



COVID-19 and indigenous peoples

There are 476 million indigenous peoples around the world, constituting 6.2 percent of the global population and, according to different sources, representing more than 19 percent of the extreme poor (ILO, 2019). Indigenous peoples are not a homogenous group. They live in over 90 countries, in rural and urban areas, in forests, savannahs, mountains, and along the coasts, in low, middle-income and high-income countries. However, they all share a history of discrimination and marginalization that in the context of COVID-19 once again challenges their very existence.

KEY MESSAGES

- Indigenous peoples are the [living proof of humankind's resilience](#): they have survived pandemics, invasions and outbreaks for centuries.
- Their traditional knowledge, resulting from observation and adaptation, has allowed indigenous peoples to overcome seasonal and weather changes, shortages of resources and epidemics. [Today, indigenous peoples continue to rely on community practices and traditional knowledge](#) to face COVID-19.
- [A crisis within a crisis](#): long-standing [discrimination, inequality, invisibility and lack of recognition](#) put indigenous peoples at higher risk of the pandemic's health and socioeconomic effects.
- The [number of positive cases of COVID-19 among indigenous peoples](#) across the world is increasing. Given the lack of official disaggregated data, indigenous organizations are reporting the positive cases in their communities, implementing lockdown and containment measures (ONIC, 2020; OHCHR, 2009) and communicating their needs to governments. The little data available show that they are disproportionately affected, both in number of persons contracting the virus and in death outcomes.
- The COVID-19 socio-economic impacts have affected [indigenous peoples across the world differently](#): Those who rely on their indigenous food systems and have adopted traditional lockdown practices are coping better than other communities who rely heavily on the market for their food needs. Indigenous peoples whose livelihoods are nomadic have seen their source of food and income shrink with the lockdown. The collapse of the informal economy has particularly affected indigenous peoples.
- Several indigenous peoples from different regions have identified [hunger as the main effect of the COVID-19 crisis](#). Food shortages are resulting from the combined effects of isolation, remoteness, the lockdown, the disruption of the food value-trade chains, and the suspension of income generating activities.
- It is important that [health institutions include an intercultural approach in their response](#) that considers traditional indigenous health caretakers, training them in all the relevant protection measures and use of equipment to stop the spread of COVID-19.

- **Use of indigenous languages** in COVID-19 communications is essential to ensure that indigenous peoples can understand and follow containment and recovery activities that will avoid pockets of infections being created in indigenous communities.
- **Public policies and social protection** packages designed to reactivate the economy and benefit the vulnerable should include indigenous peoples as beneficiaries but also incorporate their cultural views about the type of assistance they require.
- **Indigenous peoples' invisibility** in national statistical systems should be addressed to ensure that they receive health and social protection support.
- The principle of **Free Prior and Informed Consent (FPIC)** is fundamental for any action, activity or programme affecting indigenous peoples' livelihoods and territories. It is essential that during the COVID-19 containment and recovery activities, FPIC is respected and indigenous peoples are involved in the committees making decisions.
- Indigenous peoples, given their customary rights' systems, sometimes have uncertainty about their lands and territories. The confinement measures, the state of siege, and the state of emergency could lead to third parties taking advantage to invade indigenous peoples' lands provoking **violence and forced displacement** (COICA, 2020; OHCHR, 2020). **Indigenous peoples** should be protected, as they are more at risk of being attacked during the pandemic confinement (AIPP, 2020a).

MAIN POLICY ISSUES

The pre-existing socio-economic conditions: A crisis within a crisis

Accounting for 476 million living in more than 90 countries, regardless of the level of income of the countries they live in and the severity of the pandemic, indigenous people were already facing **pre-existent inequalities, discrimination, lack of recognition and invisibility**. In some cases, these conditions have lasted over centuries constituting aggravating factors to the current crisis and its socio-economic effects.

