



JOINT BIRTHING ON COUNTRY POSITION STATEMENT

In Australia, the Council of Australian Governments (COAG) has committed to achieve life expectancy equality between Aboriginal and Torres Strait Islander peoples and other Australians by 2030, and to halve Aboriginal and Torres Strait Islander deaths among children ages 0-4 years by 2018¹. “Despite this intent, overall progress has been slow and inconsistent, and has not equalled improvements in health among non-Aboriginal Australians.”²

There is growing evidence that health inequity trajectories start early, and that pregnancy, birth and early childhood are critical periods for both mother and infant³. A report on the progress and priorities of COAG’s Closing The Gap Strategy reminds us of the magnitude of the importance of strategies that have commenced in early life⁴. This highlights an important role for maternity services across the country, with significant unmet need in rural and remote areas.

The health disadvantage experienced by Aboriginal and Torres Strait Islander peoples is a direct result of colonisation, which is responsible for the current gaps in health outcomes.

This disadvantage is underpinned by the inequity across all of the 'Social Determinants of Health' (SDH) such as, poorer housing, insecure employment, lower educational outcomes and access to healthcare, including care during pregnancy⁵. Alongside the SDH, there are many other factors, which influence an Aboriginal and/or Torres Strait Islander woman’s engagement with, and early presentation for, care in pregnancy. Specifically, these include the availability of culturally appropriate and culturally safe⁶ services, institutional racism in our health services, the frequency

¹ Council of Australian Governments. 2012. *National Indigenous Reform Agreement (2012)*. Retrieved from: <http://www.coag.gov.au/node/145>.

² Human Rights and Equal Opportunity Commission, 2008

³ Holland C. 2015. *Close the Gap, Progress and priorities report, 2015*: Close the Gap Campaign Steering Committee.

⁴ Carson B., Dunbar T., Chenhall R.D. and R. Bailie (Eds) 2007. *Social determinants of Indigenous health*, Crows Nest, NSW, Allen and Unwin; Marmot, M. 2004. *The status syndrome: how social standing affects our health and longevity*. New York: Holt Paperbacks; Wilkinson R. & M. Marmot. 2003. *Social determinants of health: the solid facts*. Denmark: World Health Organization

⁵ Arnold, J.L., Costa, C.M. & P.W. Howat. 2009. ‘Timing of transfer for pregnant women from Queensland Cape York communities to Cairns for birthing’ in *Medical Journal of Australia*, vol.190, no. 10, pp594-6.

⁶ Cultural safety is effective care of a person or family from a culture different to the health professional, as determined by that person or family. The health practitioner delivering the service will have undertaken a process of reflection on his or her own cultural identity and will recognise the impact that his or her personal culture has on his or her professional practice. Unsafe cultural practice then, comprises any action

(or absence) of local services, the lack of Aboriginal or Torres Strait Islander health care workers, transport and childcare⁷.

The *National Aboriginal and Torres Strait Islander Health Plan 2013–2023* (the Plan) was developed to guide strategies to ‘close the gap’, and articulates a vision whereby the Australian health system is free of racism and inequality and all Aboriginal and Torres Strait Islander peoples have access to health services that are effective, high quality, appropriate and affordable. The Plan provides the necessary platform to realise health equality by 2031. Culture underpins the entire Plan’s priorities including that mothers and babies get the best possible care and support for a good start to life⁸.

So how does ‘Birthing on Country’ address this priority area?

Aboriginal and Torres Strait Islander women have been advocating for many years that *Birthing on Country* will improve maternal and infant outcomes because of the integral connection between birthing, land (country) and place of belonging⁹. It needs to be recognised that Birthing on Country occurred for many thousands of years before women were removed to birth in other settings. Hence, from a historical perspective, it is a relatively new phenomenon to *not* birth on country.

The terms ‘Birthing on Country’ and ‘Birthing on Country Models’ are generally not well understood.

Birthing on Country is described as ‘...a metaphor for the best start in life for Aboriginal and Torres Strait Islander babies and their families’ which provides an appropriate transition to motherhood and parenting, and an integrated, holistic and culturally appropriate model of care for all¹⁰.

Birthing on Country Models then, can be described as maternity services that are designed, developed, delivered and evaluated for and with Aboriginal and Torres Strait Islander women that encompass some (or all) of the following:

which diminishes, demeans or disempowers the cultural identities and wellbeing of an individual (Adapted from Nursing Council of New Zealand, *Guidelines for Cultural Safety, the Treaty of Waitangi and Maori Health in Nursing Education and Practice*, last amended July 2011 (www.nursingcouncil.org.nz/Publications/Standards-and-guidelines-for-nurses). Cultural safety is viewed by CATSINaM as the final step on a continuum of midwifery (and other health care) that includes cultural awareness, cultural sensitivity, cultural knowledge, cultural respect and cultural competence. Cultural safety is the recipient’s own experience and cannot be defined by the caregiver. CATSINaM advocates on behalf of Aboriginal and Torres Strait Islander peoples by promoting a framework of cultural safety to inform attitudes and behaviours in the provision of care by health professionals to Aboriginal and Torres Strait Islander individuals and communities, so individuals and their families feel culturally secure, safe and respected. To achieve this state, cultural safety must be embedded in every aspect of nursing and midwifery practice (<http://catsinam.org.au/static/uploads/files/cultural-safety-endorsed-march-2014-wfginzphsxbz.pdf>).

