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Uganda: Fighting Food Insecurity and Disease with Education

The human population of the world is estimated to increase to nine billion people in the next decade. One of the major effects of this growing population is food insecurity. Justin Gillis, writer for The New York Times, states that the "...once rapid growth of farm output that defined the world has slowed. At the rate of the population growth, farm output will be unable to keep up with the demands of the hungry people." This leaves us to reflect on the creative minds of government officials and their consultants. Between financial aid and nonprofit organizations, as Americans, we have multiple ways of making food available to us. While Americans enjoy fast food and dine-in restaurants, Uganda, a third world country, has no easily accessible food resources. Much of Uganda depends on small holders to create their food supply. With parents unable to provide for their families, and children too young to fend for themselves, Uganda's death rate increases. A little over a quarter million children under the age of five die each year from malnutrition-related causes in Uganda. On the other hand, malnutrition is not the only leading factor in Uganda's death toll. Uganda's situation can be accredited to the on-going civil war and its disastrous effects, the spread of disease, and the uneven distribution of governmental funds. With these seemingly insurmountable problems, Uganda faces a monstrous crises; HIV and food insecurity are major issues.

HIV attacks the immune system that fights disease and infection. Acquired immuno deficiency syndrome, AIDS, is the final stage of Human Immunodeficiency virus, HIV, and is acquired by blood and genital secretions. HIV can be spread whether or not the individual has symptoms. For some, HIV symptoms can occur within days or weeks of initial exposure. If no treatment is received for the HIV infection, the disease typically progresses to AIDS in about ten years. By the time AIDS develops, the immune system has been severely damaged, making one susceptible to opportunistic infections. AIDS is the final step in HIV. Death inevitably follows.

Although there are no cures for HIV, there are preventions as well as treatments. One of the largest treatments given and monitored with patients infected with HIV is diet and nutrition. In a chronic infection like HIV, the body burns more energy. If one uses more energy than caloric intake, one loses weight. Over time, too much weight loss can lead to malnutrition. A healthy diet is not a cure for HIV. However, it affects positively the symptoms of the disease. Good nutrition has many positive effects, such as it keeps the immunity higher, slows the progress towards AIDS, prevents health problems related to poor nutrition, and helps to maintain a healthy body weight. Although a healthy diet will not cure the disease, if managed properly, a well-rounded diet will slow the progression of AIDS. However, patients with HIV need to insist that certain nutrients are implemented into their diet. Some of these healthy foods include:

- Starches, examples: cereals, potatoes, rice, and breads
- Legumes, examples: nuts, beans, and peas
- Calcium, examples: milk, yogurt, and cheese
- Proteins, examples: meat, dairy, beans, fish, and nuts

It is also vital that AIDS patients incorporate different colored fruits as well as vegetables into their diet each day. Keeping the body hydrated will keep the body functioning properly. Small amounts of fats and sweets are also necessary. It is equally important that the infected person exercise regularly and regularly see a doctor. Good nutrition is critical for long-term health and survival. Studies have found that people living with HIV implementing a healthy diet and good nutritional status can better tolerate HIV drugs, maintain weight and muscle mass more easily, and feel better overall.

Besides nutrition, preparation of the food is very important. Without proper preparation, negative effects such as diarrhea, lack of appetite, nausea, vomiting, pain when eating, skin problems, fever, influenza, and weight loss can occur as a result of an opportunistic infection. One common source of infection is contaminated food. In order to prevent this, there are certain precautions that the infected person must follow. Some food safety precautions that should be followed include:

- cooking all food fully-especially meats and eggs
- cleanliness- washing utensils before, between, and after dealing with multiple foods
- proper hygiene- washing hands after dealing with raw meat, raw eggs, or unwashed vegetables or fruits
- washing fruits and vegetable thoroughly before eating
- not keeping leftovers for a long period of time.

Following food safety is highly important to protect the body from infection and in prolonging the final stages in HIV, AIDS.