For example, many indigenous peoples in Asia struggle with social marginalization, racism and contentious relationships with their governments. In some countries they are not recognized, in others they are not given an identity card, which is required for them to access the most basic education and public health services. In India, indigenous peoples have stated that "racial attacks and discrimination have spiked since the start of the COVID-19 pandemic" (AIPP, 2020).

In Latin America, different studies report that indigenous peoples fall behind the non-indigenous population for most of the human development indicators. In some countries in Central America, the maps of poverty and food insecurity coincide with the maps of indigenous peoples, indigenous languages, and biodiversity (IUCN, 2016).

In Africa, protracted crisis, conflicts, the locust outbreak and climate change have been now compounded by COVID-19 for nomadic indigenous peoples, who are now facing movement restrictions and are already living under stress due to the encroachment of pasture lands by settlers and farmers.

In North America, census data and research show the persistent socio-economic and well-being gap between indigenous peoples and non-indigenous peoples in the United States of America and Canada for both urban and rural areas and on and off tribal reservations. Indigenous peoples across North America are facing the COVID-19 crisis with pre-existing conditions of poor and overcrowded housing conditions, and limited access to safe drinking water, electricity, Internet and functional kitchens (NCAI, 2020).

In the current crisis, indigenous peoples have reported that they are not receiving the same support as urban populations to access health care, information, food and supplies.

The lack of recognition of millions of indigenous peoples across the world places them at peril during this pandemic. Thus, increasing their vulnerability to displacement and invasions of their lands, and complicating the confinement measures in remote areas. They are experiencing a crisis within a pre-existing crisis.

Indigenous peoples' livelihoods and food security at risk

The COVID-19 pandemic is affecting [indigenous peoples' food security](#) differently across the world: those who rely on their indigenous food systems to generate food and have adopted traditional lockdown practices, are coping better than other communities who rely heavily on the market for their food needs. Furthermore, the livelihoods and food security of indigenous peoples who are displaced from their lands and those who are suffering conflict and violence at this time are particularly vulnerable during this pandemic. Due to the vast diversity of indigenous food systems across the world, food securities and insecurities manifest differently for indigenous peoples' communities. For the hunters and gatherers in the jungles of Borneo, who have a low monetized economy and mainly rely on their forests for food, their food security is dependent upon access to these forests. For indigenous peoples who are business owners or rely on selling their handicrafts and agriculture products in markets, the closure of these markets has adversely affected their food security. This has been the case for indigenous peoples in Canada and Mexico. [Traditionally, indigenous peoples' economy](#) was mainly based on reciprocity, solidarity, barter, communal work and low levels of monetization. With globalization and rural-urban migration, indigenous peoples now rely mostly on the informal job market to generate income, particularly in the cities (ILO, 2019).

Indigenous peoples' food systems and territorial management practices rely on collective rights to communal lands and natural resources. Their food systems often involve movement, nomadism and shifting cultivation. The lockdown has affected these activities because of the confinement measures reinforced in most countries, which has in turn impacted the trade and value chain of food.

Across the world, the overall disruption of food and commodities value chains is being felt by indigenous peoples, aggravating their [food insecurity](#) in different regions. In Latin America, some indigenous communities are struggling to deal with the health crisis and maintain access to food. In some African countries, pastoralists and indigenous peoples face the double emergency created by the desert locust outbreak and the COVID-19 pandemic (FAO, 2020a). While in northern Thailand, indigenous peoples face forest fires and COVID-19, with seasonal fires having gotten worse in recent years and air pollution posing an added health threat (Asean, 2020).

The type and severity of the pandemic's impact on indigenous peoples' livelihoods and food security depends on multiple variables. Two of the main variables are: whether they live in an urban or rural setting; and whether they are dependent on purchased food sources or rely on their indigenous food systems and traditional territorial management to generate food. There are additional variables to consider including regional containment policies and pre-existing conditions compromising their food systems.

