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Follow-up to the recommendations of the Permanent Forum**Analysis prepared by the secretariat of the Permanent
Forum on Indigenous Peoples****Note by the Secretariat***Summary*

The present report provides an analysis of the implementation of the recommendations of the Permanent Forum on Indigenous Issues on the high-level plenary meeting known as the World Conference on Indigenous Peoples; post-2015 development agenda; and youth self-harm and suicide. The present report is based on reports received from Governments, United Nations agencies, intergovernmental organizations and indigenous peoples' organizations.

* E/C.19/2015/1.



I. Introduction

1. The present report seeks to provide an analysis of the recommendations of the Permanent Forum on the high-level plenary meeting known as the World Conference on Indigenous Peoples; the post-2015 development agenda; and youth self-harm and suicide. This report provides an overview of the main topics, the status of the Permanent Forum recommendations and the ongoing work required at the local, national and international levels.

2. The high-level plenary meeting was held on 22 and 23 September 2014 at United Nations Headquarters. The purpose of the World Conference was to share perspectives and best practices on the realization of the rights of indigenous peoples, including pursuing the objectives of the United Nations Declaration on the Rights of Indigenous Peoples. The outcome document reaffirms the commitment of States to the Declaration and includes many of the priorities established by indigenous peoples' global preparatory process held in Alta, Norway, in June 2013. This was the first time a United Nations high-level meeting was held that focused solely on indigenous peoples' rights.

3. The outcome document of the United Nations Conference on Sustainable Development, held in Rio de Janeiro, Brazil, in 2012, *The future we want*, inter alia, set out a mandate to establish an open working group to develop a set of sustainable development goals for consideration and appropriate action by the General Assembly at its sixty-eighth session. It also provided the basis for their conceptualization. The outcome document gave the mandate that the sustainable development goals should be coherent with and integrated into the United Nations development agenda beyond 2015. One of the major challenges and shortcomings of the Millennium Development Goals was the invisibility of indigenous peoples in processes related to the Millennium Development Goals. The proposed sustainable development goals are accompanied by targets, and will be further elaborated through indicators focused on measurable outcomes. They are action oriented, global in nature and universally applicable. They take into account different national realities, capacities and levels of development and respect national policies and priorities. They build on the foundation laid by the Millennium Development Goals, seek to complete the unfinished business of the Millennium Development Goals and respond to new challenges. These goals constitute an integrated, indivisible set of global priorities for sustainable development. The sustainable development goals are of great importance to indigenous peoples in terms of their rights to their lands, territories and natural resources. Hence, indigenous peoples' vulnerabilities and strengths are important in this process.

4. Indigenous youth self-harm and suicide have reached high proportions and require urgent action. The risk factors for suicide for indigenous youth are similar to those for youth suicide in the general community. The factors that are different for indigenous youth are the effects of colonization, the dispossession from lands, territories and natural resources and governmental policies of forced assimilation, which cause acculturative stress and marginalization. Along with contemporary manifestations of discrimination, such as disproportionately high levels of poverty

and unemployment, may also contribute to the high rates of suicide.¹ The Forum is concerned that the issue of suicide for indigenous youth remains a major challenge.

II. Analysis of the recommendations of the Permanent Forum

A. High-level plenary meeting known as the World Conference on Indigenous Peoples

5. On 22 and 23 September 2014, the United General Assembly organized a high-level plenary meeting known as the World Conference on Indigenous Peoples.² The result of the World Conference was a concise, action-oriented outcome document³ that was prepared on the basis of inclusive, open and informal consultations with Member States and indigenous peoples. The outcome document was adopted by consensus at the opening of the first day of the World Conference.

