Summary of Program Activities
PERMANENT SECRETARIAT
AMAZON COOPERATION TREATY
ORGANIZATION (PS/ACTO)

STRATEGIC FRAMEWORK
FOR PROTECTING INDIGENOUS
PEOPLES IN VOLUNTARY ISOLATION
AND INITIAL CONTACT

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### Acronyms and Abbreviations

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<td>ACCA</td>
<td>Asociación para la Conservación de la Cuenca Amazónica</td>
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<td>ACNADIYSH</td>
<td>Asociación de Comunidades Nativas para el Desarrollo Integral del Yurúa Yono Sharukoiai</td>
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<tr>
<td>ACT</td>
<td>Amazon Conservation Team</td>
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<td>ACT</td>
<td>Amazon Cooperation Treaty</td>
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<td>ACTO</td>
<td>Amazon Cooperation Treaty Organization</td>
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<tr>
<td>AGU</td>
<td>Advocacia Geral da União</td>
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<tr>
<td>AIDER</td>
<td>Asociación para la Investigación y el Desarrollo Integral</td>
</tr>
<tr>
<td>AIDSEP</td>
<td>Asociación Indígena para el Desarrollo de la Selva Peruana</td>
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<tr>
<td>AIPEA</td>
<td>Autoridades Indígenas de La Pedrera Amazonas</td>
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<tr>
<td>AMWAE</td>
<td>Asociación de Mujeres Waorani de la Amazonia Ecuatoriana</td>
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<tr>
<td>ANP</td>
<td>Área Natural Protegida</td>
</tr>
<tr>
<td>ANSPE</td>
<td>Agencia Nacional para la Superación de la Pobreza Extrema</td>
</tr>
<tr>
<td>APECO</td>
<td>Asociación Peruana de Conservación de la Naturaleza</td>
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<tr>
<td>APIB</td>
<td>Articulación dos Povos Indígenas do Brasil</td>
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<tr>
<td>ATM</td>
<td>Ministry of Labor, Technological Development and Environment Suriname</td>
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<tr>
<td>IDB</td>
<td>Inter-American Development Bank</td>
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<tr>
<td>BIREME</td>
<td>Biblioteca Virtual en Salud</td>
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<tr>
<td>CAAAP</td>
<td>Centro Amazónico de Antropología y Aplicación Práctica</td>
</tr>
<tr>
<td>CANOB</td>
<td>Central Ayoreo del Oriente Boliviano</td>
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<tr>
<td>CASAI</td>
<td>Casa de Apoyo a Saúde do Indio</td>
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<tr>
<td>CDA</td>
<td>Corporación para el Desarrollo Sostenible del Norte y el Oriente Amazónico</td>
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<tr>
<td>CDB</td>
<td>Convention on Biological Diversity</td>
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<tr>
<td>CEDIA</td>
<td>Centro para el Desarrollo del Indígena Amazónico</td>
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<tr>
<td>CEMIB</td>
<td>Central de Mujeres Indígenas del Beni</td>
</tr>
<tr>
<td>CENSI</td>
<td>Centro de Salud Intercultural</td>
</tr>
<tr>
<td>CEPIB</td>
<td>Central de Pueblos Indígenas del Beni</td>
</tr>
<tr>
<td>CI</td>
<td>Conservation International</td>
</tr>
<tr>
<td>CIP</td>
<td>Comissão Pró-Indio</td>
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<tr>
<td>CICAME</td>
<td>Centro de Investigaciones Culturales de la Amazonia Ecuatoriana</td>
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<tr>
<td>CIDOB</td>
<td>Confederación de Pueblos Indígenas de Bolivia</td>
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<tr>
<td>CIDSA</td>
<td>Comisión Internacional de Derechos de Pueblos Indígenas de Sud América</td>
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<tr>
<td>CIMI</td>
<td>Conselho Indigenista Missionário</td>
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<td>CIPICAI</td>
<td>Comité Indígena para la protección de los Pueblos en Aislamiento y Contacto Inicial</td>
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<tr>
<td>CIPOAP</td>
<td>Central de Pueblos Indígenas de Pando</td>
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<td>CIRABO</td>
<td>Central Indígena de la Región Amazónica de Bolivia</td>
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<tr>
<td>CISI</td>
<td>Comissão Intersetorial de Saúde Indígena</td>
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<tr>
<td>CLPI</td>
<td>Consentimiento Intersetorial de Pueblos Indígenas Aislados y Contacto Inicial</td>
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<tr>
<td>CMPIACI</td>
<td>Comisión Multisectorial Pueblos Indígenas Aislados y Contacto Inicial</td>
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<tr>
<td>CODENPE</td>
<td>Consejo de Nacionalidades y Pueblos del Ecuador</td>
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<td>CODIR</td>
<td>Consejo Directivo Regional</td>
</tr>
<tr>
<td>COHARYIMA</td>
<td>Consejo Harakmbut, Yine, Matsiguenka</td>
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<tr>
<td>COIAB</td>
<td>Coordenação das Organizações Indígenas da Amazônia Brasileira</td>
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<tr>
<td>COICA</td>
<td>Coordenadora de las Organizaciones Indígenas de la Cuenca Amazónica</td>
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<td>COINBAMAD</td>
<td>Consejo Indígena de la Parte Baja Madre de Dios</td>
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<td>COMARU</td>
<td>Consejo Machiguenga del Río Urubamba</td>
</tr>
<tr>
<td>CONAIE</td>
<td>Confederación de Nacionalidades Indígenas del Ecuador</td>
</tr>
<tr>
<td>CONAMAQ</td>
<td>Consejo Nacional de Ayllus y Markas del Qullasuyu</td>
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<td>CONAP</td>
<td>Confederación de Nacionalidades Amazónicas del Perú</td>
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<td>CONFENAIE</td>
<td>Confederación de Nacionalidades Indígenas de la Amazonia Ecuatoriana</td>
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<tr>
<td>CONPES</td>
<td>Consejo Nacional de Política Económica y Social</td>
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<tr>
<td>CGIIRC</td>
<td>Encontro das Frentes de Proteção Etnoambientais</td>
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<tr>
<td>CTN</td>
<td>Comité Técnico Nacional</td>
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<tr>
<td>CPEMB</td>
<td>Central de Pueblos Étnicos Mojeños</td>
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I. EXECUTIVE SUMMARY OF THE PROGRAM

The Program for Developing a Regional Agenda for Protecting Indigenous Peoples in Voluntary Isolation and Initial Contact (called PIACI in Spanish acronym) was implemented by the Permanent Secretariat of the Amazon Cooperation Treaty Organization (PS/ACTO) with Inter-American Development Bank (IDB) funds and contributions from ACTO Member Countries. The activities were conducted in two periods, the Phase one in 2011 – 2014, and the second Phase, called “Indigenous peoples in ACTO border regions” in 2016 – 2018. A general evaluation of the two phases of the project was conducted in 2018. The program was implemented in coordination with ACTO Member Countries through their Focal Points before the Program’s Regional Steering Committee (CODIR in Spanish acronym).

In view of the very diverse background of pro-indigenous policies and regulatory frameworks, a similar picture emerges of the specific situation of PIACI in the areas they inhabit, which are largely located in border areas. The unanimous opinion is that these populations are in a critical situation of vulnerability, despite the large number of national and international legal provisions that exist for their protection. The main causes are the advancing economic frontier for exploitation of natural resources and the absence of specific public policies, especially for border regions.

Progress was achieved during Phase I in the process of convergence and harmonization of standards, protocols and guides for addressing emergency situations, especially in border areas involving two countries (Brazil/Peru and Ecuador/Brazil for technical assistance) or three neighboring countries (Brazil, Guyana, Suriname). “Health Care Guidelines” and “PIACI Protection Guidelines” were developed as inputs for public policies and other national processes for creating legal tools in the CODIR countries.

There is a shared set of principles on protection of the territory and its natural resources (“intangibility”), recognition of their self-determination (“voluntary isolation”), validity of prior, free and informed consultation for defining their future relationship with the surrounding population, urgent and differentiated health protection and coordination, participation and ongoing discussion with all the actors involved.

Progress was also seen in the construction of national action plans in Colombia, Bolivia and Brazil and improved knowledge and practices that go beyond the mere formulation of regulatory principles that already exist in international law. The development and dissemination of PIACI Protection Guidelines by the Office of the United Nations High Commissioner for Human Rights (UNHCHR) in February of 2012 and publication of the Inter-American Human Rights Commission (IAHRC) document with recommendations for full respect of PIACI human rights in December of 2013 provide major additional reinforcement for achieving the Program’s objectives.

Health Contingency Plans have been discussed, agreed partially implemented, mainly through binational (Brazil and Peru) and trinational trans-border cooperation (Brazil, Guyana and Suriname). The “Health Care Guidelines” developed at a 2013 meeting of Health Ministries in Lima were approved by the 4th CODIR in 2014.

There is extensive, updated and quality anthropological information and data on PIACI in the Amazon region, along with detailed mapping with georeferenced location. In addition, the network of Focal Points and National Technical Committees, enhanced by interpersonal relations developed during the five trips to PIACI areas in the same number of countries, is extremely important.
In short, a process of convergence and harmonization of standards, protocols and guides for addressing an emergency situation, especially along border areas, was promoted during the first phase. Two important instruments were developed as tools for public policies and other national processes for building legal instruments in the Member Countries (MC), creating and consolidating sectors that specialize in Protecting PIACI Rights in most MCs: (i) Guidelines for Health Care of Indigenous Peoples in Isolation and Initial Contact (PIACI) and (ii) Guidelines for Protecting Indigenous Peoples in Isolation and Initial Contact. The first phase was an enriching experience for the institutions and actors involved and made a special contribution to the exchange of experiences on different approaches for addressing the issue of highly vulnerable indigenous peoples. This exercise became a space for discussing the situation of PIACI and the possibilities and opportunities available for regional and trans-border cooperation on the matter.

The second phase of the program was subsequently developed with a two-year duration after the fourth CODIR meeting held on October 14, 2014, based on the contributions and recommendations of the first phase of the program to enhance the protection of especially vulnerable indigenous peoples, a situation that generally exists in border regions near the areas inhabited by PIACI. The second phase of the program was entitled “Project on Indigenous Peoples in ACTO Border Regions” and finished at the end of 2018. The project was financed through the Regional Public Assets line of the Inter-American Development Bank (IDB).

The "Tena Declaration" at the 12th Meeting of Foreign Ministers of ACTO Member Countries on December 1, 2017 in Tena, Ecuador recognized and highlighted the progress achieved in PIACI protection, addressing the same topic discussed earlier by indigenous and civil society organizations of five countries in the "Brasilia Charter" of June 22, 2017 and the “Declaration in Defense of Indigenous Peoples in Isolation and Initial Contact of the Amazon Basin and Gran Chaco". A hearing was conducted on October 23, 2017 on the “Situation of the Human Rights of Peoples in Voluntary Isolation and Initial Contact in the Amazon and Gran Chaco” before the CIDH in Montevideo, at which the Brazilian NGOs Articulação dos Povos Indígenas do Brasil (APIB), Coordenação das Organizações Indígenas da Amazônia Brasileira (COIAB), Conselho Indigenista Missionário (CIMI) and Centro de Trabalho Indigenista (CTI) submitted a detailed report on the situation in Brazil. A "Pan-Amazonian Meeting in Defense of PIACI" was held during the same year, organized by Rede Eclesial Pan-Amazônica (REPAM) in Cuiabá, MT, with participants from three countries of the region. The conclusions of the three meetings conducted by indigenous organizations and their civil society partners last year agrees on the analysis and most of their demands and proposals, showing that the matter is topical and the urgency of agreeing on coordinated action among government agencies, indigenous and civil society organizations.

Progressive learning dynamics were seen during phase II of the project among members of the network of participants, together with an increase in indigenous participation and growing familiarity with the specific living conditions on both sides of the borders. The resilience of the process and its ability to make proposal have been the greatest success of the project, despite the scarcity of available funds and, in some cases, adverse situation in pro-indigenous, environmental and agricultural policies.
II. BACKGROUND OF THE PROGRAM

The Amazon Cooperation Treaty (ACT) was signed in July 1978 by Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru, Suriname and Venezuela to promote joint actions for regional development, environmental protection and “rational” (sustainable) use of the natural resources of the Amazon basin. Twenty years later, in 1998, the ACT signatory countries decided to establish the Amazon Cooperation Treaty Organization (ACTO). The ACTO headquarters, where its Permanent Secretariat (PS) operates, were inaugurated on December 13, 2002 in Brasilia, Brazil.

At the same time, in contact and dialogue with the ACTO Secretariat and government agencies responsible for indigenous peoples, several civil society and indigenous organizations’ initiatives were launched for protecting PIACI in their respective countries and with a regional vision.

In 2010 it was decided to implement a regional program for protecting PIACI that was approved on February 15, 2011 and financed with IDB resources. The activities of this “Strategic Framework Program for Developing a Regional Agenda for protecting Indigenous Peoples in Voluntary Isolation and Initial Contact (PIACI)” ended in December of 2014. The ACTO Member Countries suggested that it be continued with actions focusing on indigenous peoples’ health and territorial management in the regions adjacent to territories inhabited by PIACI.
According to official sources of ACTO Member Countries (MC), indigenous peoples in isolation and initial contact (PIACI) live in different areas of the Amazon Region and with various degrees of vulnerability. They are concentrated in most cases in border areas that are difficult to reach to avoid contact with representatives of the national society that is considered hostile and dangerous, often based on concrete experiences. Relations with indigenous communities in the territory, which frequently has the characteristics of a refuge region, may also be conflictive. The areas where they now live and move also contain an extremely rich biodiversity and are under the pressure of expansion of agricultural and mining frontiers.

It is clear that in the vast majority of cases, isolation is not really “voluntary”, since the extreme vulnerability of these populations surrounded by exploiters of natural resources means that their “voluntary isolation” is a survival strategy. Since 2013, the international community, represented by the Inter-American Commission on Human Rights (IACHR) recognizes two central premises for interaction with PIACI: the fundamental right to decide not to have contact or remain isolated and the right to reject the presence of persons who are not members of their people or community. This should be borne in mind in all post-contact consultation processes for prior, free and informed consent.

The term “indigenous peoples in initial contact” refers to human groups in recent or intermittent contact with the surrounding society, often represented by indigenous communities, which always means a potentially conflictive and highly vulnerable situation. The first contact is especially important, the group’s survival depending to a large extent on the circumstances and subsequent interaction with the surrounding population. The levels of mortality due to contagion during the initial contacts require special protection measures prior to and during the contact. The need to include the indigenous population surrounding the territories identified as PIACI habitats is also seen as a way to include the indigenous population that adjoins the territories identified as PIACI habitats to prevent armed conflict, set up a health cordon and be able to count on their consensual and voluntary participation in emergency measures and dispute settlement.

The Strategic Framework Program for Developing a Regional Agenda for protecting Indigenous Peoples in Voluntary Isolation and Initial Contact resulted from cooperation between the Amazon Cooperation Treaty Organization (ACTO) and the Inter-American Development Bank (IDB). The program was approved on February 15, 2011 with the participation of the ACTO Member Countries.

Through its Permanent Secretariat, ACTO is the implementing agency of the Program.

The purpose of the Program was to contribute to the protection of indigenous peoples in voluntary isolation and initial contact (PIACI) by defining effective policies and actions adopted by consensus among the governments, peoples, indigenous organizations and non-governmental organizations (NGOs) with experience in the matter.

The program was implemented through 5 components:

1. A regional interagency coordination mechanism supported by national agencies;

2. A strategic framework adopted by consensus that includes physical and cultural protection measures;

3. An action plan with territorial protection measures that include legal protection and physical control of activities conducted by external agents in the territories occupied by these peoples and surrounding areas;

4. A regional health care strategy that includes technical preventive health standards with an inter-cultural characteristics or approach and health emergency systems in regions inhabited by these peoples;

5. Data systematization and knowledge of the situation of isolated peoples and capacity development and commitment to their protection (sustainability of the Regional Strategic Framework).

1 Recent documents include a report on the human rights situation of peoples in voluntary isolation and initial contact in Brazil, CTI, APIB and COIAB, with a Fundação Nacional do Índio (FUNAI) – Encontro das Frentes de Proteção Etnoambientais (CGIIRC and CTI) location map, October 2017; Brasilia. Report on the Current Situation of Groups of Indigenous Peoples in Relative Isolation and Scarce Contact in Venezuela, ORPIA and WATANIBA, October 2017, Caracas.
To operationalize the network of agencies committed to PIACI in the Amazon Region, the program received support from the foreign ministries of the ACTO Member Countries and institutions specializing in the matter.

After the signing of the agreement between ACTO and IDB in 2011, activities for the defense of PIACI rights were started as part of the ACTO Strategic Amazon Cooperation Agenda (ASCA).

There is currently a considerable and important number of reports on contact experiences, protection proposals and data analysis in the different countries of the region, which emphasize the development of legal instruments, ethnographic contributions, health protection and territorial defense measures. Thanks to the process generated by ACTO, an agreement has been reached regarding some of the common characteristics of peoples known as PIACI that help guide public policies in border areas. Although they may be markedly heterogeneous in their cultural universes, with their own perception of their identity and different prior experiences, they have in common:

- Their close relationship of interdependence, reciprocity and "kinship" with other living beings in their surroundings (equivalent to the "environment", "ecosystem") that enables them to live self-sufficiently, which implies that defense and maintenance of their territories is of vital importance for them.

- Lack of knowledge regarding the "operation" of a society organized in social classes, in which kinship is not what determines social relationships, which makes them feel disoriented, defenseless and vulnerable with the intervention of different actors of the "indigenous frontier".

- Their special vulnerability to contracting diseases considered common, without having developed an appropriate immune response, which affects the entire group, not only individuals. This situation represents an immediate threat for the survival of the group and requires epidemiological surveillance and post-contact food security measures. Health care is directly related to care of access to the territory.

- Their location in rainforest "refuge areas" with little or no presence of State or civil society institutions, particularly in border areas and those with difficult access. These are also often areas where metals and timber are extracted illegally, prospection for hydrocarbon and drug trafficking are present.
IV. CONCLUSIONS OF THE PROGRAM

Government structures were created and strengthened during Phase I and took on a specialized character that resulted in stronger presence and functionality of State institutions. This happened particularly in border areas, as a necessary condition to influence practices that might represent a risk for PIACI lives. It is worth stressing that guaranteeing the human rights of PIACI should include respect for their habitat and cooperation with indigenous organizations and NGOs present and acting in the region, seeking synergies between the State and all the local actors.

It was seen that interagency coordination and efficiency at the national level is generally weak and does not always reach areas inhabited by PIACI. This situation is worse in certain regions due to the presence of different types of threats and illegal natural resource extraction activities. Controlling this situation of weakness requires strengthening the presence of institutions and trans-border cooperation based on understandings to develop joint actions.

Another important consensus reached refers to the interdependence of PIACI protection policies and those for protecting the natural ecosystems that are their habitat and the basis of their subsistence. This interdependence is especially important in the Amazonian living space. A comprehensive vision of socio-environmental policies for indigenous territories and protected areas should include empowering the indigenous population with respect to territorial management with legal assurances of land ownership.

Although construction and adoption of a Regional PIACI Protection Plan was not achieved during the first stage, emphasis on the countries’ dynamics for bilateral and trilateral negotiations gave positive results with greater impact than was initially established. Through its activities, the Program, produced a convergence of criteria and methods at the regional Amazonian level. The most successful actions were shared and binational actions.

During Phase II of the project, there was consistency with other regional initiatives for more concrete incorporation into the different processes conducted in the Member Countries, seeking to achieve results that can be followed up and have sustainable effects through the participating countries’ public policies. Effective
participation of indigenous representatives, professionals and leaders and other professional experts whose experience is recognized has been another permanent and partially achieved intention.

The project has undergone an intense process of sharing experiences at the regional level, overcoming the countries’ asymmetries in the degree of professional specialization and systematization of experience and knowledge in government and civil society sectors and indigenous organizations. The persistence of problems in interagency coordination at the national level is clearly seen and partly remedied by increased communication between sectors and across borders through an informal network of colleagues, experts and indigenous leaders. This, however, has not managed to overcome the great difficulties that exist in practical, agile and efficient coordination of indigenous affairs, indigenous health and the environment.

Recognizing the success of the ACTO PIACI program, the opinion prevails that progress is really at a very initial stage against the growing threats, more frequent appearances of PIACI and increasingly limited availability of funds. Political contexts that have an adverse effect on public policies in favor of Amazonian indigenous peoples can be clearly seen in many countries, increasing the importance of the ACTO-PIACI project as the only regional government initiative in Amazonian countries that is operating and keeping open a space for PIACI protection, promoting implementation of public policies still in force and encouraging professionals committed to the future of PIACI.

Given the importance of the experience acquired and the size of the geographic area covered by the Brazilian Fundação Nacional del Índio (FUNAI), great concern was expressed over its weakened executive and operational capacity regarding PIACI. At the same time, there is growing conviction among all the actors in favor of PIACI protection that a comprehensive vision of territorial, environmental and agricultural topics is needed for effective defense of their living space. What is legally termed “environmental crime” is nothing but a crime against mankind, committed against indigenous Amazonian peoples.
V. RECOMMENDATIONS OF THE PROGRAM

During Phase I, the recommendations focused on four thematic areas:

1. STRENGTHENING THE STATE’S FUNCTION AND PRESENCE IN BORDER AREAS

There is consensus in all the studies regarding the fact that PIACI are currently in a critical situation of vulnerability due to pressure on their territories because of the advancing economic frontier, mostly due to extraction, their lack of biological defense against contagious diseases, the impossibility of representing themselves in court and the failure of state agencies to ensure their basic human rights.

Almost all the actors in border regions that are part of the PIACI habitat demand the presence of State authorities to face the climate of violence, insecurity and, in many cases, impunity. It must be stressed that international law contains instruments for their protection (especially International Labor Organization Convention 169 and the 2007 United Nations Declaration on the Rights of Indigenous peoples) and in 5 of the 8 ACTO Member Countries there is specific legislation for PIACI. However, the weakness and often the absence of State institutions render the legal framework ineffective and make it difficult to implement legal protection for the indigenous population. Added to this situation are illegal activities such as drug trafficking and illegal extraction of natural resources (timber, minerals).

A third factor is the scarce information available on the actions of the Armed Forces in areas that are at the same time PIACI habitats and border areas with neighboring countries.

This convergence of several risk factors deserves attention and specific strategies adopted in binational agreements with the participation of indigenous and civil society organizations present and acting in the region. A recommendation for the second phase of the program is definition of a Plan for Border Indigenous Peoples with convergent strategies that include the indigenous perspective in public policies to bring national institutions closer to indigenous peoples and promote their rights. This will produce synergies in processes by State authorities to transform legal norms into local practices and, concurrently and for monitoring purposes, by representatives of indigenous and civil society communities and organizations.

2. IMPROVING INTERAGENCY COORDINATION AND EFFICIENCY

Construction of regional PIACI protection standards is on the right path, based on the accumulation and sharing of experience, better anthropological knowledge and good interpersonal relations that emerged during implementation of the program.

On the other hand, the success of this regional convergence process depends, to a large extent, on political factors and circumstances in each country that have nothing to do with this matter. For this reason more substantial progress was achieved in bilateral understandings and agreements on specific issues in border sub-regions with similar dynamics on both sides of the border. These are the most successful examples of joint actions and give practical encouragement to continue building a consolidated legal framework for the entire Amazon region.

Interagency coordination on an issue that is little known or unknown and with no apparent political importance presents severe limitations in itself and particularly in centralized states where institutions are concentrated in the capital city far from the Amazon.

This shows that horizontal interagency coordination fostered by the Program has been successful, whereas vertical coordination from the capital to the departments or regional governments and municipalities has been very deficient.

2 Soria 2013.
3 It is worth mentioning that Brazil, setting the stage for institutionalizing the protection of indigenous peoples a century ago, instituted the CGIRC in FUNAI to coordinate actions to protect PIACIs (Vaz 2013).
4 UNHCHR 2013: 54-60, 78-79.
5 This recommendation follows the guidelines of the ACTO Meeting of Focal Points on Border Indigenous Peoples, Brasilia, October 2014.
Information on the existence of emergency – contingency protocols, for example in health, does not reach local authorities in contact with PIACI. The measures for PIACI protection will only be efficient and effective if institutional coordination arrives on time and at the place where events take place.

3. FOCUSING ON A COMPREHENSIVE VISION OF SOCIOENVIRONMENTAL POLICIES FOR PROTECTED AREAS

The interdependence and linkage of policies for protecting highly-vulnerable indigenous peoples and natural ecosystems that are their habitat enjoys general consensus and is especially important in the Amazon living space.

Defining nature as something external and as “natural capital” available for exploitation and sale according to market rules is rendering invisible the interdependence between human beings and their natural habitat. The perception of nature and natural assets as “bearers of rights” (constitutions of Ecuador and Bolivia) that require a relationship of “respect” between society and natural manifestations, a very widespread notion among the indigenous peoples of the region, is gaining ground.

Protection of PIACI implies recognition of the importance of Amazonian indigenous peoples for preventing massive deforestation, preserving biodiversity and mitigating the effects of climate change. Those protected are, at the same time, protectors of the natural heritage, both national and of mankind as a whole. They are experts in knowledge and good use of biocultural diversity and thus represent not only a highly vulnerable population but also one that has great value for the future of the surrounding national societies. It is a known fact that the best protection of protected rainforest areas is empowerment of their indigenous population for territorial management with legally ensured land tenure.

4. CONTINUE DEVELOPING A REGIONAL PIACI PROTECTION AGENDA

During its first phase, the program achieved more than the expected exchanges of knowledge, experiences and visions regarding PIACI and led to a convergence of criteria and methods for a future regional policy agreed to by ACTO Member Countries.

The many meetings that took place during the development of the program led to and maintained a process of professional and personal appreciation among the different actors who took part, independently from their status as government officials or nationalities. The contributions of external advisors, mainly the authors of national diagnoses and consultants on specific topics have been instrumental in reaching consensus based on facts and knowledge. This result is recognized by the different actors who take part in the program, particularly the National Technical Committees (NTC) and facilitators.

The extreme importance of an understanding based on concepts and methods for trans-border action in sub-regions where there is contact with PIACI that goes hand in hand with trans-border dynamics, was clearly seen. Successful shared and binational actions include the cooperation between Peru (Dept. of Madre de Dios) and Brazil (State of Acre). Since most of the PIACI identified live near borders, cooperation in the area of health is especially important; the advantage is that in this case there are two clear and universal purposes: preventing the transmission of diseases and ensuring access to both traditional and public health medicine and health care.

Brazil, Peru and Colombia have developed emergency – contingency protocols and plans in the event of contact with PIACI groups and everything indicates that in the near future proposals will be unified in a Regional Contingency Plan. This process was considerably reinforced by the publication of the “PIACI Protection Guidelines” in February of 2012, which were developed by the Office of the United Nations High Commissioner for Human Rights based on consultations in the region.