Indigenous peoples have highlighted the enhancement of their indigenous food systems as a long-term solution to face the effects of the COVID-19 crisis. When indigenous peoples are capable of generating their food following their ancestral and traditional territorial management practices, they are able to feed themselves and reduce their dependency on external foods, incomes and markets. For example, while the Karen people in Bae Mae Jok who locked themselves up could rely

on their forest for food, in Nepal indigenous peoples stated that the laws preventing them from using forest and water resources, impacted their lives more than the pandemic itself. (Indigenous Voices. 2020.)

The integrity and long-term sustainment of indigenous food systems is dependent upon the practice and transmission of traditional knowledge from generation to generation. It is anticipated that indigenous peoples' food security will be affected with the passing away of traditional knowledge holders and culture bearers, often the elders in the communities (UNPFII, 2020).

Lack of access to health services and health disparities

Globally, indigenous peoples experience limited access to health facilities, information and services. In some locations, this results in poor health conditions, and higher rates of communicable and non-communicable diseases and health disparities in comparison to non-indigenous populations (WHO, 2018). Some of these pre-existing health conditions make individuals and groups of people more vulnerable to the impacts of COVID-19 pandemic.

In spite of the striking health disparities for indigenous peoples when compared to the non-indigenous population throughout the world, there is limited official disaggregated data. One example is the [data](#) provided by the Indian Health Services (IHS) and Center for Disease Control and Prevention (CDC) in the United States of America. IHS estimates that an American Indian/Alaska Native person's life expectancy is 5.2 years less than a non-native person due to, among other reasons, a higher prevalence of certain diseases, such as diabetes. American Indians/Alaska Natives have a 14.7 percent higher prevalence of this disease than any other demographic group in the United States of America (CDC, 2020). There are very similar disparities in various parts of the world, however there is limited official disaggregated data.

Furthermore, when [accessing healthcare services](#), indigenous peoples frequently face discrimination and are unable to communicate due to the absence of translators or indigenous language-speaking personnel. To address this language barrier, the Government of Peru, Mexico, and Colombia, among other countries, have established that communications related to COVID-19 must also be translated and available in indigenous languages. In several countries, rural indigenous peoples are particularly vulnerable to the pandemic because they are often far from hospitals and have limited local healthcare, which hampers their access to health information. In Mexico, a national network of indigenous community radio stations is stepping in to fill the lack of access to the internet and to share health information in remote/rural areas.

Except for a few examples, like in Bolivia, most countries do not have intercultural health systems that consider the traditional medicine and the healers along with medical doctors. The lack of intercultural health systems places indigenous peoples in a precarious situation to contain and treat the current pandemic. The provisions of adequate supplies and training for indigenous caretakers could be key in addressing the pandemic, particularly in remote and isolated communities.

The [lack of official recognition and data-invisibility](#) creates a barrier for indigenous peoples to access health services and to receive social protection benefits. In Asia, some indigenous peoples do not have identification documents, which impedes them from accessing all public services. In other regions, indigenous peoples are often not considered while [collecting data, surveys, censuses](#) and statistics, further complicating COVID-19 containment efforts and threatens the health of thousands of indigenous peoples.

Indigenous peoples have resorted to their own means to report cases and contain the COVID-19. For example, indigenous peoples in Colombia, Ecuador, Panama, and Brazil are collecting and reporting their own data (ONIC, 2020) and are creating a regional platform to share information in Latin America (FILAC, 2020a).

