

**EXPERT MECHANISM ON THE UNITED NATIONS RIGHTS OF INDIGENOUS
PEOPLES, GENEVA, 11-16 JULY, 2016**

Presented by Vonda Malone

Thank you for the opportunity to speak at this session. Acknowledgements to all indigenous representatives present and elders.

Background - Torres Strait

I speak here today on the health status of the Torres Strait Islander and Aboriginal people of the Torres Strait region. This region is the only part of Australia that shares an international border to Papua New Guinea and consists of small isolated island communities.

Health Status

Torres Strait Islanders have the highest prevalence of type 2 diabetes and avoidable chronic disease in Australia, with one-third of the adult population affected. In the Torres Strait we are now seeing children as young as 5 years old being diagnosed with type 2 diabetes and an increase in gestational diabetes. It is well known that indigenous Australians suffer from poorer health than compared to non-indigenous Australians. This was confirmed in 2012 when the United Nations stated that indigenous Australians have the worst life expectancy of any indigenous people in the world. Indigenous Australians experience very high prevalence, morbidity and mortality from chronic health conditions such as diabetes, cardiovascular, renal and chronic respiratory disease as our brothers and sisters from New Zealand, Canada and the Pima Indians.

The Australian Governments Close the Gap initiative to address health and life inequalities in indigenous people is not reaching those that is in most need, such as the remote island communities of the Torres Strait. It is real, my people are burdened with chronic disease and continue to pass away 15-20 years earlier than our non-indigenous counterparts. Indigenous peoples living, on country, in remote communities are more likely to experience much higher rates of avoidable hospital admissions. We are challenged by our geographic isolation impeding on the social determinants of health that simply cannot meet the increasing health needs of community members. In addition the increasing risk of tropical diseases such as Tuberculosis and blood borne viruses stemming from our neighbouring country Papua New Guinea places our community members at higher risk and inevitably threat to Australian population at large.

The level of investment verses the health outcomes is not closing the gap.

Recommendation

Therefore a more robust model of primary health care service is required to support a wellness model.

To address indigenous specific health issues we seek support from the United Nations and the World Health Organisations for:

1. The development of a body within WHO to focus solely on Indigenous health concentrating on primary and public health care.

2. Focus from WHO to address current public health epidemic in the Western Province of Papua New Guinea.
3. The development of an Indigenous run peak body in Indigenous health.
4. The development of an international workshop to progress these two objectives.