



Soft Power Health

Through healthcare service to people in need, we take a step towards making a more just world



Soft Power Health patient and domestic violence client, Catherine, at her home in Nawampanda.

What's New in Q2!

Domestic Violence Training Workshop With ADOVIC

In May, Soft Power Health's domestic violence team completed a comprehensive three month training workshop with ADOVIC, (Anti Domestic Violence Coalition), a Jinja based NGO, that educates social workers, counselors and anyone interested with new approaches to help domestic violence abuse victims, while applying established best practices when interacting with patients, clients and their family members.



In the sessions, ADOVIC charted group responses of domestic violence for everyone to understand the various types of abuse.



Throughout the seminars, ADOVIC identified many types of psychological and emotional abuse that often go undetected, and provided constructive methods for counseling such situations. As SPH continually seeks to improve its programming, the SPH staff learns valuable tools and processes.



Soft Power Health staff listen as Margaret, the ADOVIC team leader, explains the many forms domestic violence can take.

These workshops strengthen the services provided to patients and community members in need.

Thank you ADOVIC for all your help!

New Antihypertensive Medication

Antihypertensive medications remain the most expensive drugs we purchase and are the most prescribed medicines at the clinic. Thanks to nurse Mariam, we've been introduced to a new medical supplier for our antihypertensive medicines who has supplied SPH with a large quantity to try for free. The drugs have proven to be equally as effective as the other brands used in the past and significantly cheaper.

With this new medical supplier, our monthly drug expenses should go down. If all goes well, we hope to develop a lasting partnership with the company, Microlabs, which will allow SPH to treat more hypertensive patients for the same cost of medication.

