

PART C | **Health of vulnerable groups**

Listening to and bringing forward the voices of the excluded and marginalized are key roles for civil society worldwide. This first *Global Health Watch* focuses on two groups of people – Indigenous peoples and people with disabilities – whose concerns are often marginalized and whose unfulfilled rights present fundamental challenges to health policymakers.

Discrimination against both sets of people runs extremely deep. Indigenous peoples are often seen as backward and even as a block on modernization and development. People with disabilities are often regarded as abnormal and denied full human rights as a result. The relationships of both these groups with health professionals have historically mirrored and reinforced the prejudices in the wider society. These chapters describe ways in which both groups have resisted and set their own agendas in the context of both health care and in society as a whole – but there is still a long way to go.

Campaigning can both provoke and be supported by legislative change at national and international levels – the current demands for an international convention on the rights of disabled people recognise this. But as a disabled man from the Congo points out, ‘you cannot eat rights’, while international policies and programmes sometimes seem irrelevant at the personal level. Moreover, as the experience of many Indigenous peoples illustrates, provision of health care in squalid ‘resettlement camps’ is not adequate recompense for the misappropriation of land and the denial of a lifestyle that is central to their concept of health and well being.

Rights need to be connected to broader agendas such as freedom from social marginalization, poverty, conflict and oppression – and the voices of groups such as people with disabilities and Indigenous peoples need to be heard in arenas where these issues are discussed.

