

Research Article





People with disabilities family: highlighting an ancestral knowledge to guarantee food security

Abstract

The following article describes the research carried out during 2020 in Santander de Quilichao, Cauca of the project called "Family Gardens for Santander de Quilichao" whose lines of work focused on food security and community strengthening in families with children with disabilities; through the implementation of community gardens and training for parents, addressing disability as a sample of human diversity. The project yielded positive results, having as a methodological reference the Community-Based Rehabilitation strategy; directly benefiting 45 families and 150 people, with a total of 30 urban gardens and 2 home gardens. The research carried out shows how community development can be approached holistically, taking up elements of the community; thus facilitating access to and participation of persons with disabilities.

Keywords: food security, family, people with disabilities, family gardens, community gardens, community Based Rehabilitation

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Introduction

According to the Food and Agriculture Organization of the United Nations (FAO, 2020), by 2020 it was estimated that 2 billion people in the world receive an insufficient food diet. Currently, it is believed that due to the pandemic there was an approximate increase between 83 and 132 million people without food security guarantees, of which,1.03 billion people are in Asia, 675 million in Africa, 5.9 million in Oceania, 205 million in Latin America and the Caribbean, 88 million in North America and Europe. In addition, according to the projections of the same organization, it is expected that 840 million people will present malnutrition by 2030 (FAO, 2021).

In Colombia, despite the fact that this figure has decreased in recent years, today 54.4% have food insecurity; Among its main affected are rural populations and vulnerable groups (Colombia, 2020). As a response to the country's social inequity and the lack of food security guarantees, new ideas have emerged such as family gardens; that is, small spaces where a significant amount of vegetables, fruits and spices are produced for domestic use. Through the resignification of ancestral practices, the communities manage to emphasize their strengths and capacities, instead of their shortcomings and weaknesses; giving way to a new process known as community strengthening.

For this reason, at the beginning of 2020, the A-kasa Foundation, in alliance with The New England Association for Colombian Children (NEACOL), Fundación Biodiversa Colombia, Liliane Fonds and the Foundation for the Empowerment and Rehabilitation of Persons with Disabilities (FHAREPDI) carried out a project known as "Family Gardens for Quilichao": a proposal for families with people with disabilities, carried out in Colombia, specifically in the department of Cauca, in the municipal seat of Santander de Quilichao.

So that this type of practice allows us to understand how in Colombia, small agricultural proposals such as family and community gardens influence the quality of life of people with disabilities, their families and the community in general; to generate new spaces for participation and autonomy that benefit the most vulnerable people, creating new spheres of action for people with disabilities.

The Republic of Colombia is a country in South America, which has more than 50 million inhabitants; and by the end of 2019, the

Ministry of Health and Social Protection reported 1,298,738 people with disabilities. Of which, 28,228 people are in the department of Cauca, which is equivalent to 2.3% of people with disabilities of the national total; figure equivalent to 21% of boys and girls respectively.

From a legislative perspective, disability is understood as those barriers that the subject faces to participate in the environment in an equitable manner. With the purpose of achieving a more inclusive society, in 2010, the Colombian government gradually accepted various treaties for the benefit of people with disabilities (Law 1145 of July 10, 2007); to promote and guarantee, through institutions, programs and legislations like Law 1618 of February 27,2013, the implementation of the general principles of disability. This makes the Colombian state responsible for guaranteeing food security, especially for people with disabilities or people who are temporarily in a situation of vulnerability (Colombian Ministry of Health and Social Protection, 2015).⁴

However, the outlook for Colombia is less satisfactory, according to the latest World Bank reports in 2020, low labor productivity, trade integration, disparities in infrastructure and domestic competition, have plunged the country into a deep economic recession; which makes Colombia the country in Latin America with the greatest income inequality and labor market informality.

Added to the above is the precarious Human Rights situation, according to the 2020 the world's largest humanitarian information portal: the increase in violence due to the internal conflict in Colombia, natural disasters and the arrival of migrants to the country has generated a deficit in humanitarian aid; affecting social control, access to territories and limiting the execution of activities that contribute to social development.

