

SERVICE AND COOPERATION ASSOCIATION WITH THE
YANOMAMI PEOPLE

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VIOLATIONS OF THE RIGHTS OF THE YANOMAMI PEOPLE



MANAUS - AMAZONAS - BRASIL

SUPPORT
KURIKAMA YANOMAMI ASSOCIATION
FOREST PEOPLES ADVISORY ASSOCIATION

CONJUNCTURE ANALYSIS



INTRODUCTION

A people of recent contact, the Yanomami suffer from economic intervention in their territory and are constantly threatened and subject to a series of interferences in their way of being and life. This situation is not by chance: they inhabit the largest Indigenous Land in the country and the first to be demarcated, as a result of the democratic achievements of Brazilian society in the 1980s, with the promulgation of the Federal Constitution of 1988.

In the last seven years, the political situation in relation to indigenous rights has deteriorated significantly with the coming to power of a congress composed mainly of congressmen from conservative fronts. A trend that was accentuated with the coming to power of the current president of Brazil, Jair Bolsonaro, declaredly opposed to the demarcation of indigenous lands.¹

In this context, new threats are compromising the constitutional rights acquired by indigenous peoples, bringing new risks to the existence of indigenous peoples and in particular to children and adolescents, with clear insecurity regarding future prospects.

This scenario has strengthened positions of misdemeanor, illegality, abuse and impunity regarding territorial invasions and illegal extraction of natural resources such as wood, minerals, predatory fishing, natural fibers, among others, which, combined with negligence in meeting basic rights such as Health and Education, has been killing indigenous people within its territory daily.²

The weakening of the government's indigenous policy is reflected in a drastic reduction in working conditions and in the supervisory capacity of the National Indian Foundation (FUNAI). The Yanomami Indigenous Land, for example, has only three inspectors from the Brazilian Institute for the Environment and Renewable Natural Resources (Ibama) and at least 10 from the National Indian Foundation (Funai), to protect and guarantee indigenous access to services, basics, especially health.³

It is an area of 9.6 million hectares, between the states of Roraima and Amazonas, with almost 30 thousand indigenous people divided into more than 300 communities. A territory equivalent to the size of Portugal or the state of Santa Catarina and where groups and clans with six different languages live.

With regard to specific indigenous rights, such as consent and free, prior and informed consultation, in addition to access to specific and differentiated public policies, the organized indigenous movement faces many challenges, seeking to guarantee the social gains granted by the Constitution.

THE PL 191/2020

The Public law project 191/2020, presented as defining the legal norms for mining in indigenous lands, is an example of violation of the right to free consultation of indigenous peoples. It is currently under analysis by a Special Committee in the Chamber of Deputies. The approval became a priority for the Bolsonaro government in the last year of its term as president of the Republic and expresses the tug of war between sectors that want mining on indigenous land and those that see this process as unconstitutional and a real threat to the way of life of the people. Indian people.

In March 2022, the Federal Public Ministry (MPF) spoke out against the project, reiterating the unconstitutionality of the proposal. In the document, the Chamber of Indigenous Populations and Traditional Communities of the Federal Public Ministry (6CCR/MPF) – a higher body linked to the Attorney General's Office (PGR) highlights: "The state of belligerence, external threat or even the declaration of war between two or more countries do not authorize the reduction of the system of international protection of human rights, particularly of minorities and vulnerable groups".



1 - <https://www.cartacapital.com.br/politica/bolsonaro-celebra-que-governo-nao-demarcou-nenhuma-terra-indigena/>

2 - <https://apubh.org.br/acontece/violacoes-e-violencias-do-governo-bolsonaro-aos-povos-indigenas-sao-denunciadas-na-onu/>

3 - <https://g1.globo.com/rr/roraima/noticia/2021/11/16/terra-yanomami-possui-3-fiscais-do-ibama-e-10-da-funai-para-protoger-maior-reserva-indigena-do-brasil.ghtml>

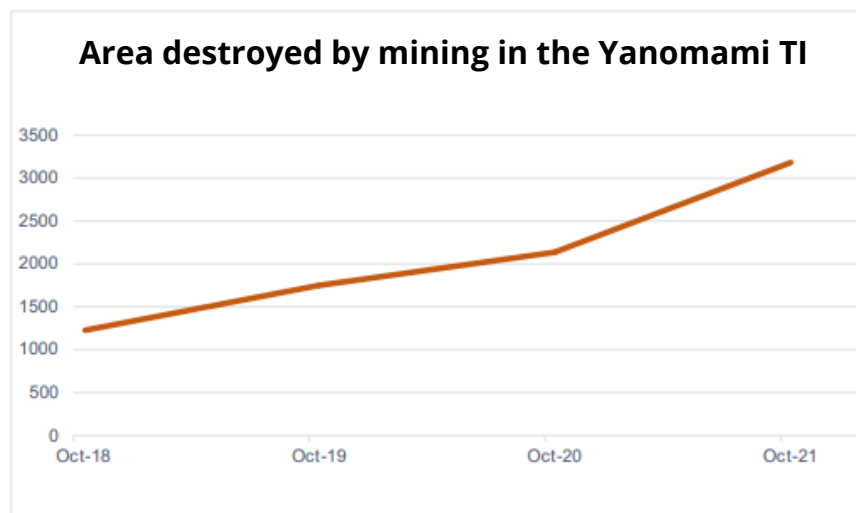
4 - <http://www.mpf.mp.br/pgr/noticias-pgr/pl-191-2020-mpf-reitera-manifestacao-contraria-a-proposta-que-regulamenta-mineracao-em-terras-indigenas>



According to the report “Yanomami Under Attack: Illegal mining in the Yanomami Indigenous Land and proposals to combat it”, released in April 2022, this is the worst time of invasion since the TI was demarcated and homologated, thirty years ago. Deforestation and contamination of rivers and fish are the most obvious part of the damage, however, the illegal extraction of gold and cassiterite in the Yanomami territory is directly linked to the explosion in cases of malaria and other infectious diseases, with serious consequences for health and for the family economy, and a frightening upsurge in violence against indigenous people.

Although illegal mining is nothing new in TIY, the scale and intensity grew by 3350% from 2016 to 2020, according to Mapbiomas data. This upward trajectory since 2016 and has accumulated higher and higher rates.

The testimonies contained in the report also bring complaints from Yanomami children and young people about rapes, sexual harassment and the explosion of cases of infectious diseases such as malaria, in addition to cases of violence and deaths. A context of interrupted trajectories, of a health crisis, of communities being subjected to multiple dimensions of violence.



1: Area destroyed by mining at TIY from October 2018 to October 2021, SMGI. Yanomami Report Under Attack: Illegal mining in the Yanomami Indigenous Land and proposals to combat it, pg. 9.

WHO IS SECOYA?

The Association Service and Cooperation with the Yanomami People (Secoya) is a non-governmental, non-profit organization that has been working since 1991 with the Yanomami People of the Middle Rio Negro, in the state of Amazonas, through actions in the fields of Differentiated School Education, Health Education, Political and Technical Training, in addition to support for the organizational process. It has an indefinite term, which is governed by the Bylaws approved by the members within the legal norms of Brazilian legislation.

Secoya's work is based on interculturality in which the need to act in a perspective to reduce the damage of the asymmetry of power of the 'napë world' (non Yanomami, foreigner) in relation to indigenous cultures is recognized.

Its activities focus on the field of public policies, aiming to favor the Yanomami leadership and the defense of their rights.

2.1 Brief history

In 1992, Secoya's Education actions began, affected by tuberculosis, malaria and acute respiratory diseases.

It is important to remember that this period was marked by an almost complete void of the state's presence among the Yanomami people, and without any health care and/or structured education before Secoya's arrival in this area.

With an in-depth study of the Yanomami language (Xamatari), in view of bilingual education suited to the Yanomami reality, activities were initiated, prioritizing literacy in the mother tongue, in order to establish a learning process through linguistic mastery and appreciation of the Yanomami culture, before introducing the teaching of the Portuguese language.

In 1994, it began the training process for Indigenous Health Agents - AIS, aiming at the autonomy and participation of representatives of the population in activities carried out on their lands.

In 1997, Secoya was officially founded with the aim of defending the rights and interests of the Yanomami people located in the Middle Rio Negro region, as well as promoting their articulation and exchange with other indigenous peoples or organizations.



WHO IS SECOYA?

In 1999, in the field of health, Secoya established the first agreement with the National Health Foundation - Funasa (Ministry of Health) to carry out basic health actions in the scope of its area of operation in Amazonas, which is an integral part of the Yanomami and Ye'kuana-DSY Special Sanitary District, with a view to creating better living conditions for the population.

In 2001, the process of training Yanomami teachers for indigenous teaching began in a bilingual, differentiated and intercultural perspective.

In 2002, it started a Sustainable Development program aimed at "Improving food, cultural recovery and marketing of Yanomami products", through the Demonstration Project of Indigenous Peoples - PDPI, a Federal Government program created under the Ministry of the Environment, which advocates the consolidation of the demarcation process for Indigenous Lands.

