THE RUPUNUNI REPORT 2017

OBSERVATIONS ON THE SOCIAL AND ECONOMIC CHALLENGES OF INDIGENOUS COMMUNITIES IN REGION 9

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Compiled and edited by Anna Correia De Sá with the participation and help of:
- The Regional Democratic Council (RDC) for Region 9 (Upper Takutu-Upper Essequibo)
- Lethem Municipality Councillors
- Tosaos and Village Councillors as well as village leaders of indigenous communities visited

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EXECUTIVE SUMMARY

**GEPAN, Guyana 2017 - The Rupununi Report 2017** provides a comprehensive insight into the living conditions of indigenous peoples of Region 9 (Upper Takutu-Upper Essequibo).

It is the result of a consultative investigation conducted by the Guyana Empowered Peoples Action Network (GEPAN), in collaboration with the Region 9 Regional Democratic Council (RDC), village leaders and locally elected representatives, including Toshaos.

From November 8th – 18th, 2017, fifteen (15) villages and satellites were subject to outreaches aimed at assessing their developmental setbacks. These included Paipang, Tipuru, Rukumuta, Tiger Pond, Karasabai, Nappi, Hiowa, Parishara, Kumu, Moco Moco, Aishalton, Sand Creek, Rupunau, Awarewanau and Maruranau.

The Rupununi Report seeks to identify the social and economic challenges currently affecting indigenous peoples living in the Rupununi Savannahs, so as to encourage meaningful dialogue and sustainable solutions from stakeholders geared towards their human development.

The three main observations arising from this initiative are: 1) an increase in substance abuse; 2) the absence of local markets for agricultural products and 3) the gradual deterioration of village economies. Deficiencies in basic State services were also documented and include a massive overall drug shortage in understaffed and poorly maintained primary health care facilities.

The hard hitting consequences of climate change increase the already strenuous living conditions on the hinterland population, with visible detrimental impact particularly on access to potable water, crops and sustainable livelihood projects.

Political non-cooperation and insufficient representation were also pinpointed as a notable factor in stymieing overall development in the region.

It is hoped that the observations produced by the GEPAN Rupununi Report will be used to support immediate sectorial action plans crafted by regional and central government bodies, civil sector and all other relative stakeholders.

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All information in this report derive from ground investigation, research and interviews with members of the Region 9 RDC, Lethem Municipality and respective Village Councils. Anonymous contributors include villagers, public hospital and medical staff.

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Regional profile

Region 9 (Upper Takutu-Upper Essequibo) is located in the South – Western Guyana. It includes the Rupununi Savannahs and shares a common border with Brazil. Access to Region 9 is facilitated by road (the most frequented being the Georgetown-Lethem trail passing through Linden, the Iwokrama reserve and the Kurupukari Crossing). However, with the establishment of local airlines such as Air Services Ltd (ASL) and Trans Guyana, the Rupununi becomes accessible via a mere two-hour flight from the Eugene Correia International Airport located in Ogle on the outskirts of Georgetown.

The region is home primarily to the Macushi, Wapishana and Wai Wai peoples, three of Guyana’s nine (9) indigenous nations. This rich cultural diversity is spread out across fifty-eight (58) villages, most governed by democratically elected indigenous Village Councils. Lethem is the principal town, hosting most basic State services including a hospital, electrical power and water supply. Access to telephone and Internet networks is available through GTT (Guyana Telephone and Telegraph Company) and Digicel, as well as neighbouring Brazilian service providers. The town lies on the Guyana-Brazil border, rendering nearby Brazilian communities and cities such as Bom Fim, Boa Vista and Manaus easily accessible.

A 2012 National Bureau of Statistics census recorded the population count at approximately twenty-four thousand and rapidly growing (based on the said census, indigenous peoples are the fastest growing segment of the Guyanese population).

The region’s economy is pillared mainly by agriculture (especially cassava and cattle ranching), nature tourism (safaris) and to some extent mining. The main mining town is Marudi.

Popular events include the annual Rupununi Rodeo usually held during the Easter period, and provides an occasion to attract national and international tourists to an exceptional, good-humoured vaquero competition.

