
Central African Indigenous Peoples: Losing their health along with their forest

The Indigenous hunter-gatherers of the central African forests, so-called Pygmy peoples, consist of at least 15 distinct ethnolinguistic groups including the Gyéli, Kola, Baka, Aka, Bongo, Efe, Mbuti, western Twa, and eastern Twa living in ten central African countries: Angola, Cameroon, Equatorial Guinea, Central African Republic, Gabon, Republic of the Congo (Congo), Democratic Republic of the Congo, Uganda, Rwanda, and Burundi. Their estimated total number is from 300 000 to 500 000 people.

The term Pygmy can have pejorative connotations, but is used here as a term adopted by indigenous activists and support organisations to encompass the different groups of central African forest hunter-gatherers and former hunter-gatherers, and to distinguish them from other ethnic groups who may also live in forests, but who are more reliant on farming, and who are economically and politically dominant.

Pygmy peoples' health risks are changing as the central African forests -which are the basis for their traditional social structure, culture, and hunter-gatherer economy- are being destroyed or expropriated by logging, farming, and conservation projects:

"...since we were expelled from our lands, death is following us. We bury people nearly every day. The village is becoming empty. We are heading towards extinction. Now all the old people have died. Our culture is dying too..." Twa man displaced from the Kahuzi-Biega National Park, Democratic Republic of the Congo.

Traditionally-living Pygmies live in small, mobile, egalitarian groups whose livelihood strategies are based on hunting, gathering, small-scale farming, and exchange of forest products with farming neighbours. They regard themselves as belonging to the forest, intimately connected through the spirits of their ancestors and of the forest. Pygmy communities continue to maintain forest-based livelihoods where possible, but many are spending more time in roadside settlements, with closer contacts with neighbouring Bantu farming communities, and more reliance on farming and wage labour.

In the Great Lakes area of central Africa, extensive forest clearance has made most Twa Pygmies landless, impoverished, and struggling to maintain cultural identity.

Mortality rates in Pygmy communities are high, as are fertility rates. Loss of a forest-based life can be associated with increased mortality. The crucial importance of land for survival is indicated by a reported drop in mortality in children younger than 5 years from 59% to 18% when Twa families in Uganda were given land.

Where forest dietary resources are depleted by destructive logging or commercial poaching and Pygmy people do not have lands on which to grow alternative foods, nutritional status decreases. Children and pregnant women are especially vulnerable, the problem being exacerbated by the breakdown of traditional food-sharing systems.

Loss of forests also deprives Pygmy communities of their renowned traditional herbal pharmacopoeia, which contains compounds active against diseases including helminthiasis, guinea worm, jaundice, malaria, diarrhoea, toothache, and cough.

As Pygmy communities spend more time outside the forest in fixed settlements, malaria increases and parasites accumulate because of increased population density and poor sanitation.

Traditional cultural mechanisms for dealing with tension and discord (such as nocturnal singing ceremonies to restore harmony between the group members and the forest) are eroded; alcohol abuse and domestic violence against women increase.

In much of rural central Africa, primary health services are absent, function only in a rudimentary way, or have been destroyed during conflict. Even where health care facilities exist, many Pygmy people do not use them because they cannot pay for consultations and medicines, do not have the documents and identity cards needed to travel or obtain hospital treatment, or are subjected to humiliating and discriminatory treatment.

Pygmy peoples have shown themselves to be resilient; for centuries they have been adapting to new situations while maintaining their cultural distinctiveness, as long as they can still have access to forests. Pygmy groups who are still able to lead a largely forest-based life have better health in several respects than nearby farming groups. Forests are also where they feel at ease, a vital component of their sense of wellbeing, and mental and spiritual health. By contrast, loss of forest lands and resources, and the consequent sedenterisation, increases Pygmy communities' risks of inadequate nutrition, infectious diseases, parasites, and HIV/AIDS without necessarily increasing their access to health care.

To protect and improve Pygmy peoples' health, governments, development agencies, missionaries, and non-governmental organisations must work to secure Pygmy peoples' rights to their customary lands and resources -to their forests.

Excerpted and adapted from: "Health of Indigenous People in Africa", Nyang'ori Ohenjo, Ruth Willis, Dorothy Jackson, Clive Nettleton, Kenneth Good, Benon Mugarura, Series of Social Determinants of Health, http://www.who.int/social_determinants/resources/articles/lancet_ohenjo.pdf