United Nations

E/C.19/2011/10



Economic and Social Council Distr.: O

Distr.: General 25 February 2011

Original: English

ADVANCE UNEDITED TEXT

Permanent Forum on Indigenous Issues Tenth session New York, 16-27 May 2011 Item 6 of the provisional agenda* Comprehensive dialogue with United Nations agencies and funds

Report of the Annual Meeting of the Inter–Agency Support Group on Indigenous Peoples' Issues (IASG)

Submitted by the World Health Organization

Summary

The 2010 meeting of the United Nations Inter–Agency Support Group on Indigenous Peoples' Issues (IASG) was convened in Geneva, Switzerland on 16 and 17 September. It was hosted by the World Health Organization in accordance with the IASG Terms of Reference and the practice established in 2002 of rotating the chairing of the Inter-Agency Support Group annually among its members. The theme of the meeting was *Indigenous Peoples' Health*.

* E/C.19/2011/1.

I.	Introduction
	A. Meeting objectives
	B. Participation and official opening
II.	The Health of Indigenous Peoples'
	A. Overview of indigenous issues in the UN system
	B. Presentations on health topics
	C. Good practices on addressing indigenous peoples' health
III.	Meeting of the IASG
	A. Feedback on discussion from previous day
	B. Review of UNPFII ninth session
	C. Discussion of UNPFII 2011 preparations
	D. Discussion on IASG tasks and priorities
IV.	Closure of the meeting

I. Introduction

1. The 2010 Inter-Agency Support Group on Indigenous People's Issues (IASG) meeting was convened in Geneva, Switzerland on the 16th and 17th September and hosted by the World Health Organization in accordance with the IASG Terms of reference and practice established in 2002 of rotating the chairing of the IASG annually among its members. Participants included IASG members, a wide range of WHO staff, as well as selected invited speakers. The theme of the meeting was *Indigenous Peoples' Health*.

2. The annual meeting was held on the eve of the follow up to the Millenium Development Goal (MDG) Summit and participants called for action to ensure that the last push for achieving the MDGs will contribute significantly to the improvement of indigenous health. Contributing factors to the alarming state of indigenous health worldwide were discussed and agreements were reached among the participants for follow-up in order to chart the way forward. A review of the United Nations Permanent Forum on Indigenous Issues (UNPFII) ninth session also took place¹, along with discussions on the preparations for 10th Session of UNPFII and the IASG tasks and priorities.

A. Meeting objectives

3. The objectives of the meeting were to:

- (a) Provide a forum for reviewing available data and ongoing experiences in relation to indigenous peoples' health worldwide and explore possibilities for increased collaboration among IASG members.
- (b) Explore and share good practices in addressing indigenous peoples' health to catalyze and inspire increased action in countries.
- (c) Review the status of implementation of recommendations of the IASG and UNPFII.

¹ Detailed information of the UNPFII ninth session is available at: <u>http://www.un.org/esa/socdev/unpfii/en/session_ninth.html.</u>

4. Agenda items included panels on selected health issues; review of the UNPFII's ninth session; preparation for the UNPFII's tenth session; indicators for advancing the rights of indigenous peoples; training and technical support, the regionalisation of interagency work, orientation and support by the IASG to new UNPFII members; coordination of key UN human rights mechanisms relevant to indigenous peoples' issues; knowledge management and information sharing.

B. Participation and official opening

5. Representatives of the following United Nations agencies, multilateral organizations, international financial organizations, governments and non-governmental organizations participated in the meeting: Fondo Indigena; Food and Agriculture Organization (FAO); First Nations and Inuit Health Branch at Health Canada; the Permanent Mission of Canada; International Fund for Agriculture Development (IFAD); International Labour Organization (ILO); International Organization for Migration (IOM); Māori Smokefree Coalition (NZ); Office of the UN High Commissioner for Human Rights (OHCHR); the Secretariat of the UNPFII; United Nations Children's Fund (UNICEF); United Nations Development Programme (UNDP); United Nations Educational, Scientific and Cultural Organization (UNESCO); the United Nations Environment Programme (UNEP); UN-HABITAT; UN Institute for Training and Research (UNITAR); United Nations Population Fund (UNFPA); World Bank; World Health Organization (WHO), including its Regional Offices for Africa (AFRO) and the Americas (AMRO/PAHO); World Intellectual Property Organization (WIPO); Joint United Nations Programme on HIV/AIDS (UNAIDS).