TABLE 1 | Reported cases of COVID-19 by indigenous peoples

Some Reports of COVID-19 incidence on indigenous peoples	Reported by
In the Navajo Nation , in North America at 15 July 2020, 8 370 cases of COVID-19 and 405 related deaths have been reported as of 15 July 2020.	UN Permanent Forum on Indigenous Issues (UNPFII)
In Arizona , USA, 16 percent of COVID-19 - related deaths are amongst Native Americans, despite being 6 percent of the population.	
In New Mexico , USA, Native Americans are 10 percent of the population, but have 1/3 of the cases of COVID-19.	
The Brazilian Amazonas has become a hotspot for the outbreak, with more than 19 128 cases and more than 1 018 deaths, amongst 172 indigenous peoples communities.	
More than 70,000 cases and over 2,000 deaths were reported among indigenous peoples in the Americas as of 6 July 2020..	World Health Organization
At least 6 cases have been reported among the Nahua people, who live in the Peruvian Amazon .	
Reports of COVID-19 effects on indigenous peoples' food security and socio-economy	
Large numbers of tribal peoples in the Bangladesh Hill Tracts face hunger and rely on food aid.	UN Permanent Forum on Indigenous Issues (UNPFII)
Many indigenous villages in Nepal have reported that they are unable to harvest their fields.	
Land is Life reports that many indigenous peoples were outside of their communities when the lock-down took place and are unable to return therefore now without food and shelter.	Land is Life
Discrimination of indigenous communities in North-Eastern India based on skin-colour has occurred. This led to cases where indigenous peoples were thrown out of their houses and denied access to the food market.	Asian Indigenous Peoples' Pact (AIPP)
In Nepal , indigenous peoples with disabilities have highlighted that bureaucratic barriers and lack of inclusive communication have prevented them from being included in relief efforts	
In Myanmar patient 0 was a member of an indigenous community, leading to the discrimination of indigenous peoples in the country.	
In Bangladesh , an additional measles outbreak has posed an additional threat to indigenous communities	FILAC
In Latin America , indigenous peoples have highlighted the need to address dengue and malaria already existing in indigenous territories.	

TABLE 2 | Indigenous peoples’ containment measures

Indigenous peoples’ initiatives to contain COVID-19 and support their communities	
FILAC and Foro Abya Yala have created a regional platform of indigenous peoples in Latin America , with more than 30 indigenous networks, to monitor cases of COVID-19 in indigenous communities, as well as monitor the responses to the crisis coming from indigenous communities and national governments.	FILAC
In Paraguay , the Government and indigenous peoples established a protocol to enter indigenous peoples’ territories	FAO
In Bangladesh , Indigenous Youth have created a social media campaign to mobilize people in support of the country’s most vulnerable communities.	AIPP
Indigenous Youth in several Asian countries collaborate with seamstresses to produce facial protective masks for to their communities.	
The governments in Canada and the United States of America moved quickly to allocate funds directly to First Nations, to strengthen their health services and provide mental health support.	Canada
In the Standing Rock Sioux Reservation in North Dakota, USA, students of herbalism at the Sitting Bull Tribal College have produced a herbal guide with traditional medicine to support collective protection and healing during COVID-19	UNPFII
In Nepal , indigenous peoples have reported that, some nomadic communities have received protective gear and have undergone COVID-19 tests	AIPP
In Colombia and Peru , the Governments have issued COVID-19 messages posters and radio spots in indigenous languages.	Colombia & Peru
Indigenous youth are leading developing actions on mental health and intergenerational dialogues as well as working with indigenous children in Chile and Mexico	FILAC
In Australia the Government prioritized their indigenous population under the Australian Health Sector COVID-19 Emergency Response Plan.	Australia
The Aboriginal and Torres Strait Islander Advisory Group on COVID-19 developed the Management Plan for Aboriginal and Torres Strait Islander Populations.	

Indigenous territories, natural resources and lands are where indigenous peoples display their spirituality, culture and exercise their right to self-governance and self-determined development, which defines their [approach to disease, life and death](#). This is why an intercultural approach to health is so important in this pandemic. It is also important that health services are [physically accessible](#). The Government of Canada and state governments in the United States of America have established special transportation for tribal members in need of health care beyond their territories.

Territorial-governance, self-determined development and Free Prior and Informed Consent

[Free, Prior and Informed Consent](#) is essential for indigenous peoples, particularly after hundreds of years of imposed measures on them without consulting their views. Indigenous peoples have the right to express their consent to any COVID-19 measure in their territories.

