



PANAMÁ

# EMBERÁ

## NDPBA PROVINCES AND INDIGENOUS COMARCAS PROFILE

# PANAMÁ EMBERÁ

## CAPITAL: UNIÓN CHOCÓ

Area: 4,394 km<sup>2</sup>

Comarca Emberá Is located in the eastern region of Panama. This Province is divided into 2 districts: Unión Chocó (The Capital), Cémaco and Sambú. The comarca borders Kuna Yala to the north and Darién which surrounds the comarca boundary. The main economic source is cattle.



## RISK AND VULNERABILITY COMPONENT SCORE



**MULTI-HAZARD RISK (MHR) - High**  
Score: 0.589 • Rank: 3/13



**RESILIENCE (R) - Very Low**  
Score: 0.374 • Rank: 11/13



**MULTI-HAZARD EXPOSURE (MHE) - Low**  
Score: 0.513 • Rank: 8/13



**VULNERABILITY (V) - Low**  
Score: 0.605 • Rank: 2/13



**COPING CAPACITY (CC) - Low**  
Score: 0.352 • Rank: 10/13



Population (2020 Estimate)  
**13,016**



Population in poverty  
**62.9%**



Average years in school  
**5.6**



Access to improved water  
**62.4% households**



Infant mortality rate  
(per 1,000 live births)  
**18**

\*For more information on data and components please visit: <https://bit.ly/2LqVoUO>



# MULTI-HAZARD EXPOSURE (MHE)

**RANK: 8 / 13 PROVINCES AND  
INDIGENOUS COMARCAS**  
**SCORE: 0.513**



**MHE**  
**0.513**

Raw MHE  
0.1

Relative MHE  
0.927

## ESTIMATED POPULATION AND CAPITAL EXPOSED TO EACH HAZARD:



Earthquake

**77.3%**  
**8,898**  
**374 Million**



Flood

**8.9%**  
**1,020**  
**30.5 Million**



Landslide

-  
**0**  
-



Storm Surge

-  
-  
-



Sea Level Rise

**17.3%**  
**1,994**  
-



Wildfire

-  
**0**  
-



Tsunami

**0.0%**  
**0**  
**8.9 Thousand**



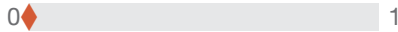
## VULNERABILITY (V)

**RANK: 2 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.605**

Vulnerability in Emberá is primarily driven by Clean Water Access Vulnerability and Vulnerable Health Status. The bar charts indicate the socioeconomic themes contributing to the overall Vulnerability score.



### Environmental Stress SCORE: 0.000 RANK: 13/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



<b>0.03%</b> Percent forest cover lost	<b>9.89</b> Density of livestock per sq. km	<b>-</b> Percent of freshwater consumption to production
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### Vulnerable Health Status SCORE: 0.849 RANK: 1/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



<b>198.4</b> Dengue incidence per 100,000 persons	<b>11.8</b> AIDS incidence per 100,000 persons	<b>204.3</b> Malaria Incidence per 100,000 persons	<b>32.3</b> TB incidence per 100,000 persons	<b>30.6%</b> Prevalence of stunting	<b>5.4%</b> Disability	<b>392.16</b> Maternal Mortality Rate per 100,000 live births
<b>17.75</b> Infant mortality per 1,000 live births	<b>71.03</b> Life expectancy					



