What’s New:
For another quarter running, the Allan Stone Community Health Clinic treated a record number of patients: 9,229 patients to be exact! Thinking back to the early days of the clinic, we did not even see 9,000 patients in a whole year, so this is a big development. By the end of 2016, we will see over 30,000 patients, and we will refer over 1,000 patients on to other specialized hospitals for more complicated treatment. Based on Soft Power Health’s structure, we have now reached our capacity to treat patients. Although this is a good problem to have, the fact is that we have run out of physical space to treat more patients. We are determined to maintain quality of care for our patients and do not plan on turning anyone away, so these busy times demand creative solutions. Watch this space as we work toward solving this problem!

We are very fortunate to have Dr. Hannah from the UK working with us as a general practice physician for an entire year. Hannah arrived in August and has settled in very well. She is the ideal doctor we aim to attract: she has terrific experience, dedication to her patients, and she loves to kayak. In fact, as a medical student, Hannah volunteered with us. Now she is back to work with us again, and to enjoy the Nile while it is still in its free flowing form. Her timing is perfect, since we can really use the extra hands and expertise in the very busy clinic!

Our DIG demo garden in Super Hole village produced a fabulous harvest of 692kgs of maize for the gardeners running the garden. This maize will serve two purposes: first, during the dry season, it will feed families who are part of the gardening cooperative, and second, the excess will be sold to generate income so that more seeds can be purchased for the next growing season. The DIG farmer’s cooperative is very pleased with the results, and so are we!

During the third quarter, Mt Sinai Global Health Students Molly and Patty continued implementing the mosquito net usage survey that was started last summer. Working in the parish of villages next to Kyabirwa, our home village, they surveyed 6 villages, interviewing over 1,000 households and collecting information on net use for close to 5,000 people. We are eagerly awaiting analysis of their findings, as this will allow us to tailor our malaria education and prevention program to suit the needs of the communities we serve.

Finally, the triage protocol established in January 2016 with the help of our Mt. Sinai pediatric residents is working very well and helping the sickest patients be seen first. It greatly benefits children, who cannot advocate for
themselves, to be identified and access treatment right away. This has been a lifesaving improvement in care for these patients.

The Allan Stone Community Health Clinic:
As mentioned above, this quarter’s clinic attendance was again record-breaking, with a total of 9,229 patients between July and September! We referred 272 patients on for more complicated treatment in the Kampala-Entebbe area. 84 were referred to CORSU (Complete Orthopedic Rehabilitative Services in Uganda) and 32 were referred to the Heart Institute at Mulago Hospital.

Dr. Paul, our dentist, treated 150 people for dental problems. Consistent with recent quarters, the most common complaints were periodontal diseases and extractions. This quarter, 10 patients were referred on for more complicated conditions requiring oral surgery.

Clinic patients continue to take advantage of the physical therapy services offered by Stephen Kato. During the third quarter Stephen treated 436 patients. The most common conditions treated were lower back pain (such as lumbar spondylosis, and sciatica) and cerebral palsy. Other conditions presented and treated this quarter included: knee injuries, hydrocephalus, developmental problems caused by malnutrition, and stroke complications. In addition to his work at the clinic, Stephen’s community outreach program has allowed many patients who would otherwise not make it to the clinic (because of their physical limitations and/or the distance they would be required to travel) to access physical therapy on a regular basis.

Finally, this quarter, 18% of the patients seen at the clinic were children under 5 years old, and of the children from this group who were triaged, 74% needed a high energy milk intervention for malnutrition. This under-5 population is among the most vulnerable, and triage has vastly improved mortality and morbidity in this group.

Top 10 conditions this quarter:

The most common diseases treated at the clinic were, in descending order: peptic ulcer disease, (1564); hypertension, (1415); urinary tract infection, (1218); respiratory tract infection including 62 cases of pneumonia, (977); malaria, including 9 cases of malaria in pregnancy (881); bacterial infections, (825); musculoskeletal problems, (468); diabetes, (354); skin conditions, (300); and sexually transmitted infections, (284).

The next most common complaints this quarter were: PID, (170 cases); tuberculosis, (51 cases); and HIV, (40 cases).

