



CHAPTER V HEALTH

Highlights

Alarming levels of diabetes. Worldwide, over 50 per cent of indigenous adults over age 35 have type 2 diabetes and these numbers are predicted to rise. In some indigenous communities, diabetes has reached epidemic proportions and places the very existence of indigenous communities at risk.

Life expectancy up to 20 years lower. Indigenous peoples suffer from poorer health, are more likely to experience disability and reduced quality of life and ultimately die younger than their non-indigenous counterparts. The gap in life expectancy between indigenous and non-indigenous people in years is: Guatemala 13; Panama 10; Mexico 6; Nepal 20; Australia 20; Canada 17; New Zealand 11.

Poverty, tuberculosis and lack of treatment. Tuberculosis, a disease that primarily affects people living in poverty, affects at least 2 billion people in the world. As a result of poverty, tuberculosis continues to disproportionately affect indigenous peoples around the globe. While programmes have been designed to combat tuberculosis, they often do not reach indigenous peoples because of issues related to poverty, poor housing, a lack of access to medical care and drugs, cultural barriers, language differences and geographic remoteness.

Poor levels of health, acutely felt by indigenous women. Indigenous peoples experience disproportionately high levels of maternal and infant mortality, malnutrition, cardiovascular illnesses, HIV/AIDS and other infectious diseases such as malaria and tuberculosis. Indigenous women experience these health problems with particular severity, as they are disproportionately affected by natural disasters and armed conflicts, and are often denied access to education, land, property and other economic resources. And yet they play a primary role in overseeing the health and well-being of their families and communities. In addition, as the incidence of other public health issues such as drug abuse, alcoholism, depression and suicide increases, urgent and concerted efforts are needed to improve the health situation of indigenous peoples.

Poverty and malnutrition. Poor nutrition is one of the health issues that most affects indigenous peoples around the world. In addition to circumstances of extreme poverty, indigenous peoples suffer from malnutrition because of environmental degradation and contamination of the ecosystems in which indigenous communities have traditionally lived, loss of land and territory and a decline in abundance or accessibility of traditional food sources.

Self-determination, collective rights, crucial to indigenous health. To address the root causes of indigenous peoples' health problems, there must be full recognition and exercise of indigenous peoples' collective rights to communal assets and self-determination. Many mental health issues such as depression, substance abuse and suicide have been identified as connected to the historical colonization and dispossession of indigenous peoples, which has resulted in the fragmentation of indigenous social, cultural, economic and political institutions.

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Health systems appropriate for the indigenous context. Models of health care must take into account the indigenous concept of health and preserve and strengthen indigenous health systems as a strategy to increase access and coverage of health care. This will demand the establishment of clear mechanisms of cooperation among relevant health care personnel, communities, traditional healers, policy makers and government officials in order to ensure that the human resources respond to the epidemiological profile and socio-cultural context of indigenous communities.

** More information and data on specific countries is available in the publication and regional fact sheets.*

The State of the World's Indigenous Peoples was authored by seven independent experts and produced by the Secretariat of the United Nations Permanent Forum on Indigenous Issues.

For more information, see: www.un.org/indigenous

