

# Bambutu Lives



A report following a survey of the needs of the indigenous Bambutu communities in the Irumu and Mambasa territories in the province of Ituri



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## Context

The Ituri Province of the **Democratic Republic of Congo (DRC)** has been the site of continued inter-community violence and armed conflicts over land rights and ethnic identities for several decades. Loss of life, property and the mass displacement of local indigenous forest-dwelling populations have occurred as a result. These factors seriously impact the safety, security and protection of the two major health zones of the Irumu and Mabasa territories: the Komanda and the Lolwa health zones. Since April 2022, the situation in these areas has deteriorated following attacks by **Allied Democratic Forces (known as the ADF, ADF-Nalu or FDA)** equating to serious human rights violations against the indigenous populations. The atrocities committed by the ADF, inflicted upon civilians, have included killings, arson, looting, assault, abduction, rape, kidnapping and forced labour. The threat of attack has triggered the migration of people in the Ituri Province, particularly the Bambuti (or Mbuti) community, who are forced to leave their homes to seek refuge to the west of Komanda, around the RN4 Komanda-Lolwa axis.<sup>1</sup>

Villages that have severely suffered the effects of these attacks include Shauri-Moya and Mangusu in the Basili chiefdom; and Bavonkutu, Bandiboli, Bandikola, Kandoi, Bandipete, Bandikafu, Bamande, Takumanza, Kosakosa, Mungamba in the chiefdom of Walesse-Vonkutu.

The volatility of the situation within the Komanda health zone poses a threat to civilian life as armed forces persist in their attacks on the civilian population. In October 2022, a newly formed armed group called Chini Ya Tuna were identified as the

alleged perpetrators of attacks in areas around 12 km north-east of Komanda, namely Masome, Bombwa and Mabiti, around Makayanga.

### Examples of recorded incidents include:

- 1. 14 October 2022, around 1am:**  
Eleven men aged between 30 and 50 years-old who were camping in their fields for work were attacked and some beheaded by armed units in the locality of Masome in the Komanda health zone. Their naked and bound bodies were discovered by people who were going to the fields at around 8am on 14 October. One of the victims was severely injured and was taken to the Komanda General Referral Hospital, where he died a few hours later.
- 2. 19 October 2022, around 3pm:**  
Armed units of the ADF attacked a convoy of vehicles in the locality of Kabriקה, located about 65 km South of Komanda in the Walesse-Vonkutu chiefdom in the Komanda health zone. Such attacks have been frequent, and on this occasion the ADF set fire to two vehicles and kidnapped around ten people.
- 3. 21 October 2022, around 6pm:**  
Armed units of the ADF killed two people in Mayalibo, approximately 42 km South of Komanda in the Walesse-Vonkutu chiefdom in the Komanda health zone. These men had been taken hostage in the village of Maimunde village.

Despite initial adherence to peace processes in Komanda, marked by the signing of the Act of Cessation of Hostilities in March 2022, violations against civilians

continue at the hands of the **Patriotic and Integrationist Congolese Front (FPIC)**, including against members of the Bambuti community. On the evening of 2 February 2022 at approximately 7pm, a 42-year-old man was beaten by two FPIC soldiers for refusing to allow them to access his home on the Anglican site.

## The Survey

From the 2 to 7 March 2023, the **Centre Résolution Conflits (CRC)** initiated further investigations into the conflict occurring within the Komanda and Lolwa health zones with the support of **Scarborough Museums and Galleries (SMG)**. This investigation enabled the CRC to identify the needs of the Bambuti people living within these two health zones on temporary sites for Internally Displaced Persons. This was carried out through