Mother and Child Wellness Center:
This quarter, the Mother and Child Wellness Center distributed 615 courses of high-energy milk (HEM) to children and adults in need. In addition, 480 rounds of vaccinations were administered. These interventions can be life saving for the children and adults who receive them. 133 three-month courses of Depo-Provera injectable birth control
were administered, and 3 three-month packages of birth control pills were distributed to women who wanted intermediate-term family planning. 28 long-term implants were placed and 11 were removed. Also, 4 IUDs were placed during this quarter, and 1 was removed. 4 women were counseled about side-effects management. Finally, 1,178 male condoms and 41 female condoms were distributed from the Wellness Center.

In addition, during our third quarter Marie Stopes collaborative family planning day, 6 women chose tubal ligations and 1 man chose a vasectomy as permanent forms of birth control. 16 women selected long term birth control implants and 5 were removed. No IUDs were inserted, and 1 IUD was removed. In addition, 3 women chose birth control pills as an intermediate-term method of birth control. 26 women were screened for HIV, and all but one were negative. Overall, through the Mother and Child Wellness Center, we offered family planning of short, intermediate, long or permanent means to 1,441 women and men.

**Nutrition/Malnutrition Outreach**
During the third quarter of 2016, 1,774 people participated in 14 malnutrition education outreaches in villages in Butagaya and Budondo sub-counties in our home district of Jinja. Also, we made follow-up visits to 151 former participants in 13 villages in order to measure the program’s impact. Thanks to Vitamin Angels, we are now distributing Vitamin A and prenatal vitamins at all malnutrition outreaches.

**Malaria Prevention and Outreach:**
This quarter, we sold a total of 1,067 mosquito nets through our malaria education and prevention outreaches and at the clinic. Specifically, 450 nets were sold at the clinic and 617 nets were sold during malaria education outreach sessions. This is very encouraging because there are now private organizations giving away free mosquito nets without education and the government of Uganda is once again giving away millions of free nets in the areas where we work. In addition, the malaria outreach team made 250 follow-up visits in 11 villages to evaluate whether previously purchased nets from education sessions were being used correctly and whether people reported having less malaria.

**DIG Garden**
Two new demo gardens under development in Butagaya sub-county bore fruit this quarter! As mentioned above, 692kgs of maize was harvested and are being milled for flour. The members of the garden cooperative in this village will have food for the dry season and will have excess flour to sell so that new seeds can be bought for the next season's garden. If the families of the cooperative members have a real benefit from this harvest, it can go a long way to reducing malnutrition in the future and towards becoming a truly self sustaining entity. This is an important advance for the community, as Butagaya has the highest rates of malnutrition in our area, as demonstrated by the number of malnourished patients we treat at the clinic. The demo gardens were
created to produce one or two specific staple crops only in order to supplement the existing DIG gardens these communities already have.

In addition, there are now 24 new DIG-founded individual family gardens and 12 ongoing DIG family gardens in surrounding communities. We look forward to helping the ongoing gardens graduate and ultimately to seeing these families living healthier, more productive lives through better nutrition.

**Family Planning Outreach:**
Our family planning outreach is always well attended (by both men and women) and continues to provide a much-needed service to local communities. This quarter, 1,144 women received three-month birth control injections for intermediate-term family planning. 53 women chose birth control pills during outreach sessions. This quarter, 2 new long-term contraceptive implants were inserted and none were removed. Of the women who requested and received pregnancy tests, 19 were positive. In addition, 7 women requested and received counseling about side effects of birth control. 7,764 male condoms and 265 female condoms were distributed at family planning outreach sessions. Finally, we are very grateful to Uganda Health Marketing Group for their supply of family planning methods. This consistent supply supports our efforts to deliver family planning to those in need. We also gave 5,325 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.

**Domestic Violence Counseling**
In the third quarter, between sensitization sessions at outreaches, follow-ups, and consultations at the Clinic, 322 people in 28 villages were counseled about domestic violence (DV). Emotional violence was the leading problem reported (110 instances), followed by economic violence (78 instances reported), sexual abuse (7 instances) and child abuse (2 instances). Interestingly, this quarter more people were contacted during outreaches than at the clinic, with 107 people seeking sessions offered at outreaches, and only 53 seeking counseling at the clinic. However, according to Florence, Soft Power Health’s Domestic Violence counselor, regardless of where they seek to access this program, many clients have already benefited from it.

*It is your help and dedication to Soft Power Health that has made this possible. Thank you so much!*  
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).