Addressing the Mental Health Needs of Women with Obstetric Fistula

Melissa Watt, Ph.D.
Assistant Professor of Global Health
Duke Global Health Institute
melissa.watt@duke.edu
Giving birth can be positive and fulfilling… or it can be associated with suffering, ill health or even death.

Every day, approximately 800 women die from preventable causes related to pregnancy and childbirth. Even more develop maternal morbidities that have profound impacts.
Obstetric fistula
SOFT – Studying Obstetric Fistula & Trauma
Funded by Duke Global Health Institute

- Women with fistulae
  - Baseline Measures
    (Subset of Qualitative, n = 45)
    n = 55
  - Follow-up
    3 months post-discharge
    n = 25

- Women without fistula
  - Baseline Measures
    n = 55
Elevated Psychological Distress

Community feedback meeting
August 2012
Study aims and approach

1. Develop a structured intervention

2. Assess the feasibility & acceptability of the intervention

3. Assess the efficacy of the intervention on outcomes of mental health outcomes

PHASE 1: Intervention development

PHASE 2: Pilot test with 60 women

R21-HD-073681 (PI, Watt)
## Intervention development (months 1-6)

<table>
<thead>
<tr>
<th><strong>PRE-SURGERY</strong></th>
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<tr>
<td>1-Personal targets for treatment and orientation to therapy</td>
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<td>2-Creating a new story about your fistula</td>
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<table>
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<th><strong>POST-SURGERY</strong></th>
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<tr>
<td>3-Loss, grief and shame</td>
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<tr>
<td>4-Specific strategies for coping</td>
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<td>5-Social relationships: How they can help and hurt</td>
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<td>6-Planning for the future: Realism and hope</td>
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Healing the Emotional Impact of Fistula

A Cognitive-Behavioral Intervention for Coping with Obstetric Fistula

Duke University
Duke Global Health Institute

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Lessons learned

- Importance of simplifying content
- Emphasis on social relationships and identity
- Saliency of religious concepts
- Tailoring to clinical setting / opportunities
Pilot test (months 7-24)

Recruit (n=60) -> Baseline

Intervention: 6 sessions
Counseling SoC

Post 3-mo f/u
Progress & lessons learned

- 49 women recruited and enrolled
- Good follow-up rate
- Intervention is feasible and acceptable
- “Facilitator effect” – how to distinguish content vs. warmth / empathy?
- Must show impact above and beyond:
  - Surgery
  - Study participation
- Even if we don’t see a “significant impact” - can we make a case for the importance of a psycho-social intervention?
Next steps.....

(Written permission granted for photography)