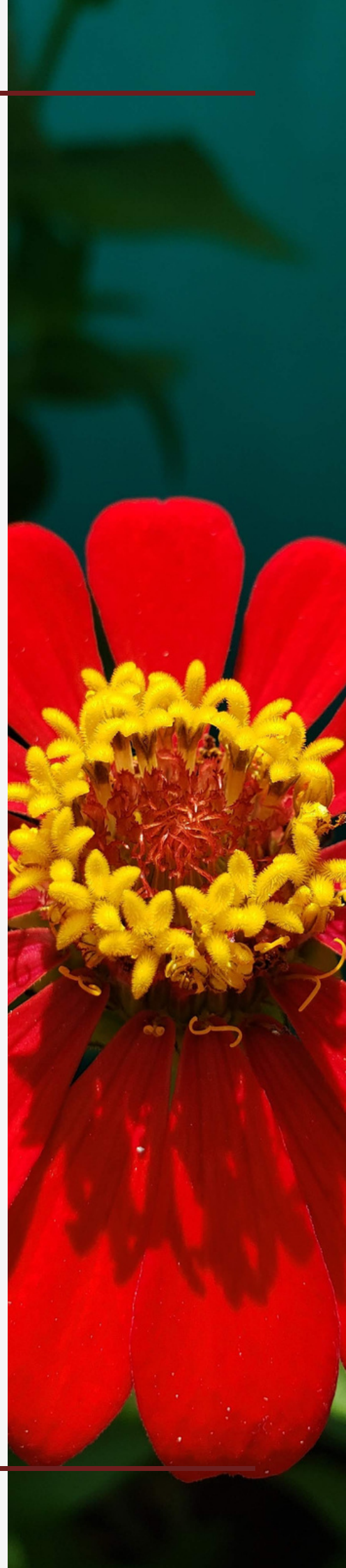
In 2008, based on the Secoya's New Directions Seminar, it defined as a cross-cutting goal "To bring Secoya's indigenist action closer to the Yanomami reality, also advocating: progressively reorienting actions in the health area towards health education, social control, support for complementary actions;

strengthen the Differentiated School Education and Sustainable Development programs; to act in training and strengthening the movement of the entire Yanomami people (Amazonas and Roraima) and instituting a continuous training program for Secoya's teams.

In 2009, Secoya ended its agreement in the field of health care with the government, after 10 years of hard work, due to the total lack of conditions and the non-compliance by FUNASA with the agreements signed, mainly with long delays in the transfer of resources.

In 2015, the training process of 29 Yanomami teachers in indigenous teaching was completed, who were duly certified by the State Department of Education.

Also in 2015, the Associação de Assessoria aos Povos da Floresta (Aflora) was created, which took over the administrative management of Secoya, with the objective of supporting the important work with the Yanomami people, overcoming the consequences of the partnership with the National Forestry Foundation, Saúde (Funasa) which, in addition to not complying with its contractual obligations, left Secoya in a difficult situation before government inspection agencies.



In 2017, the 1st edition of the Meeting of Yanomami women of Rio Marauíá was held, a demand of the indigenous themselves, with the participation of men to hear the issues of the universe of their companions, mothers, daughters and granddaughters, promoted by the Health Education Program .

In 2021, the second¹ edition of the meeting brought together 10 different communities at the xapono Balaio and had a partnership with the Oswaldo Cruz Foundation (FioCruz) so that women could share experiences and information about traditional Yanomami practices and knowledge in monitoring pregnancy, delivery and postpartum.

A new teacher training program began with a selection process that included the participation of 126 candidates from all the xapono of the Marauíá and Demeni rivers. For this stage, 51 vacancies were made available. The training starts in 2022 and is expected to last five years.

Over these 25 years of presence among the Yanomami people, Secoya, through its action programs², has contributed significantly to establishing the foundations of a differentiated school education in the villages, in a bilingual, intercultural and differentiated perspective recognized by the government today. It stimulated important actions in order to guarantee subsistence conditions that would meet the new reality of the Yanomami people, in addition to creating the bases for an organizational process still being consolidated among the Yanomami of the Amazon.

It is also possible to state that Secoya managed to build a privileged relationship with the Yanomami people, through a continuous action in the fight for the defense of their rights, in a context of effective marginalization and rapid changes in the sociocultural structure due to external influences on the lives of the villages.

ORGANIZATION ADMINISTRATIVE

As a civil association, Secoya's organizational structure is constituted from the General Assembly, which represents the highest decision-making body, formed by the members, by an Executive Board, of which one is indigenous and a Fiscal³ Council, in addition to the Labor Departments. Secoya's Board of Directors and Fiscal Council are elected for a 2-year term. In addition, Secoya made room for some Yanomami to represent their people as a member of the institution, participating in assemblies and their most important events.

This is an unusual reality in the indigenous world and one that Secoya insists on valuing and consolidating, understanding that the interested parties themselves must be progressively trained to assume co-responsibility in the defense of their interests.

To enable its actions with the Yanomami people, Secoya has the following structure:

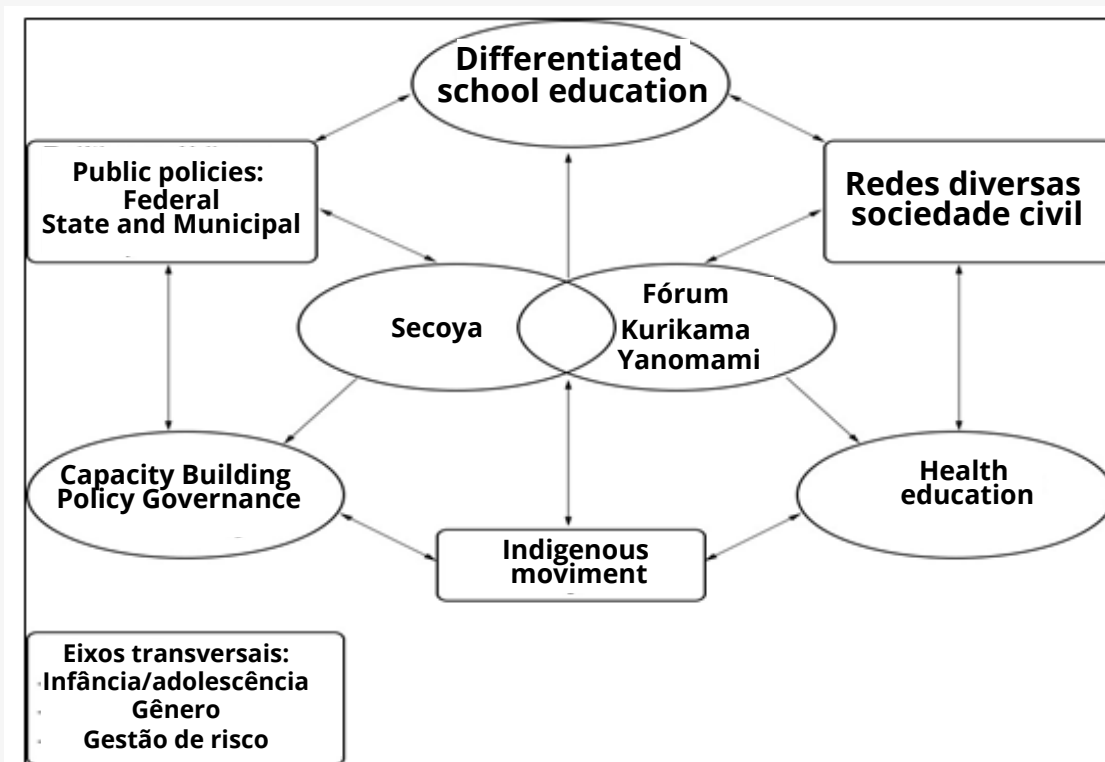
- A rented administrative headquarters in the city of Manaus, where all field actions are planned and organized, as well as the articulation and management of all projects;
- Its own institutional headquarters in the city of Santa Isabel do Rio Negro, also serving as an operational base for activities carried out on the Marauíá River;
- A radio license for communication between the Secoya bases and the Yanomami in the municipalities of Barcelos and Santa Isabel do Rio Negro - AM;
- River transport equipment.



The tools for monitoring the execution of resources are fed by the administration and worked together with the program coordinators, enabling a better view of the execution of the agreement and planning of expenditures. This work enables a better relationship and integration between administration and programs.

The control and inspection of the actions of this department are carried out through external audits, carried out by the financiers themselves and internally through Secoya's Fiscal Council.

Figure 1. Demonstration diagram of Secoya's advisory service with the Yanomami people



Source SECOYA2021

THREATS

TERRITORY



The Indigenous Lands, which should be protected by the Brazilian State, have been suffering all kinds of attacks: from invasions to speculation by companies interested in the economic exploitation of natural resources to the negligence of the Executive and Legislative powers in relation to the proposition and voting of laws that are not discussed with native peoples.

The United Nations (UN) itself has already denounced President Jair Bolsonaro's attacks on indigenous people, pointing out the violation of international treaties. Since the first contacts with national society, the Yanomami have suffered from economic intervention in their territory and are constantly threatened and subject to a series of interferences in their way of being and life. [6]

“THE INDIGENOUS LAND OF THE YANOMAMI PEOPLE HAS WITNESSED VIOLENT INVASIONS WITH THE OSTENSIBLE USE OF FIREARMS AND PERSECUTION DUE TO THE INTENSIFICATION OF MINING ACTIVITY SINCE 2020, WHEN THERE WAS A 30% INCREASE IN ENVIRONMENTAL DEGRADATION IN THE REGION, REPRESENTING AN AREA OF 2,400.00 ACRE”

Report Scars in the forest - Instituto Socioambiental in partnership with Hutukara Associação Yanomami and Wanassedume Associação Ye'kwana.