However, [legal uncertainty over their lands' tenure](#) related to their customary tenure systems and their reliance on collective rights versus private ones, could expose indigenous peoples to abuse, violence, forced displacement and encroaching of their lands during countrywide mandates for confinement. In addition, as indigenous territories hold 80 percent of the world's biodiversity (World Bank, 2008), the intensified competition over natural resources adds pressure on indigenous peoples who are facing increased violence and threats. For example, in Colombia, indigenous leaders in the mountainous department of Cauca were threatened by drug trafficking groups after they closed their borders by setting up 69 control points protected by 1,200 guards (Turkewitz, 2020). In Myanmar, indigenous peoples are struggling to address the pandemic amid an increasingly violent [civil war](#) as the country's military steps up offensives against ethnic armed groups (Asean, 2020)

[Indigenous human rights defenders](#) should be protected, as they are more at risk of being attacked or criminalized during the confinement. Reports from indigenous organizations show that evictions and criminalization have not stopped since the beginning of the pandemic (UNDESA, 2020).

Indigenous traditional knowledge and ancestral practices

Over centuries indigenous peoples have faced and survived pandemics, invasions and outbreaks through their [traditional knowledge systems](#). Indigenous peoples' knowledge is formed through experience and hundreds of years of observation. It is passed from generation to generation and adapted based on the different challenges they have faced overtime. Many of the measures taken by governments across the world to face the COVID-19 outbreak mirror indigenous peoples' ancestral practices of confinement.

Many indigenous peoples have [closed their borders and self-isolated](#) as a measure of collective self-preservation – the paramount example of this are the indigenous peoples in voluntary isolation (Aljazeera, 2020). In some communities, the closure of the territory to outsiders has a strict protocol that follows ceremonies and rites, which can be invoked by the chief or community leader in times of emergency. The Asian Indigenous Peoples Pact highlighted that the rituals performed by indigenous communities are important because they are a declaration of collective commitment by the community to nature and to support one another in most crucial times. This is how the indigenous peoples draw on their spiritual strength when they are confronted by the unknown. For instance, in northern Thailand, before the government announced travel restrictions, some indigenous villages instituted lockdowns, restricting access to their land. The Karen people performed traditional rituals known as *Kroh Yee* to lock down their communities. The last time these villages performed the rituals was reportedly in response to a [cholera](#) outbreak 70 years ago. The ethnic Suku Anak Dalam in southern Sumatra, Indonesia, have implemented an [indigenous physical distancing system](#) called *besasandingon* that has long been part of their culture as a method to stop the spread of disease (Jon Afrizal and Markus Makur, 2020). Indigenous peoples of the Cordillera in the Philippines have a practice known as *binnadang/ub-ubbo*, a system of labour exchange to support those in need and share food.

Indigenous women and indigenous youth

[Indigenous women](#) play a crucial role in indigenous economies as sellers and caregivers (IWGIA, 2020). They are usually in charge of selling food, weavings and handicrafts in the communal markets, and are caregivers to children, elders and people with disabilities. Special measures should be considered to address indigenous women's needs, including sexual and reproductive rights. Indigenous women in Peru have developed a strategy to address women's issues during the pandemic (Onamiap, 2020).

Indigenous youth are playing a key role in the COVID-19 crisis response by building bridges between the elders' knowledge and technology, while also developing new ways of communication. For example, the Global Indigenous Youth Caucus has been leading the information response of the crisis in several regions and communities combining ancestral knowledge with internet platforms, social networks and radios. Special attention should be given to indigenous children and youth and their access to education during the pandemic.

POLICY RECOMMENDATIONS AND ACTIONS

Based on the UN Declaration on the Rights of Indigenous Peoples (UNDRIP, 2007) and the WHO messages related to COVID-19, the following policy recommendations and actions should be considered by governments and stakeholders to ensure the cultural and physical survival of indigenous peoples in the medium and long term.