Continued ACTO support for this process of consolidating experiences, criteria and standards in a Plan of Action that is practicable at the short term, although at the beginning in modular form through bilateral arrangements, is very important and meets the expectations expressed by those interviewed. A second phase of the program that will stress binational strategies for PIACI protection in border areas is recommended.
The essential recommendations made during Phase II focused on two thematic areas:

1. CONTINUING AND STRENGTHENING PREVENTIVE AND COMMUNITY HEALTH PROTECTION ACTIVITIES

The right to health is an internationally recognized right and is especially important for PIACI due to their situation of extreme vulnerability. The steps to avoid irreparable loss must be tailored to two specific purposes: avoiding disease transmission through contact with external actors and providing access to their traditional medicine and to differentiated public health services. The intention is to control epidemiological, social, environmental and food-related factors that can cause physical and mental harm. In a post-contact situation, the most frequent infectious and contagious diseases are currently influenza, measles, whooping cough, rubella and venereal diseases. Their treatment requires interaction between the indigenous health system and the western biomedical system without giving priority to either one and with an attitude of respect for specific indigenous concepts and health care providers. The principles of health care should be their appropriate specificity for the patients' culture and pathologies using a trans-sectoral and interdisciplinary approach. A community-based epidemiological surveillance strategy should be implemented.

When evaluating the success of the project in the priority area of health, it can be considered satisfactory in the results of an interconnected process among Member Countries due to the high frequency of consultations and meetings, both informal and planned by ACTO. This exchange of information and knowledge is considered very fruitful by all the actors that have collaborated with the project. The result also shows very similar and mutually accepted understanding of the issue of health using an intercultural and trans-sectoral approach among the countries, more due to the informal exchange of experience during the meetings than to formally adopted standardized rules. In other words, it seems obvious that progress in the mutual learning process and the challenge of reconciling trans-border actions among border countries have been the main factors of a positive outcome in terms of practical effectiveness. The "regional network of experts" that facilitates direct mutual consultation and communication as currently practiced should be made more formal. This success is in contrast with the scarce progress made in interagency coordination at the national level.

On the other hand, the scarcity of available funds is a major limiting factor which in some cases cancels out the progress achieved in prevention and surveillance measures. This financial insecurity, expressed in the State's budget cuts for the health sector and for training, added to the job insecurity of officials committed to PIACI, has led to a reduction of experienced staff, which results in another severe limiting factor for continuing the process that is now under way.

As a conclusion of the assessment, it is worth stressing that the goals have been reached by changing the methodology from organizing eight national workshops to including the topic in all nine regional meetings, thus broadening the participation of indigenous leaders and other health professionals and increasing the resonance of the topic in the MCs. The constant exchange of experiences among the MCs' health teams has been the main focus of the project for creating synergies at the regional level.

Continuing the project in the area of health is recommended since it is unique at the regional level and has accumulated knowledge and experience during the last decade that is starting to spread, thus establishing a set of generalized practices in all the ACTO Member Countries. The guide developed by the project should undergo a participative review and adjustment.

2. INCORPORATING TRADITIONAL KNOWLEDGE AND PRACTICES INTO TERRITORIAL MANAGEMENT

The interdependence and links between policies for protecting highly-vulnerable indigenous peoples and protection of natural ecosystems that are their habitat is another consensus among all the actors and is especially important in the Amazon region, which is also characterized by a large amount of knowledge and practices on traditional socioenvironmental management and sustainable management of their lands and natural assets by the region's indigenous peoples. It is also true, however, that while interagency coordination among neighboring countries fostered by the project has been successful, vertical coordination at the national level, from the capital to the departments or regional governments and municipalities, is still very inadequate.
Efficient management of territories inhabited by indigenous peoples in border areas implies recognition of the importance of Amazonian indigenous peoples in preventing massive deforestation, preserving biodiversity and mitigating the effects of climate change. Those protected are at the same time protectors of the natural heritage of the nation and of mankind as a whole. They have expert knowledge regarding the proper use of biocultural diversity and thus represent not only a highly vulnerable population but also one of great value for the future of the surrounding national societies. It is known that the best protection for protected rainforest areas is empowering the indigenous population for territorial management with legally ensured land tenure. Developing a comprehensive strategy of socioenvironmental policies for protected areas and indigenous lands and territories is recommended.

Faced with the threats of advancing natural resource extraction fronts, especially gold mining, which causes frequent conflicts with the indigenous population, insisting on land management agreed to by the parties involved and guaranteeing the intangibility of PIACI habitats is recommended. A prior condition is effective land control and the political will to implement laws against organized crime and the violent denial of indigenous rights guaranteed by law but not respected. In certain cases an effective partnership is seen between the government, indigenous organizations and civil society, which should be reinforced and maintained. Creating improved access to peaceful negotiation mechanisms and conflict transformation by training the relevant actors in collective negotiation and conflict management is also recommended, considering the traditional concepts, knowledge and practices that foster coexistence and peaceful exchanges among neighboring communities in border areas.

A summary conclusion reconfirms the close relationship between traditional concepts and knowledge and management, control and administration of their territories, but still without being able to confirm the actual impact of the project on operationalization of land management based on traditional knowledge. The successes of component 2 are limited to circumstantial situations of trans-border cooperation with indigenous organizations’ participation and consensus in the analysis of growing threats due to a multiple economic, environmental and institutional crisis that reduces the capacity for intervention to protect PIACI living spaces. The dialogue is still extremely vigorous, but results are scarce, considering that this project is the only regional initiative for addressing problems jointly.

There is consensus regarding the crucial necessity for supporting actions to protect PIACI with scientific research, data recording and exchange and identifying pressures, risks and threats against this highly vulnerable population. However, the different recording systems that exist, including sightings of Isolated Indigenous Peoples (PIA in Spanish acronym), have not yet been unified. One of the tools available for articulating the process are the Guidelines and Toolbox developed by the project, which still require participative review by the MCs’ technical teams.

There has been more progress in the dissemination of knowledge regarding the existence of PIACI with good results, but at the same time news and photographs have circulated of meetings between tourists, merchants and missionaries with PIACI, which create critical situations due to the risks they represent.

Continuing the discussion process and turning it into concrete and shared defense and land management actions that include traditional knowledge and practices is recommended. A further recommendation is trying to ensure that financing PIACI protection goes from a model based on international cooperation to real commitments on the part of the States involved, which should shoulder their constitutional responsibility.
VI. PRESENTATION OF THE COMPILATION DOCUMENT

This document is based, fundamentally, on information resulting from the activities conducted during implementation of the Strategic Framework Program to Prepare a Regional Agenda for Protecting Indigenous Peoples in Voluntary Isolation and Initial Contact (2011-2014) and its second phase, Indigenous Peoples in ACTO Border Regions (2016-2018), in compliance with ACTO / IDB agreements and with the active participation of institutions of ACTO Member Countries. In addition to the aforementioned documentation, authors internationally recognized for their specialized knowledge of the topic of Indigenous Peoples in Voluntary Isolation and Initial Contact, as well as websites of renowned institutions with experience in the subject were consulted. This helped clarify concepts and relevant references for the preparation of this document.

The objective of this systematization of experiences is to continue implementing the Strategic Amazon Cooperation Agenda (ASCA), on the subtopic Indigenous Peoples in Isolation and Initial Contact, which became particularly relevant starting with the evaluations carried out by the different actors participating in the program. As the activities carried out and their results they were made known (press releases and ACTO websites) (www.otca.info; www.otca.org/piaci) and those of other institutions, international specialists have recognized the role as coordinator and facilitator that ACTO plays in the process of recognition of the rights of indigenous peoples in voluntary isolation and initial contact in the Amazon region.

Indigenous communities, organizations and leaders increasingly find that the ACTO Permanent Secretariat provides a space for dialogue with national, regional Amazonian and international institutions. In this sense, the systematization of information on the activities carried out until 2018 be a contribution to the International Agenda on Protection of Indigenous Peoples in Isolation and Initial Contact.
VII. INTRODUCTION OF COMPILATION DOCUMENT

The Strategic Framework Program for Development of a Regional Agenda for Protecting Indigenous Peoples in Isolation and Initial Contact implemented by the Permanent Secretary of ACTO together with the Member Countries and with support from the Inter-American Development Bank (IDB), contributed to the regional vision of the situation of the indigenous peoples in voluntary isolation and initial contact, where several initiatives were proposed by different governmental and non-governmental indigenous and pro-indigenous actors at the national and international level, which recognized ACTO as promoter of experiences in the Member Countries and its role as facilitator in regional cooperation for the defense of PIACI rights.

The activities focused on supporting the Member Countries in developing public policies for protecting PIACI rights. In this sense, the main actions consisted in sharing and exchanging experiences among national institutions directly involved and, at the regional level, as contributions to create and adjust their State and regulatory structures for the defense of PIACI rights.

In the first phase, which took place between 2011 and 2014, the Regional Amazon Guidelines for protecting Indigenous Peoples in Isolation and Initial Contact and a Regional Health Care Strategy: Principles and Guidelines were developed. These instruments have a guiding value in the Member Countries for the implementation of public policies on protection of PIACI rights.

In the second phase, the Project Indigenous Peoples in ACTO Border Regions continued the exchange of information between national institutions and experience sharing among Member Countries. The following documents were developed: Health Surveillance Guide for Indigenous Peoples of the Amazon Region and Guidelines for the Exchange of Traditional Knowledge among Indigenous Peoples in Border Regions for sustainable management of biodiversity. The contents of these products are the result of analyses and comments by the delegates of the Member Countries who participated in project activities between 2016 and 2018.
There are at least 18 international legal instruments, including the 1948 Universal Declaration of Human Rights, the 2007 United Nations Declaration on the Rights of Indigenous Peoples, International Labor Organization Convention 169 on Indigenous and Tribal Peoples in Independent Countries of 1989, the guidelines for protecting Indigenous Peoples in Isolation and Initial Contact of the Amazon Region, Gran Chaco and the Western Region of Paraguay of 2012, as well as the reports of the Special Rapporteur on the Situation of the Human Rights and Fundamental Freedoms of Indigenous Peoples (Rodolfo Stavenhagen, 2006 and 2007) and the precautionary measures granted by the Inter-American Commission on Human Rights (IACHR) in favor of indigenous peoples in voluntary isolation in Ecuador and Peru.

Human rights standards are applicable to Indigenous Peoples in Isolation and Initial Contact, as stated in the Universal Declaration on Human Rights (art. 2) and the United Nations Declaration on the Rights of Indigenous Peoples (art. 1), as well as legislation on indigenous peoples in general, such as ILO Convention 169 (Art. 14). The Guidelines on Indigenous Peoples in Isolation and Initial Contact of the United Nations High Commissioner for Human Rights (OHCHR) were developed along these lines. They are expected to be an instrument that improves the contextualization of international human rights law to protect these peoples in their situation of extreme vulnerability and high risk of disappearance to which they are exposed (OHCHR 2012, p 6-7).

The international law regarding this area contributed in the last two decades to developing specialized legislation, which ranges from constitutional to administrative regulations. While 5 of the 8 ACTO Member Countries have developed legislation and institutions to manage public policy on behalf of indigenous peoples in voluntary isolation and initial contact, there are no regional instruments within the framework of ACTO that regulate this topic. On the other hand, there are historical, political and legal differences that make legal systems and their institutions work differently in several of the ACTO countries, at the same time as there is uneven development of public policies for indigenous peoples in voluntary isolation and initial contact. This offers clear opportunities for intraregional cooperation in the protection of human rights, conservation of biodiversity and to cope with the climate crisis that these indigenous peoples in voluntary isolation and initial contact will also face.
UNITED NATIONS ORGANIZATION (UN)

The UN is the largest international organization that facilitates cooperation on issues such as international law, international peace and security, economic development and social and humanitarian affairs and is also responsible for supporting, promoting and protecting fundamental human rights and the dignity and value of all people. Established officially in October 1945 with 51 member states, it currently has 193 and is headquartered in New York, United States.

THE UNITED NATIONS CHARTER (1945)

Article 73 mentions that “Members of the United Nations which have or assume responsibilities for the administration of territories whose peoples have not yet attained a full measure of self-government recognize the principle that the interests of the inhabitants of these territories are paramount, and accept as a sacred trust the obligation to promote to the utmost, within the system of international peace and security established by the present Charter, the well-being of the inhabitants of these territories, and, to this end:

To ensure, with due respect for the culture of the peoples concerned, their political, economic, social, and educational advancement, their just treatment, and their protection against abuses;

To develop self-government, to take due account of the political aspirations of the peoples, and to assist them in the progressive development of their free political institutions, according to the particular circumstances of each territory and its peoples and their varying stages of advancement;

To further international peace and security;

To promote constructive measures of development, to encourage research, and to cooperate with one another and, when and where appropriate, with specialized international bodies with a view to the practical achievement of the social, economic, and scientific purposes set forth in this Article; and

To transmit regularly to the Secretary-General for information purposes, subject to such limitation as security and constitutional considerations may require, statistical and other information of a technical nature relating to economic, social, and educational conditions in the territories for which they are respectively responsible other than those territories to which Chapters XII and XIII apply.”

UNIVERSAL DECLARATION OF HUMAN RIGHTS (1948)

Article 2 mentions that “Everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

Furthermore, no distinction shall be made on the basis of the political, jurisdictional or international status of the country or territory to which a person belongs, whether it be independent, trust, non-self-governing or under any other limitation of sovereignty.”

INTERNATIONAL CONVENTION FOR THE ELIMINATION OF ALL FORMS OF RACIAL DISCRIMINATION (1965)

Article 2, paragraph 2, proclaims the following: “States Parties shall, when the circumstances so warrant, take, in
the social, economic, cultural and other fields, special and concrete measures to ensure the adequate development and protection of certain racial groups or individuals belonging to them, for the purpose of guaranteeing them the full and equal enjoyment of human rights and fundamental freedoms. These measures shall in no case entail as a consequence the maintenance of unequal or separate rights for different racial groups after the objectives for which they were taken have been achieved.”

INTERNATIONAL COVENANT ON CIVIL AND POLITICAL RIGHTS (1966)

Article 27 establishes that: “In those States in which ethnic, religious or linguistic minorities exist, persons belonging to such minorities shall not be denied the right, in community with the other members of their group, to enjoy their own culture, to profess and practise their own religion, or to use their own language.”

INTERNATIONAL COVENANT ON ECONOMIC, SOCIAL AND CULTURAL RIGHTS (1966)

Article 1 of the Covenant mentions that:

1. All peoples have the right of self-determination. By virtue of that right they freely determine their political status and freely pursue their economic, social and cultural development.

2. All peoples may, for their own ends, freely dispose of their natural wealth and resources without prejudice to any obligations arising out of international economic co-operation, based upon the principle of mutual benefit, and international law. In no case may a people be deprived of its own means of subsistence.

3. The States Parties to the present Covenant, including those having responsibility for the administration of Non-Self-Governing and Trust Territories, shall promote the realization of the right of self-determination, and shall respect that right, in conformity with the provisions of the Charter of the United Nations.

VIENNA DECLARATION AND PROGRAM OF ACTION (1993)

Point 15 of the Declaration establishes that: “Respect for human rights and for fundamental freedoms without distinction of any kind is a fundamental rule of international human rights law. The speedy and comprehensive elimination of all forms of racism and racial discrimination, xenophobia and related intolerance is a priority task for the international community. Governments should take effective measures to prevent and combat them. Groups, institutions, intergovernmental and non-governmental organizations and individuals are urged to intensify their efforts in cooperating and coordinating their activities against these evils.”

PROGRAM OF ACTION FOR THE SECOND INTERNATIONAL DECAD OF THE WORLD’S INDIGENOUS PEOPLES (2005)

On December 16, 2005, the General Assembly of the UN approved the Program of Action for the Second International Decade of the World’s Indigenous Peoples, which makes two specific recommendations regarding Indigenous Peoples in Isolation and Initial Contact. At the international level, it recommends “the establishment of a global mechanism charged with monitoring the situation of indigenous peoples who live voluntarily isolated and are in danger of extinction.” And at the national level, it recommends “the adoption of a special protection framework for indigenous peoples who live voluntarily isolated and that governments establish special policies to ensure the protection and rights of indigenous peoples who have small populations and are at risk of extinction.”


The 2006 report contains a chapter on Recommendations whose letter E establishes the following recommendations regarding “Peoples in Voluntary Isolation”:

- Paragraph 94 mentions that “It recommends that the Human Rights Council call upon the three countries involved in the protection of peoples who are in voluntary isolation (Ecuador, Colombia and Peru) and the international community to join efforts and resources in order to protect and safeguard indigenous peoples in danger of extinction living in the Amazon Region.”

- Paragraph 95 states that “All oil activity should be suspended in the Intangible Zone and the Yasuni National Park; illegal extraction of timber and/or any other activity that disturbs the peace of peoples in voluntary isolation should be sanctioned, a comprehensive plan for reconversion of the local economic system in regions inhabited by huaorani should be developed and real and effective controls should be established to
Paragraph 96 states that “The necessary national provisions must be developed as soon as possible to protect and guarantee the rights of peoples in voluntary isolation, strictly adhering to ILO Convention No. 169 and the United Nations Declaration on the rights of indigenous peoples adopted by the Human Rights Council.”

Paragraph 97 indicates that “In the Andean region, it is recommended that the State take into consideration the intercultural nature of the area as well as the needs and rights of indigenous communities in all activities related to the conservation, management and development of inter-Andean corridors, woods and moorlands of this region, respecting the lands and territories of indigenous nationalities and peoples.”

Paragraph 42 states that “In different parts of the equatorial rainforests that still exist in the world, there are small indigenous communities that avoid all contact with modern society and prefer to live in isolation and engage in their traditional subsistence economy. Contrary to the picture disseminated by certain media, these groups are not the original dwellers “still not contacted by civilization” but populations that have for generations avoided contacts that have been extremely violent and deadly for them, and that have led them to seek refuge in the forests. Many of these communities are now on the verge of what many call genocide due to oil drilling, timber extraction, introduction of extensive commercial plantations, construction of infrastructure works, missionary activity, drug trafficking and international tourism. Any limited contact may turn violent, and diseases brought by new settlers continue exterminating a large part of these populations.”

Paragraph 43 notes that “In Ecuador the law has reserved an “intangible zone” for Tagaeri-Taromani indigenous people. But in spite of this there are conflict situations or violent clashes between settled indigenous populations and isolated ones, generally because of the interests of lumber and drilling activities in the area. The Special Rapporteur remains concerned about the extremely vulnerable situation of some small indigenous communities in the Colombian Amazon region that might be in danger of extinction due to violence.”

Paragraph 44 mentions that “In the Department of Madre de Dios, in Peru, the indigenous organization Federación Nativa de Madre de Dios y sus Afluentes (FENAMAD), supported by other organizations, is working for the creation of a reservation for peoples in voluntary isolation, including small groups of Maslo, Matigenka and Chitonahua survivors. But the legal creation of indigenous reservations does not in itself guarantee that the territorial autonomy of the indigenous will be respected by the different economic actors. The absence of concrete measures to protect the physical and cultural integrity of these peoples may lead to their total disappearance.”

Paragraph 45 notes that “Brazil and Peru have adopted specific legislation for protecting indigenous peoples that are in voluntary isolation, and Bolivia recently recognized an intangible zone for the Toroma people. Venezuela has established health programs to address the situation of indigenous peoples “in initial contact”. Paraguay is in the process of defining a policy with regard to these peoples, such as the Ayoreo. Yet these actions seem insufficient given the conditions of extreme vulnerability of peoples in voluntary isolation.”

Paragraph 46 indicates that “A seminar was held in Bolivia in November of 2006 on peoples in voluntary isolation with the support of the Government of Bolivia, the Office of the United Nations High Commissioner for Human Rights, the Confederation of Indigenous Peoples of Bolivia (CIDOB m) and the International Working Group on Indigenous Affairs (IWGIA), among others. The seminar recommended that States and international organizations declare that protection of indigenous peoples in voluntary isolation is a high priority and that this question should be included in national and international agendas. The importance of indigenous participation in the development of specific protection programs, the fight against impunity for violations of the “no contact” principle and the definition of intangible territories for these peoples...”
was underscored. An indigenous working group on the situation in the seven countries of Latin America where peoples in voluntary isolation exist was established."

Paragraph 47 notes that "With respect to the principle of no contact, the seminar proposed strengthening the role of the Public Prosecutor’s Office and people’s defenders regarding the prohibition of establishing involuntary contact and imposing exemplary sanctions on those who threaten the lifestyles and integrity of these peoples; and establishing legal instruments for prompt adoption of protection measures. It also recommended preventing the entry of religious missionaries into territories inhabited by these indigenous peoples."

Paragraph 48 establishes that "The Special Rapporteur recommends that States commit to implementing all the necessary mechanisms to protect the life and integrity of peoples in voluntary isolation to ensure their survival with respect of their human rights."

UNITED NATIONS DECLARATION ON THE RIGHTS OF INDIGENOUS PEOPLES (2007)

The entire declaration fully agrees with PIACI protection, which is summarized in Article 1. It provides that "Indigenous peoples have the right to the full enjoyment, as a collective or as individuals, of all human rights and fundamental freedoms as recognized in the Charter of the United Nations, the Universal Declaration of Human Rights and international human rights law."

PROTECTION GUIDELINES FOR INDIGENOUS PEOPLES IN ISOLATION AND INITIAL CONTACT OF THE AMAZON REGION, GRAN CHACO AND THE EASTERN REGION OF PARAGUAY (2012)

The entire document refers to PIACI. The guidelines systematically interpret international law applicable to indigenous peoples in voluntary isolation and initial contact, reviews the experience of ACTO countries and Paraguay, and makes recommendations for protecting indigenous peoples in voluntary isolation and initial contact.
INTERNATIONAL LABOR ORGANIZATION (ILO)

The ILO is a specialized United Nations body that includes governments, employers and workers from 187 member states and deals with matters relative to work and labor relations. It was established in 1919 and is headquartered in Geneva.

ILO CONVENTION 169 ON INDIGENOUS AND TRIBAL PEOPLES IN INDEPENDENT COUNTRIES (1989)

This is the first binding international instrument that deals specifically with the rights of indigenous and tribal peoples, recognizes the right to work, the right to land and territory, to health and education.

Article 14 of the Convention establishes that “the rights of ownership and possession of the peoples concerned over the lands which they traditionally occupy shall be recognised. In addition, measures shall be taken in appropriate cases to safeguard the right of the peoples concerned to use lands not exclusively occupied by them, but to which they have traditionally had access for their subsistence and traditional activities. Particular attention shall be paid to the situation of nomadic peoples and shifting cultivators in this respect.”
STRATEGIC FRAMEWORK FOR PROTECTING INDIGENOUS PEOPLES IN VOLUNTARY ISOLATION AND INITIAL CONTACT

ORGANIZATION OF AMERICAN STATES (OAS)


PRECAUTIONARY MEASURES GRANTED BY THE INTER-AMERICAN COMMISSION ON HUMAN RIGHTS IN FAVOR OF PEOPLES IN ISOLATION IN ECUADOR (2006)

On May 10, 2006, the CIDH granted precautionary measures in favor of the Tagaeri and Taromenane indigenous peoples (precautionary measure process number MC-91-06) who live in the Ecuadorian Amazon rainforest, located in the border area with Peru, which are in a situation of voluntary isolation or “hidden”. The available information indicates that members of the Taromenane group were murdered on April 26, 2006 in the Cononaco sector (Shiripuno River) in the context of reprisals linked to illegal logging in Yasuní Park and invasion of the indigenous territory. In view of these facts, the CIDH asked the Ecuadorian State to adopt the necessary measures to protect from the presence of third parties in the territory inhabited by the beneficiaries.

INDIGENOUS PEOPLES IN VOLUNTARY ISOLATION AND INITIAL CONTACT IN THE AMERICAS: RECOMMENDATIONS FOR FULL RESPECT OF THEIR HUMAN RIGHTS (2013)

The document conceptualizes indigenous peoples in voluntary isolation, indigenous peoples in initial contact and indigenous peoples in voluntary isolation and initial contact in the Americas.

The general considerations on PIACI rights include:

a. Free self-determination and principle of no contact
b. Prior, free and informed participation and consultation

The document also specifies threats against the PIACI:

a. Contact
b. Pressures on their lands and territories
c. Extraction of natural resources
d. Contagion and other diseases
e. Direct aggressions
f. Tourist projects and
g. Drug trafficking

The recommendations include the following:

Recognition and Self-Determination

1. Refrain from issuing declarations or taking actions that deny the presence of indigenous peoples in voluntary isolation or initial contact in the national territory when there are indicia of their presence.

2. Adopt specific legislation and regulations, if not already done, to protect the rights of indigenous peoples in voluntary isolation and initial contact, including the right to life and to physical and cultural integrity, the right to remain isolated, and the rights to their lands, territories, and natural resources.

3. Adopt in the domestic legal framework, suitable and culturally appropriate judicial remedies for protecting the rights of indigenous peoples in voluntary isolation and initial contact that consider representation through indigenous organizations or other actors willing and able to safeguard their rights.
4. Devise and institutionalize training programs geared toward all relevant state officials at the local, regional and national level, for the protection of the rights of indigenous peoples in voluntary isolation and initial contact, especially in relation to the respect of their right to self-determination, and principle of no contact.

Protecting the Territory

5. Recognize, through legislative or administrative measures, and in practice, the rights of indigenous peoples in voluntary isolation and initial contact to their lands and ancestral territories.

6. Employing methods that do not increase the risk of contact, delimit, demarcate, and title the ancestral territories with a presence of indigenous peoples in voluntary isolation or initial contact based on multidisciplinary and culturally appropriate mechanisms, and studies that take into account the areas in which the people or peoples in question move about and their specific situation (particularly of nomadic and semi-nomadic peoples and shifting cultivators), and with the participation of all relevant state agencies.

7. Establish effective mechanisms of protection with the necessary material resources to prevent, in practice, access of third persons to territories that have a presence of indigenous peoples in isolation or initial contact, including their buffer zones, and that contemplate relevant and if applicable, culturally appropriate sanctions for those who violate them.

8. In relation to the previous recommendation, take into account the local context and be sensitive to relationships with neighboring indigenous peoples or communities, including those in initial contact.

9. In the event of any exceptions to the prohibition on access to the territories of indigenous peoples in isolation or initial contact, such exceptions should be previously and clearly established in the legislation, and the exceptions should be aimed at offering greater protection for the rights of indigenous peoples or to address exceptional emergency situations. In particular, refrain from exceptions that appeal to the public interest generally.

Natural Resources

10. Recognize through legislative or administrative measures the rights of the indigenous peoples in voluntary isolation to the natural resources found in their territories.

11. Refrain from granting licenses or authorizations for activities related to the extraction of natural resources, such as mining, oil and gas activities, deforestation, ranching, and agro-industrial undertakings, among others, in areas with a presence of indigenous peoples in voluntary isolation and initial contact, or where they transit, including buffer zones.

