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## Permanent Forum on Indigenous Issues

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Item 4 of the provisional agenda\*

**Discussion on the six mandated areas of the Permanent Forum  
(economic and social development, culture, environment,  
education, health and human rights), with reference to the  
United Nations Declaration on the Rights of Indigenous  
Peoples and the 2030 Agenda for Sustainable Development**

## **Evaluating institutional structures to improve the health and wellness of Indigenous Peoples globally: the Indigenous determinants of health measurement instrument**

### **Note by the Secretariat**

The Secretariat has the honour to transmit to the Permanent Forum on Indigenous Issues the study by a member of the Permanent Forum, Geoffrey Roth, on evaluating institutional structures to improve the health and wellness of Indigenous Peoples globally: the Indigenous determinants of health measurement instrument.

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\* E/C.19/2025/1.



## **Study on evaluating institutional structures to improve the health and wellness of Indigenous Peoples globally: the Indigenous determinants of health measurement instrument**

### *Summary*

In the present study, a member of the Permanent Forum on Indigenous Issues, Geoffrey Roth, in collaboration with Indigenous scholars, leaders and allies from all seven Indigenous sociocultural regions, introduces a measurement instrument for Indigenous determinants of health, outlines its methodology, provides implementation guidelines and establishes a road map for iterative refinement.

The study is aimed at evaluating: (a) how effectively institutional policies address distinct risks and protective factors that Indigenous communities face; and (b) whether relevant stakeholders are prepared to uphold the principles of the United Nations Declaration on the Rights of Indigenous Peoples in meaningful ways. By extending the scope beyond health institutions to encompass governance systems, environmental stewardship and community well-being, the study is intended to ensure that interventions are culturally safe and aligned with Indigenous rights.

The study underscores the need for transparent, accountable and reliable mechanisms whose work is aligned with commitments in terms of Indigenous health and well-being.

## I. Introduction

1. Building on previous studies on Indigenous determinants of health (E/C.19/2023/5) and their operationalization (E/C.19/2024/5), in the present study, a transformative step forward is taken. Inspired by the voices of Indigenous leaders who have called for an appraisal tool tailored to their unique health needs, the author of the present study unveils a powerful new instrument designed to bridge systemic gaps and promote cultural safety on a global scale. This tool is not just another assessment – it is a call to action to policymakers, practitioners and Indigenous communities to collaboratively evaluate two critical elements: (a) how effectively institutional policies address the distinct risks and protective factors that Indigenous communities face; and (b) whether relevant stakeholders are structurally prepared to uphold the principles of the United Nations Declaration on the Rights of Indigenous Peoples in meaningful ways.
2. Grounded in respect for the wealth of Indigenous evaluation methodologies already shaping culturally sensitive practices worldwide, this instrument is intended not to duplicate but to amplify these efforts. Its unique focus lies in driving systemic change and addressing inequities both vertically – across the hierarchy of institutions – and horizontally – through the intersecting spheres of Indigenous life, including social, cultural, environmental, economic and spiritual dimensions.
3. The tool is designed with the deep understanding that, for Indigenous Peoples, health is inseparable from their relationship with the world around them. By extending its scope beyond health institutions to encompass governance systems, environmental stewardship and community well-being, it is intended to ensure that interventions are both culturally safe and aligned with Indigenous rights.
4. Why is this instrument necessary? The answer is simple: persistent gaps in recognition, accountability and rights-based approaches continue to undermine efforts to address Indigenous health disparities. Too often, global and local institutions reduce Indigenous concerns to diversity initiatives, neglecting the rights of Indigenous Peoples as sovereign peoples under the United Nations Declaration on the Rights of Indigenous Peoples. This instrument reaffirms their status as rights holders, not mere stakeholders, and sets the stage for institutional accountability frameworks that genuinely reflect Indigenous sovereignty and cultural perspectives.
5. Created in collaboration with Indigenous scholars, leaders and allies from all seven Indigenous sociocultural regions, the study includes not only an introduction to the measurement instrument but also an outline of its methodology and implementation guidelines, as well as the road map for iterative refinement. By inviting global Indigenous feedback, this initiative is aimed at creating a living, evolving framework that empowers communities, amplifies advocacy and catalyses transformative change across disciplines.
6. The effort is aimed at paving the way for a world where Indigenous health equity isn't just a goal but a shared reality – rooted in respect, accountability and the enduring rights of Indigenous Peoples.

## II. Literature review

### A. Indigenous determinants of health: the urgent need for a culturally safe and rights-based measurement instrument to guide institutional and systemic change

7. The health disparities between Indigenous populations and dominant and/or settler populations represent a global crisis that demands immediate attention and

innovative solutions. Existing research consistently documents higher rates of morbidity and mortality across a range of health outcomes for Indigenous communities, a direct consequence of the historical and ongoing effects of colonization.<sup>1</sup> Local, regional, national and international entities, including United Nations agencies that play a role in addressing health, are often underequipped to approach this issue in a manner that respects rights as outlined in the United Nations Declaration on the Rights of Indigenous Peoples.<sup>2</sup> Mainstream health frameworks with westernized interventions have repeatedly proved insufficient in addressing these profound inequities.<sup>3</sup> A critical gap persists in the development and implementation of culturally safe, rights-based measurement instruments that accurately reflect the unique determinants of Indigenous health. This institutional shortcoming underscores the urgent need for a paradigm shift in health research, policy and practice – one that is centred on Indigenous knowledge systems, values and experiences.