⁷ Arnold, J.L., Costa, C.M. & P.W. Howat. 2009. ‘Timing of transfer for pregnant women from Queensland Cape York communities to Cairns for birthing’ in *Medical Journal of Australia*, vol.190, no. 10, pp594-6.

⁸ Commonwealth of Australia. 2013. *National Aboriginal and Torres Strait Islander Health Plan 2013-2023*

⁹ Kildea, S. and V. Van Wagner, 2012. *Birthing on Country, Maternity Service Delivery Models: A review of the literature*. An Evidence Check rapid review brokered by the Sax Institute (<http://www.saxinstitute.org.au>) on behalf of the Maternity Services Inter-Jurisdictional Committee for the Australian Health Minister’s Advisory Council: Sydney.

¹⁰ Kildea, S., Magick Dennis, F. & H. Stapleton. 2013. *Birthing on Country Workshop Report Alice Springs, 4 July 2012*, Australian Catholic University and Mater Medical Research Unit on behalf of the Maternity Services Inter-Jurisdictional Committee for the Australian Health Ministers’ Advisory Council (p10).

- ☐ they are community based and governed
- ☐ provide for inclusion of traditional practices
- ☐ involve connections with land and country
- ☐ incorporate a holistic definition of health
- ☐ value Aboriginal and/or Torres Strait Islander as well as other ways of knowing and learning
- ☐ encompass risk assessment and service delivery and are culturally competent¹¹.

Accordingly, Birthing on Country Models can be incorporated in any setting.

Most Aboriginal and Torres Strait Islander women live in cities and major regional centres, and most give birth in a hospital or birthing centre, which is often not on their ancestral lands, despite the cultural and spiritual importance of doing so, and despite national guidelines which emphasise the importance of maintaining cultural values around pregnancy and birth¹².

Thus, it is important that wherever an Aboriginal and/or Torres Strait Islander baby is born, his or her mother and family are encouraged, supported and enabled to incorporate relevant cultural aspects within that place or service. Just as importantly, they should have access to maternity services that address their cultural, spiritual, social, emotional and physical needs.

For many women living in remote and regional areas, the challenges are often greater. They are advised or even coerced to leave their community and families for long periods in the latter stage of pregnancy to travel to a major centre for birth. They are dislocated from important family and social networks, including the knowledge, skills and roles of Elders during this important time and are therefore put at cultural risk as a result of this relocation and isolation. In line with recommendations made in numerous reports over 20 years, it is important that we address the requests that have been made by women living in some of the largest remote communities in Australia. These requests include a return of birthing services in the same way that has been achieved across an increasing number of communities in remote Canada. The evidence supports this Canadian approach, which is in line with the intent of the National Maternity Services Plan¹³ and must be resourced and tested.

Thus our position statement has a twofold purpose, which is also articulated in the National Birthing On Country Workshop Report¹⁴ and outlines a need for clear evidence of system wide reform inclusive of:

1. Development of exemplar sites that have been funded for long term success in urban, rural, remote and very remote Australia.

¹¹ *ibid*

¹² Kruske, S. 2012. *Culturally Competent Maternity Care for Aboriginal and Torres Strait Women Report* prepared on behalf of the Maternity Services Inter-Jurisdictional Committee for the Australian Health Ministers' Advisory Council

¹³ Commonwealth of Australia. 2011. *National Maternity Services Plan 2010*. Retrieved from: [http://www.health.gov.au/internet/main/publishing.nsf/Content/8AF951CE492C799FCA257BF0001C1A4E/\\$File/maternityplan.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/8AF951CE492C799FCA257BF0001C1A4E/$File/maternityplan.pdf)

¹⁴ Kildea, S., Magick Dennis, F. & H. Stapleton. 2013. *Birthing on Country Workshop Report, Alice Springs, 4 July 2012*. Australian Catholic University and Mater Medical Research Unit on behalf of the Maternity Services Inter-Jurisdictional Committee for the Australian Health Ministers' Advisory Council p10),

2. Priority given to the identification of remote and isolated sites for the adaption and testing of the remote Inuit model, as referred to in the Report.

Key Principles

Central to the development of maternity services is the privileging of Aboriginal and Torres Strait Islander knowledges and the acceptance of cultural guidance and oversight which includes care that:

- Is woman-centred¹⁵
- Is honest and transparent
- Is respectful of a woman's choice
- Ensures flexibility in models of care
- Ensures cultural integrity and safety, and
- Ensures collaboration between women, their partners and families, and all health professionals.

Our Position

The Birthing on Country model provides integrated, holistic and culturally appropriate care to provide the 'best start in life' for Aboriginal and Torres Strait Islander families and communities.

Respecting individual choice is central to the Birthing on Country model. The identification of 'risk factors' is viewed through a cultural lens inclusive of the individual woman's needs and cultural birthing practices, which enriches and informs their choices, assessment and planned care.

Birthing on Country models of care require services to be tailored to women's needs, where women and families are able to define their own cultural practices and choices within a safety and quality framework, and which enables connection to culture. Services must have inclusive service protocols catering for the existing cultural practices and differences between Aboriginal nations and between Aboriginal and Torres Strait Islander nations.