6 - <https://noticias.uol.com.br/colunas/jamil-chade/2022/03/23/onu-denuncia-ataques-de-bolsonaro-aos-indigenas-e-cita-violacao-de-tratados.htm>

THREATS

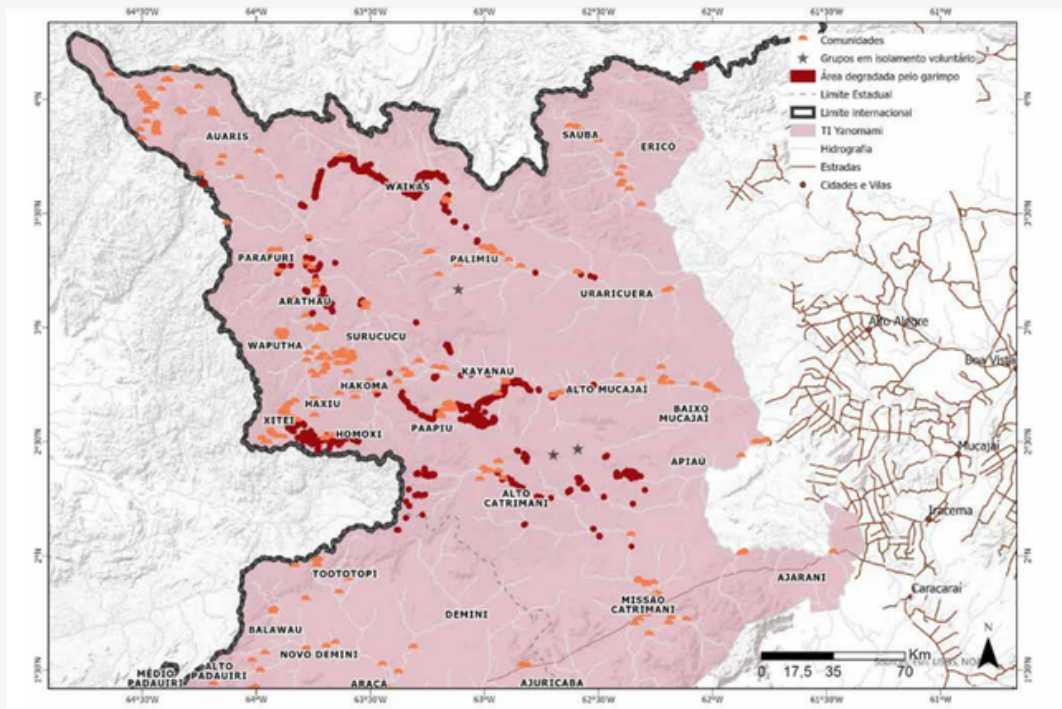
Monitoring shows that the basins of at least four rivers in the Yanomami TI (Mucajaí, Uraicoera, Catrimani and Parima) are among the most affected. The miners took over Porto do Arame, located on the Uraricoera River, a strategic point in the Yanomami IT, since it is the means of access to the territory. The prospectors began to control the flow of the point, even charging tolls from the indigenous themselves. [7]

The Federal Supreme Court (STF) manifested itself in the records of ADPF 709 determining the removal of the invaders from the Yanomami TI, in May 2021. Despite this, what is seen is the intensification of conflicts, with tragic episodes, such as the young man being run over Edgar Yanomami, 25, by plane owned by the miners, in the Homoxi Community, within the Yanomami TI. Some indigenous lands suffer enormously from the impacts of these processes.

Even so, the destruction caused by mining in the TIY grew 46% compared to 2020, the highest growth observed since our monitoring began in 2018, according to data from the report “Yanomami Under Attack: Illegal mining in the Yanomami Indigenous Land and proposals to fight it”, from the Associação Hutukara Associação Yanomami.

The data show that, of the 37 existing health district base poles, 18 have deforestation related to mining. Considering the poles that do not have deforestation records on the satellite, but with information on the operations of ferries or small groups of miners, this set would be 24 base poles.

Regarding the direct impact of mining on water resources, the main rivers and streams currently affected are: Mucajaí River (180 km), Uraricoera River (150 km), Couto Magalhães River (50 km), Parima River (35 km), Apiaú River (30 km), Inajá Igarapé (10 km), Novo River (10 km), Surucucus Igarapé (4 km), Catrimani River and Lobo d'Almada River.



Map 1: Area degraded by mining in TIY.
Source: Yanomami Under Attack report: Illegal mining in the Yanomami Indigenous Land and proposals to combat it, pg 17

7 - <https://apiboficial.org/2021/05/11/apib-pede-que-stf-determine-a-retirada-dos-invasores-da-ti-yanomami/>

THREATS

However, it should be noted that some of the impacts of mining have a far greater reach than those observed in the forest and rivers. Among these, the spread of infectious diseases (especially malaria), contamination by methylmercury, a by-product of mining, and the overload on the local health system, which directly 273 communities, covering more than 16,000 people, or 56% of the population of the Yanomami Indigenous Land.

Rivers	Stretch impacted by mining
Rio Uraricoera	~150 km
Ig. Inajá	~10 Km
Rio Parima	~35 km
Ig. Surucucu	~4 Km
Rio Mucajai (cabeceira)	~30 Km
Rio Mucajai (Médio curso)	~150 Km
Rio Couto Magalhães	~50 Km
Rio Apiaú (Cabeceira)	~30 km
Rio Novo	~10 Km
Rio Catrimani	~65 km
Rio Lobo d'Almada	~5km

Chart 2: Rivers impacted by mining. Source: Yanomami Under Attack report: Illegal mining in the Yanomami Indigenous Land and proposals to combat it, pg 18.

In October 2021, Secoya supported the collection of samples in the Marauiá River and headwaters of its tributaries through a partnership with the Federal University of Amazonas (Ufam) project to measure the level of methylmercury within the Yanomami territory, in Santa Isabel of the Rio Negro, Amazon. The result is being processed and analyzed by the Chemistry department.

"ONE OF THE MOST DRAMATIC DIRECT EFFECTS OBSERVED WITH THE CONTINUED ADVANCE OF THE EXPLORATION OF THE TIY BY GARIMPO IS THE INCREASE IN THREATS TO THE SECURITY OF DIFFERENT COMMUNITIES AND LEADERS WHO PUBLICLY OPPOSE ACTIVITY IN THE INDIGENOUS LAND. AS ILLEGAL MINING CENTERS PROLIFERATE AND GROW IN THE DIFFERENT REGIONS OF THE TIY, NEIGHBORING COMMUNITIES FEEL THE LOSS OF "CONTROL" OVER THEIR LIVING SPACE. THIS IS BECAUSE INSECURITY DISSUADES THEM FROM MOVING AROUND THE REGION, EITHER BECAUSE OF EXPLICIT THREATS FROM MINERS AGAINST THEIR LIVES, OR BECAUSE OF THE SIMPLE HOSTILE PRESENCE OF NON-INDIGENOUS PEOPLE. THERE IS A RECURRING COMPLAINT FROM LEADERS ABOUT THE INTENSE CIRCULATION OF HEAVILY ARMED MINERS AND THE CONSEQUENT INTIMIDATION SO THAT THE INDIGENOUS PEOPLE COMPLY WITH THE CONDITIONS IMPOSED BY THE INVADERS. IN MANY REPORTS, COMMUNITY MEMBERS SAID THEY SUFFERED FROM THE RESTRICTION OF THEIR FREE MOVEMENT IN THE INDIGENOUS LAND, FAILING TO ENJOY AREAS USED FOR HUNTING, FISHING, FARMING, AND TERRESTRIAL AND AQUATIC COMMUNICATION WITH COMMUNITIES OF THE SAME MULTI-COMMUNITY GROUP".

Yanomami Report Under Attack: Illegal mining in the Yanomami Indigenous Land and proposals to combat it,pg. 111



HEALTH

The situation of generalized insecurity imposed by the increase in the circulation of armed miners in different regions of the Yanomami territory brings yet another problem within the territory: fear and inconvenience to health professionals who, not infrequently, abandon their posts, as has been recorded, in Palimiu, Roraima, impairing their care. Communities also complain about the diversion of medicines reserved for the indigenous people to care for prospectors.

Added to this scenario is the disruption and mismanagement of indigenous health care provided by the Yanomami Special Indigenous Health District.

The damage caused by illegal mining to the health of indigenous people is also evident in a higher incidence of infectious diseases among indigenous communities affected by the invasions.

Researcher Paulo Basta, from the Sergio Arouca National School of Public Health, from the Oswaldo Cruz Foundation, and one of the contributors to the report of the Hutukara Associação Yanomami report, stated, in an interview with the newspaper *O Globo*, that “the effects of mining on Yanomami communities reinforce a sanitary chaos not seen since the 1980s”.

At the time, he explains that there were governmental and philanthropic incentives to control the proliferation of diseases in the regions, mainly malaria, which is endemic, but that, in recent years, the participation of the sectors has decreased to the point that the indigenous people are back at risk. [8]

In addition, the mining activity is directly associated with mercury contamination, with irreversible damage to the affected indigenous people. Indigenous leaders denounce the increase in the incidence of neurological diseases among newborns in the Yanomami communities, but these have not been diagnosed with mercury contamination despite the normative guidance in this regard. [9]

8 - <http://informe.ensp.fiocruz.br/noticias/52944>

9 - <https://amazoniareal.com.br/desnutricao-yanomami/>

This whole context has a direct impact on the patterns of short stature among the Yanomami. Despite being a chronic pattern among indigenous peoples around the world, the prevalence of stunting above 80% was reported only among Yanomami children, highlighting the critical nutritional status of this group, as pointed out in a scientific article published in September 2021.[10]

Child malnutrition

The themes of child malnutrition and food security were long

analyzed by Secoya's health education program between 2011 and 2019. In this document, we want to emphasize that child malnutrition rarely has food insecurity as its main cause, but stems from a multifactorial process where children become sick repeatedly, leading to significant weight loss, until reaching a state of severe malnutrition (characterized by low weight for height) and/or chronic (characterized by short stature for age).

This conclusion is based on extensive fieldwork carried out since the year.



2013, during which a training process was started on this topic with the AIS (Sources: Report of the health education program - Secoya 2013). Several courses were dedicated to the learning, by these agents, of filling in and interpreting children's growth curves.

Currently, the curves are included in the child's health booklet, a tool of the Ministry of Health whose periodic updating of its content is essential for monitoring the

integral development of the child, in addition to being an integral part of the IMCI (Integrated Care for Prevalent Childhood Illness) strategy.

