Helping Restore Dignity to Women in Ethiopia
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Our Mission:

The Fistula Foundation is dedicated to the prevention and treatment of obstetric fistula through support of the Hamlin Fistula Hospitals in Ethiopia.
LETTER FROM DR. CATHERINE HAMLIN  
(CO-FOUNDER OF THE FISTULA HOSPITAL)

My Dear Friend of the Fistula Hospital,

How can I express adequately in a letter my thanks for your wonderful support for us here in Ethiopia. Your generous giving and your concern for our poor patients — young mothers so tragically and grievously injured in often their only experience of childbearing — is deeply heartening.

The greatest news recently is our expanding work, the planned building of five new mini-hospitals throughout Ethiopia. Each will be fully staffed with one to two trained nurses, ten to twelve nursing aides (former patients), and a gynecologist who has been trained at our main hospital in Addis Ababa. The onsite doctors will be able to do the simpler fistula repairs, leaving the difficult surgery for our visiting team or referral to Addis Ababa Fistula Hospital.

Our hearts are overflowing with gratitude and thankfulness to each of you who has been touched by the plight of young women and girls. Your continued support demonstrates to us here how much you care.

Please know that your gifts will restore thousands of young women to new life to again become citizens of the world.

We here in Ethiopia have the joy of seeing this transformation, but you away in your great country of America do not see this, you only believe in what we are doing, for this our gratitude knows no bounds.

All of us here at the Fistula Hospital send our warmest wishes, our thanks, and our love.

Dr. Catherine Hamlin
Dear Friends,

We are grateful for the generosity of caring people all over the world who help enable the Fistula Hospital in Addis Ababa to restore lives and dignity to thousands of destitute women with heartbreaking injuries resulting from obstructed labor.

2005 was a unique and inspiring year for the Hospital. It marked the beginning of an exciting new chapter in the organization's history: the opening of the first of five new mini-hospitals in the regions outside Ethiopia's capital city of Addis Ababa. This new hospital is in the city of Bahr Dar, in the Northwest of the country. As Dr. Hamlin has said, this new phase of growth represents the biggest expansion the Hospital has undertaken in over three decades.

Most exciting of all when all five of the new hospitals are up and running, likely by 2008, Dr. Hamlin and her team of doctors and staff will be able to treat approximately three times as many patients as they are now treating in the main facility in Addis alone. This dramatic expansion will enable many otherwise forgotten women to get the care they so desperately need.

None of this growth would be possible without the generous support of donors in the U.S. and abroad. The Hospital is able to treat all patients for free and to never turn a woman or girl away simply because of the generosity of others. The support of our donors is moving – most are giving to support the care of women whom they have never met, living in a place they most likely have not visited, and suffering from a condition they can barely imagine. We are all so very grateful for the miracle of transformation your generosity enables.

We look forward to the years ahead and reporting back to you about further progress as we work together to achieve Dr. Hamlin's dream of eradicating the scourge of fistula.

With warm regards

Kassy Kebede
Board Chair

Kate Grant
Executive Director
OVERVIEW

The Doctors Hamlin
In the late 1950s, two young dedicated obstetricians, Reginald and Catherine Hamlin, were living and working in Catherine’s home country, Australia. They were eager to seek out and aid the women who needed them most.

They got their chance in 1959, when they were called upon to go to Ethiopia and set up practice in a hospital in the capital city of Addis Ababa. When they arrived, Reginald and Catherine found a very poor country with almost no resources for expectant mothers. The Hamlins planned to open a midwifery school at the Princess Tshai Memorial Hospital and to stay for three years.

Pioneering Fistula Treatment
On the evening of their arrival, the Hamlins were doing their best to settle into their new home, when a fellow gynecologist came to visit. That doctor described obstetric fistula to the Hamlins, neither of whom had ever seen an obstetric fistula before. “To us they were an academic rarity,” Catherine recalls in her book, The Hospital by the River. Before the Hamlins came to Addis Ababa, there was no treatment available for fistula victims anywhere in the world. Most such injured women – and there were thousands – had suffered in silence for years.