It is due to the problems described above that, in Colombia, new strategies have been developed to approach people with disabilities, through Community-Based Rehabilitation (CBR), conceptualized as an immense and varied set of actions that trigger participation processes for people with disabilities.⁵

Food safety

At the 1996 World Food Summit, food security was conceptualized as the set of physical, social and economic guarantees that supply and





satisfy energy and food needs; according to the sociocultural context where the subject is (FAO, 2011).⁶ The government of Colombia from 2008, under the protection of its Political Constitution and the Universal Declaration of Human Rights, takes up this concept of the National Council of Economic and Social Policy; defining it as the ideal and lasting scope of all human beings, to acquire food of equal quality and quantity, which favors a healthy and active life (Ministry of Health and Social Protection of Colombia, 2015).⁴

At the same time, two types of food insecurity are defined: chronic food insecurity, which is the constant inability to meet food needs, this type of insecurity usually arises from economic problems, such as wars or lack of assets; and it is usually only overcome through the implementation of long-term projects.

On the other hand, transitory alternating food insecurity refers to the short duration, together with the sudden inability to obtain food in sporadic conditions, and is usually mitigated through prevention and social projection programs. However, between chronic food insecurity and transitory alternative, there is seasonal food security; that arises from the lack of seasonal food accessibility, given the context's own cycles.⁶

Currently, the UN (2019) together with the FAO proposes a new measurement scale for food security; where it includes obesity, overweight and undernutrition as forms of malnutrition. The Food Insecurity Experience Scale (FIES) estimates food security at the individual, family, group or community level through interviews; according to accessibility, food intake and dietary energy consumption of the population.

Community based rehabilitation (CBR)

Therefore, CBR is a strategy for socioeconomic development and social inclusion that allows satisfying basic needs, creating opportunities, developing capacities, supporting and working with organizations of persons with disabilities and support groups, involving intersectoral participation, promoting leadership and the participation of local governments and take advantage of the legislative, legal and social systems of the country.

Thus, the articulation of CBR and family gardens allows the community the following benefits: food security, possibilities of inclusion, socialization, generation of new support networks and new means of family economy, rehabilitation and development of potentialities in people with disabilities. According to this, the project arises as a social response to nutritional and supply needs, through family and community integration in productive activities in rural areas of the municipality of Cauca.

In this sense, the Family and Community Gardens for Santander de Quilichao are supported from the theoretical point of view, as has been discussed, but also from the praxis, as they promote sustainable actions and community support in the care of the land and the implications that this demand based on five guidelines:

- I. Health: refers to intersectoral work for health promotion, disease prevention and comprehensive rehabilitation for people with disabilities.^{7,8} In this sense, this project sought the articulation of health system with children with disabilities through growth and development controls, together with the delivery of food packages.
- II. Education: refers to the articulated work of school, family and community, so that, through universal access to learning, people achieve the full development of potentialities to be subjects of rights. 7.8 Trainings on nutrition, breastfeeding and disability prevention given to families exemplify this guideline.

- III. Social mobilization: process in which the social organization is consolidated, exercising their rights of autonomy and participation through expression, exchange, deliberation and social dialogue to transform a reality. This was a key component for the project, through community dynamics (such as the exchange of fruits and vegetables), new social groups and networks of family members with disabilities have been consolidated, in search of opportunities for participation and inclusion.
- IV. Subsistence: it is the result of the joint empowerment of people, for the self-management of skills, competencies and abilities in the labor markets; generating new spaces for participation, recognition and enjoyment (Colombian Ministry of Health, 2014); reflected in the marketing and supply of products from the orchards.
- V. Social: it is the mobilization, agreement and participation of a community that, under the same principles, seeks to stimulate public policies for the benefit of social inclusion; where the community identifies a need, becomes empowered and demands change.⁷ It is for this purpose that a discussion was held with public officials on the conditions of nutrition and participation of people with disabilities.

Families of people with disabilities

The Royal Academy of the Spanish Language (nd), conceptualizes the term family as the set of people who live together and have a relationship with each other; its conformation is usually diverse, which aims, as in any other institution, to meet the needs of each member (such as health, education, social mobilization, among others). It is there where the RBC intervenes, so that people with disabilities together with their families have access to opportunities that guarantee their subsistence and participation in the community (World Health Organization, 2012).

