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Relief programs hard at work

BY MARSHALL MATZ

As we mark World AIDS Day today, it is important to note that the world has come a long way since the first HIV/AIDS case was reported almost 30 years ago, but there is a long way to go. Although great strides have been made, the virus continues to destroy millions of lives. This is especially true in the world's poorest countries, where hunger and severe poverty exacerbate HIV/AIDS.

Left behind in its destructive path are shattered families and orphaned children, who are often forced to fend for themselves with little hope of survival.

As national governments and international organizations continue to address this crisis, we must not overlook the role of food in both the prevention and cure of the disease.

Anti-retroviral drugs (ARVs) are commonly prescribed to stave off the effects of the virus. Like many prescription drugs, however, ARVs must be taken with food to be effective.

Not only can the combination of medication and food delay the onset of HIV/AIDS-related illnesses, but it also improves the quality of life for those living with HIV/AIDS. In places like Africa, where access to a steady supply of food is often a critical issue, many HIV/AIDS patients are forced to take their ARVs on an empty stomach. Side effects can be so severe that patients cease treatment altogether.

When that happens, a vicious domino effect begins: Patients lose their physical strength and are unable to work; their households suffer from the loss of income and/or food; children are removed from school so that they can work; and getting enough to eat becomes an everyday struggle. In some countries, HIV/AIDS has wiped out entire generations, leaving families with no food and no money.

Ensuring that HIV/AIDS patients receive adequate nutrition is certainly an achievable goal. Two HIV/AIDS relief initiatives are doing exactly that.

- **Through the President's** Emergency Plan for AIDS Relief (PEPFAR), President Bush committed \$15 billion over a five-year period to addressing HIV/AIDS in 15 African and Asian countries. PEPFAR is the largest commitment by any nation to combat a single

disease. Today, PEPFAR supports life-saving treatment for nearly two million people worldwide. Building on this wonderful success story, President Bush signed legislation last July that would extend PEPFAR for another five years. Most importantly, a nutrition component was included in the reauthorization. We must now build upon that authorization to provide a fully funded food component.

- **The U.N. World Food Program (WFP)** also recognizes the importance of food for HIV/AIDS patients. In coordination with other humanitarian relief organizations, WFP provides patients with food supplies when they receive their medication. This regimen will help patients regain their strength so they can return to work and provide for their families. In particular, farmers will remain healthy long enough to teach vital agricultural skills to their children so that farming practices will continue to be passed on from generation to generation.

Gashe Zerihun, 49, of Ethiopia is a living example of the power of WFP food assistance. This father of three struggled to support his family after he was diagnosed with HIV/AIDS. Unable to work, he resorted to begging in the street. Now that Gashe receives WFP food supplies, not only are his ARVs effective, but he regained his physical strength and returned to work. Good health has allowed Gashe to earn a decent income and support his family.

Better nutrition

Initiatives, such as PEPFAR and WFP'S HIV/AIDS and nutrition programs, have given millions of patients in developing countries the opportunity to reclaim their lives. We must build upon the current nutrition provisions in PEPFAR to ensure that HIV/AIDS patients and their families get the life-saving food they need. We must also provide WFP with the resources necessary to guarantee that nutrition becomes essential for all HIV/AIDS relief initiatives.

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