INDIGENOUS PEOPLES IN PUERTO CORRONCHO, VAUPÉS
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ICBF
Colombian Family Welfare Institute.

IEA
Information Ecosystem Analysis.

NGO
Non-Governmental Organization

SISPI
Indigenous System of Own and Intercultural Health.

SOGI
Sexual Orientation and Gender Identity.

SOGIESC
Sexual Orientation, Gender Identity, Gender Expression and Sex Characteristics.
1. INTRODUCTION

This report is one of three assessing information needs among LGBTQIA+, indigenous and Afro-Colombian people in three Colombian departments. The reports are part of Internews’ Rooted in Trust project, active for the second year, and build upon that conducted by Internews in 2021 about Venezuelan refugees in Nariño. This report focuses on information and trust systems and information needs among afro-colombian communities in Chocó. Through understanding these systems and needs, Rooted in Trust provides actionable recommendations on how to share accurate, timely, responsive, and reliable information with Indigenous people of diverse SOGIESC in Caquetá, especially in the context of sanitary emergencies.

Understanding information ecosystems provides us with an understanding of how communities interact with information they receive, how and why they share information, where they seek information, and what kind of sources or information they trust. This allows for a greater understanding of information needs, barriers, and relevance.

Reports on information needs and trust in Caquetá and Vaupes are also available, as is an information landscape review, which provides an analysis of the supply side of information in the national and local contexts of each department.

The Rooted in Trust 2.0 project in Colombia is working to address the impacts of pandemic related information in Caquetá, Chocó, Putumayo, and Vaupés with an intersectional approach on indigenous, afro Colombian and LGBTQI+ populations.
This report was written by Ana María Barajas. Sinergias, a Rooted in Trust implementing partner in Colombia, an organization that works to improve access to intercultural health services in different communities in Vaupés, supported the research process and provided guidance in the research design, data collection, feedback, and dissemination of results. Sinergias provided a bridge between Internews and the indigenous community of Puerto Corroncho, and it also conducted a stakeholder mapping of public health institutions, NGOs, and local media.

Special thanks to the indigenous community of Puerto Corroncho and all stakeholders who generously participated in the Key Informant Interviews (KII), Group Interviews and Focus Group Discussions (FGD), from the Health Secretary of Vaupés, Vaupés Governorate, San Antonio Hospital, the Colombian Family Welfare Institute (ICBF), the Apostolic Vicariate of Mitú and representatives of local media outlets Yuruparí Stereo, the program Arupacumá, and Marandúa.
3. **KEY FINDINGS**

- **One of the main findings of this IEA, is that most of the communication strategies to disseminate health information during COVID-19, were destined to internet publications that did not reach most of the Indigenous communities in the department.** In the community of Puerto Corroncho, the three main sources of information are leaders, radiotelephone and radio stations (especially the Community station Yurupari and the army’s station Colombia Stereo).

- **Information relevance depends on whether an ethno-racial approach was taken in its dissemination, which means to consider the social, cultural, and economic contexts of the communities that are going to be reached to share information that is accessible and is based in principles of non-discrimination.** For instance, by disseminating information in the languages spoken by the targeted communities with the support of local translators and presenting information through accessible means, such as a specific radio broadcaster with coverage in the target community.

- **At the time of writing this report, COVID-19 was not a current urgent information need in Vaupés. The community of Puerto Corroncho, emphasized on other health priorities for them, such as mental health and suicide, access to healthcare, intercultural medicine, infectious disease from river water contaminations, and flooding.**

- **In Vaupes, it is indicated that rumors did not have a great impact on communities’ decisions to vaccinate.** Instead, there are structural factors regarding difficulties on physical access to dispersed communities, lack of health infrastructure and lack of access to signal, the internet and electricity, among others. This has defined how indigenous communities in Vaupes engage with information and respond to emergencies. In the case of COVID-19, this has meant turning to ancestral knowledge and complementing it with biomedical initiatives, including vaccines.

- **The more there is two-way communications, the more trust there is on public health institutions and NGOs.** Community members stressed on the importance on establishing more dialogue about relevant health issues for them, so that they can ask questions, resolve doubts, and learn tools.
4. RECOMMENDATIONS

**Recommendations to local media**

- Facilitate communication between different indigenous communities through local radio stations with coverage across different indigenous communities in Vaupés, providing the space for them to have a two-way communication to share their perspectives and experiences. This will allow communities to learn from other indigenous communities facing similar issues, such as flooding or health emergencies.

