

Obesity Is a Chronic Condition for Indigenous Elders

A Fact Sheet by the American Society on Aging

Obesity was first designated as a disease by the American Medical Association in 2013, and this resolution was reaffirmed in 2023, stating that obesity is a disease state “with multiple pathophysiological aspects requiring a range of interventions.” Despite this official recognition, Medicare does not classify the condition as chronic.

This leaves Indigenous elders and their families with no access to the full continuum of available weight-management and obesity-care options. Yet Indigenous communities and their elders have disproportionately higher rates of obesity than other populations in the United States, a statistic driven by lack of access to health insurance, transportation and healthy diets.



During a series of roundtables with the American Society on Aging in the fall of 2023, more than 40 Indigenous elders, service providers and researchers shared knowledge, data and personal experiences with obesity in their communities and families.



These conversations highlighted that **obesity concerns span generations** and **cannot be addressed without consistent and equitable access** to food, transportation and services delivered via **cultural appreciation and trust**.

The United States' healthcare systems—both healthcare providers and insurance providers—must acknowledge and meet the range of needs of all Indigenous communities. With the designation of obesity as a chronic condition, Indigenous communities will be better suited to treat obesity in the manner that individuals and the tribal community feel are most appropriate.

48%

of American Indian and Alaska Native adults were living with obesity in 2018

Obesity Concerns Reach Across Generations

- A community health clinic survey revealed that obesity is the No. 1 health concern, as it leads to many negative health outcomes.
- Obesity is seen as a multigenerational problem. The lack of proper nutrition, exercise and access to resources affects multiple generations.
- Developing obesity or diabetes is often viewed as inevitable.

“ —
Our people are susceptible [to obesity].
—Elder

We know people that have lost their toes, their legs, and it's just like, oh, so and so lost their feet.
—Elder

Access to Food, Transportation and Other Services Can Be a Barrier to Healthy Lives

- Access to resources for living healthy lifestyles varies widely, based upon community and tribal wealth.
- Low-income individuals have a harder time accessing services and transportation, which means:
 - Elders cannot always attend medical appointments or community events, or find healthy produce and grocery options.
 - Medical specialists can be as far away as 3 hours.

“ —
When you're trying to clean up hundreds, hundreds of years of challenges, you're going to need resources to be able to do that. And we don't have the resources.
—Elder

Trust Stands in the Way of Effective Obesity Prevention and Interventions

- There is a continued lack of trust in the U.S. government due to generational trauma that has endured for centuries.
 - Commodity foods given to Indigenous peoples from the U.S. government are viewed as unhealthy, yet have become the preferred diet for Indigenous elders.
- Despite the expectation that the Indian Health Service (IHS) would meet the healthcare needs of American Indian Elders (AIE) and Alaska Native populations, insufficient funding, lack of insurance coverage and limited access for AIE individuals living outside reservations have led to healthcare challenges and financial burdens.

