may be upsetting



December 2, 2008, Kathmandu, Nepal: Birma Pariyar has lived for over twenty years with her uterus outside her body. She struggles to walk, sit, and work. The pain in her back and abdomen is so intense it sometimes feels like she is in labor. But until recently Ms Pariyar had never told anyone, not even her husband, about her condition.

Ms Pariyar is one of an estimated 600,000 women in Nepal suffering from uterine prolapse, a debilitating condition in which the muscles supporting the uterus weaken, causing it to descend into the vaginal canal. A third of the women need immediate hysterectomies.

The combination of pain and shame drives victims to desperation. "Sometimes they apply mud or pieces of flip-flops... they cut a piece of slipper and put it in the vagina just to hold their falling womb, because they have been suffering from so much pain," said Samita Pradhan, Secretary of the Uterine Prolapse Alliance (UPA), a network of women's organizations and partner of the [Advocacy Project \(AP\)](#). "There have been cases of women applying cement inside their vaginas just to hold their uterus."

After years of suffering in silence, women like Birma Pariyar are beginning to speak out. Their advocates, like the UPA, are also taking heart and seeking international support. This summer, AP sent two Peace Fellows, [Nicole Farkouh](#) and [Libby Abbott](#), to volunteer with the UPA. Ms Farkouh recently gave a briefing to experts in women's health and population at USAID in Washington.

The publicity is starting to have an effect. In September, the Nepali government pledged funding for 12,000 surgeries – a three-fold increase over last year. But much remains to be done, and the UPA is calling for a major campaign in Nepal and abroad.

In support, AP has posted new web pages that include profiles of twenty-two women, including Birma Pariyar and video interviews with Ms Pradhan and the two AP Fellows. The profiles are organized around ten risk factors that render women like Ms Pariyar vulnerable to prolapse.

Prolapse is a consequence of social exclusion, ignorance, and abusive cultural taboos. According to Ms Pradhan, women in Western Nepal are considered unclean during menstruation and after childbirth. Often, they are forced to live in a cowshed and denied dairy products and other nutritious food. Birma Pariyar herself married at the age of 15 and returned to work in the fields a week after giving birth, putting enormous strain on her uterus. She was also beaten by her husband.

“Women are loaded with heavy work even during pregnancy and immediately after child delivery,” said Ms Pradhan in the interview. “In addition, they do not have access to health facilities for safe delivery. (This) is not a mere medical problem. It is interwoven with many social causes, including gender discrimination. We need to change the whole patriarchal society.”

She added that many women who suffer from prolapse are ostracized. Some end up as servants in their former home if their husbands take on a new wife.

Little research has been done into the prevalence of prolapse because the condition is not considered life-threatening. But Ms Farkouh encountered one woman in a village whose uterus had rotted away and who later died in hospital, most likely from an infection caused by prolapse. Such cases underscore both the need for government intervention and more research.

At the same time, advocates also agree that prolapse should not take money away from other efforts to make motherhood safer and reduce maternal mortality. Instead, they hope to use prolapse to lobby for increased investment in women’s health. This would produce many benefits, including more focus on prolapse.

Meanwhile, much can be done at little or no expense. Women can be taught pelvic floor exercises which help to tighten the pelvic muscles. Local health centers can also provide inexpensive rubber pessary rings that hold the uterus in place and alleviate the painful symptoms.

The Uterine Prolapse Alliance, a sub-committee of the Safe Motherhood Federation of Nepal, comprises twenty Nepali organizations, and is now looking abroad to promote its message and pressure the Nepali government for change. The Advocacy Project has pledged to help by recruiting Peace Fellows, supporting the Alliance’s advocacy, and by organizing outreach events at US universities. AP welcomes offers of support.