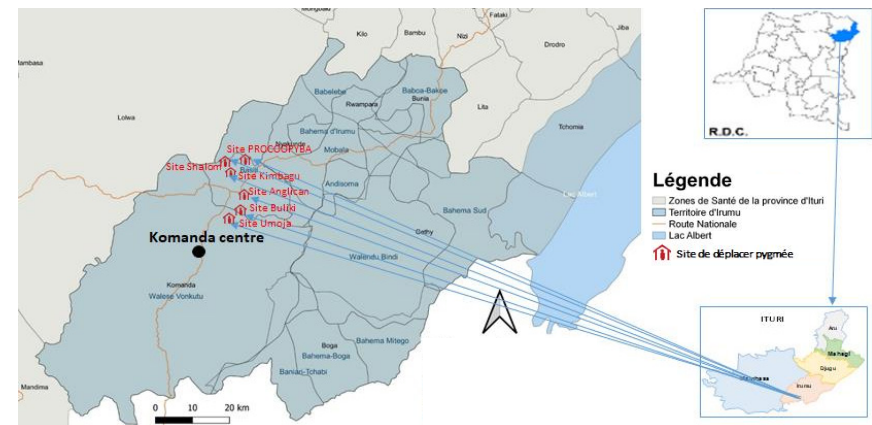
a series of interviews with members of Bambuti communities and staff from local supporting organisations from the health zones such as doctors, registered nurses, chiefs of the local communities, women and youth associations.

### The Health Zones: An Overview

**Komanda:** The Komanda health zone is located 75 km south of Bunia. From Bunia, this health zone is accessible via the RN 27. Larger vehicles, such as lorries and heavy-goods vehicles (HGVs), as well as smaller vehicles, including pick-up trucks, frequently use this route which runs between Bunia, Marabo, Irumu and Komanda. This road is of great economic importance to the province but has areas of severe disrepair, spread over several villages, and needs urgent work by the relevant state services to improve driving conditions.

### Map of Ituri province indicating the sites of displaced indigenous people of Komanda

*(The boundaries and names, as well as the designations used on this map do not indicate the official approval or acceptance of UNHCR and INTERSOS).*



<sup>1</sup> The term 'Batwa' (BaTua or Twa) is used to identify a number of cultural indigenous groups, including the 'Bambuti' (Mbuti) peoples and who are largely based in the north-east of the DRC in the Ituri region and the Batwa people of the Lake Tumba region north-west of the DRC, who also have populations in Kivu. The term Bambuti is used instead of Batwa to refer to Bambuti communities specifically as the term Batwa is sometimes used as a slur, depending on the tone of voice used. The pejorative term 'Pygmy' will be used in inverted commas or within an organisation name or quotation for contextual purposes to demonstrate its continued usage in the DRC but also to recognize its historic usage as a taxonomic generalization for the physiognomy of some indigenous groups by colonial powers.



Lolwa: Lolwa is located 110 km west of Bunia. The inhabitants of the village of Lolwa fled after an incursion by ADF rebels in May 2022. The infrastructure of Lolwa's healthcare services was destroyed and key hospital equipment damaged in fires. The Lolwa health zone has 10 health areas: Mabangifo, Lolwa, Toli Toli, Bahaha, Bandibwame, Mabokulu, Many, Mabitani, Elake and Pekele. All their main health centres were burnt down except for Peke,

which is 10km from Mambasa. Indigenous people, including Bambuti, constitute 44% of the population of the Lolwa health zone and the various massacres perpetrated by the ADF have made their lives even more precarious. According to the Head Nurse we met on-site, the Bambuti communities have returned to the depths of the forest which runs alongside the Komanda-Mambasa road. They have no shelter and no access to health care.

**Photos of the abandoned buildings in the Lolwa health zone after the ADF massacre.**



**Main objective of the survey**

The principal objective of this survey was to identify and assess the needs of the Bambuti people living in Ituri in the Komanda and Lolwa health zones.

**Specific objectives of the survey**

- To map the associations and local contacts of the Bambuti in the area.
- To interview and/or hold targeted discussions with a representative sample of community members.
- To identify the needs of the female members of the Bambuti community, particularly, girls.
- To learn more about the Bambuti's cultural identity, in terms of improving their representation within Scarborough Museums.
- To identify ways by which citizen researchers in the UK can engage in the project to increase awareness of the Bambuti in Scarborough.

