

First Lancet global snapshot of indigenous peoples health released

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A world-first University of Melbourne-led study into the health and wellbeing of more than 154 million Indigenous and tribal people globally reveals the extent of work that needs to be done if the United Nations is



to meet its 2030 goals of ending poverty and inequality.

The Indigenous and tribal peoples' health (*The Lancet*-Lowitja Institute Global Collaboration): A Population Study, commissioned by Australia's Lowitja Institute, is the most comprehensive ever compiled by world health experts.

It brings together data from 28 indigenous and tribal groups across 23 countries - accounting for more than half of the world's native populations.

Lead author Professor Ian Anderson, Chair of Indigenous Education and Pro Vice Chancellor of Engagement at the University of Melbourne, said the key to the success of the report was in the international collaboration of 65 world-leading experts in Indigenous health.

"What was absolutely critical and unique to this project was being able to work with authors and contributors across the 23 countries," Prof Anderson said.

Romlie Mokak, chief executive of the Lowitja Institute, said the research represented an important milestone for the institute.

"The Lowitja Institute values the health and wellbeing of Aboriginal and Torres Strait Islander people, and we extend that purpose to our international global Indigenous family," Mr Mokak said.

"The study highlights the importance of global networks that bring together Indigenous health experts, academics and policymakers to effect positive outcomes for First Peoples. Providing leadership in this area is very important."

The study responds to the United Nations 2030 Agenda for Sustainable



Development signed in September 2015 with the stated aim to end all forms of poverty, fight inequalities and tackle climate changes, while ensuring that no one is left behind.

The participating countries included Australia, United States, Canada, New Zealand, Sweden, Norway, Denmark, Russia, China, India, Thailand, Pakistan, Brazil, Colombia, Chile, Myanmar, Kenya, Peru, Panama, Venezuela, Cameroon and Nigeria.

Researchers assessed data on basic population, life expectancy at birth, infant mortality, low and high birthweight, maternal mortality, nutritional status, educational attainment, poverty and economic status. They did not make cross-country comparisons.

Key findings and recommendations include:

- Health and wellbeing is generally poorer for Indigenous and <u>tribal peoples</u>, although the level of disadvantage varies across nations.
- Being Indigenous in a wealthy country does not necessarily lead to better outcomes
- National governments need to develop targeted policy responses to Indigenous health, improving access to <u>health</u> services, and Indigenous data within national surveillance systems.

More information: *The Lancet*, <u>www.thelancet.com/journals/lan ...</u> (16)00345-7/abstract

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