

## **Positive Planet Grade 7/8 Lesson Plan 2**

### **Goals:**

- Increase understanding of how poor health and chronic poverty are related
- Develop an appreciation of several of the barriers to good health faced by people in the developing world
- Begin to think about possible solutions that the global community can commit to, to address these problems

### **Background - World Health Crisis: A Summary:**

Right now over 2 million childhood deaths occur annually due to vaccine-preventable diseases; 200 million children under the age of five still suffer from malnutrition; 120 million couples still lack options in family planning; and 30 percent of the world is still without access to safe water and sanitation systems. Good health and nutrition are essential for countries to break out of the cycle of poverty.

Over the past century society has made significant improvements in health, nutrition, and population effects. Some of the improvements have been due to education, access to contraceptives, hygiene, housing, clean water supplies and proper sanitation. They are also the result of new knowledge about the causes, prevention, and treatment of diseases.

However, disease patterns are rapidly changing as we enter the 21st century. Because of weak government implementation capacity and market imperfections in the private sector, potentially effective policies and programs often fail. Reforms to address the health of the poor often require redefining the role of the state, with greater government involvement in providing public health activities, securing access to essential health services for the poor, providing information, supporting research and development, medical education, and regulating the medical sector. These changes are hard fought and take time to occur.

Meanwhile, disease and exponential population growth need to be dealt with, and proper nutrition still needs to be realized for millions of people worldwide. Three billion people, half of the world's population, still suffer from diseases and injuries, which can be easily prevented or treated.

### **Questions to think about:**

- What are some of the improvements that have occurred to prevent major health problems in the U.S.?
- What do your parents do when you get sick?

### **Activity:**

Explain to the class that today they are going to explore what happens to children around the world when they get sick.

### **Materials:**

- HIV Fact Sheet
- Malaria Fact Sheet
- TB Fact Sheet

Divide the class into three groups. Give each group the three biographies provided below. Have them read each biography and answer the questions.

Tell the groups to think of at solutions for each case. They will present their solutions to the class when everyone is completed.

### **Biography #1:**

Ahmed is 12 years old and lives in an overcrowded section of a small town in the Rakai District of Uganda. He lives in a one-room shack with his parents and seven brothers and sisters. There are no windows. Ahmed hasn't been feeling well lately. This morning he woke up with a very bad cough and sore chest. His parents think that he might have tuberculosis (TB). They know that this can be life threatening and that they must get Ahmed to the doctor.

Ahmed and his family live in a very small village. They do not have very much money. There is no doctor in their village; the nearest one is 30 miles away. They do not have any transportation to get there and his parents do not know what to do.

### **Doctor #1:**

Dr. Kigozi lives in Kalisizo, 30 miles from Ahmed's village. He has many patients because he is the only doctor working in the hospital that day. He is very busy and has limited medical supplies. Today he has seventy-five people waiting at the hospital clinic when he arrives there in the morning. He helps as many people as he can, but fears that he is not treating all of the sick people in the surrounding area who can't get to the clinic.

### **Questions:**

- What should Ahmed's parents do?
- What should the doctor do?
- Is it up to the government to help Ahmed?
- How can TB be prevented?
- What were the reasons for TB's dramatic decline in the U.S.?

### **Biography #2:**

Kato lives in Masaka, a city of 100,000 people in Southeastern Uganda. He lives with his mother in a small mud hut on the outskirts of the city. Kato has AIDS. Today Kato woke up feeling terrible. He says that some days are better than others, but today is especially bad. Kato's father died of AIDS three years ago. Kato's mom is also HIV positive. She earns what little money they have selling eggs from her six chickens. Kato works everyday selling newspapers on the street even though he is only 8 years old. His mom can take him to the city hospital, but usually when they go they wait for hours to see or even talk to a doctor or nurse. Kato and his mom don't like the hospital. It's not clean, it's too noisy, and there are too many sick people always waiting to see a doctor or nurse there.

### **Doctor #2:**

Dr. Murokora works at the city hospital where Kato goes. She sometimes works 14 to 16 hours a day. She knows the hospital is not perfect, but she tries to help as many patients as she can. It bothers her that they are short on supplies and nurses. She sometimes has to let patients wait all day before someone can help them because they just don't have enough doctors and nurses.

- What should Kato do?
- What can Dr. Murokora do?
- What can the hospital do?
- Who is responsible for providing healthcare to a community? The government? The churches, mosques or synagogues? Others?
- Who should be responsible for paying for treatment for HIV/AIDS patients?

### **Biography #3:**

Farida lives on the outskirts of Kalisizo, Uganda. She is two years old. Her family lives in a very poor area of the town. Their living conditions are unsanitary and meager. There is no plumbing or electricity. They live in a mud hut adjacent to a large swampy field. Farida has been feeling weak lately and her parents are afraid she might have malaria. It is a very common disease in Uganda and at some point in their lives all the members of

Farida's family have suffered from it. Her parents know that it is a dangerous disease because they know several people, especially children who have died from it. They walk the two miles to the pharmacy but they do not have enough money to pay for treatment. They think that maybe the missionary hospital down the road will care for their child.

**Doctor #3:**

Dr. Kidagavu works in the missionary hospital near Farida's neighborhood. He has seen many cases of malaria at the hospital. The hospital was set up to help families like Farida's, but they have had to turn people away because they are full. They have recently run out of many different medicines including the drugs used to treat malaria. Dr. Kidagavu tries to take care of as many patients as he can who come to the hospital without being able to admit them. He often feels overwhelmed.

- What should Farida's parents do?
- What can Dr. Kidagavu do?
- How can Farida's parents help to prevent Farida's siblings from getting malaria?
- What can the Ugandan government or the international community do to eradicate malaria?
- Malaria used to be common in the southern part of the United States? Why is it no longer common?