The Allan Stone Community Health Clinic:
The clinic remained very busy for the first quarter of 2015. We saw a total of 4,545 patients. 76% of our patients were new to the clinic and 12% of our patients are under 5 years old. In addition, 64% of our patients were women.

Our pediatrician, Dr. Emma, has been very busy treating our young patients. The patients and parents who meet and interact with Dr. Emma really like him and appreciate his expert level of knowledge. We are glad to be able to offer specialized care to all our pediatric patients. In addition, and not surprisingly, Dr. Emma has enormous knowledge about malnutrition. With his valuable feedback, we are continually improving our malnutrition outreach. Dr. Emma works with our nurses, and our educators, Esther and Irene, who distribute High Energy Milk (HEM) to patients in need, in order to make sure each malnourished patient receives exactly the right dose. He also is a big believer in our DIG garden approach to helping families solve their long-term malnutrition needs by using their own gardens to grow the foods they need to create a healthy diet.

Dr. Paul, our dentist, treated 98 people for dental problems ranging from extractions, to dental carries, to periodontal disease. Dr. Paul’s dental outreach continues to be a very important component of the work he does, since even basic education about brushing teeth and dental care is completely absent in Ugandan life. Stephen Kato, our physical therapist, has finished his first year with us and continues to offer another much needed service for our patients. Stephen treated 258 patients during the first quarter of 2015. The most common condition he treated in adult patients was lower back pain and the most common condition he treated in children was cerebral palsy.

Top 10 conditions this quarter:
The most common diseases we treated were, in descending order: hypertension (1256); peptic ulcer disease, (800); urinary tract infections, (656); malaria, (594); respiratory tract infections including pneumonia, (472); sexually transmitted infections, (259); bacterial infections, (240); typhoid fever, (225); diabetes mellitus, (218); and osteoarthritis, (127).

Interestingly, hypertension, for the second quarter in a row, has been the most common condition we have treated at the clinic, with almost double the number of cases
compared to the next most common disease, peptic ulcer disease. Malaria remained the 4th most commonly treated disease this quarter, and the numbers of both tuberculosis and HIV cases increased this quarter.

**Nutrition/Malnutrition Outreach**

The origin of this outreach was to provide education about nutrition and malnutrition to the communities from which the majority of our malnourished patients originate; however, the consistently positive response to the malnutrition outreach, and the high demand for this information, led us to expand into many more local communities. During the first quarter of 2015, 516 people participated in 12 malnutrition outreaches in villages in Butagaya and Budondo sub-counties in our home district of Jinja. The malnutrition outreach is well on its way to reaching more people than ever this year! In addition, 1228 doses of deworming treatments were distributed to children and adults in need. We have resumed follow-up visits to former participants in the malnutrition outreach to continue to measure its impact. Unfortunately Serving His Children, an organization to which we have often referred severely malnourished patients for inpatient treatment, has closed its doors. Despite this news, we will continue to determine how to help those malnourished patients most in need.

**Mother and Child Wellness Center:**

This quarter, the Mother and Child Wellness Center was also very busy. We treated a record number of malnourished children during this period. In addition, 113 courses of high energy milk (HEM) were given to children in need. Since the malnutrition/nutrition education outreach program is educating more people than ever, a growing number of participants are being referred to the clinic for treatment of severe malnutrition. 658 rounds of vaccinations were administered in the first quarter, with women coming from near and far to ensure that their children received these life saving interventions. Also, 144 three-month courses of Depo-Provera were administered, and 20 three-month packages of birth control pills were distributed to women who wanted intermediate-term family planning. 6 long term implants were placed and 19 were removed. 3 IUDs were also removed during the first quarter. 740 male condoms and 30 females condoms were distributed from the wellness center, and 7 people were counseled about side effects they were experiencing from the use of family planning.

Our quarterly collaborative family planning day, which we have run with Marie Stopes Uganda (MSU) for the last 5 years, went on despite Marie Stopes’ suspension of all activities in Uganda due to financial mismanagement. Soft Power Health independently hired the Marie Stopes’ team (surgeon and nurses) to come for the quarterly day. Since Soft Power Health has done much work over the last 11 years in the surrounding communities, we wanted to remain consistent and not disappoint the people who depend on our services. It was, therefore, very important to make sure this day happened despite MSU not being officially up and running. After substantial mobilization—the key to the success of any outreach—we had a great turn out. With luck, MSU will soon be active again in Uganda, as they provide a very useful and good service to many Ugandans. 9 Tubal Ligations and 1 vasectomy were performed. Also, 29 long term implants were placed and 9 were removed. We look forward to three more quarterly days this year with the Marie Stopes Team.

**Family Planning Outreach:**

Our family planning outreach, now in its 10th year, continues to be well attended and to provide a much needed service to local communities. This quarter, 775 women received Depo-Provera injections for three-month birth control. 31% of these women were new users. 111 women, 42% of whom were new users, chose birth control pills during
outreach sessions. 16 new long-term contraceptive implants were inserted and 5 were removed. Like the previous two quarters, no IUDs were inserted or removed. 226 women requested and received pregnancy tests. 101 women were counseled about side effects of birth control. We also gave 2,296 doses of Albendazole to children in the field, effectively deworming those children for the next 6 months and improving their chances of gaining weight and being healthier overall. Finally, thanks to our ongoing partnership with USAID based in Kampala, we were able to distribute 6,538 male condoms and 470 female condoms.

**Malaria Prevention and Outreach:**
During the first quarter of 2015, we sold a total of 609 mosquito nets through our malaria education and prevention outreach and at the clinic. 478 nets were sold at education outreach sessions and 131 nets were sold at the clinic. The malaria outreach team made 268 follow-up visits to evaluate whether previously purchased nets from education sessions were being used correctly and whether people reported having less malaria. While net sales remain depressed, largely due to the Ugandan government’s free net distribution of 15,500,000 mosquito nets at the end of 2013, the malaria team was still able to identify communities who were very interested in receiving our services. To combat the rash of net misuse (such as using nets for squeezing juice or fencing chickens!) we have gone to communities just to educate about the correct use of mosquito nets. This education is always well-received and there is a high demand for it, so the malaria team will continue to provide it. As we have seen first hand, education and proper usage of nets is what prevents malaria—not the mere presence of a free net!

**DIG Garden**
We were happy to see that the DIG garden survived the dry season in the first quarter 2015. Because there is little to no rain in January and February, this time of the year slows production from the garden. Despite the slowdown, we managed to continue production of matoke and pineapples, important crops for us. Patrick, our head DIG gardener, also started a large community DIG garden project in Super Hole village—a community that, up to now, has had enormous problems with malnutrition. It was inspiring to see the community members take so much pride in their gardens and take important steps to independence through food production. Patrick continues to help communities develop their own DIG gardens, and we anticipate seeing more positive results from these gardens this year.

Thank you again for your support of Soft Power Health’s work! We could not do this without your help. To learn more about the services we provide and the costs involved, or to make a one-time or monthly donation, please click [here](http://www.softpowerhealth.org).