



Canadian International Development Agency

Agence canadienne de développement international

Dr. Maria Inês da Silva Barbosa - PAHO/WHO

First Meeting of the Technical Advisory Group (TAG) on Cultural Diversity and Health

Pan American Health Organization/World Health Organization (PAHO/WHO)
February 7 & 8, PAHO Headquarters, Room B
523 23rd Street N.W., Washington, D.C 20037

On February 7 and 8 the Office of Gender Diversity and Human Rights at Pan-American Health Organization (PAHO) organized the first Technical Advisory Group (TAG) on Cultural Diversity and Health to support the Organization in integrating an intercultural perspective in its work according to the requirements of its strategic plan.

The TAG is composed of representatives from four Member States: Bolivia, Brazil, Canada, and Guatemala; the Inter-American Development Bank; UN Permanent Forum on Indigenous Issues; United Nations Population Fund; UN Women Brazil and South Cone; UNICEF; and by organizations that represent diverse peoples: the UN Indigenous Fund (*Fondo para el Desarrollo de los Pueblos Indígenas de América Latina y El Caribe*), the Technical Committee on the Health of the Black Population of Brazil's Ministry of Health (*Comitê Técnico de Saúde da População Negra do Ministério da Saúde*); "Working Group for Afro-descendants of the Americas -2010 Censuses" (*Grupo de Trabajo Afrodescendientes de las Américas Censos del 2010*), and an organization of the Rom or Gypsy People of Colombia.

The TAG's co-presidents are Dr. Myrna Cunningham, representative of the UN Permanent Forum on Indigenous Issues; and Claudia Mosquera Rosero-Labbé, Professor at the National University of Colombia in Bogota.

In addition, technical experts from the academic community and civil society, together with selected cultural diversity focal points from PAHO participated as observers (see list of participants, annexed).

The objectives of the TAG on Cultural Diversity and Health:

To review PAHO's achievements in integrating an intercultural approach in health information, policies and programs, as well as in implementing Resolution CD47.R18, "Health of the Indigenous Peoples in the Americas."

To present on progress of PAHO's current (2010/11) workplan, and consult on the upcoming biennial work plan (2012/13) towards achieving equity in health for

Indigenous, Afro-descendant, Rrom or Gypsy peoples, and other ethnic and cultural groups.

To define and chart the strategic lines and commitments to be presented to the Directing Council of Member States in 2012 on integrating an intercultural approach into PAHO's and Member States' health policies, programs and monitoring systems. The goal is to increase equity in health for women, men and children of the region's diverse peoples, as well as their empowerment and participation in achieving this goal.

TAG Recommendations

The TAG focused on the integration of the following priorities in the work and technical cooperation of PAHO:

1. Ethnic/Racial variables and an intercultural approach to the collection and analysis of health information

The collection and analysis of statistical data are essential for identifying inequities and discriminations in the health system, as well for defining health policies that are inclusive and intercultural. Both quantitative and qualitative data should be collected for all population groups, broken down by Indigenous, Afro-descendants, Rrom or Gypsy peoples, and other ethnic-cultural groups, and by sex, and be analyzed with an intercultural approach, a gender identities and human rights perspective, with participation of representatives or authorities from these peoples, through the creation of a regional scientific advisory group.

PAHO should support the efforts to standardize measures of cultural diversity and health, to include indicators on the Millennium Development Goals (MDGs), morbidity/mortality, access, unmet needs, and development, as well as indicators relevant to culture, related to the vision and worldview of health and development of Indigenous, Afro-descendant and Rrom or Gypsy peoples, including those who live in isolated places. This data should be reliable, comprehensible, and available for the formation of policies, programs, and advocacy. Institutional-level documents should include this disaggregated data, harmonized between the censuses and the health information systems, as well as carry out analyses using human rights instruments and standards.

2. Traditional Medicine and Primary Health Care Practices

It is important to acknowledge the diversity among the medicine and practices of the different ethnic and cultural groups. These various groups have their own spiritual conceptions of health and well-being, and based on these they use medicines and practices in a holistic manner.