**Survey tools and techniques**

The following tools and techniques were used in this survey:

- **Written questionnaires:** These were used to collect opinions from the Bambuti population and the organisations working on the socio-economic challenges faced by the Bambuti people in Ituri, as well as the extent to which they are involved in development activities.

- **Face to face interviews:** Conducted with the Bambuti community and those working with them.
- **On the ground observations.**

To carry out a statistical analysis, it was essential to have a sample group of individuals from whom to draw wider conclusions about the Bambuti people. The survey questionnaire was addressed to individuals from the Bambuti population; the non-Bambuti population and **Non-Government Organisations (NGOs)** working on behalf of Bambuti people in the south Mbinga area.

**Presentation and analysis of results**

The results expressed below represent the findings of a questionnaire which addressed fundamental questions relating to the needs of the Bambuti people, with a representative sampling in two health zones, one covering part of the Irumu territory, and the other of the Mambasa territory. The questionnaire used in this survey were addressed to the following focus groups: Bambuti people; the non-Bambuti population; NGOs working with Bambuti people in the Komanda and Lolwa health zones.



Interviewing Bambuti women in the Bandiauku Camp

# Bambuti: Who are they and where are they in Irumu and Mambasa territories?

## Introduction to the Bambuti People

The word 'pygmy' has previously been used in a pejorative sense to refer to the indigenous Bambuti people of the forests in Irumu. The word is often used in a derogatory way by other ethnic groups to devalue and discriminate against Bambuti people.

In Irumu and Mambasa Territories, the population is estimated to be between 18,750 and 25,000, the majority of whom are Bambuti. Bambuti men are hunters, gatherers and fishermen. Their socio-economic status is characterised by extreme poverty, the absence of permanent income-generating work, a low-yield subsistence economy, the persistence of bartering as a means of trade, systematic seasonal displacement for hunting, gathering and collecting forest produce, such as cutting wood to make charcoal, and a very strong economic dependence on the neighbouring Bantu community. There is only a small proportion of Bambuti people employed in local enterprises and these are often poorly paid. Conflicts between Bambuti and Bantus are common. An example of this is the friction over land occupation and distribution between the Lesse tribe from the Walesse-Vonkutu chiefdom, and the Nande tribe, predominantly from North Kivu but with a significant population based in the Irumu territories.

Women play a vital role in the lives of the Bambuti community. Women are seen as

key decision makers, as they are responsible for raising and caring for the children, cooking and domestic chores, and for the construction of makeshift shelters while the men roam the forests hunting and setting traps for game. Whilst the average family income is low, women are responsible for managing the family finances. This responsibility exposes them to the risk of gender-based violence. In a focus group with Bambuti women, they said that they are often assaulted by their husbands because of this. The focus group explained that after their husbands have given them money to manage, they return daily to ask for small amounts, often 500 or 2000 Congolese Francs (FC), to buy alcohol. This pattern continues and when the money runs out, the men become angry and fights will ensue. More cases of physical assault are recorded in Bambuti occupied sites of IDPs sites than any other IDP sites.

The poverty experienced by these communities is a barrier to Bambuti people accessing basic social services. Their income is so low it prohibits them from saving and limits their access to financial institutions. The socio-economic factors mentioned have impacted on their food sourcing and eating habits, forcing them to gradually adopt those of Bantu society and becoming more dependent on them.

Humanitarian assistance in the Komanda health zone is sporadic, adding to the difficulties faced by Bambuti IDPs. This leads them to travel nomadically between areas with their families or as single parents. During an interview with some Bambuti men, they recalled the loss of members of their community at the hands of armed soldiers, mainly the ADF, as a result. Others were reported to have been abducted and forcibly enrolled in the ADF, working

for them as trackers in the forest. During one incident on the 11 April 2022 in the village of Mangusu/Vonkutu, (7 km west of Komanda) 17 people, including 9 Bambuti men, who had been revisiting their original encampments, were killed by the ADF during a clash between the ADF and the **Armed Forces of the Democratic Republic of Congo (FARDC)**.