6. UNPFII members Mr Carlos Mamani Condori (Chair), Ms Victoria Tauli-Corpuz and Ms Liliane Muzangi Mbela also participated in the meeting. The Expert Mechanism on the Rights of Indigenous Peoples (EMRIP) was represented by José Carlos Morales (Chair).

7. The meeting was opened by Mr Ties Boerma, Acting Assistant Director-General, Information, Evidence and Research Cluster, WHO. He stressed WHO's commitment to improving indigenous

health and noted the challenge of absence of data collection in countries on indigenous health issues. The keynote address was delivered by Ms Michelle Kovacevic, Acting Assistant Deputy Minister, First Nations and Inuit Health Branch, Health Canada. She emphasized that community capacity development is a key component in addressing many of the health issues of indigenous peoples. She also stressed the importance of sharing best practices and experiences between countries as well as work on the international level with organizations on indigenous health issues. Mr Carlos Mamani Condori, Chair of UN Permanent Forum on Indigenous Issues (UNPFII), and Ms Laetitia Zobel, outgoing co- chair of the IASG , also provided remarks on behalf of UNEP and UN-HABITAT as outgoing co-chairs of the IASG.

II. The Health of Indigenous Peoples

A. Overview of indigenous issues in the UN system

8. Following the official opening, an overview of the UNPFII & IASG was provided by Sonia Smallacombe from the Secretariat of the UNPFII (SPFII). Subsequent presentations were made outlining specific policies, guidelines or experiences of UN agencies. These included:

- Antonella Cordone, IFAD, made a presentation on IFAD's long history of engagement with indigenous peoples focusing on loans and microgrants at the country level, as well as international advocacy and policy dialogue. This recently culminated in the approval of an IFAD policy which aims to enhance effective engagement with indigenous peoples in rural areas and empower them to overcome poverty by building upon their identity and culture.
- Regina Laub, FAO, made a presentation on a recent FAO policy on indigenous peoples' issues adopted in 2010. FAO is now looking towards its implementation, which may include the development of guidelines on how to integrate indigenous issues into FAO projects and programmes.

9. An overview of WHO's mandate to work on Indigenous Peoples' Issues was then given by Helena Nygren-Krug. She stated that WHO is mandated to devote special attention to indigenous peoples' health through a number of World Health Assembly (WHA) resolutions. In particular WHA resolution 54.16 (2001) requests WHO to strengthen partnership with indigenous peoples in all appropriate WHO activities.²

10 Myrna Cunningham from Fondo Indigena then concluded the panel discussion by providing an overview of the health of the world's indigenous peoples. The significant gap between the health of indigenous peoples and that of the general population was noted. She accredited the causes for the deficient state of health of the world's indigenous peoples to, among others, a lack of delivery of services and a failure to address the broader determinants of health. For example, the uncertainty of rights to land and related issues were mentioned as having negative repercussions on the health of indigenous peoples. The importance of disaggregated data was described as essential in order to make informed policy decisions to address health issues for indigenous peoples³.

B. Presentations on selected health topics

11. Two panels chaired by WHO were devoted to explaining a wide range of issues where indigenous peoples bare a disproportionate burden of adverse health conditions. During these discussions it was noted that interventions to address these issues need to be culturally sensitive and participatory. The ILO pointed to the range of provisions in the Indigenous and Tribal Peoples Convention, 1989 (No. 169) that address health specifically or implicitly. Presentations were made on the following issues:

• Tobacco use: Edouard Tursan d'Espaignet and Mia Bromley from WHO, presented statistics concerning the prevalence of tobacco use among indigenous peoples in Australia,

² For information on WHO's mandate and action taken on indigenous peoples' health, see: <u>http://www.who.int/hhr/activities/indigenous_peoples/en/index.html.</u>

³ An overview of her findings are outlined in the 2009 UN publication, *State of the World's Indigenous Peoples*, Chapter 5: Health, <u>http://www.un.org/esa/socdev/unpfii/documents/SOWIP_web.pdf</u>.