- Invite indigenous leaders and sabedores from different communities where local media has coverage, to generate joint health communication strategies to adapt national guidelines to the cultural context of each community.

- Open the microphones and provide the space for indigenous people to speak directly in local media platforms, around key issues, and areas of interests, from their own perspective, considering that there are no indigenous media in Vaupés by and for indigenous communities. This can be done by inviting indigenous young people who are being trained in journalism by Sinergias, with the support of Internews.

**Recommendations to public health institutions**

- Ensure that each communications office has at least one person who can adapt and contextualize communication strategies for indigenous communities. Adapt national guidelines to the local context with the support of indigenous leaders where the information is going to be disseminated.

- Actively involve indigenous communities in decision-making processes by sharing them existing departmental and municipal programs and seeking their input for program continuation or expansion, or in the development of new programs. This is better done through knowledge dialogues in the communities with prior notice to local community leaders. The information of the meetings can be shared through radios with coverage in the communities and radiotelephony.

- Strengthening the linkages between biomedicine and indigenous medicine, by facilitating knowledge dialogues on challenges and opportunities to provide practical and necessary tools to face current and future health emergencies in remote communities.
4. RECOMMENDATIONS

Recommendations to NGOs

- Directly involve indigenous communities in the design and implementation of activities relevant to them. Communities should identify their own needs, viable solutions, and concrete actions. This is better done through participatory workshops in the communities with professionals with experience working with indigenous peoples, and with the involvement of local translators. The methodology of these workshops should be designed with the leaders, when possible.

- Strengthening community life plans in communities that do not have that support yet.

- Develop an accessible repository of information on projects and actions implemented in different communities to facilitate coordination and complementarity of interventions. This repository should be accessible to all actors who implement projects in Vaupés: NGOs, Humanitarians, and public institutions.
This research focused on the community of Puerto Corroncho, based on the trust relationship that Sinergias has been building with them. The IEA for Vaupes used a qualitative method, focusing on key informant interviews (KIIs), focus group discussions (FGDs), and group interviews to develop a stronger understanding of the information ecosystem and trusted information networks in Puerto Corroncho (See questionnaires in Annex 1).

Two KII were held with indigenous leaders, Four Group interviews were held with community leaders, members of the health committee, and sabedores. The FGDs were separated by gender: one with men and another with women. Because of traditional gender norms in Puerto Corroncho, only five women participated in the FGD. In Puerto Corroncho, women are in charge of working in the chagra (The cultivation of crops) and other care spaces, such as food preparation and childcare.

![Table 1](https://via.placeholder.com/150)

<table>
<thead>
<tr>
<th>Department (Target: Population group)</th>
<th>Actor</th>
<th>KII</th>
<th>Group Interviews</th>
<th>FGD</th>
<th>Number of participants</th>
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<tr>
<td>Vaupés (Indigenous peoples)</td>
<td>Indigenous community of Puerto Corroncho</td>
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<td>Public institutions</td>
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<td>Local NGOs</td>
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*Figure 3. Number of KIIs and FGDs with all stakeholders and number of participants.*

Men, however, play a more visible role as spokespersons and are involved in public decision-making processes (Interview with Sinergias, 2022).

All KIIs, group interviews and FGDs conducted with community members were supported by local translators who translated the questions into the languages of the participants.

In addition, Internews held a group interview with five representatives of public institutions (from the Health Secretary of Vaupes, Vaupes Governorate, San Antonio Hospital and ICBF), and KII with two local CSOs (Civil Society Organizations): Sinergias and the Apostolic Vicariate of Mitú. Internews also conducted one FGD with members of local media outlets (Yuruparí station, Arupacumá radio program, and Marandúa local newspaper).
5. METHODOLOGY

Figure 2: Age and gender of participants from the Indigenous community of Puerto Corroncho in Mitú Vaupés.