12. In the event that there are current licenses or authorizations for engaging in commercial activities related to the extraction of natural resources in areas with a presence of or used for transit by indigenous peoples in voluntary isolation and initial contact, review their terms to determine what modifications are needed to ensure full respect for the rights of indigenous peoples in voluntary isolation and initial contact affected, and implement those modifications promptly.

13. Refrain from authorizing commercial tourism activities in territories where are present indigenous peoples in voluntary isolation or initial contact. If there are authorizations for tourism activities in territories with indicia of the presence of indigenous peoples in voluntary isolation or initial contact, adopt regulations and mechanisms to ensure that those activities strictly respect the principle of no contact, both direct or indirect. In cases in which the local communities carry out community tourism activities in zones with a presence of indigenous peoples in voluntary isolation, work together and in a culturally appropriate manner with those indigenous communities and organizations to ensure those activities respect the rights of the indigenous peoples in isolation.

Prior, free and informed consultation

14. When considering interventions or projects that may affect the rights of indigenous peoples in situations of voluntary isolation to their lands, territories or natural resources, consider these peoples’ rejection of contact with persons outside their people as affirmations of their will to remain isolated and their refusal to consent to such interventions or projects, and abstain from implementing them.

15. When considering interventions or projects that might affect the rights of indigenous peoples in a situation of initial contact to their lands, territories or nat-
ural resources, work in coordination with indigenous organizations whose mission is to protect the rights of indigenous peoples in voluntary isolation and initial contact in the area, to ensure that these peoples participate in a prior, free and informed consultation process that is culturally appropriate. This consultation process should consider the specific situation of vulnerability of the peoples in initial contact in question; the material, spiritual and cultural interdependence they have with their territories and natural resources, their world vision and how it can interpret a consultation process; their level of contact with persons outside their people and other relevant aspects of their specific situation; and seek to obtain their prior, free and informed consent.

Health

16. Adopt and implement specialized and culturally appropriate prevention and contingency protocols on the health of indigenous peoples in voluntary isolation and initial contact that consider the level of isolation and contact of the people or community in question. Development and implementation of such protocols should include the participation of multidisciplinary teams specializing in the protection of the rights of indigenous peoples in voluntary isolation and initial contact.

17. Give proper training on the special situation of indigenous peoples in voluntary isolation and initial contact for public officials and other actors who take part in implementing the health protocols referred to in the previous recommendation.

Inter-Ethnic conflicts

18. In countries where conflicts or situations of violence among indigenous peoples in voluntary isolation and initial contact or between these and neighboring indigenous peoples exist, minimize the external factors that may exacerbate the situation of tension, and work with the relevant indigenous organizations to find awareness-raising and monitoring alternatives that help reduce the tension between indigenous peoples and communities and prevent violent acts.

No contact

19. Take actions to ensure the respect for and guarantee of the principle of no contact of peoples in isolation by any person or group, considering the adoption of protected zones, as well as the prohibition of and appropriate sanctions for forced contact, including by religious organizations.

20. Take all measures necessary to ensure that illegal activities do not take place in practice, including drug trafficking and the illegal extraction of natural resources, among others, in territories with a presence of indigenous peoples in voluntary isolation or initial contact, and to respect the principle of no contact in the control of those illegal activities.

Collaboration and coordination with other actors

21. With respect to the implementation of the recommendations contained in this Report, work with and ensure the contribution of indigenous authorities and organizations whose mission is to protect the rights of indigenous peoples in voluntary isolation or initial contact.

22. With respect to the recommendations contained in this Report whose implementation has an impact on border areas or transnational affairs, cooperate in coordination with other States binationally or regionally, as the case may be, with a view to achieving greater and more effective respect for the rights of indigenous peoples in voluntary isolation and initial contact in the hemisphere.

American Declaration on the Rights of Indigenous Peoples (2016)

In article XXVI, the Declaration states that:

1. Indigenous peoples in voluntary isolation or initial contact have the right to remain in that condition and to live freely and in accordance with their cultures.

2. The states shall adopt adequate policies and measures with the knowledge and participation of indigenous peoples and organizations to recognize, respect, and protect the lands, territories, environment, and cultures of these peoples as well as their life, and individual and collective integrity.
This is an OAS judicial body that enjoys autonomy with respect to other bodies of this organization. Its headquarters are in San José, Costa Rica, and the purpose of the court is to apply and interpret the American Convention on Human Rights and other human rights treaties.

This is the highest jurisdictional level of the Inter-American Human Rights System. It enjoys independence with respect to other OAS bodies. The purpose of the Court is to implement and interpret the American Convention on Human Rights and other human rights treaties. It is headquartered in San José, Costa Rica.

The Inter-American Court of Human Rights (CIDH) as the highest organ in the Inter-American Human Rights System, hands down rulings on the interpretation of the law that serve as precedents that must be followed by States member of the inter-American system. Lawsuits for violations of these rights go to the Inter-American Human Rights Commission, which is the appeals court of the inter-American system and investigates cases. When the Commission considers that a case involves the interpretation of a right that has not been implemented in the past or involves a number of aspects that had not been considered previously when applying a right protected by the American Human Rights Convention.

The Inter-American Commission realizes that many of the obstacles for full enjoyment of the human rights of indigenous peoples in voluntary isolation and initial contact analyzed in this report are due to historic structural patterns and that it is not an easy task for States to implement in-depth changes to reverse them. The CIDH considers that precisely due to the structural nature of the challenges, immediate actions must be taken that will contribute to protecting these peoples’ rights and states its willingness to collaborate with the States, indigenous organizations and other civil society actors in implementing the recommendations contained in this report to make them effective. In the sphere of its mandate, the Inter-American Commission intends to follow up these recommendations through its different human rights monitoring, promotion and protection mechanisms.
MACHU PICCHU DECLARATION ON THE DEMOCRACY OF THE RIGHTS OF INDIGENOUS PEOPLES AND THE FIGHT AGAINST POVERTY (2001)

Although the document does not specifically mention PIACI, article 7 states that “We firmly support all efforts that are geared towards promoting and protecting the basic rights and freedoms of the indigenous peoples, among them: their individual and collective right to their spiritual, cultural, linguistic, social, political, and economic identity and traditions, their right as peoples to retain control of their historic cultural heritage; their right to their systems, know-how and practice of traditional medicine, including the right to the protection of their ritual and sacred places; their right to an education in diversity; and their right to be elected to and to hold public office. We express our intention of safeguarding these rights within our public order and in compliance with existing constitutional and legal provisions.”

ANDEAN CHARTER FOR THE PROMOTION AND PROTECTION OF HUMAN RIGHTS (2002)

The document does not mention specific texts on PIACI, but article 36 states that Andean Community (CAN) countries “reiterate their commitment to fulfill and enforce fulfillment of the rights and obligations set forth in international instruments aimed at the promotion and protection of human rights of indigenous peoples and of communities of African descent, in particular the Convention (No. 169) concerning Indigenous and Tribal Peoples in Independent Countries of the International Labour Organization.”

Article 37 similarly establishes that “They recognize that indigenous peoples and communities of African descent, in addition to the human rights their members are entitled to as individual citizens, are also entitled as human groups of ancestral roots, to collective rights, the common exercise of which promotes their historical continuity, the preservation of their identity and their future development.”

Article 38 states that “They also recognize that indigenous peoples and communities of African descent, within the framework of national legislations and regulations on human rights, are entitled to maintain and develop their identities and customs in the cultural, spiritual, political, economic and legal spheres; to ownership and possession of the lands or territories they traditionally occupy; to not being displaced from them and to return to them in the event that they are; to preserve their own forms of social organization, exercise of authority and administration of justice; to develop and maintain their tangible and intangible cultural heritage; and to the protection of their ancestral collective knowledge and the exercise of their traditional practices.”
As a result of the review of the legislations of ACTO Member Countries conducted in August of 2013, it was determined that the countries that have the largest number of pieces of legislation on the issue of indigenous peoples in isolation and initial contact are Brazil and Peru, which comprise almost two-thirds of the legislation existing in the region. Bolivia, Colombia and Ecuador have more recently started developing instruments for protecting the rights of indigenous peoples in voluntary isolation and initial contact. In all cases, the standards seek to protect the rights of these indigenous peoples in voluntary isolation and initial contact by ensuring the enjoyment of their rights to life, health, integrity, territory, natural resources, culture and the right to decide the priorities for their development.

On the other hand, Guyana and Venezuela make general references to indigenous peoples, but still do not possess specific legislation for protecting indigenous peoples in voluntary isolation and initial contact. Finally, Suriname does not refer in its legislation to indigenous peoples or to indigenous peoples in voluntary isolation and initial contact. In this context, there is room for regional cooperation in the development of public policies and legislation for protecting indigenous peoples in voluntary isolation and initial contact, recognizing the different levels of development of these instruments in the region.

The diversity of answers provided by national legislation for the protection of indigenous peoples in voluntary isolation and initial contact lies in the intangibility of these areas. Here the legislation is varied and goes from total intangibility schemes in the case of Brazil to relative intangibility in Peru, which permits the extraction of natural resources, such as non-renewable resources. In every case, it is clear that access to renewable natural resources is prohibited in areas occupied by indigenous peoples in voluntary isolation and initial contact, as well as establishment of new settlements within these areas.

Another central element in the protection of indigenous peoples in voluntary isolation and initial contact is the territorial variable. Here the legislations are consistent in establishing areas specifically designated for protecting indigenous peoples in voluntary isolation and initial contact. Again in this framework, national legislations have varied responses. One path is taken by Brazil, which has a constitutional mandate on demarcation of indigenous lands that makes it possible to bar access by third parties to these areas. In Bolivia, Colombia and Ecuador, areas for protection of indigenous peoples in voluntary isolation and initial contact are, above all, strictly protected natural areas, whereas Peru has a mixed system in which indigenous peoples in voluntary isolation and initial contact are located in specific areas for their protection (territorial reservations or indigenous reservations) in protected natural areas and also in forestry concessions, conservation concessions and oil exploration blocks. As shown by the regional legislation, protection of the territory of indigenous peoples in voluntary isolation and initial contact is a central element of the protection scheme. Even in the relative intangibility scheme of Peru, where drilling for hydrocarbons is permitted, it takes place under the offshore inland model and not based on a network of local roads linked to the regional and national network, which was the traditional fishbone method during colonization (Rudel 1983; Pichón 1992).

A third element that shows differences among the countries that have a longer history of protecting indigenous peoples in voluntary isolation and initial contact and countries with more recent regulations has to do with the existence of an authority specifically designated to protect indigenous peoples in voluntary isolation and initial contact. Whereas in Brazil the authority for indigenous peoples in voluntary isolation and initial contact is the National Indian Foundation (FUNAI) and in Peru it is the Ministry of Culture; in Bolivia and Colombia this protection is provided by the service for protected natural areas. For its part, Ecuador recently transferred the issue of indigenous peoples in voluntary isolation and initial contact from the Ministry of the Environment, which is

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7 Isolated indigenous peoples and oil-drilling activity have often coexisted in the case of the Nahua Kugapakori Nanti Territorial Reserve.
in charge of protected natural areas, to the Ministry of Justice. Beyond which sector is responsible for protecting indigenous peoples in voluntary isolation and initial contact, which depends on different historical processes, what is important is that an authority is in place with the specific responsibility of ensuring it.

A fourth element is the need to develop protection plans for indigenous peoples in voluntary isolation and initial contact that allow coordination and articulation of public sectors to create the necessary conditions for effective protection of the territory and the members of indigenous peoples in voluntary isolation and initial contact. These measures are necessary to prevent undesired effects on these peoples’ vulnerability. Action in areas occupied by indigenous peoples in voluntary isolation and initial contact takes place in remote rural areas, where interagency coordination is almost nonexistent due to the weak presence of the State. However, protection actions require specialists on indigenous peoples in voluntary isolation and initial contact; specialists on the health of indigenous peoples in voluntary isolation and initial contact; specialists in intercultural education, legal certainty and police power, among others that may be considered.

Both Brazil and Peru have moved forward in developing health regulations for protecting indigenous peoples in voluntary isolation and initial contact that is directed toward actors, so they can interact with these indigenous peoples. These health regulations recognize and stress the importance of prevention and raising awareness among the populations in surrounding or adjacent areas. Health care in areas adjacent to those occupied by indigenous peoples in voluntary isolation and initial contact also requires health care and prevention in adjacent or neighboring population and dissemination of health prevention measures in the event of sighting or contact with indigenous peoples in voluntary isolation and initial contact.

It should be remembered that legislation on indigenous peoples in voluntary isolation and initial contact in Bolivia, Colombia, Ecuador and Peru has been developed with the full and proactive participation of indigenous organizations. These organizations are present at the local level, whether or not they belong to different districts. They are the basis for coordination of indigenous peoples that live nearby or share their lands with indigenous peoples in voluntary isolation and initial contact, since this is the only continuous rainforest where communities live and where indigenous peoples in voluntary isolation and initial contact are present.

For example, the legislation on indigenous peoples in
voluntary isolation and initial contact in both Colombia and Peru recognizes the importance of dialogue and coordination with indigenous peoples and their organizations.

Legislation on protected natural areas in most countries does not include references to indigenous peoples in voluntary isolation and initial contact, except in the case of Peru. However, legislation on protected natural areas, even without referring to these peoples, has supported their protection since areas where indigenous peoples in voluntary isolation and initial contact live are in protected natural areas.

Some of the problems affecting reservations for indigenous peoples in voluntary isolation and initial contact are:

- The delay in declaring areas for protecting indigenous peoples in voluntary isolation and initial contact, often while waiting for consolidation of the rights of mining industries before effectively demarcating the areas.

- The weak presence of the State in rural areas, and particularly in remote regions.

- The need to develop systems for monitoring, reporting and verifying the presence of indigenous peoples in voluntary isolation and initial contact and activities that affect them.

- The predatory actions of some extractors of natural resources on biodiversity and the territory but, what is even worse, undesired contact with extractors, religious fronts, etc. belonging to the national society.

The eventual transition to a situation of permanent contact of these populations in voluntary isolation and initial contact must be regulated preventively. In Colombia, the Río Puré National Park proposes the strict establishment of a protected natural area to protect isolated indigenous peoples on the condition that it can become a shelter if they request titles to the land (Possuelo and Brackelaire 2007b, 32). In Bolivia, Ecuador and Peru, strict protection of certain protected natural areas offers an opportunity for effective protection of indigenous peoples in voluntary isolation and initial contact.

Instruments or methodologies should be developed to work with populations in initial contact, particularly in situations where the State is not usually present, providing local services; in other words, in situations of sporadic or remote initial contact.
Two regional workshops were conducted during the period 2011-2014 (Brazil and Peru) to share experiences on protection methodologies and legislation and on health actions in favor of PIACI.

**REGIONAL WORKSHOP ON THE EXCHANGE OF EXPERIENCES ON PROTECTION METHODOLOGIES AND LEGISLATION**

**Date:** May 30 – June 1, 2012.  
**Place:** Brasilia, Brazil.  
**Participants:** Representatives of ACTO Member Countries.

The workshop stressed the importance of indigenous questions on the ACTO Strategic Cooperation Agenda. The Member Countries, which recognize the presence of isolated indigenous groups in their territories, considered the importance of developing concrete actions for their protection. The right to self-determination of isolated peoples is contemplated in different ways in the constitutional or legal frameworks of the Member Countries, which offers an opportunity for internal discussions regarding specific protection policies.

Considering the progress achieved by Brazil in the development of specific policies for protecting indigenous peoples in voluntary isolation and initial contact, the concept of protection was discussed from the perspective of no contact and promotion of the rights of indigenous peoples. The following steps were considered:

Recognition, identification and regulation of the right to traditionally occupied land and territories through field work and anthropological consensus is crucial to protect recently contacted and not contacted peoples in order not to force contact.

Restricting the use of such territories, in addition to demarcating, regulating and controlling activities conducted by local communities within and around protected territories.

The representatives of ACTO Member Countries analyzed and discussed the existence of a specific territorial policy for isolated indigenous peoples and their legal capacity in each country, as well as the elements that have a positive or negative impact on implementation of their protection policies. The first question discussed was the legal capacity given to isolated indigenous peoples’ territories in each country; second, the possibility of using such territories was discussed politically in all national contexts, relating it to the way in which national legislations rule on economic exploration in areas where there are references to isolated indigenous peoples. In Brazil, for example, it is understood that to guarantee full occupation of their territories, all commercial and economic activity should be prohibited.

To ensure that practices for the protection of indigenous peoples in voluntary isolation and initial contact reflect the provisions of specific legal frameworks on the matter, the Member Countries understood the need to allocate sufficient human and financial resources for implementing them.

Importance was also given to exchanges of experiences...
among the Member Countries, to training technicians and developing specific field work methodologies.

Finally, the Member Countries understood that the differences that exist among them favor diverse ways of relating with the indigenous peoples that live in their national territories.

REGIONAL MEETING OF NATIONAL HEALTH CONSULTANTS AND REPRESENTATIVES OF MINISTRIES OF HEALTH

Date: September 25 – 27, 2013.
Place: Lima, Peru.
Participants: Health representatives of ACTO Member Countries, national health consultants and PS/ACTO delegates.

The representatives of ACTO Member Countries reported on the different situations with regard to:

- The existence of official records on the presence of PIACI.
- The existence of documents, protocols, guidelines and health care manuals for PIACI.
- The operation of protection processes, especially health services, responsibility for implementation and participation of indigenous communities and other tribal communities.
- The efficacy of guidelines for guaranteeing PIACI rights within the constitutional framework of each member country.
- The methodology, measures, mechanisms or instruments deemed necessary for PIACI health care and protection at the national and regional level.

Subsequently, Mr. Carlos Soria, international legal consultant engaged by ACTO, delivered the texts on health matters to the delegates of Member Countries in the document “Regional Amazonian Guidelines for Protecting Indigenous Peoples and in Initial Contact”, which were submitted to analysis in each country. A schedule of national health workshops in 6 of the 8 ACTO Member Countries8 was proposed, giving details on the basic elements for their organization in order to identify elements for developing a national and regional PIACI health protection strategy.

The workshop concluded that protecting the health of indigenous communities adjacent to territories inhabited by PIACI is of crucial importance for protecting indigenous populations in isolation and initial contact. Based on this consensus reached by the Member Countries, the activities of the program financed by the IDB promoted interagency relations among the different governmental actors responsible for PIACI protection, particularly institutions in charge of indigenous affairs and indigenous health in addition to other national, civil society and indigenous organizations.

8 Brazil, Bolivia, Colombia, Ecuador, Peru and Suriname.
During the period 2011-2014, two types of national workshops were conducted in each ACTO Member Country with the exception of Guyana and Venezuela. The first workshop identified national legislation, stakeholders and coordination mechanisms for protecting indigenous peoples in voluntary isolation and initial contact (PIACI), based on an institutional, legal and coordination diagnosis; a second workshop was held to identify national guidelines for ensuring PIACI health, based on a diagnosis of their current health conditions.

NATIONAL WORKSHOPS TO IDENTIFY NATIONAL LEGISLATION, ACTORS AND PIACI PROTECTION COORDINATION MECHANISMS

BOLIVIA

Date: August 15-16, 2013.
Place: La Paz, Bolivia.
Participants: Government and civil institutions related to PIACI issues; indigenous organizations related to the different peoples considered as PIACI and PS/ACTO representatives.

In Bolivia, peoples in voluntary isolation that avoid all types of contact are: Araona, Pacahuara and Esse Ejja; peoples that have not been contacted and are only known through oral history and vestiges are: Ayoreo, Esse Ejja, Pacahuara, Yuki Machineri, Tacana and Toromona. The latter were moved to Madidi Park. The Ayoreo were moved to Kaa Iya Park and Otuquis Park.

The workshop included the establishment of five working groups that discussed the national legislative framework for PIACI protection and the importance of indigenous organizations for their protection and implementation of mechanisms or instruments in the area of health and protection of natural resources.
### ACTORS IDENTIFIED

3. Unit for Indigenous Peoples.
4. Eastern Bolivia Indigenous Center (CIDOB).
5. Indigenous peoples: Yuki, Ese Ejja, Chipava, Urus Chipaya, Uru Muratos, Uro del Lago Poopó, Chimán or T’simane, Yaminawa, Machineri, Tacana, Cavubeli, Yuracaré, Ayoreo, Pacahuara, Weenhaye.
6. National Service for Protected Areas (SERNAP).
7. Network of Indigenous Women on Biodiversity for Latin America and the Caribbean.
11. SAFCI Medical Residence.
12. Departmental Health Services (SEDES), Epidemiology Unit.
17. Beni Indigenous Peoples’ Central (CPIB).

### LEGAL INSTRUMENTS IDENTIFIED (AS OF AUGUST 2013)

1. Constitution of the Republic Art. 31, which recognizes the rights of indigenous peoples and nations, native peoples, peasants and afro-Bolivian people.
2. Declaration of an intangible zone within Madidi Park to protect the Toromona. (SERNAP Administrative Resolution, 2006).
3. Legal approach not only on Isolated and Not Contacted Peoples, but of peoples “in danger of extinction”.
4. Draft bill on protection of indigenous peoples and nations in danger of extinction, in voluntary isolation and not contacted, which establishes prevention mechanisms in the territorial, health and dissemination spheres; protection mechanisms in the territorial, health and monitoring spheres; and mechanisms in the area of strengthening recovery and regeneration of life systems and in State institutions. Draft bill enacted as Law No. 450 on December 6, 2013: “Law on Protection of Indigenous Native Nations and Peoples in a Situation of Extreme Vulnerability”.
5. The Bolivian indigenous peoples that are voluntarily isolated, not contacted and in initial contact have not been defined. More field work is needed.

### PIACI PROTECTION COORDINATION MECHANISMS

1. Collective development of legal instruments. In the case of the draft bill, 10 workshops were conducted with vulnerable peoples.
3. Support at the Biological Diversity Commission as the only convention that recognizes the action of native indigenous peoples in the use and protection of biological diversity resources.
4. Creation of the Indigenous Health Network has been proposed from the indigenous perspective focusing on traditional medicine in order to harmonize national policies with the indigenous world vision.
5. The Family, Intercultural and Community Residence (SAFCI) is in charge of working on health issues in populations near PIACI, where contingency groups are developed to protect them from the propagation of epidemics that might decimate their populations and those of PIA.

### LIMITATIONS

1. Financial resources.
2. Technical or human resources.
3. The legislation does not contemplate peoples in initial contact.
4. Bolivia does not have state policies on the specific question of health with regard to PIACI.

### CONCLUSIONS OF THE WORKSHOP

1. The State must promote field research to verify the existence of native indigenous peoples in voluntary isolation and not contacted.
2. Management plans for Kaa Iya, Otuquis and Madidi Parks, where isolated, not contacted peoples move, should be updated and zoning of the areas should be conducted to prevent trouble for the PIACI.
3. Declare areas inhabited by non-contacted peoples to be intangibility zones, provided the areas are public and there are no third-party rights.
4. The State and indigenous organizations should work together on the draft bill.
5. Traditional medicine should be coordinated with public health services.
6. Special systems should be created for protecting PIACI.
7. Indigenous peoples that live near PIACI state that they suffer climate changes (floods and drought) that cause epidemics. Extractive activities, cutting down and burning rainforests have caused them health problems that must be counteracted with the knowledge of indigenous wise people, due to the absence of doctors in their territories.
8. Health centers should be strengthened to enable them to face endemic emergencies.
9. Operationalize Native Community Lands (TCOs (Spanish acronym).

**BRAZIL**

**Date:** November 18-21, 2013.

**Place:** Brasilia, Brazil.

**Participants:** Governmental and Non-Governmental Institutions, indigenous organizations, PS/ACTO and IDB representatives.

The recently contacted Zo'ë, Korubo, Akunt'su, Kanoé and Pikipura peoples and other groups like the Awa Guajá, Arara, Araweté, Parakana, Suruwahá, Amondawa, Tsóhom-Djapa, Waimiri-Atroari, Yanomami, Yekuana, all of which live and are currently distributed among 12 Ethno-environmental Protection Fronts (FPEs): Javari, Purus, Juruena, Envira, Yanomami, Madeira, Guapore, Uru-Eu-Wau-Wau, Cuminapanema, Medio Xingu, Madeirinha and Awa-Guajá.

The institutional diagnosis of Brazilian policies for protecting and promoting PIACI rights underscores the fragilities, especially those that have to do with conflict between protection of indigenous rights and the country's development model for the border region. In Brazil there is a large number of projects and works related to the Accelerated Growth Project (called PAC by its Portuguese acronym) that threaten Amazonian indigenous peoples as a whole, but especially PIACI.

Isolated peoples, those in recent contact and contacted in Brazil enjoy the institutional and political support of the National Indian Foundation (called FUNAI by its Portuguese acronym) as the entity in charge of protecting their territory and guaranteeing and monitoring their rights, since in Brazil PIACI are threatened by the Power Generation Industry (called UHE by its Portuguese acronym), Roads (BR), Transmission Lines (LT) and Railroads, in order of importance.

During the workshop, the participants were divided into 5 working groups: 1. Training and exchange of experiences; 2. Interagency coordination; 3. Social control and monitoring; 4. Institutional strengthening, and 5. Cooperation (Government, civil society, universities and others).
STRATEGIC FRAMEWORK FOR PROTECTING
INDIGENOUS PEOPLES IN VOLUNTARY
ISOLATION AND INITIAL CONTACT

ACTORS IDENTIFIED

1. ACTO.
2. Socioenvironmental Institute (ISA).
3. Health Ministry (MS).
4. IDB.
5. Indigenist Work Center (CTI).
7. Regional North I Missionary Indigenist Council (CIMI).
9. Operation Native Amazon (OPAN).
12. National Indian Foundation (FUNAI) and its FPEs.
13. Universidad Nacional de Colombia, Amazon Campus (Unal-Leticia).
15. Brazilian Anthropology Association (ABA).
16. Indigenous Language and Literature Laboratory (LALLI /UnB).
17. Indigenous peoples:
   a. Yanomami.
   b. Zóé.
   c. Vale do Javari.
   d. Awá-Guajá.
   e. Korubô.
   f. Suruwaha.
18. National Social Articulation Secretariat.
20. Assistant Secretariat for Legal Affairs of the Civil Office.
22. Federal.
25. Growth Acceleration Program (PAC).
26. Initiative for Integration of the Regional South American Infrastructure (IIRSA).
27. Amazonian Georeferenced Socioenvironmental Information Network (RAISG).