Recommendations/Calls for Action

Australian, State and Territory Governments:

- Show leadership and develop a strategic approach to implementing Birthing on Country Program/s that can be delivered appropriately at the local level, be it an urban, regional or remote location.
- Establish a National Steering Group to support the implementation and evaluation of Birthing on Country programs in Australia.

¹⁵ Woman-centred care focuses on the woman's unique needs, expectations and aspirations; recognises her right to self-determination in terms of choice, control and continuity of care; and addresses her social, emotional, physical, psychological, spiritual and cultural needs and expectations (ANMC 2006). It also acknowledges that a woman and her unborn baby do not exist independently of the woman's social and emotional environment, and incorporates this understanding in assessment and provision of health care. Retrieved from

<http://www.health.gov.au/internet/publications/publishing.nsf/Content/clinical-practice-guidelines-ac-mod1~part-a~woman-centred-care>

- ***The national steering group to:***

- Identify the 'initial exemplary sites' in urban, rural, remote and very remote areas, with several sites identified in remote and very remote regions across Australia, with at least one in an area that is non-English speaking.
- In lieu of a local Birthing on Country services, assist health departments to develop a 'Hub and Spokes' maternity model of care, developed at the local level within a community engagement and cultural framework.
- For all jurisdictions to make publicly available, information on what actions they have taken to date in response to the National Maternity Services Plan (June 2010—June 2016) and future directions.
- The Australian Government to provide seed funding to support the development and implementation of National Birthing on Country Programs within each jurisdiction.
- Governments to make funding available for Elders to have a dedicated and permanent place in education and service provision as advisors, in addition to Aboriginal and Torres Strait Islander Liaison Workers.

Health Sector

- Establish, implement and monitor evidence-based Birthing on Country protocols in collaboration with services underpinned by a holistic health framework inclusive of continuity of care¹⁶.
- Local Health services provide Birthing on Country protocol training for all health professionals inclusive of existing cultural practices and differences between Aboriginal nations and Aboriginal and Torres Strait Islander nations.
- Recruit and support more Aboriginal and Torres Strait Islander midwives, obstetricians and health workers and health practitioners to provide Birthing on Country services.
- Support the recognition and growth of Aboriginal and Torres Strait Islander people in roles such as midwives, Strong Women Workers, Maternal Infant Health Care Workers and Aboriginal Maternal Infant Care workers to assist in the provision of Birthing on Country services.
- Ensure that Aboriginal and Torres Strait Islander women are able to access continuity of care through pregnancy, birth and early postnatal care.

¹⁶ Aboriginal and Torres Strait Islander women value care from a person they know and trust. In continuity of care' models each woman has a primary midwife who is her first point of reference and who takes responsibility for her individualised care through pregnancy, birth and the early postnatal period. Continuity of midwifery care is particularly advantageous for women who feel marginalised by mainstream services (Kruske, S. 2012. *Culturally Competent Maternity Care for Aboriginal and Torres Strait Women Report* prepared on behalf of the Maternity Services Inter-Jurisdictional Committee for the Australian Health Ministers' Advisory Council).

- Ensure local Aboriginal and Torres Strait Islander communities have representation on executive boards of all health services as well as on those of midwifery education providers.

Regulation

- All national registration boards and accreditation councils embed cultural safety practice, education and training within their professional registration standards.
- All self-regulatory health professionals embed cultural safety practice, education and training in delivering maternity services to Aboriginal and Torres Strait Islander peoples.

Education

- Ensure that all practising health professionals undertake Continuous Professional Development to deliver culturally supportive maternity services for Aboriginal and Torres Strait Islander peoples.
- Ensure that all students graduate with a clear understanding of, and skills to deliver, culturally supportive and culturally safe maternity services for Aboriginal and Torres Strait Islander peoples.
- All education and training providers of health professionals embed cultural safety into the curriculum of pre-registration studies in collaboration with appropriate Aboriginal and/or Torres Strait Islander community members and/or Aboriginal and Torres Strait Islander midwifery academics.
- Governments, health services and education providers work closely with local communities to actively recruit and support Aboriginal and Torres Strait Islander midwifery students
- Actively recruit and support Aboriginal and Torres Strait Islander midwifery and other health professional academics who will in turn support the growth of Aboriginal and Torres Strait Islander midwifery students and midwives.

BACKGROUND

The National Maternity Services Plan (the Plan) which was endorsed by the Australian Health Ministers in November 2010 and released in 2011, recognises the importance of maternity services within health systems and provides a strategic national framework to guide policy and program development across Australia for the subsequent five years. The plan includes thirteen overarching Actions together with a number of 'sub-actions'.

The Maternity Services Inter-jurisdictional Committee (MSIJC) has the delegated responsibility for implementing the actions and for reporting on them to the Australian Health Ministers' Advisory Council (AHMAC), through the Health Policy Priorities Principal Committee (HPPPC).

Action 2.2 of the Plan aims to develop and expand culturally competent maternity care for Aboriginal and Torres Strait Islander peoples.

Action 2.2.3 had for its signs of success "Birthing on Country programs for Aboriginal and Torres Strait Islander mothers are established" and "A Birthing on Country framework is developed".