<table>
<thead>
<tr>
<th>Age</th>
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<td>&lt;20</td>
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<td>20-30</td>
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<tr>
<td>31-40</td>
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<td>41-50</td>
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<td>3</td>
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<td>61-70</td>
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<tr>
<td>71-76</td>
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6. LIMITATIONS

Limitations

This report focuses on the community of Puerto Corroncho and is not representative of all indigenous communities in Vaupés. It does, however, provide information relevant to understanding information ecosystems for the department’s indigenous populations and the factors that determine how indigenous people relate to information during a health emergency, such as COVID-19. As the research was entirely qualitative, the findings are not representative and cannot be generalized across indigenous communities in Vaupés. However, qualitative research provides the reader with a deeper understanding of a community and its ideas, perceptions, and experiences.
Vaupés is one of 31 departments in Colombia. Located in the southeast, in the Amazon, it shares borders with the departments of Guaviare, Guainía, and Caquetá, as well as with Brazil and with Colombia’s Amazon Administrative Department. More than 80% of the department’s population is indigenous. With twenty-seven ethnic groups, 255 indigenous communities, and eighteen languages, Vaupés is incredibly diverse (Governorate of Vaupés, 2020). Puerto Corroncho, where Internews did research, is a community of 97 people from five ethnic groups: Kubeo, Siriano, Bará, Carapana and Tukano (42 women and 55 men). Puerto Corroncho is in a rural part of Mitú, approximately 45 minutes away from the urban center of Mitú by boat. The main Indigenous resguardo, Gran Resguardo Indígena del Vaupés, is also located there.

Vaupés is highly vulnerable to health emergencies like COVID-19 because of different conditions, like Geography, lack of access to the internet, signal, and electricity, and lack of health infrastructure.
More than 60% of the department’s population live in rural and dispersed areas. Mitú, the municipal capital, is one of the least populous departments in Colombia, with a population density of 0.8 inhabitants per square kilometer (Norwegian Refugee Council, 2021).

Vaupés is covered by dense rainforest with no main roads. It has two navigable rivers (Vaupés and Apaporis) which indigenous riverine communities use to travel. The only other way to reach remote communities is by air using artisanal airstrips that mostly support small aircraft (Governorate of Vaupés, 2020). This makes it difficult and expensive to reach communities who live far from Mitú, especially those in the interior of the rainforest.

“In Vaupés we are talking about [traveling via] flights, which is to say that the operating costs are tremendous... I think that it increases our costs by about one hundred times compared to the national level.” (Interview with the Health Secretary of Vaupés, 2022).

Technical infrastructure is also lacking. Most (89.4%) of Vaupés does not have access to the internet. (DANE, 2021). The internet is thus neither a main source of information nor the timeliest way to disseminate information.

At the time of data collection, Puerto Corroncho had no internet access, but there was an antenna for the internet signal in a larger, nearby indigenous community, Puerto Vaupés. Some people from Puerto Corroncho, especially youth, travel to Puerto Vaupés to access the internet. However, most people still lack cell phones or computers which are necessary to access the internet.

People also said telephone and radio signal is intermittent and often cuts for three or four days in a row.
Less than half of households (47.6%) across Vaupés have access to energy services (DANE, 2018), which limits the access to communication sources that require this, such as T.V. radio, internet, and telephone. In Puerto Corroncho, a photovoltaic generator was installed and allowed to improved access to power (Focus Group with indigenous community of Puerto Corroncho, 2022).

Radiotelephony is one of the main means through which indigenous communities communicate with hospitals when someone becomes ill. Through this, health personnel provide medical advice or decide to refer the patient. However, radiotelephony also faces signal issues and interferences (Interview with Deputy captain of Puerto Corroncho Community, 2022).
Health services in Vaupés are extremely limited. There is only one public hospital of the first level, and some additional second level services exist only in the capital, Mitú. Some private services are available in Mitú but are unable to treat complex illnesses or injuries (Mitú Major’s Office, 2020).

Rural and dispersed areas lack the infrastructure for hospitals or health centers with the necessary facilities; instead, there are around 55 health points across the department for primary health services where basic nursing services are provided, and patients can be referred to Mitú or other parts of the country for specialized medical services. In most of the department, health services are provided through mobile health brigades, which sometimes include specialized physicians and nurses (Governorate of Vaupés, 2020).

