**Submission by Asia Indigenous Peoples Pact (AIPP) and its member organizations and networks in partial response to the ‘Call for inputs Report’ of the Special Rapporteur on the Rights of Indigenous Peoples to the General Assembly**

**Impact of COVID-19 on Indigenous Peoples in Asia**

There are approximately 411 million Indigenous Peoples (IPs) living across Asia who are confronted with an array of vulnerabilities in the face of COVID-19.[[1]](#footnote-1) The Asia Indigenous Peoples Pact (AIPP) is closely monitoring the impacts of COVID-19 on Indigenous communities across its 14 member countries through continuous reporting and communications with partners on the ground.

AIPP, together with its member and partner organizations, takes this opportunity to make the following submission to the new Special Rapporteur on the Rights of Indigenous Peoples to the General Assembly (UNSRIP), José Francisco Cali Tzay, in support of their report on the impact of COVID-19 on IPs and resolution 42/20. This submission is based on information provided to AIPP through collaborative research across 13 member countries[[2]](#footnote-2) and 39 member organisations and network partners [Annex 1].

COVID-19 poses severe health risks for IPs while being a “threat multiplier” that compounds the effects of systemic and daily acts of discrimination on IPs fundamental human rights and freedoms. AIPP emphasises that the impacts of COVID-19 extend beyond the infectious disease. Subversive structural violence - such as social marginalization, restricting access to natural resources, and a lack of political consideration - contribute towards the life-threatening risks for entire Indigenous communities in Asia, as across the world. All of these impacts disproportionately after Indigenous Women, Persons with Disability, and the elderly and youth groups.

**Limited Opportunities to shape national COVID-19 responses**

At this moment, AIPP is unaware of the government of any member country actively providing the opportunity to allow AIPP’s members to shape COVID-19 related action plans, either through dedicated national agencies, consultations or consent processes. For one, India’s Ministry of Tribal Affairs has yet to release any plan or provision directed at minimising the impacts of COVID-19 on the countries Scheduled Tribes. Calls for the inclusion of IPs within decision making platforms have been bottom-up, supported by organisations as opposed to the government and its relevant tribal or Indigenous agencies actively seeking IPs participation. Though AIPP is aware of some of the larger, national, community organisations liaising with governments, we are yet to observe governments actively seeking the advice, consultation or consent with communities regarding policies that could impact their ways of life.

This is not to say there are no policies directed at IPs. There are reports of the government of Nepal giving special attention to the country's last Nomadic peoples, providing Personal Protective Equipment (PPE) and carrying out COVID-19 tests.[[3]](#footnote-3) However, some of Nepal’s most marginalized Indigenous communities - such as the Kusunda, Bankariya, Raute, Surel, Hayu, Raji, Kisan, Lepcha, Meche and Kusbadiya – are not receiving COVID-linked relief.[[4]](#footnote-4) Without the effective participation of IPs governmental strategies risk detrimentally impacting vulnerable communities and losing irreplaceable Indigenous Knowledge essential for ecosystem restoration and climate mitigating strategies.

**The Increased Risks of Indigenous Peoples**

IPs face a multitude of risks the majority of which are amplified by the systematic undermining of their right to life and the full enjoyment of a healthy environment. These violations must be seen in conjuncture with their historical exclusion within national strategies of their respective nation states. Across AIPP’s member countries the remoteness of IPs and an associated lack of access to medical services and supplies compound the health risks created by COVID-19. There is also an overall lack of access to basic services (health, sanitation, clean drinking water), a lack of access to adequate COVID-19 specific information in culturally appropriate means (especially for Indigenous Persons with Disabilities), high incidences of poverty and illiteracy, and precarious socio-economic conditions all of which are aggravated by restrictions on movement and livelihood generating activities.[[5]](#footnote-5) Within a medical context, COVID-19 also drains supplies and concentrates administrative attention in such a way that other health issues and contagious diseases are not adequately provided for.[[6]](#footnote-6)

Due to high incidences of poverty in many IPs communities across the region there is a risk that socioeconomic stresses may lead IPs communities to fall prey to loan sharking or extreme forms of debt bondage.[[7]](#footnote-7) These financial strains could consequently pave the way for coerced forms of land appropriation. FONIN, in Nepal, has shared such instances with AIPP while other members - such as the Inter State Adivasi Women’s Network, India - has raised this as a serious concern that will disproportionately impact Indigenous Women (IW). In Cambodia, debt bondage due to microfinance loans - which already hindered communities pre-COVID - have been made worse due to the loss of income in communities.[[8]](#footnote-8) Members are reporting that IPs communities are facing the choice to risk financially crippling fines for breaking curfews or the failing of their harvests, losing potential incomes from cash crops bought with the assistance of government loans.[[9]](#footnote-9)

Regardless of their historical marginalization, IPs throughout AIPP’s member countries have enacted their own protocols of quarantine, self-isolation, and community lockdown to protect themselves against the virus. In Indonesia, communities have built “transit houses” for returning migrant workers to quarantine.[[10]](#footnote-10) Indigenous Peoples Organisations (IPOs) - such as KATRIBU, Tebtebba, AMAN, and a multitude of others - have created strong solidarity networks incorporating nuanced cultural dynamics in ways governments have not matched. In Nepal, National Indigenous Disabled Women Association-Nepal (NIDWAN) has prioritised Indigenous Persons with Disability, women and vulnerable communities. AIPP is observing strategic responses based on need and equity as being commonplace within IPOs in our member organisations.