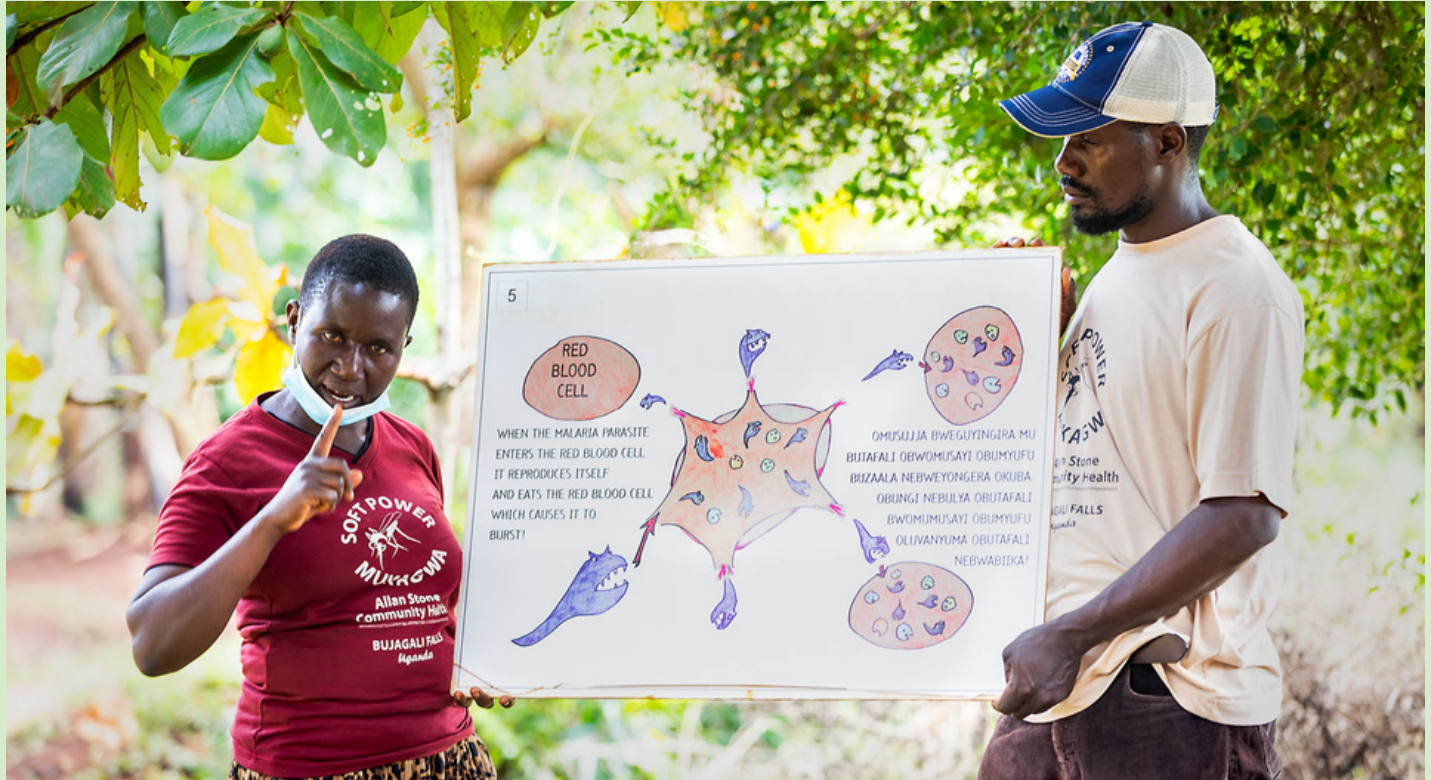


Patient is screened for high blood pressure at the clinic.



Staff Spotlight: Sarah Muwanguzi

Sarah, also known as Sarah Malaria, has been director of our malaria outreach program since 2007. As a single mother of four, Sarah spearheads the educational outreach and follow up services we provide in rural communities throughout the Eastern region of Uganda.



Sarah along with Soft Power Health educator and driver Amos, present a malaria information chart during an outreach session in Wakisi-Malindi.



Sarah brings chairs from the local chairman's home to the outreach session in his front yard.



Sarah and the malaria team mobilize and follow up home to home – the best way to reach people!



Happy Sarah celebrates the sale of a mosquito net and education session attendee.



During a follow up home visit, Sarah explains the proper way to hang a mosquito net to Maija Nakabugo at her home in Kibibi, Budondo

Sarah has been a wonderful role model for many women in the communities SPH serves.

Thank you Sarah for all your dedicated work. Everyone benefits from your passion and knowledge!



Helping Our DIG Garden Blossom!

During the second quarter, DIG consultants Ali and Paul helped all SPH DIG gardens boost harvests. They provided common sense suggestions and excellent technical advice, helping to improve our home and community outreach gardens too.



Ali and Paul (in center of the photo) stressed the importance of well organized seed placement at the DIG training seminar held at the clinic garden during Q2.



Collard green seeds ready for planting.



Tomato seedlings are separated for planting.

The gardens are looking wonderful and are proving to be much more productive.

Thank you Ali and Paul!



Allan Stone Community Health Clinic Dr. Charles - Clinic Director



Dr. Charles examines a young patient in his office at the clinic.

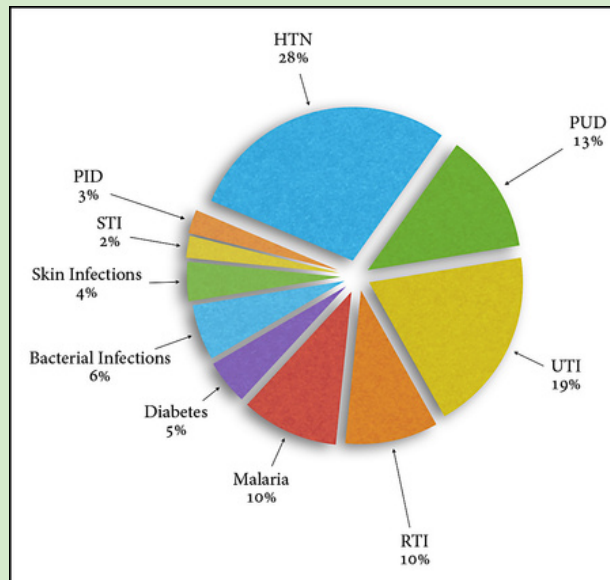
Total Patients treated in 2022 Q2: 7,913

Patients referred for surgery or tertiary care = 893

New Patients = 80% Returning Patients = 20%

Women comprise 64% of all patients

TOP 10 DISEASES TREATED AT THE CLINIC IN THE FIRST QUARTER



1. Hypertension: 1,846
2. Urinary Tract Infections: 1,273
3. Peptic Ulcer Disease: 826
4. Malaria: 671
5. Respiratory Tract Infections: 641

6. Bacterial Infections: 385
7. Diabetes: 310
8. Skin Conditions: 270
9. Pelvic Inflammatory Disease: 164
10. Sexually Transmitted Diseases: 151



PEDIATRIC TRIAGE

Triage Team: Sandra, Juliana and Loy



A patient has his temperature taken at triage.