Colombian state recognizes an indigenous intercultural health system (SISPI). This means indigenous people are part of processes that seek to ensure that the biomedical health system includes intercultural adaptations for indigenous people, incorporating their health systems into the health services. **However, SISPI has not been implemented effectively across most of Vaupés because of infrastructure limitations. Indigenous people, especially those living in the most remote communities, thus rely on their own knowledge and tools to respond to health emergencies.**
The community of Puerto Corroncho did not prioritize COVID-19 as one of their most urgent information needs. Most of the community have been vaccinated and only one older person has died of the disease. Other health issues raised as a priority included mental health and suicide, access to healthcare, infectious disease from river water contamination, and flooding.

Access to adequate healthcare is a major concern. People want to know in advance what day and time health brigades will arrive, as well as how to access different medicines. Vaupés and Amazonas, both predominantly indigenous, have the highest suicide rates in Colombia. Vaupés has the highest (30.9 for every 100,000 inhabitants) (DANE, 2021). While there are many reasons for this, the most recurrent during this research and in other (Agencia UNAL, 2022), indicate that this is related to a crisis of culture resulting from the clash between indigenous communities and the western world.

“Part of our cultural knowledge has been lost because of contact with external people, especially for us young people. I always tell [the young people] in my community that we young people are much more attracted to things from the outside... there is very little of what our parents used to do, which is to sit with the Payé or with one’s grandfather and ask him about our story. There is no longer that interest, we have neglected that a lot” (Interview with indigenous person from Piracuara community - Sinergias, 2022).

A study conducted by the National University of Colombia found that children and youth from indigenous communities find themselves straddling two cultural and social models: modern Colombian societal norms that emphasize productivity and individual success, and the indigenous social model, which focuses on the collective. This along with the loss of ancestral
knowledge and cultural history in many indigenous communities has contributed to identity crisis and increase in alcohol consumption (Martínez, 2022), which has also been linked to suicide rates Vaupés (Caraballo, 2022).

During the KIIIs group interviews and FGDs, community members also said including inequality, discrimination, and internal conflict contribute to high suicide rates. The community of Puerto Corroncho want more dialogue about suicide and the various intersecting and complex drivers of high suicide rates to be able to identify high risk individuals and support them, in collaboration with the sabedores.

Only 65% of Vaupés has access to clean water. Insufficient wastewater management has led to an increase in infectious diarrheal and respiratory diseases, especially among children (Rodríguez, 2022). Waste management is one of the community’s information needs and the community would like to know how nearby indigenous communities are dealing with similar issues.

Because research was conducted in July, when the Vaupés River had recently broken its banks due to heavy rains between April and June, flooding was a primary concern. Such flooding is seasonal, but the community said they need more information about how to prevent flooding in their homes and chagras (Focus Group with indigenous comunity of Puerto Corroncho, 2022).
Contextually adapted and relevant information

For the purpose of this report, relevance is defined as how accessible, understandable, and important information is to indigenous communities. For indigenous communities in general and the community of Puerto Corroncho in particular, information relevance depends on whether an ethno-racial approach was taken in its dissemination. In the context of Colombia, this refers to a framework that acknowledges the legal status and social reality of various ethnic groups in Colombia, including indigenous communities. This allows for an intersectional understanding of inequality, vulnerability, and exclusion that in turn allows for the development and implementation of projects that seek to reduce structural inequality impeding basic rights. It also requires understanding the context and legal status of recognized ethnic groups and implementation of projects in line with principles of equal opportunity and non-discrimination (National Planning Department - DNP, 2016).

In the context of COVID-19, this means disseminating information in the languages spoken by the targeted communities with the support of local translators and presenting information through accessible means, such as a specific radio broadcaster with coverage in the community or by radiotelephony. If a print format is used, such as explanatory brochures, images should reflect indigenous people from the ethnic groups of the community. Given the diversity in Vaupés, this means significant attention on the different information needs and communication norms of each community.

Stakeholders who spoke with Internews said that they took an ethno-racial approach to information dissemination. “...within the health teams that travel to the communities, there is always an indigenous person who can speak at least the main language in the community they are visiting, which is important because they know their culture, they know the language, and they can help understand the uses and costumes of the community” (Interview with the Health Secretary of Vaupés, 2022).

This ethno-racial approach was also considered for the deployment of emergency aid. During the COVID-19 outbreak in 2020, public institutions disseminated a strategy for indigenous communities to isolate themselves in their chagras to prevent them from leaving their communities and catching the virus. All stakeholders, including NGOs and public institutions, disseminated kits specific to the indigenous communities in Vaupés. These kits included knives, lanterns, threads, lighters, and other necessities, such as salt and soap.