In 2013, from the completion of growth curves in the xapono of Rio Marauíá, for each child who identified a weight loss, an investigation was carried out for possible weight loss factors, either through medical records or from surveys with parents. . The main causes identified were: diarrheal and parasitic diseases, respiratory diseases and malaria,

10 - <https://amazoniareal.com.br/maes-e-criancas-yanomami-tem-deficit-de-estatura-intergeracional/#:~:text=Apesar%20dos%20padr%C3%B5es%20cr%C3%B4nicos%20de,grupo%20%5B24%2C25%5D>

Over the months, the analysis of the dynamics of the growth curve confirmed this process, which can lead to a state of severe malnutrition, if there is no action in the initial phase of weight loss, as recommended by the IMCI strategy.

What can be seen, based on these surveys and experience, is that only in rare cases the illness is due to a situation of food insecurity. Other field research allowed us to identify that the diet of Yanomami children is of little variety, especially at a certain time of the year, mainly based on the consumption of carbohydrates (but in adequate amounts) and relatively low in protein, which can lead to deficiencies in nutrients and vitamins.

It is important to understand the difference between specific deficiencies, also called "invisible hunger", as it does not necessarily cause weight loss, and chronic malnutrition (characterized by short stature for age, a situation that is insidiously established over the years) and acute malnutrition, where weight loss is clear. Each of these issues requires a specific intervention.

Thus, specific deficiencies are prevented and treated by supplementation with iron, vitamin A and other micronutrients, as recommended by the NutriSUS Strategy. Chronic malnutrition also requires micronutrient supplementation, an increase in the variety and quantity of foods, in addition to specific surveillance, considering the low immunity and frequent cognitive sequelae in children, while severe malnutrition, in its most severe form, which is marasmus represents an emergency situation, which requires global care, taking into account the weakening of vital organs, concomitant infections, often added to a state of dehydration. In such cases, treatment must be carried out in a highly complex unit.

Once again, it is worth mentioning that severe malnutrition does not occur overnight, but results from a failure in weight monitoring and nutritional surveillance actions.

As recommended by the IMCI strategy, after completing the growth curve and having identified a weight loss in relation to the previous weighing (even if the child has an adequate weight at the time of the examination), it is up to professionals to carry out health education actions (according to the principles of primary care) with parents, guiding them on the basis of healthy eating and the hygiene measures necessary to avoid infectious diseases.



When a child with low weight or very low weight is identified, but without signs of severity, the treatment of malnutrition must include the administration of a food supplement, in the form of a pasty preparation, composed of foods from each group of nutrients (carbohydrates, proteins and lipids) in standardized amounts and nutritional values, administered in 4 to 6 portions during the day. This action, which makes up comprehensive care for indigenous health, allows, in most cases, to reverse the situation of acute malnutrition in a few weeks.

Unfortunately, over the last 10 years, Secoya has repeatedly observed and denounced serious failures in monitoring children's nutritional status. These are due both to the recurrent lack of adequate material,

the failure to fill in the curves (in Marauíá we can even talk about the impossibility of filling in the curves, since the children's notebooks are being kept at the headquarters of Santa Isabel do Rio Negro, making it impossible to compare the weights in loco), the lack of knowledge of the professionals on the diagnosis, prevention and treatment of child malnutrition. It was systematically observed the non-provision of adequate food for the preparation of food supplementation, in addition to its preparation and administration not in accordance with the recommendations.

Considering the action plan presented by DSEI YY, we can conclude that these practices will remain unchanged, noting that both the proposed training process, as well as the material and food provided, do not address the real needs that can reverse malnutrition processes that may be identified. We reiterate the importance of including nutritionists in EMSI to ensure the continuity and quality of nutritional surveillance actions in the field and strengthen the training of professionals, including AIS.

CONSIDERATIONS ON THE IMCI STRATEGY AND THE FIGHT AGAINST INFANT MORTALITY

As mentioned above, an adequate application of the IMCI (Integrated Management of Childhood Illness) strategy makes it possible to prevent and treat child malnutrition, thus significantly reducing child mortality. This strategy was developed in the early 1990s by the WHO and UNICEF, with the aim of reducing mortality and morbidity in children in "Southern countries".

The approach focuses on the main causes of death in children and aims to improve the skills of health agents and professionals in primary care, strengthen the health system and reinforce care practices at the family and community level.

The implementation of the IMCI strategy in Brazil began in 1997 in 04 North and Northeast States and reached the entire country in 2001 (Integrated Care for Prevalent Childhood Illnesses, Module 1, Ministry of Health, 2002). However, still 15 years were needed to reach DSEI YY.

The strategy is guided by a methodology that advocates:

- 1) The assessment of the child;
- 2) The classification of the disease;
- 3) Identification of the treatment;
- 4) The application of the treatment;
- 5) Counseling the mother or companion;
- 6) Planning the return query.

In this way, through the evaluation of the signs - symptoms and the identification of the "general danger signs" it is possible to consider the severity of the disease. This is essential to decide in a timely manner whether or not removal is necessary, taking into account the means and treatments available at the health post.

Over the years, the assessments carried out by the WHO confirm the relevance of the strategy, revealing a decrease in infant mortality and in the mortality of children under 5 years of age.

"INSTALLED CORRECTLY, THE STRATEGY (...) GUARANTEES THE COMPLETE ASSESSMENT OF COMMON SERIOUS DISEASES, NUTRITIONAL STATUS AND IMMUNIZATION, FACILITATES RAPID AND INEXPENSIVE INTERVENTIONS, IMPROVES THE WAY PARENTS ARE GUIDED AND ADVISED IN THE CARE OF THE CHILD, STRENGTHENS THE PREVENTIVE SERVICES AND SUPPORTS HEALTH AGENTS IN THE IMPLEMENTATION OF NATIONAL GUIDELINES"

Free translation, Manuel sur la Prise en Charge entégrée des maladies de l'enfant, WHO/UNICEF, 2001

However, a certain trend towards increasing removal numbers was confirmed, considering that primary care health posts regularly lack materials, medicines and infrastructure to attend to serious cases. In the context of DSEI YY, we know that the situation is similar. However, a significant part of the patients transferred to the medium and high complexity services in Boa Vista could be treated in the territory if there were properly structured type II base centers in each region.

With regard to the application of IMCI in the field, Secoya notes:

The non-recognition of general danger signs by professionals, which in some cases led to the death of children (according to reports from the AIS);

Professionals using IMCI tools only to identify treatment and totally disregarding health counseling and education actions;
The absence of assessment of the child's nutritional status from the growth curves;
The lack of training of professionals;
The absence of training of the AIS on the strategy.

This last point deserves some consideration. In the original versions, WHO and UNICEF emphasize that: "The IMCI strategy can be carried out by doctors, nurses and other health agents who care for newborns and sick children from one week to 05 years of age. It was conceived for primary care establishments, such as health posts (...) and outpatient treatment services in hospitals").

In the version of the Brazilian Ministry of Health, the term "health agent" was removed, leaving the translation of this paragraph:

"The IMCI strategy can be used by skilled health professionals; doctors, nurses who work with infants and children from birth to 5 years of age".

It is worth mentioning that the original strategy is based on the indispensable reach of remote locations and on the qualification and training of all health actors, especially those in more direct and continuous contact with patients, being health agents. In view of the lack of capacity building by the IMCI for AIS, Secoya came across the following argument from the DSEI YY: "Considering that this is continuing education recognized and certified by the MEC, AIS whose schooling is often not completed cannot have access to training".

However, considering the recurring weaknesses of the radio network, the lack of professionals in the field, a situation that demanded a reorganization of the services (as in Marauíá where some UBSIs were chosen as reference units and other posts placed under their authority) and as a consequence medical and nursing care being carried out in the form of biweekly campaigns, AIS are regularly faced with medical emergencies, having to take initiatives without guidance or supervision in order to try to save the person's life. This abandonment leads the AIS to take over the distribution of medicines and administration of injectables even if their role does not include these attributions. This situation has been amplified since the beginning of the pandemic and some AIS show clear suffering when they recall the frequent periods during which they felt totally helpless.

In view of these considerations, we emphasize that, in order to face infant mortality, it is essential that the DSEI YY ensure the proper implementation of the IMCI strategy, reinforcing the continuous formation of the EMSI, building type II base poles in the discovered regions, ensuring the radio network and offering adequate training for AIS.

We suggest that SESAI take over the organization of an AIS training project with a supplementary or EJA allowing the proper qualification of agents.



CONSIDERATIONS ON MATERNAL HEALTH AND PRENATAL ACTIONS

With regard to the maternal mortality ratio, the target established by the Government under the Sustainable Development Goals (SDGs) aims to “by 2030, reduce the global maternal mortality rate to less than 70 deaths per 100,000 live births” (Sources: <https://odsbrasil.gov.br/objeto3/indicador311>). The data presented by DSEI YY in the “emergency action plan” mention the occurrence of 03 maternal deaths in 2020 and 01 in 2021. We know that the information for 2021 is incomplete, noting that the maternal death that occurred in the Marauiá Mission in October 2021 did not is accounted for. This document does not present data on live births to check the global coefficient. In addition, a comparison between the years 2020 and 2021 is being presented, suggesting an improvement (until reaching the SDG target) with a maternal mortality coefficient of 37.79. Emphasizing that this is a small population sample, this data is not a fair reflection of the reality in the Yanomami territory. It is worth mentioning that this coefficient is calculated per 100,000 live births and that the omission of a single death can reduce this rate by half.

But far beyond these data, it is important to emphasize the causes leading to maternal deaths. Over the last few years, the Secoya team has listened to reports and witnessed situations that demonstrate the inefficiency of prenatal measures, noting that cases of eclampsia, postpartum hemorrhage, complicated deliveries with a child in a cross position (such as the case of maternal death that took place in 2021, during the Kurikama Assembly). These situations can be prevented with quality prenatal care. In the action plan, SESAI mentions training and “prenatal consultations with the offer of recommended rapid tests”. In the current reality, the prenatal actions observed in the field include:

- The weighing of the pregnant woman (but often there is no scale) and the calculation of the Body Mass Index (BMI);
- Measurement of uterine height and calculation of the probable date of delivery;
- The measurement of the mother's vital signs and the fetal heart rate;
- Checking fetal positioning;
- The offer of iron and folic acid supplementation;
- The offer of vaccines recommended during pregnancy.



