

With thanks to the Ministry of Health and Care of Norway, we the Indigenous Working Group of the World Federation of Public Health Associations wish to offer this submission on the consultation process for the development of the White Paper on Sami public health and living conditions.

We offer a broad view of Indigeneity as primarily Indigenous people from first world nations, New Zealand, Australia and the USA. We will answer simply to the questions below with one core statement. We believe that the consultation in this process has not been afforded the time that completely honours the importance of the subject matter and the need for the outcomes to address the actual needs within these communities.

Recently our Co-Vice Chair and the President Elect of the WFPHA was in Norway and met with a number of the public servants charged with this consultation and also the Public Health Community and Sami nation. It was apparent that there was not enough awareness in September 2023 of this consultation process and therefore we are critical of the reach of the consultation and therefore question if there is an adequate voice from Sami Individuals, Sami Communities and researchers for the process to be as robust as possible.

We answer your broad questions below:

What particular challenges related to public health and living conditions exist in Sámi areas?

Has time been afforded to a robust consultation?

Which positive resources in Sámi culture and society can be strengthened in a way that improves health and wellbeing?

There are many positive resources, we ask how the Ministry and its subsequent mechanisms ensure they are truly hearing and working with the known information and champions of public health within the Sami communities that exist and have existed for some time.

How well suited is the general public health policy to promote health in the Sámi population, and what adaptations are needed?

Policy is only suitable enough if it is utilised to the best outcome for those most in need. Specific policy that assures and affords resources go where Sami identify they need to go is paramount.

What can the government do to promote public health and living conditions in Sámi areas?

What kind of capacity in regard to Sami representation does the government have to inform it's work broadly i.e. Sami in senior decision-making roles and positions?

We thank you for the opportunity to provide this important international Indigenous public health submission.

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