6. The World Conference was the result of a decision of the General Assembly in 2010,⁴ to organize the World Conference on Indigenous Peoples, as well as the result of partnership, advocacy and mobilization between indigenous peoples and Member States, and the support of the United Nations system. As described by the President of the sixty-ninth session of the General Assembly, H.E. Sam Kutesa, “the process leading to this Conference has been unprecedented in the history of the Organization, as it has involved the active participation of indigenous peoples in its preparation, as well as the cooperation between Member States and indigenous peoples in the preparation of the outcome document.”⁵

7. Indigenous peoples were actively involved in every step of the process, from the negotiations and the adoption of a resolution detailing the organizational arrangements in September 2012 (General Assembly resolution 66/296), which was led by Mexico and an indigenous representative, the international representative of the Sami Parliament of Norway, through to the consultative process and consensus adoption of the outcome document facilitated by two Member State advisers, Liberia and Slovenia, and two indigenous advisers, Myrna Cunningham Kain and Les Malezer.

8. Indigenous peoples around the world participated actively in the World Conference and its preparatory process. They established the Global Coordinating Group⁶ to facilitate the participation of indigenous leaders, organization and institutions. They organized national and regional consultations and agreed to the Alta outcome document⁷ at the Global Indigenous Preparatory Conference held in Norway from 10 to 12 June 2013. This process set forth recommendations for the

¹ *State of the World's Indigenous Peoples*, United Nations publication, Sales No. 09.VI.13.

² General Assembly resolution 65/198.

³ General Assembly resolution 69/2.

⁴ General Assembly resolution 65/198.

⁵ See http://www.un.org/pga/220614_statement-world-conference-on-indigenous-peoples/.

⁶ The Global Coordinating Group was primarily responsible for lobbying for the full and effective participation of indigenous peoples in the preparatory processes leading up to, during and after the World Conference and for raising funds to ensure that the indigenous preparatory process is realized.

⁷ See A/67/994, annex.

World Conference that took into account the historical and current situation of indigenous peoples around the world.

9. In accordance with resolution 65/198, the President of the General Assembly conducted open-ended consultations with Member States and with representatives of indigenous peoples in June (interactive hearing) and three consultations (June, July and August) to obtain input for the key elements of the outcome document. The United Nations agencies, funds and programmes and the regional commissions of the United Nations also actively engaged in the process leading to the World Conference, with the Inter-Agency Support Group on Indigenous Peoples preparing thematic papers according to their mandates.

Role of the Permanent Forum on Indigenous Issues

10. The Permanent Forum on Indigenous Issues played a key role in the process leading to the World Conference by providing the space at its annual sessions to enable open and active discussions to inform and guide the discourse, and to maintain and build on the momentum for this historic event. The Permanent Forum strongly urged equal, direct and meaningful participation of indigenous peoples throughout all stages of the World Conference and equal partnership between Member States and indigenous peoples and that the Declaration on the Rights of Indigenous Peoples become the conceptual and normative framework for the outcome document.

11. Since its tenth session held in May 2011, the Permanent Forum has devoted plenary meetings to facilitate the exchange of views and recommendations on the organization and outcome of the World Conference. These sessions were led by the Forum with the engagement of the Office of the Presidents of the General Assembly. The recommendations stemming from those sessions are contained in the documents E/2011/43 (15 recommendations), E/2012/43 (22 recommendations), E/2013/43 (20 recommendations) and E/2014/43 (8 recommendations). Drawing on the discussions and information provided, the Forum made a number of recommendations to move the process forward and ensure a successful outcome of the high-level plenary meeting, known as the World Conference on Indigenous Peoples.

12. The tenth session of the Permanent Forum, held in May 2011, was the first opportunity for Member States, indigenous peoples and United Nations agencies to discuss their hopes and aspirations for the World Conference since the General Assembly decision to organize such an event. Drawing on the statements made, the Permanent Forum adopted 15 recommendations that emphasized the need to ensure the equal, direct and meaningful participation of indigenous peoples as set out in articles 18 and 19 of the Declaration on the Rights of Indigenous Peoples. The Forum also called upon the President of the sixty-fifth session of the General Assembly to appoint a facilitator to conduct open-ended consultations with Member States and indigenous peoples within the framework of annual sessions of the Permanent Forum, and the Expert Mechanism on the Rights of Indigenous Peoples and the Special Rapporteur on the Rights of Indigenous Peoples in order to determine the modalities for the meeting. Furthermore, the Forum recommended that the presidencies of the General Assembly at its sixty-sixth and sixty-seventh sessions convene one-day interactive dialogues with Member States and

representatives of indigenous peoples at the eleventh and twelfth sessions of the Forum.