Racism, racial profiling, discrimination, and racially motivated attacks are on the rise across the region. The most extreme incidents reported to AIPP from partners stem from peninsular India, where IPs from the Northeast regions of the country have been denied basic services, entry to essential services and physically and verbally abused for their appearance. [[11]](#footnote-11) This deeply systemic issue, in India as across the world, is life threatening in circumstances where IPs can be denied basic medical assistance solely on their ethnicity and appearance.[[12]](#footnote-12)

IPs’ efforts to fight COVID-19 and create supportive networks are severely hindered in the face of Armed conflict. The continuation of armed conflict near, or in, traditional Indigenous Territories poses one of the greatest risks to the integrity and lives of IPs’ communities.

**Armed Conflict**

AIPP wishes to draw particular attention to armed conflict in Bangladesh, India, Myanmar, and the Philippines. Despite the UN Secretary-General António Guterres “calling for an immediate global ceasefire in all corners of the world”, violent conflict continues, exacerbating already severe and desperate circumstances for IPs.

Of grave concern is Myanmar, which has the highest population of Internally Displaced Persons (IDPs) across AIPP’s member countries. The Kachin, Northern Shan, Kayah and Rakhine States have the largest populations of IDPs. The latest data, from March 27th, states that there are over 312,000 IDPs across Myanmar.[[13]](#footnote-13) Internally displaced communities are some of the most vulnerable communities in the world, living in overcrowded camps, with little access to water, poor sanitation and a lack of health services, further compounded due to the logistical difficulties imposed on humanitarian assistance during these times.[[14]](#footnote-14)

On the 9th of May, the Myanmar government armed Forces (Tatmadaw) announced it would suspend military operations until the 31st of August 2020. However, the conflict-ridden Rakhine and Southern Chin States were excluded from this temporary ceasefire and conflict between the Arakan Army and Tatmadaw continues to displace people in the area.

AIPP has received numerous reports of military linked abuses from the Chittagong Hill Tracts (CHT) in Bangladesh, regarding the arbitrary detention and harassment of 34 individuals, the physical torture of 17 of these, the killing of three Jhum cultivators and the death of a pregnant Jumma Indigenous woman who was prevented from reaching the hospital (by boat) on time to deliver her child.[[15]](#footnote-15)

Aside from the violence, harassment, and intimidation associated with armed conflict, the presence of armed personnel in the Indigenous regions prevents livelihood practices and the harvesting of food produce. In India, the Indian Armed Forces have gone against ceasefire agreements between Naga armed resistance groups, as well as using shifting cultivation fields for their encampments.[[16]](#footnote-16)

In the Philippines, Indigenous Rights defenders continue to be red tagged, threatened and harassed by security forces preventing vital aid and support programs from reaching vulnerable Indigenous communities in the midst of armed conflict. The situation in the Philippines is escalating, becoming only more desperate. In Mindanao, Gloria Tomalon, an Indigenous woman leader, was arrested and detained over trumped-up charges and similarly on April 23, another case was led against Lumad human rights defenders including Renalyn Tejero and Gary Payac of ALCADEV.[[17]](#footnote-17) Instances such as these are not isolated events, the human rights situation in the Philippines requires urgent attention. AIPP draws attention to its members and partners’ work throughout the region for more information.[[18]](#footnote-18)

**Indigenous Initiatives and Information sharing**

AIPP has observed that IPs across Bangladesh, Cambodia, India, Indonesia, Malaysia, Myanmar, Nepal, the Philippines, and Thailand have all enacted varying forms of lockdowns in their communities. This traditional strategy[[19]](#footnote-19) has been used in the past to prevent the spread of other diseases such as Cholera and Measles and include a variety of activities including physically preventing outsiders from entering community areas via roadblocks, gates and quarantining returning migrant workers.

The Nepali Tharu, Thakali, Newar, Santhal, Gurung, Magar and other IPs’ communities are using traditional Indigenous institutions to govern communities, disseminate information, enforce effective lockdowns and maintain communal harmony.[[20]](#footnote-20) These traditional decision-making processes have gained national media attention due to their effectiveness.[[21]](#footnote-21)

We are observing the resourcefulness and strength of Indigenous communities and their ability to organise and unite in times of distress through the forming of strong solidarity networks. IPs have been proactive, collaborative and reactive to the COVID-19 pandemic, activating strategies and national networks used to respond to natural disasters [Annex 2].