PEDIATRIC PATIENTS TRIAGED: 1,845 = 23% OF ALL PATIENTS IN Q2

New Patients = 47% | Returning = 53%

Patients With Severe Acute Malnutrition = 698

Patients With Normal nutrition = 719

Patients With Nutrition counseling only = 428



DENTAL | DR. PAUL

118 PATIENTS TREATED IN Q2



Dr. Paul uses his large teeth and brush to demonstrate proper brushing technique.

Top Dental Conditions:

1: Periodontal disease = 44, 2: Extractions = 40, 3: Fillings = 12, 4: Referrals = 10, 5: Dental Abscesses = 5



CLINIC LAB REPORT HARUNA DEPARTMENT HEAD

2022 Second Quarter Total Lab Tests: 31,567
6,078 complete blood count tests



Joseph, one of SPH's lab technicians examines a blood smear for malaria.

5,383 Malaria rapid tests; 714 positive | 4,946 malaria blood smears; 398 positive
3,237 HIV tests; 73 positive | 443 HCG tests; 38 positive | 230 TB tests; 10 positive
Hepatitis B 90 tests; 10 positive | 13 cases of Entomeba Hystolytica diagnosed



Patients wait to be called to the lab for blood to be drawn.



MOTHER AND CHILD WELLNESS CENTER

Prescriptive Severe Acute Malnutrition Treatment with HEM (High Energy Milk)
administered by Esther, Irene and Esther II at the clinic.

Prescribed 336 total treatments.

244 treatments to non- cerebral palsy patients; 92 treatments given to cerebral palsy patients.



Dr. Henry examines a young baby for early signs of malnutrition.

Family Planning at the Clinic

All methods provided alongside counseling and education.

130 longterm methods administered: 108 injectable; 22 implants.

267 rounds of childhood vaccinations given through Friday vaccination days at the clinic.



Women wait for long-term birth control injections at the clinic.



MALARIA EDUCATION AND PREVENTION PROGRAM

DEPARTMENT HEAD: SARAH

SUPPORT STAFF: MARIA AND IVAN



All attendees of malaria education sessions receive hand-outs with information on transmission, prevention and treatment of malaria.

- 17 malaria education outreach sessions held with 388 people attending
- 232 mosquito nets sold; 57 at outreach education sessions; 175 at the clinic
 - 84 malaria follow up visits done in 12 villages



Maria and Ivan explain the malarial life cycle during an outreach session.



PHYSIOTHERAPY DEPARTMENT: CLINIC AND OUTREACH

PT TEAM: FLAVIA, RACHEL AND SYLVESTER

TOTAL PATIENTS TREATED: 900

Clinic: 822 | Outreach: 88

New patients: 420 = 51% Returning: 402 = 49%



Rachel works with a young cerebral palsy patient on parallel bars the staff built at the home.

Top Five Clinic Diagnoses:

1: Low Back Pain, 2: Lower Limb Pain, 3: Cerebral Palsy, 4: Knee Pain, 5: Chest Pain

Top Four Outreach Diagnoses:

1: Cerebral Palsy, 2: Muscular Dystrophy 3: Knee Pain, 4: Developmental Delay



A stroke patient works on rebuilding leg strength in the clinic physical therapy room.



FAMILY PLANNING OUTREACH AND CLINIC

NURSES MARGARET, ANNET AND AISHA

911 total long-term methods administered in Q2

86% of family planning takes place in outreach and 14% at the clinic



Women listen during a family planning outreach session.

Outreach in 38 villages; returning to each village quarterly.

All birth control methods provided alongside counseling and education.