In March 2012 a Literature review¹⁷ on culturally competent maternity services for Aboriginal and Torres Strait Islander communities was completed. The review found that core components included community involvement, midwifery-led care with a broad scope of practice, local education of midwives, integration of Aboriginal and Torres Strait Islander and non-Aboriginal/non-Torres Strait Islander approaches to maternity care and birthing services, collaboration across the healthcare team, secure funding, and a strong research and evaluation framework. The literature review showed that improvements in health outcomes and user satisfaction were evident with these factors in place.

Birthing On Country Workshop

One of the key stages in the process of developing a framework for Birthing on Country programs was the convening of a workshop. The workshop was held on 4 July 2012 in collaboration with the Maternity Services Inter-jurisdictional Committee (MSIJC) and Central Australian Aboriginal Congress (CAAC). A wide range of stakeholders attended this workshop including leading maternity representatives from across Australia.

The Objectives of the Birthing on Country Workshop were to:

- Obtain agreement regarding progressing Australia's commitment to Birthing on Country programs
- Examine the establishment of jurisdictional steering groups to support the implementation of Birthing on Country programs in Australia
- Develop an implementation and evaluation framework for the Birthing on Country program
- Identify potential pilot sites for the Birthing on Country program to be trialled.

¹⁷ Kildea, S. and V. Van Wagner, 2012. *Birthing on Country, Maternity Service Delivery Models: A review of the literature*. An Evidence Check rapid review brokered by the Sax Institute (<http://www.saxinstitute.org.au>) on behalf of the Maternity Services Inter-Jurisdictional Committee for the Australian Health Minister's Advisory Council: Sydney.

The Birthing on Country Workshop was the first national workshop, of this kind, in Australia. Ms Djapirri Mununggirritj, a Yolgnu Elder from North-Eastern Arnhem Land who presented at the workshop stated:

'we gather at these sort of conferences to talk about... to set up something... for twenty years time and we on this table can look back and learn... and participate... in what I have to offer to make this people or this generation something they can be proud of'.

Ms Djapirri Mununggirritj articulated the meaning of Birthing on Country to be understood:

'...as a metaphor for the best start in life for Aboriginal and Torres Strait Islander babies and their families because it provides an integrated, holistic and culturally appropriate model of care; not only bio-physical outcomes ... it's much, much broader than just the labour and delivery ... (it) deals with socio-cultural and spiritual risk that is not dealt with in the current systems. It is important that the Birthing on Country project move from being aspirational to actual. The Birthing on Country agenda relates to system-wide reform and is perceived as an important opportunity in 'closing the gap' between Indigenous and non-Indigenous health and quality of life outcomes'¹⁸.

The Birthing on Country Workshop resulted in a number of recommendations that included obtaining agreement to progress Australia's commitment to Birthing on Country programs and to agreed terminology as proposed. A National Steering group was to be established to support the implementation of Birthing on Country programs, including the development of an implementation and evaluation framework, and potential Birthing on Country pilot sites be trialled.

The Birthing on Country Workshop report is available at:

<http://www.catsinam.org.au/communication/resources>

In May 2015, Feedback was received from sources including MSIJC stating that the implementation of these recommendations was the responsibility of the jurisdictions.

Owing to the apparent lack of progress in implementation, and in order to reinvigorate momentum around this very important issue, CATSINaM, ACM and CRANaPlus agreed to collaborate in the development of a Birthing on Country policy position and call for action.

¹⁸ Kildea, S., Magick Dennis, F. and H. Stapleton. 2013. *Birthing on Country Workshop Report*, Alice Springs, 4 July 2012. Australian Catholic University and Mater Medical Research Unit on behalf of the Maternity Services Inter-Jurisdictional Committee for the Australian Health Ministers' Advisory Council (p7)

APPENDICES

APPENDIX 1

NHMRC: National Guidance on Maternity Care¹⁹

Principles

1. Maternity care collaboration places the woman at the centre of her own care, while supporting the professionals who are caring for her (her carers). Such care is coordinated according to the woman's needs, including her cultural, emotional, psychosocial and clinical needs.
2. Collaboration enables women to choose care that is based on the best evidence and is appropriate for themselves and for their local environment.
3. Collaboration enables women to make informed decisions by ensuring that they are given information about all of their options. This information should be based on the best evidence, and agreed to and endorsed by professional and consumer groups.
4. Collaborating professionals, regardless of the model of care, establish a clearly defined and inclusive reciprocal communication strategy using sensitive language to support professional trust.
5. Collaboration has an underpinning safety and quality framework that includes monitoring health outcomes for mothers and babies, regular multidisciplinary discussions about how the collaboration is working (involving women who have used the service) and public reporting.
6. Collaborating professionals respect and value each other's roles, provide support to each other in their work and provide education to meet each other's needs.
7. Collaboration is committed to joint education and training, following a consistent, agreed care plan and research focused on improving outcomes.
8. Collaboration aims to maximise a woman's continuity of care and carer, throughout pregnancy, birth and the early postnatal period.
9. Collaboration aims to maximise a woman's continuity of carer by providing a clear description of roles and responsibilities to support the person that a woman nominates to coordinate her care (her 'maternity care coordinator').

¹⁹ National Health and Medical Research Council. 2010. *National Guidance on Maternity Care*: DOHA, p1

AUSTRALIAN CHARTER OF HEALTHCARE RIGHTS

The Australian Charter of Healthcare Rights describes the rights of patients and other people using the Australian health system. These rights are essential to make sure that, wherever and whenever care is provided, it is of high quality and is safe.