Canada, New Zealand and parts of Latin America as well as examples of successful national interventions.

• Violence and injury: Christopher Mikton, WHO, addressed violence and injury as a leading cause of mortality and morbidity among indigenous peoples. These are preventable upon the implementation of strategies that build partnerships, provide training, funds, and technical assistance, are culturally sensitive and avoid patronizing, discriminating or stigmatizing indigenous peoples.

• Suicide: Alexandra Fleischmann, WHO, discussed the often stated elevated suicide rates among indigenous communities in comparison to the general population. Effective public health interventions for suicide prevention are based on the following grouping:

i.Universal level: reduction of access to means of suicide (pesticides, firearms etc.), reduction of availability of alcohol, responsible and "deglamourized" media reporting;ii.Selected level: treatment of people with mental, neurological and substance use

disorders and;

iii.Indicated level: interventions to follow-up on suicide attempters.

Progress on the study on Indigenous Adolescents Suicide was presented by Esther Ruiz Entrena, UNICEF. In order to follow up on the UNPFII recommendation to the IASG regarding the need to hold a seminar on the polices and practices to prevent suicide among indigenous children, adolescents and young people, UNICEF decided that it is first necessary to conduct research on the situation of suicide among this group from cultural and collective perspectives.

Funding projects addressing indigenous health were presented by Antonella Cordone,
IFAD. Experiences were shared from micro projects financed through the IFAD Indigenous
Peoples Assistance Facility (IPAF). Key aspects of the approach taken in these projects

were culturally oriented solutions to health issues, the use of traditional knowledge and local resources and awareness raising.

• Research, measurement and analysis issues on indigenous health: Ritu Sadana, WHO, highlighted the upcoming *World Health Report 2010* on health systems financing. A review of health coverage for indigenous populations in Australia, Canada, New Zealand and USA demonstrated large disparities between indigenous peoples and the general population in terms of out-of-pocket payments and access to private health insurance. In advancing towards universal health coverage, country specific approaches to research, measurement and analysis were considered essential, as well as collaborative partnerships with indigenous peoples based on respect and trust.

• Reproductive Health and Research: Sheryl van der Poel, WHO, presented on safeguarding reproductive rights and addressing barriers to care - achieving empowerment and equity to meet fertility intentions of indigenous peoples.

• Sexual and reproductive health: Sonia Martinelli-Heckadon, LACRO/UNFPA and Jaana Keitaanranta, IFAD, discussed a collaborative IFAD/UNFPA project for the Ngöbe-Buglé territory and adjoining districts in Panama to improve sexual and reproductive health and rights of indigenous peoples through the promotion of gender equality, community empowerment and the development of a reproductive healthcare model. This healthcare model was aimed at addressing the four delays; delay to recognize signs of complications; delay to decide to go to the health services; delay to get to the health service; delay to receive proper quality of care. In the stages of implementation the following essential components were discussed: an intercultural approach to reproductive health; a gender perspective and human rights based approach; community involvement; and political advocacy among national, local and traditional authorities.

 HIV/AIDS and Health Systems: Esther Ruiz Entrena, UNICEF, indicated that priority is given to Preventing Mother-to-Child Transmission (PMTCT) and rapid testing and to HIV prevention among indigenous adolescents and young people in the Latin American Region.

• Tuberculosis (TB): Elisabetta Minelli, WHO, stated that in the few industrialized countries where disaggregated data is available, TB incidences and mortality rates are several times higher among indigenous peoples than the general population. In countries and regions for which such data is not available the inequities may be higher still. During the past two years consultations with representatives of indigenous communities and TB experts have resulted in the creation of the Global Indigenous Stop TB Initiative (GISI) where WHO and Stop TB Partnership are represented in the Steering Committee.