13. At its eleventh session, in May 2012, the Forum welcomed the decision of the President of the sixty-sixth session of the General Assembly to appoint a State and an indigenous representative to conduct inclusive informal consultations on his behalf to determine the modalities for the World Conference, and conducted interactive dialogues with the participation of the President's two appointees. A key issue that continued to be of concern was the need to ensure the substantive participation of indigenous peoples at the World Conference. The Forum also welcomed the seven indigenous regional preparatory processes as important inputs to the Global Indigenous Preparatory Conference, held in Alta, Norway, in June 2013.

14. The Permanent Forum adopted 22 recommendations to guide the definition of the scope and modalities of the preparatory process and to guide the World Conference itself. These recommendations included the accreditation of indigenous nations, councils, parliaments and governments, and traditional governments, in order to entrench the principle of full and effective and direct participation of indigenous peoples. Furthermore, the Forum recommended to the President of the sixty-ninth session of the General Assembly to appoint Co-Chairs from Member States and indigenous peoples to preside jointly over the meeting of the World Conference. Also, the themes for the round tables of the World Conference should be decided by Member States and indigenous peoples. The Forum also recommended that the World Conference consist of plenary meetings, round tables and interactive dialogues, to be co-chaired by representatives of Member States and indigenous peoples.

15. At its twelfth session, in May 2013, the Permanent Forum adopted 20 recommendations that mainly focused on the organizational matters of the World Conference, including Co-Chairs; speakers, applying the criteria of regional representation of indigenous peoples, gender balance, inclusion of indigenous elders and youth, and inclusion of indigenous persons with disabilities. The recommendations also included suggestions for the content of the outcome document; the full and effective participation of indigenous peoples; and the appointment of a State representative and an indigenous peoples' representative to conduct inclusive informal consultations on behalf of the President of the General Assembly. The Forum also recognized the outcome that the Global Preparatory Indigenous Peoples' Conference held in Alta, Norway, would serve as the firm basis for the identification of specific themes for the round tables and panel discussions of the World Conference. Additionally, the Forum recommended the organization of the informal interactive hearing, which would be back-to-back with, but separate from, its thirteenth session to ensure those representatives attending the Forum were also able to participate in the informal interactive hearing to be organized before the end of June 2014, as called for in the modalities resolution. Finally, the Forum reiterated that indigenous peoples must have equal participation in the drafting of all documents of the World Conference, including the outcome document.

16. At its thirteenth session, in 2014, following its practice since 2011, the Forum convened a one-day dialogue on the World Conference and shared its concern at the lack of progress made to date in the informal consultations. The Permanent Forum was instrumental in providing the space and the venue for Member States,

indigenous peoples and the United Nations system to discuss the World Conference process at the global level on an equal footing. The Forum's recommendations were essential to the negotiation processes between Member States and indigenous peoples leading to the World Conference.

17. Under the leadership of the President of the General Assembly, the World Conference took place with the involvement of State and indigenous facilitators⁸ and advisers,⁹ the three United Nations mechanisms on indigenous peoples, the Global Coordinating Group and the group of States that supported the process of the Conference.