Reginald and Catherine quickly began to learn everything they could about obstetric fistula, a condition that had all but disappeared in the United States in 1895, when the first fistula hospital closed its doors in New York. The Hamlins perfected a surgical technique to mend the injuries, while continuing to treat a broad range of obstetric cases.

The Founding of a Hospital
Through first hand experience, the Hamlins quickly became aware of the suffering endured by women with fistulas. Fistula victims are usually shunned so severely due to their odor that even other patients refuse to be near them. Reginald and Catherine knew the fistula women deserved a hospital of their own. The Hamlins worked for more than a decade to establish a fistula hospital, even through a military coup when most foreigners fled Ethiopia. Finally, in 1974, the Hamlins opened the doors of the Addis Ababa Fistula Hospital. It remains the only medical center in the world dedicated exclusively to fistula repair.

Saint Catherine
Reginald Hamlin worked diligently at the Fistula Hospital until his death in 1993. Catherine Hamlin, now eighty-two years old, can frequently be found in the operating room performing the delicate fistula repair surgery she pioneered more than 40 years ago. She has been nominated for a Nobel Peace Prize, and the list of her humanitarian awards is impressive.
OBSTETRIC FISTULA

ABOUT FISTULA:

The Most Devastating of All Childbirth Injuries
An obstetric fistula develops when blood supply to the tissues of the vagina and the bladder (and/or rectum) is cut off during prolonged obstructed labor. The tissues die, and a hole forms through which urine and/or feces pass uncontrollably. Women who develop fistulas are often abandoned by their husbands, rejected by their communities, and forced to live an isolated existence.

More Than Two Million Women Live with Fistula
Eradicated in western countries at the end of the 19th century when cesarean section became widely available, obstetric fistula continues to plague women throughout the developing world. The United Nations Population Fund (UNFPA) estimates the world’s population of fistula sufferers at more than two million women, with 100,000 new fistula cases each year. But, the international capacity to treat fistula remains at only 6,500 per year.

Nerve Damage and Psychological Trauma
The World Health Organization (WHO) has called fistula “the single most dramatic aftermath of neglected childbirth.” In addition to complete incontinence, a fistula victim may develop nerve damage to her lower extremities due to a multi-day labor in a squatting position. Fistula victims also suffer profound psychological trauma resulting from their utter loss of status and dignity.

“More than 75% of the population is living in the countryside, and struggle to make a living. The problems of maternal health and fistula are but one issue amongst many with which people struggle. The fistula hospital can play a role to bring hope to the lives of women and families that struggle in ways we could not imagine.”

– Mark Bennett CEO Hamlin Fistula Hospitals
A GLOBAL CENTER FOR EXCELLENCE

A Center for Specialized Training
From its inception, the Addis Ababa Fistula Hospital welcomed practicing obstetrician-gynecologists from around the world to witness and learn from its work. To date, over 100 surgeons from more than 25 countries including Chad, Nigeria, Kenya, Bangladesh, and Mozambique have trained at the Hospital in fistula repair. The Hospital’s training program is currently booked through 2008.

A Source of Inspiration
Though all of the surgeons who train at the Fistula Hospital see fistula patients in their local clinics and hospitals, in several cases, the training has inspired foreign surgeons to establish fistula repair centers or wards in countries where fistula treatment was previously unavailable.

Educating Ethiopian Medical Students
To further address the fistula crisis in Ethiopia, the Fistula Hospital has partnered with the Ministry of Health. New regulations require every obstetrician-gynecologist graduating from medical school in Ethiopia to spend two months at the Hospital learning basic fistula repair surgery techniques.

Leave No Woman Behind
Despite the Hospital’s high cure rate, each year the Hospital treats a few women whose injuries are too severe to ever be repaired. These women are fitted with surgical stomas and rely on urostomy or colostomy bags for the collection of bodily wastes. Such patients need ongoing medical attention and are therefore unable to return to their villages. In keeping with the Fistula Hospital’s dedication to holistic care, many of these women are invited to stay on at the Hospital and are given food, shelter and love. They are also trained to provide care to others. All of the Hospital’s thirty-nine nursing aides and several other members of the staff are former patients who require long-term care.
One of the remarkable features of the Addis Ababa Fistula Hospital is its degree of self-sufficiency. Thanks to a land grant by the government of Ethiopia in 2000 and a construction grant by the government of Australia, the Hospital produces its own food.