• Yaws among Pygmies in the Central Africa region: Kingsley Asiedu, WHO, discussed a UNICEF/WHO initiative in the Congo and Cameroon to combat the high prevalence of yaws in this region. Although yaws is an easily preventable disease, challenges to treatment

were raised, including the fact the pygmies in the central African region are a neglected peoples with limited geographical access; the general lack of political will to tackle the social and health problems of the population; and inadequate funds.

• Traditional medicines: Zhang Qi, WHO, discussed the new trend of traditional medicines being used in developed and developing countries for primary, complementary or alternative healthcare.

C. Good practices on addressing Indigenous Peoples' Health

12. The Maori Smokefree Coalition (NGO) chaired the third session designated to the discussion of good practices in addressing indigenous peoples' health. Presentations included examples of a number of programs aimed at improving indigenous health outcomes:

• Sonia Martinelli, LACRO/UNFPA made a presentation on UNFPA's experience with good practices for sexual and reproductive health among indigenous communities in Latin America. The importance of understanding what the concept of health means to an indigenous community is essential, as was the need for a continuous dialogue between conventional medicine and traditional medicinal knowledge.

• Itziar Gomez Carrasco, UNESCO, made a presentation on culturally appropriate HIV and AIDS responses that entail a *process* of engagement with indigenous communities. The process is gender-sensitive, human-rights based and built on a thorough analysis of the cultural and social specificities of the communities concerned (for example, poverty, marginalization, lack of political and social power, limited access to health care and geographical isolation). Toolkits designed to support the development of culturally appropriate HIV and AIDS programmes, including an interactive e-learning programme and a publication "We are all in the same boat!" to address HIV and AIDS related stigma and discrimination were shared⁴.

⁴ For more information see, <u>www.unesco.org/culture/aids</u>.

• Cristina Leria, WHO AMRO/PAHO, discussed PAHO's strategies aimed at improving health conditions of indigenous peoples in the Americas that have a multidisciplinary approach, establish adequate legal frameworks that prioritize the development of indigenous peoples and consolidate intra and inter-sectoral cooperation⁵. Guiding principles of the health of indigenous peoples initiative included: the need for a holistic approach to health; the right of indigenous peoples to self-determination; respect for and revitalization of indigenous cultures; reciprocity in relations and the right of indigenous peoples to systematic participation.

13. The meaning of good practices was discussed and experiences were shared. Jason Sigurdson, UNAIDS, discussed key lessons from its experiences with respect to good practices for HIV/AIDS issues: the importance of focusing on capturing the broadest possible range of good outcomes, for example not only measuring good outcomes based on reductions in infections but also reduction in stigma; the importance of working in partnership with the community and the sharing of knowledge and information. OHCHR underscored the importance of indigenous rights informing good practices. The ILO highlighted the adoption of the HIV and AIDS Recommendation (No. 200) in June 2010 as an important instrument that could be used in this context. The panel concluded by recommending that the IASG, under the leadership of WHO, develop a guide on indigenous health which would include good practices and be informed by indigenous rights principles such as participation, cultural sensitivity and self-determination.

14. Liliane Muzangi Mbela, (UNPFII) provided a closing address where she emphasized the importance of the intercultural approach, disaggregated data and the role of champions to address issues surrounding indigenous peoples' health.

⁵ For more information on these strategies see, <u>www.paho.org.</u>

III. Meeting of the IASG

A. Feedback on discussion from previous day

15. The SPFII summarized key findings as follows: the importance of UN agencies having a framework or policy on indigenous peoples, the challenge of identification of indigenous peoples in many countries and the need to develop standardized data collection methodologies and to support countries in collecting data on appropriate indicators.