### Clean Water Vulnerability SCORE: 0.904 RANK: 2/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



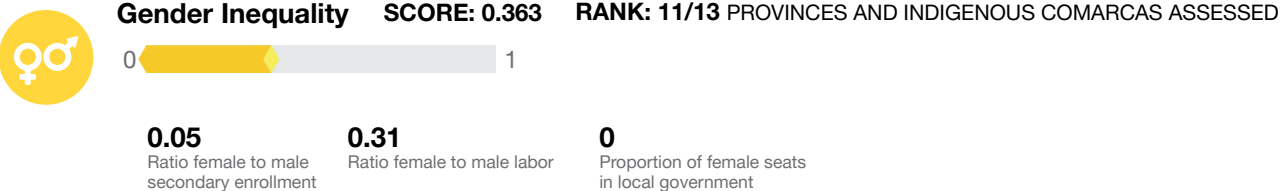
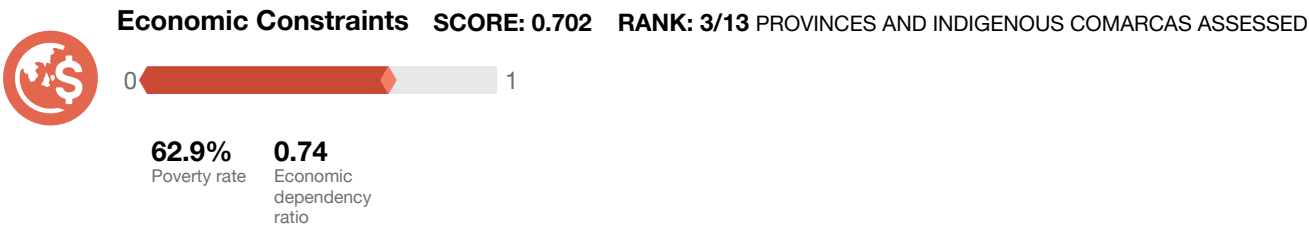
<b>62.4%</b> Households with access to improved drinking water	<b>59.3%</b> Households with access to improved sanitation
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### Information Access Vulnerability SCORE: 0.763 RANK: 2/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



<b>37.0%</b> Households with radio	<b>47.8%</b> Households with TV	<b>25.9%</b> Households with internet	<b>75.7%</b> School attendance rate	<b>5.61</b> Average years of schooling	<b>14.1%</b> Illiteracy rate
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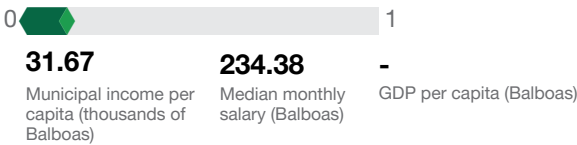
# COPING CAPACITY (CC)

**RANK: 10 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.352**

Emberá exhibits weaker Coping Capacity in the areas of Economic Capacity and Health Care Capacity. The bar charts indicate the socioeconomic themes contributing to the overall Coping Capacity score.



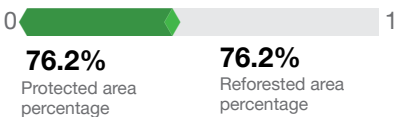
## Economic Capacity SCORE: 0.116 RANK: 12/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



## Governance SCORE: 0.663 RANK: 1/0,663 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



## Environmental Capacity SCORE: 0.422 RANK: 2/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



## Infrastructure Capacity SCORE: 0.255 RANK: 12/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



## Health Care Capacity SCORE: 0.177 RANK: 12/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



## Transportation Capacity SCORE: 0.27 RANK: 11/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



## Communications Capacity SCORE: 0.259 RANK: 12/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED



## Energy Capacity SCORE: 0.315 RANK: 11/13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED





# RESILIENCE (R)

**RANK: 11 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.374**

Emberá's score and ranking are due to Low Vulnerability combined with Low Coping Capacity scores.

Below are the four thematic areas with the weakest relative scores:



Clean Water Access Vulnerability



Vulnerable Health Status



Economic Capacity



Health Care Capacity



# HAZARD-SPECIFIC RISK (HSR)



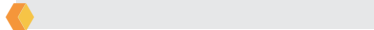
**Earthquake**



**RANK: 2 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.573**



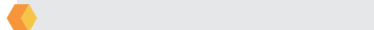
**Flood**



**RANK: 2 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.350**



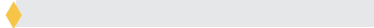
**Sea Level Rise**



**RANK: 13 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.042**



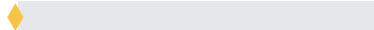
**Storm Surge**



**RANK: 13 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.000**



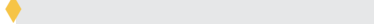
**Landslide**



**RANK: 12 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.000**



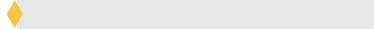
**Wildfire**



**RANK: 11 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.000**



**Tsunami**



**RANK: 13 / 13 PROVINCES AND INDIGENOUS COMARCAS ASSESSED**  
**SCORE: 0.000**



## MULTI-HAZARD RISK (MHR)

**3 / 13**

RANK WITHIN PROVINCES AND  
INDIGENOUS COMARCAS  
SCORE: 0.589



Emberá's score and ranking are due to Low Multi-hazard Exposure combined with Low Vulnerability and Low Coping Capacity scores.4,394

