

Genieri Collections - Newsletter No.14 - June.2019

Dietary supplementation for the children.

Thankfully the charity's funds are slowly improving, and we can do a little bit more for the children. Current income allows us to provide foodstuffs for them to have a breakfast as well as a lunch during July, August and September. These are months of exceptional hardship, when last year's crops are all eaten, and the next harvest isn't yet ready. Faces are pinched and health declines. It's often said to us that everyone finds their "Hungry Season" very hard.

Some significant one-off donations and acquiring a couple of new generous regular donors has made all the difference to the children's plight.

After a lot of thought about what we might also be able to do next, we focussed on the provision of vitamin supplementation for the children. Their diet is very poor but improving slowly as we provide a little bit more money for more/better foodstuffs, but this is expensive. Vitamin A is in particularly short supply as garden produce is generally very scarce, and especially so during the Hungry Season.

The children's current diet, even in times of "plenty" is very low in Vitamin A, being almost entirely based on white rice, which is a singularly poor source. Recently we've been able to augment the diet with canned meat which they now enjoy, even in the VERY small quantities that we can afford to fund.

Shortfall in the Vitamin has a significant number of unfortunate effects such as:

- ❖ Poor immune systems, leading to general susceptibility to diseases in general, plus
- ❖ Skin Complaints
- ❖ Night Blindness
- ❖ Delayed growth
- ❖ Susceptibility to respiratory complaints
- ❖ Slow wound healing

all of which are common in Africa.



Vitamin A supplementation is surprisingly inexpensive way of mitigating these risks, at a cost of about £3.25 per child per annum. So we funded a years' worth of supplies and enlisted the help of the local GP to administer the material. This was delivered to the children on 11/06/19 in capsule form, augmented by supplementation via a porridge like substance, and the children appeared to be quite keen to get their dose.

It was great to see the project completed from concept to delivery in just 21 days, and the children are now better protected from a number of health risks.

We can only hope that they get stronger over the next few months when the rain and mosquitoes come, as mosquitoes assuredly will – and malaria will follow, just as surely as night follows day.



BETWEEN US WE'RE MAKING A DIFFERENCE.

PLEASE KEEP HELPING US.

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