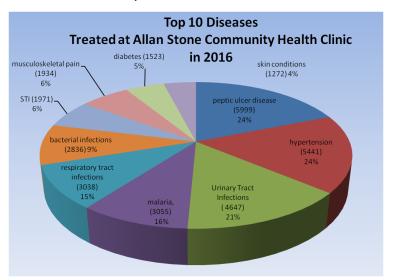
Soft Power Health Annual Report 2016

Soft Power Health had its busiest year to date both in the number of patients treated at the Clinic and in the numbers of people reached through our health education outreach programs. Close to 50,000 people received services through the Clinic and outreach programs. Overall, we treated 33,326 patients at the Clinic and referred 1,160 patients to other hospitals for surgeries, cancer treatment, and more sophisticated testing and treatment. Through health education outreach programs for malaria, family planning, malnutrition, domestic violence, physical therapy, and organic gardening, we reached another 14,915 people. This brings our combined impact to 48,281 people who have benefitted from our services in 2016. This is up significantly from 2015, in which we saw 22,000 patients in the Clinic.

ALLAN STONE COMMUNITY HEALTH CLINIC – Dr. Charles, Clinic Director

As mentioned above, the Clinic treated 33,323 patients referred another 1,160 patients on for other more advanced medical services. This year approximately 72% (24,043) of our patients were new attendees and 28% (9,280) were returning patients. The top 10 diseases we treated at the Clinic were, in descending order: peptic ulcer disease (5999); hypertension (5441); urinary tract infections (4647); malaria (3055); respiratory infections, tract including



pneumonia (3038); bacterial infections (2836); sexually transmitted infections (1971); musculoskeletal pain (1934); diabetes (1523); and skin conditions (1272).

Interestingly, hypertension was the second most common disease we treated this year, down from number one last year, and malaria maintained its 4th place position. Diabetes made it into the top 10, and both TB and HIV were notably absent from the top 10 list.

With the increased numbers of patients at the Clinic this year, we needed to hire another full-time medical doctor. Dr. Henry has proved to be an excellent doctor and a real help to the team, who routinely see over 100 patients per day. We also hired two new nurses this year, Esther Jane and Aisha, both of whom work at the Clinic and in outreach.

This year we received a much-needed donation of a complete blood count (CBC) machine to our lab. With our new CBC machine we can now do more comprehensive blood work on our patients, which also allows us to provide them with better care.



Lab tech Ghandi making good use of the new CBC machine

In addition, this year we implemented a successful and ongoing triage protocol to ensure that our sickest patients, who cannot advocate for themselves, (i.e., children aged 6 months to 5 years) get prompt medical attention. As mentioned previously, this can be not only a life improving intervention but a life saving one as well: young children go into decline very quickly when they are sick, and can die in no time. This also helps us identify the most malnourished children, with very precise guidelines. The addition of the triage team of Juliana and Sandra, has been a very important improvement in services for our patients.

Finally, we sold 582 Little Suns Solar Lamps at the Clinic this year. Despite the construction of hydro-electric power dams on the Nile in our area, the local people most in need of power cannot afford to buy it. Also, the vast majority of the power is exported to surrounding countries. Because of this, local people still need light, and the Little Suns are a perfect solution!

MOTHER AND CHILD WELLNESS CENTER – Nurse Mary in charge; Esther and Irene in the Kitchen for HEM education and dispensing

In 2016, we administered 1,964 rounds of vaccinations at the Mother and Child Wellness Center. These vaccinations are often life-saving for those who receive them. If you have ever seen a patient with tetanus or measles, it is easy to understand what important tools vaccines are. They are life-improving and life-saving interventions. Many Ugandans still do not have easy access to vaccines, so we also use our family planning outreach programs as a way to provide them. Children in particular need vaccinations, and we aim to reach as many in need as we can.



Our triage team of Sandra and Juliana
Photo by: Hayley Buffman

Another important intervention we offer at the Wellness Center is high energy milk (HEM). For malnourished and severely malnourished infants, children and adults, this simple intervention can be life-saving. In 2016, we provided 2,064 courses of HEM for malnourished patients. To improve our treatment of malnutrition and to improve our overall patient care, we worked with Mt. Sinai Global Health Pediatric residents to develop much more specific and effective guidelines for triaging our pediatric patients. This led to the

identification of more malnourished patients and increased treatment with HEM. Very often these patients have several health issues, such as malaria, that present at the same time as malnutrition, which makes them more likely to get a lot worse very quickly. These patients are also too young to advocate for themselves, so having a protocol in place for the triage team makes a huge difference in how quickly they get care. It also noticeably improves their outcomes.

