

# **INVESTING IN INDIGENOUS YOUNG PEOPLE** TO ACHIEVE HEALTHY POPULATIONS

Indigenous adolescents and youth represent more than 50% of the total adolescent and youth population. These groups are more likely to live in rural areas and in poverty; have higher illiteracy rates; poorer sexual and reproductive health knowledge and higher fertility rates; poorer mental health outcomes; and higher rates of disability and mortality due to injuries and accidents than their non-indigenous counterparts. These poor outcomes and social disparities are interrelated, and not only impact their current health as young adults, but their future health status, health care costs, and longevity (1).

We can improve the lives of millions of indigenous adolescents and youth by putting our knowledge into action and scaling-up key interventions to ensure that they live a healthy life and achieve their potential to contribute fully to society in the decades ahead.

#### Situational Analysis of Indigenous Adolescents and Youth in the Region (1):

- Indigenous adolescents and youth represent more than 50% of the total adolescent and youth population.
- Between 67% and 90% of indigenous young people live in rural areas (Table 1).
- Of the 24.8% of young people that are economically active in the region, 41.7% represent indigenous young people.
- Indigenous young people are more likely to live in poverty than their non-indigenous counterparts.
- Indigenous young people have higher illiteracy rates than non-indigenous young people (ranging between 1.6% in Chile to 31% in Paraguay).

**TABLE 1. Adolescent and Youth Population** (between 10 and 24 years of age) living in rural areas, by Ethnicity in selected countries of Latin America.



Source: PAHO & ECLAC (2011)



The World Health Organization (WHO) defines adolescence as those between the ages 10-19 years of age, youth as those between 15-24 years of age, and young people as those between the ages 10-24 vears of age

### Mental Health:

#### Depression (1)

- Information regarding depression amongst indigenous young people is fragmented, contradictory, and insufficient; however, the data that is available in the region suggests that the prevalence of depression is higher amongst indigenous communities than non-indigenous communities.
- Indigenous young women are more likely to be affected by depression than young men.
- Racism, cultural marginalization, tension • between traditional and western values, coupled with intergenerational conflict, limited access to resources and opportunities, put indigenous young people at a greater risk for depression.

#### Suicide (1)

- There is a lack of research on the issue of youth suicide in Latin America. However, the data that is available suggests that suicide mortality is more common amongst indigenous young people than amongst nonindigenous young people.
- Suicide rates amongst indigenous young • people can peak as high as four times the rate of suicide amongst non-indigenous young people.

References: 1. The Pan American Health Organization & the Economic Commission for Latin America and the Caribbean (ECLAC). The Health of Indigenous Young People in Latin America: A Panorama. Washington DC: PAHO; 2011. Acknowledgements: This document was developed with the support of the Spanish Agency for International Development Cooperation (AECID) and the Royal Norwegian Embassy in Guatemala.



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TABLE 2. Suicide Mortality Rates amongst Young People between 10-24 years of Age, by Ethnicity, in Chile 2004-2006.



Source: PAHO & ECLAC (2011)

- These rates are usually higher amongst young men than amongst young women.
- In the last couple of years, there has been an upward trend of suicide rates amongst indigenous young people in Argentina, Brazil, Chile, Colombia, Nicaragua, Paraguay and in Venezuela.
- Suicide mortality rates are increasing at a faster rate amongst young people than amongst other age groups.
- Suicide rates amongst indigenous populations are associated with elevated social stress, historical traumas passed from generation to generation, and sexual abuse.

#### Sexual and Reproductive Health (1):

- Indigenous adolescents and youth experience sexual initiation earlier than their non-indigenous counterparts.
- Age specific fertility rates are usually higher amongst indigenous adolescents and youth than amongst non-indigenous adolescents and youth.
- Some studies indicate that the use of contraceptive methods amongst married or committed indigenous adolescents (between the ages 15 to 19 years of age), range between 12.4% in Guatemala to 43.2% in Peru.
- Indigenous youth (between the ages 15-24 years of age) are at greater risk of becoming mothers than their non-indigenous counterparts (Table 3).

- Early motherhood is often linked to poverty, education, and gender inequities.
- Indigenous young mothers are more likely to drop out of school, with statistics ranging between 52.9% in Peru and 97% in Paraguay.





### Links

- PAHO's Adolescent and Youth Regional Strategy and Plan of Action 2010-2018: <u>http://new.paho.org/hq/dmdocuments/20</u> <u>11/Adolescent%20and%20Youth%20Regional</u> <u>%20Strategy%20and%20Plan%20of%20Action.</u> <u>pdf</u>
- The Health of Indigenous Young People in Latin America, A Panorama: <u>http://new.paho.org/hq/index.php?option</u> <u>=com\_docman&task=doc\_view&gid=15446&I</u> <u>temid</u>=