### Multi-hazard risk component scores compared to overall average country scores:

EMBERÁ SCORE  
COUNTRY SCORE



#### Multi-Hazard Exposure



#### Vulnerability



#### Coping Capacity





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# EMBERÁ RECOMMENDATIONS



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## Clean Water Access Vulnerability

A lack of access to improved water sources and improved sanitation can lead to contracting enteric diseases from contaminated water supplies and increases the risk of the population facing an acute enteric disease outbreak. Emberá ranks the second highest in Panama for clean water vulnerability with elevated rates of unimproved water and sanitation. Acute enteric disease outbreaks from inadequate sanitation and contaminated water exacerbate existing vulnerabilities and stress local health care resources.

Investment in the development and water treatment and water distribution systems ensures populations have access to clean water and adequate sanitation services. Develop an emergency action plan to identify and prevent acute enteric disease outbreaks can prevent community spread and isolate sources of contaminated water or inadequate sanitation.

# EMBERÁ RECOMMENDATIONS

## 2

### Vulnerable Health Status

Lack of adequate health care contributes to a high degree of infant mortality, maternal mortality, and inadequate health care access that disproportionately affects disparate populations such as women and girls. Emberá ranks the highest in Panama in Vulnerable health status with high rates of prevalence of both Dengue Fever and Malaria. Exacerbating vulnerable health status is the lack of clean water access in Emberá, which can spread enteric disease and strain health care resources.

Create healthier environments for all members of society and address needs for in-home care, sub-acute care, acute care, and clinical care. Limit exposure to environmental risks, infectious diseases, and provide critical medical intervention of communicable illnesses and emergent medical care. Simultaneously address health issues and clean water access to reduce the spread of infectious disease. Create public health programs to educate populations on proper nutrition, adolescent, and elderly care, and preventing the spread of communicable diseases. Provide necessary prophylaxis through public health programs to avoid pathogenesis of specific diseases such as malaria, dengue fever, and AIDS.

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## EMBERÁ RECOMMENDATIONS

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### 3

#### **Economic Capacity**

Socioeconomic deprivation increases dependency on limited both government resources and individuals and limits economic opportunity and mobility. Emberá has the lowest median monthly salary in Panama. Lack of economic capacity increases criminal activity, provides opportunities for transnational criminal organizations to gain influence, and stresses relationships between individuals and civil society. Lack of income and currency can exacerbate health status and limit treatment options for individuals and families. Low income can also contribute to inadequate sanitation and access to clean water sources.

Encourage programs to generate public revenue and create new job opportunities. Address existing public policy to limit inflation and ensure equal employment opportunities, especially for marginalized populations. Expand and provide equal opportunity programs for disparate people to increase economic opportunity for all. Create and implement health care programs to ensure all members of society receive adequate care and ensure all of society, regardless of income status, has sufficient access to clean water and sanitary conditions.

# EMBERÁ RECOMMENDATIONS

## 4

### Health Care Capacity

Inadequate health care capacity exacerbates other areas such as economic participation, dependency, and adolescent and elderly care. Emberá has one of the greatest distances for populations to reach a hospital in all of Panama and only 1.63 physicians per 10,000 persons and 0.8 nurses per 10,000 persons. Lack of skilled health care professionals and resources creates a limited resource, forcing triage of medical care to meet emergent medical needs. The triage of limited medical resources exacerbates mass casualties, disaster situations, and acute disease outbreaks.

Remove health care barriers to adequately address outpatient medical needs for all members of society, preventing medical conditions from turning into more difficult in-patient treatment situations, creating stress on medical systems. Create educational programs that address proper nutrition, exercise, vaccination, and safe sex to reduce behaviors that require medical intervention. Correctly identify hospitals and their respective trauma levels for pediatric and adult care for mass casualty situations. Ensure hospitals meet standards of care determined by the government. Create and build outpatient health clinics to address medical needs without a hospital. Identify a system of biosurveillance to provide early intervention of disease outbreaks.

**Better solutions.  
Fewer disasters.**

# Safer world.

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