Family Planning is also offered at the Mother and Child Wellness Center. Every day that the Clinic is open, we offer all methods of family planning: from short-term to long-term. Also, on our quarterly collaborative days with Marie Stopes, we offer permanent methods such as tubal ligation and vasectomy. 15% of the total family planning access we provide occurs at the Mother and Child Wellness Center. The other 85% occurs in the field through outreaches. This year we provided family planning (intermediate-term to permanent methods) to 744 people at the Wellness Center at the Clinic.

PHYSICAL THERAPY – Stephen Kato

Stephen Kato, Soft Power Health's physical therapist, worked with 1,615 patients in 2016, both at the Clinic and through his weekly outreach in Lukolo village. Overall, Stephen reached 291 people in outreach this past year (that is, approximately 18% of his patients) and the remaining 82% of patients were treated at the Clinic. Approximately 25% of Stephen's patients were new attendees while the remaining 75% were former patients. The top physical therapy problems Stephen treated in 2016 were, in descending order: cerebral palsy, lower back pain, knee pain, muscular dystrophy, hydrocephalus, and post stroke complications.

In addition to the regular physical therapy services offered at the Clinic and in outreach, Stephen coordinated two wheelchair distributions in collaboration with the Walkabout Foundation. At these events, a total of 469 wheelchairs and hand cycles were distributed to disabled people in need. Due to the increased demand for physical therapy services and Stephen's incredibly busy schedule, we have decided to hire another physical therapist in 2017 to help lighten his load and to meet the demand for these very necessary and neglected medical services.

DENTAL SERVICES - Dr. Paul

Dr. Paul continued to provide dental services for patients at the Clinic and to educate local communities about dental health. Education about dental health and hygiene, as well as access to toothbrushes and tooth paste, remain luxuries in Uganda. Through his dental program, Dr. Paul treated 462 patients in 2016. The most common problems he treated were periodontal disease, tooth extractions, and dental abscesses. In partnership with the family planning outreach, Dr. Paul has reached many people in need of his services.

MALNUTRITION EDUCATION OUTREACH & FOLLOW UP – Nurses James, Annet, Margaret, and local educator, Naigaga

This year, the malnutrition education outreach program served 3,202 people in 47 villages in our home district of Jinja. The malnutrition team made 528 follow-up visits to attendees of the outreaches to measure the impact of education. At the outreaches, 4,133 doses of Albendazole were distributed to children for deworming purposes. Additionally, thanks to generous donations from Vitamin Angels, vitamin A and prenatal vitamins were also distributed to those in need. The uptake for malnutrition education is increasing each year and based on what we see at the clinic and in the field, the need for this health education is incredibly important.

MALARIA EDUCATION & PREVENTION PROGRAM – Sarah Itanda



Creative misuse of government-distributed free mosquito nets.

The end of 2016 marks 13 years of Soft Power Health's malaria education and prevention program providing malaria education, prevention in the form of subsidized mosquito net sales, and follow-up visits to thousands of communities in rural Uganda. Between these education sessions/net sales and the Clinic, Soft Power Health has sold over 80,000 mosquito nets, and followed up on 20,000 net sales.

In 2016 alone, Sarah and the malaria team provided malaria education sessions/net sales in 46 villages throughout our home

district of Jinja and in neighboring districts of Mayuge, Kaliro, and Luuka. At outreach education sessions and at the Clinic, 4,698 nets were sold this year. In addition, we made 853 follow-up visits to net purchasers' homes in 31 villages to assess correct net usage, knowledge retention and self-reported cases of malaria. Analysis of our follow-up data suggests that 65%-70% of people who purchase our nets use them correctly and report less malaria episodes in their families. This is a vast improvement over the local baseline in our home sub-county of Budonodo, where net ownership remains at 27% overall despite, or because of, the mass free distributions of nets that have gone on over a number of years.

We continue to observe that net possession does not mean correct usage. This is shown clearly in our baseline mosquito net survey conducted with the help of Mt. Sinai Global Health Students. Since the Ugandan government's free mosquito net distributions began, recipients who failed to receive education about malaria and correct use of mosquito nets and/or were given the nets gratis, developed very creative alternative uses of nets, none of which prevent malaria. We have been documenting these incorrect uses for a number of years now. Despite the free distributions, our malaria team still finds communities who want education about malaria transmission and correct mosquito net use, and who wish to purchase nets. Malaria remains the biggest killer disease in Uganda and people continue to seek out our services, so we continue to do our best to meet this need.

FAMILY PLANNING EDUCATION AND OUTREACH PROGRAM - All of the Nurses!