18. The United Nations system also provided support. The Department of Economic and Social Affairs of the United Nations Secretariat, where the secretariat of the Permanent Forum on Indigenous Issues is based, provided assistance to the President of the General Assembly and his advisers in the preparations for the World Conference. In addition, the Inter-Agency Support Group on Indigenous Peoples' Issues prepared nine thematic papers¹⁰ on the following issues: indigenous persons with disabilities; education; employment and social protection; health; lands, territories and resources; participation; sexual and reproductive health; and traditional knowledge, violence against indigenous women and girls. The General Assembly also expanded the mandate of the Voluntary Fund for Indigenous Peoples to assist indigenous peoples' participation in the World Conference. As a contribution, the Economic Commission for Latin America and the Caribbean launched the publication "Rights of indigenous peoples: achievements and challenges in the Latin American countries".¹¹

19. Discussions during the World Conference focused on the United Nations system, as well as three indigenous-specific mandates. One of the major issues that emerged was the need for coherence and coordination of the United Nations system. In this context, there was consensus by both Member States and indigenous peoples, supported by the United Nations agencies, on the need for United Nations system-wide coordination and coherence. In paragraph 31 of the outcome document of the World Conference, the General Assembly requested the Secretary-General to begin the development, within existing resources, of a system-wide action plan to ensure a coherent approach to achieve the ends of the Declaration on the Rights of Indigenous Peoples.

20. On 15 October 2014, the Secretary-General appointed the Under-Secretary General of the Department of Economic and Social Affairs, Wu Hongbo, as the senior official with the responsibility to coordinate and develop a system-wide action plan in cooperation with indigenous peoples, Member States and the Inter-Agency Support Group on Indigenous Peoples and to raise awareness on the rights of indigenous peoples at the highest level. Further, it is the responsibility of

⁸ The Permanent Representative of Mexico to the United Nations, Luis Alfonso de Alba, and the international representative of the Sami Parliament of Norway, John B. Henriksen.

⁹ The Permanent Representative of Costa Rica to the United Nations, Eduardo Ulibarri, the Permanent Representative of Liberia to the United Nations, Marjon V. Kamara, the Permanent Representative of Slovenia to the United Nations, Andrej Logar, and representatives of indigenous peoples, Myrna Cunningham Kain and Les Malezer.

¹⁰ Available from www.un.org/en/ga/69/meetings/indigenous/documents.shtml.

¹¹ Available from www.cepal.org/en/publications/guaranteeing-indigenous-peoples-rights-latin-america-progress-past-decade-and-remaining.

Member States, United Nations agencies and indigenous peoples to work together on the outcome document of the World Conference, to implement the Declaration on the Rights of Indigenous Peoples in order to advance the survival, dignity and well-being of indigenous peoples of the world.

B. Post-2015 development agenda

21. One of the main outcomes of the United Nations Conference on Sustainable Development, held in Rio de Janeiro in June 2012, was the agreement by Member States to launch a process to develop a set of sustainable development goals. The Conference did not elaborate specific goals, but it stated that the sustainable development goals should be limited in number and should be aspirational and easy to communicate. The goals should address in a balanced way all three dimensions of sustainable development and be coherent with and integrated into the United Nations development agenda beyond 2015. A 30-member open working group of the General Assembly was tasked with preparing a proposal on the sustainable development goals. The Open Working Group of the General Assembly was established on 22 January 2013 by decision 67/555 of the General Assembly. At the 2nd meeting of its thirteenth session, on 19 July 2014, the Open Working Group considered a proposal on sustainable development goals. These are built upon the Millennium Development Goals, which are due to expire in 2015. The Millennium Development Goals have been criticized for failing to make specific reference to indigenous peoples and capture their priorities for development and wellbeing. Further, indigenous peoples had little, if any, participation in the development, the implementation, the monitoring and the evaluation of the Millennium Development Goals. Thus, the sustainable development goals provide a unique opportunity to address those shortcomings of the Millennium Development Goals.

22. The Open Working Group on sustainable development goals, which includes Member States, United Nations agencies and nine Major Groups representing various sectors of society. Indigenous peoples are one of the Major Groups that have been contributing directly to the open working group discussions, particularly lobbying for recognition of culture as a pillar of sustainable development and that the post-2015 development agenda must be addressed consistently with the minimum standards established by the Declaration on the Rights of Indigenous Peoples.