Central to affective action against COVID-19 and its associated risks is the free dissemination of accurate and culturally appropriate information. The importance of sharing accurate information is key, and even where countries have provided ample information - such as India - information is often only accessible online and not inclusive of the linguistic diversity represented across IPs. Due to a lack of access to the internet, particularly for remote Indigenous communities, alternative strategies of information dissemination have been utilised, such as visits by volunteers, leaflets, radio announcements and audio-visual resources all of which have been catered to the needs of the most isolated. Indigenous TV and the Indigenous Community Network in Nepal have transmitted COVID-19 health announcements in 17 languages.[[22]](#footnote-22)

IPs’ strategies have had varying degrees of success, often linked to government responses which have all too often detrimentally impacted IPs as opposed to generating safety, increasing security, and improving wellbeing.

**States of Emergency**

The success of pandemic-fighting initiatives can be directly linked to secured rights over lands. In India, there are several examples where Gram Sabhas, with secured community forest resource (CFR) rights under the Forest Rights Act (FRA), have used revenues generated from collecting Non-Timber Forest Products (NTFPs) to invest in distributing essential food supplies to all village households.[[23]](#footnote-23) In Malaysia, forest-fringe communities and semi-nomadic communities, such as the Jahai and Bateq, have been able to meet their subsistence needs better than settled communities who depend on incomes generated through cash crops. Forest-fringe and the semi-nomadic communities were also able to isolate in the forest while using the abundant resources in healthy forests to support their needs. [[24]](#footnote-24)

In Indonesia, Perempuan AMAN, has reported how the varying degrees of land rights recognition over customary territories - secured tenure, granted concession and no rights - has influenced communities’ ability to respond to the risks associated with COVID-19 [Annex 3].

As demonstrated in the cases of Malaysia, Indonesia and Thailand [Annex 4], community initiatives are undermined when the rights to their traditional lands are either poorly enforced or not recognised. In the Philippines, Duterte’s government has been more concerned in distributing anti-communist propaganda, red tagging Indigenous leaders and activists and targeting Indigenous run humanitarian initiatives rather than providing necessary and adequate aid and food supplies[[25]](#footnote-25). The Philippine government has also used COVID to continue grabbing the lands of IPs,[[26]](#footnote-26) removing protests and passing anti people’s laws [Annex 5]. BIWN has documented several cases of threats, intimidation, and harassment from security forces of their women leaders, preventing them from providing aid, assistance or collecting food produce from swidden fields.[[27]](#footnote-27)

The Secretary of the Department of Agriculture announced that the government will utilize “*idle”* ancestral lands as part of the Plant Plant Plant program to “to enhance food security concerns amidst the country's coronavirus disease (COVID-19) outbreak”.[[28]](#footnote-28)

These incidents are not isolated, governments across Asia have used COVID-19 as a cover to pass regressive legislations with potentially devastating impacts on IPs.[[29]](#footnote-29) One key example is the Omnibus Law,[[30]](#footnote-30) in Indonesia, which would see essential protections of IPs and their territories rolled back in favour of an extractive agenda.[[31]](#footnote-31) In India, the Ministry of Environment, Forest and Climate Change (MoEFCC) issued an advisory instructing states and union territories to restrict human wildlife interactions, potentially impacting up to 4 million IPs living on the periphery of protected areas. Simultaneously, the MoEFCC amended the Environmental Impact Assessment (2006) rules, exempting several project categories from requiring environmental clearance and diluting the provisions for obtaining written consent from the Gram Sabha as required under the FRA.[[32]](#footnote-32)

AIPP has received numerous reports of evictions and violence by forest officials during India’s government-imposed lockdown. One case, on the 24th of April in the Kalahandi village of Odisha, saw 32 Kondh adivasi villages violently evicted from their lands in direct violation of their rights under the FRA as well as under the Scheduled Caste and Scheduled Tribes Atrocity Act.[[33]](#footnote-33) Several huts were set ablaze by the forest officials.[[34]](#footnote-34) India’s MoEFCC has encouraged the separation of tribal peoples from essential livelihood generating biodiversity areas while fast tracking development projects within them. This is particularly prevalent in India’s agenda for coal extraction.[[35]](#footnote-35)

In the Bandarban Hill District of CHT, Bangladesh, Indigenous Jumma villagers had 5,000 acres of rubber plantations burnt by land grabbers with political affiliations.[[36]](#footnote-36) The illegal occupation of community Jhum lands in the CHT has accelerated amid the COVID-19 crisis with an additional 4.5 thousand acres being grabbed in April 2020.[[37]](#footnote-37)

In Cambodia, local partners are providing worrying reports of an increase in illegal logging and threats to Indigenous Human Rights Defenders. AIPP’s Cambodia partners have reported that the lockdowns have provided cover for illegal logging and land encroachments which themselves have links to powerful political figures. Similar circumstances have been observed by members in Nepal, where an increase in poaching and illegal timber extraction are taking place within conservation zones.[[38]](#footnote-38) AIPP member CEMSOJ, has highlighted how protected areas have themselves exacerbated the threats facing IP communities pre-COVID, made worse by the COVID-19 pandemic, and wishes to draw attention to the need to include communities in conservation efforts henceforth.[[39]](#footnote-39)