LEGAL INSTRUMENTS IDENTIFIED (AS OF AUGUST 2013)

1. Gaceta Interministerial No.171 february, 06 2013 (internal regulation of FUNAI).

PIACI PROTECTION COORDINATION MECHANISMS

1. Implement local workshops with joint agendas.
2. Exchange local experiences on work methods.
3. Include indigenous technicians in the agendas of local workshops.
4. FUNAI will submit a report on who isolated indigenous peoples are and where they live.
5. SESAN, FUNAI and their partners will conduct mapping of the prevalence of diseases in the region surrounding peoples in isolation or recently contacted.
6. Conduct mapping of actors in the region.
7. Suspend government works that pressure or threaten isolated peoples until FUNAI studies leave the indigenous territory.
8. Establish an ambulatory and hospital network to assist the indigenous.
9. Strengthen coordination among national institutions.
10. Include the discussion of peoples in isolation and recent contact in bilateral agendas and other international forums.
11. Develop contingency plans for different scenarios.
12. Develop a communication plan for society on the existence of isolated indigenous groups and their vulnerability.
COLOMBIA

**Date:** June 21, 2013.
**Place:** Bogotá, Colombia.
**Participants:** Governmental and non-governmental institutions, indigenous organizations and PS/ACTO representatives.

The Nukak are people in initial contact in Colombia. They are present in the department of Guaviare, as well as the Yuri and the Passés, confirmed as isolated in the Río Puré National Park in the department of the Amazon. There is a reference to the presence of another 12 isolated peoples in the Colombian Amazon (still unconfirmed), such as the: Jumanas, Uainumas, Urumi, Nonuya, Mirana and Murui 1 and 2, in the department of the Amazon; in addition to the Carijona, located to the south of Guaviare; the Mak or Cacua in Vaupés; and the Andaqui and Murui or Carijona, located in Caquetá.

The Ministry of the Interior, through the Direction for Indigenous Affairs and the Coordination of the Group for the Promotion of Indigenous Peoples’ rights, ROM and Minorities, is the Colombian government entity responsible for indigenous affairs, which includes development of policies for isolated peoples.

State entities directly and indirectly involved with PIACI matters took part in the workshop. This was the first time these institutions addressed the reality of PIACI. Entities such as the National Direction of Prosecution Sections, the National Agency for the Fight against Extreme Poverty, the Ministry of the Environment and Sustainable Development, the Colombian Family Welfare Institute, the National Solicitor’s Office, the Social Prosperity Department and the Victims Unit received information on PIACI in Colombia. However, in spite of their willingness to contribute and support the development of a policy for protecting PIACI in their entities, it was difficult during the workshop to secure commitments and clear positions on the part of each institution.

Indigenous organizations expressed their willingness to coordinate actions with the government to protect their neighbors in isolation.
## ACTORES IDENTIFICADOS

6. Amazon Conservation Team Colombia (ACT).
7. Natural National Parks.
8. National Planning Department (DNP).
9. PANI and AIPEA Indigenous Associations.
11. Indigenous Organization of Colombia (ONIC).
13. Office of the National Solicitor.

## LEGAL INSTRUMENTS IDENTIFIED (AS OF AUGUST 2013)

1. Policy for peoples in isolation (in the process of development).

## PIACI PROTECTION COORDINATION MECHANISMS

1. No contact means “do not disturb”; therefore it is important to recognize their territory and exert control and surveillance for PIACI protection without flyovers.
2. There is a National Technical Committee for the Protection of indigenous peoples in Isolation in Colombia.
3. Implement the precautionary principle in the Ministry of the Environment, in environmental licensing processes, coordination with Natural National Parks, CARs and the National Environmental License Agency (ANLA (Spanish acronym).
4. Create a national park to ensure the survival of the Yuri-Passé people.
5. Reform the management plans of areas in the national system of natural parks to protect the rights of peoples in isolation.
6. Border agreements to regulate the passage of third parties through border territories granted to PIACI.
7. Improve the living conditions of neighboring populations and develop protocols for assisting PIACI and the vulnerable indigenous population.
8. Develop contingency plans and for assisting peoples in initial contact based on the experience with the Nunak people.
9. Identify the territories of isolated peoples and establish local protection commitments.
10. Establish differentiated protection measures for PIAs and Peoples in Initial Contact.
11. Develop memorandums and communications to regional organizations to advise them of the rights of indigenous peoples and PIACI.

## LIMITATIONS

1. Lack of articulation among all the actors involved in assisting the peoples at the time of contact (case of the Nunak people).

## CONCLUSIONS OF THE WORKSHOP

1. UN guidelines will guide the development of a public PIACI protection policy.
The Tagaeri and Taromenane peoples are considered isolated peoples and the Waorani and Achuar peoples are considered to be in recent contact. They all move between the provinces of Orellana and Pastaza in the Ecuadorian Amazon.

State organizations involved in protection of PIA as well as civil society organizations that defend human rights, especially those of indigenous groups, took part in the workshop. The Waorani groups of Orellana and Pastaza were present and expressed their thoughts regarding PIA and their protection.

The workshop focused on identifying the legal, institutional and technical steps forward in the country, as well as the urgent needs for protecting PIACI, especially by recognizing the intangibility of their territory, land titles and the importance of disseminating the policy on protection of PIACI as rights holders.

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<tr>
<th>ACTORS IDENTIFIED</th>
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<tbody>
<tr>
<td>5. Ministry of Foreign Affairs.</td>
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<td>6. Ministry for Environmental Development of the Amazon (ECORAE).</td>
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<tr>
<td>7. Waorani Nationality of Ecuador (NAWE).</td>
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<td>8. Alejandro Labaka Foundation.</td>
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<td>9. Cultural Research Center for the Ecuadorian Amazon.</td>
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<td>10. Association of Waorani Women of Ecuador.</td>
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<td>12. Center for Economic and Social Rights (CDES).</td>
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<th>LEGAL INSTRUMENTS IDENTIFIED (AS OF AUGUST 2013)</th>
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<tr>
<th>PIACI PROTECTION COORDINATION MECHANISMS</th>
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<tr>
<td>Creation of the Tagaeri Taromenane Intangible Zone (ZITT) and its management plan. Precautionary measures plan (PMC) with immediate actions in favor of PIA.</td>
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<tr>
<td>• Protection agreements for PIAs with Waorani and Kichwa organization of the ZITT buffer zone;</td>
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<tr>
<td>• Training for government officials, military officers, police officers in ZITT monitoring activities and rainforest control.</td>
</tr>
<tr>
<td>• Interministerial field activities with radio monitoring, timber and game control patrols.</td>
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<td>• Control of tourism.</td>
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<tr>
<td>• Medical assistance for Waoranis and settlers in the ZITT areas of influence.</td>
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<tr>
<td>• Implementing a GIS for georeferencing any news regarding PIA or their territory.</td>
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<tr>
<td>• Incorporation of Kichwa and settler personnel into the PMC technical team.</td>
</tr>
<tr>
<td>• Development of agreements with the Kichwa and Waorani nationalities.</td>
</tr>
<tr>
<td>• International Consultative Committee for protecting PIA.</td>
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</table>
### PIACI Protection Coordination Mechanisms

- Respecting the principle of no contact and thus avoiding peaceful or forced contact.
- Public policy on PIA protection and update to make it easy to implement.
- Waorani-Taromenane Investigation Commission to protect PIAs and receive their recommendations.
- Promote subsistence initiatives for the Waorani and thus minimize their dependence on economic activities that represent threats for PIA.
- A process of consultation on the national policy for protecting PIA.
- Promotion of binational agreements with Peru for protecting PIA.
- Update of codes of conduct for oil companies.
- Protection protocols for the different productive sectors within or around the ZITT.
- PMC-FUNAI agreement for better treatment of PIA from the anthropological standpoint.

### Limitations

1. Economic dependence on oil pressures PIACI territories (reduction of territories, loss of biodiversity).
2. State services are deficient in Waorani territory, which has made them abandon their lands, especially due to the lack of education (Peoples in Initial Contact). The cultural heritage handed down by the elders to young people and children is being lost.
3. PIACI protection measures have been developed without agreement with the policy on natural resource extraction on the part of the Government.

### Conclusions of the Workshop

1. Recognition of the fact that settlements were Waorani territory in the past and that the State has an outstanding debt with PIACI.
2. It must be recognized that PIACI do not only move within the intangible zone but outside of it; this makes the challenge of protecting them greater, and their territories have to be known and researched in terms of their mobility patterns.
3. Coordinated work is required among State institutions for implementation of effective PIACI protection measures.
4. Awareness should be raised regarding the existence of PIACI at the national and local level.
5. Urgent protocols should be developed in PIA transit areas and shared with local authorities, settlers and indigenous inhabitants.
7. Moratoriums of extractive industries are needed in places where the presence of PIAs is suspected, as a precautionary measure.
8. The actual PIA territory (beyond de ZITT) should be recognized, identified, demarcated and legalized to prevent violations of the rights of the peoples who inhabit them.
9. Land titles are a new challenge for protecting PIACI.
10. Consultation, dissemination and publication of the National PIA Protection Policy, including affirmative actions on the Waorani territory, addressing the issue of contact, the issue of communication/education for new generations, interagency coordination, shared responsibility for the territory, recognition of the existing tools, participation of the Waorani nationality, other nationalities, civil society and others.

### Peru

**Date:** July 17, 2013.

**Place:** Lima, Peru.

**Participants:** Governmental institutions, indigenous organizations, civil society institutions, the business sector and PS/ACTO representatives.

Indigenous peoples in a situation of isolation and initial contact are found in formally created territorial reservations, requested indigenous reservations and protected natural areas.

The PIACI identified in Peru are the Iscobákebu, Matsigenka (Nanti) and Yora (Nahuas); Mashco Piro, Mastanahua, Murunahua, Chitonahua, Amahuaca; Matsés, Kakataibo, Mayoruna, Kapanawa, Arabela, Pananjuri, Taushiro, Waorani, Taromenane, Iquito-Cahua, Totorona, Kakinte, Pano-habientes.

The most important risks and threats that potentially affect the PIACI are related to: opening of land routes, exploration and exploitation of hydrocarbons and gold.
mines; illicit crops, drug trafficking and violence, legal and illegal extraction of timber; poaching and illegal fishing; religious missions and archeological explorations.

The mechanisms for protection of PIACI include:

1. Recognition of PIACI rights.

2. Declaration of Intangibility of Indigenous Reservations where they live.

3. Limited and exceptional issuance of authorizations for entering Indigenous Reservations (when a risk or threat is imminent).

4. A binding MINCUL technical opinion for extractive projects in Indigenous Reservations (when a resource is declared of public necessity).

| ACTORS IDENTIFIED | 1. Ministry of Foreign Affairs.  
|                   | 4. Ministry of Education.  
|                   | 8. Ombudsman’s Office.  
|                   | 9. Interethnic Association for the Development of the Peruvian Jungle (AIDESEP).  
|                   | 10. Intercultural Health Center (CENSI).  
|                   | 12. National Service of Protected Natural Areas (SERNANP).  
|                   | 13. Institute of the Common Good (IC).  
|                   | 14. Research Institute of the Peruvian Amazon (IIAP).  
|                   | 15. Native Federation of the Madre de Dios River and Tributaries (FENAMAD).  
|                   | 16. Federation of Cacataibo Native Communities (FENACOCA).  
|                   | 18. Matsiguenga Council of the Urubamba River (COMARU).  
|                   | 19. Association for the Conservation of the Amazon Basin (ACCA).  
|                   | 20. ProfNatura’s.  
|                   | 21. Regional Management for Social Development.  
|                   | 22. Peruvian Association for the Conservation of Nature (APECO).  
|                   | 23. Central for Yine Yame - Bajo Urubamba native peoples.  
|                   | 24. Regional Organization of Indigenous Peoples of the East (ORPIO).  

| INSTRUMENTOS LEGAL INSTRUMENTS IDENTIFIED (AS OF AUGUST 2013) | 1. Law 28736 for the “Protection of indigenous peoples in isolation and in a situation of initial contact” and its regulations.  
|                                                               | 2. Supreme Decrees 028-2003-AG and 008-2007-MIMD ES for the creation of territorial reservations and regulation of the special trans-sectoral regime for the protection of PIACI.  

## PIACI Protection Coordination Mechanisms

1. Registration of peoples in isolation and in initial contact.
2. Registration of Indigenous Reservations.
3. Multisectoral Commission on isolated peoples and initial contact.
4. Prior technical opinion of the Vice Ministry of Interculturality on the Environmental Impact Studies (EIAs) required within the indigenous reservations with natural resources declared as "of public necessity".
5. Creation of a specialized Directorate on peoples in isolation and initial contact in the Ministry of Culture.
6. A standard and two technical guides for the employment of health personnel in health posts near the territories inhabited by PIACI.
7. Master plans of the protected areas incorporate the Strict Protection Zones to the places where these populations move.
8. Anthropological plans and contingency plans conceived with a preventive and precautionary approach on PIACI.
9. Creation of Territorial Reservations for the protection of PIACI. However, only one Reservation has a formal protection plan demanded by the State.
10. Creation of the Indigenous Committee for the Protection of the PIACI of the Amazon, Gran Chaco and the Eastern Region of Paraguay.
11. Creation of a special commission for the protection of PIACI.
12. A regional ordinance with public institutions, indigenous organizations, institutional actors, in order to formulate a medium-term work plan.
13. A positive opinion on five requests for Indigenous Reservations that were pending approval.
15. Creation of a special fund to deal quickly with emergency situations related to PIACI.

## Limitations

1. There is no record of the studies that are being done in relation to PIACI.
2. Threats that are difficult to control: coca leaf cultivation, illegal extraction of wood and oil blocks.

## Conclusions of the Workshop

1. The existing regulations on PIACI must be enforced and the State must fulfill its responsibilities.
2. A methodology must be developed to systematize the records on PIACI sightings.
3. A national policy must be developed for the protection of PIACI.
4. Anthropological contingency plans for all sectors that act in PIACI territories.
5. Each protected area with PIACI should have specific registered information.
6. Continue to strengthen interagency coordination among key State actors and civil society for the protection of the PIACI.
7. Recognition of the work carried out by indigenous organizations and civil society for the protection of the PIACI (control and surveillance positions).
8. The importance of sharing information and protocols among regional governments and national institutions sharing information to ensure coordinated attention to any event with the PIACI.

## Suriname

**Date:** August 27, 2014.

**Place:** Paramaribo, Suriname.

**Participants:** Government institutions, national assembly, indigenous organizations, non-governmental organizations and PS/ACTO representatives.

In Suriname there are no indigenous peoples in isolation and/or initial contact. However, the existing indigenous people live in remote areas, distributed throughout the nation. According to the 2012 census they number approximately 20,344 people. Depending on where they live, indigenous people are called indigenous peoples from the lowlands (they live in the coastal area and the north of Suriname) or highland indigenous peoples (they live in the south of Suriname).

The indigenous peoples identified in Suriname are the Tirio or Tareno and the Wayana who live in the highlands at the south of Suriname. The territory of the Tirio is along the border between Suriname and northern Brazil, located in Kwamalasumutu and Pelele Tepu, whereas the Wayana are between Suriname and southwest Guyana, concentrated mainly in Apetina and Kawemhakam.

In addition to the Tirio and Wayana, there are other clans in border areas in Suriname, such as the Kaliña Lokono and the Caraibs.
The most important risks and threats that affect the indigenous groups of Suriname are health problems such as cervical cancer, leishmaniasis, malaria, HIV and mercury pollution, mainly caused by limited access to health facilities and safe drinking water.

Mercury pollution has been identified since the appearance of legal and illegal small-scale mining, mainly gold mining. Because of this activity, the water and the fish they eat from these rivers are polluted. Similarly, swimming or living near these rivers and inhaling mercury fumes poisons them.

| ACTORS IDENTIFIED | 1. Ministry of Foreign Affairs.  
5. Ministry of Natural Resources.  
11. CI-Suriname.  
12. Amazon Conservation Team Suriname Foundation.  
13. Indigenous and Maroon Communities.  
15. Organization for Indigenous People (OIP). |

| LEGAL INSTRUMENTS IDENTIFIED (AS OF AUGUST 2013) | No national legal instruments were identified; however, the workshop urged that those that exist be updated to include the participation of indigenous populations. |

| PIACI PROTECTION COORDINATION MECHANISMS | No coordination mechanisms were identified for protection of indigenous peoples in Suriname; but the “demarcation of indigenous lands” was underscored as an appropriate State tool for their recognition and protection. |

| LIMITATIONS | 1. Social services are not guaranteed in all the indigenous communities.  
2. Risk factors:   
• Climate change.   
• Diseases.   
• Population growth.   
• Cost of logistics.  
3. Deficient transportation, communication and tourism infrastructure.  
4. Education in border areas is of poor quality. |

| CONCLUSIONS OF THE WORKSHOP | 1. The collective rights of indigenous peoples must receive legal recognition and protection, respecting their uses, systems, knowledge, medicine and traditional practices, based on international legal instruments.  
2. It is necessary to include local populations in the processes of construction of public policies, especially those related to environment, forests and territory.  
3. Update of the existing legislation including indigenous issues.  
4. Rehabilitation of the transport, communication and tourism infrastructure in indigenous populations.  
5. Construction of schools in the Kwamalasumutu and Sipaliwini Savannah communities (near the border with Brazil). |
NATIONAL HEALTH WORKSHOPS

BOLIVIA

Date: December 9-10, 2013.
Place: Santa Cruz de la Sierra, Bolivia.
Participants: Ministry of Health and Sports, indigenous peoples’ authorities, government organizations and PS/ACTO representatives.

The basic document for development of the workshop (Diagnosis of the health sector) developed by the ACTO health consultant stated the following:

- Health issues should be addressed interinstitutionally and trans-sectorally.
- Comprehensive protection actions for PIACI on the part of the Bolivian State are in the process of development.
- A sector contingency plan should be in place in view of the extreme immunological vulnerability of PIACI as well as disease detection, treatment and monitoring mechanisms.
- Indigenous peoples in the Amazon region do not receive permanent health care; National Health System programs and insurance do not reach the most remote Amazonian communities.
- No up-to-date information is available on health conditions in the Amazon region. An analysis of the health situation should therefore be conducted by a multidisciplinary team that includes traditional doctors. The official records do not contain Ministry of Health data on epidemics or health issues to detect the main diseases that afflict indigenous peoples in the Amazon region.

Conclusions of the workshop:

- Promote a single community and intercultural health system by setting up health protection corons, installing centers with medical equipment and implements that allow an intercultural approach.
- Incorporate a portfolio specializing in PIACI.
- Incorporate the engagement of traditional healers into the annual operating plans of each municipality.
- Develop medicinal plant protection policies and patent them bearing in mind the importance of the rainforest for preserving the health of indigenous peoples and PIACI.

BRAZIL

Date: November 18-24, 2013.
Place: Brasilia, Brazil.
Participants: Ministry of Health and Sports, indigenous peoples’ authorities and PS/ACTO representatives.

The basic document for development of the workshop (Diagnosis of the health sector) developed by the ACTO health consultant stated the following:

- According to Indigenous Health Information System (SIASI) data, as of October 2013, the indigenous population recently contacted in Brazil numbered 26,744 persons.
• The main causes of PIACI mortality between 1912 and 1981 were: influenza, chicken pox, measles, malaria, tuberculosis, gonorrhea and hepatitis B.

• The lumber and hydroelectric industries have affected and will continue to affect PIACI lives and health.

• Development of contingency plans is of strategic importance in reducing the risks they run at the time of contact, which include infectious and contagious diseases: acute respiratory diseases, viral and parasite diarrheas and malaria, among others.

• Contingency plans should consider that there are three different sources of contagion:
  1. The isolated population itself promotes contact;
  2. Indigenous and other communities that live in communities surrounding the areas where isolated communities live promote contact;
  3. Contact promoted by FUNAI considering the risk of entry of economic activities and exploration of natural resources that cannot be reversed by the State.

• Contingency plans should include actions with health professionals, indigenous peoples, the military and support personnel that circulate in their territories. These persons should be free from any infectious and contagious diseases, particularly viral respiratory diseases, viral diarrheas, malaria and tuberculosis. These persons should also follow codes of conduct that that avoid all intimate contact and the delivery of consumer goods and industrialized foods. The human care teams should not be numerous: they must not exceed the number of indigenous persons in the contacted group. Female personnel should be included to facilitate contacts with women and the presence of journalists should be avoided.

• When providing health care to isolated indigenous peoples, care should be taken to avoid transferring them to urban centers for treatment. Technology should be implemented for providing care on the ground, including internet access, exam kits, portable EKG and X-ray equipment, use of telemedicine and telehealth.

Workshop conclusions:

• The conditions of vulnerability of indigenous peoples, in the absence of adequate protection on the part of the Brazilian State, might be a risk and a threat that can decimate an entire community or part thereof.

• Health care cannot be separated from territorial and social protection and promotion of indigenous rights.
COLOMBIA

Date: March 26, 2014.
Place: Bogotá, Colombia.
Participants: Ministry of Health and Social Protection, Ministry of the Interior, Ministry of Foreign Affairs, National Health Institute, National Parks, Health Secretariats of Guaviare and the Amazon, Ombudsman, NGOs, indigenous organizations and PS/ACTO representatives.

The basic document for development of the workshop (Diagnosis of the health sector) developed by the ACTO health consultant stated the following:

- Colombia has more than 12 vulnerable peoples in initial contact or voluntary isolation in the face of external pressures that have forced them to take refuge in the Amazon rainforest. There are few references of their existence in the Colombian Amazon region.

- Confirmation of the existence of these peoples requires that the State recognize them and include them in contingency and assistance plans, with all the rights vested in every Colombian citizen.

- In 1988 the last population contacted massively in Colombia, the Nukak, contacted the mainstream society because its members were suffering from acute respiratory infections and left for to Calamar, in Guaviare. It is also known that New Tribe missionaries recorded health care actions between 1990 and 1993, due mainly to bronchitis, influenza, malaria and parasites. These diseases decimated 37% of the Nukak population. Diseases like malaria, filaria, respiratory infections and otitis developed, until a measles epidemic forced the authorities to vaccinate against this disease. The departure of the New Tribes Missionaries in 1996 made the Nukak increase contact with the settlers in search of health care, which unleashed a new outbreak of diseases. For the year 2000, the Nukak population was estimated at 378 individuals with severe intestinal parasitism, skin infections, pneumonia, malaria, malnutrition, urinary tract infections and even sexually transmitted diseases. For 2007, there were high incidences of diarrhea, respiratory infections, tooth decay, pregnancy and childbirth complications.

- The contact led the Nukak to be employed at the settlers' farms and thus their food went from natural and nutritive to processed foods full of starches and sugar. The contact also resulted in pathologies related to the consumption of drugs and alcohol, domestic violence, use of weapons, tobacco addiction and coexistence problems.

- The Nukak gradually lost control of health practices and of their own lives, leading to institutional dependence and loss of their own autonomy. Institutional dependence was aggravated by the lack of coordination and institutional lack of cohesion.

- The Nukak people now live outside their territory in an ongoing settlement process. In the territory where they currently move, the Guaviare Health Secretariat provides basic health services: assistance of sick persons, promotion and prevention, immunization, emergencies, hospitalization, provision of medicines; in other words, procedures that follow legal guidelines rather than a comprehensive care model with an inter-cultural approach.

- There is no genetic susceptibility among isolated peoples; immunization is therefore a usual procedure.

- Policies for protection of medicinal plants should be developed and these should be patented, considering the importance of the rainforest for the health care of indigenous peoples and PACI.

Conclusions of the workshop:

- The health care model for indigenous peoples should consider several fundamental components such as territorial coverage that considers these peoples' mobility; benefit plans contextualized to the reality of the local epidemiological profile and provide coverage of their own and forgotten pathologies in national benefit plans. This also requires specific cost studies that consider their geographical characteristics in addition to the demographics. Another key feature of the model is the articulation of extramural services with institutional ones and the design of intercultural protocols that harmonize traditional practices and their sociocultural adaptation.

- There has been very good experience in incorporating maternal guidelines and traditional practices in maternal care program with excellent results for mothers and newborns with traditional deliveries.

- Development of health plans based on life plans is also proposed; among other things, these consider
the territories, authorities and traditional leaders.

- Care of PACI should be the reason for contact: health, curiosity, violence. These conditions are crucial, since they make it possible to determine the behavioral guidelines for individuals that the health team should consider when carrying out the procedures.

- When a contact requires health care for the PIACI, quick action must be taken by basic health staff, with trained personnel that is healthy at the time and properly vaccinated, to determine the cause of illness. An interpreter or linguist and traditional medicine support must be available. The care must be provided as close as possible to the territory of those contacted and the staff must consider behavior guidelines for health personnel, specific guides for prevalent diseases and intercultural, management guides. In case the patient has to be hospitalized, the protocol must include isolation to prevent the individual from getting hospital infections. In the case of women, health care should be provided by female staff.

- A permanent surveillance system that includes the mandatory reporting of sightings or contact with PIACI should be implemented.

**ECUADOR**

**Date:** November 6, 2013.
**Place:** El Coca, Ecuador.
**Participants:** Government institutions, indigenous peoples’ authorities, NGOs and PS/ACTO representatives.

The basic document for the workshop (Diagnosis of the health sector) developed by the OTCA health consultants mentioned:

- In Ecuador there is public health coverage, membership coverage; prepaid medicine, private and private services are available in Ecuador. Of these, only those that have a considerable presence in the area of influence of indigenous peoples in voluntary isolation are the services offered by the Comprehensive Public Health Network (RPIS), which provides the care offered by the Ministry of Public Health of Ecuador through of their posts, sub-centers, health centers and regional hospitals, the Ecuadorian Social Security Institute (IESS) and its peasant insurance, Armed Forces through the Security Institute of the Armed Forces (ISSFA) and some private health posts located in the Amazon Region, operated by foundations or private individuals.

- In Ecuador, historically, primary health care for remote indigenous communities has been deficient and often nonexistent. Especially in the Amazon Region and because of the presence of oil companies, the State assigned all the basic responsibilities for the population, including education and health, although in various constitutions of Ecuador, health care has always been a right. Enforcing this mandate has been a difficult task for all governments.

- The population of the Waorani zone, some Kichwa communities and several peasant settlers who are close to the PIA area of influence have at least one health promoter, who is a member of the community trained to handle medical emergencies on site; some have a health post and, very few, a medical center. In the most remote communities, health personnel travel to communities by land, on rivers or by air to serve the indigenous communities, but their actions are specific and itinerant.

- Since the 1980s the Ministry of Public Health has been working through a network of several communities surrounding the PIA areas, and in 2009 it was consolidated with the signing of agreements, the Tiwino health network to serve the health needs of the Waorani nation. The Health Network aims to carry out vaccination campaigns, care and transfer of seriously ill patients, provide support to relatives of patients, so as not to generate a culture shock. The Tiwino health network can conduct an epidemiological mapping of the indigenous population in the areas surrounding Yasuni National Park and Taegeri-Taromenane Intangible Zone (ZITT). The main diseases identified are: acute respiratory infections, parasitosis, rhinopharyngitis.

- From 2008 to 2010, the Precautionary Measures Plan engaged a general practitioner at the ZITT Monitoring Station in Shiripuno, equipped with canoes, an ambulance and medical supplies to address emergencies in the Waorani territory, inside and outside the Intangible Zone.

