

Contributors to Obesity for Indigenous Elders

A Fact Sheet by the American Society on Aging

Obesity in Indigenous elders is caused by a constellation of factors, including **inconsistency in access to treatment, lack of funding and aid, and the loss of culturally appropriate care**. Each factor contributes to the disproportionately high rates of obesity in the Indigenous elder community.

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 is viewed as a lifelong, intergenerational issue and **cannot be addressed without consistent and equitable access to healthy food, transportation to service providers, and healthcare services that are delivered via cultural appreciation and trust**. There is great variance in resources between tribal communities, making treatment for obesity difficult to assess and solve for, but first, many elders feel that even their most basic needs are not being met.



The United States' healthcare systems—both healthcare providers and insurance providers—must acknowledge and meet the range of needs of all Indigenous communities. Then Indigenous communities will be better suited to treat obesity in the manner that individuals and the tribal community feel are most appropriate. These solutions also may vary greatly based upon an individual's or communities' values, but roundtable attendees expressed the desire to have **full access to all care options, and the ability to integrate traditional healing practices with Western care.**

“ And then we also have regulations and things that are imposed upon us [such as] how many deer can we harvest to feed our communities? How much fish can we catch?
—Elder

I look at food as medicine and I promote traditional food as much as I can, and I talked about using organic as much as possible.
—Program Coordinator



“ You know, culturally, my health is tied to how my water is, how my air is that I'm breathing, the foods that I'm eating, how my community is doing.
—Elder



“ If they can't get to their doctor's appointments, they won't go. And then the ones [who] do ask, they're very limited income and so they have to use paratransit or some kind of transportation and with paratransit you have to continuously call to get through the line. The longest I've heard somebody wait is like 3 hours.
—Program Coordinator

Disconnection from Tradition Contributes to Obesity

- Over time, some communities have felt a loss of connection to nature, to traditional foods, and to spiritual aspects of health, which have directly led to poorer health.
- Indigenous methods of hunting and gathering have been severely limited due to land restrictions and climate change.
 - Indigenous peoples' deep spiritual connection to nature underscores their unwavering commitment to environmental protection.
 - Indigenous communities are instrumental in safeguarding the environment and contributing to climate preservation.
 - Sourcing locally grown and cultivated foods provides nutritional meals that often align with traditional values.
 - The primary objective of many Indigenous communities is to improve the well-being of their communities, relying upon natural land and [river systems](#).

Access to Healthy Foods and Transportation Are Persistent Barriers to Health

- Commodity foods provided through U.S. government programs have become an unhealthy but preferred staple in the community and are now considered the norm, fostering a continued distrust of government.
 - The Food Distribution Program on Indian [Reservations](#) (FDIR) aims to “increase access to healthy foods in Indian country,” but:
 - The FDIR uses foods available from the “[2024 commodity food list](#)” that heavily relies upon canned and processed goods.
- Many elders have very low incomes and/or no access to transportation, making it difficult to access healthy food and community supports.
- Despite the expectation that the Indian Health Service (IHS) would fully meet the healthcare needs of Indigenous elders, insufficient funding, lack of insurance coverage, and limited access for American Indian elders living outside reservations lead to healthcare challenges and financial [burdens](#).