While the HIV rate in urban areas of Uganda are higher, rural Uganda is affected by this highly contagious disease as well. The current HIV prevalence in Uganda is estimated at 6.5 percent in adults and 0.7 percent among children. The number of annual AIDS deaths, which was estimated at 120,000 in 2009, exceeds the number of annual AIDS death, which was 64,000 in 2006. It is feared HIV rates may be rising again. AIDS has had a devastating impact on Uganda. It has killed approximately one million people, and significantly lowered life expectancy. AIDS has reduced the country's labor force, reduced agricultural output and food security, and weakened educational and health services. The large number of AIDS related deaths among young adults has left behind over a million orphaned children. These children are stranded with no parents and no way to fend for themselves. These children have a higher expectancy to be involved in crime and to come in contact with the disease at a younger age.

Reviewing Uganda's problems concerning HIV and food insecurity, there may be a solution to this problem. I am participating in [The Global Youth Institute](#). It is only appropriate that we incorporate the youth of Uganda into a solution. While most organizations focus on only one type of afflicted child, the solution that I offer for consideration involves the children from multiple situations. No matter if they are orphaned, live in a household filled with poverty, or live at home with parents with HIV, each child deserves the same opportunities. My idea is a compact of multiple organizations working together as one with a goal to decrease the occurrence of AIDS, provide food security within Uganda, and provide the children with the education needed to become healthy adults who have the knowledge to raise their own children following improved nutrition and food safety practices.

There are many organizations working within Uganda, but one of the most well known and appropriate for this topic would be the [Save The Children Foundation](#). Eglantyne Jebb started [Save the Children](#) in 1919 after the First World War. Today, [Save the Children](#) is the third largest organization in the world to be founded by a woman. Eglantyne Jebb also founded [Children's Rights](#), writing "The Declaration of the Rights of the Child" in 1923. Today, this has been incorporated into laws in nearly every country in the world. [Save The Children](#) began with their first donation of only six dollars. By the end of [Save the Children's](#) first year, they had raised \$18.5 million. Today they have millions of supporters worldwide who make it possible for them to help millions of children. They have been there for children in the biggest emergencies, including the Spanish Civil War, the Second World War, the Korean War, Rwanda and Iraq, earthquakes and famines. Some of the aspects they deal with in Uganda are health, protection, HIV/AIDS, education, and food security/hunger prevention.

Yet, another organization that I believe has potential for helping the situation in Uganda is called the [Edible Schoolyard](#), an educational model for food production and nutrition training that began with Alice Waters in California. One school district which has recently started this edible schoolyard in my home state was introduced and implemented in New Orleans following the devastation brought about by

Hurricane Katrina. The program was founded in 2006 and changes the way kids eat, learn, and live. Their goal is to improve the long-term well being of students, families, and the school community. Edible Schoolyard New Orleans does this by integrating hands-on organic gardening and seasonal cooking into the school learning experience, culture, and food programs. Edible Schoolyard New Orleans involves students in all aspects of growing, harvesting, preparing, and enjoying food together as a means of awakening their senses, cultivating a school environment that promotes a sense of pride and responsibility for the land and natural resources, and developing a love of fresh, seasonal foods. Family night is incorporated into the program. Parents and students interact in the kitchen, making a variety of meals. The meals are taken home and enjoyed by the whole family. Because all families will not have land or tools and materials (seed, fertilizer) to learn the process and then be able to grow their own food, the concept of the “edible schoolyard” will introduce the concept of the local schoolyard or community garden. In this way all children would be allowed the opportunity to learn about fresh food and the nutritional value of fresh food. This model would also allow local extension experts and local farmers to take part in educating the children as they donate their time to establish and maintain the community garden with the children, thus bringing ownership of the project to the entire community.