Regarding the recommended laboratory tests, it was only occasionally observed the availability of rapid tests for the diagnosis of Syphilis, Hepatitis and AIDS, remembering that early diagnosis allows the prevention of vertical transmission of HIV and Syphilis. There are no urine dipsticks, which are essential for diagnosing urinary infections (cause of miscarriage and other complications) and for confirming pre-eclampsia, nor are there any glucometers to assess the risks of gestational diabetes.

At the gas stations, there is no availability of Magnesium Sulfate

to prevent seizures in women with preeclampsia. In addition to the lack of materials and tests, actions being performed by the nursing technicians are repetitively observed, without having the adequate domain to identify signs of complications (such as the fact of not waking up the due importance of hypertension in pregnant women, sign of preeclampsia). This context is the basis for the high number of birth complications and maternal and infant deaths.

CONSIDERATIONS ON ACTIONS AIMED AT SUPPLYING DRINKING WATER

*"Every real invested in sanitation saves 04 in health expenses" -
World Health Organization*

Since the beginning of the health education program in 2011, considering the request of the Yanomami who had been suffering from repeated epidemics of diarrhea and worms, Secoya developed actions to seek alternatives to improve the quality of drinking water in the xapono. The first stage of this work was dedicated to informing and raising awareness among the population about the process of water contamination, as well as its close relationship with diarrheal diseases and child malnutrition. At the same time, efforts were made to implement household water purification measures (boiling, filtration, chlorination and the SODIS method) and several actions and lectures were held on hygiene and sanitation issues.

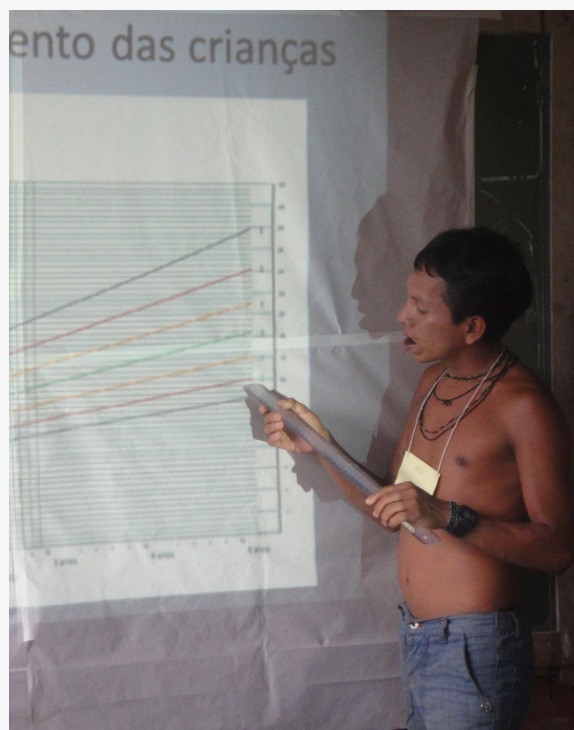
In 2015, a partnership with the Instituto de Pesquisa na Amazônia - INPA started a project aimed at implementing "Ecolágu" water purification systems. This technology works from the principles of filtration and water radiation by ultraviolet rays and is composed of equipment powered by solar energy, allowing to provide drinking water to small communities. Since then, the issue of water and sanitation has become a predominant axis of the program, identified as having the greatest impact (along with the fight against malaria) in reducing malnutrition and, consequently, infant mortality. Concurrently with the installation of water purification systems, to ensure proper maintenance and health education actions, Secoya developed courses and workshops for AISANs.

In 2019, a first cycle was completed, totaling 06 training modules, for a workload of 500 hours. 35 Yanomami from 14 xapono from Rio Marauia benefited from one or several training stages. During this process, Secoya also monitored the installation by DSEI YY of the "Salta Z" water purification systems and verified their effectiveness, communicating about it with the AISAN in order to value this initiative.

Based on these experiences and considering the action plan proposed by DSEI YY, we share the following observations:

The implementation of any water system must be widely discussed with the inhabitants of xapono, ensuring the full consent of the leaders and women, who are generally the ones who will perform the function of evaluating the system and monitoring the performance of AISAN; The implementation of any water system, be it community (such as Salta Z) or designed to provide water only at the family level (such as clay filters) requires the monitoring of AISAN, thus ensuring proper use and maintenance; Ordinance No. 1088, OF JULY 4, 2005, which provides for the composition and organization of multidisciplinary teams for indigenous health care, guarantees the proper hiring of AISAN in xapono where there is a water purification system; In order to have an impact on health, AISAN must be qualified and trained to be able to perform an expanded role, which is not limited to just running a water system, but being able to identify sanitation problems in the xapono, prepare an action plan at the community level, carry out health education actions, in addition to producing information.

- We remind you that in order to have an impact on the rate of diarrheal diseases, it is essential to have a multi-causal approach and that AISAN plays an essential role in this process. Research on the effectiveness of prevention measures indicates that access to clean water reduces the incidence of diarrhea by 39%. Other essential measures must be adopted, such as washing hands with soap, which reduces this incidence by over 44% and the correct destination of fecal matter with a reduction of over 32% ("Water, sanitation, and hygiene interventions to reduce diarrhea in less developed countries", Fewtrell et al., 2005)
- The "Salta Z" systems guarantee quality water, however, to ensure its proper functioning, it is essential to implement a continuous process of qualification, training and supervision of the AISAN;
- The AISAN and the AIS are fundamental actors to ensure a good acceptance by the inhabitants of the water coming from the systems (despite the chlorinated taste of the water).



CONSIDERATIONS ON MEASURES TO COMBAT MALARIA



As Secoya has already warned, for years malaria in the Marauiá River region has remained at high levels of dispersion and maintenance of transmission. The interventions carried out in a timely manner by the DSEI YY in recent years have not shown results.

Considering the geographic area of the Marauiá region, as well as the occupation of the territory, in which the Yanomami frequently travel between regions and maintain contact with family groups from Venezuela, a global and systematic action must be planned. According to information discussed with Dr. Oneron de Abreu Pithan, responsible for the malaria sector of the DSEI YY, malaria control is possible as long as comprehensive control actions are carried out, focused and carried out concomitantly, from the 6 community groups, in order to provide an effective impact in reducing transmission.

However, the human resources provided for by DSEI YY in the emergency steel plan do not correspond to the action proposal prepared by Dr. Pithan for which at least 04 teams of 03 ACE are required, in addition to professionals to ensure continuous field service.

COVID-19

The impacts of the Covid-19 pandemic that affected the world population since the end of 2019 have still been measured in surveys and research in various areas of knowledge. What is known so far is that the effects are not only physiological, but have profound repercussions in the field of mental health, both due to social isolation, deaths and the disruption of social relationships related to fear, insecurity and suffering involved in the pandemic process. In the case of indigenous peoples, this is an even more

The first reported case of Covid-19 among indigenous people in Brazil was that of a 19-year-old Kokama girl, resident in Santo Antônio do Içá, Amazonas, at the end of March 2020. In the following months, the new virus spread rapidly in cities and villages, causing fear, worry and desolation. APIB data show that by March 2022, 162 indigenous peoples had been affected by Covid-19 throughout Brazil, with 1,288 deaths resulting from the disease.

The pandemic arrived in the Yanomami area in 2020, causing concern and having repercussions on movements to protect the xapono, usually reserved for situations of threats, such as the wayumi, a spatial displacement strategy used historically by the Yanomami to protect themselves in cases of conflicts and epidemics. The wayumi was even stimulated by the DSEI, via radio, in an attempt to prevent the spread of the virus, and undertaken in Marauiá by at least two xapono: Balaio and Tomoropiwei, around April and May 2020, with little effectiveness, since that the populations of these xapono returned in a few weeks to the place of habitation, at the height of the pandemic in Santa Isabel. These returns ahead of schedule were due to the news of snakebites during the displacement of Tabuleiro residents in the forest, the depletion of some essential products such as salt and tobacco and, finally, the funeral rituals reahu (which consists of burning the bones and incorporation of ashes into food for ritualized collective consumption).

Deaths, lack of health care during the pandemic and lack of basic supplies such as medicines, made the pandemic a profoundly impacting event for the mental health of the Yanomami population of Marauiá. However, due to the cross-cultural aspect, it is necessary to comment on the complexity involved in this issue.

According to the Ministry of Health, in the document Psychosocial care for indigenous peoples: weaving networks to promote good living (MINISTÉRIO DA SAÚDE, 2019), which proposes actions for mental health in Special Indigenous Health Districts based on what the consolidation Ordinance advocates N° 2, of September 28, 2017, Annex 3 of Annex XIV, originally published in 2007 (MINISTRY OF HEALTH, 2017), it is necessary to take into account that there is no univocal understanding of what mental health is in indigenous peoples, opting to if by seeking notions that dialogue with cultural diversity and its social processes, hence the notion of good living:

In general, it is understood that mental or psychosocial health or well-being refers to something more than simply the absence of suffering or disease, but to individual, family and social/community well-being or well-being (MINISTRY OF HEALTH, 2019, p. 7).

In the field, we came across cases of acute suffering, such as an elderly woman from the xapono do Balaio who had lost her daughter and who cried intensely for nights on end. It is essential to understand the grieving processes of indigenous people and the impacts of the pandemic in this context, which has a huge impact. We reinforce this understanding because it is worrying that the DSEI points to the issue of alcoholism as the only action to address mental health among the Yanomami. There is a range of problems such as suicide and depressive processes that cannot be treated individually and in isolation, not only to address what is pointed out in the DSEI response document as and that the health service can offer support in the most convenient way, and agreed.

