

# Soft Power Health

1st Quarter Update  
2018

## What's New:

The first quarter of 2018 was busy, busy, busy! Not only did Soft Power Health have a number of volunteers and visitors, we also saw the implementation and completion of several important projects thanks to fantastic donations and support. So, thank you, thank you, thank you!

As has been our good fortune for the last 10+ years, we continued our collaboration with Mt Sinai's Global Health Program and hosted 2 pediatric global health residents for 5 weeks in January and February. Dr. Ashley and Dr. Jen worked on analyzing the data from our triage and High Energy Milk program at the Clinic to determine how effective our interventions have been for this group of patients, as well as where we could improve. This is hugely helpful in our ongoing efforts to improve quality of care for our patients, including patient education and prevention efforts, in order to help patients live healthier lives. Dr. Roberto Posada, the Pediatric Global Health Program director from Mt. Sinai, also came to visit for a week in February. It was great to share the many aspects of SPH's work both in the clinic and in the field with him. Dr. Roberto even did us the wonderful service of seeing patients when we were short handed. It was a terrific learning opportunity to see Dr. Roberto in action too!



Dr. Roberto helping out on a very busy day!

We also had a volunteer Masters of Public Health student, Vanessa, from McGill University in Canada with us for 3 months, starting in February. Vanessa worked on a number of projects with us and was very helpful. She assisted the malaria education team with data collection and analysis, working closely with Sarah Muwanguzi, our malaria program head. Vanessa also continued work on a hypertension (i.e., high blood pressure) study we initiated in November at the Clinic. We are trying to understand what the baseline of hypertension is really like in our local communities, since it is among the most common diseases we treat. In addition, Vanessa worked on assembling a book of all our neediest patients (both health-wise and economically) so we can keep better track of them. All of these projects are beneficial to our day to day work, as well as for the future.

Finally, Dr. Burgess Norgaard, a kayaking doctor, came to volunteer and to visit the Nile before Isimba dam is completed. We were so happy to meet him and to have his help!



Laboratory staff getting trained with the new chemistry machine.

Thanks to the very generous donation of the Rose Family, we have now completed our new building, which is known as the Rose Rooms. This building is the home to our new kitchen, volunteer room, outreach room, and storage! Ever-increasing attendance at the Clinic meant that we have had to create more space to accommodate the growing numbers of patients that we see and treat. In addition, the Gould family Foundation helped us acquire a blood chemistry analysis machine for the lab. This is enormously helpful for our patients! Before acquiring this machine, patients that needed blood chemistry analysis had to go to Jinja, or in some cases, Kampala, for certain tests. Now all of these tests can be done at the Clinic. This both improves the care we can offer at the Clinic and lowers the cost for our patients.



Soft Power Health staff raft trip on the Nile.

In outside news that affects both SPH and our patient population directly, the head of the World Bank's Inspection Panel (this is similar to the head of Internal Affairs of the police) came to visit people who would be impacted by the impending flooding of the Kalagala Offset. The location is very near us on the Nile. The World Bank decided in February to allow the flooding of the protected Kalagala Offset Area by the currently under-construction Isimba Dam. Many are asking how it is even possible to move such an important biodiverse area, home to two endangered species, and unique in all the world. As of this writing, we are awaiting the Inspection Panel's report. At this point, the most important concern is getting the impacted people

properly compensated for the livelihoods they will lose once the dam is completed. It's still possible to voice your concern about this with the World Bank! Please go to this link and click on the petition [www.savethewhitenile.org](http://www.savethewhitenile.org). If people are not compensated properly, they will lose their ability to survive. This is certainly not congruent with the World Bank's motto of "ending poverty." What will it take to get the World Bank to change completely outdated policies that ultimately do more harm than good?

Finally, in happier news, our annual staff party included a river trip down the Nile on the section of the river that is soon to be under water! As most of our staff cannot swim and have never had the opportunity to raft the river and see what will be lost with Isimba Dam's completion, it seemed like the perfect moment to do this. It was bittersweet to share the magic of the incredible, irreplaceable Nile with the Ugandan staff to whom it logically belongs—if a river can be said to belong to anyone. While the damming of the last wild and free section of the Nile is sad, being able to share the magic of this unique river with everyone at Soft Power Health was truly unforgettable!