The Charter recognises that people receiving care and people providing care all have important parts to play in achieving healthcare rights. The Charter allows patients, consumers, families, carers and services providing health care to share an understanding of the rights of people receiving health care. This helps everyone to work together towards a safe and high quality health system. A genuine partnership between patients, consumers and providers is important so that everyone achieves the best possible outcomes.

Guiding Principles

These three principles describe how this Charter applies in the Australian health system.

1 Everyone has the right to be able to access health care and this right is essential for the Charter to be meaningful.

2 The Australian Government commits to international agreements about human rights which recognise everyone's right to have the highest possible standard of physical and mental health.

3 Australia is a society made up of people with different cultures and ways of life, and the Charter acknowledges and respects these differences.



For further information please visit
www.safetyandquality.gov.au

**AUSTRALIAN COMMISSION ON
SAFETY AND QUALITY IN HEALTHCARE**

What can I expect from the Australian health system?

MY RIGHTS

WHAT THIS MEANS

Access

I have a right to health care.

I can access services to address my healthcare needs.

Safety

I have a right to receive safe and high quality care.

I receive safe and high quality health services, provided with professional care, skill and competence.

Respect

I have a right to be shown respect, dignity and consideration.

The care provided shows respect to me and my culture, beliefs, values and personal characteristics.

Communication

I have a right to be informed about services, treatment, options and costs in a clear and open way.

I receive open, timely and appropriate communication about my health care in a way I can understand.

Participation

I have a right to be included in decisions and choices about my care.

I may join in making decisions and choices about my care and about health service planning.

Privacy

I have a right to privacy and confidentiality of my personal information.

My personal privacy is maintained and proper handling of my personal health and other information is assured.

Comment

I have a right to comment on my care and to have my concerns addressed.

I can comment on or complain about my care and have my concerns dealt with properly and promptly.

²⁰ Australian Commission on Safety and Quality in Healthcare: Retrieved from:
<http://www.safetyandquality.gov.au/wp-content/uploads/2012/01/Charter-PDF.pdf>

APPENDIX 3

UN DECLARATION ON THE RIGHTS OF INDIGENOUS PEOPLES²¹

United Nations Declaration on the Rights of Indigenous Peoples

The General Assembly

Guided by the purposes and principles of the Charter of the United Nations, and good faith in the fulfilment of the obligations assumed by States in accordance with the Charter,

Affirming that indigenous peoples are equal to all other peoples, while recognizing the right of all peoples to be different, to consider themselves different, and to be respected as such,

Affirming also that all peoples contribute to the diversity and richness of civilizations and cultures, which constitute the common heritage of humankind,

Affirming further that all doctrines, policies and practices based on or advocating superiority of peoples or individuals on the basis of national origin, racial, religious, ethnic or cultural differences are racist, scientifically false, legally invalid, morally condemnable and socially unjust,

Reaffirming also that indigenous peoples, in the exercise of their rights, should be free from discrimination of any kind,

Concerned that indigenous peoples have suffered from historic injustices as a result of, inter alia, their colonization and dispossession of their lands, territories and resources, thus preventing them from exercising, in particular, their right to development in accordance with their own needs and interests,

Recognizing the urgent need to respect and promote the inherent rights of indigenous peoples which derive from their political, economic and social structures and from their cultures, spiritual traditions, histories and philosophies, especially their rights to their lands, territories and resources,

Further recognizing the urgent need to respect and promote the rights of indigenous peoples affirmed in treaties, agreements and other constructive arrangements with States,

Welcoming the fact that indigenous peoples are organizing themselves for political, economic, social and cultural enhancement and in order to bring an end to all forms of discrimination and oppression wherever they occur,

Convinced that control by indigenous peoples over developments affecting them and their lands, territories and resources will enable them to maintain and strengthen their institutions, cultures and traditions, and to promote their development in accordance with their aspirations and needs,

Recognizing also that respect for indigenous knowledge, cultures and traditional practices contributes to sustainable and equitable development and proper management of the environment,

Emphasizing the contribution of the demilitarization of the lands and territories of indigenous peoples to peace, economic and social progress and development, understanding and friendly relations among nations and peoples of the world,

²¹ http://www.un.org/esa/socdev/unpfii/documents/DRIPS_en.pdf

Recognizing in particular the right of indigenous families and communities to retain shared responsibility for the upbringing, training, education and well-being of their children, consistent with the rights of the child,

Considering that the rights affirmed in treaties, agreements and constructive arrangements between States and indigenous peoples are, in some situations, matters of international concern, interest, responsibility and character,

Considering also that treaties, agreements and other constructive arrangements, and the relationship they represent, are the basis for a strengthened partnership between indigenous peoples and States,

Acknowledging that the Charter of the United Nations, the International Covenant on Economic, Social and Cultural Rights and the International Covenant on Civil and Political Rights as well as the Vienna Declaration and Programme of Action, affirm the fundamental importance of the right of self-determination of all peoples, by virtue of which they freely determine their political status and freely pursue their economic, social and cultural development,

Bearing in mind that nothing in this Declaration may be used to deny any peoples their right of self-determination, exercised in conformity with international law,