Legal body elected by indigenous residents to oversee and manage indigenous village affairs.
A chronic drug shortage

Drug shortages in the Hinterland are recurrent and characteristic of the public health system in Guyana. Geographic access to the hinterland can be rendered difficult due to underdeveloped infrastructure and climatic conditions in comparison to coastal regions. However, a visit to fifteen indigenous communities and to the Aishalton hospital revealed a chronic drug shortage that has been stifling the region for well over a year.

As it is in developing countries, health care remains a challenge especially when proper infrastructure, trained personnel and financial resources are lacking. But in Guyana, poor service is also strongly tied to mismanagement and disorganisation in supplying the drugs to meet the needs of public facilities.

In Paipang for instance, the last supply of drugs was received in July 2017. Based on the Community Health Worker’s (CHW) report, the village did not receive MMU vaccines in 2017 despite several requests made through the Karasabai health centre. In Tipuru, the last medical supplies were delivered in June and the CHW reported an absence of basic supplies such as bandages and IV fusions as well as a dried-up supply of treatment for diabetes.

The CHW of the Rupunau health center reported that the village received its last supplies in March. At the time of our visit in November 2017, there were no Panadols. The Moco Moco health centre received its last provisions in September. Meanwhile, the Tiger Pond health centre possessed only six small bottles of Chlorophane for children. In Sand Creek, the Toshao bemoaned the absence of treatment for viral conjunctivitis (commonly called “red eye”) while in Karasabai and Rukumuta both Toshaos indicated that basic medication for colds is lacking. Because the severe drug shortages have become a chronic

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2 Paracetamol commonly used in Guyana as pain relievers.
3 Head of the Village Council (the Chief)
problem in the region, some village leaders, such as in Nappi, indicated that their people are starting to revert to local remedies.

Paipang Health Center at time of investigation, November, 2017

The shortage of trained medical personnel further complicates the access to primary health care in the hinterland. Most health centres are operated by CHWs who are trained for a period of three months (under the HEYS programme) to administer basic treatment to patients. Health centres are generally opened once or twice a week. There was only one trained health worker assigned to Nappi, Parishara and Hiowa at the time of our visit, with two others currently on training. Because the Nappi Health centre is the largest in the region, villagers believe that a more trained or experienced health professional should be on duty. In Kumu, there were no trained health workers at the time of our investigation, as is common in health centres across the hinterland. Some health centres cater for up to nine communities at a time, as is the case the Sand Creek health centre in South Central Rupununi or the Aishalton hospital.

Aside from working against this setback, health facilities including the Aishalton hospital, suffer from inadequate transportation. There is a general absence of ambulances, and most patients, including pregnant women, are transported using ATVs, motorbikes and where possible, tractors and other village vehicles. The health sector in the Rupununi is deficient to the point where in some communities mothers are forced to give birth at home.4

The fact that doctors from the coast sent to work in the hinterland have a difficult time adapting to these strenuous circumstances does not alleviate the challenges confronting indigenous communities. For example in Karasabai and the neighbouring South Pakaraima communities, complaints were made by villagers and councillors concerning the alleged negligence of the doctor on duty. What’s more is that a discussion with doctors in the region revealed that most of their colleagues coming from the coast are not experienced doctors but on the contrary, have either just completed their training or are sent to complete it in the Rupununi.

Rupunau Health Centre at time of investigation, November, 2017.

The Public Health Ministry’s excuse for the chronic drug shortage as related by administrative staff at the Lethem Hospital, is that the procurement procedures are being changed – the same excuse for over two years. Additionally, it was discovered that about one

Account from an indigenous village leader.

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third of the GY$ 100 million allocated to the Lethem hospital for emergency purchases (drugs) has returned to Central Government by request.\(^5\)

\(^5\) This was the situation up to November 2017, as documented by GEPAN.
2. Struggling village economies

Most indigenous communities in the Rupununi depend on agriculture for their daily subsistence. Cassava, cattle ranching and fishing are some of the main investments generating income for families. However, cassava (Manihot Esculenta or manioc) which has pillared village economies for decades now, is no longer feasible since there is now no market to absorb regional production.