23. In July 2014, the open working group proposed a draft list of 17 sustainable development goals. They include two specific goals that relate specifically to hunger and disease: Goal 2, to end hunger, achieve food security and improve nutrition; and Goal 3, to promote sustainable agriculture and ensure healthy lives and promote well-being for all at all ages. Under the goal relating to hunger, the targets for the year 2030 range from ensuring access of all people, particularly the poor and vulnerable, to safe, nutritious and sufficient food all year round and ending all forms of malnutrition. It also includes doubling the agricultural productivity and the incomes of small-scale food producers, particularly women and indigenous peoples, among others, and ensuring sustainable food production systems and implementing resilient agricultural practices.

24. Similarly, the targets under the goal on health include reducing global maternal mortality ratio, ending preventable deaths of newborns and children under

the age of five years and ending epidemics of AIDS, tuberculosis, malaria and other communicable diseases. Also included is reducing premature mortality from non-communicable diseases by one-third and ensuring universal access to sexual and reproductive health-care services, by 2030. Further, the aim is to strengthen prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol. Other aims include achieving universal health coverage for all and increasing substantially health financing and the recruitment, the development and the training and retention of the health workforce in developing countries, among other targets.

25. Indigenous peoples constitute 15 per cent of the world's poor and approximately one third of the world's 900 million extremely poor rural people. In addition to circumstances of extreme poverty, indigenous peoples suffer from malnutrition because of environmental degradation of their ecosystems, loss of their lands and territories and the decline in abundance or accessibility of traditional food sources. It is now emerging that indigenous peoples' overall well-being and cultural continuity are directly related to their ability to continue their traditional lifestyles, including food and health practices. Indigenous peoples who have maintained their traditional livelihoods and food gathering practices and have access to quality intercultural health care often fare better than others.¹

26. Nonetheless, indigenous peoples face huge disparities in terms of hunger and malnutrition and access to and quality of health care, even in developed countries. As a result, they are more likely to experience reduced quality of life and ultimately die younger than their non-indigenous counterparts. They experience disproportionately high levels of maternal and infant mortality, cardiovascular illnesses, HIV/AIDS and other diseases such as malaria and tuberculosis. Indigenous women experience health problems with particular severity and yet they play a primary role in overseeing the health and well-being of their families and communities.¹

27. It has been estimated that worldwide 50 per cent of indigenous adults over the age of 35 years have type 2 diabetes, and these numbers are predicted to rise.¹² In some indigenous communities, diabetes has reached epidemic proportions and places the very existence of indigenous communities at risk. Similarly, tuberculosis, a disease that primarily affects people living in poverty and affects at least 2 billion people globally, continues to disproportionately affect indigenous peoples around the globe. Programmes designed to combat diseases often do not reach indigenous peoples because of issues related to poverty, a lack of access to medical care and drugs, language and cultural barriers, and geographic remoteness.

28. The International Covenant on Economic, Social and Cultural Rights is the principal human rights instrument that provides for right to adequate food and freedom from hunger (art. 11) and the right to health and the States' responsibilities for prevention, treatment and control of diseases (art. 12). The Declaration on the Rights of Indigenous Peoples provides specifically for indigenous individuals' "equal right to the enjoyment of the highest attainable standard of physical and mental health" (art. 24, para. 2). The Declaration also guarantees the collective rights of indigenous peoples to maintain and use their health systems and practices, including traditional medicines, and establishes State obligations to provide quality

¹² Ida Nicolaisen, "Overlooked and in Jeopardy: Indigenous Peoples with Diabetes" *Diabetes Voice*, vol. 51, No. 2 (2006).

health care to indigenous peoples and respect and promote their health systems (art. 24, para. 1, and art. 34). The Declaration does not include specific provisions relating to hunger or food.

Recommendations of the Permanent Forum

29. The Permanent Forum has made number of recommendations on issues of hunger and disease of indigenous peoples. Those include broader recommendations to States and the United Nations system to recognize indigenous peoples as distinct stakeholders and make specific reference to them, to reach out and engage in a truly inclusive process with them, including indigenous women, youth and persons with disabilities, to ensure that their rights and priorities are included and to develop and include clear indicators and monitoring tools relating to indigenous peoples post-2015 development agenda.

