

Agnes*

Abandoned by her father at birth, Agnes, from south west Tanzania, has lived for 15 years on the outside of her community simply because of the way she looked. Born with a cleft lip, her father could not bear to bring up a child who did not look 'normal' so he left. Agnes's mother did try to get treatment for her daughter but nobody could tell her where to go so she gave up. She later remarried and bore another four children and, assuming it would not be possible for a child like Agnes to go to school, it was left to the young girl to look after her younger siblings.

Agnes explains the pain and anguish of living as a laughing stock in society as a result of her uncorrected cleft lip; "People would laugh at my face and other children did not want to play with me."

Then, at the age of fourteen, the young girl was sent to Dar es Salaam in search of work as a house girl to support the family back home. While

attending a church service in the city, a member of the congregation approached her and gave her CCBRT's contact address. He assured her that she would get help and, with surgery, the opportunity for a better life.

Agnes had surgery to correct the cleft lip shortly afterwards. The transformation is dramatic. "I am very happy with the way I look now. I don't think I will be afraid anymore and I can look forward to a future when I am not laughed at. My dream is to go to school and get an education like my brothers and sisters and maybe one day start a business selling things at the market. I would have been too frightened to think of that before."

But her immediate wish is to go back home and show her new face to her mother. "She would hardly be able to recognise me; I think she would be happy and proud of me now."



Anna*

The fans whirr overhead on this hot day in Dar es Salaam as Anna lies on her hospital bed nursing her one year old. It's not the first time Anna, 25, has been to CCBRT Disability Hospital and she is comfortable being here, safe in the knowledge that the nursing staff will be kind to her.

In 2005, Anna went into labour with her first child. She was living at her mother's house after her boyfriend left her when she fell pregnant. After two days of contractions she was forced to walk for two hours to the nearest dispensary. The family lives in a rural area and there was no car available to take her to medical help.

"I was crying with pain at this time," says Anna. "There was nothing to take away the pain and I became very afraid." At the dispensary they said they couldn't help her – by now she had eclampsia – but they allowed her to travel in their supplies vehicle to the district hospital.

Once she arrived there, the staff said she was not ready to give birth so they waited one day. By then, Anna was unconscious and the baby was delivered by vacuum extraction; stillborn.

"I never saw my son," recalls Anna as she thinks back to that frightening time. "By the time I woke up seven days later, I was unable to walk and was in unbearable pain. I just couldn't stop crying." Her catheter was removed after 10 days but without it, Anna found that urine and stools were passing through her vagina and she had no control over the flow.

The prolonged labour had caused a hole to appear between the bladder and the vagina (Vesico-Vaginal Fistula - VVF) and the rectum and the vagina (Recto-Vaginal Fistula - RVF). Occasionally, this debilitating condition can lead to infections of the bladder and the kidneys and can be life threatening. Anna was told to go to a government hospital in



Dar es Salaam for surgery but with no money for treatment, or for transport and fear of the long journey, Anna just went home.

“My mother looked after me at home but my other relatives and friends stopped coming to see me. They said there was a bad smell and they were ashamed to be associated with me. I couldn’t even help the family in fields. We are farmers so we depend on the food we grow. For many months I stayed like this. Just inside the house. It was a horrible time.”

CCBRT’s mobile outreach unit was alerted to Anna’s situation when they were visiting the area. Having reassured her that her condition could be treated, they gave her money for transport to CCBRT Disability Hospital and she soon made her way there.

After her three week treatment to repair the fistulae, one of the CCBRT doctors gave her some ‘rules for life’, one of which is the importance of having a caesarean section if she was ever to get pregnant again. “In 2008 I did fall pregnant and although I was very frightened in case the problem returned, I remembered what CCBRT told me so I made sure I had a caesarean section.”

Following the birth, Anna returned to CCBRT to be treated for severe stress incontinence and Anna is now completely dry. “It is a good feeling,” Anna laughs, “I don’t want to go back to those days after my first child was born. Now I have a healthy daughter and everything is good. I am so grateful for the kindness I found here at CCBRT.”

Ken*

When Ken was born in hospital in the south of Tanzania, nobody noticed that something was wrong. Even his own mother, 26 year old Rose, who developed measles when she was seven months pregnant, did not spot the fact that her newborn baby had a problem with his eyes. They were sent home like any other mother and baby, to be welcomed by Rose’s husband and her two other children.

It was only a month later, when Rose saw something white in her baby boy’s eyes, that she asked her mother to take a look. The first doctor said that they should wait six months before doing anything; that maybe the condition would improve. No one mentioned cataract. It was the second doctor that they saw, after months of waiting, who quickly referred Ken to CCBRT.