### **The Allan Stone Community Health Clinic:**

In the first quarter of 2018 the Clinic saw a total of 8,701 patients treated (29% returning and 71% new attendees) from January through March. We also referred 222 patients on for more complicated treatment in the Kampala-Entebbe area. In addition, we broke a record this quarter: for the first time ever, malaria slipped down to the *seventh* most commonly treated disease at the Clinic! We'd like to think that our ongoing educational outreaches on malaria prevention, including proper mosquito net usage, has played some small part in this development, in spite of the Ugandan government's free net distributions.

This quarter, Dr. Paul, our dentist, treated 150 people for dental problems. Periodontal diseases and extractions were the most commonly treated complaints. Four patients were referred for more complex dental issues. Dr. Paul's expert dental care is a much-needed commodity in Uganda and continues to contribute to overall improved health among our patients.

Demand for the physical therapy services offered by Stephen Kato and Flavia continues to grow. This quarter, 1,086 patients were treated, which represents a 22% increase over the last quarter of 2017! As in the past, the most common condition seen was lower back pain (such as lumbar spondylosis, and sciatica). Although the majority of PT patients were seen at the Clinic, this quarter 40 of the total were treated via Stephen's community outreach program in Lukolo village.

Finally, 47 Little Suns solar lamps were sold at the Clinic this quarter, and 51 were replaced. We anticipate getting a new shipment of Little Suns in soon, as they have proven so popular.



Dr. Henry consults with a patient and his mother on a recent diagnosis of Pott's Disease, otherwise known as TB of the spine.

### Top 10 conditions this quarter:

The most common diseases treated at the clinic were, in descending order: hypertension, (1774); peptic ulcer disease, (1262); musculoskeletal problems, (981); urinary tract infections, (804); respiratory tract infections, including 28 cases of pneumonia, (680); bacterial infections, (540); malaria, including 10 cases of malaria in pregnancy, (372); diabetes (289); skin conditions, (283); and pelvic inflammatory disease, (155).

### Mother and Child Wellness Center:

At the Mother and Child Wellness Center this quarter, 439 individual pediatric patients and their families were counseled about nutrition and malnutrition, including the causes of malnutrition. 390 of these patients required the intervention of High Energy Milk (HEM) to address their malnutrition. In some instances it was severe and required several courses. 49 of these patients and families required counseling about nutrition only.

In January we were unable to offer vaccinations, as we had a refrigeration problem and were unable to keep them in stock. Nevertheless, 263 rounds of vaccinations were administered this quarter. 144 women received intermediate, long term and permanent methods at the clinic: 83 three-month courses of Depo-Provera injectable birth control were administered, and 33 three-month packages of birth control pills were distributed. Also, 23 long-term implants were placed and 18 were removed. Finally, 499 male condoms and 11 female condoms were distributed from the Wellness Center. During this quarter, 3325 people were tested for HIV, with only 74 positive results. This represents an extremely low 2.2% positivity rate.

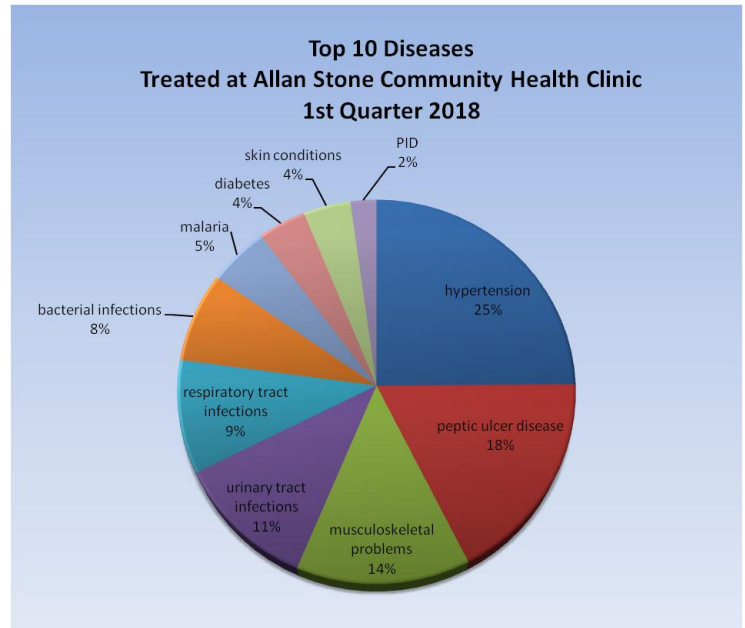
Finally, during our first quarter Marie Stopes collaborative family planning day, 5 women chose tubal ligations and no men chose vasectomies as permanent forms of birth control. No IUDs were inserted and 14 IUDs were removed. Also, 2 women were counseled about birth control side effects. 32 pregnancy tests were taken, and 2 were positive.