For some time, the strategy worked. Communities were able to isolate and prevent the entry of external actors. However, some more remote communities did not receive kits and isolation could not be sustained due to lack of resources and logistical difficulties (Velasco, 2022).

For Puerto Corroncho, this ethno-racial approach must include linkages between traditional medicine and biomedicine. “We trust western medicine. Sometimes it saves [us], and sometimes it does not. If our rituals and our medicines do nothing, we look to western medicine. But [biomedical] doctors need to coordinate more with us” (Group interview with sabedores in Community of Puerto Corroncho, 2022).
12. INFORMATION SHARING AND DISSEMINATION

Communities receive, use, and transmit information differently. In Puerto Corroncho, the most mentioned forms of receiving and sharing information were:

- Through community leaders, or captains, who are generally in charge of sharing with the community information provided by external actors. Every eight or ten days, a bell is rung to call people to gather in the Maloca where information is shared, or important events are planned.

Via radiotelephone, which is the main source of health information for many indigenous communities in Vaupés. In Puerto Corroncho, there is one radiotelephone via which they communicate with San Antonio Hospital in Mitú. However, radiotelephones have limits, including signal issues and comprehension when there is bad signal. Radiotelephones also are not private, and communications may experience interference, which is a risk in parts of Vaupés where there is presence of armed actors.

- Via radio, especially Yuruparí Station (local media) and Colombia Stereo (the army’s station).

- Occasionally by TV, using one of the three televisions in the community to watch Caracol News (national commercial media).

- By word of mouth, via which information received from other sources is also disseminated. For indigenous communities, oral tradition is important and includes modern-day information and community knowledge. “For indigenous peoples, language is the heart and the reason of our thinking” (CRIC, 2022).

- Via social media networks, especially Facebook and WhatsApp. Although most people in Puerto Corroncho do not have access to the internet, some young people do, and they share the information further via word of mouth.

Equally important to understand, though not a form of information dissemination in the normative sense, is spiritual communication. Indigenous worldviews include a component of spiritual communication in which sabedores act as intermediaries between the physical and spiritual worlds. In Puerto Corroncho, one sabedor said his ancestors told him that COVID-19 was coming through a dream, and they told him of the rituals he had to perform and plants to use to mitigate the impact of the virus on the community. Spiritual communication is given much weight in indigenous communities and must be understood as it can either validate or counter public health messaging.
Barriers to information access discussed by people in Vaupés were both structural and sociocultural:

1. **Lack of access to technology to obtain information from different sources.** There are only three TVs in Puerto Corroncho and no computers. Some young people and community leaders have cell phones, but with intermittent internet access. Most families have a radio which they use mostly to listen to local media.

2. **Lack of communication from some leaders,** who act as intermediaries between institutions, humanitarians, and other external actors and the community. Some people said there is a need to strengthen communication between leaders and the community.

3. **Lack of indigenous media outlets by and for indigenous peoples.** People from Puerto Corroncho want to know how to set up and manage their own media outlet and how to organize and have indigenous communicators.

4. **Language.** Local and national media outlets, humanitarians, and public institutions broadcast mostly in Spanish. This especially affects older people and women who are less likely to speak Spanish (Interview with the indigenous authority of Puerto Corroncho, 2022).

“Social media [dissemination] is demanded at the national level and sometimes we publish a note, and we have 2,000 interactions from different parts of the country, but not from Vaupés. If we want to reach indigenous communities, we must prioritize face-to-face communication, but this is difficult due to lack of resources” (Focus group with local communicators and media outlets in Vaupés, 2022)
14. **TRUST**

**Media**

Most of Puerto Corroncho gets its information via radio. Local radio stations, like Yurupari Stereo, and the army’s radio station, are most trusted because they transmit information about things that happen in the department. In this case, relevance is directly linked to trust. “We trust local radio, because it speaks to us, to the community, live and direct” (Group interview with sabedores in Community of Puerto Corroncho, 2022). They also said they appreciate that local radio stations broadcast information about meetings held by public institutions and projects by the mayor’s office.