- There are few health experiences with peoples in initial contact or in isolation. In 2013, after a massacre between indigenous Waorani and a group of isolated peoples, presumably the Taromenane. Two girls were kidnapped and taken to Waorani territory,
where Ministry of Health staff provided comprehensive care to the girls to protect their health, led by a doctor specializing in intercultural issues. The girls were vaccinated, and medicine was applied following an intercultural process. Peruvian medical care guides were used since in Ecuador there were no documents in this regard.

**Conclusions of the workshop:**

- Ecuador learned to work in coordination with public entities, which led to the existence of technical and legal documents related to the protection of PIA, including the installation of medical equipment in the ZITT area of influence.

- Considering that most diseases that affect populations neighboring the PIA are preventable, the guideline is that a health care protocol specializing in isolated indigenous people should be established.

- Ecuador achieved high immunological coverage in populations close to the ZITT.

- Regulations and norms that ground the public policy for the protection of PIACI in Ecuador should be developed, especially in the area of health, with an intercultural vision and respecting the rights to self-determination of these peoples.

- A comprehensive training plan for Waorani populations should be generated with a focus on health and indigenous populations.

- Vaccination should not only be required for neighboring residents to enter the ZITT or stay in its buffer zone but for all national or foreign persons who enter through tourism, research or work.

- The quality of water and air in the ZITT and its area of influence should be ensured, since the PIA use rivers and forests and their immune system is vulnerable.

**PERU**

**Date:** July 19, 2014.  
**Place:** Lima, Peru.  
**Participants:** Government institutions, indigenous peoples’ authorities, NGOs and PS/ACTO representatives.

The basic document for the workshop (Diagnosis of the health sector) developed by the ACTO health consultants mentioned:

- Health is one of the most sensitive and urgent policies and constitutes an enormous challenge for the political system with respect to PIACI, due to these peoples’ extreme vulnerability to external diseases, because they lack immune defenses against them.

- At the time of contact, PIACI are vulnerable to tuberculosis, malaria, Chagas disease, mycosis, acute diarrheal diseases, acute respiratory infections, and suffer from malnutrition and anemias.

- As part of its strategies for facing contact situations with PIACI, Peru developed 3 documents that were officially approved:
  1. A technical health standard for prevention, contingency in case of contact and health risk mitigation in a scenario where PIACI are present;
  2. A technical guide: involvement in cases of interaction with PIACI;
  3. A technical guide: health care for indigenous peoples in recent contact and initial contact with a high risk of morbidity and mortality.

- One of the main protection mechanisms for in-
The health standard and technical health guides must be optimized to overcome coordination difficulties and responsibilities among government levels. Mechanisms are also required for budgetary justification to finance the services, engage and train professional and technical personnel and create regional intervention teams when there is a possibility of assisting PIACI in these spheres.

- Effective coordination must be established with the Ministry of Health through its regional health offices and with the Intercultural Health Center (CENSI) to implement health prevention and care actions in Indigenous Reservations, especially to develop and implement an emergency (contingency) plan to address situations where contact, accidental or not, threatens the health of these peoples and carries the risk of imminent mass mortality. Rapid, agile mechanisms must also be created for more immediate and efficient action, including by providing human and logistical resources.

- Develop actions aimed at monitoring the health of all the actors who live near isolated peoples’ territories. Because direct interventions with PIACI are not possible it is important to work by creating “health protection cordons” to protect the health of peoples in isolation and prevent them from suffering the consequences of eventual epidemics and diseases among the people who surround them.

- Improve implementation of the standard and technical health guides. Train the staff that works in the area of Territorial Reservations, Protected Natural Areas (ANP) and other areas where isolated indigenous peoples are present, based on rights and multiculturalism.

- Establish epidemiological surveillance mechanisms and situational diagnoses from the standpoint of health determinants (epidemiological, laboratory, social and anthropological) with human resources trained in PIACI topics. Train the health staff on technical protocols for situations of encounter with PIACI. Promoting knowledge of these peoples’ languages is important to establish a culturally appropriate relationship. This is because only staff that has specialized knowledge of health for indigenous peoples in isolation and initial contact and on establishing intercultural relations with indigenous peoples can guarantee its members’ health and at the same time ensure respect for the other rights of indigenous peoples in initial contact.

- Categorization, recognition and effective protection of Indigenous Reservations, promoting environmental conservation as an essential factor for these groups’ health. A preserved and balanced environment provides a valuable and inestimable service in maintaining the health of the population.

Conclusions of the workshop:

- Health standards should be updated and adapted to the regions and competent (multidisciplinary in health, social and cultural) human resources should be provided. These are extremely important factors for working appropriately with PIACI.

- The comprehensive approach for working on health with PIACI should be addressed from the standpoint of “health determinants” (biological, environmental, lifestyles and health services.

- A special trans-sectoral regime should be established to protect PIACI rights, guaranteeing their right to life and health, safeguarding their existence and integrity, prohibiting any extractive activity in territorial reservations, guaranteeing the intangibility and integrity of their territories and developing controls and protocols to bar third parties (miners, illegal loggers, tourists and others) from entering who can threaten these peoples’ lives and safety.

- Epidemiological surveillance mechanisms and situational diagnoses should be developed to protect PIACI.

- Identify and strengthen buffer zones next to PIACI areas.

- Promote cooperation among countries to work jointly in border areas where PIACI are present.

**SURINAME**

**Date:** August 27, 2014.

**Place:** Paramaribo, Suriname.

**Participants:** Governmental institutions, national assembly, indigenous organizations, non-governmental organizations and PS/ACTO representatives.
Indigenous peoples’ health in areas on the Suriname border is monitored by the Primary Health Medical Mission Foundation, a private foundation created with the cooperation of three religious organizations that together provide medical services for the population that has access difficulties in the interior of Suriname. There are 26 health care centers in 10 communities of a total of 57 distributed throughout the country.

Health services in border areas are considered good; primary health medical missions in Suriname have a special division for monitoring and evaluating health conditions and conducting research that ensures compliance with international health standards and active community participation.

According to Medical Mission studies in 2007, the health problems seen in indigenous peoples are: malaria, respiratory infections, anemia, problems during pregnancy, sexually transmitted diseases and hygiene problems due to poor access to sanitation and safe water. Currently, the most common health problems are: cervical cancer, HIV, leishmaniasis, malaria and mercury poisoning (caused by the gold mining industry).

**Conclusions of the workshop:**

- A comprehensive approach is recommended to implement treatments using traditional and western methods, including monitoring and evaluation.
- Approaching trans-border communities is recommended for comprehensive treatment of these communities.
- Certifying traditional clinics using the standard of respect for traditional knowledge.
- Legal recognition and protection of indigenous peoples’ collective rights considering their traditional customs, systems, knowledge and practices.
- Regulation for recognition and protection of indigenous peoples’ traditional medicine can be based on the articles of the Biodiversity Convention.
- Cultivation and conservation of medicinal plants is necessary to ensure their sustainable use over time. Indigenous peoples should not give information to the foreign pharmaceutical industry.
- Establish the National Traditional Medicine Institute. Its goals focus on supervision, control and promotion of research.
- Promote discussion between academia and traditional indigenous healers to bring traditional and western medicine together.
- Include a register of “Registered Traditional Healers”.
TECHNICAL MISSIONS

PS/ACTO representatives, together with PIACI protection specialists and technicians, conducted five technical missions to territories where signs of indigenous peoples in voluntary isolation and initial contact have been detected. The purpose of these missions was to share knowledge on ACTO Member Countries’ protection methodologies, protocols and mechanisms with regard to PIACI.

Maps showing the location of PIACI were used to conduct these missions; however, these maps are not disclosed in this document to ensure their self-determination.

TECHNICAL MISSION IN BRAZIL

The expedition organized by the National Indian Foundation (FUNAI) and ACTO in November of 2012 facilitated the exchange of knowledge and methodologies among government technicians on the protection of isolated peoples to strengthen the multilateral approach on this matter. It also made it possible to know and understand the work done by FUNAI on the ground and the methodologies and protocols used to gather cultural evidence resulting from an internationally recognized work record.

The central purpose of the mission was to learn about FUNAI’s experience with regard to the PIACI protection methodology and exchange experiences with ACTO Member Countries’ indigenous affairs institutions.

For 14 days, technicians from the countries and FUNAI officials visited the Javarí Valley region using methodologies to search for indications of isolated indigenous peoples to verify their existence. The 30-member team, divided into three groups (vanguard, verification and logistics), left the FUNAI Javarí Valley Ethno-Environmental Protection Front base, traveled along the San José River, Itaquí and the environs of the Kanamary de Bananeira community.

The group of technicians stayed for several days at this community, sharing activities with the Kanamary and with the Special Indigenous Health Secretariat (SESAI) health team that serves the region, and conducted several sorties in the area, recognizing the evidence reported by the indigenous regarding the presence of isolated groups relatively near the community.

Based on this experience, the Member Countries’ technicians prepared a detailed report, considering the model reports used by FUNAI. The results of the mission, with evidence of the presence of isolated peoples in the Javarí Valley, were sent to the indigenous agency in Brasilia (FUNAI) for analysis and procedures.
The Valle del Javari indigenous land is located to the west of the Amazon State in the municipalities of Atalaia do Norte, Benjamin Constant and Sao Paulo de Olivenca and borders Peru. It is the second-largest indigenous territory in Brazil, with a surface of 8.5 million square kilometers, demarcated in 2001. Its known indigenous population includes about 4,900 persons, which are members of the Marubo, Matis, Matses, Kanamary, Kulina and Korubo, peoples, in addition to different isolated groups that have been confirmed and others that are still being studied by FUNAI.
TECHNICAL MISSION IN ECUADOR

Based on the results of the first expedition in Brazil, the Ministry of Justice of Ecuador proposed a field mission through technicians from the Precautionary Measures Plan (Plan de Medidas Cautelares - PMC) to learn about the territory assigned for protection of the Tagaeri-Taromenane Isolated Peoples and visit the Waorani indigenous communities that inhabit this protected territory, which is also part of the Yasuni National Park in the Ecuadorian Amazon.

Fifteen people, including government experts, representatives of institutions responsible for defending indigenous rights and representatives of ACTO Member Countries’ health institutions took part in this technical mission in the Tagaeri-Taromenane Intangible Zone (ZITT) on November 7-15, 2013. The expedition was coordinated among representatives of the Precautionary Measures Plan of the Ministry of Justice of Ecuador and ACTO.

The mission visited several Waorani indigenous communities and learned about the coexistence among different peoples. It visited the territory protected by the Precautionary Measures Plan, which prohibits any activity that might threaten PIACI’ existence. In spite of this, there are oil companies and informal logging activities in the area, which have led PMC technicians to exert a rigorous surveillance in coordination with the Ministries of the Environment, Health, Defense and the Interior, to ensure PIACI’ protection.
TECHNICAL MISSION IN PERU

Indigenous affairs and indigenous health representatives of ACTO Member Countries (MC) and representatives of the National Parks of some of those countries, IDB officials and the ACTO Permanent Secretariat, as well as Reuters News Agency journalists, took part in a technical mission in the Cusco and Madre de Dios in Peru from May 18 to 31 2014.

The purpose of the mission, organized by the Ministry of Culture of Peru and ACTO, was to share experiences and technologies on the protection and promotion of PIACI rights.

The Cusco and Madre de Dios regions are the habitat of different peoples in isolation and initial contact that live mainly within the Manu National Park, the Madre de Dios natural reservation and the Kugapakori- Nahua-Nanti territorial reserve and others. During visits to indigenous communities and local authorities, testimony of “undesired contact” between indigenous peoples in isolation and the population of indigenous communities was confirmed. In recent years, sightings of isolated indigenous peoples of the Mashco Piro population that inhabit Manu National Park and the Madre de Dios Territorial Reservation have increased considerably in areas increasingly closer to native communities, populated centers and intense population transit routes in said regions, particularly Rio Alto Madre de Dios.
Manu National Park is located in the region between Madre de Dios and Cusco. It covers 16,921 square kilometers of mountains and forests that form ecosystems from the Andes to the interior of the Amazon basin. The National Park has the largest of the protected biodiversity areas on Earth and has been recognized as UNESCO World Heritage. Machiguenga indigenous populations in a situation of initial contact and Mashco Piro isolated groups live in the Park. ACTO/MINCUL technical mission. May 2014.

ACTO archive.

Upper Madre de Dios. This has brought about situations of risk of undesired contact and conflicts over the use of the territories with the local populations. The mission visited the Shipetiari native community and the Boca Manu locality, where there is evidence of the presence of Mashco Piro indigenous peoples. The visit acquired in-depth knowledge of the problems suffered by these communities.  

9 Testimony gathered by technicians during the mission to Peru.
STRATEGIC FRAMEWORK FOR PROTECTING
INDIGENOUS PEOPLES IN VOLUNTARY 
ISOLATION AND INITIAL CONTACT

Machigenga women in the Madre de Dios Region. Photo from the collection of Fernando Mendita, Director of the Salvación Health Center, Madre de Dios. ACTO archive photo.

Indigenous women from the Santa Rosa Community. ACTO archive photo.
TECHNICAL MISSION IN COLOMBIA

Experts on health and indigenous affairs of ACTO Member Countries took part in an on-site mission on July 19-27, 2014 in the Colombian amazon region, in territories adjoining Río Puré and Chuinari National Natural Parks. For nine days, the delegates were able to learn about progress in the development of public policy for the protection of Isolated Indigenous Peoples, the different protection and conservation methodologies implemented in Río Puré and Chuinari National Parks, identified partners and the way in which the indigenous vision is articulated with protection of peoples in a situation of isolation.

Different opportunities for dialogue with the local indigenous authorities were promoted during the mission, since they are an integral part of the protection proposal in Colombia. The members of the technical mission took part in events held in the indigenous communities in order to contribute to the Contingency Plan for PIACI in Colombia. 29 persons took part in the expedition, including delegates from ACTO Member Countries, Colombian indigenous organizations, representatives of grassroots communities and their associations.

The city of Leticia, which borders the city of Tabatinga in Brazil, was the starting point for the expedition. There the participants received information on linguistic research on the “Yuri-Passé Peoples in Isolation”. The Yuri are part of the Tikuna linguistic family and the Passé of the Yucuna linguistic family. A brief historic summary on the La Pedrera Township and its relationship with the region’s indigenous peoples in isolation, as well as the strengths and weaknesses of the health system implemented in the Township were presented.

Specialists from the NGO Amazon Conservation Team (ACT) presented their experiences and evidence, accredited by the Ministry of the Interior, in identifying Yuri and Passé Peoples in Isolation in the Río Puré National Park. During their presentation, they stressed strategies for protection of peoples’ rights as well as the environmental and cultural education program implemented in areas adjacent to the park, to raise awareness among the indigenous and non-indigenous population regarding the importance of protecting indigenous territories.
TECHNICAL MISSION IN BOLIVIA

The purpose of the ACTO technical mission in Bolivia, conducted in October 2014, was to exchange information, methodologies and experiences related to the Integral Life and Contingency Plans of the highly vulnerable indigenous nations and peoples in the Bolivian Amazon, as well as the health protection actions developed by the government institutions involved in the protection of the PIACI, especially the Vice Ministry of Lands, Ministry of Health and Ministry of the Environment of Bolivia.

The expedition, which included technicians from the Member Countries (MP), began with a press conference held in Cochabamba on October 14, 2014, in the presence of the Vice Minister of Lands and Rural Development, in addition to local authorities.

During the mission, a meeting was held in Chimoré, at which delegates from the Ministry of Justice of Bolivia introduced Law 450 on the Protection of Highly Vulnerable Indigenous Peoples and reported on their regulatory process. The delegates of the Member Countries participated by explaining the respective legislations, methodologies and health care. Likewise, the government representatives of Bolivia presented the initial proposal for the formulation of the Integral Plans of Life of the Indigenous Peoples in Bolivia, with the purpose of receiving contributions and suggestions on the matter.

At another meeting organized at the town hall of the Municipality of Chimoré, anthropologist Ely Linares reflected on the changes that have taken place during contacts with the Bia-Yuqui people between 1969 and 1991 and guaranteed their rights. Linares explained the difficulties in assisting this population and made some recommendations for implementation by government institutions that might be used in other cases by Member Countries. Later, in the Bia-Recuaté community of the Bia-Yuqui people, during a meeting with the community, the members of the mission learned about the difficulties experienced by the community with regard to their “good living” and their situation.

At the end of the mission, representatives of the Vice Ministry of Lands reported on a meeting to disseminate the Supreme Decree that was issued to benefit indigenous communities and provide the necessary support to improve these communities’ living conditions.
BORDER PERSPECTIVE –
A FEW EXAMPLES

As a result of the exchange of information among the ACTO Member Countries, bi-national actions were identified that reinforce the joint work in favor of the PIACI.

PERU – BRAZIL – BOLIVIA

The president of FUNAI visited Peru to sign the “Memo-
randum of Understanding on Inter-institutional Coop-
eration for the Protection and Promotion of PIACI Rights between the Ministry of Culture of Peru and FUNAI”. The Ministries of Foreign Affairs of Brazil and Peru participated actively in the negotiation process. Field expeditions of binational technical teams and overflights of border regions were conducted as part of the activities contemplated in the visit.

As a result of the on-site Mission to the Yavari protection front of the National Indian Foundation (ACTO/FUNAI), meetings were held between the indigenous organizations ACONADIYSH (Peru) and Apiwtxa (Brazil), in the Breu river border area to discuss the impacts of the Cru-
zeiro do Sul and Pucallpa Highway.

PERU – ECUADOR

As a result of the Technical Mission in Peru, it was de-
cided to conduct a consultation process on the National Policy for Protecting PIAs and the promotion of binational agreements with Peru.

BOLIVIA – BRAZIL

As a result of the Technical Mission in Brazil, the countries coordinated actions regarding the gas pipeline that runs through Kaa iya Park, for the protection of PIACI.

ECUADOR – BRAZIL

As a result of the activities of the Program, the signing of a bilateral technical cooperation agreement through the institutions working on PIACI issues: FUNAI and PMC between Brazil and Ecuador was proposed to im-
prove the treatment of the issue in Ecuador from the PIACI anthropological point of view.

COLOMBIA – VENEZUELA

Activities were coordinated to guarantee the self-de-
termination of the Mapayerri people, who are probably moving from Colombia to Venezuela in search of relatives.

SURINAME – BRAZIL

Proposals were made by Suriname to Brazil, in order to build schools in the savannah villages of Kwamalasumutu and Sipaliwini in Suriname.
MEETINGS OF THE EXECUTIVE COMMITTEE (CODIR)

In Phase 1 of the project, 4 meetings of the Steering Committee were held, during which guidelines were adopted that framed the implementation of the ACTO/IDB project.

1st CODIR MEETING

Date: August 11-12, 2011.
Place: Brasilia, Brazil.
Participants: Delegations from Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru and Suriname; IDB staff and PS/ACTO representatives.

The first CODIR meeting was key, since it established the parameters for subsequent development of the program, so that certain processes would be homologated without each country having to stop developing its own internal processes. The program’s operative documents were presented and discussed during the meeting.

The main resolutions reached by the 1ST CODIR include:

- The Member Countries must form the Central Executive Unit and give evidence of the appointment of focal points from the Member Countries, as well as the counterpart of the Member Countries.
- It was decided that the outcomes of all the consultancies engaged by the Program would be governed by its operating regulations and the products would be approved in advance by the Member Countries; The Rules of Procedure of the Program’s Steering Committee were also approved.
- It was proposed that, considering its progress and leadership on PIACI issues, Brazil would chair the CODIR during the first period.
- The participants proposed the progressive analysis of methodologies to strengthen the participation of segments of Amazonian society, respecting national mechanisms and policies. It was also concluded that the regional guidelines produced by the Program are not limited to a specific regulatory vision of each country, but that they should support the countries in developing public policies and regulatory frameworks.

As part of the procedures, the CODIR decided that the regional action plan would be consulted and validated with the countries before its formal adoption. ACTO Member Countries and Program staff were also urged to coordinate with other regional programs related to PIACI and indigenous peoples in general, and at the same time strengthen information and training actions for those seeking to protect PIA.

2nd CODIR MEETING

Date: August 28 - 29, 2012.
Place: La Paz, Bolivia.
Participants: Delegations from Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru and Suriname; IDB staff and PS/ACTO representatives.
The meeting highlighted the importance of indigenous cultures and their contribution to the new model of society in ACTO Member Countries, particularly based on traditional, technical and scientific knowledge. The delegates of the Member Countries stressed the importance of adopting public policies to strengthen the activities, especially in border regions.

The need to promote a health system and identify PIACI diseases in the region and for policies to protect these peoples was stressed. There was great concern about the lack of human resources trained and specialized in PIACI issues for immediate intervention but respecting the protocols for assisting this type of people.

Peru’s strides on PIACI issues were highlighted, resulting in the preparation of a Health Manual and Technical Guidelines for PIACI.

The importance of hiring national health consultants and national facilitators as well as the International Legal Consultant provided for in the Program was mentioned.

The delegations of Member Countries reported on their situational status regarding health protocols and the specific policy for PIACI, as well as the status of the National Technical Committees.

Ecuador offered to host the on-site technical exchange of methodologies for protecting PIAs in the Tagaeri-Taromenane Intangible Zone. The reference budget was established for co-financing such exchange. The technical exchange took place subsequently between November 7 and 15, 2013.

Another CODIR resolution was to create a website to include the documents generated by the Program.

International legal consultant Carlos Soria introduced the document “Regional Amazonian Guidelines for the Protection of Indigenous Peoples in Isolation and Initial Contact”. This document was enriched by the contributions made by the delegations of the Member Countries and submitted for consultation to the respective governments. The proposed Amazonian principles for protecting the PIACI were: No contact, Precautionary Approach, Cooperation and Representation through their indigenous organizations.
4th CODIR MEETING

Fecha: Date: October 31, 2014.
Place: Brasilia, Brazil.
Participants: Delegations from Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru and Suriname; IDB staff and PS/ACTO representatives.

The delegates of Member Countries reviewed and approved the evaluation report presented by the IDB Consultant, in which compliance with the components of the program and the development of unforeseen products such as the network of technicians, binational agreements and initiatives adopted and trinational contacts made.

The participating delegates decided to recommend a second phase of the project, with emphasis on the health issues of indigenous peoples that were identified and included in the draft of the project introduced during the meeting.
STRATEGIC FRAMEWORK FOR DEVELOPING A REGIONAL AGENDA FOR THE PROTECTION OF INDIGENOUS PEOPLES IN ISOLATION AND INITIAL CONTACT (Period 2016-2018)

PROJECT ON INDIGENOUS PEOPLES IN ACTO BORDER REGIONS

The project on Indigenous Peoples in the ACTO Border Region is the result of the “Strategic Framework to Prepare a Regional Agenda for the Protection of Indigenous Peoples in Voluntary Isolation and Initial Contact (PIACI)”, financed by the IDB, which ended its activities in December 2014. ACTO Member Countries suggested ensuring its continuity with actions focused on health and territorial management of the indigenous peoples of the regions adjoining the territories inhabited by PIACI.

During the first phase of the program, a process of convergence and harmonization of the standards, protocols and guides for addressing emergency situations, especially in border areas was promoted. Two important instruments were developed as inputs for public policies and other national processes for developing legal tools in the Member Countries (MC), creating and consolidating specialized sectors on Protecting PAICI Rights in most of the MCs: (i) Guidelines for the Health Care of Isolated Indigenous Peoples and Initial Contact (PIACI); and, (ii) Guidelines for Protecting Indigenous Peoples in Isolation and Initial Contact.

The first phase turned out to be an enriching experience for regional and cross-border issues. With this background, the second phase of the project was developed with the following components:

1) Development of standards on protecting the health of the indigenous peoples in border regions.

2) Promotion and exchange of mechanisms for using the traditional knowledge of indigenous communities at the binational and trinational borders as the basis for developing sustainable management plans for these areas.

The project would seek harmonization with other initiatives in the region for more concrete participation in the Member Countries’ different processes, seeking results that can be achieved through the public policies of the participating countries.

The expected results of the project would be:

1. Regional standards for epidemiological surveillance and control in relation to PIACI, improving the knowledge and health of indigenous peoples to reduce their vulnerability.

2. Guidelines for the exchange of indigenous peoples’ traditional knowledge, which will strengthen their capacity to control and manage their territories, using their own practices and customs, implementing national laws and policies.

Documentation was prepared during 2015 to submit a proposal to the IDB for a second phase. After the relevant consultations with the Member Countries, adjustments and formalities according to ACTO and IDB procedures, the Project on Indigenous Peoples in Border Regions was finally approved by the financial institution, and the
requirements were met to sign the contract and start the activities in March 2016.

The UN Special Rapporteur on the Rights of Indigenous Peoples, Victoria Tauli-Corpuz, met in Brasilia on March 16, 2016 with the Secretary General of the Amazon Cooperation Treaty Organization (ACTO), Jacqueline Mendoza, and with the Territorial Protection Director of the National Indian Foundation of Brazil (FUNAI), Walter Coutinho Jr., to learn about the work that ACTO has done in the area of Indigenous Peoples in the Amazon Region. Representatives of the ACTO Coordination of Indigenous Affairs, a representative of the Ministry of Foreign Affairs of Brazil (MRE), Marcos Tulio Cabral, and technical teams from the aforementioned institutions also participated in the meeting. Among the main topics discussed were the activities that ACTO develops in defense of PIACI rights.

The Strategic Framework Program for the Preparation of an Agenda was presented on this occasion. Tauli-Corpuz was informed about the direct and indirect impacts of the PIACI program in the Member Countries and the results achieved, as well as the recommendations for the health care of these peoples, among others. The UN representative highlighted the importance of the role that ACTO plays as a regional cooperation agency on this issue and on the problems surrounding indigenous peoples in isolation and initial contact.
REGIONAL WORKSHOPS

The purpose of the planned regional workshops is to exchange and strengthen knowledge, especially regarding challenges, progress in protection methodologies, traditional knowledge and territorial management, as well as to hold discussions on the pressures exerted by extractive industries on their territories.

INTERNATIONAL FORUM
“CHALLENGES AND PROGRESS IN PROTECTING INDIGENOUS PEOPLES IN ISOLATION AND INITIAL CONTACT (PIACI) OF THE AMAZON REGION”

Date: July 6, 2016.
Place: Lima, Peru.
Attendees: ACTO Member Countries, NGOs and representatives of Indigenous Peoples and PS/ACTO

Several problems that are part of a complex and urgent scenario which must be addressed to protect these peoples’ rights were identified and analyzed at meetings and technical missions conducted during the first phase of the PIACI protection program. One of these is undoubtedly the challenge posed by protecting the rights of indigenous peoples in isolation and initial contact in particularly complex situations, such as (1) “first contact” episodes with isolated indigenous peoples, and (2) conflicts between PIACI and other indigenous groups.

In this context, governmental, civil society and indigenous participants discussed the challenges that arise for the protection of PIACI in these situations. Presentations on the delegates’ experiences and contributions led to discussion and proposals.

DISCUSSION ROUND
“MINING IN INDIGENOUS LANDS”

Date: July 7, 2016.
Place: Lima, Peru.
Attendees: Representatives of ACTO Member Countries, Ministry of Culture, Ministry of Health of Peru, and PS/ACTO representatives.