Convinced that the recognition of the rights of indigenous peoples in this Declaration will enhance harmonious and cooperative relations between the State and indigenous peoples, based on principles of justice, democracy, respect for human rights, non-discrimination and good faith,

Encouraging States to comply with and effectively implement all their obligations as they apply to indigenous peoples under international instruments, in particular those related to human rights, in consultation and cooperation with the peoples concerned,

Emphasizing that the United Nations has an important and continuing role to play in promoting and protecting the rights of indigenous peoples,

Believing that this Declaration is a further important step forward for the recognition, promotion and protection of the rights and freedoms of indigenous peoples and in the development of relevant activities of the United Nations system in this field,

Recognizing and reaffirming that indigenous individuals are entitled without discrimination to all human rights recognized in international law, and that indigenous peoples possess collective rights which are indispensable for their existence, well-being and integral development as peoples,

Recognizing also that the situation of indigenous peoples varies from region to region and from country to country and that the significance of national and regional particularities and various historical and cultural backgrounds should be taken into consideration,

Solemnly proclaims the following United Nations Declaration on the Rights of Indigenous Peoples as a standard of achievement to be pursued in a spirit of partnership and mutual respect,

Article 1

Indigenous peoples have the right to the full enjoyment, as a collective or as individuals, of all human rights and fundamental freedoms as recognized in the Charter of the United Nations, the Universal Declaration of Human Rights and international human rights law.

Article 2

Indigenous peoples and individuals are free and equal to all other peoples and individuals and have the right to be free from any kind of discrimination, in the exercise of their rights, in particular that based on their indigenous origin or identity.

Article 3

Indigenous peoples have the right of self-determination. By virtue of that right they freely determine their political status and freely pursue their economic, social and cultural development.

Article 4

Indigenous peoples, in exercising their right to self-determination, have the right to autonomy or self-government in matters relating to their internal and local affairs, as well as ways and means for financing their autonomous functions.

Article 5

Indigenous peoples have the right to maintain and strengthen their distinct political, legal, economic, social and cultural institutions, while retaining their rights to participate fully, if they so choose, in the political, economic, social and cultural life of the State.

Article 6

Every indigenous individual has the right to a nationality.

Article 7

1. Indigenous individuals have the rights to life, physical and mental integrity, liberty and security of person.
2. Indigenous peoples have the collective right to live in freedom, peace and security as distinct peoples and shall not be subjected to any act of genocide or any other act of violence, including forcibly removing children of the group to another group.

Article 8

1. Indigenous peoples and individuals have the right not to be subjected to forced assimilation or destruction of their culture.
2. States shall provide effective mechanisms for prevention of, and redress for:
 - a. Any action which has the aim or effect of depriving them of their integrity as distinct peoples, or of their cultural values or ethnic identities;
 - b. Any action which has the aim or effect of dispossessing them of their lands, territories or resources;
 - c. Any form of forced population transfer which has the aim or effect of violating or undermining any of their rights;
 - d. Any form of forced assimilation or integration;
 - e. Any form of propaganda designed to promote or incite racial or ethnic discrimination directed against them.

Article 9

Indigenous peoples and individuals have the right to belong to an indigenous community or nation, in accordance with the traditions and customs of the community or nation concerned. No discrimination of any kind may arise from the exercise of such a right.

Article 10

Indigenous peoples shall not be forcibly removed from their lands or territories. No relocation shall take place without the free, prior and informed consent of the indigenous peoples concerned and after agreement on just and fair compensation and, where possible, with the option of return.

Article 11

1. Indigenous peoples have the right to practice and revitalize their cultural traditions and customs. This includes the right to maintain, protect and develop the past, present and future manifestations of their cultures, such as archaeological and historical sites, artefacts, designs, ceremonies, technologies and visual and performing arts and literature.

2. States shall provide redress through effective mechanisms, which may include restitution, developed in conjunction with indigenous peoples, with respect to their cultural, intellectual, religious and spiritual property taken without their free, prior and informed consent or in violation of their laws, traditions and customs.

Article 12

1. Indigenous peoples have the right to manifest, practice, develop and teach their spiritual and religious traditions, customs and ceremonies; the right to maintain, protect, and have access in privacy to their religious and cultural sites; the right to the use and control of their ceremonial objects; and the right to the repatriation of their human remains.

2. States shall seek to enable the access and/or repatriation of ceremonial objects and human remains in their possession through fair, transparent and effective mechanisms developed in conjunction with indigenous peoples concerned.

Article 13

1. Indigenous peoples have the right to revitalize, use, develop and transmit to future generations their histories, languages, oral traditions, philosophies, writing systems and literatures, and to designate and retain their own names for communities, places and persons.

2. States shall take effective measures to ensure this right is protected and also to ensure that indigenous peoples can understand and be understood in political, legal and administrative proceedings, where necessary through the provision of interpretation or by other appropriate means.

Article 14

1. Indigenous peoples have the right to establish and control their educational systems and institutions providing education in their own languages, in a manner appropriate to their cultural methods of teaching and learning.

2. Indigenous individuals, particularly children, have the right to all levels and forms of education of the State without discrimination.

3. States shall, in conjunction with indigenous peoples, take effective measures, in order for

indigenous individuals, particularly children, including those living outside their communities, to have access, when possible, to an education in their own culture and provided in their own language.