Administered at the clinic:

130 long-term methods (108 injectable; 22 implants)

Administered in outreach:

803 long-term methods (776 injectable; 24 implants; 3 pill plans)

New: clinic = 14%; outreach = 24%

Returning: clinic = 86%; outreach = 76%



A mother waits with her baby at family planning outreach.

7,008 Albendazole deworming treatments for hookworm.

At the clinic = 2,665 | In outreach = 4,433

3,000 condoms distributed.

1,407 at the clinic | 1,593 in outreach



MALNUTRITION EDUCATION OUTREACH AND FOLLOW UP

ANNET, MARGARET, LOY AND NAIGAGA



Knowledge evaluation survey done during malnutrition education outreach.

MALNUTRITION OUTREACH AND EDUCATION SESSIONS IN 12 VILLAGES

- 332 families educated
- 818 albendazole deworming treatments provided
- 11,220 prenatal multivitamins distributed to pregnant and lactating mothers
- 514 Vitamin A doses given
- 174 follow-up home visits made in 9 villages to assess knowledge retention



Loy conducts a malnutrition follow up home visit.



DOMESTIC VIOLENCE DEPARTMENT

JENNIFER, BENJA AND TEAM

198 patients counseled at clinic and outreach

Women: 149 | Men: 49

New: 39% | Returning: 61%



Patient Kimuli John at home during a counseling follow up visit with the domestic violence team.



Steve and Ndaye spray Catherine's home (cover photo) for jiggers, scabies and termites during a follow up visit.

Most Common Types of Violence Reported:

1. Economic: 99 2. Physical: 37 3. Emotional: 32 4. Sexual: 30



SOFT POWER HEALTH DIG GARDEN

FRED | DEPARTMENT HEAD

GARDEN STAFF: SAMUEL, SIMON, PETER, JOJO, NDAYE



We grow tomatoes from seed and when ready, the plants are transplanted into our garden. Soft Power Health is garden to table!



Fred picks fresh kale to be used in the staff mid-day meal.

Q2 SPH home garden production:

Cucumbers = 92, Dodo = 58 bunches, Kale = 56 bunches, Casava roots = 47, Matoke = 37 bunches, Eggplant = 15 kgs, Cabbage = 26 heads, Green Pea leaves = 15 bundles, Coriander = 10 bunches, Onions = 1kg



Soft Power Health's New and Improved Green Dream

Despite the Ugandan government investment in three mega hydro-power dams, the country's electrical grid continues to be an unreliable source of power, especially at the clinic. When the local power grid fails (an everyday occurrence), we still rely on a back-up generator to keep the clinic's lights and equipment running. However, given the high price of diesel and the health hazards associated with the generator's diesel exhaust, we have begun planning to install a comprehensive solar power system to power our entire clinic operation.



Diesel exhaust (that our generator uses), is unfiltered in Uganda.



The cost of diesel has skyrocketed in Uganda, approaching \$7 US a gallon.



The area shown in the black rectangle is where the clinic solar panels are to be installed.

When the solar panels are installed we will have a dependable and efficient source of power - creating a significantly improved healthy and operational working environment for all staff and patients.

However; with a price of \$20,000 US, the cost of installing the new system is financially challenging. Please consider making a donation to help turn this dream into a reality – anything and everything will aid us in reaching this goal!



PayPal Giving Fund

Soft Power Health is now part of the Paypal Giving Fund.

If you go to this **link** and click on the heart to make us your favorite charity, you will be prompted to donate \$1 each time you pay for goods or services using Paypal.

Every dollar makes a huge difference for the people we serve in Uganda, so this is a quick and easy way to support Soft Power Health and the work we do!

Here is the stand-alone link: <https://tinyurl.com/SPHPaypalGiving>

Thank you your support!



We welcome donations of any size and every contribution makes a big difference, especially during this challenging time! Thank you very much for helping to make Soft Power Health what it is today. We would not be where we are without you!

Thank You Very Much!

Partner With Us! Two Ways to Give

Send check payable to:

Soft Power Health
2887 Purchase Street
Purchase, NY 10577
USA

Click the **DONATE button at: www.softpowerhealth.org**

Soft Power Health is a registered 501(c)(3) and all contributions are tax deductible. Tax ID #: 20-6195776

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