In Nepal, large development and infrastructure projects have been allowed to continue.[[40]](#footnote-40) AIPP member LAHURNIP has reported violent confrontations between IPs attempting to lockdown and protect their communities and transportation companies, providing building materials to a controversial hydropower project, breaking through their barricades.[[41]](#footnote-41) Some regions of Nepal had food shortages last year due to drought and face a prolonged food shortage crisis due to the impacts of COVID-19. The pandemic has occurred during the planting season and lockdown measures have prohibited working on the fields. The Rai Indigenous communities of Khotang, Bhojpur and Okhaldhunga are facing a food security problem that is compounded by closed food and seed markets, the inability to farm, and insufficient aid.

**Economic Impact of Lockdowns on Migrants**

A large portion of IPs work in the informal sectors as daily wage earners, across a variety of sectors in both urban and rural spaces. As seen across the region, Indigenous migrant workers were often left without any forms of support, often forced to walk home, facing harassment, hunger, death and beatings by police. Migrants who were working across borders, such as India/Nepal and Thailand/Myanmar, have found themselves stranded in border regions in destitute conditions with limited access to basic amenities. These “quarantines” are crammed and there are reports of people fleeing the conditions and even committing suicide.[[42]](#footnote-42) With rising cases of COVID-19 in Nepal and India, AIPP is concerned with the indiscriminate spread of COVID-19 in migrant populations.

Community efforts are already strained due to a lack of governmental support and the impacts of lockdowns and travel. These strains are facing increased stresses due to reverse migration to Indigenous areas from urban spaces. Cases of COVID-19 have rapidly increased in the month of June, highlighting the need for urgent action.

As previously mentioned, access to food markets, fields, and other services have drastically impacted the well-being of Indigenous communities. Large portions of populations have lost their jobs, livelihoods and incomes and are unable to travel to nearby villages, hospitals or receive basic amenities and aid packages. However, across many member states Indigenous Women (IW) have led the way in proactive strategies directed at supporting their communities, neighbours and families. Women have weaved masks, formed collectives to distribute assistance packages to vulnerable peoples and, where possible, continue to harvest medicinal plants and NTFPs to provide for their families. However, there were cases of women being beaten by police while collecting Mahua flowers from their trees and collecting firewood.

**Indigenous Women, Children, Elders and Indigenous Persons with Disabilities**

IW, Children and Indigenous Peoples with Disabilities are some of the most marginalised and vulnerable communities in the world. COVID-19 has exacerbated profoundly discriminatory dynamics which have led to the almost complete disregard for gendered processes and the vulnerabilities of disabled peoples.

Women and Persons with Disabilities have faced increased marginalisation in the face of COVID-19, with reports demonstrating systematic exclusion from national strategies, a lack of basic medical equipment (such as sanitary pads or prescription medications), and an increase in gender and sexual violence. Between March and May, 2020, AIPP received a total of 12 cases of violence against IW in Bangladesh.

Statelessness, or a lack of government documentation, is common amongst the most isolated and marginalised of Indigenous communities. In the state of Mizoram, Northeast India, the National Commission for Women (NCW) issued notice to the Mizoram Chief Secretary seeking probe into a district hospital’s decision to make it “mandatory for every woman delivering a child” to produce their voter ID. In the Indian state of Manipur, as many as half of the 50,000 persons with disabilities do not possess disability registration and therefore cannot access benefits.[[43]](#footnote-43)

Bureaucratic barriers have prevented Indigenous persons with disabilities from being included in relief efforts. They are troubling as restricting access to hospitals is a death sentence for IW and persons with disabilities. Nepal is reporting a 200% increase in maternal mortality during lockdown.[[44]](#footnote-44)

In Nepal there are 1.3 million Indigenous Peoples with Disability,[[45]](#footnote-45) almost all of whom have restricted access to essential medical infrastructures during COVID-19.[[46]](#footnote-46) This is observed across the region,[[47]](#footnote-47) where Indigenous Persons with Disabilities have been further marginalised, excluded from protocols, without alternatives to provide and support their access to essential life sustaining medical services being provided.

AIPP partner NIDWAN[[48]](#footnote-48) has submitted a more detailed report to several UN Experts, including the UNSRIP, which further highlights the varying mechanisms and dynamics disproportionately impacts on Persons with Disabilities in Nepal and other member countries.

AIPP also wishes to draw attention to how Indigenous children are being excluded from educational programs which move online during COVID-19, especially in Indigenous communities which have limited internet access or internet that is not homogeneously available.

This unprecedented situation has made IPs’ children vulnerable to missing out on their educational programs. As many governments have rolled out online educational programs, Indigenous children are being left behind. Due to high incidences of poverty, poor access to internet and the physical remoteness of IP communities, Indigenous children are being excluded from education in countries that guarantee universal public education. These dynamics impact Indigenous children with disabilities the most, where they are no longer able to receive essential assistance and support.

