Alternative Report

The VOICE of Panama’s Indigenous Women

Background:

Women from the Republic of Panama’s seven (7) indigenous communities met in Panama City on 27th November 2009, and as a part of the National Indigenous Women’s Coordination of Panama (CONAMUIP), the Association of Ngöbe–Buglé Women (ASMUNG), Bri-bri women, Naso women, Kuna women, Emberá women and Wounan women, we sign this report.

1. Introduction

Panama’s indigenous population comprises 285,231\(^1\) inhabitants of which 139,109 are women; this population is made up of seven ethnic groups: Naso, Bri bri, Kuna yala, Embera, Wounan, Ngöbe and Bugle, and with the exception of the Naso and Bri-bri, their territories have been legally recognized after generations of struggle and sacrifice. As part of this vindication process, we as indigenous women have played an important role in the history of our peoples and of the country, by conserving and protecting their cultural bio-diversity and passing on our ancestral knowledge.

We have created a process for formalizing our work with communities, which has allowed us to establish a context for continuing to work towards planning and putting forward specific activities in traditional meeting places (congresses and traditional authorities), where for the most part decisions are taken by men.

We as indigenous women have to overcome barriers that limit our effective participation in the development of our communities, including the uncertainty that comes with discrimination on the part of society and governments. These barriers include:

- 86.4% of indigenous people in Panama live in extreme poverty.
- Lack of government public policies towards indigenous districts.
- Government’s failure to comply with public policy.
- Low level of implementation of the laws relating to indigenous districts by the national government.
- Failure to provide budgetary resources that are appropriate to our reality, and the need for such budgets to be administered by indigenous people within the context of our own communities.
- Lack of integration into public works without the age old discrimination against our culture.
- The failure of Government entities to recognize our women’s empirical and practical knowledge.
- Lack of an appropriate salary.
- Failure to implement bi-lingual education for us in universities in our own communities and elsewhere.
- Lack of health infrastructure (hospitals with suitably qualified personnel).
- Low level of financial support to undertake productive and economic activities.

\(^{1}\) GENERAL CONTROLLER OF THE REPUBLIC OF PANAMA. see: http://www.contraloria.gob.pa/inec/Aplicaciones/POBLACION_VIVIENDA/volumen2/cuadro7.htm
• Lack of recognition by men of our rights as women.
• The indigenous population of Kuna Yala, and particularly the young people and adolescents, have the fifth highest incidence of Acquired Immune Deficiency Syndrome (AIDS) in the Republic of Panama, after the metropolitan area and the eastern part of Panama Province.
• High mortality rates arising from complications during pregnancy, labour, childbirth, and from cervical and breast cancers.
• Migration influencing risk behaviours both for men and women.
• The very strong cultural and religious influences on the number of children in a family.

These circumstances that we contend with as indigenous women boys and girls in Panama are clearly shown in indices that reflect the reality that:
• Literacy rates that reduce women’s involvement through keeping them in ignorance of their rights, leading to low levels of participation both in politics and in pursuing opportunities for credit.
• The high rate of infant mortality as a result of difficulties in accessing remote health centres, and failure of local authorities to provide preventative health care programs.
• Levels of malnutrition affecting children as a result of lack of a food safety policy.
• Early pregnancies arising from the lack of prevention programs involving young people whether in formal or informal education, and a low level of awareness or sense of responsibility on the part of the family. There is no policy to raise awareness of this issue either within national or traditional government authorities.
• The problem of HIV or AIDS and STDs in the world’s indigenous populations is not limited to epidemiology, but also is caused by issues such as racism, poverty and lack of knowledge about sexuality within these communities’ world view. Lack of hard data and statistics allowing a diagnosis of the epidemic among indigenous peoples in the interior.
• The rate of maternal mortality, children left unprotected, more support for traditional midwives in terms of logistics and materials support and better training.

We recognize the advances that have been made in terms of laws protecting the rights of women and children; nevertheless the implementation of these laws has had little effect on changing the reality that we experience. Our efforts and challenges as women are directed at contributing to a society with equality of opportunity, where this is recognized not just by legal instruments, but also by us being the activists bringing about this change from our own point of view.

II. RIGHTS

1. Individual rights.

Indigenous women have suffered direct discrimination, illustrated in the following examples:
• The right to live without violence: to enjoy freedom of choice, to pursue their own personal development and to contribute to community development are among the aspirations of women who have been held back by male chauvinistic behaviour and cultural expectations. The work done by women who are leaders in their own homes is not recognized, and they are excluded from making decisions about the family budget, health care and their own personal care, because they were brought up to be submissive, without the possibility of questioning or improving their position of submission and discrimination which leads them to suffer all kinds of violence against the integrity of their life and that of their family.
One example of this suffered by indigenous women is the violence perpetrated against them by their husbands, and this might occur because they do not know their rights as women. It is even the case that money transferred to them by the government or the government benefit known as “red de oportunidades (opportunity network)” is often seized by their husbands and when the women complain they are mistreated.