The contractionary fiscal policies and austerity measures which included, inter alia, the removal of social welfare policies and State support for traditional income earning sectors, have, since 2015, muffled the homogenous economic growth across sectors in Guyana. Macroeconomic consequences include the drop in consumer purchasing power and the increase of unemployment both in private and public sectors. The sugar industry suffered the biggest blow when several estates were ordered closed.

The subsequent deterioration of local markets for agricultural products was expected and rural and hinterland communities inevitably become affected since village economies depend on town markets and urban economies.

In the Rupununi, indigenous communities would gather in Lethem to sell their items on market days. However, the Lethem market believed to no longer be capable of absorbing the needs of the fifty-eight (58) indigenous communities in the region, especially since most of them have similar if not identical village economies (cassava cash crops, cattle, sheep, fish...).

In Paipang, village leaders indicated that the prices offered now for farine (a cassava by-product consumed throughout the Rupununi and in neighbouring Brazil) are so low that villagers are forced to go to Brazil in search of better markets. Karasabai villagers have also indicated that although Brazil remains an alternative, the demand has significantly decreased, leaving the village with a surplus. In Moco Moco, the farine surplus is over ten thousand (10,000) pounds, although the village juxtaposes the Lethem township and is a few minutes away from the Brazilian town Bom Fi. In Awarewanau, leaders expressed their frustration, stating that buyers impose extremely unethical prices as low as eighty dollars ($80) per pound of farine, slashing the standard one hundred and sixty dollars ($160) which would usually obtain.

In 2014, a research conducted in Nappi by GEPAN Founder Anna Correia revealed that bartering in the Rupununi, had become a rare practice in indigenous communities. However, village leaders from Kurumuta in the South Pakaraimas to Sand Creek in the Deep South Rupununi, indicated that communities have reintroduced bartering as a means to cope with the economic decline of village economies. When villagers cannot find buyers for their items in Lethem, they are now forced to barter with shops in the town for basic commodities. Evidently,
indigenous products and labour are undervalued in this ad hoc system. The result is a general increase in poverty levels for indigenous peoples who are already vulnerable to climatic, economic and social challenges.
Direct reports from Village Councillors and village elders indicate that there is an increase in substance abuse by young indigenous men in particular. While marijuana seems to be the most prevalent of drugs currently on the rise in the communities, cocaine and crack are also on the market. One report from a Lethem official suggested that local laboratories right in the town were set up for crack and is common knowledge to the neighbouring Brazilian Customs and Federal Police.

However, because it is cheaper and therefore more easily accessible, marijuana consumption is said to have risen in popularity among the young people of the region.

While there are those who defend the theory that it possesses medicinal proprieties and health benefits primarily because it is a natural plant which has been used for centuries, the village elders are taking issue with the negative effects they believe are engendered by marijuana overuse and dependency.
One of the recurrent side effects highlighted is a dramatic increase in violence and abusive behaviour by young indigenous men. Cases of domestic violence, suicidal and life threatening behaviour are among the main side effects reported in communities.

When asked how they cope with the situation, village elders explained that those under the influence no longer care for the moral guidance and advice of elders as is customary in indigenous communities. In Aishalton for instance, some elders explained that young men would now verbally abuse them in return.

It appears that while local leaders are conscious of the situation, repressing the trend remains a challenge for several reasons. Interviews with Toshaos and Village Councillors indicate that in some villages, elected leaders are involved in marketing drugs. In one Deep South community, a drugs network allegedly comprised of the police, Village Councillors, teachers and dealers, is reportedly instilling fear in village leaders who as a result now prefer to remain silent.

Prompted to give reasons for why they believe drugs to be on the increase in their communities, leaders explained that several factors including high rates of unemployment, a general economic decline in village economies and “coast-lander” influence and responsibility particularly from neighbouring mining districts, might be responsible. It was suggested that in some communities, substance abuse is rendering young indigenous women increasingly vulnerable to the risk of sexual abuse, teenage pregnancies and Trafficking In Persons (TIP).