B. Review of PFII ninth session, April 2010

16. The SPFII presented recommendations from previous UNPFII sessions. Agreed actions included the following:

- UNFPA will provide details of the UNFPA(LACRO)/IOM studies involving indigenous female migrants. IASG members will provide information regarding the migration of indigenous women within and beyond national borders to the Secretariat of UNPFII which will investigate these studies and inform the IASG accordingly⁶.
- All IASG members are requested to review the report on *Indigenous Peoples and Forests* which is due to be circulated in December 2010⁷.
- UNEP to provide an update to IOM on the discussions between UN-HABITAT and IOM regarding the nexus between indigenous peoples and migration⁸.
- Reporting on UNFPII recommendations, made to individual agencies and not just the IASG as a whole, will be added as a standing item on the agenda of future UNPFII and

⁶ The UNPFII recommended various initiatives in order to address the lack of reliable data on the issue, para. 12, Report on the third session (2004): *Indigenous Women*.

⁷ The UNPFII appointed Ms. Tauli-Corpuz as the Special Rapporteur to prepare and widely circulate reports on relevant thematic issues relating to sustainable development, para. 13 and 14, Report on the sixth session (2007); *Territories, Lands and Natural Resources*.

⁸ The UNPFII requested further inter-agency cooperation and collaboration regarding data collection and case studies on indigenous peoples and migration in order to promote capacity-building projects dealing with the migration of indigenous peoples, para. 17, Report on the fifth session (2006): *The MDGs and indigenous peoples: Re-defining the MDGs*.

IASG meetings so that all IASG members can come prepared to provide an update on progress⁹.

- The SPFII will follow up with UNAIDS to attend future IASG and UNPFII meetings.
- UNICEF to provide information to IASG members on working successfully with children and youth¹⁰. During these discussions, UNDP, IFAD and UNFPA mentioned surveys being carried out by the respective agencies with a strong focus on youth. UNEP also reported working with indigenous youth experts. UNICEF, in partnership with WHO and UNFPA, to take the lead on the work around indigenous children and youth¹¹.
- IFAD to identify a mechanism for identifying training opportunities¹².
- The development of an international network on gender involving IASG including UNFPA, IFAD and UNICEF was recommended. WHO AMRO/ PAHO reported on an existing group that convenes on gender¹³. UNFPA is to disseminate a technical note on gender.
- OHCHR will circulate the terms of reference for the UN Indigenous Peoples' Partnership (UNIPP)¹⁴.

C. Discussion of UNPFII 2011 preparations

⁹ The UNPFII welcomed this initiative to ensure that the recommendations of the Forum are implemented by UN bodies and organizations, para. 144, Report on the fifth session (2006), *The MDGs and indigenous peoples: Re-defining the MDGs*.

¹⁰ Para 7, second session (2003): "Indigenous Children and Youth".

¹¹ The UNPFII recommended that the IASG discuss policies and best practices for engaging indigenous youth and children on prevention of suicide among them and report back to the Forum, para 96, Report on the fourth session (2005): *MDGs and Indigenous Peoples with a focus on Goal 1 to Eradicate Poverty and Extreme Hunger, and Goal 2 to achieve universal primary education*".

¹² The UNPFII welcomed the UN system's to support the UN Development Group's guidelines for indigenous peoples' issues with a programme of action. with a view to bringing the UN's normative framework on indigenous peoples to the field level, para. 103, Report on the seventh session (2008): *Climate change, bio-cultural diversity and livelihoods: the stewardship role of indigenous peoples and new challenges.*

¹³ The UNPFII recommended that relevant UN bodies and agencies, states and indigenous peoples conduct assessments of the extent to which they have advanced the recommendations of the Forum on indigenous women, utilizing the framework of the Declaration, as set out by the International Indigenous Women's Forum. Action for the immediate implementation of these recommendations is required by all, para 33, Report on the Eighth Session (2009).

¹⁴ Para. 146, Report on the ninth session (2010): "Indigenous peoples: development with culture and identity; articles 3 and 32 of the United Nations Declaration on the Rights of Indigenous Peoples".

17. WHO chaired the discussion on preparations for the UNPFII tenth session that is due to be held in New York, USA 16 - 27 May, 2011. The SPFII advised the session will review three areas: economic and social development, the environment and Free, prior and informed consent, and have a geographical focus on Central and South America and the Caribbean. During the session, a report on the UNPFII's visit to Columbia (2010) will be presented.

