Anwernekenhe* Consensus Statement

We the undersigned **acknowledge** the fact that viral hepatitis is a major, devastating, under-recognised health issue within Indigenous communities globally. This statement **recognises** our desire to **reduce** the impact of viral hepatitis on Indigenous peoples’ economic, social, emotional, physical and spiritual health. Doing so will help maintain our cultures and the future of Indigenous populations. We **urge** nation-states and their governments to make special provision in health and funding policies for equitable access to prevention, testing, treatment and management of viral hepatitis in Indigenous peoples.

Our **aim** is to promote greater visibility, action, knowledge and accountability by nation-states in recognising viral hepatitis as a major chronic disease in Indigenous peoples, within an Indigenous and human rights framework.

In developing this statement we have taken regard to the following **principles**

- viral hepatitis is everybody’s business
- Indigenous leaders, scientists, researchers, academics, people in industry, and indigenous people living with viral hepatitis – working together;
- Indigenous self-determination;
- privileging and incorporating cultural and traditional knowledges; worldviews, and culturally resonant practices;

*Arrernte language for ‘belongs to us’.

Phonetic: Un-wer-ne-ng-e-nee
• freedom from racism, discrimination and stigma;
• health equity for all Indigenous peoples;
• respecting and protecting Indigenous habitats and communities;
• creating opportunities for sharing Indigenous views and perspectives on health and supporting Indigenous models of hepatitis care and treatment;
• empowering Indigenous communities to control their relationship with viral hepatitis.

The key priorities are to:

• develop national, indigenous-specific targets within strategies to address viral hepatitis;
• commit to a reduction in the incidence, prevalence and burden of viral hepatitis in Indigenous populations;
• improve access for indigenous peoples to quality healthcare across all levels of the healthcare system;
• incorporate indigenous knowledges and customs in viral hepatitis health education (including through Indigenous educators);
• develop and implement Indigenous models of viral hepatitis care and treatment;
• respond to the viral hepatitis needs of indigenous peoples in prison;
• promote harm reduction as a strategy for reducing the burden of viral hepatitis in indigenous peoples;
• improve surveillance, data collection, reporting and monitoring of viral hepatitis in Indigenous communities;
• encourage, facilitate and fund (indigenous controlled) research in viral hepatitis;
• support international meetings and workshops to address viral hepatitis in indigenous peoples.

[signatures and affiliations] 16 September, 2014, Alice Springs, Australia

Supporting Documents:
UN Declaration of Rights of Indigenous Peoples (UN, September 2007)
WHO Viral Hepatitis Resolution (WHA 67.7, May 2014)