When discussing their lived experience, the Bambuti people mentioned that they prefer to remain in a homogenous society made up solely of members of their community. The reasons for not wanting to live with other cultural groups were discussed, one reason being their unique "festive life" (way of celebrating). This can involve the heavy consumption of alcohol, sometimes resulting in fights within the group, but resolved internally to avoid going to the **National Congolese Police (PNC)**. When humanitarian agencies distribute aid to the Bambuti people, it is then sold and the money used to buy alcohol, leading to more fights in the IDP camps. Furthermore, their singing and dancing have caused tensions because of noise levels. Celebrations for a new-born in the Bambuti community, for example, last day and night until the day the new-born returns to the site. As a result, they have expressed a desire to keep to themselves in the fear that their festive customs disturb others who are unfamiliar with the Bambuti culture and traditions.

Bambuti shelters are commonly made of straw and are often in significant disrepair. During the rainy season they stay with their belongings to protect them. Within these shelters, Bambuti occupants tend to spend the nights on shreds of papyrus, damaged sacks or tarpaulins, with no mosquito net or blanket/covering. Bambuti children are increasingly exposed to poor weather.

Bambuti people traditionally lead a nomadic life within forest ecosystems using hunter-gatherer techniques to source food. Some spend several months of the year near the local villages working in the fields. Bambuti relationships with the neighbouring farming populations have been compared to a "master-servant" dynamic with the "big Blacks" (Bantu),<sup>2</sup> exchanging hunting and gathering bounty and sometimes services for metal tools, salt, or cooking pots. The exploitation of natural resources and land ownership has disrupted reciprocal trading and introduced a consumerist element that is very problematic for the Bambuti today.

## Cultural Identity

The Bambuti people have their own language and dialects. In the Ituri region, most have adopted the language of their Bantu neighbours. The Bambuti people consider the forest to belong to them. It is the woman who builds the dwellings for the family. Bambuti women have a strong and intimate relationships with the forest through their unparalleled knowledge of plants, but also through the belief in a great forest spirit called Lifumbha, whom they address daily and with polyphonic songs during funeral ceremonies. They wear *Atato* (facial make-up) and their traditional clothes, called *Mutubha* and *Sigbe*. They beat tam-tam drums to accompany the singing and dancing that takes place during birth, circumcision, or wedding celebrations, as part of the ceremonial exchange of their children. These Bambuti communities have several traditional objects such as *Sepe* (the swing) and *Gbeka* (the traditional chair). They often use *Mushali* (a bow), *Mupini* (an arrow) and *Mukuki* (a spear) as weapons for hunting.

<sup>2</sup> The term comes from conversations with the focus groups of the Bambuti community for the survey.

## Social and Political Organisation

The different Bambuti groups live in settlements of thirty to seventy people, consisting of about ten circular huts. Traditionally these socio-economic units have no formal leader or government, although there are three figures who have great influence: the elder, the master hunter and the diviner-healer. Everyone is independent and responsible for themselves. However, they do cooperate fully in hunting, gathering, celebrations and childcare-related tasks.

## Forms of Justice

From the various focus groups and interviews, it emerged that the notion of formal justice has been far removed from the lives of Bambuti people for a long time. They have their own traditional way of resolving disputes. This is called the *Barza Inter-Communautaire (Barza)*; it is managed by the 'wise men' or elders of the community and aims to broker amicable solutions. After lengthy discussions, alleged perpetrators are often ordered to pay customary fines. These fines often consist of game and specific drinks that signify that the discussion has taken place and that an understanding has been reached between the conflicting parties. This is another reason why the Bambuti prefer to live on their own; they avoid conflict or problems with other communities who prefer more costly formal judicial routes.