Article 15

1. Indigenous peoples have the right to the dignity and diversity of their cultures, traditions, histories and aspirations which shall be appropriately reflected in education and public information.
2. States shall take effective measures, in consultation and cooperation with the indigenous peoples concerned, to combat prejudice and eliminate discrimination and to promote tolerance, understanding and good relations among indigenous peoples and all other segments of society.

Article 16

1. Indigenous peoples have the right to establish their own media in their own languages and to have access to all forms of non-indigenous media without discrimination.
2. States shall take effective measures to ensure that State-owned media duly reflect indigenous cultural diversity. States, without prejudice to ensuring full freedom of expression, should encourage privately-owned media to adequately reflect indigenous cultural diversity.

Article 17

1. Indigenous individuals and peoples have the right to enjoy fully all rights established under applicable international and domestic labour law.
2. States shall in consultation and cooperation with indigenous peoples take specific measures to protect indigenous children from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or physical, mental, spiritual, moral or social development, taking into account their special vulnerability and the importance of education for their empowerment.
3. Indigenous individuals have the right not to be subjected to any discriminatory conditions of labour and, inter alia, employment or salary.

Article 18

Indigenous peoples have the right to participate in decision-making in matters which would affect their rights, through representatives chosen by themselves in accordance with their own procedures, as well as to maintain and develop their own indigenous decision-making institutions.

Article 19

States shall consult and cooperate in good faith with the indigenous peoples concerned through their own representative institutions in order to obtain their free, prior and informed consent before adopting and implementing legislative or administrative measures that may affect them.

Article 20

1. Indigenous peoples have the right to maintain and develop their political, economic and social systems or institutions, to be secure in the enjoyment of their own means of subsistence and development, and to engage freely in all their traditional and other economic activities.
2. Indigenous peoples deprived of their means of subsistence and development are entitled to just

and fair redress.

Article 21

1. Indigenous peoples have the right, without discrimination, to the improvement of their economic and social conditions, including, inter alia, in the areas of education, employment, vocational training and retraining, housing, sanitation, health and social security.
2. States shall take effective measures and, where appropriate, special measures to ensure continuing improvement of their economic and social conditions. Particular attention shall be paid to the rights and special needs of indigenous elders, women, youth, children and persons with disabilities.

Article 22

1. Particular attention shall be paid to the rights and special needs of indigenous elders, women, youth, children and persons with disabilities in the implementation of this Declaration.
2. States shall take measures, in conjunction with indigenous peoples, to ensure that indigenous women and children enjoy the full protection and guarantees against all forms of violence and discrimination.

Article 23

Indigenous peoples have the right to determine and develop priorities and strategies for exercising their right to development. In particular, indigenous peoples have the right to be actively involved in developing and determining health, housing and other economic and social programmes affecting them and, as far as possible, to administer such programmes through their own institutions.

Article 24

1. Indigenous peoples have the right to their traditional medicines and to maintain their health practices, including the conservation of their vital medicinal plants, animals and minerals. Indigenous individuals also have the right to access, without any discrimination, to all social and health services.
2. Indigenous individuals have an equal right to the enjoyment of the highest attainable standard of physical and mental health. States shall take the necessary steps with a view to achieving progressively the full realization of this right.

Article 25

Indigenous peoples have the right to maintain and strengthen their distinctive spiritual relationship with their traditionally owned or otherwise occupied and used lands, territories, waters and coastal seas and other resources and to uphold their responsibilities to future generations in this regard.

Article 26

1. Indigenous peoples have the right to the lands, territories and resources which they have traditionally owned, occupied or otherwise used or acquired.
2. Indigenous peoples have the right to own, use, develop and control the lands, territories and resources that they possess by reason of traditional ownership or other traditional occupation or use, as well as those which they have otherwise acquired.

3. States shall give legal recognition and protection to these lands, territories and resources. Such recognition shall be conducted with due respect to the customs, traditions and land tenure systems of the indigenous peoples concerned.

Article 27

States shall establish and implement, in conjunction with indigenous peoples concerned, a fair, independent, impartial, open and transparent process, giving due recognition to indigenous peoples' laws, traditions, customs and land tenure systems, to recognize and adjudicate the rights of indigenous peoples pertaining to their lands, territories and resources, including those which were traditionally owned or otherwise occupied or used. Indigenous peoples shall have the right to participate in this process.

Article 28

1. Indigenous peoples have the right to redress, by means that can include restitution or, when this is not possible, of a just, fair and equitable compensation, for the lands, territories and resources which they have traditionally owned or otherwise occupied or used, and which have been confiscated, taken, occupied, used or damaged without their free, prior and informed consent.

2. Unless otherwise freely agreed upon by the peoples concerned, compensation shall take the form of lands, territories and resources equal in quality, size and legal status or of monetary compensation or other appropriate redress.

Article 29

1. Indigenous peoples have the right to the conservation and protection of the environment and the productive capacity of their lands or territories and resources. States shall establish and implement assistance programmes for indigenous peoples for such conservation and protection, without discrimination.

2. States shall take effective measures to ensure that no storage or disposal of hazardous materials shall take place in the lands or territories of indigenous peoples without their free, prior and informed consent.

