

UN Permanent Forum on Indigenous Issues, Twelfth Session, May 20th -31st, 2013
Global Indigenous Women's Caucus Statement by Aviaja Egede Lynge
Agenda Item 3(a) Health

Honorable Chairperson, Members of the Permanent Forum, Sisters and Brothers,
We, the Global Indigenous Women's Caucus, highlight and reaffirm the intercultural approach to health for all life forms on our Mother Earth. In the context of this Forum, Health must encompass more than a biological concept or physical measures; it must also include our spiritual, mental, emotional, physical, traditional and spiritual livelihoods as Indigenous peoples.

The Global Indigenous Women's Caucus adopted the following recommendations at the May 17, 2013 GIWC meeting:

1. We call upon all States take steps to ensure that decision-making processes regarding resource extraction are consistent with the principles of the United Nations Declaration on the Rights of Indigenous Peoples, in particular Article 29 and 32, under which the free and informed consent of indigenous peoples is required prior to the approval of any project affecting their lands or territories and other resources, including disposing of or storing hazardous substances on their lands. As the Permanent Forum observed its recommendation in paragraph 83 of the 10th Session report, there are documented increases in HIV, STIs and violence against youth and women in areas affected by extractive industries and hydropower projects. This is often accompanied by the development of military armed forces that aggress on the peace and security of indigenous peoples, impacting the totality of our health and wellbeing.
2. We reaffirm the need for UN organizations and States to pay special attention to the specific situation and needs of elderly indigenous women, as addressed in Paragraph 54 of the 5th Session of the Permanent Forum. In addition, we recommend research be conducted to assess the health impacts migration has on indigenous people, particularly as it relates the separation of families from each other and from their traditional lands and how it effects the health of older Indigenous women and their families. (E/C.19/2006/11)
3. The GIWC reiterates the increasing incidence of tuberculosis among Indigenous people, rates that are up to 20 to 30 times higher than those of non-Indigenous communities as cited in Paragraph 88 of the 7th Session. Additionally the GIWC requests an update regarding the Stop TB Partnership expert group meeting on the global situation of Indigenous peoples with tuberculosis, which was to include Indigenous health experts and encourage organizers to invite members of the Forum and call for similar additional meetings to address the ongoing crisis of TB in Indigenous communities.
4. Recognizing the grave impacts of environmental toxics on women's reproductive and intergenerational health around the world, we reaffirm the recommendations on health made at the 1st, 2nd, 3rd, 5th and 9th sessions of the Permanent Forum that all relevant UN entities, especially WHO, UNICEF and UNFPA, as well as regional health organizations and Governments fully incorporate a cultural perspective into health policies, programmes, and reproductive health services with the full and effective participation of Indigenous Peoples, aimed at providing

Indigenous women with quality health care. The GIWC further recommend that States include ethnic identification in vital statistics and health records and allocate more funding for intercultural services for maternal health. We also reaffirm the Permanent Forums recommendation that the roles of traditional midwives be re-evaluated and expanded so that they may assist Indigenous women during their reproductive health processes and act as cultural brokers between health systems and Indigenous communities' values and world views. Examples of culturally safe care would be offering health services in Indigenous languages, respecting traditional knowledge and Indigenous medicines. (E/2010/43-E/C.19/2010/15)

Additionally, we reaffirm the recommendation made in Paragraph 92 of the 3rd Session urging OHCHR to convene an international workshop on Indigenous peoples and the human right to health and culturally appropriate health care as well as Paragraph 89 which recommends that all relevant UN entities, as well as regional health organizations and Governments recognize the principle that health is a fundamental human right.

5. We urge the Permanent Forum to follow up on its recommendation that the Special Rapporteur on toxic waste conduct a report on the impacts of persistence of hazardous substances including organic pollutants and pesticides on indigenous peoples. Reports are also needed on the impact of climate change on the health of indigenous peoples, as well as the health effects on indigenous peoples caused by the nuclear fuel chain, which includes uranium mining, dumping of radioactive waste and the production of testing nuclear weapons.
6. We remind the Forum that the GIWC as well as Regional Indigenous caucuses have successfully advanced the issue of water as it relates to our health and spiritual well-being and reiterate the connection between extractive industrial development and assaults to our waters. We recall the GIWC position against Aquacide taken by the Forum in recommendation 53 of the 6th Session and recommendation 78 of the 7th Session. Aquacide refers to the killing of the waters by all forms of exploitation, commodification, toxics and pollution, and other assaults that impede or destroy Water's ability to nurture and support Life. This includes working to immediately halt Aquacide. In view of these developments, we recommend that the Forum work with UNED and UNDP to:
 - a. Support a world expert study on the influence of transnational corporations on states' decisions and policies regarding Indigenous Peoples' right to access to and the protection of Water from exploitation, commodification or diversion.
 - b. Review the platforms and engagement processes between transnational corporations and states and all other parties on water regulation and the treaties, land claims and any agreements that have been entered into with or impact Indigenous Nations and Peoples' lands and territories. Further, this review should include the direct participation of Indigenous Peoples at all levels and should take into consideration and uphold the sanctity of water for Indigenous Nations and Peoples.

In conclusion, we thank you for your serious consideration of full implementation of these recommendations, as Indigenous health and the rights to our own health mechanisms are essential to who we are as Indigenous Peoples.