Driven by the atrocities carried out by armed groups, and displaced from their homes, the Bambuti find themselves in survival mode, which can lead them to commit certain crimes out of necessity, such as the theft of agricultural products. If they are caught, they are arrested. For fear of being arrested,

some families prefer to return to the forest, despite their homelands being insecure because of armed elements (ADF, Mai Mai, FPIC, Chin Ya Tuna and FRPI) in the Komanda and Lolwa health zones.

## Official Documents

From discussions with all the groups, it was revealed that 100% of all those interviewed were unaware of the importance of registering children with the state and that this was never undertaken in the past. As a result, all children are at risk of statelessness. However, Bambuti children who are born at the Komanda centre in the functioning health areas have access to documentation, supported by UNICEF. To reduce the risk of statelessness, civil registry offices in the health areas can issue birth certificates. In the focus group with Bambuti women, they said they tend not to keep the birth certificates as they mistake them for simple paperwork and prefer to use them to light the fire or as rolling paper for smoking.

## Schooling of Bambuti children in Ituri

For the Bambuti living beyond the health zones of Komanda and Lolwa, there are inequalities in access to schooling because of the social exclusion suffered by Bambuti communities by their Bantu neighbours. Wider social demands to modernise also creates inequalities. Faced with the social and structural transformations caused by contact with schooling, Bambuti communities are taking a step back from modern schooling. However, there is not an intrinsic cultural barrier that makes it more difficult for Bambuti communities to send their children to school than their neighbours. The data presented and analysed in this report highlights two central problems with Bambuti schooling: the first

is the accessibility of the study sites/schools in relation to the dangerous conditions in which Bambuti people live in Ituri, particularly in the outlying parts of villages; and the second is the social challenges that Bambuti children face in school.

## Access to Healthcare Facilities

It should be noted here that whilst there are health facilities in the Ituri area, only a small percentage are functioning adequately. Several health centres have been repeatedly attacked and looted by armed groups happening upon them. In the Lolwa health zone alone, 9 of 10 health areas have been affected by the war and their equipment has been systematically looted, apart from the Pekele health area. On the other hand, in the Komanda health zone, 6 of 18 health areas are inaccessible because of the presence of armed groups in this region. These six health areas are: Samboko, Bandibe, Ofay, Bwanasura, Kasoko and Luna.

At present, some Bambuti communities use local hospitals for childbirth or for general treatment. Certain NGOs will help them with hospital bills for pregnancy-related illnesses such as haemorrhages and caesarean sections, malnutrition in children aged 0-5 years, and treatments for malaria that can cause anaemia and miscarriages. However, they do not get financial assistance when it comes to other medical emergencies, and as the NGOs fund only up to 80% of the hospital costs, there have been instances of Bambuti patients abandoning care before they are discharged.

## Water, Hygiene and Sanitation

In the Bambuti community centres that were analysed, the problem of access to drinking water was identified as an acute

issue because of a lack of water processing sources in the area. The increase in the number of IDPs in the Komanda health area is putting a lot of pressure on the existing **National Water Sanitation and Hygiene (WASH)** facilities in the community. For example, in the **Projet Coopérative Pygmée et Balese (PROCOOPYBA)** site and the Anglican site, there is only one well to accommodate not only the Bambuti IDPs, but also other indigenous groups and Bantu IDPs in the area.

Tensions have developed between Bambuti communities and other groups at water taps over sharing the resource, with some altercations recorded. Bambuti people argue they were the first inhabitants of the land, and they should be prioritised over other groups. As a result, Bambuti people are shunned and are forced to fetch water from run-offs and untreated water sources a kilometre or more away, for food preparation and drinking. This puts them not only at greater risk of water-borne diseases such as diarrhoea and typhoid, but also of abduction by the ADF when individuals go in search of water.