On Well, from a systemic perspective, the family functions as an open system that interacts with the different subsystems that make it up and with its environment*, which turns out to be a similar social institution with economic, physiological, affective, educational and orientation functions, which also accompany all the contemporary processes typical of a society; where each member (even before birth) is assigned roles and functions. In the case of families with disabilities, the dynamics are not far from the aforementioned, however, it is according to the role that the family assigns that disabled person and how the dynamics are adapted to current needs.

It is for the above that disability is not directly related as an adverse event, since authors such as Abad-Salgado (2020) and institutions such as the WHO, propose to conceive disability as a different way of accessing, relating to and participating in the world, and with the other. However, it should not be forgotten that the exclusion of people with disabilities is structural, that is, beyond including them within the community, it is necessary to make a structural change; integrating policies aimed at a true concept of inclusion, where all people are understood as subjects of rights and duties.

Rescuing ancestral knowledge through CBR

According to the CBR paradigm, the actions must always be directed to the optimization of human and material resources; so that these are oriented towards community development, well-being, quality of life of people with disabilities and their families. From this perspective, disability, food security together with community gardens can be intertwined, for freedom and the exercise of other rights that promote participation in communities and in society in general.

According to the WHO, the needs of people with disabilities are often neglected, the lack of trained health personnel, together with architectural problems and long administrative procedures, affect access to health care services.

Added to this situation is the nutritional status of people with disabilities, who usually have problems in the digestive system, for the absorption of nutrients and food consumption; causing malnutrition problems. Therefore, based on the need to mitigate food problems such as malnutrition, malnutrition in children with disabilities, the aim is to guarantee food security in this population group.

In this sense, having an optimal and adequate diet is essential not only for survival, but also for the resignification of sustainability practices, as a means of guaranteeing the prevention of food insecurity, developing food production processes, cultivation, its management and harvest, such as the implementation of staggered planting that allows families to have food, promoting healthy and balanced nutrition throughout the year.

It is also true that when speaking of community development as a set of relationships between subjects and entities, the context as a whole is also addressed; where social representations and their impact on community dynamics are taken up again. While people with disabilities can trigger processes that contribute to social capital and promote cooperation, to that extent, support networks and knowledge exchange are built that contribute to the transformation of the community.

Methodology

Faced with this reality, the A-kasa Foundation sought to promote the adequate nutritional status of children with disabilities in vulnerable conditions, through three strategies:

- I. From the traditional strategy "Pancoger" to provide training to families of children with disabilities, for the creation of individual and community gardens in the municipality; promoting healthy lifestyle habits and strengthening food security
- II. Carry out nutritional monitoring of 50 children with disabilities who present cases of low weight, malnutrition and malnutrition due to excess.
- III. Provide accompaniment to families for primary health care, from the CBR.

The project was accompanied by an interdisciplinary team to mobilize the empowerment of families, through the construction of community networks; which, in turn, facilitated the impact on public management and inclusive local development with a transverse ethnic axis (noting that the majority of the inhabitants of the municipality are Afro-descendants).

With the intention of generating greater incidence in the community, before implementing the project, the A-Kasa Foundation carried out a screening of the nutritional status of children with disabilities (due to low weight, malnutrition and malnutrition due to excess); allowing the classification of families that will receive nutritional supplements, such as the prioritization of these in the face of greater vulnerability, so that they would be beneficiaries of family and community gardens. Simultaneously, training was given on breastfeeding, information on Integrated Care for Prevalent Childhood Illnesses (IMCI) and disability prevention, promoting the development of skills that improve their quality of life.

For the execution of this project, it was necessary to start with a small pilot, carried out in the home of some members of the FHAREPDI Foundation, so that the families of people with disabilities would have the opportunity to observe and study all the processes related to planting, and harvest; which in turn facilitated the assignment of roles and responsibilities necessary for the realization of the gardens.

Subsequently, and due to the state of emergency due to Covid-19, it was necessary to make constant home visits to the families, and personally supervise the conditioning of the space destined for the garden; training families on topics such as: the reproductive development of plants, location of the garden, aeration, lighting, proximity to water access points, soil, substrate preparation, sieving, disinfection, composting, seeds, seedbeds, transplanting, associations, rotation and compatibility.