The donated 60 acres of rural land, outside of Addis Ababa, was developed into farmland and a self-sustaining village for up to 100 women requiring ongoing medical treatment.

Women with ongoing health needs may choose to live at the village. But, where possible, the women are encouraged to return to their home regions. To function successfully when they return home, they need to be self sufficient. To facilitate this they are taught basic literacy, how to manage their health condition, and practical employment skills.

Desta Mender is made up of ten bungalows, each accommodating ten women, a Cooking Tukul, a Meeting Tukul in the center, a Physiotherapy Unit, a Teaching Center, a small dam used for agriculture, and outlying farm buildings. A doctor, nurse or physiotherapist visits to the village every day to care for the women.

Overcrowding at the Hospital has prompted another use for the village. Patients who need weeks, and sometimes months, of physical therapy before they are fit for surgery stay at Desta Mender.

Rotary International made a grant of US$100,000 to commence construction of the village in 2003. The balance of the funding for the project was provided by generous gifts from Australian donors. During construction of Desta Mender the costs of fuel, cement, and labor rose dramatically prompting the Fistula Foundation to provide funds to aid in the completion of the village. Originally, the Fistula Foundation contributed to completion of the water system and furnishings for the bungalows.
REACHING WOMEN IN RURAL ETHIOPIA THROUGH THE BUILDING OF FIVE NEW MINI-HOSPITALS.

For many years, the doctors and nurses of the Fistula Hospital have been traveling to regional hospitals in Ethiopia to operate on fistula victims who cannot make the journey to Addis Ababa. In order to address the needs of the many women in the provinces who require fistula care and to prevent fistulas, the Fistula Hospital is opening permanent fistula mini-hospitals in five strategic locations in Ethiopia (Bahir Dar, Mekele, Harrar, Yirgalem, and Metu).

Each mini-hospital will include a twenty-bed ward, an operating theatre, educational and administrative facilities, and other essential plant facilities. The mini-hospitals will be built adjacent to existing regional hospitals and will offer a discrete entrance for fistula patients and high-risk women who might otherwise be turned away at the main hospital gates.

The purpose of the mini-hospitals is threefold:

**Treatment** — A resident obstetrician-gynecologist will provide specialized fistula repair surgery to local women who cannot make the trip to Addis Ababa. A surgical team from the main Fistula Hospital will visit periodically to treat those women whose fistulas are too severe for the resident surgeon to repair.

**Prevention** — High-quality emergency obstetric care will be available free-of-charge to women at high risk of obstructed labor. Women at high risk include those with prior fistula repair surgeries and women who are small in stature, young, or disabled.

**Education** — Reproductive health education programs using videos, radio broadcasts, and live theatrical performances will be brought to the communities surrounding the outreach sites. In addition, the mini-hospitals will operate as hubs for Traditional Birth Attendants and other health professionals to educate the local populations about the risks of unattended childbirth.

“If you are a woman born in the United States, You are automatically one of the luckiest women in the world.”

– OPRAH WINFREY
FUNDRAISING PROGRAMS

Supporters Help Women Half-way Around the World:
The Foundation is grateful for the support from donors and volunteers all over the United States. For the Foundation, no donation of time or money goes unappreciated. To help those who want to help the Hospital, the Foundation developed several separate volunteer and giving programs. The generosity of volunteers and donors in literally all fifty states powers these programs.

Circle of Friends:
Generous groups and individuals who want to help support the Hamlin Fistula Hospitals receive help from the Foundation’s Circle of Friends program.

The Foundation provides access to specialized materials and tips to help volunteers ensure their events are a success. One of the most successful of these events in 2005 was the “Girls Night Out” sponsored by a group of students at the Spence School in New York. Other fundraisers have been held by a number of church and women’s groups all over the country.