There were situations caused by illegal mining and the impacts of mercury on the health of indigenous populations. Participants stressed that, although there are no mining activities in indigenous territories in several countries, pollution caused by the use of mercury in distant rivers has direct effects on the local fauna, mainly on the fish that constitute the main food of the communities, as well as the quality of the water used by forest animals and the indigenous communities themselves.

In Brazil, for example, the biggest challenge is mining in the indigenous territories themselves.
The countries’ representatives showed the need for specialized studies to identify health effects; creating economic alternatives for the sectors involved and promoting sustainable technologies in artisanal mining.

It was concluded that this space was the beginning of a series of activities at the regional level to deal with illegal/informal mining. The importance of this topic was also considered on the agenda of activities within the framework of ACTO Indigenous Affairs considering other socio-environmental aspects in the Amazon Region.

MEETING ON “TRADITIONAL KNOWLEDGE AND TERRITORIAL MANAGEMENT”

**Date:** July 8, 2016.  
**Place:** Lima, Peru.  
**Attendees:** Representatives of ACTO Member Countries, Ministry of Culture, Ministry of Health and PS/ACTO.

The Project on Indigenous Peoples in Border Regions, financed by the IDB, was introduced during the meeting.

The International Consultant on Traditional Knowledge submitted the first draft of the Guiding Document for the Definition of Guidelines for the Exchange of Traditional Knowledge (TC) among indigenous peoples in border regions for sustainable management of biodiversity to the ACTO Member Countries. The delegates of the Member Countries made contributions and it served to guide the events contemplated in the schedule of activities of the project.

The delegates recommended that the different realities of borders between Member Countries, which may be administrative, political, and cultural among the diversity of peoples that share territories, etc., and the particular characteristics of the Member Countries be given priority.

They also stressed the importance of considering Prior, Free and Informed Consultation (ILO Convention 169) for indigenous communities in initiatives for exchanging traditional knowledge.

REGIONAL MEETING OF “REPRESENTATIVES OF MINISTRIES OF HEALTH AND EPIDEMIOLOGICAL SPECIALISTS OF ACTO MEMBER COUNTRIES”

**Date:** September 19 - 20, 2016.  
**Place:** Cochabamba, Bolivia.  
**Attendees:** Health representatives of the Member Countries, epidemiological specialists and PS/ACTO representatives.

The purpose of the meeting was to develop recommendations to outline common methodologies in the region for epidemiological surveillance in border regions between ACTO Member Countries. This meeting facilitated the exchange of information on the diseases that affect the Amazonian indigenous communities and how to address them considering intercultural aspects, and on health systems for indigenous peoples.

As a result of this exchange, the possibility was raised of a concrete experience with the Achuar people of Ecuador and Peru in relation to cross-border situations in-
volving indigenous peoples. In this regard, the need for ongoing dialogue between both countries with PAHO/WHO support was stressed, and that a meeting should be held to present a health plan for the Achuar Nationalities and subsequent signature of a bilateral agreement.

**TECHNICAL EXCHANGE**

**“ON RESEARCH TO IDENTIFY THE PRESENCE, REGISTRATION CATEGORIES AND PROTECTION STRATEGIES FOR ISOLATED INDIGENOUS PEOPLES (PIA), WITH EMPHASIS ON INTEGRATING THE TRADITIONAL KNOWLEDGE ASSOCIATED WITH TERRITORIAL MANAGEMENT FOR THEIR PROTECTION”**

**Date:** November 16 - 18, 2016.

**Place:** Bogotá, Colombia.

**Attendees:** Health representatives from the Member Countries, epidemiological specialists, PAHO/WHO and PS/ACTO representatives.

In the city of Bogotá, Colombia, government representatives, civil society representatives, Colombian indigenous representatives and ACTO representatives took part in a technical meeting from November 16 to 18, 2016 in the framework of the activities for implementation of the ACTO Project on Indigenous Peoples in Border Regions.

The delegates considered issues related to the research methodology for territorial identification and delimitation; registration and measures for the protection of indigenous peoples in isolation. In addition to this technical aspect, best practices in the use of traditional knowledge in territorial management for the protection of isolated peoples were presented. The presence of a leader and a traditional authority of the Curare los Ingleses Indigenous Reservation was highlighted in the event. He made comments on the aspects discussed from the indigenous perspective.

The conclusions and recommendations of the meeting highlighted the importance of considering the indigenous perspective related to traditional knowledge in territorial management to ensure comprehensive and sustained protection of the indigenous peoples in isolation in the Amazon Region.
BILATERAL MEETING
“TO DEVELOP A HEALTH PLAN FOR INDIGENOUS PEOPLES OF THE ACHUAR NATIONALITY OF ECUADOR AND PERU IN THE BORDER REGIONS OF THE AMAZON”

Date: November 22 - 25, 2016.
Place: Puyo, Ecuador.
Attendees: Ministries of Health of the Member Countries, epidemiological specialists, representatives of PAHO/WHO, IDB and PS/ACTO.

Indigenous representatives of the Achuar Peoples of Ecuador and Peru, governmental and international organizations took part in a bilateral meeting to develop a Cross-Border Health Plan for the Achuar People of Ecuador-Peru. During the bilateral meeting, indigenous leaders explained the socio-organizational context of the Achuar Nationalities and the perception of the main health problems in their communities. This was complemented by a presentation of the epidemiological profile and the main intervention strategies that are implemented at the national and local level by the Ministries of Health of both governments.

The main lines of action presented by both Ministries of Health include: articulation initiatives with local governments, efforts to adapt health services to the cultural context, community participation, improvements in the infrastructure and equipment of health facilities, and prioritization of the care provided to the mother and child population. The importance of promoting cultural health mediators as interpreters and translators, Primary Health Care promoters and technicians was also highlighted.

Finally, a set of solutions was proposed that included: strengthening human talent with an intercultural approach; rescuing healthy ancestral practices; articulation between local border governments; redesigning

the current regulations to adapt them to the border context; implementing appropriate and sustainable technologies to respond to diverse structural needs of the population such as water, sanitation and production; strengthening the capacity of the health services to solve problems and the free circulation of patients, among others.

The meeting culminated in the signing of the agreement between the governments of Ecuador and Peru for implementation of the Achuar Health Plan.

The Ecuador-Peru bilateral meeting was attended by Luis Vargas of the Achuar National Organization of Ecuador (NAE); Santiago Candashi, Achuari Inruntama (ATI); Angel Yunrigkias Achuar (ORACH); Carlos Naranjo, Governor of the Province of Pastaza, Jose Cisneros Flores, Mayor of the Municipality of Andoa, Peru; Margarita Guevara, Minister of Health of Ecuador; Sofia Velasquez, Representative of the Vice Minister of Health of Peru; Ambassador Jacqueline Mendoza, ACTO Secretary General; David Cotacachi, IDB Representative; and Adrian Diaz, PAHO/WHO/Ecuador representative.
SIDE EVENT
“ACTO ON PIACI - 16th SESSION OF THE UN PERMANENT FORUM FOR INDIGENOUS ISSUES (UNPFII)”

Date: April 26, 2017.
Place: New York, United States.
Attendees: Delegates from ACTO Member Countries, international agencies, indigenous representatives, civil society organizations from the countries participating in the forum, ACTO staff and Peruvian Congresswoman Tania Pariona.

On April 26, the Permanent Secretariat of the Amazon Cooperation Treaty Organization (PS/ACTO) held a side event entitled “Indigenous Peoples in Voluntary Isolation and Initial Contact in the Amazon Region” in the framework of the 16th Session of the UN Permanent Forum for Indigenous Issues (UNPFII), held in New York, from April 24 to May 5, 2017.

During the event, ACTO presented the activities and main results of the program on Indigenous Peoples in Voluntary Isolation and Initial Contact (PIACI) as well as the Project Indigenous Peoples in Border Regions, both financed by the Inter-American Development Bank (IDB).

The participants’ interest focused on the strategies of a new project that was presented to the Inter-American Development Bank (IDB) regarding Dispute Settlement and Collective Negotiation Skills in indigenous communities. The proposal included field missions to facilitate dialogue with different Amazonian actors, with the aim of analyzing criteria and recommendations that would serve as the basis for consensus and peaceful solutions in specific critical situations.

ACTO showed the relevance of the Guidelines for the Protection of PIACI, the Guidelines and Principles for the health care of PIACI and introduced the first draft on the Guidelines for the Exchange of Information on Traditional Knowledge as a contribution to the Life Plans and Management of Biodiversity in Indigenous Communities, in addition to other important results achieved by the ACTO/IDB agreement.

ACTO was an “Observer”, for the first time at the 16th Session of the UNPFII. During the session, it was informed about the progress in indigenous rights worldwide and disseminated information about the efforts made through the Organization in the Amazon Region.
REGIONAL WORKSHOP
“FOR THE EXCHANGE OF INFORMATION AND EXPERIENCES ON HEALTH PROTECTION”

Date: May 15 - 18, 2017.
Place: Brasilia, Brazil.
Attendees: Delegates from ACTO Member Countries, PAHO/WHO representatives, technicians and specialists in indigenous affairs and indigenous health.

The purpose of the meeting was to exchange information and experiences on health surveillance in regions surrounding those inhabited by indigenous peoples in isolation and initial contact.

Information was exchanged at the meeting on the health status of indigenous peoples in isolation and initial contact based on epidemiological surveillance and health care experiences. It was seen that tuberculosis, leishmaniosis, leptospirosis and acute respiratory infections are the most prevalent diseases in the area, in addition to the effects of mercury pollution, among others.

The event was scheduled jointly by the Permanent Secretariat of ACTO and the Special Secretariat for Indigenous Health (SESAI), with the support of the National Indian Foundation (FUNAI). The goal was to develop recommendations for health care in post-contact situations of isolated groups and in initial contact, as well as to propose a methodological instrument to articulate epidemiological surveillance actions among countries and indigenous peoples to help characterize the impact of diseases on the health and well-being of communities on the border regions of ACTO Member Countries.

The participants presented specific cases of health care in post-contact situations with isolated peoples, considering contingency plans and prevention methodologies.

The following proposals were made as a result of the workshop:

1. A plan of activities between Brazil and Ecuador to strengthen health care and monitoring for PIACI.

2. Exchange of knowledge - technologies and protocols - in combating scorpions in indigenous lands and territories.
ADDITIONAL MEETINGS AND EXCHANGE OF EXPERIENCES

WORK MEETING
“INTERNATIONAL HUMAN RIGHTS STANDARDS ON THE RIGHTS OF INDIGENOUS PEOPLES IN ISOLATION AND INITIAL CONTACT (PIACI) IN THE AMAZON AND THE GRAN CHACO: REVISION AND PROPOSALS FOR ACTION”

Date: June 8 - 9, 2017.
Place: Lima, Peru.

The purpose of the meeting was to make practical recommendations that promote the work of the Inter-American Human Rights Commission on PIACI protection.

The recommendations of the Special Rapporteur on Indigenous Peoples, Victoria Tauli Corpuz, focused on the principle of “no contact”.

During the meeting, the UN presented a summary of the state of protection of PIACI in each country and the guests at the meeting were able to participate in the definition of challenges, development and state of protection of PIACI in their respective countries. Among the common issues raised were:

- Health protection
- Need for precautionary measures and their implementation /observance.
- Inter-institutional coordination of efforts.
- Participation of indigenous peoples in all the processes for protecting PIACI.

The following proposals were made as a result of the meeting:

1. The creation of a Network of Technical Experts on PIACI, with projection in the UN System, mainly OHCHR.

2. Support for and promotion of good practices and mechanisms at the international level by the CIDH, Special Rapporteur and OHCHR.

ACTO REGIONAL MEETING
“TERRITORIAL CONTROL AND REGIONAL HEALTH PLAN FOR PIACI”

Date: August 14 - 21, 2017.
Place: Lima and Puerto Maldonado, Peru.
Attendees: Representatives of ACTO Member Countries, Bolivia, Brazil, Colombia, Ecuador and Peru; IDB staff and ACTO staff.

The purpose of the work meeting was to establish a regional agenda, identifying actions for the protection of Peoples in Situation of Isolation and Initial Contact (PIACI), mainly related to the topics of health, territorial control and protection in border areas and exchange of information to strengthen cooperation among the governments of the region.
During the meeting, the Regional Madre de Dios Health Plan for PIACI was analyzed, identifying needs for action and extrapolating them to the region for developing other plans. The needs identified were:

1. Integral indigenous participation: planning, implementation and control of the Plan.

2. The actual articulation of the government in the territory for disease prevention and treatment and health promotion.

3. Reviewing previous experiences in the region, identifying lessons learned; and rescuing traditional health knowledge in order to update protection standards, action protocols and strengthen these peoples’ traditional medicine.

4. Building multidisciplinary teams for integral intervention to guarantee living conditions and not only to observe disease.

5. Ongoing training of human resources present in the area, as well as training new human resources to work with PIACI and interculturality, not only as translators but also at a technical-professional level.

6. Inclusion of PIACI care and protection guidelines in the Plans for Management of Protected Areas, especially of the territories where they live.

7. The importance and role of the State in the design and implementation of Health Plans, leadership and coordination with all the actors involved, especially with indigenous peoples.

8. Control of community tourism.

9. The need for an immunization scheme for populations in recent contact.

10. Training health promoters and parameters for establishing community surveillance.

11. Reviewing health care regulations for PIACI in ACTO Member Countries.

12. The importance of consultation with the indigenous peoples of the region where the work is done.

13. The need for procedures for recognizing indigenous peoples, the processes for categorizing new reservations and the adaptation of existing territorial reservations; as well as the need for instruments and action protocols, contingency plans and early warning systems.

The following proposals were made as a result of the exchange of information during the meeting:

1. A binational work plan between Peru and Brazil focusing on monitoring and health; as well as the proposal for signing a new Memorandum of Understanding.

2. Peru and Colombia ratified the guidelines of their agreement of understanding.

3. Peru and Bolivia ratified the existing agreements signed between their governments on health issues.

4. Peru and Ecuador prepared a plan of activities to promote a bi-national agreement for the protection of PIACI.

The meeting ended with a visit to the Ministry of Culture’s Control and Surveillance Post located on the Pariamanu River, where representatives of the Member Countries learned about the methodology applied by the Peruvian Government for the protection of PIACI and thus improved their knowledge to be able to replicate and adapt these actions in their own protection territories.
PARTICIPATIVE DEVELOPMENT OF “PUBLIC POLICIES FOR PIACI AND EXCHANGE OF EXPERIENCES AMONG INDIGENOUS ORGANIZATIONS OF BRAZIL, COLOMBIA AND PERU”

**Dates:** October 21-28, 2017.  
**Place:** Bajo Río Caquetá, Department of Amazonas, Colombia. 
**Attendees:** representatives of ACTO Member Countries, Brazil, Colombia and Peru.

The purpose of the meeting was to exchange information and strengthen the knowledge of representatives of government institutions, civil society organizations and non-governmental organizations on PIACI protection and learn about the level of activity of local indigenous organizations faced with the presence of external threats and the presence of indigenous peoples in isolation.

The visit took place in territories of the indigenous communities of Curare los Ingleses, Borikada and Manacaro, which adjoin territories inhabited by isolated indigenous peoples and included a tour of control and surveillance posts.

**Proposals made during the visit included:**

1. Participative development of public policies in defense of PIACI collective rights.

2. The importance of creating health cordons in regions inhabited by PIACI as an important component of a health strategy.

3. Strengthening partnerships and cooperation among the main actors for protection of indigenous peoples.

2nd TRINATIONAL MEETING “TO EXCHANGE INFORMATION ON THE HEALTH OF INDIGENOUS PEOPLES IN BORDER REGIONS”

**Dates:** November 9-10, 2017.  
**Place:** Lethem, Guyana.  
**Attendees:** delegations from Brazil, Guyana and Suriname and ACTO personnel.

The Second Trinational Meeting to identify common criteria for exchanging information on the health status of these peoples and the guidelines for developing an epidemiologic and demographic diagnosis among Brazil, Guyana and Suriname was held in the framework of the project on Indigenous Peoples in Border Areas.

Information was exchanged during the meeting on surveillance procedures for health care, plus an analysis of the institutional capacities of health services and joint actions for facing emergency situations in the border regions of the three countries.

**Main Agreements:**

1. Start a process of dialogue for cooperation among the three countries in identifying epidemiological profiles and providing health care to indigenous peoples in border regions, focusing mainly on malaria, leishmaniosis and the effects of mercury.
2. Exchange personal data and medical histories of patients from indigenous peoples treated in countries that are not their own in Guyana, Brazil and Suriname.

3. Exchange information among the health institutions of the three countries to strengthen the protection of indigenous peoples vulnerable to threats at the cross-border level. The peoples identified were:
   - Guyana-Brazil border: Wapichan, Macuxi and Waiwai.
   - Suriname-Brazil border: Kaxuyana, Tiriyo, Tunayana and Wayana.

4. Priority health care for infants from border indigenous peoples, regardless of their national origin, by showing an identification document.

5. Eventual basic health care for indigenous peoples in transit in border areas between the three countries, regardless of the patient's place of origin.

6. Promote the participation of indigenous health providers in health training activities for indigenous peoples in border areas between the three countries, including linguistic intercultural participation.

7. Develop a trinational project to install internet service in border indigenous communities between the three countries.

The purpose of the meeting was a technical analysis of the products of the project on “Indigenous Peoples in Border Regions” which are part of Phase II of the ACTO program “Strategic Framework for a Regional Agenda for Protecting Indigenous peoples in Isolation and Initial Contact” and to analyze the evaluation report on Phases I and II of the project, developed by international consultant Georg Grünberg.

The experts and staff members who attended the meeting also included representatives of civil organizations of Brazil and Colombia and project consultants in the case of Brazil, Colombia and Ecuador.

During the meeting participants shared information and developed recommendations for the meeting of CODIR members.
The experts and staff made recommendations for adjusting the Phase II consultancy documents and technically approved the consultancy for evaluation of the project. Additionally, thanks to the contribution of FUNAI, the participants at the meeting were able to attend the short film entitled “Piripkura”, which tells about the contact between FUNAI staff and two survivors of the Piripkura population: Pakya and Tamandua.

2. It is recommended that the following be taken into consideration when building a new project within the area of indigenous affairs: (i) strengthen the tools and processes generated during the first phase of the PIACI project; (ii) gather the lessons learned and successful experiences in implementing these tools, updated diagnoses of threats and action protocols among the countries and assisting peoples in initial contact. In other words, creating a portfolio of new projects without forgetting the essence of PIACI protection, the relationship between Amazonian indigenous peoples and these peoples and each country.

3. PIACI protection institutions should be improved. The multidisciplinary team of experts should become a formal advisory team for managing public policies and attending to emergencies and using technology in situation rooms located in the Ministry of Foreign Affairs for that purpose. The project should include a directory of the advisory team on the ACTO-PIACI website and incorporate the information dissemination component. The advisory team should include indigenous professionals who can help diversity the views on PIACI protection and thus generate a directory of PIACI experts that will be accessible to the Member Countries.

4. An external evaluation is needed on the integration and implementation of the tools and recommendations developed by the project and all the relevant information on PIACI protection to define the incidence and impact of the project at the local and regional level and identify the gaps that still exist.

5. The UN has recognized the space created by ACTO. It would be advisable to send the results of the project to the Office of the United Nations High Commissioner for Human Rights, to the United Nations Rapporteur on Indigenous Peoples and to CIDH and receive their comments on alignment of international protection policies.

6. Based on the experience of the second phase of the project, their agreement to include the comments by Member Countries’ technicians should be incorporated into the terms for engaging project consultants and ACTO should contribute to improving communication between consultants and Member Countries.

7. Considering that the situation of PIACI is still critical because of their high vulnerability due to the advance of the economic frontier for extraction of natural resources, especially in border areas, ongoing joint work is needed for countries to manage conflicts, improve the exchange of experiences and interagency support between countries.
Two meetings of the Steering Committee were held during Phase 2 of the project at which guidelines were adopted to frame implementation of the ACTO/IDB project in border areas.

1st CODIR MEETING

Date: April 18, 2016.
Place: Brasilia, Brazil.
Participants: Delegations from Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru and Suriname and PS/ACTO representatives.

- The ACTO project on Indigenous Peoples in Border Regions is the result of the program "Strategic Framework for a Regional Agenda for Protecting Indigenous Peoples in Voluntary Isolation and Initial Contact (PIACI), financed by the IDB, which ended its activities in December of 2014.
- The ACTO Member Countries suggested ensuring its continuity through actions focusing on health and territorial management of indigenous peoples in regions adjacent to territories inhabited by PIACI.

Main agreements:

1. Developing standards to protect the health of indigenous peoples in border regions.

2. Promoting and sharing mechanisms for using the traditional knowledge of indigenous communities at binational and trinational borders as the basis for developing sustainable management plans in these areas.
2nd CODIR MEETING

Date: April 4-5, 2016.
Place: Brasilia, Brazil.
Participants: Focal points from ACTO Member Countries, Bolivia, Brazil, Colombia, Ecuador, Guyana, Peru and Suriname.

The purpose of the meeting was to analyze the results of the technical evaluation of the products of phase II of the project and those of the consultancy for evaluating the project and to define the next steps and projections for direct activities for protecting Indigenous Peoples in Isolation and Initial Contact (PIACI).

During the meeting and based on the CODIR rules of procedure, the Peruvian delegates handed over the CODIR chairmanship to the Brazilian delegates.

The following general agreements were reached after reviewing the recommendations of the team of experts and staff:

1. The ACTO Member Countries unanimously approve the outcome of the evaluation of the project conducted by the ACTO international consultant.

2. The delegations agree to conduct a final review of the outcomes of the second phase of the project within one month. After the outcomes are final, they will be presented to ACTO authorities for their consideration.

3. Continue developing PIACI issues as a permanent topic for ACTO.

4. They agree that the current guidelines proposed for PIACI in the Strategic Amazon Cooperation Agenda should be the basis for discussing the Agenda.

5. They agree to consider the specific recommendations of the technical team of experts as the basis for the ACTO Permanent Secretariat to consider these recommendations when developing new proposals within the current lines of work in the Region and strengthen them.

6. The Member Countries are invited to ensure that their own documents, experiences and lessons learned are sent to be shared through the ACTO Regional Amazonian Observatory.

7. They recommend that communication among ACTO Member Countries be strengthened to ensure that each country’s comments are reflected in the final documents.

8. Submission by the Member Countries of the support letters ACTO needs to present the conceptual note to the IDB.

The ACTO Permanent Secretariat mentioned that several of these recommendations would be adopted at the meeting of presidents of ACTO Member Countries to be held in 2018 for the Chairpersons’ information.
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LIST OF PERSONS APPEARING IN THE ANALYZED DOCUMENTS (2011-2014)

ACTO

Sharon Austin (Coordinator of Indigenous Affairs); Antonio Restrepo (Health Coordinator); Carlos Macedo (Technical Advisor); Carlos Soria (International Consultant on Protection of Isolated Peoples and Initial Contact); Maria Gorete Selau (International Health Consultant); Dr. Georg Grünberg (Evaluation Consultant); Vincent Brackelaire (Sustainability Consultant); Alfredo Garcia Altamiriano (National Facilitator in Peru); Omar Trujillos (National Consultant in Peru); Saskia Wip (National Facilitator in Suriname); Annel Quirtoga (National Facilitator in Bolivia); Tatiana Calderón (National Facilitator in Ecuador and Consultant); Antenor Vaz (National Facilitator in Brazil); Hugo Zapata (National Health Consultant in Colombia); Gabriel Cevallos Serra, (Second National Health Consultant in Ecuador).

SURINAME

Ellen Naarendorp (Ministry of Foreign Affairs); Serita Dewinnie (ACTO Focal Point of the Rural Development Ministry); Fariza Blokland (ACTO Focal Point); R. Kajoeramaries (Association of Indigenous Village Leaders of Suriname); E. van Eer (Director of the Suriname - MM-MPH – Suriname Medical Primary Health Care Mission); Arman Jurel (Kabalebo District Comissioner) Lesley Artist (District of Para) and Ramses Kajoeramaries (District of Marowijne); D. D. Bouterse (past president); Ingird Bouterse-Waldring (First Lady of the Republic of Suriname), Tony Esley Anoewaritja, Inder Gajadiem, Leon Ericson Wijgaarden.

ECUADOR

Eduardo Pichilingue, Centro de Derechos Económicos y Sociales, Ecuador (CDES), James Anaya, United Nations Special Rapporteur on the Rights of Indigenous Peoples on the Situation in Ecuador. José Proaño, Anthropologist. Enrique Vela. Anthropologist, Responsible for the Plan on Precautionary Measures. José Narváez. Ministry of the Environment Biologist, Head of Yasuní National Park. Esteban Ortiz and Gabriel Jaramillo; Rosario Cortez (Governor of Orellana), Wilson Jiménez (Instituto para el Ecodesarrollo de la Amazonia (ECORAE), Alicia Kawiya (representative of the Waorani Nationality of Ecuador (NAWE); Penti Baihua (Representative of Bameno); Wilson Mayorga (Under Secretary for Human Resources); Milagros Aguirre (Fundación Alejandro Labaka); Tatiana Calderón (ECORAE Advisor on the Environment and International Relations).

PERU

César de Las Casas, Director of Social Affairs, MRE; Patricia Balbuena Palacios, Director General on the Rights of Indigenous Peoples of the Vice Ministry for Intercultural Affairs of the Ministry of Culture; Teresa Sánchez Astorayme, Specialist of the Direction of Social Affairs, MRE; Leonardo Daniel Paz Aparicio, Legal UT PIACI Specialist; Vice Ministerio for Intercultural Affair, Ministry of Culture; Luis Felipe Torres, Ministry of Culture /VM.
BRAZIL

Mariana Maleronka Ferron (Director of the Indigenous Health Care Department, DASI/SESAI/MS); Clarisse Jabur (Coordinator of the Policy for Protection and Promotion of Recently Contacted Indigenous Peoples, COPIRC/FUNAI); Leonardo Lenin (Coordinator of Protection and Location of Isolated Indians, COPLI/FUNAI); Mariana Amorim (Indigenous Health Care Department, DASI/SESAI/MS); Gunter Francisco Loebens (Missionary Pro-Indigenous Council (CIMI) Regional North I); Conrado R. Otavio (Centro de Trabajo Indigenista – CTI); Joao B. Catalano (Coordinator of the Yanomami – Yekuana Ethno-Environmental Protection Front); Ana Suely Arruda Camara Cabral / Sanderson Soares Castro de Oliveira (Laboratory for Indigenous Languages and Literatures of Brasilia University – LALI/UNB); Alicia Rolla (Instituto Socioambiental – ISA ). Ricardo Verdim (Brazilian Anthropology Association – ABA), Carlos Travassos (General Coordinator of Isolated and Recently Contacted Indigenous Peoples, CGIIIRC/FUNAI), Davi Kopenawa Yanomami, Francisco de Assis Mateus de Lima (Ninawa - AC), Eriverto da Silva Vargas – Beto Marubo. (Vale do Javari - AM); Iván Lázquez Vendriscolo Busatto (OPAN); Suely de Brito Pinto (DSEI GUATOC/Eqipamento de Saúde Zo’e); Jau-mir Marques Ferreira (Porto Velho/SESAI DSEI Coordinator), Renato Apolinário Francisco (Telehealth Sector of the Ministry of Health, SESAI/CGMASI, José Antonio de Sa (FUNAI General Geoprocessing Coordination).