In contrast, people said they have less trust in external (mainly national) media because it is seen as distant from their own realities and perceived as lacking research about what is happening in indigenous communities in Vaupes.

**Public health institutions**

There appears to be some trust in public health institutions because they send health brigades to the community. However, people also said that public institutions’ officers sometimes go to indigenous communities without clear information and only seek to legalize or fill out paperwork to comply with their work. Community members want more dialogue with public institutions so they can ask questions and resolve doubts about health issues. An example that was provided was an incident in 2020 when a representative of the public health secretariat visited Puerto Corroncho to disseminate information about COVID-19. Although this information was disseminated in Spanish, the official opened the space for questions. Participants said this approach allowed people to resolve many doubts, which eventually led to the community adopting their own biosecurity measures because they understood how the virus is transmitted. Later, when rumors arrived, they had less impact in Puerto Corroncho.

**Local NGOs and humanitarians**

People in Puerto Corroncho expressed high trust in local NGOs. There are only two with a recognized presence Sinergias and CODESBIIF. In all of Vaupés, there are very few humanitarian organizations, likely because the population is dispersed, which makes it difficult for humanitarians to obtain financing to work in this type of areas (Interview with Sinergias, 2022).

People said they trust organizations that have established relationships with them and have done work on areas that are important to the community. For example, Sinergias are helping them build their community life plan, which “...is a big process, because we have to reinforce [our] origins and how everything started in this community, whose land it was, and so on... This can take up to 10 years. People get together to reflect on this and everyone participates. Just like we are doing now” (Interview with the indigenous authority of Puerto Corroncho, 2022).

**Community leaders and other community members**

People trust information provided by community leaders but would like information to be shared more regularly. When it comes to health, people trust the sabedores, saying they were able to identify when COVID-19 was going to arrive in the community and could thus perform a series of rituals and share local medicines to mitigate the impact of the virus. People attributed the low COVID-19 mortality rate in Puerto Corroncho to the community’s prevention strategies, implemented with the support of their sabedores.
In Vaupes, rumors did not have a great impact on communities’ decisions to vaccinate. In fact, the Health Secretary of Vaupés said some remote Indigenous communities have taken legal action against them because the state has not gone far enough in applying the vaccine (Interview with the Health Secretary of Vaupés, 2022).

In this research it is suggested that low vaccination rates (less than 50%) can be attributed to structural factors, such as geography, infrastructure, and capacity of the healthcare system, not to vaccine hesitancy.

“In the world there is the challenge of distrust in vaccines. However, as a physician I have seen that in Indigenous communities of Vaupés there may be a little less distrust than elsewhere because they are people who have seen their families die from vaccine-preventable diseases, and they themselves have proven the advantages of vaccines. For example, there is not much rejection of vaccines for children, and Indigenous families often try to take their children to be vaccinated, even with the logistical challenges that exist” (Rodríguez, 2022).

People in Puerto Corroncho said rumors reached the community through different means, mainly through word of mouth and from travelers passing down the Vaupés River. Young people with cellphones and access to social media also found some rumors on Facebook and shared them with the community. The most mentioned rumors were:

- Vaccines would turn you into zombies.
- Hospitals were lying about COVID-19 deaths and attributing deaths from other causes to COVID-19.
- Vaccines were hurting people or were being used to implant a chip to control the population.
- According to local NGOs, some communities in Vaupes received rumors from religious institutions that told them the vaccine was not good for them. However, they stated that this happened in very few communities, and most religious shared information in favor of the vaccine.

Everyone in Puerto Corroncho who spoke with Internews said they did not believe most of the rumors they heard because they knew that COVID-19 was real, and it reached their community. Although only one person in Puerto Corroncho died of COVID-19, when the vaccine arrived, everyone took it because they wanted to avoid complications resulting from the virus. Many other indigenous communities in Vaupés took COVID-19 seriously and blocked external actors from entering their communities, including NGOs and public institutions.
“There were sabedores who told us that we were carrying the virus, so it was better not to go to the communities, so they could avoid those risks. Even when they gave us entrance, they poured alcohol on our hands and required us to wear masks” (Interview with Apostolic Vicar of Mitú, 2022).

Indigenous communities adopted biosecurity measures in their communities, relied on traditional medicine to prevent COVID-19 and treat its symptoms, and where possible, received the vaccine.
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