This perspective proves to be more coherent than the simple imposition of approaches and methodologies that may not suit different social and cultural contexts, which goes hand in hand with what is established by Ordinance No. 2,759/2007, guideline of the Comprehensive Health Care Policy. Mentality of Indigenous Populations: "support and respect the ability of different ethnicities and communities [...] to identify problems, mobilize resources and create alternatives for building solutions to community problems." (MINISTRY OF HEALTH, 2007, art. 1). An important guideline of the Consolidation Ordinance No. 2 (MINISTRY OF HEALTH, 2017) is the importance given to community participation in the processes of coping with psychological suffering, based on the recognition that many indigenous societies already implement strategies to promote what we call mental health. This attitude values the daily knowledge of cosmology, social life and ways of seeing the world that avoid impositions and invasive treatments. Therefore, there are three important points to be taken into account in mental health and well-being actions:

EMSI's qualification for the approach to mental suffering: the work of approaching this field cannot be restricted to the psychologist or others

professionals such as nurses and social workers, contributing to the isolation of mental health problems and to discrimination, possibly by the EMSI itself, in relation to the patient and the issue of mental health. Here, the notion of shared care is important, which presupposes the formation of the team in the approach to mental health: doctors, nurses, nursing technicians and indigenous health agents, who with their knowledge of the community are fundamental in this process. Matrix support as a strategy for EMSI action in their territory, involving not only professionals linked to the DSEI but also teachers, community leaders, etc., is essential. In the context of Covid-19, this training should be built on bases that excel in multidisciplinary, involving anthropologists and psychologists at EMSI. As already mentioned, problems should not be dealt with individually, but from a community perspective and always looking for approaches that are closest to people's reality. Collective consultations, good living groups, home visits and conversation circles are methodologies to break with the individual perspective and that can access the Yanomami sociability networks much faster and more smoothly (MINISTÉRIO DA SAÚDE, 2019).



- In addition, during the construction of Singular Therapeutic Projects (PTS) [1] it is extremely important that users, families, involved groups and traditional caregivers participate in the negotiations on therapeutic decisions. This behavior favors the inclusion of the community social support network in the care processes, adding the therapeutic processes typical of the community to which health professionals may not have access. There is no possibility of carrying out such actions without the participation, in the EMSI, of psychologists and anthropologists, in order to combine the knowledge of the two areas in the formulation of non-invasive and effective approaches to the issue of mental health within the scope of the DSEI-YY.

The institutional obligation of the Brazilian State to act to protect indigenous lives and guarantee territorial protection of their lands, in the context of the COVID-19 pandemic, was completely ignored. It was necessary to resort to judicial support for the institutions to act in order to guarantee the lives of these populations. [12]

The development of DSEI-YY actions in this huge geographic scope associated with the cultural specificity of the Yanomami people would indeed require a deep respect for traditional health knowledge and practices.

As seen above, it would still require an understanding of how health/disease processes occur in the Yanomami culture, in addition to perceiving the limits as well as the complementarity of each health orientation: the allopathic, curative and only emergency provided by the DSEI-YY; and the traditional medicine, involving phytotherapy, care and shamanism acting on a spectrum totally unknown to health teams. Unfortunately, only observation in the field allows us to say how much traditional indigenous knowledge is disrespected. This is due to the fact that there is ignorance and a load of prejudice on the part of the teams in relation to the conceptions and ways of treating patients, directly associated with the world of spirits and the psychosomatic balance of the entire population.

The fact that the DSEI-YY is the most expensive in Brazil cannot be justified by the conditions of recent contact with the Yanomami or by geographical difficulties. There is an imperative need to carry out an evaluation of the operability of actions in the field, verifying transport strategies, synergies of complementary actions, rationality and dynamics between air and river transport of teams, patients and companions, supplies and materials. An example of this is the increase in flight hours when assistance is precarious.

12 - <https://www.nationalgeographicbrasil.com/historia/2020/08/coronavirus-se-aproxima-de-indigenas-isolados-da-amazonia>



The fact that the DSEI-YY reveals reluctance to hire a body of professionals in the field of anthropology and indigenism is the primary cause of the misunderstanding of the very nature of most challenges, conflicts, situations of violence, insecurity and errors in the exercise of nursing and the care provided to the Yanomami population. In fact, this has a direct relationship with the excess of removals for CASAI's, such is the insecurity and profound lack of knowledge of professionals in relation to what happens in xapono with the patient, with their families, with the shaman, with the spirits and with the entire population.

In view of these considerations, we suggest that absolute priority be given to hiring a team of professionals in the fields of anthropology, linguistics and indigenism that can address the current and serious deficiencies in the conduct of the DSEI-YY.

The work dynamics, the existing structures in the DSEI-YY and the means made available in the regions of Santa Isabel, Barcelos and São Gabriel da Cachoeira, in Amazonas, do not correspond to the structure required for a qualified service. With the current existing structure, basic care is not guaranteed either. The organization of services remains centralized in Boa Vista-RR, generating transport costs and difficulty in managing closer to the Yanomamido Amazonas reality. We believe in carrying out a public consultation to deepen and analyze the most adapted strategies to meet the specific Yanomami of the Amazon region. We continue to believe that a more autonomous structure in terms of service organization and logistics, as well as a readjustment of programs, strengthening EMSI's and their training, including Yanomami actors (leadership, AIS, AISAN, Counselors, traditional midwives, etc.), as a sub-district, linked to the Dsei, but with administrative autonomy, may be the solution to this situation that historically worsens

WHAT HAS SECOYA BEEN DOING?

The indigenist work advocated by Secoya requires cohabitation between political, social and institutional management requirements in Brazilian society, and the necessary adaptability to act in a totally different sociocultural and linguistic universe that requires respect, understanding and sensitivity. social and human in the perspective of an effectively differentiated work. To this end, the Secoya team was formed on the basis of participatory reflection-experimentation, proposing a dynamics of indigenous work and gradual institutional change that structurally guides SECOYA's attitudes and decisions, and can be summarized in the following premises:

- Changes are a collective task;
- They presuppose and depart from active listening;
- They are the responsibility of the Yanomami, partners and public authorities;
- They consider the subjects and a political-methodological action;
- They are in the perspective of autonomy, which is a step-by-step process.

From this perspective, Secoya's action can be considered as a long-term groundwork, based on the understanding that any changes in the intercultural universe require reflection, adaptation, experimentation and, above all, adding elements and potential for the process. of self-determination and construction of autonomy.

From the premises presented above, the meaning of the action is defended by the particular condition of this population and the purpose of a pioneering work affirming their rights, since the guarantee of these rights is still weakened by the lack or limited necessary practical regulations.

This affirmation of rights is provided through participatory management in the sense of doing “with the Yanomami and not for the Yanomami”. The increase in the Yanomami's capabilities both in terms of state policies and the internal demands of organization in the face of the rapid changes taking place in the Yanomami universe.

The lack of command of the Portuguese language, the relatively recent process of literacy and writing, the negative experiences and interference caused by contact with the regional population represent challenges that need to be faced.

DIFFERENTIATED SCHOOL EDUCATION PROGRAM

Differentiated Education is a political-educational action towards the empowerment and protagonism of the Yanomami people, favoring proactive governance in relation to life in the territory and the construction of a dignified future. The school space has made it possible to address important issues for the Yanomami people such as: the promotion of education for citizenship, the strengthening of self-esteem and the affirmation of ethnic identity in the face of challenges in the relationship with the surrounding society, sustainability in their territory and others.

It is intended to contribute to the construction of a Yanomami Educational Matrix recognized and supported by the Department of Education of the state of Amazonas, a project that is in progress through the construction of the document and the articulation with the Government of the State of Amazonas.

The principles of differentiated education are:

- Training of indigenous teachers;
- Development of bilingual teaching materials;
- Educational process of individuals respecting the social and linguistic differences of the community;
- Monitoring of teachers;
- Observation of the needs and challenges faced by the teacher on a day-to-day basis.

In 2015, Secoya, with the support of its partner Terra dos Homens from Switzerland, carried out an evaluation of its Education Program for the years 2010 to 2014, which created the basis for the consolidation of the process of differentiated school education from a perspective endogenous, as well as establishing a new institutional framework for the set of its actions. The conclusions and recommendations of this contributed to identify several demands in order to qualify and systematize various internal flows, in addition to the systematization of practices and routines as well as to provide more effective and safer working conditions in the field, measures that are in progress. Among the objectives are:

- Consolidate the process of recognition of the “Yanomami School” in the political and legal field.
- Ensuring the regular functioning of the Yanomami schools in their differentiated perspective on the responsibility of teachers and the xapono population with the support of Kurikama and Secoya.
- Systematize the learning processes arising from the structuring of the Yanomami school in its autonomous and differentiated perspective.

To this end, Secoya is committed to a proposal for differentiated, bilingual and intercultural indigenous education, where dialogue between different cultures can contribute to the self-sustainable development of Yanomami communities based on the following concepts:

- “Differentiated”, as a way of rearticulating with the cultural universe and the ways of transmitting the traditional knowledge of the Yanomami, integrating the educational process with the community;
- “Bilingual”, introducing students to literacy in their mother tongue by Yanomami teachers, as well as the learning process (reading, writing and speaking) of the Portuguese language;
- “Intercultural”, based on the analysis of the power relations that this process produces in its economic, political and social components.

The validation of the “differentiated” can only be built from experience and experience, in the same way that traditional culture is relayed from parents to children apprehended orally or by imitation, hence the understanding of operationalizing the program's actions based on legislation, and in the educational concept adopted by the institution, where “the school is the xapono and the xapono is the school”, such is the degree of participation of the Yanomami in school management.

The same aims to expand and strengthen the literacy process in the Yanomami language, the training of indigenous teachers, preparing them for work, as well as the recognition of Yanomami schools by the official school education system.

