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Brazil Big Quilombo: Experiencing Experience in Pernambuco Quilombola Community

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ABSTRACT

Introduction: Marked by exclusion and isolation from society over the years, quilombola communities in Brazil are kept invisible in the various social spheres. Based on the knowledge of the National Health Policy of the Black Population, its importance and the objectives that emphasize the prioritization of the reduction of ethnic-racial inequalities, against racism and discrimination in health institutions and services, it is necessary to know the particularities of this public with regard to health care offered. Objective: With the desire to know the current structure of a quilombola community this work brings the report of the experience to a remnant guilombo community in the interior of the state of Pernambuco by a group of collective health residents. Methods: Experience report on a visit to a remaining quilombo community, located in the district of São Lourenço, in the municipality of Goiana, in the Zona Norte Mata de Pernambuco, where a discussion was then held with the residents' association president and the religious leadership of the community. Results and Discussion: The guilombo was certified in 2005, with a remnant of 3,500 people with more or less 900 families, predominantly urban, still preserving brands of their ancestors in the ways of working, clothing, food and forms of health care, with diseases prevalent in the community such as: Leprosy, tuberculosis, sickle cell anemia. The visit brought a different look to this population that still suffers from prejudice, racism and human violence, has also helped us to reflect the weaknesses of health practices in the municipality and throughout the Brazilian territory. Conclusion: Given the experience, it was possible to observe that there is still a predominance of prejudice by the community itself in its identification as a guilombola and, above all, the insertion of new health and cultural practices, highlighting the violence and fragility of health services.

Keywords: Ethnic origin and health, Minority Health and Public Health.

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