



INTERVENTION OF KA LAHUI HAWAI'I AND NA KOA IKAIKA O KA LAHUI HAWAI'I

Ka Lahui Hawaii, P.O. Box 90417, Hon. HI., 96835-0417

Phone: (808) 386-1363, Fax: (808) 973-0988, email: kalahui@hotmail.com
www.kalahui.com

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Presenter: Lu'ukia Archer

Aloha mai kakou a mahalo i na alaka'i ma mua o keia halawai. Thank you for this opportunity to address the esteemed members of the Permanent Forum on Indigenous Issues. My name is Lu'ukia Archer and I am presenting this intervention on behalf of both Ka Lahui Hawaii and Na Koa Ikaika.

As indigenous peoples across the globe we have been subjected to the abuse of both our natural and human resources as a direct effect of colonization; this has led to numerous problems in all aspects of our existences, which is inclusive of increased health problems and greater adversity to accessing medical services. The current social and economic realities are the impositions of imperialist governments; it is now time to address these encumbrances and their resulting effects. This could be done through the empowerment of indigenous peoples to create holistic healing facilities that serve their own peoples rather than government regulated programs that dismiss and devalue traditional methods of healing.

Throughout the Pacific Basin, the health statistics reveal the acute needs of Indigenous Peoples. Generalized categories of need include but are not limited to mental health, the high incidences of cancer, and problems related to poor nutrition. Mental health problems are closely associated with substance abuse, including high drug, alcohol and tobacco use. Mental health issues also correlate to domestic violence (mainly toward women and children), high rates of depression and suicide, especially among our Indigenous men stemming directly from the forced assimilation into western culture that values capitalism, Christianity, and so-called democracy. Furthermore, the concentrated militarization of the Pacific is inextricably related to the high incidences of cancer (particularly breast, ovarian and leukemia in the numerous areas where

nuclear testing has occurred). Finally, dispossession of our lands and the lack of both natural and financial resources make it increasingly difficult to access traditional foods and medicines resulting in diabetes, heart disease, and obesity. In essence all of these problems are associated with high infant mortality rates in the Pacific.

These issues should be addressed collaboratively with the various U.N. agencies including: the World Health Organization, UN-Habitat, and the Food and Agricultural Organization. An example of how this collaborative effort of UN assistance could work would be for the UN-Habitat to develop an extended family and community health facility in partnership with Indigenous Peoples. Because our cultures are communally based and not focused on the individual this is a necessary component in all Pacific Basin communities. Moreover, as asserted by the Committee on Indigenous Health it is necessary for the FAO to link the situation of land rights, and land dispossession with the lack of food in order to better address health related problems due to poor nutrition, common amongst Indigenous Peoples.

In order to positively affect these health situations, it is vital for governments to empower Indigenous Peoples to provide necessary services within their own regions resulting in delivery systems that recognize certain cultural protocols. Indigenous Peoples will only truly benefit from health care services that observe these cultural attributes. In Hawaii, for example, programs to address HIV and AIDS based on models developed in the continental U.S. did not culturally resonate with our people. However, when education efforts through large community meetings and brochures left in public areas were abandoned and replaced with smaller, private family unit sessions guided by cultural practitioners, positive inroads were finally made.

We would like to make four constructive recommendations for the Permanent Forum to consider:

First, in recognition of the great diversity of peoples in the Pacific Basin and the thousands of nautical miles that separate our island groups, we suggest that the Permanent Forum work in concert with the World Health Organization to

provide mobile health care. In many of the undeveloped Pacific nations there are no clinics or hospitals and for a long time these peoples were dependent on a Red Cross ship to provide health care and dispense medicines. Now that this ship has been sunk in Bougainville harbor, there is no means to administer health care to the islanders and a mobile health care system is desperately needed.

Second, Indigenous health care must focus on providing direct and primary health services, by and for Indigenous Peoples that incorporates traditional healing methods. However, it is the government's responsibility to provide the necessary support and infrastructure to make this a reality.

Third, address the health care needs of Indigenous women, including reproductive rights, substance abuse treatment, domestic violence and molestation safe shelters and counseling. It is also important to strengthen the roles of women in indigenous communities because in turn the family unit and community at large are further sustained.

Finally, insure the decrease of high infant mortality rates by providing inoculation, immunization, and access to healthy foods. Because of past abuses where Indigenous children were used as test subjects for inoculations that had not been approved, we are calling on the World Health Organization to undertake a project that would research the safety of inoculations and immunizations utilized by states to protect the safety of indigenous children and peoples who are being immunized.

In conclusion, we would like to remind this body as well as the observer governments and transnational corporations that the administration of health services must be conducted only after informed consent, especially in the areas of medical and genetic research.

O wai, no me ka ha'aha'a Manalo.