



STATEMENT BY

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Excellencies, Ladies and Gentlemen:

In his report to be considered at the upcoming High Level Meeting on AIDS, the Secretary General notes and I quote: “When the AIDS epidemic was first detected 25 years ago, few could have imagined the devastating impact it would have on our world... In the hardest-hit countries, the very foundations of society, governance and national security are being eroded, stretching traditional safety nets to the breaking point and leading to social and economic repercussions that are likely to span generations” End of quote.

The AIDS epidemic is no longer just a health issue – it is a major development challenge affecting all nations and communities. At this session of the Forum, attention is focused on the impact of the MDGs on Indigenous communities recognising that these communities must be active partners in development strategies and programmes in order to ensure their national success. Today, UNAIDS is honoured to be part of this dialogue with the Forum and to contribute meaningfully to your deliberations with a report on the impact of AIDS on indigenous populations. This report provides background information and analysis of key factors influencing vulnerability and the impact of HIV and AIDS among indigenous communities. In drafting the report, we acknowledged on one hand the arguments that the absence of data on indigenous communities may lead to neglect and invisibility while on the other hand, collection of such data may fuel stigma and discrimination. What is clear and should be emphasized is that very few countries have reliable national surveillance data to indicate true levels of infections among indigenous peoples and therefore the UNAIDS report does not attempt to summarize global trends and patterns of HIV infection among indigenous peoples.

An analysis of the factors that impact on the vulnerability to HIV and AIDS among indigenous populations must consider the following:

- The economic disadvantage of and high poverty levels affecting most indigenous communities : those living in poverty are less likely to have access to education, health care and other social resources. Many factors linked to poverty and

deprivation of identity make indigenous persons more vulnerable to sexual exploitation, or to become victims of trafficking in women and children. Moreover, the absence of hope, associated with poverty, deprives many of the psychological and emotional resources to protect themselves and others against HIV infection.

- Geographic isolation of many indigenous communities with limited access to education, health and social services – a major obstacle to prevention messages as well as treatment reaching communities
- Marginalisation of communities from social, political and economic mainstream
- High imprisonment and drug and alcohol use rates
- Relatively low participation in policy making processes
- Specific problems faced by young indigenous persons
- Different approach to disease and systems of medicine
- Levels of general health care

UNAIDS, in its report, has recommended a number of areas in which proactive measures can be pursued. These include

- The engagement of the Forum and other partners in the global AIDS movement generally and the initiative on universal access to treatment, more specifically
- The engagement of the Forum with relevant UN agencies and partners in developing a set of resources highlighting effective approaches and best practices of HIV prevention and AIDS care in indigenous communities, particularly from the development world
- The Forum is encouraged to make a call for the development of an appropriate guidance paper to help national HIV surveillance systems include collection and inclusion of information based on ethnicity
- The Forum can advocate and bring their experience of promoting meaningful participation of indigenous persons in HIV policy and planning

UNAIDS looks forward to continued collaboration with the Forum.

I thank you.