### Nutrition/Malnutrition Outreach

This quarter, 472 people participated in 11 malnutrition education outreaches in 11 villages in Butagaya and Budondo sub-counties in our home district of Jinja. Also, we made visits to 150 former participants to follow up on the program's impact and to determine whether people had retained and were making use of the knowledge from the education sessions. At these outreaches we were also able to distribute 1,325 doses of Albendazole, 394 courses of Vitamin A, and 30 courses of prenatal vitamins to pregnant women. This remains possible due to Vitamin Angels' donations. Albendazole, vitamin A, and prenatal vitamins all greatly improve the nutritional status of everyone who participates.

### Malaria Prevention and Outreach:

This quarter, our sale of mosquito nets remained low, due to the Ugandan government's distribution of 24,000,000 free nets last year. Although the distributions are over, we are still feeling the effects of this in the communities where we work. Between the clinic and our malaria education outreaches, we sold 96 nets. Specifically, 75 nets were sold at the clinic while 21 nets were sold during our malaria education



outreach sessions. Unfortunately, none of the government-sponsored free-net campaigns have made any notable drop in malaria rates in the free distribution zones where the free nets do not come with education about malaria transmission and correct net usage. This education is critical to malaria prevention, and is also of great interest to the villages we serve, as the demand for education is holding steady: between January and March, 712 people attended our malaria outreach education sessions. In addition, the malaria outreach team made 145 follow-up visits to evaluate whether previously purchased nets from education sessions were being used correctly and whether people reported having less malaria.

### **DIG Garden**

This quarter, DIG identified 10 new gardens in Bwenda and Butiki. Seeds were distributed to these farmers and they were given help and advice about planting in these areas. In our part of Uganda, common crops for food and income generation include kale, cabbage, eggplants, beans, soybeans, and peanuts. Crops for food security (that is, staple and survival crops) include *matoke*, cassava, potatoes, yams, and maize. The DIG team continues to excel at giving local gardeners the tools they need address nutrition and malnutrition problems at home using their own gardens as a starting point.

### **Family Planning Outreach:**

Family planning outreach programs continue to be popular and well attended by both men and women in our local communities. This quarter, 876 women received intermediate and long-term family planning. During outreach sessions 792 women chose three-month birth control injections for intermediate-term family planning and 61 women chose birth control pills. Also this quarter, 29 new long-term contraceptive implants were placed and 5 were removed. No IUDs were placed or removed. 58 women requested and received pregnancy tests. 19 of these tests were positive. In addition, 17 women requested and received counseling about side effects of birth control. 3,332 male condoms and 91 female condoms were distributed at family planning outreach sessions. We also gave 3,089 doses of Albendazole, a deworming treatment, to children in the field. This treatment will remain effective for the next 6 months, improving those children's cognitive development as well as their chances of gaining weight and being healthier.

### **Domestic Violence Counseling**

In the first quarter, 844 people made use of our domestic violence counseling services. These services consist of sensitization sessions at outreaches, follow-up visits, and consultations at the Clinic. According to Florence, the head of our domestic violence program, the number of younger mothers, as well as needy clients is rising every month, and the ever-increasing participation shows that there is a powerful need for this type of service. Between outreaches and Clinic consultations, Florence counseled 265 people this quarter, and 579 follow-up home visits were made to people previously counseled to determine if they had been able to implement what they had learned during their counseling sessions.



Florence makes a home visit to an elderly couple and their orphaned grandchildren.

***Thank you so much for your help making Soft Power Health's work possible. We really appreciate it!***

To learn more about the services we provide and the costs involved, or to make a one-time or monthly donation, please click [here](#) or go to [www.softpowerhealth.org/donate.php](http://www.softpowerhealth.org/donate.php).