COLOMBIA

Roberto Franco, researcher (ACT); Isabella Caro and Ed- gar Castro, PNN; Diana Huertas, MININTERIOR; Juvenal Mirana and Dario Hernando Perea Cubeo, PANI, Omar Cubeo and Raúl Mirana, AIPEA. Guest professionals with experience with the Nukak: Danny Mahecha (Anthropologist); Dr. Iván Yunis (Physician and Immunogenetics Expert), Dr. Pablo Martinez, SINERGIAS; Dr. Claudia Galindo, Guaviare Secretary of Health; Dr. Iván Yunis M., MD; Alfonso Torres; Rosendo Ahue, ONIC.

GUYANA

Nigel Deonarine, Gerald Edwards, Magayla Austin, Florence Larose, Anil Joseph Roberts, Martin Antony Cheong, Pauline Samantha Welch.

VENEZUELA

Lic Palencio Gutiérrez Guterres (RREE) and Mariana Orta (RREE).
MAIN DOCUMENTS DEVELOPED IN THE PROGRAM

Documents that are important for the countries were developed in Phases 1 and 2 of the project. This section highlights the most important four regional documents for the ACTO Member Countries. These documents will be introduced individually by the Program and only an executive summary will be presented in this section.

PROPOSED REGIONAL AMAZONIAN GUIDELINES FOR PROTECTING INDIGENOUS PEOPLES IN ISOLATION AND INITIAL CONTACT

Most ACTO countries that share the Amazonian rainforest and the social and biological diversity it contains have developed a considerable body of legislation comprising more than a hundred legal documents based on international human rights law, recognizing the rights of indigenous peoples in isolation in the framework of the right to self-determination and no contact, thus respecting their wish not to be contacted and to bar entry into their territory, while in the case of indigenous peoples in initial contact, what is sought is respect for their social organization, customs, languages, beliefs and traditions and of the lands and territories they have traditionally occupied.

The national legislations on indigenous peoples in isolation and initial contact must provide human, financial, logistical and technical resources to fulfill the mandates established in the relevant legislation and their effective protection.

In certain cases, the legislation for protecting indigenous peoples in isolation and initial contact is too general and does not clearly distinguish between the situation of indigenous peoples in isolation and that of indigenous peoples in initial contact. Both situations are very different and require specific treatment.

In the case of indigenous peoples that are isolated and not contacted, the condition of isolation should in itself be understood as a manifestation of the right to self-determination that expresses the desire to keep exclusive property, control and management of their territories and the natural resources found in them. With regard to indigenous peoples in initial contact or with high vulnerability, plans must be developed to support the process of intercultural relationship with the national society and with regard to prior, free and informed consultation. In the case of indigenous peoples in initial contact it must take place through special conditions that take into consideration the difficulty in using language and the unique understanding of the dimensions of time and space, peculiar forms of organization and decision making and world view that identifies these groups.

The activities of the oil, logging, mining, tourist and other industries conducted in areas adjacent to those occupied by indigenous peoples in isolation and initial contact must be regulated and include Anthropological Contingency Plans containing impact mitigation plans.

An action plan for areas for protecting indigenous peoples in isolation and initial contact should contemplate:

a. Definition of the competent national authorities on protection of these peoples.

b. Development of instruments to regulate the binational protection of these peoples with regard to frontiers occupied by them.
c. Development and protection of inter-sector coordination.

d. Development of a National Plan for Protecting Areas where indigenous peoples in isolation and initial contact are present.

e. Development of a Master Plan for managing each area occupied by indigenous peoples in isolation and initial contact.

f. Installation of surveillance posts in areas occupied by indigenous peoples in isolation and initial contact and nearby settlements.

g. Development of a plan for monitoring and mapping indigenous peoples in isolation and initial contact and third-party activities and their impact on the former.

h. Development of a health research and prevention plan for indigenous peoples in isolation and initial contact and nearby populations.

i. Cooperation with indigenous and civil society organizations through surveillance committees to support the protection of indigenous peoples in isolation and initial contact in communities and populations adjacent to areas occupied by these peoples.

The regional guidelines proposed for adoption by ACTO Member Countries are:

1. Make efforts and conduct joint actions to promote the protection of indigenous peoples in isolation and initial contact that live in the respective Amazonian territories, to ensure that these joint actions contribute to these peoples' well-being with equitable and mutually beneficial results and for conservation of their territories and natural resources. To that end, ACTO Member Countries will exchange information and reach agreements and operational understandings and the relevant legal instruments to ensure that the objectives outlined in these guidelines are achieved.

2. These guidelines shall be applied in ACTO Member Countries' Amazon basin territories where indigenous peoples in isolation and initial contact are present and in areas that, due to their geographic, ecological or economic characteristics, are closely linked to those peoples' situation.

3. Adopt the principle of no contact as the basis for protecting indigenous peoples in isolation that, while allowing permitting third-party activities in certain cases, should focus on consolidating the intangibility of their lands, territories and natural resources.

4. Intangibility results from the special situation of vulnerability and risk of infringing on the rights of these peoples, serving as the means to ensure their survival.

5. Cooperate in developing legislation and institutions that contribute to an effective policy for protecting indigenous peoples in isolation and initial contact. Bilateral cooperation is especially important in border areas where indigenous peoples in isolation and initial contact are present. Joint programs and actions will be developed in these cases to protect these peoples from third-party threats against them, their territories and natural resources.

6. Develop a National Plan for protecting indigenous peoples in isolation, not contacted and in initial contact, respectively, as well as instruments for its management that provide guidance and continuity to the protection system in areas occupied by these peoples, institutionalizing the progress and lessons learned in each country and the region.

7. Develop operational protocols for the State in its work with indigenous peoples in isolation and initial contact that live in protected natural areas, reservations, territories or indigenous lands for indigenous peoples in isolation and initial contact and their buffer zones, as well as protocols for non-State actors that have concessions for natural resources operating in areas adjacent, adjoining or contiguous to these peoples' presence.

8. Develop a management plan for each of the indigenous reservations, territories or lands set aside for indigenous peoples in isolation and initial contact.

9. In case authorization is sought for extractive activities in areas adjacent, adjoining or contiguous to areas where indigenous peoples in isolation and initial contact are present, a strategic environmental evaluation must be conducted, bearing in mind the needs of these peoples' future generations before approving
authorizations for such extractive activities.

10. With regard to the socio-cultural risks resulting from extractive activities in areas where indigenous peoples in isolation and initial contact are present, anthropological contingency plans must be established, followed up and monitored, to give feedback on their operation and improve them for the protection of isolated peoples and sound economic activity.

11. With regard to protected natural areas where indigenous peoples in isolation and initial contact are present, the management of such areas should include anthropological plans of action as part of the master plans for these protected natural areas, which includes the action protocol for the staff of protected natural areas to ensure these peoples’ safety and health.

12. Consider the possibility of establishing strict areas or territories for protecting indigenous peoples in isolation and initial contact.

13. Promote implementation of anthropological contingency plans in concessions for extractive activities for conservation and others that observe the principle of no contact as the basis for their design, respect health standards and the obligation to monitor and map these peoples’ displacement and presence for their protection.

14. They agree that areas where indigenous peoples in isolation and initial contact are present overlap forests designated for logging, ecotourism, non-timber products and fauna, extractive and infrastructure activities, such concessions shall be particularly studied considering the potential risks for indigenous peoples in isolation and initial contact present in concessions for extractive activities, conservation other uses that have already been granted in the past. Anthropological contingency plans must be implemented, and strict protection and buffer zones must be identified within such concessions.

15. National legislative bodies must promote proposals for incorporating crimes against indigenous peoples into the Criminal Code.

16. Promote dissemination, analysis and proposals on issues regarding indigenous peoples in isolation and initial contact in national spaces with all the authorities involved in these issues to contribute to the development of legislation, research and public policies.

17. ACTO shall promote spaces for discussion and inputs through regional meetings on indigenous peoples in isolation and initial contact.

18. To that end, ACTO Member Countries must map the public and private actors involved in issues concerning indigenous peoples in isolation and initial contact to help promote trans-sector, binational and regional Amazonian coordination meetings.

19. ACTO will conduct workshops with national sector authorities to share experiences and methodologies for developing, implementing, monitoring, reporting and verifying anthropological contingency plans.

20. ACTO Member Countries will implement training processes for national, section and local authorities on public policies for protecting indigenous peoples in isolation.

21. Promote information campaigns for public opinion in favor of protecting and respecting isolated indigenous peoples. They shall particularly sensitize and train populations or hummocks in areas adjacent, adjoining or contiguous to the presence of indigenous peoples in isolation and initial contact on issues affecting these peoples and the challenges posed by their protection. To that end they will develop awareness raising and training materials on indigenous peoples in isolation and initial contact, including information on their situation and prevention measures, computer graphics, posters, signs in areas for access to territories, lands or reservations for indigenous peoples in isolation and initial contact and radio and internet campaigns on such matters in the national and local languages. This material should especially be disseminated among actors mapped by the Member Countries.

22. Promote the establishment of surveillance committees to support the protection of indigenous peoples in isolation and initial contact in settlements located in the area of influence of their territories, lands and reservations and other areas where these peoples are present. These are committees made up of indigenous and other local populations. The committee reports to governmental and non-governmental actors
involved in the protection of indigenous peoples in isolation and initial contact.

23. Promote the participation of indigenous organizations in protecting indigenous peoples in isolation and initial contact in coordination with the national, provincial or state government and community or district authorities.

24. On the matter of the health of indigenous peoples in isolation and initial contact:

- Develop a specific health policy for indigenous peoples in isolation, and other specific policies for indigenous peoples in isolation and initial contact that contemplate, among other matters, the human, technical and financial resources required for their effective operation.

- Ensure the permanent staffing of health posts by persons trained in issues involving indigenous peoples in isolation and initial contact for preventive and emergency care in each of the local districts or constituencies close to areas where these peoples are present.

- Guarantee the supply of medicines, especially for digestive, respiratory and tropical diseases, as well as basic vaccines for newborns and small children and against snake bites.

- Incorporate traditional practices with an intercultural approach in health care for indigenous populations and other rural populations.

- Train health personnel in technical protocols with respect to situations of encounter with indigenous peoples in isolation and initial contact.

- Develop health campaigns to prevent alcoholism, adolescent pregnancies and sexually transmitted diseases in adjacent populations.

25. The ACTO Member Countries agree that with regard to education on indigenous peoples in isolation and initial contact it is necessary to:

- Train teachers at local schools on how to implement the intercultural approach for protecting these peoples and health prevention to raise awareness among the local population in implementing preventive measures for protecting these peoples.

- Specifically train teachers on technical protocols or anthropological contingency plans to prevent situations of undesired contact with these peoples.

- Develop educational material on indigenous peoples and indigenous peoples in isolation and initial contact to support prevention and protection for these peoples. These materials should be disseminated at the national, regional and local level.

26. That on the matter of citizen security and access to justice it is necessary to:

- Ensure the presence of public security agencies trained on protecting indigenous peoples in isolation and initial contact at least at one of the settlements near the territories, lands or reservations or areas where indigenous peoples in isolation and initial contact are present.

- Have judges and prosecutors who are familiar with the protection of indigenous peoples in isolation and initial contact and prosecution of activities affecting them.
REGIONAL HEALTH CARE STRATEGY

The document systematizes the essential principles and guidelines for developing a regional strategy for protecting and caring for the health of indigenous peoples in isolation and initial contact (PIACI). The direct effect of this strategy, developed in the framework of implementation of the ACTO Strategic Agenda and the ACTO/IDB Program, will be its implementation by the Member Countries’ health institutions.

Several ACTO Member Countries have been discussing and adopting actions to ensure PIACI health protection. Both Brazil and Peru have made more substantive progress in this area. Peru is the only country in the region that has fully developed a strategic framework that includes a Health Standard and two technical health guides for assisting PIACI. Since there is a regional cooperation agreement in this regard, the need to support Member Countries in developing their technical health standards in coordination was identified and led to the creation of conditions for coordinated action, especially for peoples located or whose means of subsistence are located in border areas between States.

This regional strategy was the basis for conducting ACTO Member Countries’ health workshops.

PRINCIPLES

Principle of high vulnerability

For PIACI, contact entails a very high risk of becoming ill and dying because they have not developed an appropriate immune response against common germs. This constitutes an emergency for these peoples and we must be prepared to face it and mitigate its negative effects on their lives and health. Ailments affect the entire people and not only the individual. These peoples or segments of indigenous peoples in isolation do not have regular contact with the majority population and usually reject all types of contact with persons from outside their group, which worsens the situation of vulnerability.

Principle of prevention

This principle should be applied bearing in mind that direct interventions on PIACI’ health are not possible. In this sense, actions should seek to monitor the health of all the actors who live near the territories of isolated peoples. It is important to work based on the creation of “health protection cordons” to ensure the health of isolated peoples and keep them from suffering the consequences of possible epidemics and diseases suffered by people around them.

Principle of self-determination

Respecting and guaranteeing the right to self-determination. For indigenous peoples in isolation ensuring the right to self-determination means respecting their decision to remain isolated, without presupposing that these peoples’ situation cannot evolve regarding their desire and need to establish contact over time.

Principle of participation, consultation and prior, free and informed consent

This general principle should be applied considering the specific realities of indigenous peoples in isolation and initial contact, and particularly respect for the right to health ensuring the right to participation, consultation and prior, free and informed consent for the peoples affected. The United Nations Declaration on the Rights of Indigenous Peoples (2007) contains more than 30 general provisions regarding indigenous peoples and decision making. Both ILO Convention 169 and The UN Declaration provide that consultations should be conducted through institutions representing indigenous peoples. Consultations should be conducted in good faith and allow indigenous peoples to express their opinions based on total understanding of the questions discussed so that they may influence the result and achieve consensus.

10 The progress achieved by the United Nations system for PIACI, contained in the document PROTECTION GUIDELINES FOR INDIGENOUS PEOPLES IN ISOLATION AND INITIAL CONTACT OF THE AMAZON REGION, GRAN CHACO AND THE EASTERN PART OF PARAGUAY should be taken into consideration. This document is the result of consultations conducted by UNHCHR in the region: Bolivia, Brazil, Colombia, Ecuador, Paraguay, Peru and Venezuela. UNHCHR, GENEVA, February 2012. Also: PAHO/WHO, Ministry of Health, International Meeting on Health and Indigenous Peoples. Achievements and challenges in the Region of the Americas. Puerto Varas, Lake Region, Chile 13, 14 November 15, 2000.
In the case of indigenous peoples in voluntary isolation, the right to consult and obtain their prior, free and informed consent should be interpreted bearing in mind their decision to remain isolated and their need for greater protection given their vulnerability, which may be reflected in their decision not to use this type of participation and consultation mechanisms.

In the case of indigenous peoples in initial contact, participation refers to their being considered active subjects in all actions that may be carried out in their relations with the surrounding society. As active subjects and rights holders, and as peoples entitled to decide their present and future for themselves, they must be able to decide on the actions they will carry out and the way in which they will participate. Otherwise, there is a risk of implementing measures or conducting activities that do not respect their rights.

**Principle of respect and ensuring their right to health**

Respecting and ensuring the right to health of persons and peoples poses implementation complexities with regard to indigenous peoples in voluntary isolation and initial contact. In the case of indigenous peoples in voluntary isolation, ensuring their right to health should be interpreted in a manner that considers these peoples’ decision to remain isolated and the need for greater protection of these peoples given their vulnerability.

**GUIDELINES**

The guidelines followed are a reference tool that helps contextualize PIACI’s right to health due to their extreme vulnerability and the high health risks they are exposed to.

Every program for protecting the health of indigenous peoples in isolation and initial contact should consider two clear purposes: preventing transmission of diseases to persons belonging to these peoples and ensuring their access to and use of their traditional medicine and of the biomedical system in cases of initial contact. To do this, States should define and implement their health protection and care systems considering the following criteria:

**Professional responsibility**

It is important for health care always to be provided by staff specializing in health matters and indigenous issues who can establish a culturally appropriate relationship. Only people with specialized knowledge on health for indigenous peoples in isolation and initial contact can ensure their health and at the same time guarantee respect for the other rights of indigenous peoples in initial contact.

- Specific and strict training for this staff on different intercultural matters, traditional medicine and the cultural practices of the peoples with whom work will be done. Knowledge of the languages of these peoples is important to minimize negative impacts in cases of involuntary contact or to maintain communication with those recently contacted.

- Develop training programs for health professionals who can act in the different health protection programs for indigenous peoples in isolation and initial contact.

- Promote exchanges of experiences and technical know-how with other countries in the region, seeking to optimize health care, disease prevention and PIACI protection.

**Differentiated health treatment**

Promoting and treating the health of isolated groups and those in initial contact, considering each culture specifically and in a contextualized manner. ACTO Member Countries’ public policies should help to:

- Define and create specific teams trained to work on these groups’ health, taking care of the health of the professionals on the team, including prior immunization and basic understanding of health anthropology. Train the health staff on technical protocols for situations of encounter with PIACI.

- Create and maintain an emergency (contingency) plan to address situations where there is contact, accidental or not, that can jeopardize these peoples’ health with the imminent threat of mass mortality. Also create rapid and agile mechanisms for more immediate and efficient actions within the available resources.

- Offer health treatment, preferably within the territory of initial contact groups, with specific human resources, materials and communication.

- Conduct active and ongoing health promotion pro-

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11 The UNHCHR document (Geneva 2017) contains a chapter on Guidelines that should be borne in mind when developing the national workshops.
grams in the territory where PIACI live (protection cor-
dons), with interagency coordination to control epidemi-
ological, social, environmental and economic factors that
might produce physical and mental harm.

- Promote ongoing assistance by trained staff at health
posts on the problems faced by indigenous peoples in
isolation and initial contact for preventive and emergency
care in every local district or constituency close to areas
where these peoples are present.

- Ensure the supply of medicines, especially for digestive,
respiratory and tropical diseases, as well as basic vaccines
for newborns and small children and against snake bites.

- Ensure conditions for maintaining the lifestyle, traditional
diet and environmental conservation, considering that
this is crucial for maintaining the health of these groups.

- Incorporate traditional PIACI health protection and care
practices.

- Promote environmental conservation as an essential
factor for these groups’ health. A preserved and balanced
environment makes a valuable and inestimable contribu-
tion to preserving the population’s health.

Financing

Those responsible for PIACI health care should justify
to the relevant ministries inclusion of items in annual
budgets to ensure the necessary resources and staff
for this purpose. They should also support regional and
local health authorities in making the necessary provi-
sions to assist PIACI in their jurisdiction based on their
responsibilities and authority.

Monitoring

Each State must establish mechanisms to monitor im-
plementation of policies and action plans and be in
close communication with indigenous organizations in
each country throughout this process. This leads to the
following activities, among others:

- Developing a system to monitor the health status of
peoples and persons living in areas adjacent to territo-
ries inhabited by PIACI.

- Identifying and structuring buffer zones next to areas
where PIACI live.

- Establish an ongoing monitoring mechanism or sys-
tem based on implementing and updating studies and
reports on the health status of indigenous peoples in
isolation and initial contact. This monitoring should
never be invasive or disturb those who are isolated.

- Develop tools for monitoring systems. We can stress
access to information obtained through interviews; sat-
ellite and georeferenced images; flyovers; land and river
expeditions; observation of remnants left by the indige-
nous (artifacts, foods consumed, dwellings, etc.); historic
documentation; learning indigenous languages; registra-
tion and systematization of the information gathered,
and official data produced by the State, with reference to
areas occupied by indigenous peoples in isolation and
initial contact.

- Include local staff in monitoring, if possible from the
indigenous communities that live in the region.

- Monitoring should be comprehensive; in other words,
it should include an analysis of all the elements that
might affect PIACI’s health. The elements that should be
included in a monitoring plan include the health condi-
tions of the indigenous peoples contacted, who share
the same territory with indigenous peoples in isolation
and initial contact and the indigenous and non-indige-
nous population that lives in the environment of these
peoples’ territory; territorial occupation (learning about
the territory occupied by indigenous peoples or groups
that use the territory. For example, they might be active
at different times during the year); environmental con-
ditions at the site, with an inventory of the fauna, flora,
water resources, cultural, housing and dietary patterns;
artifacts used; these indigenous peoples’ sustainability
(whether they are able to survive with the available en-
vironmental resources and perform their cultural prac-
tices; the socio-economic situation of the territories
of indigenous peoples in isolation and initial contact;
health conditions; economic and public and private
entrepreneurship, such as colonization projects, use of
natural resources and infrastructure.

- Establish an information exchange mechanism at the
regional level through ACTO. Coordination programs
and joint work for health monitoring actions conducted
by the State, in performing its duties, and monitoring
actions conducted by civil society, indigenous com-
community health providers and indigenous organizations.
Coordination and exchange of information among all
these actors are essential.
Awareness Raising

Greater State involvement is important for protecting and ensuring the health of indigenous peoples in isolation and initial contact. This is evidenced in actions such as the following:

- Establishing fluid discussion among local, municipal, regional and national governments, community indigenous health promoters, indigenous organizations and NGOs on situations experienced by these peoples and the challenges posed by planning and implementing specific health protection, prevention and care actions, establishing permanent discussion forums where all the actors can participate.

- Creating institutional networks in favor of PIACI health.

- Awareness raising programs regarding the existence and health of PIACI for society at large, particularly near indigenous territories, adapting these programs to specific social groups and to educational programs for children and young people.

Training

Training processes should include a broad spectrum of actors.

- Ongoing training and awareness raising for public health officials on health care for PIACI, considering internal turnover.

- Training and awareness raising for judiciary and legislative staff and for ministries and secretariats that have or may be directly involved in these peoples’ protection, for instance ministries of health, culture and education. This training should include officers who have decision making powers in addition to the technicians who implement policies.

- Promote specific training activities with indigenous organizations to ensure their participation in the other health, monitoring and evaluation activities.
The purpose of the guide is to instruct social and institutional actors on how to structure a Health Surveillance System (HSV) adapted to the specificities of indigenous peoples in the Amazonian region, which include border indigenous peoples and Indigenous Peoples in Isolation and Initial Contact (PIACI) for timely short-term prevention, detection and control of diseases and harm.

In the case of ACTO Member Countries that have health surveillance systems that include actions regarding indigenous peoples and especially those already structured, approved and operating for PIACI protection; the guide includes a section of appendices with a segment on best practices to allow the countries to evaluate and improve their actions in favor of border indigenous peoples and PIACI.

The guide is a consultation and support tool to strengthen Member Countries’ public health surveillance systems, promoting strengthened actions and seeking integration between health actions for indigenous peoples and the countries’ own health systems.

The guide is designed for two types of actors: social actors in the Amazonian region and institutional health actors. It promotes:

- Transforming communities into joint managers and being jointly responsible for health actions conducted in their territories.

- Promoting implementation by national, local, departmental and/or federal governments of transsector health surveillance actions.

- Ensuring that indigenous peoples in the Amazonian region define actions in response to their current health situation.

- That health institutions and staff working in the territory implement participative actions to follow up diseases and biological processes among indigenous peoples in the Amazonian region.

According to the Pan-American Health Organization (PAHO, 2012), “public health surveillance is an essential function associated to the State’s and citizens’ responsibility to protect health. It is therefore a system capable of registering, consolidating and analyzing data with regard to events of interest for public health in order to conduct timely actions that may improve individuals’ and communities’ living conditions.”

In other words, systematic production of information on the behavior of health events, diseases and their causes, to guide decision making seeking to improve the population’s lives. Health surveillance thus not only follows up the evolution and control of diseases, but also monitors the causes of those diseases, thus focusing on the population’s perceptions of the health/disease/care (S/E/A) process with social determinants of health (Ortiz, Z. et al. 2004).
Health surveillance systems are necessary for:

- Quantifying and assessing the seriousness of health problems.
- Quantifying and assessing risk factors and groups.
- Identifying health status potentials.
- Determining public health priorities for the events it monitors.
- Establishing prevention and control policies and programs.
- Determining changes in the frequency of diseases or undesired events.
- Detecting and controlling outbreaks.
- Evaluating health services.
- Providing information and developing hypotheses for conducting special research.

In the Amazonian region there are indigenous peoples that have decided to relate to the majority society and identify with it and peoples that have decide to isolate themselves and only have sporadic contact with it. Both types of indigenous peoples in the Amazonian region share a world vision on life, which determines their social-political organization, their economy, their relationship with nature and their concept regarding the health/disease/care process. Its common elements are described below.

### Disease and harm

- Diseases are due to an imbalance between the sacred, the human being and the community.
- They are essentially explained by the influence of the supernatural, without excluding harm caused by accidents, attacks and others.
- They are based on myths and magic; in other words, on the influence of supernatural beings, magical places and healers with supernatural powers granted by the forest, the ‘owners’ or ‘mothers’.
- They have to do with the patient’s history and his or her family references.

#### Diagnosis and treatment:

- It is mainly provided by using plants, animal and mineral elements.
- It is provided through magical and religious procedures.
- It can be provided by consuming hallucinogenic plants that produce a trance.
- In many cases it is provided by the family, based on learning acquired through experience and legitimized by the community.
- It is provided in the understanding that the causes of disease should be sought in the quality of relations with others, rather than on biological or organic disorders.

#### Healers and healing spaces:

- They are linked to the supernatural, which allows them to mediate among humans, nature and their spirits.
- Healers are very respected persons who in addition to their knowledge and gift for healing come from a long family tradition on the matter.
- Healers are responsible for explaining that interpersonal tensions are very debilitating and make a person highly susceptible to attacks by spirits.
Thus, the S/E/A process considered from the indigenous world vision takes into consideration:

- The transcendental importance of what is sacred, since health can only be generated, maintained and recovered through that intervention.

- The relationship between the body and the spirit, since the human organism is the dwelling of the body and soul, which are parts of a whole that is permanently related to vivified nature, since this body and soul are not the exclusive property of their owner, but of the whole.

- The unit of the existence and vivification of nature, since life is not divided; it is conceived as a continuum that does not allow interruption. Thus, death is part of life, since both a person's body and soul can continue existing through their spirit. On the other hand, a person is not unique, since all of nature has life; therefore, mountains, water, plants, the moon, lightning have a place and space in the world.

- Idealization of social relations, since conceiving social relations as given and divine make it possible to share values and practices such as reciprocity, solidarity, redistribution and usefulness of things, which become behavior patterns that, if transgressed, can cause disease.