30. With regard to hunger, the Forum has specifically recommended that States engage in an inclusive and participatory process to ensure food sovereignty and security, and develop standards and methodologies and cultural indicators accordingly. It has also recommended that the Food and Agriculture Organization of the United Nations (FAO) develop operational guidelines on indigenous peoples and establish partnerships with indigenous peoples to implement the policy and guidelines with the aim of promoting secure tenure rights and equitable access to land, fisheries and forests. Subsequently, in 2010 FAO adopted the FAO Policy on Indigenous and Tribal Peoples in 2010 and Voluntary Guidelines on the Responsible Governance of Tenure of Land, Fisheries and Forests.

31. On health, the Forum has repeatedly called for improved disaggregated data on indigenous peoples' health. It has recommended that the World Health Organization (WHO), the United Nations Children's Fund (UNICEF) and the United Nations Population Fund (UNFPA), as well as regional health organizations and Governments, foster rights-based approaches to health, including treaty rights, the right to culturally acceptable and appropriate services and indigenous women's reproductive rights, and stop programmes of forced sterilization and abortion, which can constitute ethnic genocide.

32. Further, the Forum has made several recommendations to WHO, the Pan American Health Organization (PAHO) and Governments focusing on non-communicable diseases, including the establishment of a programme on non-communicable diseases in WHO, with special attention to indigenous peoples and diabetes; formulating an action plan with particular attention to preventing non-communicable diseases; improving access by indigenous peoples living with diabetes to health prevention and care; strengthening community-based health programmes on non-communicable diseases that empower and educate indigenous women and children; and undertaking a study on the situation of indigenous peoples living with diabetes.

33. The Forum has recommended that relevant United Nations entities coordinate to formulate key intercultural standards and indicators of quality of care, including sexual and reproductive health of indigenous peoples, to be considered in the definition of a future post-2015 goal on universal health care coverage.

C. Youth self-harm and suicide

34. There is no agreed definition of “youth” (any more than there is of “indigenous peoples”). The United Nations, for statistical purposes, defines “youth” as those persons between the ages of 15 and 24 years. Many Member States and United Nations agencies have different definitions. Despite this lack of universal agreement, there is general agreement on the fact that youth represent a transitional period between childhood and adulthood.

35. Youth (15-24 years of age) accounts for approximately 18 per cent of the global population and, with some 370 million indigenous people in the world, there are approximately 67 million indigenous youth globally. This number may well be higher, since indigenous peoples often have higher proportions of youth than non-indigenous peoples in the same countries.

36. Indigenous peoples suffer the greatest suicide risk among cultural or ethnic groups worldwide. Examples of suicide rates are presented in Australia, where the highest age-specific rate of suicide was among indigenous males between 25 and 29 years of age (90.8 deaths per 100,000 population), four times the rate for non-Indigenous males. For indigenous females, the highest rate of suicide was in the 20 to 24-year-old age group (21.8 deaths per 100,000 population), five times the non-indigenous female rate for that age group.¹³ In the United States, suicide is the second leading cause of death, behind accidents, for American Indian and Alaska Native men ages 15 to 34,¹⁴ and is two and a half times higher than the national average for that age group, according to the Centres for Disease Control and Prevention.¹⁵ Among the indigenous peoples in Brazil, the suicide rate was six times higher than the national average in 2013, according to a study released in October 2014 by the Ministry of Health of Brazil. That translates into 30 suicides per 100,000 people. Among members of the Guaraní tribe, Brazil’s largest indigenous group, the rate is estimated at more than twice as high as the indigenous rate over all, according to the study.