This form of volunteer fundraising helps ensure that the Hamlin Fistula Hospitals continue to restore health and dignity to women devastated by fistula-for as long as there is need.

Tesfa Ineste:
With five mini-hospitals being built across Ethiopia, women will not have to travel as far to receive treatment. Tesfa Ineste, an Amharic phrase meaning “let’s give them hope,” is the Foundation’s campaign within the Ethiopian-American community to help fund the Harrar Hamlin Mini Fistula Hospital in the city of Harrar. The Tesfa Ineste program is led by National Chair and Foundation Board Member, Abaynesh Asrat, and is supported by regional committees in New York, District of Columbia, Los Angeles, and the San Francisco Bay Area.

Love-A-Sister:
The Love-A-Sister program provides donors with a way to help ensure that women suffering from obstetric fistula will always be able to obtain free, safe surgery to repair their devastating injuries. A $450 contribution – spread out over the course of one year or paid all at once – is enough to pay for surgery and postoperative care for one of the thousands of women who will continue to seek care at the Hamlin Fistula Hospitals. While $450 is not enough for one night’s stay in most hospitals in the United States, it is enough for The Hamlin Fistula Hospitals to provide one woman with restorative surgery, postoperative care, and classes in health and basic literacy while she recuperates. It’s even enough to provide her with a new dress and bus fare home.
To the Board of Trustees of
The Fistula Foundation

We have audited the accompanying statements of financial position of The Fistula Foundation (a California nonprofit public benefit corporation) as of December 31, 2005 and 2004, and the related statements of activities, cash flows, and functional expenses for the years then ended. These financial statements are the responsibility of the Foundation’s management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The Fistula Foundation as of December 31, 2005 and 2004, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

April 27, 2006
FINANCIALS

The Fistula Foundation
Statement of Activities
For the year ending December 31, 2005

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<td>Change in net assets</td>
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<td><strong>Net assets at end of year</strong></td>
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FINANCIALS

Revenue and Support

- Other Income
- Grants
- Contributions
- Net Investment Income

Expenses

- Program Services
- Management and General
- Fundraising Expense

The Fistula Foundation is proud to be in compliance with all Better Business Bureau Standards of Charity Accountability.
BOARD OF DIRECTORS

Abaynesh Asrat
Nation to Nation Networking Inc.
New York, New York

Ato Tekalign Gedamu
Director, (Honorary)
Trustee of the Addis Ababa Fistula Hospital
Addis Ababa, Ethiopia

Kate Grant
Ex-Officio Board Member
Fistula Foundation
Santa Clara, California

Deborah Harris
World Vision U.S.
(Board Member)
Charlotte, North Carolina

Cleopatra Kiros
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Mesa United Way
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Columbia University,
New York, New York

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Stanford University
School of Medicine and Stanford Hospital
Stanford, California

Mary Tadesse
Former Ethiopian Vice-Minister of Education and Culture
Fairfax, Virginia

Robert Tessler, Esq.
Toeroff, Tessler & Schochet LLP
New York, New York

Whitney Tilson
Tilson Capital Partners
New York, New York

Larry William, MD
Pacific Partners Management Services, Inc.
Foster City, California

Kassahun Kebede
PANTON Capital Group
New York, New York

CHAIRMAN
The Fistula Foundation could not do the work of supporting fistula treatment and prevention without the participation and support of our Congressional, Corporate, Nonprofit and Media partners. These organizations have joined in the effort to treat and prevent fistula in Ethiopia by donating necessary medical supplies, sharing knowledge and heightening awareness. We are honored to collaborate with the following organizations.
THANK YOU

The Fistula Foundation would like to thank those who have helped make a difference by sharing their time and efforts to make us what we are today.

A Special Thank You to Liya and Kassy Kebede, for paying for the printing of this report, and to Dr. Larry William, whose photographs are featured throughout the report.

Layout and Design by Terry Rodriguez and Kathy Noverr
Writing and Editing by Kate Grant
Proofreading by Jessica Owley Lippmann