Ensuring access of discriminated groups to formal health services should be a priority: Health personnel should be able to speak the languages of these groups; should respect their traditional symbols, ceremonies, therapies, midwives, plants, and animals; and should understand their concepts of family, ownership, territoriality, and community, in order to achieve equitable access to services. To ensure the intercultural approach in all health systems, traditional health personnel should have access to training, exchanges, and opportunities for capacity-building. Formal health service personnel should have access to training on cultural diversity and sensitivity in order to eliminate prejudice and stereotypes inside health systems.

3. Integrated Health Services for Improved Access

A fragmented health system is a significant barrier to the right to health care for groups historically excluded and discriminated against. Public health systems should be centered on integrated primary care and based on intercultural networks, able to provide culturally appropriate care and universal access as a fundamental human right. These health systems should be linked with sectorial, inter-institutional, and territorial development plans and be consistent with collective and individual rights.

4. Access to Health Based on Human Rights Commitments

Both collective and individual human rights should be protected, promoted, and defended through health systems, in compliance with international, regional, and national human rights agreements and those specific to Indigenous, Afro-descendant, and Rrom or Gypsy peoples. The practical explication and application of these human rights agreements should be made available to these stakeholders.

5. Leadership and Participation Promotion

Real progress cannot occur without the support and participation of leaders of the Indigenous, Afro-descendant, and Rrom or Gypsy peoples in the planning, monitoring and evaluation of public policies. However, many of these groups and leaders are biased against women and young people, and give priority to men. The participation of youth and women in decision-making for programming and implementing health policy, particularly sexual and reproductive health care, is fundamental to provide effective responses to the health needs of these groups. It is important to establish how the consultations, institutional processes and relevant resources will be determined.

6. Defining Cultural Diversity

It is important to include a historically contextualized definition of cultural diversity in PAHO's Cultural Diversity Strategy and all other strategies.

PAHO's Commitment

In response to the support of the TAG, PAHO will consolidate its recommendations and those of its working groups in a concept note on the integration of the cultural diversity perspective in health, which will be presented to the Directing Council of Health Ministers in 2012. Its title must include the target populations of Indigenous, Afro-descendant, and Rrom or Gypsy peoples. To improve their health and well-being, PAHO will also incorporate these recommendations in the 2012-2013 Biannual Work Plan in accordance with Regional Expect Result 7.6, to support the Member States in the development of policies, plans, and programs. It stresses the importance of applying an intercultural approach, based on primary health care, and seek to establish strategic alliances with stakeholders and relevant partners, in order to improve the health and wellbeing of indigenous, afro-descendant, and Rrom or Gypsy peoples. The TAG proposes that PAHO consider writing a resolution based on the one for indigenous peoples (CD47.R18) for the other ethnic/racial groups of the Americas, such as the Rrom or Gypsy peoples.

Agenda

First Technical Advisory Group (TAG) meeting on Cultural Diversity and Health

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February 7 - 8, PAHO Headquarters, Room B
525 23rd Street, NW, Washington DC 20037

Objectives of Cultural Diversity and Health TAG:

- To review PAHO achievements in integrating an intercultural approach in health information, policies and programs, as well as in implementing Resolution CDR47R18 "Health of the Indigenous Peoples in the Americas".
- To present and consult on progress of PAHO's current (2010/11), and upcoming biannual work plan (2012/13) in achieving equity in health of Indigenous and Afro-descendant Peoples, and other ethnic and cultural groups.
- To define and chart the strategic lines and commitments to be presented to the Directing Council of Member States in 2012 on integrating an intercultural approach in PAHO and Member States' health policies, programs and monitoring systems, with the goal of improving equity in health for women, men and children of the regions diverse peoples, as well as their empowerment and participation in achieving his goal.