Throughout the realization of the orchards, the families exchanged ancestral knowledge of the communities and techniques on agricultural work to enhance their performance; carrying out different types of sowing, such as: seedlings of big-headed onions, chard, carrots, papaya, coriander, cucumber, beans, beans, long onions, aromatics, celery, rue, rosemary, cassava, pumpkin, papaya, plantain and buttercup (used in the feeding of guinea pigs and chickens).

The Bahai Spiritual Religious Assembly of Alegría not only accompanied the process, they also joined forces with the families to form a seed bank and carry out an exchange between the project participants and other members of the community; generating at the same time a support network for families of people with disabilities. Well, the project was widely accepted within the community and other families began to make family gardens by their own means.

Finally, the planted species are harvested, which are delivered to the families of children with disabilities, who participate in the FHAREPDI Foundation's empowerment and rehabilitation processes, for consumption, exchange and marketing.

Returning to the CBR as a methodological reference

The CBR has been designed to improve the quality of life of people with disabilities, facilitating their access and participation in new scenarios, with the approval of organizations such as the ILO, UNESCO and the WHO, it has been a strategy implemented for more than 30 years; especially in low- and middle-income countries. In this case, through shared forums, and with the articulation of other institutions, the family and the State, the aim was to increase the participation of people with disabilities within the social-community context, training leaders and strengthening community-based organizations.

In addition, this methodology opened new opportunities for children with disabilities to socialize, participate in the planting and cultivation process, establish relationships, acquire new knowledge through practice and interact with their peers in a safe environment, accompanied by their parents: who were discovering various forms of support for their children, so that they can participate in the community.

Children with disabilities were assigned a new role, as subjects of rights and duties with the same educational needs, policies and quality of life as people without disabilities; From the same resources that the community possesses and according to ancestral customs, together with the resources that different institutions such as the state and international cooperation can offer. To generate inclusive community development. And beyond a vision of disability as an exception, it is seen and perceived as a form of expression of the diversity of the human condition.

Results

When presenting the results, it is necessary to go beyond quantitative, tangible and immediate data: well, although mentioning that 45 families and 150 people were directly benefited, with a total of 30 urban gardens and 2 home gardens, with the participation of 27 mothers and 5 fathers; The background of these results must be rescued, and the cultural richness of ancestral and traditional knowledge that can solve a current problem by addressing an intercultural approach. Well, as Eumelia Galeano (2004) says, qualitative research is the result of the fusion between objective reality and subjective reality; allowing to enrich scientific knowledge, bring it closer to reality and transform it into social appropriation of knowledge.

From this perspective, it is possible to affirm that strategies such as CBR are actions originated within the same community, which solve problems in common; In this case, the community garden project employs people's skills and knowledge, seeking to enhance family and community development; guaranteeing food security and recreational spaces, new support networks and coping strategies. Where the main input is the community and from its practices, beliefs and customs, new ideas or solutions are generated that allow them to be protagonists and responsible for their own development.

Conclusions and lessons learned

Finally, after the analysis of all the elements involved in community practices: such as the importance of the joint articulation of knowledge for the development of the community and its members, the generation of new strategies that facilitate these intervention processes becomes necessary. Thus, through theoretical and practical knowledge, the community professional becomes a guide to promote social transformation through their interventions and thanks to this, the actors progress in community participation.

This type of proposal has added value as a therapeutic strategy, positioning the subject as a political being, with the capacity for self-sufficiency, self-development, the creation of new community networks and social capital. Therefore, it is possible to affirm that Community-Based Rehabilitation is a means to establish a direct relationship between food security and the well-being of a community; especially in vulnerable population.^{11–14}

As a challenge, the rescue of the ancestral knowledge of the communities, especially in a country as multicultural as Colombia, whose knowledge is being dismissed by the new generations, and that through the creation of networks the flow of knowledge is encouraged. At an organizational level, Fundación A-kasa intends to achieve greater impact to contribute to community development at the national level, with the support of community-based organizations in the territory, achieving the inclusion of people with disabilities.

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Conflicts of interest

The author declares there is no conflict of interest.

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