Short-term recommendations and actions for the immediate response to the pandemic:

To ensure indigenous peoples' **health**

- Include the indigenous peoples as **recipients of health assistance** like any other citizen of the country, including them among the population that tested for COVID-19. For instance, the Australian Government prioritized the indigenous population under the Australian Health Sector COVID-19 Emergency Response Plan.
- Include indigenous peoples' communities among the **receivers of personal protective equipment** such as masks, gloves and disinfectants. In Nepal, indigenous peoples have reported that, some nomadic communities have received protective gear and have undergone COVID-19 tests (AIPP, 2020b).
- Develop relevant COVID-19 containment information and audio-visual materials for indigenous peoples in **indigenous languages**. This material should be shared with the traditional leaders. In Colombia, the Government issued COVID-19 messages in indigenous languages (Ministerio de Cultura de Colombia, 2020) while in Peru the government developed informative posters and radio spots in indigenous languages (Ministerio de Cultura de Perú, 2020).
- In collaboration with indigenous authorities, take measures to address previous existent and prevent **other infectious diseases** to spread during the COVID-19 response. In Latin America, indigenous peoples have highlighted the need to address dengue and malaria already existing in indigenous territories and in Bangladesh, a measles outbreak has supposed another threat to indigenous communities. (FILAC, 2020a; Kuman, 2020).
- Ensure the **collection of disaggregated data** on the rate of infection and deaths within Indigenous communities recorded by ethnicity.
- Promote the involvement of **indigenous youth** as their command of social media and languages makes them essential in this situation. For example, in Latin America indigenous youth are leading developing actions on mental health; in Chile, indigenous youth are leading intergenerational dialogues in *mapuche* territories, while in Mexico are working with indigenous children telling stories about the pandemic and their feelings of fears and hope. (FILACb, 2020).

- Specific measures should be taken to address the needs of indigenous youth during the pandemic.
- Establish measures to address the negative impacts on [indigenous women](#) due to the pandemic. In Asia indigenous women asked for the effective recognition of their contribution in sustainable food systems and health care and their knowledge and practice on natural resource management (Asian Indigenous Women network, 2020) while in Latin America concerns have risen on the increase of the situation of violence against indigenous women during the pandemic (CHIRAPAQ, 2020).
- Provide access to [safe water](#) to indigenous peoples and take all the necessary measures to avoid contamination of the indigenous territories water resources. (GWOPA, 2020).
- Adopt specific measures to address the needs of [indigenous persons with disabilities](#) who are still invisible in most countries. In Nepal, indigenous peoples with disabilities have highlighted that bureaucratic barriers and lack of inclusive communication have prevented them from being included in relief efforts. (AIPP, 2020b, International Disability Alliance 2020).
- Collaborate with [NGOs, academia, and other stakeholders](#) with presence already in indigenous peoples' territories as key to fill the gap at the local level and strengthen health protection of indigenous peoples. Online consultations through an app and by phone that 'doctors in the Amazon' is developing in Brazil is a good example of innovative medical intervention without accessing indigenous territories. (Doutores da Amazonia, 2020).

To address the [socio-economic](#) impacts:

- Establish short-term [social protection measures targeting with specific funds indigenous peoples' issues](#). In Canada, the Government has issued a fund with actions related to food security, employment, children and youth education, mental health and support to elders and indigenous peoples in vulnerable situations. (Government of Canada, 2020).
- [Social protection measures](#) should be provided regardless the status of citizenship of indigenous peoples or their previous registration in welfare systems. Indigenous peoples' organizations in Asia have stated that in some countries access to social protection measures are difficult because of the lack of recognition of indigenous peoples. (AIPP, 2020b).
- [Social protection measures](#) should be discussed with the indigenous traditional leaders in the countries where they reside. In most cases, social protection measures are designed with other ethnic and cultural groups in mind and lack the intercultural approach to address the needs of indigenous peoples.
- Ensure the [effective participation of indigenous leaders and traditional authorities](#) in the committees designated to distribute benefit [economic packages and social protection programmes](#). This measure will assure that indigenous peoples are included among the beneficiaries, and that the packages and programmes are culturally appropriate to avoid unintended side effects. Experiences from recent years in Paraguay and Colombia showed how the participation of indigenous peoples is key to address their different view of community and poverty. (ILO, 2018).
- Ensure a [holistic approach](#) that considers indigenous peoples self-governance, culture and relationship with the environment. Experiences from the past in Cambodia and Philippines revealed how social programmes benefit from a broader approach. (ILO, 2018).
- Through [South-South and triangular cooperation](#) arrangements disseminate good practices