**Recommendations:**

1. States shall respond to the call of the UN Secretary General and cease all military campaigns across the globe to focus on the fight against the COVID-19 pandemic.
2. States shall create culturally appropriate COVID-19 response cells, with designated funds at the local level, that ensure appropriate guidelines and instructions are issued to provincial/state and local authorities on measures to be taken for IPs in relation to the pandemic.
3. State and non-state health institutions must devise an intercultural approach that includes Indigenous health systems and care takers, to create awareness raising materials; trainings and provide essential equipment and hygiene kits to contain the virus.
4. States shall localize COVID-19 care centers and quarantine strategies, aided by the inclusion of appropriately supplied community healers and nurses, with special attention given to areas with high rate of reverse migration, persons with disabilities, women and the elderly. These strategies should be scalable to provide for non-COVID related illnesses and accessible to even the most remote communities.
5. Governments shall stop mining operations, diverting forestlands for large-scale development projects, rolling back of IPs rights and environmental safeguards, and eviction drives of communities from protected areas, etc. without the FPIC of Indigenous Peoples in their traditional territories.
6. States shall take urgent and immediate action to strengthen livelihoods through the formalization of rights-based strategies for non-timber forest product (NTFP) use, community forestry initiatives, and biodiversity protection. Financial and logistical support should be provided directly to communities, particularly Indigenous Women, to help promote sustainable livelihoods, management practices, Indigeous led biodiversity protection programs, and traditional seed banking to ensure beneficial socio-economic transformative change during and in preparation of a post-COVID world.
7. Considering the very real possibility of repeating COVID-19 outbreaks, it is essential to introduce culturally appropriate and decentralized education systems that are established within community governance systems. Local level education systems shall have facilities for both online and classroom-based educational activities, including facilities that incorporate the specific needs of persons with disabilities.
8. States shall ensure that Indigenous Peoples, particularly women and persons with disabilities are effectively engaged in decision-making related to COVID-19, and the SDGs, in dealing with the health and socio-economic effects of the virus, recognizing that they are disproportionately affected by the pandemic and adverse development interventions.
9. Nation states must expand IP specific data - disaggregation by ethnicity, gender, disability, and age - to monitor and assess of the impact of all interventions in partnership with Indigenous Peoples.

**Annex 1**:

Member and partner organizations and networks who have contributed to the creation of this document:

Adivasi Navjeewan Gathan Navjyoti Agua (ANGNA), Adivasi Mahila Maha Sangh (AMMS), Adivasi Women’s Network (AWN), Bai Indigenous Women’s Network in the Philippines (BIWN), Bangladesh Indigenous Peoples Forum (BIPF), Cambodia Indigenous Peoples Association (CIPA), Cambodia Indigenous Peoples Organization (CIPO), Cambodia Indigenous Womens’ Working Group (CIWWG), Center for Orang Asli Concerns (COAC), Community Empowerment and Social Justice Network (CEMSOJ), Cordillera Disaster Response & Development Services (CorDisRDS), Cordillera Peoples Alliance (CPA), CESD of Chiang Mai University, Indigenous Peoples Human Rights Defenders (IPHRDs), Indigenous Nationalities Women Youth Network (INYWN), Indigenous Women Human Rights Defenders (IWHRDs), Indigenous Women Legal Awareness Group (INWOLAG), Indigenous Voice in Asia Network (IVAN), Inter State Adivasi Women’s Network (ISAWN), Indigenous Peoples Foundation for Education and Environment (IPF), Inter Mountain Peoples Education and Culture in Thailand Association (IMPECT), Jaringan Orang Asal SeMalaysia (JOAS), Jatiya Adivasi Parishad (JAP), Katribu National alliance of Indigenous Peoples in the Philippines, Kapaeeng foundation, Lawyers' Association for Human Rights of Nepalese Indigenous Peoples (LAHURNIP), Metta Development Foundation, Nepal Federation of Indigenous Nationalities (NEFIN), National Indigenous Disabled Women Association Nepal (NIDWAN), Network of Indigenous Peoples in Thailand (NIPT), National Indigenous Women’s Federation (NIWF), National Indigenous Women’s Forum (NIWF), Nepal Indigenous Disabled Association (NIDA), NGO-Federation of Nepalese Indigenous Nationalities (NGO-FONIN), PACOS Trust, Perhimpunan Pembela Masyarakat Adat Nusantara (Perempuan AMAN), Promotion of Indigenous and Nature Together (POINT), Sundarban Adivasi Munda Sangastha (SAMS), Trinamul Unnayan Sangstha (TUS), Tebtebba Foundation, and others which wish to remain anonymous.