18. IASG members agreed to promote the Earth Summit (Rio+20) in 2012 to ensure strong indigenous representation; the SPFII to provide an update on the UNPFII mission to Paraguay and Bolivia.

D. Discussion on IASG tasks and priorities

19. OHCHR chaired the discussions regarding the use of indicators in order to advance the rights of indigenous peoples in light of a technical workshop co-organized with SPFII and ILO¹⁵ on this issue. The importance of developing indicators that are not in isolation of governments was noted as was the need to include indigenous specific indicators on issues of land use, language vibrancy, sustainability and customary resources.

20. IFAD chaired the session on training and technical support. UNITAR presented on their peacemaking and conflict prevention programme¹⁶. Reports regarding current training programmes, fellowships and other opportunities were offered by the SPFII, OHCHR, ECLAC, IFAD, ILO and Fondo Indigena. The OHCHR requested expressions of interest from agencies willing to mentor young indigenous peoples in the context of their fellowship program. The importance of providing training and technical support to young indigenous people was recognized among IASG members.

21. IFAD chaired the discussion on regionalization of interagency work. UNICEF and WHO AMRO/PAHO presented information on the development of regional structures in Latin America. These were mentioned as being a potential model for the development of regional structures elsewhere, particularly in the African region. UNEP and the ILO agreed to prepare terms of

¹⁵ The technical expert workshop, co-organized by OHCHR, ILO and the SPFII was held on 20-21 September 2010. The aim of the workshop was to take stock of the various efforts to develop indicators on indigenous peoples` health.

¹⁶ <u>http://www.unitar.org/pmcp</u>.

reference for the regionalisation of work in Africa to present at the next IASG meeting in 2011. UNICEF suggested that each agency commit to adopting a regional approach.

22. IFAD volunteered to collate and disseminate a document containing the 12 month work plans of IASG members on indigenous issues in order to facilitate information sharing with regard to training and program initiatives.

23. IFAD also chaired the session on orientation and support by the IASG to new UNPFII members. It was agreed that new UNPFII members would be well served by participating in orientation sessions during the UNPFII session in New York. Further, it was suggested that the IASG pool resources to increase participation of indigenous peoples in the UNPFII.

24. The OHCHR and the EMRIP lead the discussion on the coordination of key UN human rights mechanisms relevant to indigenous issues. The chair of the EMRIP explained the interaction and opportunities for further synergy and coherence between EMRIP¹⁷, the UN Special Rapporteur on the Rights of Indigenous Peoples¹⁸ and the UNPFII¹⁹.

25. With respect to coordination, knowledge management and information sharing, Fondo Indigena provided an overview of their work. Myrna Cunningham noted the importance of strengthening traditional institutions and building a relationship between the government and the indigenous community. In moving forward she stressed the need for the WHO to develop a set of criteria or a compilation of good practices setting out how governments can improve indigenous peoples' health based upon human rights principles such as participation, equality and self-determination.

IV. Closure of the meeting

26. Members of the UNPFII and the IASG thanked WHO for the substantive nature and the high quality preparations of the meeting as well as the efficient and friendly organizational arrangements.

¹⁷ http://www2.ohchr.org/english/issues/indigenous/ExpertMechanism/index.htm

¹⁸ http://www2.ohchr.org/english/issues/indigenous/rapporteur

¹⁹ http://www.un.org/esa/socdev/unpfii/

27. The IASG recognized the work of Elsa Stamatopoulou, former chief of the Secretariat of the UNPFII, for all her dedication and tremendous support to the IASG.

28. The IASG congratulated FAO for the adoption of their policy on Indigenous Peoples in 2008.

29. Rüdiger Krech (WHO) thanked the UNPFII, IASG members and the interpreters for their participation and colleagues in the Department of Ethics, Equity, Trade and Human Rights (ETH) for organizing this meeting. Carlos Mamani Condori (UNPFII) thanked WHO for hosting the meeting and recognized that the IASG meeting provided a forum to focus on the important issue of indigenous peoples' health. Mr Mamani stated that the UNPFII looks forward to working closely with the IASG to take forward the recommendations and actions agreed upon.