37. There are serious concerns that suicide rates of indigenous youth continue to rise and that victims are getting younger. According to a suicide case study in 2014 by an Australian Ombudsman’s Office, of 36 deceased children, aged between 13 and 17, it was found that indigenous children were over-represented; 13, or 36 per cent, of the suicides were indigenous, although they make up only 6 per cent of the total child population.¹⁶

38. According to various reports, suicide arises from a complex web of interacting personal and social circumstances. Risk factors that increase the likelihood of suicidal behaviour include factors such as the physical and social environments; developmental experiences; interpersonal relationships; alcohol and substance

¹³ Government of Australia, Department of Health, “Aboriginal and Torres Strait Islander suicide: origins, trends and incidence”, *National Aboriginal and Torres Strait Islands Suicide: Prevention Strategy* (May, 2013), available from www.health.gov.au/internet/publications/publishing.nsf/Content/mental-natsisps-strat-toc~mental-natsisps-strat-1~mental-natsisps-strat-1-ab.

¹⁴ See www.cdc.gov/violenceprevention/pdf/Suicide-DataSheet-a.pdf.

¹⁵ Charles Lyons, “Suicides Spread Through a Brazilian Tribe” (*The New York Times*, 2 January 2015).

¹⁶ See <http://nationalunitygovernment.org/content/nation-shamed-when-child-sees-suicide-solution>.

abuse; suicidal ideation and previous suicide attempts; and coexisting psychiatric disorders. The individual factors that affect suicide among indigenous peoples are no different than those found in other populations and communities, but the prevalence and interrelationships among these factors differ for indigenous communities due to their history of colonization, and subsequent interactions with the social and political institutions of society.

39. Every suicide has a wide impact affecting many people such as family, loved ones and peers. The circle of loss, grief and mourning after suicide spreads outwards in the community. In small indigenous communities, where many people are related and where many people face similar histories of personal and collective adversity, the impact of suicide may be especially widespread and severe.

40. Geographic and cultural isolation limit many indigenous youths' access to services. Indigenous youth are less likely to receive adequate health care, including mental health care. Although the reasons for youth suicide are complex and difficult to define, such interference with, and destruction of, cultural structures has caused stress throughout subsequent generations that is generally considered to contribute to suicidal behaviour.

41. Historical trauma passed on from previous generations and social marginalization, including situations where suicides are often part of community life, contribute to more suicides, just as do the lack of opportunity to discuss grief or taboos surrounding suicide. Many indigenous youth have lost faith in services that could help them, such as counselling services. They often have doubts about the cultural competence and generally do not believe services can help them. Some have confidentiality concerns about their issues remaining private, while others fear that using a service would result in shame for themselves or their family, being judged, ridiculed or punished. But one of the biggest barriers in rural and remote areas remains access to such services in the first place.

Recommendations of the Permanent Forum

42. The Permanent Forum has repeatedly expressed its concern to the high rates of suicide among indigenous youth having made a number of recommendations to the United Nations system calling for studies and dedicated workshops to address the issue. At its second session the Forum recommended that WHO undertake a study on the prevalence and causes of suicide among indigenous youth. At its fourth session the Forum recommended that the Inter-Agency Support Group on Indigenous Peoples' Issues organize a workshop on policies and best practices of engaging indigenous youth and children on prevention of suicide. At its fifth session the Forum reiterated its recommendation to the Inter-Agency Support Group on Indigenous Peoples' Issues to organize a workshop on policies and best practices of engaging indigenous youth and children on prevention of suicide. At its sixth session the Forum requested that States convene a meeting to assess the root causes of indigenous youth suicide and to formulate preventive strategies. The Forum also specifically requested that UNICEF and WHO convene a meeting on youth suicide.

43. At its eleventh session the Forum requested that WHO and UNICEF introduce indigenous youth perspectives into existing youth policies and plans with particular efforts to address suicide among indigenous youth. At its twelfth session the Forum reiterated its previous recommendations that address suicide among indigenous youth and requested that WHO conduct a study on the prevalence and causes of

suicide among indigenous youth and that the Inter-Agency Support Group and WHO organize an expert group meeting to review policies and best practices on engaging indigenous youth and prevention of suicide.