The last organization included in the collaboration is called Uganda Aids Orphaned Children Foundation, or UAOCF. It is a non-profit charitable organization that aims to provide care to the growing number of vulnerable Ugandan children whose parents have died from Acquired Immune Deficiency Syndrome. The objective is to reach out to the orphaned and vulnerable children- including children in foster homes- by providing assistance with daily needs, health care and education. UAOCF specifically targets the underserved rural population in the four Ugandan districts of Kabale, Rukungiri, Kisoro and Kanungu. Support focuses most heavily on a total basic education package for the children. The UAOCF involves the community in both Uganda and the United States in its work. To fulfill the mission, every effort is made to provide compassionate and quality service to the Ugandan children-all the while maintaining a high standard of care and respect for individual dignity and well-being.

A solution for the major problems of Ugandans dealing with the major crises of HIV/ AIDS and food insecurity would involve several organizations incorporating into one organization-such as, Save The Children working with Uganda Aids Orphaned Children Foundation integrating the Edible Schoolyard model into their program. This intertwining of foundations is much like a summit. The foundations could bring forth their best leaders, and the leaders would share their best ideas. Each organization would bring their own strengths to the table and through a successful collaboration, a new model for teaching Ugandans could evolve. With this new model of learning, the Ugandan children would be taught a variety of new things such as:

- prevention of AIDS
- retarding the progression of HIV through nutrition
- growing food in their environment
- cooking their own food properly
- nutritional diets for people with and without HIV

A brighter future is secured for the children of Uganda when they learn how to participate in the growing and the cooking of their own food. Another possible positive result of this program is that with these skills, perhaps the older children could find employment in society. This could also help Ugandans to sustain themselves with the resources available to them year around. They would also know how to provide for their children and loved ones afflicted with HIV/AIDS. When these skills are taught concerning the prevention of HIV/AIDS, hopefully, the numbers of the afflicted will be lowered. HIV awareness and education are the best way to prevent the disease.

Years ago, an organization called The Hunger Project partnered with Catholic Relief Services and AFFORD, a five-year market initiative plan, to assist with improving Uganda's environmental stability. The Hunger Project has been working in Uganda since 1999 and is currently empowering partners in eleven epicenter communities to end their food insecurity and poverty. An epicenter is defined as a cluster of ten to fifteen villages within a 10km radius, with a population of approximately 10,000 people, that come together to meet basic needs. The centerpiece of the strategy is an L-shaped epicenter building that houses the community's programs for health, education, food security and economic development. Through its integrated approach to rural development, the Epicenter Strategy, The Hunger Project is working with partners to successfully access the basic services needed to achieve the Millennium Development Goals (MDGs) and lead lives of self-reliance. From the farmers yielding larger crops and women able to use their time sufficiently, The Hunger Project's success was greatly celebrated.

My solution would be similar to the partnership already functioning in Uganda. However, we would be dealing with the children and the educational aspects of the community. We would supply the materials and agricultural education needed by the children, as well as working with the community leaders and educators to build a sustainable program with the school yard/community garden project.

Ugandans would be able to pass down gained knowledge of how to sustain themselves and be healthy from generation to generation, affecting Uganda positively. The incorporation of charitable organizations would also have a great effect on Uganda's food market, helping with food insecurity. The school offered by UAOCF would put more people in the food market. This is where supply and demand comes into the situation. With more people in the market, the market could afford to lower the cost of food. It would allow more people to buy the goods they need. It would also allow Ugandans to incorporate different varieties of food into their diets that are essential to their well being. Hence, food insecurity would be lowered in the communities in which the school is located.

Although Uganda may seem to be a country with many setbacks and disadvantages, it is a land that holds the promise of many opportunities. It is a vast land, rich with amazing fertile soil, which makes Uganda an ideal land to nourish and feed its people. The country's rainfall is heavy, which assists in growing crops. Following my model strategy would bring not only a greater knowledge of crop production and safe food preparation, but also an empowerment that comes when people learn to build skills to improve their life situation for themselves and their families. This education for the children would, hopefully, be the encouraging step that they need to help break the cycle of poverty and AIDS devastation in their country.

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