Health is considered a harmonious relationship between a person and his or her concept of what is sacred; infringement of the designs of the gods or spirits leads to disease. Health is also harmony between a person and society. Disease is punishment for infringing the established laws and arrives through the action of supernatural forces that dominate an individual and nature and are punishment or harm done to a person, taking away the substantial part of his or her being. In this framework, indigenous healers:

- Have adapted to new diseases and therapeutic systems, broadening their feelings, knowledge and practices on the S/E/A process.

- Their diversity in the management of plants and foods has been reduced as new processed foods and medicines have been introduced.

Indigenous populations should be involved within the Member Countries’ public health surveillance systems as key actors, especially in the epidemiological surveillance process, since by involving them actively and making them jointly responsible for identifying health problems, risk factors, health determinants and follow-up of the problem’s evolution, ongoing information can be obtained on the situation in which they live, the environment that determines them and that makes it possible to establish public health policies for prevention and intervention in these peoples’ health.

It is a style of surveillance not of or around these human groups or populations, but with the participation of indigenous peoples as members of those groups that contribute to timely action and to change actions to improve their peoples’ health status (PAHO, 2012).

Health surveillance among the indigenous peoples of the Amazonian region will help understand their health status, in a way that leads to rapprochement and ensures more adequate and contextualized interventions, reducing the possibility of conflicts and harm to this type of population thanks to their involvement in the entire process, accepting and recognizing that they are vital actors in identifying health problems and making decisions on how to address them.

The entity in charge of implementing the proposed health surveillance actions will be the highest health authority in each country, in close coordination with the indigenous people to be addressed after prior consultation and approval by the indigenous population.

Although indigenous peoples are very resistant to many endemic infections, they are also very susceptible to diseases, especially viral ones. Faced with emergency situations and natural disasters, water-borne risk factors, foods, vectors, precarious sanitation conditions, etc., can produce changes in epidemiological profiles, especially among the most vulnerable population groups, and these pose risks for PIACI’ lives. (PAHO, 2012).

These risks are increased by conditions such as the advancing agricultural frontier and cities in the Amazon region, as well as the arrival of new diseases in the region, to which the urban population is also susceptible.

Health surveillance systems are important in areas near PIACI territories to:
Form a health protection cordon that keeps indigenous peoples and settlers near PIACI territories in excellent health and does not affect their physical integrity or that of PIACI.

Create an epidemiological fence in the area of influence of territories where PIACI move.

Coordinate multi-sector actions for protection and development of PIACI policies, to share experiences, methodologies, monitoring, reports and joint verifications by the countries.

Implement the national and regional PIACI protection policy.

The principles applicable to any health surveillance system by ACTO Member Countries that includes working with frontier indigenous peoples and indigenous peoples close to PIACI territories are:

- Ensuring the right to health for all the inhabitants of the national territory.
- Management and care based on social impact results.
- Comprehensiveness of the service.
- Equity (gender, intergenerational and intercultural).
- Full participation by the community and its organizations that facilitates access to information, decision making, supervision and social control processes.
- A cross-cutting approach to act with other actors on health determinants.
- Management and training of human talent to provide quality, timely and continuous care to indigenous peoples and PIACI.
- Democratization of the information.
- Respect for native cultures.

Health determinants are key elements that have a decisive influence on individuals’, families’ and/or populations’ health situation or status. The determinants do not act in isolation; it is the complete interactions among them that have a broad and profound impact on health.

The most common impacts on health are:

1. The people’s lifestyle (diet, housing conditions, etc.)

2. A people’s environmental condition (safe water supply, waste water disposal, use of pesticides or contaminants in productive activities, air pollution, logging, burning of the vegetable cover for planting, etc.)

3. Climate change and climate variability (presence of diseases transmitted by vectors in broader areas, alterations of hydrometeorological cycles (increased rainfall and drought), natural disasters (landslides, floods, fires).

4. Access to basic services (education, housing, social security, etc.)

5. Biological-human characteristics.

6. The presence and conditions of health services (coverage, quality, human resources trained in intercultural health care, etc.)

Identification of health determinants makes it possible to implement interventions for disease prevention and health promotion. These determinants should be identified by each member country based on its own realities.

The document suggests a health surveillance system in four stages:
The Preparation and Organization stage makes it possible to know, generate and guarantee the best conditions for implementing the health surveillance process for indigenous peoples in the Amazonian region by programming agreed activities and tasks.

The first stage is a relationship mechanism among institutional actors and indigenous peoples in the Amazonian region through which they agree and reach consensus on developing joint actions and activities, in addition to using their resources (economic, human and others) to reach goals in connection with the implementation of health surveillance in indigenous peoples in the Amazonian region in the intervention territory.

- It leads to the creation of a “formal” organizational framework through which the roles, functions and competences of the indigenous peoples in the Amazonian region and institutional actors are defined for achieving the established objectives.

- It allows the collective creation of schedules for joint implementation of the activities.

The stage for determination of the characteristics and implementation strategy of the surveillance system contributes to the definition of the system’s central elements to provide clarity on the events to be monitored, the conditions of the health system for its implementation and the Amazonian region’s indigenous peoples’ agreement to implement it.

The second stage allows the actors to agree on the main characteristics of the system, considering that it must meet the needs and the logic of the indigenous peoples to be addressed.

- It allows all the actors in the area to know the system, to ensure that they are familiar with the implementation of activities in connection with it.

- It gives the system social sustainability, to ensure that social actors, indigenous peoples, organizations and others support its implementation and carry out actions that contribute to its implementation.

The surveillance system implementation stage contributes to data collection in the field on the health status of indigenous peoples in the Amazonian region, with regard to frequent problems and priorities defined jointly.

The third stage allows the health personnel in the territory and other actors involved to gather field data on diseases, deaths and risks in the intervention territory.

The stage for definition of actions in view of the health situation encountered makes it possible to act immediately based on information by the health entity with the contribution of the health management and surveillance system (EGSVINDIGENA) and that of members of the indigenous population in the intervention area.
There are many visions and definitions of traditional indigenous knowledge that show the different perspectives, including those of anthropologists, biologists, lawyers, international organizations and even indigenous communities, among others.

Traditional knowledge is rather complex, mainly collective, handed down orally from generation to generation and made up of different elements, including spiritual ones, that distinguish it from other types of knowledge. Experts such as Sing, R., 2008, are of the opinion that in addition to possessing “community knowledge” related to community practices, they also possess private or individual knowledge that may be traditional, modern or created by an individual, as well as knowledge based on informal research experiences, which is to say practices that have been modified.

Other authors such as Grenier, L., 1999 state that this knowledge is expressed through folklore, myths, rituals, stories, dances, songs and even materialized in products such as tools and materials. On the other hand, this knowledge is also expressed through different agricultural practices, use of plant and animal species for medicinal and cosmetic purposes, taxonomic classification systems, construction systems (for instance of dwellings), in addition to knowledge related to climatological aspects, among others.

Traditional knowledge is also the result of oral history and social memory, of the interaction with the environment and extreme observation of numerous events, variations and unusual patterns at a large scale and during long periods. This knowledge can provide important and precise information on processes for restoring areas, which has been ascertained by several scientists. Studies have even reported on major contributions made by traditional knowledge to changes in soil cover and restoration of large areas, inter alia (Uprety et al., 2012).

On the other hand, traditional knowledge can be very useful for preserving biodiversity, maintaining plant, animal and microorganism species and varieties, and identifying other indigenous peoples in isolation and initial contact.

There are several peoples in the Amazonian region in isolation and initial contact. They live mainly in border areas of Bolivia, Brazil, Colombia, Ecuador and Peru and there are other peoples in initial contact in border areas of Venezuela, Guyana and Suriname. Most of these peoples live in areas very rich in biodiversity, difficult to reach, especially to prevent contact with the rest of society (Soria, C. 2016). However, in these areas there are also excessive and uncontrolled extractive and agricultural activities that undoubtedly threaten the survival of these and other indigenous peoples due to the pressures exerted by these activities on biodiversity and territorial management, their customs and traditions.

Brazil has a policy of incorporating indigenous leaders into working groups for PIACI identification, surveillance and monitoring, who also support these processes with their traditional knowledge.

Peru has also developed policies and a regulatory framework that contemplates PIACI protection mechanisms and establishes limitations on land use by third parties. They propose categories of reservations in addition to a multi-sector commission in charge of recognizing the existence of PIACI, which includes government institutions, universities, indigenous organizations, NGOs and others. They have management committees and an action protocol for PIACI protection, in addition to surveillance and territorial control, training, follow-up and control programs.

Colombia has developed monitoring programs in areas close to PIA. They use training and environmental education to improve the management of territories in areas near PIA. In national parks they consider the cultural dimension as part of management. They have defined sacred sites to assist in their conservation.

Bolivia also has a cultural monitoring plan that allows it to identify or monitor biodiversity protection areas. They have a national park management committee that use
the indigenous peoples’ traditional knowledge to identify PIACI.

Ecuador also uses traditional knowledge to manage territories; it takes into consideration indigenous peoples’ lifestyles, especially in the management of biodiversity, forms of settlement, use of traditional knowledge for demarcation and internal use of resources, inter alia.

The document contains a series of guidelines for governments to promote the exchange of traditional knowledge among indigenous communities in border areas, considering the local, regional and international regulatory framework on these topics and promoting the use of traditional knowledge to improve territorial management and even to help protect isolated indigenous peoples and indigenous peoples in initial contact. The guidelines also seek to favor and support exchanges of traditional knowledge among indigenous peoples and communities, considering the organizations that represent them for preservation of biodiversity and territorial management in border areas that at the same time ensure the protection of PIACI, since these exchanges are part of these peoples’ customs and traditions.

The following principles should be considered when exchanging traditional knowledge:

1. **Confidentiality**: The participants in formal exchanges of traditional knowledge are under the obligation to protect the confidential nature of any information provided during the meetings.

2. **Equity**: Participants must apply the same principles of justice for all during formal and informal exchanges (International Public Law).

3. **Respect of sovereignty**: ACTO Member Countries must respect the sovereign rights of States to exploit their own resources when implementing their own environmental policy and the obligation to ensure that activities that are carried out within their jurisdiction or under their control do not harm the environment of other States or areas outside any national jurisdiction, in accordance with the Charter of the United Nations and the principles of international law (Article 3, Principle. Convention on Biological Diversity, 1992).

4. **Respect of norms**: Participants must respect the legal provisions or set of legal norms of other ACTO Member Countries, particularly the States’ constitution, which is the supreme norm, as well as laws and norms emanating from the legislature (in its different types and classes).

5. **Good faith**: Good faith is a general legal principle, which consists of a mental state of honesty, of conviction regarding the truth or accuracy of a matter, fact or opinion, property deed or proper conduct. It requires upright or honest behavior in relation to the interested parties to an act, contract or process. It also places the public good above the private good and indicates that public causes will be favored over those of rulers or private sectors. The participants will comply in good faith with the obligations they have acquired pursuant to the Charter of the United Nations (article 2.2).


7. **Free, prior and informed consent**: This is understood as a “continuous process for establishing mutually beneficial agreements among the users of traditional knowledge and indigenous peoples and local communities to promote trust, good relations, mutual understanding, intercultural spaces and exchanges of knowledge and promote the creation of new knowledge and reconciliation. It must include full and effective participation by indigenous peoples and local communities, which covers, inter alia, customary law and community protocols of indigenous peoples and local communities”. (Report of the Special Intersessional Open-Ended Working Group on Article 8 j) and related provisions of the convention on biological diversity at its ninth session. UNEP/CBD/WG8J/9/6.

With respect to the characteristics of the exchange of traditional knowledge, it establishes that:

1. The guidelines for exchanging traditional knowledge in border regions are voluntary in nature and their purpose is to guide ACTO Member Countries and indigenous peoples in conducting these processes.

2. They involve all the actors involved in topics on traditional knowledge in ACTO Member Countries, de-
fined in section G, Participants, of these guidelines.

3. They do not interfere with the Parties’ rights and obligations under the Convention on Biological Diversity or other related instruments.

4. They do not substitute national laws on these matters.

5. They do not affect rights and obligations relative to the traditional knowledge of ACTO Member Countries’ indigenous peoples.

6. They promote cooperation among public institutions and representatives of indigenous peoples in addressing these topics.

7. Their application is practical.

8. They promote sustainable development in border areas.

The guidelines are based on the following aspects:

(a) The international and local legal context of indigenous peoples’ traditional knowledge (including indigenous peoples’ rights to maintain and preserve this knowledge and land rights).

(b) Public policies and programs implemented by the countries on these matters; and

(c) Indigenous peoples’ customary law.

Guidelines for Exchanging Traditional Knowledge

The following points must be considered in exchanges of traditional knowledge:

I. ORGANIZATION/ PLANNING OF MEETINGS:

Exchanges of traditional knowledge may be carried out under different modalities, such as dialogues, discussions, meetings, workshops, field visits and other modalities defined by ACTO Member Countries and indigenous peoples in border regions between these countries. The meetings may include:

(a) ACTO Member Countries’ public institutions involved in indigenous peoples’ issues, health, environment, culture, internal and external relations, border authorities and any other public institution considered by the countries. The functions of these institutions are to:

- Create and lead working groups to organize the meetings.
- Establish communication mechanisms among working groups.
- Participate in organizing the meetings.
- Identify associations representing indigenous peoples and communities and traditional leaders to invite them to take part in these exchanges.
- Contact local government institutions to gain first-hand knowledge regarding the status of biodiversity in border areas.

(b) Local, national and even regional indigenous associations representing indigenous peoples, which should contribute to defining, organizing, planning and conducting the meetings for traditional knowledge exchanges, including indigenous peoples and communities located in ACTO Member Countries’ border areas. These institutions’ functions are to:

- Liaise with indigenous peoples and communities to propose the meetings.
- Contact indigenous leaders for the meetings.
- Assist in organizing the meetings.
- Suggest procedures and conditions for the exchanges, that take into consideration the opinion of indigenous peoples’ leaders, children, adolescents, women, men and elderly people to ensure their active participation.
- Work jointly to promote these meetings.
- Decide where to hold holding meetings to exchange traditional knowledge in border areas.
- Define the topics to be discussed at informal and formal meetings as required.
- Propose guidelines for convening meetings on the
part of indigenous organizations.

- Request the support of local government authorities for the meetings.
- Propose the participation of interpreters for the meetings.
- Define the duration of the meetings.
- Request prior informed consent in cases where it is required.
- Consider other aspects deemed necessary for holding successful meetings.

(c) Other actors, such as public and private organizations and non-governmental organizations that work with indigenous peoples in border areas. These actors’ functions may include:

- Assistance in organizing meetings, after the indigenous peoples have agreed to their participation.
- Suggesting procedures to promote the meetings.
- Supporting non-confidential meetings in implementing work methodologies.
- Assistance in systematizing non-confidential meetings.

Regarding the logistics for the meetings, ACTO Member Countries should:

(a) Support indigenous organizations in the logistics for the meetings, such as: convening, transfers, lodging, materials required and others.

(b) Secure funding for the meetings.

(c) Discuss the incorporation of group techniques that favor the exchange of traditional knowledge.

(d) Take steps to raise awareness regarding the importance of the role of traditional knowledge and preservation of biodiversity.

(e) Disseminate these guidelines at meetings.

(f) Receive support from thematic groups created in advance. Engage translators to improve discussion between ACTO Member Countries and indigenous peoples.

Procedures for the meetings:

(a) Working groups must be formed. These should:

- Be in permanent contact with the local authorities in border regions to learn about the needs, problems and requirements for biodiversity management and territorial management in these areas.
- Request information from the local authorities on the problems of border areas with respect to biodiversity management.
- Ask the local authorities for suggestions on how to incorporate different indigenous associations from border areas in the meetings.
- Investigate the social organization of indigenous peoples that might participate in the meetings, the national or regional organizations or associations that represent them.
- Inquire regarding indigenous peoples’ situation, needs, interests and leaders, inter alia.
- Contact organizations and associations representing indigenous peoples in ACTO Member Countries that share borders.
- Ensure the participation of representatives of indigenous women at the meetings, considering the role they play in the conservation and sustainable use of biological diversity and the transmission of traditional knowledge.
- Engage interpreters of indigenous languages so that exchanges can be conducted in their own languages, thus ensuring that participants can interact during the meetings.
- Involve institutions involved at borders in organizing the meetings.
- Review and consider the legal framework and public policies on these matters when organizing the meetings.
II. DEVELOPMENT OF THE MEETINGS

It is important for ACTO Member Countries to conduct the following activities prior to each meeting:

(a) Plan the meetings jointly with the other members of the working group.

(b) Raise awareness beforehand among representatives of public institutions participating in the meetings regarding the importance of indigenous peoples’ traditional knowledge for preserving biodiversity.

(c) Discuss the problems of biodiversity in the area and the importance of indigenous peoples’ participation in its protection with representatives of government institutions located in border areas.

(d) Enquire regarding the situation, needs and interests of indigenous peoples that might take part in the meeting.

(e) Involve and be in constant contact with government institutions located in border areas.

(f) Identify the organizations and representatives that must be contacted to organize the meetings.

(g) Involve indigenous peoples’ representatives in the entire process of organizing and conducting the meetings (organizations representing indigenous peoples, indigenous leaders).

(h) Conduct the relevant consultations with indigenous peoples prior to the meetings.

(i) It is important to consult with indigenous peoples regarding other actors’ participation in the meetings, especially universities, NGOs and others.

(j) ACTO Member Countries should encourage the inclusion of all indigenous actors at the meetings, including women’s perspective and their role in conservation of biodiversity and preservation of traditional knowledge.

(k) ACTO Member Countries should consider for the meetings the issue of gender equity as an essential tool for territorial management and sustainable development.

(l) Working groups, together with local authorities, indigenous associations and indigenous peoples, shall plan the meetings.

The initial phase of the meetings is very important for their success. During this phase it is very important for indigenous organizations to agree regarding the following points:

(a) The parameters for conducting the meetings.

(b) Define the guidelines for participation of government and other actors.

(c) Establish the topics to be discussed with respect to biodiversity preservation in border areas.

(d) With regard to topics related to the use of plants for medicinal or commercial purposes, these should not be the object of “formal” exchanges at this type of meetings, since there is an international and local regulatory framework on traditional knowledge associated with genetic resources.

ACTO Member Countries shall:

(a) Take into consideration the suggestions of indigenous organizations for development of the meeting.

(b) Support holding the meetings.

Regarding the actors’ participation at the meeting, ACTO Member Countries must:

(a) Support the proper conduct of meetings for sharing traditional knowledge among indigenous peoples.

(b) Promote the active participation of indigenous women during the meetings, since they play a crucial role in the conservation and sustainable utilization of biological diversity and the transmission of traditional knowledge.

(c) Promote active participation of elderly people in the discussions.

(d) Promote discussions with indigenous representatives on certain aspects of biodiversity preservation so they can incorporate their suggestions into policies for its preservation.
(e) Respect the confidentiality of traditional knowledge to be exchanged during the meetings.

(f) Inform indigenous peoples and other peoples on the progress achieved on the international and local regulatory framework on biodiversity issues and those related to indigenous participation.

(g) Exchange best practices in the management of biodiversity in border areas.

(h) Discuss different on-site conservation experiences of ecosystems and natural habitats as well as their maintenance and recovery.

(i) ACTO Member Countries should discuss the definition of mechanisms for consulting with indigenous peoples to understand their concerns regarding different extractive activities and the impact they may have on the environment and PIACI territories, incorporating traditional knowledge in environmental impact evaluations.

(j) Indigenous peoples shall establish relationships with government institutions and indigenous associations that consider confidentiality in the management of information and shared responsibility in developing common tasks.

Other actors:

(a) The participation of other actors such as universities and non-governmental organizations at the meetings may be considered as required by indigenous peoples and ACTO Member Countries.

(b) These actors’ role would be to support the conduct of such meetings.

(c) These actors should request indigenous peoples’ permission to attend the meetings.

(d) These actors should abide by the role they have been assigned.

(e) They may support systematization of meetings if required by indigenous organizations.

Tools that favor discussion and reflection on biodiversity preservation and land management might be used. These include:

- Social maps,
- Mapping of uses and strengths,
- Problem tree,
- Discussion groups,
- Impact evaluations,
- Others suggested by the participants.

It is important to share information during the meetings on:

(a) Policy instruments and indigenous participation in their territories, such as:
   1. Life plans,
   2. Management plans,
   3. Territorial management.

(b) Other important aspects for discussion:
   1. Knowledge of traditional lands,
   2. Management practices,
   3. Ecosystem restoration forms,
   4. Traditional harvesting practices for restoration.
   5. Selection of species for planting for land restoration.
   6. Selection of the site for planting for restoration.
   7. Management of invasive species.
   8. Association for restoration.
   9. Monitoring and evaluating restored ecosystems.
   10. Challenges, difficulties in the integration of traditional knowledge for ecological restoration of areas.

The discussions:

During the meetings, ACTO Member Countries should promote discussion of aspects such as:

(a) Use of methodologies for identifying PIA.

(b) Forms of registration of information on indications of the presence of PIACI for PIA identification and monitoring.
(c) Mechanisms for indigenous peoples’ participation in processes for identifying, monitoring and protecting PIA.

(d) Discussing with indigenous peoples the possibility of collaborating on measures for preventing and restricting the use of areas near PIA.

(e) Defining, jointly with indigenous organizations, mechanisms for them to contribute their traditional knowledge in drafting environmental conservation and development plans and implementing projects within indigenous territories.

(f) Indigenous organizations and ACTO Member Countries might discuss the different ways of identifying and monitoring PIAs, with special emphasis on the types of expeditions, flyovers and technologies used to identify them, such as: remote sensors, orthophotography, camera traps, radio communication, patrols and others, to promote joint work for their protection.

(g) Indigenous organizations should discuss specific aspects such as the following with ACTO Member Countries:

1. Practices followed in touring territories close to PIA.
2. Practices used to identify them.
4. Policy instruments and indigenous participation in areas near PIA, such as:
   i. Life plans,
   ii. Management plans,
   iii. Land management.

(b) Possibility of working jointly in border areas to preserve biodiversity.

**Dispute settlement:**

(a) Any conflict or dispute among the institutions or persons involved in these voluntary exchanges of traditional knowledge shall be settled by a three-member arbitral tribunal, one member designated by each of the parties involved and the third one by ACTO. The decision will be binding, which should be accepted beforehand.

(b) The language to be used by the arbitral tribunal should be agreed to by the indigenous peoples participating in the exchange, to ensure the linguistic rights of indigenous peoples.

(c) Indigenous peoples may exchange traditional knowledge among themselves with regard to biodiversity management to improve territorial management in border areas that contributes to preserving PIA, such as:

1. Biodiversity management in border areas.
2. Prohibitions, limitations, conflicts indigenous peoples have in managing biodiversity.
3. Crop planting methods in these areas.
4. Climate, wind and other factors associated to crop planting and ecosystem restoration.
5. Beliefs and myths related to good management of biodiversity.
6. Life plans developed by indigenous peoples, mechanisms and processes for drafting them; principles.
7. Traditional land tenure and territorial management systems.
8. Development of indigenous peoples’ life plans, which are collective planning tools.
9. Incorporation of criteria for preserving biodiversity based on their beliefs, perception of life, future and life plans.
10. Use of life plans as tools for managing and relating to external actors.
11. Tools that favor discussion and reflection on biodiversity preservation and territorial management in border areas may be used during the meetings.

**Field work:**

The meetings can promote visits and field work in border areas to identify PIAs and reconnoiter the area, among others.

The following guidelines are proposed in these cases:
(a) The issue of prior informed consent should be considered whenever applicable, depending on the type of field work.

(b) It is always advisable to seek permission from the authorities and representatives of indigenous peoples before conducting field work.

(c) Incorporate representatives of indigenous peoples in these tours.

(d) Invite these representatives to take part in surveillance and monitoring activities.

(e) Discuss with the authorities, indigenous leaders and/or representatives the different signs and indicators they deem important for identifying PIACI.

(f) Promote dialogue among indigenous peoples living along the borders for exchange of this knowledge.

(g) Promote the creation of on-site working groups with the participation of indigenous peoples that share borders.

(h) Consider the standards related to the issue of access to biodiversity and traditional knowledge whenever applicable.

(d) Proposals for preserving biodiversity.

(e) Systematization of the exchange process, considering the issue of confidentiality.

(f) Collaboration by indigenous peoples in proper biodiversity management.

(g) Ecosystem restoration plans.

(h) ACTO Member Countries may include indigenous peoples in environmental surveillance committees and involve them in collecting and analyzing the data obtained from surveillance.

(i) ACTO Member Countries may include representatives of the indigenous community in environmental evaluation groups.

(j) Indigenous peoples may consider the possibility of defining an agenda for collaboration among them in border areas for territorial management with PIACI presence and governmental participation.

The outcomes of the meetings:

The outcomes of the meetings will depend on the participants, the style of meetings and their development. Possible outcomes include:

(a) General or specific agreements among indigenous organizations to contribute to preserving biodiversity in border areas.

(b) Agreements among indigenous peoples and ACTO Member Countries to carry out plans, programs, visits and field work seeking to strengthen biodiversity in border areas.

(c) Active participation of indigenous organizations in designing ACTO Member Countries’ public policies for preserving biodiversity and managing the territories.

1. Drafting reports
   Reports should not contain details on the contents of confidential traditional knowledge that is exchanged; only on the outcomes of the meetings. Traditional knowledge should only be disclosed with the authorization of the communities involved.

2. Photographs, videos
   Indigenous authorization should be secured to take, reproduce and publish them, since intellectual property and image right issues are involved.

3. Taking samples of plants, animals, etc.
   These are regulated in the rules for access to the countries’ biological and genetic resources.

4. Taking blood samples from indigenous peoples without their consent.
III. ACTIONS AND AGENDAS FOR THE EXCHANGE

Actions:

(a) Confidentiality should be respected in traditional knowledge exchanges. The intention is not to disclose information that indigenous peoples consider of interest.

(b) ACTO Member Countries may establish formal and informal agreements among the countries to incorporate traditional knowledge in territorial management pursuant to the relevant legislations.

(c) Indigenous peoples would also establish formal and informal agreements among indigenous peoples to manage the territory pursuant to indigenous customary law.

(d) The agreements reached at the meetings may be confidential or not, depending on the criteria established by the indigenous peoples and governments.

(e) Use of traditional knowledge is subject to local and regional standards.

(f) Simple mechanisms should be established to incorporate indigenous peoples’ proposals and knowledge for territorial management, always considering the international, regional and local regulatory framework.

(g) Establish surveillance and control parameters in border areas to protect PIACI.

(h) Establish mechanisms to incorporate indigenous peoples in the protected areas where they live.

(i) All the actors involved should follow up the agreements reached, considering that the guidelines mentioned here are voluntary.

(j) Establish mechanisms to ensure that the results of monitoring and surveillance in border areas where PIA are present generate information that may be useful for designing public policies and indicators, among others.
STRATEGIC FRAMEWORK FOR PROTECTING
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ISOLATION AND INITIAL CONTACT

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Photo: Korubo isolated indigenous peoples' refuges