In the Bambuti community we visited, several households use a single spring and two poorly maintained latrines. This is the case also in the Anglican site where there are only two latrines – one for women and one for men. According to the focus group participants, some Bambuti people travel approximately 500 metres into the bush to defecate in the open air as they report feeling unsafe using the holes in the ground in the latrines. Open-air defecation can increase the risk of outbreaks of disease if urgent action is not taken to discourage it. In the collective centres assessed, the displaced Bambuti people have difficulties with bathing, which is either done at night in



the vicinity of the encampment or during the day in the rivers, where there is little privacy and an increased risk of sexual violence, especially for young girls and women. None of the homes visited had hand-washing facilities and soap is not commonplace, with limited practice of hand-washing routines.

### Sexual risks

Amongst the Bambuti people, there is no strict division of labour by gender. The rule is monogamy although polygamy is widespread. The problems faced by Bambuti communities, in particular the denial of land rights and ethnic discrimination, are experienced by both men and women. However, Bambuti women are disproportionately affected by the threat of sexual violence. In the collective centres, these Bambuti communities live in very close

quarters and women and girls risk sexual violence.

Adults, for their part, are deprived of privacy. The men stated during the interviews that: "To satisfy our natural needs, we call our wives outside secretly in the late hours when the children are sleeping." Some have sexual intercourse under the trees and others in the bush near fields. This practice has upset others and also poses safety risks. In one conversation in the Anglican site, they informed us that a couple were found together at the site's football stadium at night by a patrol from the FPIC. The couple were tortured and received 25 lashes as 'punishment' before they were released.

This table shows that two associations were identified working to support the Bambuti community in the target zone. These are:

### Overview of the Organisations working in the area for the Benefit of Bambuti Communities

Whilst there are indeed a considerable number of humanitarian organisations in these two health zones, few focus on the humanitarian plight of the Bambuti population.

No.	Association's Name	Director's Name	M/F	Tel No.	Intervention Zone	Areas of Intervention	No. of Members		
							M	F	Total
1	PROCOOPYBA	Jean-Pierre	M	+243 81224 4056	Irumu and Mambasa Territories	-Protection of Childhood -Protection against Gender-based Violence -Education -Washing facilities -Food Security -Health and Nutrition	21	4	25
2	CERCEP	Wayi	M	+243 811887 808	Irumu and Mambasa Territories	-Health and Nutrition -Protection of Childhood -Food Security -Development	15	6	21

- The Pygmy and Balese Cooperative Project (PROCOOPYBA)** which has its head office in Komanda centre and operates in the Irumu and Mambasa territories. This association raises awareness amongst the indigenous communities about hygiene and sanitation at the sites and in their places of encampment.
- Centre de Renforcement des Capacités et Encadrement Professionnel (CERCEP)** which has its head office in Bunia and operates in the Irumu and Mambasa territories. This Christian organisation provides emergency support for Bambuti communities during periods of violence, war, attack and looting by guiding them to safe sites and provide them with living and food kits for their survival. The organisation takes care of malnourished and unaccompanied Bambuti children. This centre provides support to some thirty or so Bambuti groups.

## Representative Sample of Community Members Interviewed and/or Included in Targeted Discussions

For this survey, a representative sample of 150 individuals was drawn up made up of 120 Bambuti people and 30 people from other social categories, including leaders of organisations working for the benefit of the Bambuti communities in the two health zones: the head doctors of the zones; the nurses in charge; representatives of civil society from each target zone; the heads of community groups, the heads of the villages; the heads of the IDP sites that have accommodated Bambuti communities; women's aid representatives; and youth leaders from each target zone.

### Table of participants based on gender

Health Zone	Members of the Bambuti Community		Other Social Categories		Total	% Total
	Men %	Women %	Men %	Women %		
Komanda	47 (45.63%)	35 (33.98%)	15 (14.56%)	6 (5.83%)	103	100%
Lolwa	25 (53.19%)	13 (27.66%)	5 (10.64%)	4 (8.51%)	47	100%
Total	72 (48%)	48 (32%)	20 (13.33%)	10 (6.67%)	150	100%

The table shows the breakdown of participants based on gender:

- In the Komanda health zone, in a variety of targeted discussions, roughly 46% of the Bambuti community was represented by those identifying as men, while those identifying as women constituted 34%. On the other hand, participants from other social categories, identifying as men were more involved than women, with a score of 14.6%.
- In the Lolwa health zone on the Bambuti side, it is those identifying as men who constituted the largest sample group, roughly 53%.

