As delegates at the 2nd World Indigenous Peoples’ Conference on Viral Hepatitis held in Anchorage, Alaska, who are committed to effective action on viral hepatitis in indigenous and tribal communities, we declare the following:

We SEEK the ELIMINATION of avoidable mortality from people living with viral hepatitis, and the ELIMINATION of viral hepatitis from Indigenous Peoples and Tribal Communities WORLDWIDE by 2030.

We REQUIRE OUR nation-states and governments to make special provision in health and funding policies to achieve elimination of viral hepatitis from Indigenous Peoples and Tribal Communities by 2030.

We RECOGNISE and SUPPORT the desire of Indigenous Peoples and Tribal Communities to determine our futures and to receive culturally effective services which reduce the impact and eliminate viral hepatitis.

As we celebrate the 10th Anniversary of the Declaration on the Rights of Indigenous Peoples, we AFFIRM our commitment to Indigenous rights and URGE nation-states and governments to facilitate further progress.

To maintain momentum, it is critical that an Indigenous-led working group be formed and supported to drive international action on eliminating Viral Hepatitis in Indigenous Peoples; recognising how Indigenous Peoples are organised, and designed to ensure those with the greatest needs are served first.

9 August 2017 – Anchorage, Alaska, USA
In developing this statement, we have taken regard to the following PRINCIPLES:

- **Diversity** exists within Indigenous peoples and tribal communities
- Viral hepatitis is impacted by the *intergenerational trauma* experienced by Indigenous peoples
- Viral hepatitis is *everybody’s responsibility*, yet Indigenous peoples must lead the change
- Indigenous leaders, scientists, researchers, philanthropists, academics, people in industry, and Indigenous peoples’ living with viral hepatitis – *working together under Indigenous peoples’ leadership*;
- Indigenous peoples’ *self-determination and empowerment* of Indigenous peoples’ and communities to control their relationship with viral hepatitis;
- Privileging and prioritising indigenous peoples’ responses by integrating, weaving, and incorporating cultural and traditional knowledges, worldviews, and culturally resonant, strength-based practices;
- **Freedom** from racism, discrimination and stigma;
- Health **equity** for all Indigenous peoples;
- **Respecting and protecting** Indigenous peoples’ lands, habitats and communities;
- **Creating opportunities** for sharing Indigenous peoples’ expertise on health and supporting Indigenous models of hepatitis care and treatment;

The **KEY PRIORITIES** are to:

- develop a template to enable indigenous peoples regionally to report on reducing avoidable death and making progress toward elimination of viral hepatitis
- develop national, indigenous-specific targets within strategies to ELIMINATE viral hepatitis;
- on the path to ELIMINATION, commit to a reduction in the incidence, prevalence and burden of viral hepatitis in Indigenous populations;
- encourage, facilitate and fund indigenous youth attendance to meetings and workshops
- 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;
- on the path to ELIMINATION, promote harm reduction as a strategy for reducing the burden of viral hepatitis in indigenous peoples;
- on the path to ELIMINATION, 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.