Day one: February 7

8:30 - 9:15	<p>Opening Remarks: PAHO's commitment to cultural diversity in health <i>Dr. Socorro Gross, PAHO Assistant Director</i></p>
9:15 - 9:30	<p>Health for All: including an intercultural perspective in achieving equity in health in the Americas <i>Dr. Marijke Velzeboer-Salcedo, GDR/PAHO Coordinator Gender, Diversity and Human Rights</i></p>
9:30 - 10:30	<p>Panel: Strengthening partnerships <i>Moderator: Dr. Juan Manuel Sotelo, PAHO External Relations and Partnerships</i> <i>Development partners and International NGOs and donors</i></p>
10:30 - 11:00	<p>Coffee, downstairs lobby</p>
11:00-11:30	<p>The Right to Health for All: Human Rights Frameworks <i>Mr. Javier Vasquez, GDR/PAHO Regional Advisor, Human Rights Law</i></p>
11:30 - 11:50	<p>Inequities in Health in the Americas <i>Ms. Lily Jara, GDR/PAHO Advisor on health evidence and equity</i></p>
11:50 - 12:30	<p>Discussion: Identifying challenges and priorities <i>Moderator: Ms. Cristina Leria, GDR/PAHO Advisor, Human Rights Law for Health Services</i></p>
12:30 - 14:00	<p>Lunch with ticket, Cafeteria 3rd Floor</p>

14:00 – 15:30	<p>Panel: Addressing cultural diversity and equity in health: PAHO's challenges, advances and commitments <i>Moderator: Dr. Maria Ines Barbosa, GDR/PAHO Advisor Cultural Diversity and Health, a.i.</i></p> <ul style="list-style-type: none"> • Improving health evidence: Disaggregating and analyzing health information with an intercultural perspective <i>Dr Fatima Marinho, HSD/PAHO/, Sr. Advisor Health Analysis</i> • Intercultural approach in Millennium Development Goals (MDG) <i>Dr. Sofia Leticia Morales, SDE/PAHO, Sr. Advisor MDG and Health</i> • Health of Indigenous adolescents <i>Dr. Matilde Maddalemo, FCH/PAHO, Sr Advisor Life Cycle and Health, and Adolescent Health</i> • Addressing inequities in health systems and services <i>Dr. Jose Luis Di Fabio, Area Manager, HSS/PAHO Health Systems and Services</i>
15:30 – 15:45	Coffee
15:45 – 16:45	<p>Panel: Addressing cultural diversity and equity in health: National challenges, advances and commitments - Bolivia, Canada and Guatemala <i>Moderator: Dr. Mariela Licha, Coordinator, PAHO Country Focus Support Office (CFS/PAHO)</i></p>
16:45 – 17:30	<p>Discussion on Priorities and Approaches for PAHO and Member States <i>Moderator: Mr. Javier Vasquez, GDR/PAHO</i></p>
17:30	Cocktail, Lobby

Day 2: February 8

First day summary: Priorities and Approaches

Dr. Maria Ines Barbosa, GDR

The way forward: Reinforcing PAHO's commitment to diverse peoples of the Americas

Moderator: TAG Co Chair

- **Committing Members States to Health for All**
Ms. Piedad Huerta: PAHO Governing Bodies
- **PAHO/GDR's biannual work plan and achievements**
Dr. Marijke Velzeboer-Salcedo, GDR
- **PAHO's draft Governing Body Document": "Achieving equity in health within the context of cultural, ethnic and racial diversity"**
Dr. Maria Ines Barbosa, GDR

Coffee

Discussion and Clarification on Priorities and Approaches

Moderator: Dr. Jose Milton Guzman, COL/PAHO

Lunch, 3rd Floor cafeteria

Working Groups Methodology

Defining priorities, strategies for advancing cultural diversity and equity in health for all the diverse peoples of the Americas: working group methodology

Moderator: Dr. Maria Ines Barbosa, GDR

Three working groups (15:00 - 15:30 : coffee)

Facilitators: Ms. Lily Jara, GDR; Mr. Javier Vasquez, GDR; Ms. Floriza Gennari, GDR/PAHO, Program Management Specialist