44. At its thirteenth session, the Forum urged States to take a number of steps on self-harm and suicide of indigenous youth, including improving data collection, the allocation of adequate resources for prevention, the revitalization of languages, cultures and customs and the development of training programmes on suicide prevention and mental health awareness. These recommendations are based on the report of the 2013 international expert group meeting on Indigenous Youth (E/C.19/2013/3).

45. A dedicated United Nations workshop or study on indigenous youth suicide has yet to be undertaken, despite the Permanent Forum's recommendations. The Forum secretariat has not received specific information on the implementation of any of the recommendations regarding indigenous youth suicide and self-harm from Member States or from United Nations entities.

III. Conclusion and recommendation

46. The Permanent Forum continues to monitor the outcome and results of its recommendations. The Forum members have expressed concern that the implementation of its recommendations must make a difference to the lives of indigenous peoples on the ground. A crucial factor for assessing implementation of the recommendations of the Permanent Forum is the number of reports submitted by United Nations agencies and States. These reports are the main source of information for determining the implementation of the recommendations of the Forum. The Forum acknowledges and thanks those States and United Nations agencies that have provided reports for the Forum sessions.

47. The recommendations of the Permanent Forum regarding the high-level plenary meeting known as the World Conference on Indigenous Peoples fed into the activities and the processes leading up to the World Conference. The Permanent Forum devoted time in its agenda during its session to facilitate an exchange of views and recommendations on the organization and outcome of the World Conference. These sessions were led by the Forum with the engagement of the indigenous peoples, States, United Nations agencies and Office of the Presidents of the General Assembly. The recommendations of the Forum included suggestions for the content of the outcome document; the full and effective participation of indigenous peoples; and the appointment of a State representative and an indigenous peoples' representative to conduct inclusive informal consultations on behalf of the President of the General Assembly. The outcome document of the World Conference is an important step forward and will require action from indigenous peoples, States and United Nations agencies to ensure that the commitments are followed up at the international and national levels.

48. The Permanent Forum has made a number of recommendations relating to the post-2015 development agenda and devoted time within the agenda of its sessions to hold discussions on the post-2015 development agenda. The recommendations of the Forum to States and United Nations agencies related to recognizing indigenous peoples as distinct stakeholders, and make specific reference to indigenous peoples

and to reach out and engage in a truly inclusive process with indigenous women, youth and persons with disabilities.

49. The high rates of self-harm and suicide of indigenous youth is an ongoing concern for the Permanent Forum. The Forum has made recommendations to United Nations agencies to dedicate a workshop or study on this serious issue. The Forum has also urged States to improve data collection and to allocate resources for the revitalization of languages, cultures and customs and the development of training programmes on suicide prevention and mental health awareness. A headline in a national newspaper in late 2014 said a nation is shamed when a child sees suicide as a solution.

Recommendations

50. The Permanent Forum urges States and United Nations agencies to continue providing annual reports to its session on the follow-up of the recommendations of the Forum.

51. The Forum has been determined to ensure that indigenous peoples' rights and priorities are included in the post-2015 development agenda. In that regard, the Forum reiterates the need to develop and include clear indicators and monitoring tools relating to indigenous peoples in the sustainable development goals and the post-2015 development agenda.

52. The Forum has determined that mental health issues such as depression, substance abuse and suicide have been identified as connected to colonization and dispossession of indigenous peoples. Models of health care must take into account the indigenous concept of health and preserve and strengthen indigenous peoples' health systems as a strategy to increase access and coverage of health care. This will result in the establishment of clear mechanisms of cooperation among relevant health-care personnel, communities, traditional healers, policy makers and Government officials in order to ensure that the human resources respond to the epidemiological profile and socio-cultural context of indigenous communities.

53. The Forum urges States to develop strategies and interventions that are that are culturally tailored and effective in reducing feelings of hopelessness and suicidal vulnerability among indigenous youth. The interventions need to include high levels of local control and involvement of indigenous peoples and their communities.