**Annex 2:**

In Thailand, a joint venture between AIPP, the Indigenous Media Network (IMN), and others have:

* Improved effective communication among communities with greater reliability
* Resource mobilization for relief support (food, hygiene kits and other needs)
* Pooling of expertise to provide trainings to community volunteers/workers (with multiplier effect) on health care levelling the curve of COVID-19
* Raised and amplified the voice of Indigenous communities that are facing multiple challenges and issues such as racism and measles outbreak

In the Philippines, partners formed a Serve the People Brigade - Disaster Response Network (STPB) which is carrying out community support activities such as:

* Distribution of food relief and Vitamin C in the Cordillera Region
* Produce and distribute PPE in partnership with the Philippines Nurses Association-Bagguio-Benguet Chapter
* Mobilizing support and relief and awareness raising

**Annex 3:**

Perempuan AMAN report that:  
Communities with secured tenure rights in remote areas:

- Live by subsistence or semi-subsistence,

- Have sufficient food reserves for a year,

- Have a lack of access to health services, however, respond by using traditional medicines,

- Are freely and independently able to apply quarantines and lockdowns,

- Are producing masks

- Are using Traditional Knowledge to preserve food.

Communities who are granted concessions within customary territories:

- Have sufficient food reserves for three months,

- Cash needs have increased due to increasing prices.

- Though there are community lockdowns, neighboring companies continue to conduct activities,

- Require monetary support from the government and food aid from other communities.

Communities who lost their customary territory;

- Depended on traders and availability of cash.

- Most of the community are laborers, civil servants or in other informal jobs and require support

- Unemployment and crime rates have increased.

**Annex 4:**

AIPP members CMLN, IMPECT and the community of Ban Mae Jok, have demonstrated the resiliency and autonomy of Indigenous Peoples during lockdown due to the productivity of traditionally managed forested areas.[[49]](#footnote-49)

**Annex 5:**

The Philippines has advanced a militarized response to COVID. After imposing a state of emergency, Duterte’s government passed the Republic Act No. 11469, also known as the Bayanihan to Heal as One Act (Bayanihan Act), which has further centralized his executive decision-making power. The Bayanihan Act, in combination with the Republic Act No 11332 that implemented the Enhanced Community Quarantine (ECQ), which has facilitated the continued abuse of fundamental human rights of Indigenous Peoples across the country. As of May 21, 2020, there were 177,540 people accosted for “quarantine violations” including 52,535 detained. The passing of these laws comes alongside the “shoot to kill order” whereby Duterte gave direct orders to police and military to shoot dead “anyone who creates trouble.”

Examples of impacts of the Lockdown and government lead activities.

* Pampanga was under ECQ after 2 confirmed cases of COVID-19 were documented. Close to 1000 families in Aeta villages of Nabuclod, Mawacat, and Camachile are seriously affected by the lockdown. Due to restrictions they are unable to go to hill farms to gather root crops and *mamuso* (gather wild banana blossom).
* In Mayantoc, Tarlac, 27 Aeta families in the villagers proclaimed that “[they] will die of hunger, not with Covid-19” *- mamamatay kami sa guton, hindi sa Covid-19* - after they were prohibited from producing charcoals, their primary source of income.
* In the Remontado Village of Sitio Nayon, Barangay Sta. Ines, Tanay, Rizal, villagers are barred by the state security forces from going to forest areas to gather *ubag* (wild root crop).
* People are running out of rice and food in the seaside community of Dumagat in Barangay Magsikap, General Nakar, Quezon. Most villagers rely on catching small fish and sihi (seashell) for food. In Barangay Lubayat, Real, Quezon, indigenous communities face a similar plight.
* Many families are unable to meet their daily nutrition needs and in many cases resulted to food insecurity and hunger.

