Calls for Indigenous status to be included in reporting against Sustainable Development Goals

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Indigenous people need to be prioritised in the fight against non-communicable Diseases (NCDs).

Alongside the World Health Organisations (WHO) 72nd World Health Assembly in Geneva, Switzerland, the Indigenous Working Group (IWG) of the World Federation of Public Health Associations (WFPHA) brought together people from around the world to discuss Indigenous NCDs.

NCDs, otherwise known as chronic diseases, contribute to 70% of deaths globally. Indigenous people, however, often carry a higher burden of these diseases. What this means is that Indigenous peoples life expectancy is anywhere between 5 and 10 years less than non-Indigenous people.

The workshop included a diverse range of speakers from around the globe; Professor Laetitia Rispel from South Africa, President of the WFPHA, Mr Adrian Te Patu from New Zealand Co-Chair of the IWG and member of the WFPHA Governing Body, Mr Patrick Mwesigye, Founder of the Uganda Youth and Adolescent Health Forum and from Australia Ms Summer May Finlay, Co-Vice Chair of the IWG and Aboriginal and Torres Strait Islander Vice President of the Public Health Association of Australia.

The speakers talked about a range of topics, including the significant burden of disease, Indigenous-led solutions, the impact of racism and the need for Indigenous data collection.

Mr Adrian Te Patu, Co-Chair of the Indigenous Working Group and member of the WFPHA Governing Council, recognised the burden of disease Indigenous people carry with a specific mention of mental health and wellbeing.

“Indigenous people carry a heavier burden of disease than most of the people in their communities. The biggest killers of people in the world are NCDs; therefore, the seriousness of these diseases are accentuated in Indigenous populations,” said Mr Te Patu.

Ms Finlay, who is undertaking a PhD with a focus on Indigenous data, explained why identifying Indigenous people in data set is critical in addressing Indigenous NCDs.

“Indigenous data is required to understand the prevalence of NCDs within local communities so specific, community-based solutions can be generated.

Data isn’t just about prevalence, it’s also about recognising that Indigenous peoples cultures are unique; therefore, culture needs to play a key role in the development of solutions,” said Ms Finlay.

It is this alarmingly high burden of disease, low life expectancy and the need for cultural solutions which is why the workshop called for specific Indigenous reporting under the World Health Organisations Transforming our world: the 2030 Agenda for Sustainable Development. The Sustainable Development Agenda includes 17 goals and states “that no one will be left behind”.
Mr Mwesigye believes that to ensure that Indigenous people are not “left behind” Indigenous people must be part of the solutions and implementation at the global and state level.

Professor Rispel, recognised that to leave no one behind, there needs to be a recognition of the unique situations contributing to Indigenous NCDs.

“In many setting in Africa, South America and Asia Indigenous people are vulnerable in several ways. In addition to the NCDs, Indigenous populations are relatively young; they also face an increased risk of childhood infectious disease. Indigenous people also experience unequal access of power, issues of gender and historical context of subjugation and oppression,” said Professor Rispel.

Adjunct Associate Professor Carmen Parter, Co-Chair of the Indigenous Working Group, and co-facilitator of the workshops believes that relationships are a critical ingredient in the fight against Indigenous NCDs.

“Relationships are critical to working intersectorally with Indigenous and non-Indigenous partners to address issues which contribute to Indigenous NCDs,” she said

It was clear from the collective dialogue that Indigenous NCDs needs to be a priority universally.

Ms Emma Rawson, Co-Vice Chair of the IWG and co-facilitator called the day a great success.

“It’s heartening to see the enthusiasm of the participants in their desire to support putting Indigenous NCDs on the global agenda. Part of that success was the attendance of the significant global experts and the up and coming public health leaders including our interns from the WFPHA,” she said.

Mr Te Patu agreed.

“Most NCDs for Indigenous people are preventable therefore NCDs are too important not to be a high priority for our Indigenous working group,” he said.

Mr Mwesigye also believes that Indigenous NCDs are a priority for the Indigenous Working Group and that Indigenous services are assets within communities. These services should be leading solutions.

“It’s also important that people work with Indigenous communities rather than for them,” said Mr Mwesigye.

Ken Wyatt, Australian Minister for Indigenous Health and Aged Care, opened the Workshop via video. Minister Wyatt had previously funded the IWG, expressed his continued support for the IWG and the work they are undertaking.

For more information about the IWG of the WFPHA check out our website here. For more Information about Indigenous NCDs check out our website here.

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