In 2016, between the Clinic, the Mother and Child Wellness Center, and our ongoing outreach in 38 villages, Soft Power Health provided intermediate, long-term, or permanent methods of family planning to 5,210 people. This year marked the 10th anniversary of the beginning of our family planning outreach program, and the uptake for these services remains high. The methods of family planning we offer both at the Clinic and in outreach include intermediate-term methods, such as three-month injections of Depo-Provera and birth control pills, and long-term methods such as IUDs and implants. Short term methods, including both male and female condoms, are also available.

All family planning outreaches and services at the Clinic include extensive education about conception and contraception as well as addressing concerns and myths about side effects of different family planning methods. Women are screened and educated before any intermediate, long term or permanent methods are administered. All education sessions are open to both men and women, in recognition of the importance of including and educating all people interested in family planning.

2016 marked the 6th year partnering with Marie Stopes who visits us quarterly to provide permanent methods of family planning to those wanting that service. This includes both men and women. We mobilize extensively in the communities we serve prior to the Marie Stopes collaborative family planning days to insure as many people as possible are informed about these events and the services offered. We already have our dates with them planned for 2017.

Marie Stopes performed 17 tubal ligations and 2 vasectomies at the Mother and Child Wellness Center, and placed 50 long-term birth control implants. All family planning services, apart from the permanent methods, are available throughout the year at the Mother and Child Wellness Center in the Clinic. Our nurses have been well trained to offer all non-permanent methods to people in need. This includes injections of Depo-Provera, birth control pills, IUDs, and implants. Both male and female condoms are available at the Clinic and in outreach as well. This year, we distributed a total of 26,001 male condoms between the Clinic and outreach (the vast majority being in outreach) as well as 342 female condoms. In addition, 21,685 doses of Albendazole were administered to children during the family planning outreaches. As previously mentioned, regular deworming with Albendazole has shown to improve cognitive function in school age kids as well help their overall growth and development.

DOMESTIC VIOLENCE - Florence

Domestic violence counseling is a new service that we added to our programming at Soft Power Health. After a quiet start, the counseling services and information that are provided have become very popular, and we have added additional days to the schedule for home visits and follow up. In 2016, Florence, our domestic violence counselor, worked with 1,353 people on all



Florence counsels a woman on domestic violence.

areas of domestic violence. In addition, she made 568 follow up visits to people needing her services. Through the Clinic and outreach, she visited 40 villages to counsel people.

Florence counsels at Soft Power Health 1 day per week and accompanies the family planning outreach 1 day per week, as well as visiting people at home 1-2 days per week. The most common issues people face, in descending order, are: emotional violence, economic violence, sexual abuse, and child abuse. Uganda has very

strict laws about domestic violence but educating people about their rights and also ensuring that people's rights are protected is challenging in such a resource-poor setting. Florence has

done an excellent job helping people with domestic violence issues, and we are discovering that we are just scratching the surface of this problem.

DIG – Organic Gardening Outreach Program – Patrick, Paul, Livingstone, Jennifer, Simon, Peter

The Development in Gardening (DIG) organic gardening program continues to work with families who have severely malnourished children and in communities where malnutrition is an ongoing problem. Identifying those most in need and helping them get the education necessary to have productive and healthy gardens, which can be both a food supply and a source of income, is an extremely important part of the work Soft Power Health does.

The DIG team of gardeners, headed by Patrick, nurtured 61 family gardens this year and initiated 2 demonstration gardens in villages in Budondo and Butagaya sub-counties. Once the gardens and gardeners have a good understanding of DIG techniques and can demonstrate their ability to manage their gardens productively, they are "graduated" and new gardens are taken on.

In 2016, we experimented with creating 2 community demonstration gardens in areas where the dry season had impacted food supply. Two separate maize gardens were created through cooperative community efforts; that is, gardeners shared equally in the donation of the land where the gardens would be planted, the care of the gardens, and the harvest. The idea was to have the gardens produce enough of the staple crop, maize, to provide all members with enough food to tide them over until the next growing season. Ideally, surplus would be created to be sold to generate enough money to buy seeds for the next growing season. The demonstration gardens produced 692 Kilograms of maize – a very impressive harvest. With this positive result, the DIG team is guiding the cooperative members to continue so that this will become a regular practice in this community.

Our own DIG garden next door to the Clinic was very productive in 2016. The variety of crops included: beans, soybeans, maize, *matoke*, kale, pumpkins, lettuce, pineapples, tomatoes, amaranth, basil, arugula, and eggplant. We continue to use the garden both to help supply the lunchtime meal for all staff and to instruct interested gardeners in DIG organic gardening techniques.

Thank you so much for your ongoing and continued support of our work in Uganda! We could not do this without you! Every donation makes a difference!

Best Wishes,

Jessie Stone