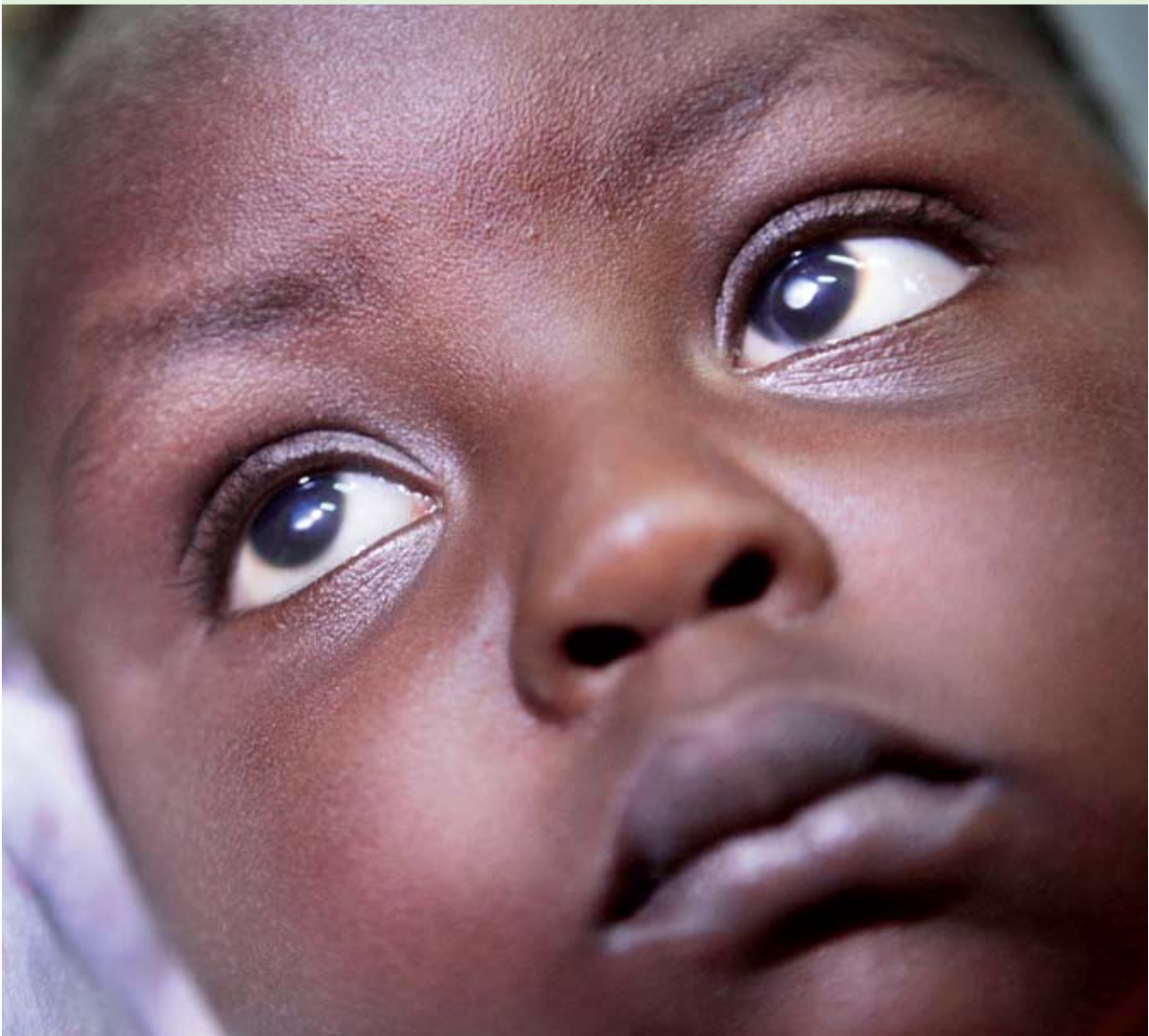
Rose and her husband were afraid that their child may never see normally, and experienced the pain of having a child who is 'different'. Members of the local community had stared at Ken, but no one had ever suggested that they seek help for the baby who seemed to be always 'searching for the light'. Once Rose's husband had gathered the money needed for the journey to Dar es Salaam, mother and baby, now seven months old, left the family to stay with a brother in the city.

A day after the first operation at CCBRT for his congenital cataract, which affected both eyes, Ken is already showing signs of improvement. His right eye has been treated first. He is a healthy and strong looking baby, and appears to be alert and interested in the world. Rose was amazed, if a little doubtful, when the nurses in the eye department said that he would be able to see like any other normal child.

But now, sitting on the bed nursing her boy, she is starting to believe it. This morning, she explains, he opened his eyes properly and seemed to almost focus. She is excited about what will happen once the left eye has been operated on.

Free treatment for Ken's congenital cataract has meant that the family does not need to worry too much about costs. Without it, Rose and her husband may not have been able to afford it or would have made big sacrifices at home in order to pay. Rose smiles when asked what she wishes for her baby's future.

'I'd like him to be a pastor..... or a lawyer,' she enthuses. Now, because of the treatment that Ken has received at CCBRT, Rose has every reason to think of a bright, successful future for her son.



Amina*

The youngest of four children, Amina lives with her mother, Asha, in southern Tanzania. “I was shocked when I first saw my baby,” Asha recalls, “And as word spread that my baby had been born with no legs and only one arm, the neighbours and my family came round to see if the rumours were true.”

When Asha recovered from the delivery, she took her newborn daughter to the nearest hospital. “The doctors told me that there was nothing that they could do for Amina. It was the will of God. I just had to except her and treat her like my other children.”

Over 80 per cent of people with disabilities in the developing world live below the poverty line and bringing up a child with a disability in Tanzania has been very hard for Asha: “My husband fled after seeing Amina for the first time. He couldn’t deal with having a disabled child. Now I’m taking care for Amina on my own.



We have no real income, and survive from growing food in the small garden around our house. My family members are very poor so they can't help us. But I'm lucky because Amina is a very happy child, she lifts my mood."

Amina was recently referred by a local hospital to CCBRT where two prosthetic limbs have been made and carefully fitted for Amina. Asha has had to contribute just \$15 for her daughter's treatment, the rest being subsidized by CCBRT.

When Asha sees her daughter standing straight, she can hardly believe it. "I thank God for this. I never thought it would be possible to see Amina walk properly like other children. I hope one day she can go to school." Amina will be at CCBRT for many weeks of training to ensure she can walk comfortably and confidently. With only one arm, maintaining balance is especially hard so an upper limb prosthesis will be fitted later. In time, the young girl should be able to walk confidently amongst her community, go to school and live a full and independent life.