1. Luithui- Erni, S., 2019. *Status Of Indigenous Peoples' Lands, Territories And Resources In Asia*. Chiang Mai: AIPP Printing Press Co., Ltd, p.6. [online] <https://aippnet.org/wp-content/uploads/2020/01/Status-of-Indigenous-Peoples%E2%80%99-lands-territories-and-resources-in-Asia_website.pdf> [↑](#footnote-ref-1)
2. 13 countries: Bangladesh, Cambodia, India, Indonesia, Japan, Laos DRP, Malaysia, Myanmar, Nepal, Philippines, Timor-Leste, Thailand, Vietnam [↑](#footnote-ref-2)
3. See: [www.dobatonews.com/article/1/914](http://www.dobatonews.com/article/1/914) & <https://nepalnews.com/news/nation/20980-2020-04-02-11-57-03> [↑](#footnote-ref-3)
4. See: <https://www.indigenousvoice.com/en/local-governments-deny-covid-19-relief-to-vulnerable-indigenous-peoples.html>,<https://www.indigenousvoice.com/997.html>,<https://www.indigenousvoice.com/995.html> [↑](#footnote-ref-4)
5. KATRIBU Highlight how the 15 million Indigenous Peoples in the Philippines are suffering disproportionately during the country-wide militaristic lockdown enforced by state authorities. The Aeta, Dumagat and Lumad communities, among other IPs in the country, have reported severe food shortages and a chronic lack of access to basic goods. This has been compounded by the systematic government negligence in humanitarian and medicinal services. In the Philippines, as in many AIPP member countries, IPs live in remote areas. The majority are subsistence farmers, with strict lockdown measures limiting a community’s access to markets, forests, fields, neighbouring communities and a wide array of natural resources. [↑](#footnote-ref-5)
6. Saha, K., 2020. *Measles Outbreak In Chittagong Hill Tracts: Urge For Immediate Steps | The Asian Age Online, Bangladesh*. [online] The Asian Age. Available at: <https://dailyasianage.com/news/226721/measles-outbreak-in-chittagong-hill-tracts-urge-for-immediate-steps> [Accessed 19 June 2020]. [↑](#footnote-ref-6)
7. A concern raised by FONIN, ASW, ISASW [↑](#footnote-ref-7)
8. Raised by CIWWG and CIPA [↑](#footnote-ref-8)
9. Perempuan AMAN [↑](#footnote-ref-9)
10. Ibid. [↑](#footnote-ref-10)
11. Raised by NPMHR [↑](#footnote-ref-11)
12. Raised by ISAWN [↑](#footnote-ref-12)
13. United Nations High Commissioner for Refugees, 2020. *UNHCR Concerned At Mounting Civilian Casualties And Displacement In Western Myanmar*. [online] UNHCR. Available at: <https://www.unhcr.org/news/briefing/2020/3/5e7dbca44/unhcr-concerned-mounting-civilian-casualties-displacement-western-myanmar.html> [Accessed 19 June 2020]. [↑](#footnote-ref-13)
14. In Myanmar, COVID-linked humanitarian work by the WHO, carrying samples to be tested for COVID, was bombed by armed forces resulting in the death of the driver. The continuation of armed conflict outs the lives of Indigenous peoples at profound risk during the COVID pandemic, cutting access to essential medical services. (<https://www.nst.com.my/world/world/2020/04/586433/un-vehicle-carrying-covid-19-samples-attacked-myanmars-rakhine>) [↑](#footnote-ref-14)
15. Hill Voice, 2020. *A Pregnant Jumma Woman Dies Due To Detention Of Army In Subalong | Hill Voice*. [online] Hillvoice.net. Available at: <https://hillvoice.net/a-pregnant-jumma-woman-dies-due-to-detention-of-army-in-subalong/> [Accessed 19 June 2020]. [↑](#footnote-ref-15)
16. Asia Indigenous Peoples Pact, 2020. *COVID-19 And Humanity: Human Rights In Peril*. [online] Chiang Mai: AIPP Printing Press Co., Ltd. Available at: <https://aippnet.org/covid-19-and-humanity-human-rights-in-peril/> [Accessed 19 June 2020]. [↑](#footnote-ref-16)
17. Weaponizing pandemic against Indigenous Peoples: Continuing Plunder and Rights Violations; and Initial Report on Indigenous Peoples Situation during the Covid-19 Pandemic, International Indigenous Peoples Movement on Self-determination and Liberation, May 2020 [↑](#footnote-ref-17)
18. Katribu National alliance of Indigenous Peoples in the Philippines, 2020. *Phil. Ips Amidst Covid-19 Pandemic: From North To South Indigenous Peoples Are Battling Against Discrimination, Militarization And Worsening Human Rights Situation*. Special Report. [online] KATRIBU. Available at: <https://aippnet.org/wp-content/uploads/2020/06/IPs-and-Covid-19_-Katribu-Special-Report.pdf> [Accessed 19 June 2020]. [↑](#footnote-ref-18)
19. In Thailand the Karen IPs call this practice “*Kroh Yee*”, while the Mro IPs from the CHT in Bangladesh call the practice “*Khasur*”. [↑](#footnote-ref-19)
20. See: <https://www.lahurnip.org/news-details/98.html> [↑](#footnote-ref-20)
21. See: <https://kirtionline.com/2020/05/2225/>;<https://kirtionline.com/2020/04/2045/>; <https://kirtionline.com/2020/04/2028/>; <https://kirtionline.com/2020/04/1992/>; and <https://kirtionline.com/2020/04/1971/> [↑](#footnote-ref-21)
22. Information provided by members CEMSOJ (PRABIN), NEFIN, and FONIN [↑](#footnote-ref-22)
23. (Asia Indigenous Peoples Pact, 2020) [↑](#footnote-ref-23)
24. Information provided by members JOAS, PACOS Trust and COAC [↑](#footnote-ref-24)
25. On April 9th, 2020, Easter Sunday, two Philippine army Helicopters air dropped leaflets in Sagada, Mt. Province, containing re-cycled anti-communist propaganda. On the 8th of May, a similar incident occurred in Zambales where two military helicopters, flying above Aeta communities in San Felipe, airdropped flyers and brochures with candies. The materials contained material defaming and red-tagging individuals. Note that, neither relief goods, PPE or information on how to deal with covid-19 were provided. [↑](#footnote-ref-25)