3. States shall also take effective measures to ensure, as needed, that programmes for monitoring, maintaining and restoring the health of indigenous peoples, as developed and implemented by the peoples affected by such materials, are duly implemented.

Article 30

1. Military activities shall not take place in the lands or territories of indigenous peoples, unless justified by a relevant public interest or otherwise freely agreed with or requested by the indigenous peoples concerned.

2. States shall undertake effective consultations with the indigenous peoples concerned, through appropriate procedures and in particular through their representative institutions, prior to using their lands or territories for military activities.

Article 31

1. Indigenous peoples have the right to maintain, control, protect and develop their cultural heritage, traditional knowledge and traditional cultural expressions, as well as the manifestations of their sciences, technologies and cultures, including human and genetic resources, seeds, medicines, knowledge of the properties of fauna and flora, oral traditions, literatures, designs, sports and

traditional games and visual and performing arts. They also have the right to maintain, control, protect and develop their intellectual property over such cultural heritage, traditional knowledge, and traditional cultural expressions.

2. In conjunction with indigenous peoples, States shall take effective measures to recognize and protect the exercise of these rights.

Article 32

1. Indigenous peoples have the right to determine and develop priorities and strategies for the development or use of their lands or territories and other resources.

2. States shall consult and cooperate in good faith with the indigenous peoples concerned through their own representative institutions in order to obtain their free and informed consent prior to the approval of any project affecting their lands or territories and other resources, particularly in connection with the development, utilization or exploitation of mineral, water or other resources.

3. States shall provide effective mechanisms for just and fair redress for any such activities, and appropriate measures shall be taken to mitigate adverse environmental, economic, social, cultural or spiritual impact.

Article 33

1. Indigenous peoples have the right to determine their own identity or membership in accordance with their customs and traditions. This does not impair the right of indigenous individuals to obtain citizenship of the States in which they live.

2. Indigenous peoples have the right to determine the structures and to select the membership of their institutions in accordance with their own procedures.

Article 34

Indigenous peoples have the right to promote, develop and maintain their institutional structures and their distinctive customs, spirituality, traditions, procedures, practices and, in the cases where they exist, juridical systems or customs, in accordance with international human rights standards.

Article 35

Indigenous peoples have the right to determine the responsibilities of individuals to their communities.

Article 36

1. Indigenous peoples, in particular those divided by international borders, have the right to maintain and develop contacts, relations and cooperation, including activities for spiritual, cultural, political, economic and social purposes, with their own members as well as other peoples across borders.

2. States, in consultation and cooperation with indigenous peoples, shall take effective measures to facilitate the exercise and ensure the implementation of this right.

Article 37

1. Indigenous peoples have the right to the recognition, observance and enforcement of Treaties, Agreements and Other Constructive Arrangements concluded with States or their successors and to

have States honour and respect such Treaties, Agreements and other Constructive Arrangements.

2. Nothing in this Declaration may be interpreted as to diminish or eliminate the rights of Indigenous Peoples contained in Treaties, Agreements and Constructive Arrangements.

Article 38

States in consultation and cooperation with indigenous peoples, shall take the appropriate measures, including legislative measures, to achieve the ends of this Declaration.

Article 39

Indigenous peoples have the right to have access to financial and technical assistance from States and through international cooperation, for the enjoyment of the rights contained in this Declaration.

Article 40

Indigenous peoples have the right to have access to and prompt decision through just and fair procedures for the resolution of conflicts and disputes with States or other parties, as well as to effective remedies for all infringements of their individual and collective rights. Such a decision shall give due consideration to the customs, traditions, rules and legal systems of the indigenous peoples concerned and international human rights.

Article 41

The organs and specialized agencies of the United Nations system and other intergovernmental organizations shall contribute to the full realization of the provisions of this Declaration through the mobilization, inter alia, of financial cooperation and technical assistance. Ways and means of ensuring participation of indigenous peoples on issues affecting them shall be established.

Article 42

The United Nations, its bodies, including the Permanent Forum on Indigenous Issues, and specialized agencies, including at the country level, and States, shall promote respect for and full application of the provisions of this Declaration and follow up the effectiveness of this Declaration.

Article 43

The rights recognized herein constitute the minimum standards for the survival, dignity and well-being of the indigenous peoples of the world.

Article 44

All the rights and freedoms recognized herein are equally guaranteed to male and female indigenous individuals.

Article 45

Nothing in this Declaration may be construed as diminishing or extinguishing the rights indigenous peoples have now or may acquire in the future.

Article 46

1. Nothing in this Declaration may be interpreted as implying for any State, people, group or person any right to engage in any activity or to perform any act contrary to the Charter of the United Nations or construed as authorizing or encouraging any action which would dismember or impair totally or in part, the territorial integrity or political unity of sovereign and independent States.

2. In the exercise of the rights enunciated in the present Declaration, human rights and fundamental freedoms of all shall be respected. The exercise of the rights set forth in this Declaration shall be subject only to such limitations as are determined by law, and in accordance with international human rights obligations. Any such limitations shall be non-discriminatory and strictly necessary solely for the purpose of securing due recognition and respect for the rights and freedoms of others and for meeting the just and most compelling requirements of a democratic society.

3. The provisions set forth in this Declaration shall be interpreted in accordance with the principles of justice, democracy, respect for human rights, equality, non-discrimination, good governance and good faith.