

# Indigenous health across contexts: Lived realities, structural conditions, and community-led pathways forward

Jon Petter Stoor<sup>1\*</sup>

<sup>1</sup>Department of Epidemiology and Global Health, Lávvuo-Research and education for Sámi health, Umeå University, Sweden

\*Corresponding author: [jon.petter.stoor@umu.se](mailto:jon.petter.stoor@umu.se)

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Indigenous peoples across the world continue to experience profound and persistent health inequities compared with non-Indigenous populations. These inequities are consistently documented across diverse settings and health outcomes, including mental health, chronic disease, maternal and child health, and life expectancy [1,2]. Indigenous health research has clearly shown that these disparities are not attributable to individual behaviours or cultural practices, but instead reflect the enduring impacts of colonisation, land dispossession, forced assimilation, and the erosion of Indigenous governance and self-determination [3]. Ongoing experiences of racism, exclusion from political and health system decision-making, and inequitable access to culturally safe services further shape health outcomes across the life course. Frameworks grounded in Indigenous perspectives and international human rights instruments, including the United Nations Declaration on the Rights of Indigenous Peoples, emphasise that health and wellbeing are inseparable from collective rights, connection to land, culture, language, and community [4]. At the same time, Indigenous scholars have cautioned against deficit-based framings that portray Indigenous peoples primarily through lenses of vulnerability, calling instead for approaches that recognise Indigenous strengths, resilience, knowledge systems, and leadership as central to improving health and wellbeing [5,6].

This Special Issue on Indigenous Communities, Health, and Wellbeing brings together contributions from diverse geographical, cultural, and political contexts, including Indigenous communities in the Nordic countries, Aotearoa New Zealand, North and South America, and South Asia. Taken together, the articles explore Indigenous health through the lens of social determinants, lived experience, and community perspectives, while also highlighting Indigenous-led solutions and pathways toward more equitable and culturally grounded health systems.

Several contributions examine patterns of health and illness shaped by intersecting social positions and struc-

tural conditions. Aguiar et al. analyse disparities in depression at the intersection of Indigenous status and gender in Sweden, highlighting how mental health outcomes are shaped by overlapping forms of inequality [7]. Similarly, Nilsson et al. and Aung et al. focus on health-related behaviours among Sámi populations in Sweden, examining traditional lifestyle habits and sugar-sweetened beverage consumption within broader social and cultural contexts [8,9]. Jha et al. document mortality patterns in a tribal population in western India, using verbal autopsy methods to make visible deaths and causes often absent from official statistics [10].

Access to health care, and the environments that shape it, is a central theme in several articles. Juneja et al. explore how forest-based neighbourhoods influence healthcare access for Adivasi communities in India [11], while Nweze et al. review the complex social worlds of Inuit people who are urban and unhoused, drawing attention to the intersections of housing, mobility, and health [12]. Lewis et al. examine the knowledge, needs, and preferences of Cherokee adults to inform more responsive and culturally appropriate programme design [13].

Other contributions foreground Indigenous knowledge systems, governance, and community-led approaches as essential to health and wellbeing. Enoka et al. reflect on the co-design of an Indigenous leadership, governance, and decision-making model, Te Remu Huia, illustrating how Indigenous governance can shape health initiatives [14]. Mark et al. advocate for collaborative healthcare approaches that bring together Rongō Māori and Western medicine [15], while Larsen et al. present Peqqissuserput, a strengths-based theoretical model rooted in Kalaallit Inuit perspectives [16]. Nørtoft et al. describe the design of a community-based participatory dementia care intervention in Inuit communities in Greenland [17], and Young et al. detail the adaptation of an Indigenous child health measure for Inuit children in Iqaluit [18].

Finally, Orihuela-Anaya et al. highlight the empower-

ing perspectives of Indigenous community health workers along the Putumayo River in the Peruvian Amazon, underscoring the vital role of community-based actors in bridging health systems and Indigenous realities [19].

Together, the articles in this Special Issue challenge deficit-based narratives of Indigenous health. They demonstrate that improving Indigenous health requires attention to structural determinants, respect for Indigenous knowledge and governance, and meaningful part-

nerships grounded in community priorities. We hope this collection contributes to ongoing dialogue, learning, and action toward more just, inclusive, and sustainable approaches to health for Indigenous peoples globally.

### ORCID*s*

Jon Petter Stoor  [0000-0002-1580-8307](https://orcid.org/0000-0002-1580-8307)

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