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6 Commonly used in the Rupununi to describe inhabitants of Guyana’s coastal regions.
CROSS CUTTING ISSUES
Mothers in the South Pakaraima villages of Paipang, Tipuru, Tiger Pond, Rukumuta and Karasabai in particular, explained that the removal of State welfare assistance for children resulted in financial difficulties which could not be compensated by the withering village economies and subsequent reduced family incomes.

Mothers in the South Pakaraima villages of Paipang, Tipuru, Tiger Pond, Rukumuta and Karasabai in particular, explained that the removal of State welfare assistance for children resulted in financial difficulties which could not be compensated by the withering village economies and subsequent reduced family incomes. Acquiring basic necessities such as transportation to help children go to school became difficult. In that region, some children walk as much as six miles to and from school, often bare-feet. School drop-out is unsurprisingly common as a result of insufficient resources, and although the Government of Guyana promised to deliver buses and bicycles to communities to facilitate transportation for children, indigenous communities hardly benefit. According to a release by the Department of Public Information in December 2017, twenty-seven (27) buses, nine (9) boats and “hundreds of bicycles and books” were commissioned by the Government under its Five Bs Programme. However, only a fraction goes to indigenous communities in the hinterland which account for some two hundred (200) villages, satellites and proposed title communities. The programme cannot therefore adequately compensate for the slash in welfare benefits.

The removal of the Youth Entrepreneurship and Apprenticeship Programme (YEAP) and its Community Support Officers (CSOs) was also identified as a factor in reducing village income. The CSO beneficiaries would inject a minimum of two to three hundred thousand dollars (GY $200 000 - $300 000) monthly into village economies. Beneficiaries in each village received a stipend of GY $30 000 to provide support services in specific fields (agriculture, health, infrastructure, etc.) While the YEAP was replaced by the HEYS programme, the latter is not a permanent initiative but lasts six months non-renewable. HEYS is destined to form entrepreneurs and four thousand (4000) beneficiaries are said to benefit from the programme. However, stagnant village economies may be unable to absorb young entrepreneurs with consumer purchasing power under strain in the hinterland.

The impact of policy-making

Human development is highly dependent on policy-making and the 2015 budget cuts and reforms in Guyana have had a trickle-down effect on hinterland communities. In 2015, the Government made several major cuts to social welfare programmes which included back-to-school vouchers for children, as well as electricity and water subsidies for pensioners.

Political non-cooperation and underrepresentation

A lack of political cooperation was discovered between the Regional Executive Officer’s (REO) office and the Regional Democratic Council (RDC), as well as between the RDC and the Mayor’s office. Political polarization of regional institutions in Lethem is reported to be a hindrance to the overall development of the Rupununi. The consequences are suffered by indigenous communities. The reported case of the REO’s office refusing to provide fuel or reimburse fuel expenses to indigenous Village Councils was one of several similar complaints that culminated in a people’s petition against the former REO, Carl Parker. The petition was supported by both GEPAN and The Amerindian Action Movement of Guyana (TAAMOG). In 2017, the REO was accused of refusing to vet travel and other expenses required to facilitate the Regional Chairman’s outreaches to indigenous communities. Only a budget of approximately five million dollars (GY $5 000 000) was approved, and highly underestimates the needs of Guyana’s largest administrative region. The lack of transparency and accountability from the REO’s office was also identified as a problem for the region’s development, particularly in terms of the misuse of public funds when handing out contracts.

In similar manner, Members of Parliament appointed to represent the interests of the region were accused during the course of GEPAN’s investigation, of failing in their duties. In the fifteen villages visited, indigenous leaders manifested lack of confidence in their Members of Parliament and Government Ministers appointed from the Region on both sides of the House. In the Village of Karasabai for instance, Village leaders indicated that the Indigenous Peoples Affairs Minister who originates from Surama in Region 9 never paid a visit to residents since he was elected, despite being a regular visitor prior to taking up Office. In similar manner, the Opposition Member of Parliament who is also from the Region was identified as not investing enough efforts into representing his people’s interest before policy-makers.

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