



A Theoretical Framework for Analysing Surgical and Quality-of-Life Outcomes in Obstetric Fistula Repair: A Zambian Case Study from Luapula Province

A Theoretical Framework
for Analysing Surgical

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Abstract

Obstetric fistula remains a severe maternal morbidity in sub-Saharan Africa, with profound physical and psychosocial consequences. In Zambia, rural areas such as Luapula Province face limited access to repair surgery, and post-operative outcomes are inadequately documented. A theoretical framework is needed to analyse both surgical success and subsequent quality-of-life improvements. This article proposes an integrated theoretical framework for analysing outcomes after obstetric fistula repair. Its objective is to synthesise biomedical and psychosocial models to evaluate surgical closure and holistic recovery, using repair services at Mansa General Hospital as a case study. Employing a conceptual methodology, this theoretical article critically reviews and integrates existing theories from surgical outcomes research, disability studies, and social quality-of-life models. The framework is contextualised within the healthcare setting and socio-cultural environment of Luapula Province. Key insights: The framework posits that successful surgical closure, while fundamental, is an insufficient sole measure of outcome. Key psychosocial factors, such as community reintegration and self-perception, may improve significantly even without complete continence. A central theme is the critical interplay between clinical success and social determinants of health in defining recovery. The integrated framework provides a more comprehensive lens for evaluating obstetric fistula repair, moving beyond a binary metric. It underscores the necessity of combining clinical and psychosocial support services to achieve meaningful, long-term recovery for women in resource-limited settings. Programme evaluators and clinicians should adopt this multidimensional framework for assessing fistula repair services. Future research should apply this model empirically to track longitudinal outcomes. Health policy should prioritise funding for integrated post-operative care programmes that address mental health and social reintegration. obstetric fistula, theoretical framework, surgical outcomes, quality of life, Zambia, psychosocial reintegration. This work contributes a novel, integrated

theoretical framework designed to guide the comprehensive evaluation of obstetric fistula repair programmes, emphasising the confluence of clinical and psychosocial recovery in sub-Saharan African contexts.

Keywords: *Obstetric fistula, Surgical outcomes, Quality of life, Sub-Saharan Africa, Case study, Maternal morbidity, Patient-reported outcomes*

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