The Effect Of Globalisation On Lives Of The Pygmy People

Indigenous peoples worldwide are subject to marginalisation and discrimination, systematically experiencing poorer health than do majority groups. In Africa, poor health in the general population is widely recognised with lower health status of Indigenous peoples, however it is rarely noted. Defining Africa's indigenous group is probably the most complicated due to the lack of recognition of indigenous groups by the Government. (Ohenjo, et al., 2006) noted All Africans are indigenous to Africa while the white European colonialists are seen as the intruders. The broad and widely accepted working definition of "indigenous communities, peoples and nations" Produced by the UN Permanent Forum on Indigenous Issues. To this day, every community are confronted with threats, challenges to their traditions, racism, logging and conservation causing serious health problems and violent abuse.This paper will explore how modernisation, development and globalisation have affected the health and wellbeing of the Pygmy people.

History

Globally, 370 million indigenous people are estimated to be currently living in over 70 countries across every continent (UNPFII 2009). More than 14.2 million self-identifying indigenous people live in Africa. Historically they have been loosely categorised into three groups. Hunter-gatherers; exemplified by the Pygmy people of Central Africa and the San of Southern Africa. Fisher people and pastoralists; who range from the Massai of Kenya and Tanzania, to numerous communities in Sudan and Ethiopia, Tuareg in west and northern Africa and the Himba in Namibia. Pygmy people in particular are the indigenous hunter gathers of central Africa and are often referred to as "people of the forest". Their population is from of 300-500,000 (Ohenjo, et al., 2006).

Development

Traditionally-living Pygmies live in small, mobile groups whose livelihood strategies are based on hunting, gathering, small scale farming and exchange of forest products with farming neighbours. They believe that they belong to the forest, intimately connected through the sprits of their ancestors and of the forest (Ohenjo, et al., 2006). Due to development, the Pygmies are in a state disappear with their health risks increasing due to changes in the central African forests. Forests are being destroyed or seized by logging, farming and conservation projects which are the basis for their traditional social structure, culture, and hunter-gatherer economy. By being forced to leave, many are unprotected, moving closer to the roadside and a reliance on farming and living like virtual slaves. In August 2008, it was noted that nearly 100 Pygmies were released from slavery in the Democratic Republic of the Congo (DRC), of whom almost half came from families who had been enslaved for generations. (Survival International Organization, 2009)

By having to move closer to civilization for work, rates of alcohol abuse and domestic violence have increased. Previously traditional cultural mechanisms, such as nocturnal singing ceremonies to restore harmony between the group members and forests would have been used to settle any conflict. During the Congo Civil War, Pygmy people were hunted down and eaten

like game animals by rebel soldier along with people wanting to clear the land for mineral exploration (Clayton, 2004).

Common health issues

It is well known that the health of indigenous groups are measuredly worse than the non-indigenous groups within their society. As a indigenous community constitutes a large proportion of the world's poor, they as a result experience a significantly higher morbidities, shorter life expectancies and higher mortality rates (Ohenjo, et al., 2006). However due to being highly under-researched with a lack of reliable information, particularly from low income countries where majority of indigenous people reside, it is difficult to ascertain the exact magnitude and extent of the issues affecting their population. Nutrition, access to health care and overcoming stigma/discrimination are the key issues I will explore.

Decline in nutritional status

As a result of development and globalisation, the health of the Pygmy community has become compromised. The forest provided them with their ability to hunt and gather along with grow fruit and vegetables to meet dietary requirements. But as a result of commercial poaching and logging forests Pygmy people are forced to leave causing their nutritional status to decline as a consciences. Loss of forests also deprives pygmy communities of their renowned traditional herbal pharmacopeia, which contains compounds active against disease including helminthiasis, guinea worm, jaundice, malaria, diarrhoea, toothache and cough (Borchert, et al., 2005). They as a result are in danger of losing their rich traditional knowledge of herbal medicine. As they spend more time away from the forest in settlements, the rates of parasites and malaria increase due to living in closer quarters with poor sanitation.

Healthcare

Most communities are unable to access healthcare due to lack of availability, lack of funds and humiliating ill-treatment. Even when health care facilities exist, many Pygmy people do not use them as they are unable to pay for consultations and medicines or simply do not have any documentation or ID cards needed to travel or be admitted to hospital. Due to their "inferior" status, they were forbidden to register the birth of their children, who therefore have no identity cares and are "invisible" with regard to the law and excluded from the country's development process. Without registration, these children are denied the basic right to education and health care- services that are crucial to isolated and vulnerable population. Studies by Borchert (2005) showed 20-90% of the pygmy population, most of whom are children had latent infections. Prevalence was lower in communities receiving good medical care and information on basic hygiene. A vaccination campaign in Congo during 1996 was noted to prioritise treatment to the Bantu community over Pygmies and when comparing mortality rates against Bantu children, Pygmy children have a higher a rate from measles, yaws and leprosy (Ohenjo, et al., 2006).

Modernisation to improve health and overcome stigma

In 2004, The United Nations International Children Emergency Fund identified that health crisis of the Pygmy community and in line with the Millennium Goals, supported a measles immunization campaign. Apart from vaccinating them for the first time against the diseases it

also drew attention the array issues affecting Pygmy children and their families. Since then, the UNICEF has assisted with birth registration, nutrition, HIV/AIDS prevention and hygiene and sanitation programmes. The project continues to bring health and protection services to over 26 villages in central Africa. In 2007, the UNICEF project serving Pygmy population has trained over 104 peer educators, 4 in each village to promote better hygiene, nutrition and health care in their villages (United Nations International Children Emergency Fund, 2007). By actively involving and teaching people in the communities, the benefits will be long lasting and ensure the project is sustainable. Since recognition by the UNICEF, health initiatives have reached the community and attitudes of the Pygmy people are beginning to change. They are accepting help in their village and are now aware of the free services that are provided by the government along with Nongovernment organizations. Too many children have already suffered and died from these easily preventable diseases in the year 2000. An account from a 28 year old admits that life in the forest is extremely tough and when children become sick they are unable to send them to hospital due to having no money. They still battling with stigma from local populations making forest life even more attractive. Living life in the forest is very important and it was where they belong. (United Nations International Children Emergency Fund, 2008)

Conculsion

The resilience exhibited by the Pymgy people is remarkable. They have shown to be able to adapt to new situations whilst maintaining their cultural distinctiveness, as long as they can have access to their forests. The Forest their home and is part of their spiritual, mental wellbeing. The tribes that are able to live a forest based life are in better health to those of nearby farming groups. From this it clear that forcing “development” on tribal people does not make them happier or healthier. In fact, the effects are devastating as a consequence of Government greed, the pygmy people are losing their land causing them to slide into poverty, ill health and profound destruction of their traditions, identity, culture and their connection to their land.

Help from Governments, development agencies, missionaries and nongovernment organisations must respect Pygmys peoples’ rights to their customary land and resources. Involving and educate them on access to health care along with establishing programmes that have a lasting and sustainable impact on them. The key understanding is the most important factor for indigenous people wellbeing is having their land respected by all.