- **Right to work:** domestic workers do not have legal contracts guaranteeing their rights, and all their rights are being violated as they work in sub human conditions. Families that move to work in the cane fields or coffee farms, harvesting water melon, tending cattle or in other activities do not receive a fair wage and are exploited. Indigenous women are rarely hired to work in public institutions or private companies.

- **Right to social and political participation:** women find themselves at a disadvantage because no gender policy has been developed that recognizes our reality; as women we are committed to developing the family unit, the community, to contribute to the family income and these responsibilities have been effectively achieved, while the men have still not involved themselves in family affairs. Little help has been forthcoming from the traditional and governmental authorities towards achieving participation by women (in the boards of congresses, as chief, elected governmental positions, public posts).

- **Right to education:** there is legal backing for the State’s guaranteed compliance with an educational policy that is appropriate to our reality, but it has not been implemented for the following reasons: the award of scholarships (primary, secondary, university) with conditions attached by the government that do not take into account the real needs and strategies of indigenous people; lack of government willingness to implement bilingual education (formal and informal); lack of school supervision leading to teachers not fulfilling their timetable, to the detriment of their students’ studies; indigenous populations should have access to education of warmth and quality through effective supervision and direction with continuous permanent follow up in education centres; undertake end of year evaluations in order to measure the knowledge acquired in accordance with programs and plans, and that teachers do not prohibit the use of indigenous languages in school. Raising awareness among both indigenous and non indigenous teachers of the need for teaching to be a vocation, and to have adequate infrastructure for teaching.

- **In economic issues:** low level of budgetary provisions for the execution of programs and projects in the indigenous districts and lack of implementation by institutions, which limit the establishment of a development strategy for the indigenous districts; the need for an economic policy that promotes the establishment of micro companies, businesses, using natural resources in a sustainable way.

- **Right to health:** health care, both preventive and curative, must embrace herbalists and midwives, together with logistical and material resources assigned and regulated by the relevant institutions. The work of women’s and young people’s organizations must be supported in order to promote sexual health, and above all this must be concentrated in places where there are primary, secondary and university level facilities. Article 55 of Law 10 establishing the Ngöbe-Bugle indigenous district provides for the establishment of health development programs providing inter cultural health care, and that intercultural and gender care be incorporated and implemented within the health regulations. (Specifically as with the case of labour where a companion is permitted to accompany the mother by right. The choice of both traditional and western medicine must be provided according to the circumstances, if requested.)
2. Collective rights.
   - Right to land. To the indigenous population, the land represents life itself for which reason its use is held in common (as in a family) and in a sustainable way so that natural resources, vegetables, flora, fauna and minerals form part of it and any disturbance, seizure or exploration in the form of mega projects such as hydro electricity, mines, exotic plantations or in any other intrusive form would endanger the continuing life of its people and the universe.
   - Right to preserve traditional knowledge and collective intellectual property, recognition of traditional knowledge of music, song, traditional medicine, art and handicrafts, language and spirituality.

III. RECOMMENDATIONS:

We suggest to the Committee that the following recommendations be made to the Panamanian State:

1. That it is necessary for indigenous women freely and safely to be able to participate in society without having to dispense with their own cultural attributes, and to be able to be participants, managers and actors in the process of planning, executing and benefiting from their own development as part of the family, the community and their own organizations, and that their proposals be taken into account by the State as solutions to their problems. And that prior consultation be guaranteed in respect of plans directed at indigenous women.

2. That existing laws relating to defending the rights of indigenous women and children be implemented.

3. That the different areas of traditional knowledge of indigenous women be valued and guaranteed and that they be strengthened through training, and that in the future the work of indigenous women be valued and remunerated. As an example the traditional midwives who provide services in the health sector without any kind of payment from the State.

4. That inter cultural care, including gender equality, be incorporated into health care regulations. (Specifically as with the case of labour where a companion is permitted to accompany the mother by right).

5. That women in labour be given the right to choose how they should be delivered (vertical childbirth, squatting, lying down or in accordance with the practice of the area etc.) with the option of delivering the placenta when requested with the help of doctors and traditional midwives, and with private areas where these they can be attended by these practitioners, providing a choice between traditional and western medicine according to the circumstances of the case of requested by the patient.

Natural Resources.

6. That no national or international agreement be signed without prior consultation where the people have real information about the negative impact that such agreement creates for the people and the ecosystem.

7. That the government safeguard our native author right.
8. That the Ministry of Education introduces bilingual education and that programs are provided for young people relating to sexual and reproductive health, to encouraging cultural activities and respect for their identity.

9. That in the area of domestic violence, programs of prevention are provided, together with people trained in the application of the law and centres for providing service and collecting statistical data that will focus on a policy of social security for indigenous peoples.

10. That the participation of women in public roles be given a high profile both in indigenous districts and non indigenous areas, and that those who direct public policy undertake to promote, raise awareness and propose activities to change the cultural patterns that limit women’s access to political arenas, and give men a role in family responsibility in order to ease the women’s burden of domestic responsibility.

11. That indigenous regions be provided with human resources and areas with the potential for sustainable socio economic development required to create investment and financing plans to encourage small and medium enterprises to engage in different productive and economic activities.