In terms of functioning, the strategy aims to strengthen, through the various field activities (workshops, dispersion and supervision), the understanding of teachers, leaders and communities and even students, of the need for them to assume the regular functioning of schools as a condition indispensable in the process of political autonomy of the people.

Secoya's motivation is based on the following assumptions:

- Education is a strategic factor in the empowerment or weakening of the Yanomami for a lesser or greater impact of the asymmetry of power in the inevitable intercultural interaction;
- The absence of alternatives for an appropriate education for these populations of still relatively recent contact with the 'napë world';
- The willingness to make use of and fight for the development of a model based on the right conquered to self-determination and autonomy and constitutionally guaranteed.

The institution “School” does not exist in the Yanomami culture and they lived thousands of years very well without it, having their own mechanisms of education and learning. What at first can be considered as something negative - the need to introduce an exogenous element - “the school of the napë” - in the Yanomami villages, is justified by the demand expressed in the sense of “needing to learn the things of the napë” and represents almost that a necessary evil. To defend oneself, it is necessary to know the codes of a culture (in this case, the napë) to be able to communicate without becoming a victim of it. Therefore, even though the driving motivation is negative, it offers the possibility of appropriation of the Portuguese language and mathematics, and of new knowledge of the dominant society that surrounds them. The meaning of the school (also differentiated) is to help in the reading / decoding of the world to define with autonomy the form that the relationships should take.

Secoya has a strategic vision that guides its work with education. It considers that school education is important, it responds to a desire and concrete needs of the Yanomami people (understanding Portuguese, knowing how to do math so as not to be deceived; but also understanding more about the world of the napë), but it only gains greater meaning together with the political work.

For this reason, Secoya invests in the training of multipliers – a kind of leadership training through modular courses that deal with topics related to indigenous rights and understanding of the world of the nape.

The horizon of Secoya's work is to contribute to Yanomami's own governance, conscious, with a vision of the future.

For this, it is necessary, on the one hand, to establish relations with public policies and, on the other hand, to face and overcome internal challenges, which, in Secoya's analysis, are not few.

In terms of pedagogical practice, Secoya understands the school as a space for training and research, for valuing culture, citizenship and youth training

aware of indigenous rights and the challenges that the Yanomami people face.



POLITICAL CAPACITY BUILDING PROGRAM

The current situation of interference and rapid changes in the life of the Yanomami, largely caused by government policy, has the direct consequence of a clear reduction in the population's quality of life, a visible process of sedentarization of the villages and the accelerated introduction of the consumption of industrialized products, beyond the relationship with money.

Considering that in this new context there is a greater participation of Yanomami representatives in government bodies. This panorama also requires a response from the Yanomami in terms of qualified exercise of social control in the representation instances in which the Yanomami begin to participate as the AM Indigenous School Education Council; Pico da Neblina National Park Committee-ICMBio; Funai Committee for the Ethno-Environmental Territory

Yanomami; District Health Council; Yanomami ethnoeducational territory, etc.

The Yanomami have been little respected in this relationship with public policies, having no active voice, and their presence is often figurative to legitimize government decisions. Secoya's proposal is aimed at strengthening the Yanomami and their organizations (Hutukara, Ayrka, Kurikama, Yanomami Binational Forum, etc.) of the functioning of Brazilian society as well as its management apparatus.

Secoya prioritizes training the Yanomami as the main actors in the defense of their rights through participation in decision-making processes, becoming aware,

evaluating, planning or intervening in relation to the actions of the state. Secoya or other partners in the indigenous area.

It also seeks to assist the Yanomami people in building strategies for their medium and long-term future, seeking to reduce the impact of structural imbalances imposed by society.

In this context, we can see the importance of the cognitive process of learning through experimentation, a strong millenary practice in oral societies, reproducing knowledge and acquiring techniques through observation and repetition, the "learning by doing". This means ensuring the interaction between the knowledge that can be passed on by Yanomami holders of this knowledge and considered experienced in the xapono field (leadership, hekura, etc.)

with the new knowledge already necessary and requested by the Yanomami who establish a closer relationship with the surrounding society. Among the objectives of the program are:

- Indigenous political training - Strengthen the political and technical capacities of Yanomami leaders and intercultural multiplier agents of the Amazon, providing greater mastery and understanding of the challenges posed in contact with national society;
- Indigenous representation - Support and respond to the demands of the Kurikama Association, and others, in its organizational dynamics as a legitimate representative instance of the Yanomami of the Marauíá and Preto rivers, in their struggle for rights and more coherent public policies;
- Development of strategies - To favor the search for articulated solutions and the definition of collective strategies among the Yanomami in the face of the challenges related to ethnic affirmation and violation of their fundamental rights, as well as the sustainable management of their territory.

The aim is to consolidate the political and educational processes promoted by Secoya, laying the foundations for a new framework for action in the indigenous and educational field with the Yanomami people. As a strategy, it is envisaged to focus the action on the following premises:

- Autonomy is gradually built through a process of becoming aware of the reality experienced by the people;
- The strengthening of the organizational process goes through the collective, breaking with the limits set by the napë organizations in the form of the law, especially with regard to power relations and decision-making;

- The capacity building or training process of indigenous multipliers (or intercultural agents) must be guided by intercultural dialogue and a complementary approach of valuing traditional knowledge with knowledge derived from science and technologies derived from national society.

Based on the discussions held so far and the experience accumulated in this field, it is intended to intensify the process of training Yanomami multipliers, traditional leaders, representatives in the political field, teachers, indigenous health agents, indigenous sanitation agents, women, pajés, young people, etc. This training aims to prepare these actors for the new challenges posed by the increasingly indiscriminate contact with national society through courses, internships, exchanges, among others.

The themes obey this dynamic and are configured, among others, in the following fields:

- Understanding the way of thinking of capitalist society and western materialism;
- Functioning of Brazilian society and its political structure;
- Power relations imposed on minority societies;
- Organization and management: new language in the interface of Yanomami society with the world of napë;
- Organizational process and collective and citizen participation;
- The debate on knowledge: acquiring new knowledge does not mean forgetting or canceling traditional knowledge;
- Reflection on rights and duties: the construction of a new legal and ethical framework for indigenous peoples;
- Autonomy and territorial management: limits and potential.



Since 2016, when the program was restructured, several political and technical training courses were held, internships and exchanges with other similar experiences were provided for Yanomami intercultural leaders and agents. In addition, regular support was given to facilitate the participation of Yanomami representatives in indigenous meetings and assemblies promoted by the Coordination of Indigenous Organizations of the Brazilian Amazon-Coiab, the Forum of Indigenous Teachers of the Amazon- Foreeia, the Yanomami Hutukara Association or other organizations indigenous.

Support was provided for the holding of the first Yanomami assemblies on the Marauiá River, thus allowing the Kurikama Association to be created in 2013, with legal registration of the statute in 2014, bringing together the Yanomami of the Marauiá and Preto rivers and with a view to expanding participation to the Yanomami of the Municipality of Barcelos. It is also possible to state that Secoya managed to build a privileged relationship with the Yanomami people, through a continuous action in the fight for the defense of their rights, in a context of effective marginalization and rapid changes in the sociocultural structure due to external influences on the lives of the villages.

KURIKAMA ASSOCIATION

The KURIKAMA Association was created on the occasion of the Yanomami General Assembly held in the xapono do Bicho-açu between the 1st and the 7th of October 2013, with the presence of delegations from all the xapono of the Marauiá and Preto Yanomami rivers, municipality of Santa Isabel do Rio Negro-AM, becoming, since then, the legitimate and only representative of the Yanomami people of that region. In its Bylaws, it defined the following objectives:

- 1) To promote union and a strengthened alliance among the Yanomami xapono in the region where the association operates;
- 2) Promote the organizational strengthening of the Yanomami People in the association's target region;
- 3) Strengthen the socio-political empowerment of the Yanomami;

- 4) To promote the defense of territorial, environmental, material and immaterial cultural heritage, and the well-being and physical and socio-cultural integrity of the Yanomami;
- 5) Defend the rights of quality Yanomami school education and fight for constant improvement of the educational process;
- 6) Defend the rights related to differentiated health care, through the Yanomami and Ye'kuana Special Sanitary District - DSY - seeking to improve it;
- 7) Defend the rights and interests of the Yanomami before national and/or international governmental and non-governmental bodies;
- 8) Promote and develop exchanges, projects, agreements and agreements with

governmental and non-governmental, national and international institutions;

9) Promote economic alternatives for income generation, which promote ethnodevelopment, valuing culture and protecting the environment;

10) Represent the interests of the Yanomami in councils, forums or any other representation bodies at the municipal, state, federal and international levels.

Kurikama's current coordination is composed of the following members:

General Coordination:

Otávio Ironasiteri Yanomami

Supervisory Board:

Claudinei, Ribamar, Joelson, Reinaldo

1st Secretary: Laura

2nd Secretary: Gelson

1st Treasurer: Apolinario

2nd Treasurer: Sebastian (Sabbath)

Kurikama is considered by the indigenous people as an apprentice in the rules of the *napë* world, needing support, advice and solidarity from partners.

It is therefore intended, through the aforementioned objectives, to reinforce the Yanomami's organizational process, seeking to strengthen cooperation and the construction of an articulated agenda of actions. The design of the action is sought to provide for the diversification of actors and institutional alternatives and to strengthen the principle of co-responsibility and mutual learning.

Unfortunately, for the development of this important work, we have only managed to obtain some specific support to develop this work through cooperation institutions such as CESE, the municipality of Meyrin, Switzerland. The activities of this program were carried out on a discontinuous basis, taking advantage of the fieldwork dynamics of other programs to carry out, in a clearly insufficient way, specific activities such as courses, internships, some meetings and exchanges and assembly.

There is a need to provide, at this time, regular support to strengthen this organizational process, with a view to preparing and training Yanomami leaders for the great challenges that plague these people today. We have structured a project focused on this theme with the institutional support necessary for the successful development of this Program.

