



Addressee: Member States

Paragraph #94 Session #3 (2004)

Full Text

The Forum requests Governments to prepare reports on their experience and case studies as to how they are addressing indigenous people's health and the Millennium Development Goals, and to submit their reports to the Forum at its fourth session.

Comments

The Government of Guatemala reports the following on Goal 1 (Poverty Eradication) of the Millennium Development Goals:

The Guatemalan Fund for Indigenous Development conducts consultations with indigenous organizations and community representatives in order to give its work new direction. Projects supported by the Fund must, as a minimum requirement, include a gender perspective. The Fund's four programmes (education, social production, health and infrastructure) promote the rights of indigenous peoples, in accordance with the Peace Agreements. The projects funded under those programmes are designed to increase employment and job opportunities.

The Government of Norway reports the following:

The Sami population is entitled to health and social services on a non-discriminatory basis. The right defined in the Sami Act to be served in Sami language also applies in health and social services. The Patients Right Act 3-2 through 305 and the Health Personnel Act 10 underline the responsibility of personnel and administrative leaders to promote the best possible communication between patients and personnel. Interpreting services or

competence in Sami language and culture may for this reason be necessary within the services. Living up to this legal requirement in practice is, however, a difficult task also for municipalities with a large Sami population.

The principle of universality is central in the Norwegian welfare state and health services are usually comparatively inexpensive or free. In-patient hospital services are free of charge. Therefore, it has not been considered to establish separate services for the Sami population. The aim of the governmental policy is to develop equitable health and social services for the Sami population within the context of the ordinary public health care system in Norway. According to the "Equality and diversity: Government plan of action for health and social services for the Sami population in Norway 2002-2005", the services should be equitable, but adjusted to fit the needs of the Sami population. This requires support of resources institutions with special competence on Sami issues.

The government has a close dialogue with the Sami parliament on health issues.

The Ministry of Health support the Centre for Sami Health Research at the University of Tromsø. This center completed a survey on health and living conditions in Sami areas in 2004 and the survey will result in a series of research publications in the years to come. The data from the survey indicates that health of the Sami population is by large the same as the majority population, and in particular when compared with ethnic Norwegians living in the same areas. A majority of the Sami population live in areas where the general living conditions are below the national average. These areas are characterised by comparatively larger amount of cardiovascular diseases.

The Ministry of Health has taken initiatives to improve the community interpreting services. Furthermore, the Ministry of Health and the Ministry of Social Affairs will strengthen work on translating legislation and other information. New Acts are to be translated into Sami.

There are also documented problems of access to services due to geographical remoteness. As part of the National program for mental health the regional health authority for Northern Norway is developing specific mental healthcare institutions in Northern Norway into national mental health resource centers for the Sami population. Institutions in inner Finnmark have national responsibilities in this respect.

Area of Work

Health