26. On April 6th, 2020, 100 Philippine National Police (PNP) personnel - in full battle gear - were reported escorting an OceanaGold vehicle transporting fuel into the controversial copper-gold mine in Brgy Didipio. PNP violently dispersed the People’s Barricade of indigenous Ifugao people in Bgy. Didipio Kasibu, Nueva Vizcaya, injuring three. [↑](#footnote-ref-26)
27. Punganay-Cagayan Valley Indigenous Peoples Alliance. (in Press). Human Rights Situation of Indigenous Peoples in Cagayan Valley (Region 2) Amidst COVID-19 Pandemic. [↑](#footnote-ref-27)
28. Quote by AIPP Executive Council member on the Plant Plant Plant Program: “ancestral lands are once again being targeted for investments in commercial agriculture. This plan poses threat to Indigenous communities on their ancestral domains for their sustenance. The threat posed by this plan over their ancestral lands is in addition to the existing threats posed by palm oil plantations, mining, and special economic zones, among other imposed development projects.” [↑](#footnote-ref-28)
29. AIPP has received several reports from multiple members and partners regarding governments changing the laws, Indonesia and the Philippines being particularly troubling cases. AMMS, AWN, and ISAWN flagged changes in the labour laws in the Indian States of Uttar Pradesh, Madhya Pradesh, Gujarat, Maharastra, Goa, Odisha which will have negative consequences on marginalized communities. [↑](#footnote-ref-29)
30. The Rancangan Undang-Undang Cipta Lapangan Kerja (Omnibus Law) [↑](#footnote-ref-30)
31. Information provided by Perempuan AMAN [↑](#footnote-ref-31)
32. Please see: <http://egazette.nic.in/WriteReadData/2020/218948.pdf> [↑](#footnote-ref-32)
33. Information provided by ISAWN [↑](#footnote-ref-33)
34. Kukreti, I., 2020. *COVID-19: Gujarat Forest Dept Officials Allegedly Torched Huts, Fields*. [online] Downtoearth.org.in. Available at: <https://www.downtoearth.org.in/news/environment/amp/covid-19-gujarat-forest-dept-officials-allegedly-torched-huts-fields-70426> [Accessed 19 June 2020]. [↑](#footnote-ref-34)
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37. The Unrepresented Nations and Peoples Organization, 2020. *UNPO: Coronavirus: Human Rights In CHT*. [online] Unpo.org. Available at: <https://unpo.org/article/21863> [Accessed 19 June 2020]. [↑](#footnote-ref-37)
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40. The Kathmandu-Tarai expressway has violated procurement guidelines by pushing the contract negotiations in three hours, rather than the required two weeks. It is being opposed by indigenous Newar communities south of Kathmandu. <https://cemsoj.wordpress.com/tag/fast-track-highway/> or <https://ejatlas.org/conflict/kathmandu-terai-madhesh-fast-track-road-project-nepal> [↑](#footnote-ref-40)
41. Highlighted by CEMSOJ, the Chinese financed and managed Nyadi hydropower project continues to be constructed in western Nepal. Pushing the project through, even during lock-down resulting in clashes and police suppression. <https://www.lahurnip.org/press-release-and-statement/73.html> [↑](#footnote-ref-41)
42. Information provided by the Adivasi Womens Network [↑](#footnote-ref-42)
43. There are several barriers to registration including a lack of information presented in culturally appropriate formats (such as in minority languages), a lack of proper infrastructure (roads) and lack of health centres where disability certificates can be obtained. [↑](#footnote-ref-43)
44. As cited in the ‘Report On Indigenous Women’s of Nepal on COVID 19’ submitted to the UNSRIP and prepared by AIPP members and partners NIWF, NIWF, INWOLAG, NIDWAN, INYWN [↑](#footnote-ref-44)
45. NIDWAN et.al (2018) The Rights of Indigenous Persons with Disabilities in Nepal, submitted to The Committee on the Rights of Persons with Disabilities 19th Session of CRPD find in <https://www.indigenouspeoples-sdg.org/index.php/english/all-resources/resource-materials2/reports-and-publications/75-indigenous-peoples> [↑](#footnote-ref-45)
46. Peoples with Chronic Diseases and severe types of disability require regular medical checkups, medical kits and clinical apparatus. For eg: Pushpa Lal Tamang from Nepal is a hemophilia patient and needs factor and plasma regularly to stop the bleeding. But the extended lock down has affected to have access to these services leading him to life threating situation. [↑](#footnote-ref-46)
47. In Indonesia, persons with disabilities from the Batubassi and Karaeng Bulu Indigenous Communities in South Sulawesi are unable to access personal protective equipment and other basic necessities, which is exacerbated for those living more remotely. [↑](#footnote-ref-47)
48. National Indigenous Disabled Women Association Nepal (NIDWAN) [↑](#footnote-ref-48)
49. Indigenous Media Network, 2020. *The Forest As Community Supermarket For Karen Indigenous Peoples In Thailand*. [online] โดย A IMN. Available at: <https://imnvoices.com/the-forest-as-community-supermarket-for-karen-indigenous-peoples-in-thailand/> [Accessed 19 June 2020]. [↑](#footnote-ref-49)