## Women and Girls in Bambuti Communities

Given that the Bambuti communities living in Ituri no longer live in their usual

encampments and have experienced multiple forms of abuse, women and girls expressed several needs during this survey which we have classified into five dimensions: the physical, psychological, social, economic and legal.

**Table summarising the Needs expressed by Bambuti Women and Girls living in Ituri**

Categories	Age Group	Type of Need	Details of Need
Women	18 to 59	Physical and Sanitary	Free Medical Care for pregnant women and assistance with sanitary kits during the menstrual period and childbirth.  Insurance for treatment of pregnancy-related illnesses.
		Psychological	Psychological counselling for women victims of sexual and gender-based violence.
		Social	To provide women with free access to various basic social services in particular the creation of literacy centres, creation of communal spaces for women.
		Financial	To teach and support Bambuti women in income-generating activities such as small businesses that they would be able to run themselves, and to create small markets in their different camps to facilitate the sale of their rural products from their hunting and gathering.  To initiate <b>Solidarity Mutuals (MUSO)</b> and some <b>Association Villageoise d'Epargne et de Crédit (AVECs)</b> – or Village Credit and Saving Associations as well as agricultural cooperatives.
Girls	12 to 17		To advocate for compensation for harm done to them as victims and to provide legal assistance when needed.
		Physical	Free medical care for pregnant women and assistance with sanitary kits during menstruation and childbirth.
		Psychological	Psychological counselling for victims of sexual and gender-based violence.
		Social	Enable the schooling of young girls and to integrate them into training centres for trades such as tailoring and sewing, weaving and upholstery.
		Financial	Support for income-generating activities such as small businesses that they would be capable of doing.
		Legal	To advocate for harm done to them as victims and to provide legal assistance when needed. To encourage community-based justice and the establishment of transitional justice systems.

## Problems and Demands

*"If the forest dies, we will die too, because we are the people of the forest"*  
– a Bambuti person in an interview with the people conducting this survey at the Bandavilemba camp in the Walese Vunkutu chiefdomship, (9 km from Komanda centre).

Bambuti people above all are exposed to violence based on the current political situation and have suffered severely from ethnic conflict. However, they are also at risk from the environmental destruction of their ecosystems, as a result of logging practices, an industry that has seen significant growth in the DRC and contributed to the population growth of secondary towns and major deforestation. Sedentism – the forced settling of nomadic people – is desired by the government and is being accelerated by deforestation. This leads to problems of health, demographic imbalances, and conflicts between communities.

Additional social issues arise for the Bambuti communities when faced with expectations to conform to modern society's expectations:

- The failure of schooling policies results in a high illiteracy rate.
- Racism is experienced daily by the Bambuti people who are discriminated against prejudicially by public services such as hospitals, the judiciary system and schools.

## Conclusion:

The Bambuti people "[...] are nowadays located in the forest zones closest to the Bantu populations. As far as our needs are

concerned, the situation is, more or less, the same in all the encampments."<sup>3</sup> Bambuti people's lives are marked by multiple forms of marginalisation and they are not immune to 'global' influences. Their so-called 'progress' towards a sedentary agricultural way of life – schooling, for example, is one of the tools of a sedentary culture that is being imposed on them – does not change the levels of exclusion experienced by Bambuti communities in Ituri.

<sup>3</sup> Quotations from discussions with Bambuti community member.



Bambuti children learning hunting skills



A Bambuti family photo in the Mbeku-Mari camp









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Bambutu women doing household chores  
in the Bandiauku camp, Bandavilemba,  
Walese Vunkutu Chiefdomship