## **ABSTRACT**

Despite of increased attention on maternal health in recent decades, the disability and suffering of obstetric fistula patients remains a neglected issue in global health. Most instructive in this respect, is the continuous leakage of urine as well as the physical, emotional and social suffering associated with it, which has a profound impact on women and men's livelihoods. Considering the suffering of families associated with this disease, it was found imperative to evaluate the prevalence of obstetric fistula on women of Kaptembwa Nakuru, and appraise the impact on the well being of women and how their experiences have shaped their identities and families. The study was conducted using cross sectional study with qualitative and quantitative components to explore the prevalence, experiences and impact of obstetric fistula. Grounded Theory was used to investigate the prevalence of obstetric fistula in kaptembwa and explore how the condition has impacted on the affected women and their families. Obstetric fistula prevails amongst women aged between 25 -39 years. The injury may occur at either the first (28%), second (23.9%), third (19.7%) or fourth (28 %) pregnancies. The difficulty of assessing the exact numbers of women affected with obstetric fistula was attributed to it being an embarrassing and humiliating medical condition in our communities, which leads the affected women into silent isolation. Obstetric fistula has far reaching effects on physical, social, economic and psychological impact on affected women, their husbands, children and friends. The foul odor emanating from affected women leads to humiliation; sever social-cultural stigmatization and thus, inability to perform their gender roles. Hindrance from participating in gainful income activities has led them into despair and begging. In order to combat this debilitating disease, community education that informs on the potentially risks of obstetric fistula particularly amongst people residing in rural areas and informal settlements areas is a must. Essential information includes danger signs during delivery and rapid access to caesarean section delivery for cases of obstructed delivery. Access to affordable fistula repair must also be provided in the County health centers.