HEALTH EDUCATION PROGRAM

Field studies associated with the testimonies of the Yanomami reveal a clear worsening of the health situation with alarming indicators, such as the infant mortality rate, the incidence of diarrheal diseases and malaria, which cause a high rate of malnutrition that affects around 50% of the Yanomami children aged 0 to 5 years, causing an increase in infant mortality. In 2016, data from the Health Portal confirm field observations, revealing that 65% of indigenous infant mortality cases are caused by preventable diseases, such as respiratory, parasitic and nutritional diseases. Therefore, Secoya's Health Education program works on the following axes:

- Prevention: Develop actions to prevent diseases and promote health in a participatory manner;
- Valuing the traditional: Encouraging the shaman culture, preserving the Yanomami culture in the treatment of diseases;
- Indigenous Health System: Participation of the indigenous council in government decisions regarding the health system offered to indigenous communities.

Among the objectives are:

- Train Yanomami multiplier agents in health prevention and promotion actions and defense of the rights to respectful, differentiated and quality health;

- decrease by 50% the rate of child malnutrition in children aged 0 to 5 years after 3 years;
- Valuing traditional health favoring intercultural dialogue;
- Increase the capacities of users of the health subsystem with participatory, conscious and critical social control.

For this, the work dynamics is developed through occasional visits to the xapono in the Marauiá region, allowing the definition of specific needs, demands, as well as existing resources to develop prevention and health promotion actions with the population. The main axis is conceived through the active participation of the Yanomami, aiming at a common construction of the program, mainly through the agents identified as potential multipliers within their communities.

In this context, the Indigenous Health Agents (AIS), the Indigenous Sanitation Agents (AISAN), the leaders and the women, due to their decisive functions within the xapono, represent a group of specific actors, due to the potential to become multiplying agents.

In this sense, specific courses aimed at these agents are carried out, with the objective of seeking independent solutions to the health problems encountered. Particular attention is focused on the training of Indigenous Health Agents, intending to value their role as a cultural intermediary between xapono and the health system, between traditional health and allopathic health. The perception and knowledge that they have of the health system allows them to take the claims and problems observed to local and district councils, as well as encouraging the population to implement prevention measures.

Likewise, courses are given to women to address issues that affect them, particularly in relation to threats posed by contact with society. Women are key people because of the role they play in society and the level of awareness they have reached in relation to prevention, hygiene and nutrition.

The participation of Indigenous Health Agents and other local actors as multipliers is essential to ensure prevention work that meets the current needs of the population. These intermediaries play a permanent role in the villages, where they pass on information through oral tradition, through meetings or daily dialogues within the xapono. Based on a field survey started in 2013, Secoya is developing activities with the objective of reducing the rate of child malnutrition, through the following actions:

- Training of Indigenous Health Agents-AIS;
- Empowering women in nutrition and hygiene;
- The implementation of water purification measures in the villages;
- Teaching hygiene measures in schools;
- The valorization and/or rescue of the traditional use of the territory and of subsistence strategies to favor food sovereignty;
- The appreciation of traditional sources of proteins and awareness of their importance in child growth.

Based on the analysis of the causes of child malnutrition, a particular axis was directed in the fight against diarrheal diseases through a partnership signed in 2015 with the National Institute for Research in the Amazon (INPA) in order to implement two systems of purification of water. water in two xapono. Due to the identification of difficulties of material resources for the operation of this process, the project is being reviewed in search of technical adequacy.

In parallel with the installation of this system, actions related to hygiene are developed with the xapono population with the aim of treating the set of causes of diarrheal diseases. Systematic work is carried out by the AIS in order to assess the health situation and the impact of the purification system on the incidence of diarrhea and the rate of child malnutrition. The objective developed through this action is to provide means allowing the Yanomami to defend their rights to health, with pertinent arguments and greater epidemiological, political and social understanding vis-à-vis the responsible government institution – SESAI.

In addition to activities aimed at AIS, AISAN, leaders and women, health education actions are being provided in schools, with the collaboration of Yanomami teachers. Faced with the rapid changes and interference caused in the contact with national society, it is essential to think of a long-term work, but with actions that allow the integration of notions such as hygiene, prevention and protection of the environment from childhood.

In recent years, field observations and testimonies of the Yanomami have revealed a clear worsening of the health situation with alarming indicators, such as the infant mortality rate which reached 106 deaths per 1000 live births in 2014. This rate is comparable to that of Somalia in the 1990s. In comparison, the national average for this same year was 14‰. Emphasizing that the indigenous population represents only 4% of the Brazilian population, these data are being diluted in the national average, a fact that allows the government to claim to have achieved the millennium goals. The causes of infant mortality among Indigenous people are mainly diarrheal diseases and pneumonia, causes considered to be preventable by the WHO. The high rate of malnutrition, affecting close to 50% of Yanomami children, clearly contributes to this serious situation.

This situation occurs in a context where the erosion of the current sectoral policy on indigenous health is noticeable through the health subsystem and the action of the Yanomami and Ye'kuana-DSY Special Sanitary District. Assistance remains in an essentially emergency dynamic without any respect for the Yanomami epidemiological realities or the specific operational needs of each Yanomami region.

It is important to highlight the serious problems resulting from the discontinuity and the low quality of health services that have a direct impact on the health status of the population. Complementary support to the health education program is requested here, as it represents an important aspect in the Yanomami's process of autonomy over the management of their own lives. It is intended to demonstrate that prevention work carried out at a low cost and with the direct involvement of the population is possible. The pilot experience developed by Secoya in the last five years in the field of health education has shown us the importance of consolidating this alternative to government assistance services, offering the Yanomami the possibility of re-articulating healing processes through traditional health, as well as preventive actions. Closer to reality and involving the population, it is important to highlight the role of AIS, shamans and women.

MAIN RESULTS OF SECOYA



- In 1991, through an emergency action, the association managed to diagnose and cure 375 Yanomami Indigenous People affected by tuberculosis in the Marauíá River, municipality of Santa Isabel do Rio Negro;
- Between 1999 and 2009, it established a partnership with the Ministry of Health to promote basic health care for the Yanomami people;
- In 2014, it completed the training of 29 Yanomami teachers in Yanomami intercultural teaching for elementary school (3,107-hour course recognized by the Amazonas Department of Education);
- In 20 years, it has provided differentiated, bilingual and intercultural elementary education to more than 1,400 children and adolescents from 10 Yanomami communities;
- In 05 years, it has trained more than 150 young Yanomami intercultural multipliers in the technical and political fields. It actively assumed the defense of indigenous rights and the sensitization of public managers;
- In 2013, it supported the structuring of the Yanomami Kurikama Association;
- Between 2015 and 2019, it actively participated in the construction of the Yanomami Territorial and Environmental Management Plan-PGTA and the Yanomami Consultation Protocol;
- Between 2015 and 2019, it implemented innovative projects in the field of prevention and enhancement of traditional health, with a focus on child health, including: a project to capture and purify water with alternative energies; a training program for indigenous health workers and traditional midwives;
- In 2017, organization of the I Meeting on Women's Health to discuss childbirth and traditional knowledge;
- In 2019, it put on the agenda the constitution of a Yanomami State Educational Matrix;
- Selection of 51 teachers for the intercultural teaching course starting in 2022;
- The verification of organizational results and the success of this unique and differentiated work takes place through indicators of results associated with objectives and activities. An annual plan is prepared, with goals to be achieved, and a monitoring system allows regular verification of the progress of actions. A baseline was established that provides substantial information from which it is possible to measure the impact of indigenist action.
- The development of actions is totally focused on effective decision-making capacity in the context of interculturality, ensuring greater autonomy and governance of the people for the qualified management of problems arising from the contact of the Yanomami with national society. This means that if the work is successful and successful, in the end it will be the Yanomami themselves who will take over the actions. They will be able to autonomously define the type of governance they want and build the best future for their people.



However, this journey is still long and several steps need to be taken, including:

- Make education truly differentiated, bilingual and intercultural for all the villages of Amazonas with the implementation and recognition of the State Matrix of differentiated education managed by the Yanomami themselves;
- Train teachers to cover the differentiated educational demand for both elementary and high school;
- Expand the scope of training for young Yanomami intercultural multipliers;
- Promoting greater incidence at the Rio Negro basin level, allowing for more regular and qualitative action in the sphere of the Rio Negro Network and in the articulation of the Yanomami people with other indigenous collectives;
- An incidence of greater impact on the Ramsar Site and on the FAMDDI and ARCA Networks, for the defense of the environment and traditional populations located for millennia in this region.

CALL TO ACTION

We understand that all the problems that plague native peoples today and the threats posed are not an unsolved problem. Harassment of the Yanomami territory and people can be controlled through a set of coordinated and strategic actions to ensure their rights. For this, it depends on the political will and political action of the indigenous themselves, participating in the action of the State in articulation between the responsible bodies and agents.

The resumption of a Territorial Protection strategy focused on maintaining the Ethnoenvironmental Protection Bases in strategic locations, articulated with repression and judicial punishment bodies, in addition to strengthening the autonomy and training of indigenous surveillance as an integrated action to inspections, is an alternative to

to change the picture set today regarding invasions.

The other side of action concerns the legislative issue that must be subject to international pressure and from Brazilian society, through campaigns and articulated movements between indigenist and indigenous associations, in addition to promoting the participation of representatives of the Yanomami People in the Indigenous and Indigenous Movement, political training with communities. The reorganization of the assistance system of the Yanomami and Ye'kuana Special Indigenous Health District should be a goal that, after extensive consultation with the Yanomami TI communities, to act routinely, adapting the priority areas based on updated information and with respect and dialogue, with traditional knowledge.

SUPPORT

In an unstable political environment regarding anti-indigenous legislation, the strengthening of institutions that walk side by side with indigenous peoples is also strategic for confronting violations of indigenous rights.