Presentation of working groups and defining priorities and strategies

Moderator: Dr. Maria Ines Barbosa, GDR

Recommendations and commitments

Dr. Gross, AD; Dr. Barbosa, GDR/PAHO; TAG Co chairs

Rapporteur: Genevieve Grabman: X 4 3138

Assistants: Bethany McCurley-Hunter: X43316;; Celeste Medina: X43995

List Of Participants

TAG Members /Miembros del TAG	Institution/Institución	E-mails
Agencies/Agencias		
Ana Carolina Querino	ONU Mujeres Brasil (UN Women)	ana.carolina-querino@unwomen.org
Judith Morrison	Banco Interamericano de Desarrollo	jmorrison@iadb.org
Government/Gobiernos		
Alberto Camaqui	Viceministro de Medicina y Salud, Bolivia	alcamen2010@hotmail.com
Lourdes Xitumul Piox	Ministerio de Salud Público y A.S., Guatemala	xitumulpiox@yahoo.es
Edmond Roy	First Nations and Inuit Health Branch, Canada	edmond-roy@hc-sc.gc.ca
Civil Society/Sociedad Civil		
Damiana Miranda	Comité Técnico de salud de la Población Negra/Brasil	damianamiranda@uol.com.br
Epsy Campbell	Grupo de Trabajo Afrodescendientes en los Censos de las Américas y el Caribe	epsyo@yahoo.com.mx afrocensos2010@gmail.com
Dalila Gómez Bahos	Representante de los Pueblos Rrom /Gitanos de Colombia, PRORROM	gitanosdecolombia@gmail.com dalykali@yahoo.com ; dalikali@gmail.com
Myrna Cunningham *Co Chair	Foro Permanente sobre Cuestiones Indígenas en la ONU (UNFPII)	mirnacunningham@aol.com
Luis Eveles Andrade Casama	Presidente del Consejo Directivo, Fondo Indígena	fondoindigena@fondoindigena.org
Specialists/Especialistas		
Dinah Shelton	IACHR-OAS; George Washington University	dshelton@law.gwu.edu
José Manuel del Val Blanco	Etnólogo; Universidad Nacional Autónoma de México (UNAM)	
Claudia Mosquera Rosero-Labbé *Co Chair	Universidad Nacional de Colombia	cpmosquera@bt.unal.edu.co

Tukufu Zuberi	Universidad de Pennsylvania	tukufu@pop.upenn.edu
Leonardo Alvarado	Universidad de Arizona/ Oficina de Relator Especial sobre Pueblos Indígenas	leonardo.alvarado@law.arizona.edu
Hadar Harris	American University	hharris@wcl.american.edu
Alta Hooker	Universidad de las Regiones Autónomas de la Costa Caribe Nicaraguense (URACCAN)	altahooker@yahoo.com.mx
Observer/Observadores		
Humberto Rogelio Brown Green	Health Disparities Initiatives - NY	humbertobrown@downstate.edu
Roberto Rojas Davile	OEA Dept. de Derecho Internacional	rrojas@oas.org
José Milton Guzmán	PAHO/Colombia	guzmanjo@col.ops-oms.org
Erica Díaz	PAHO/Guatemala	diazerica@gut.ops-oms.org
Hugo Rivera	PAHO/Bolivia	hrivera@bol.ops-oms.org
Víctor Arauz	PAHO/Ecuador	arauzv@ecu.ops-oms.org
Gregoria Jiménez Amaya	Directora de la Escuelas de Lideres Honduras	odeco@caribe.hn ; c.c.celeo@gmail.com
Zakiya Carr	Race, Ethnicity and Social Inclusion Unit in the Western Hemisphere Affairs, State Department	carjohsonzs@state.gov ; c.c.martinezcn@state.gov
Carmen-Rosa Torres	Department of Health and Human Services (HSS/USA)	carmenrosa.torres@hhs.gov
Carlos Zolla	Universidad Nacional Autónoma de México	zolla.carlos@gmail.com
PAHO		
Esmeralda Burbano	PAHO/GDR WDC	burbanoe@paho.org
Floriza Gennari	PAHO/GDR WDC	gennarif@paho.org
Genevieve Grabman	PAHO/GDR WDC	grabmang@paho.org
Javier Vasquez	PAHO/GDR WDC	vasquezj@paho.org
Lilia Jara	PAHO/GDR WDC	jaralili@paho.org
Maria Inês Barbosa	PAHO/GDR WDC	barbosam@paho.org
Marijke Velzeboer-Salcedo	PAHO/GDR WDC	velzebom@paho.org