and effective [specific policy measures](#) put in place by some countries to protect indigenous peoples during the COVID-19 pandemic. These good practices could be disseminated and mirrored by other countries with indigenous population.

To respect the right to, [self-governance, participation](#) and [Free, Prior and Informed Consent](#):

- Respect the right of [Free, Prior and Informed Consent](#). Therefore, any policy, programme or intervention that affects indigenous peoples should first obtain their [Free, Prior and Informed Consent](#). In case indigenous representatives cannot be reached, the measures adopted by the state should nonetheless comply with the highest standards of protection and respect of their collective rights under the UNDRIP. In Colombia, the indigenous organizations solicited the national Government to suspend all consultation processes until the health emergency was over in order to guarantee their free, prior and informed consent (Semana Sostenible, 2020).
- Intensify protection measures to stop external entities from taking advantage of the pandemic, preventing encroachment of indigenous peoples' lands. These external entities include farmers, settlers, private firms, extractive and mining industries.
- Respect and guarantee indigenous peoples' actions regarding the [self-isolation](#) and border-control measures, in order to prevent the spread of the virus. In Paraguay, the government and indigenous peoples established a protocol to enter the territories (FAO, 2020b).
- [Include indigenous peoples' representatives, leaders and traditional authorities in emergency and health response committees](#), or any entity dedicated to the COVID-19 pandemic, both dealing with outbreaks as well as in the socioeconomic responses. In Australia, the Aboriginal and Torres Strait Islander Advisory Group on COVID-19 developed the Management Plan for Aboriginal and Torres Strait Islander Populations.

Important Medium-term recommendations for building back better by addressing pre-existing conditions:

- Ensure the [legal recognition](#) at national levels of the rights and existence of millions of indigenous peoples. Failure to do so will increase the risk and possibility of other outbreaks of the pandemic reaching and spreading among indigenous peoples. The invisibility of indigenous peoples in Asia has proven to be a problem to prevent and address the consequences of the pandemic. This issue is even more dramatic when intersects with gender, youth and disability.
- Ensure access to [culturally and linguistically sensitive health services](#) for indigenous peoples in rural and urban areas that count with medical staff prepared to provide health care to indigenous peoples.
- Establish [intercultural health protocols](#) and mechanisms with indigenous peoples' authorities as a channel to overcome health emergencies in the future.
- Stop [any planned or on-going evictions of indigenous peoples](#).
- Grant land titles to those indigenous peoples who have filed a [request with the land authorities](#) and await the processing, sometimes for several years to avoid further encroachment on indigenous lands and territories.
- [Enhance indigenous peoples' food systems](#) and legally recognize the indigenous peoples' collective rights to land, and natural resources. Forests have proven to be life saving for indigenous peoples' food security and cultural and physical survival during the pandemic.

- Address chronic food insecurity and illnesses related to malnutrition, such as diabetes, in consultation with indigenous authorities to prevent indigenous peoples' vulnerability to diseases, such as COVID-19.
- Establish protocols to contact indigenous peoples in self-lock down for future outbreaks or emergencies.
- Intensify Governmental protection measures to stop external entities from taking advantage of the pandemic. These external entities include farmers, settlers, private firms, extractive and mining industries.
- Establish safe zones to protect indigenous peoples in voluntary isolation or initial contact from external actors bringing the disease. (Yanomami case reported of illegal miners infecting the communities)

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