

**MARSHALL MATZ /  
KAREN SENDELBACK**

## Remedies for AIDS in Africa

**O**n World AIDS Day today, we are reminded of the staggering statistics surrounding this deadly disease. Daily, 8,000 people die from HIV/AIDS. Every year, there are 5 million new infections. About 40 million people are infected with HIV; approximately 70 percent are in Africa.

We also remember a recent visit to Eldoret, Kenya. In this small village on the dusty front lines of one of Africa's worst AIDS battles, we were astonished to see doctors handing out detailed prescriptions for food along with anti-AIDS drugs.

Food and nutrition are, in fact, vital weapons in the struggle against HIV/AIDS. In some African countries, the devastating disease has cut life expectancy in half — to medieval levels of about 33 years — and left millions of AIDS orphans.

The Bush administration's generous intervention on AIDS is making great and meaningful inroads in Africa, enabling antiretroviral drugs to become widely available: it is a gesture we heard warmly praised by Africans and aid workers alike during a recent fact-finding mission to Africa.

And yet the effectiveness of that multibillion-dollar investment could be greatly enhanced by the prescription we witnessed: food with the medicine. It's a prescription endorsed by the heads of UNAIDS and the World Health Organization.

The logic is simple: Most drugs come with instructions to take before or after meals — a regimen designed for affluent parts of the world, where uncertainty over next meal doesn't exist.

But in Africa, where 1 in 3 people are malnourished and live on \$1 a day, many with HIV can't take even a single daily meal for granted. And while powerful drugs may sustain life, they don't work nearly as well on depleted bodies and empty stomachs.

Field research has demonstrated providing the right food and nutrition at the right time can make a tremendous difference — helping people survive longer, keeping children in school and off the streets, and helping families stay together. It is an idea that we are grateful is finally catching on.

In Eldoret, we visited an innovative program called the Academic Model for the Prevention and Treatment of HIV/AIDS in Kenya (AMPATH) — which works to show holistic intervention in the lives of people with HIV can work minor miracles. Their approach is winning kudos from veterans throughout the aid community.

AMPATH was launched four years ago as a partnership between two Kenyan medical schools and the Indiana University School of Medicine. It provides antiretroviral (ARV) treatment to more than 15,000 HIV-infected Kenyans and,

through generous U.S. government grants, aims to double that by this time next year.

Up to half of all new patients in AMPATH's drug therapy are highly malnourished. One doctor recounted to us how clinicians were shocked to find the average newcomer weighed just 49 kilograms (about 108 pounds). Since, in his words, "drugs don't have any calories," AMPATH created a comprehensive program that involves food "prescriptions" and cooking lessons to ensure good nutrition and development of farms and individual vegetable plots for those on ARVs.

The U.N. World Food Program (WFP) provides food to 440 AMPATH patients and their families. Food is provided for six months — during the patient's initial ARV treatment and immune reconstruction — unless the individual remains very ill. AMPATH finds most patients gain enough weight and strength in that period to return to normal activities. We saw living proof on our visit: vibrant, healthy-looking, productive citizens working on farms, irrigation and other projects.

It is amazing how this simple "prescription" can literally turn lives around. In Kenya's AIDS-devastated Busia and Bondo districts, where WFP provides food to more than 36,000 orphans, vulnerable children and their caretakers, documented results show significant improvements in child nutrition and family health and school attendance. Evidence shows keeping children in school also can protect them from HIV infection.

Consider one HIV-positive widower, 46-year-old Benedicte, father of two boys. When he first enrolled in a drug program supported by WFP food aid, Benedicte arrived on a stretcher to collect his rations. Not long after receiving regular drugs and food, Benedicte could collect his sacks of maize and beans by bicycle. Food and treatment together literally got him — and his family — back on their feet.

Benedicte is a hopeful metaphor for countries and communities hardest-hit by the double trouble of HIV/AIDS and food insecurity. With well-targeted support involving medication and good nutrition, people suffering from HIV/AIDS can confront this terrible scourge. And ensuring food and good nutrition are part of the anti-AIDS package will maximize the effect of the U.S. government's great investment to combat AIDS in Africa.

*Marshall Matz is chairman of the board and Karen Sendelback is chief executive officer of Friends of the World Food Program, a registered U.S. nonprofit that supports WFP and other hunger-relief activities. Mr. Matz was also general counsel for the U.S. Senate Select Committee on Nutrition in 1973-1980.*