8. To advance Indigenous health rights and enhance the well-being of Indigenous communities globally, it is essential to conceptualize unique indices designed explicitly for Indigenous determinants of health. Grounded in traditional Indigenous knowledge and principles that have been articulated in prior United Nations studies and reports,<sup>4</sup> the United Nations Declaration on the Rights of Indigenous Peoples, and insights from a scoping literature review, this instrument represents a transformative step towards addressing systematic inequities and fostering culturally safe, rights-based approaches to Indigenous health.

9. In the present literature review, academic articles, policy documents and consensus statements are examined to explore current Indigenous health measurement frameworks and identify aligned elements, practical knowledge and potential gaps in the literature related to Indigenous determinants of health. In addition to acknowledging and honouring the existing publicly available Indigenous evaluation systems produced by Indigenous researchers and communities globally, the present review is aimed at highlighting the limitations of existing colonial and non-Indigenous approaches and establishing sound grounds for a distinct, culturally informed tool developed to characterize better Indigenous determinants of health and its operationalization within institutional and organizational settings. The key themes analysed include the following:

- Principles and best practices for culturally safe and informed Indigenous health research
- Limitations of current frameworks in accurately capturing and measuring Indigenous health
- Existing efforts to conceptualize, develop and implement measurement tools that are specific to Indigenous determinants of health
- Methodological considerations for designing and operationalizing such tools

10. In the present literature review, multidisciplinary sources are synthesized to support and justify developing and operationalizing distinct measurement tools for Indigenous determinants of health. The analysed sources include academic articles

<sup>1</sup> Stephanie Russo Carroll and others, “Reclaiming Indigenous health in the US: moving beyond the social determinants of health”, *International Journal of Environmental Research and Public Health*, vol. 19, No. 12 (2022); and Bram Wispelwey and others, “Because its power remains naturalized: introducing the settler colonial determinants of health”, *Frontiers in Public Health*, vol. 11 (2023).

<sup>2</sup> Wispelwey and others, “Because its power remains”.

<sup>3</sup> Melissa L. Walls and others, “Research with American Indian and Alaska native populations: measurement matters”, *Journal of Ethnographic Substance Abuse Research*, vol. 18, No. 1 (2019); and Wispelwey and others, “Because its power remains”.

<sup>4</sup> [E/C.19/2023/5](#) and [E/C.19/2024/5](#).

examining current health assessment frameworks and the potential gaps regarding Indigenous health and measuring,<sup>5</sup> academic articles documenting the development of culturally grounded measurement instruments tailored to Indigenous health,<sup>6</sup> policy documents highlighting the need for action by the United Nations and Member States to address Indigenous health inequities through an Indigenous determinants of health framework,<sup>7</sup> an Indigenous consensus statement defining the determinants of planetary health and their relevance to Indigenous communities and well-being,<sup>8</sup> and policy documents in which an Indigenous framework is proposed for evaluating health programmes.<sup>9</sup>

11. These sources were analysed to identify key themes, including the limitations of existing approaches, the necessity for a culturally safe, rights-based Indigenous determinants of health measurement tool and practical considerations for its operationalization.

## B. Limitations of current frameworks in measuring Indigenous health

12. Current health assessment frameworks rooted predominately in colonial medical models are insufficient for accurately assessing Indigenous health due to several inherent limitations.<sup>10</sup> The following key criticisms underscore a widespread disconnect between these dominant frameworks and the realities of Indigenous health:

- **Failure to consider the holistic nature of health.** Indigenous world views conceptualize health as an interconnection of all that exists, including physical, mental, emotional, spiritual and environmental well-being.<sup>11</sup> Mainstream frameworks prioritize often narrow biomedical perspectives, focusing on individual-level factors and symptoms while neglecting broader social, cultural, environmental and historical contexts that shape and influence Indigenous health.<sup>12</sup>
- **Lack of cultural safety and respect for Indigenous knowledge systems.** Existing health assessment models often disregard Indigenous knowledge

<sup>5</sup> Carroll and others, “Reclaiming Indigenous health”; Walls and others, “Research with American Indian”; Tara L. Maudrie and others, “Community-engaged development of strengths-based nutrition measures: the Indigenous nourishment scales”, *International Journal of Environmental Research and Public Health*, vol. 21, No. 11 (2024); Nicole Redvers and others, “The determinants of planetary health: an Indigenous consensus perspective”, *The Lancet: Planetary Health*, vol. 6, No. 8 (February 2022); and Wispelwey and others, “Because its power remains”.

<sup>6</sup> Maudrie and others, “Community-engaged development”; and Paula T. Morelli and Peter J. Mataira, “Indigenizing evaluation research: a long-awaited paradigm shift”, *Journal of Indigenous Voices in Social Work*, vol. 1, No. 2 (December 2010).

<sup>7</sup> [E/C.19/2023/5](#) and [E/C.19/2024/5](#).

<sup>8</sup> Redvers and others, “The determinants of planetary health”.

<sup>9</sup> Larry Bremner and Nicole Bowman, “EvalIndigenous origin story: effective practices within local contexts to inform the field and practice of evaluation”, *Canadian Journal of Programme Evaluation*, vol. 34, No. 3 (2020); and Melanie Nadeau and others, “Creating and implementing an Indigenous evaluation framework process with Minnesota tribes”, *Canadian Journal of Program Evaluation*, vol. 38, No. 1 (2023).

<sup>10</sup> Carroll and others, “Reclaiming Indigenous health”; Walls and others, “Research with American Indian”; and Wispelwey and others, “Because its power remains”.

<sup>11</sup> Carroll and others, “Reclaiming Indigenous health”; Walls and others, “Research with American Indian”; Maudrie and others, “Community-engaged development”; and Redvers and others, “The determinants of planetary health”.

<sup>12</sup> Carroll and others, “Reclaiming Indigenous health”; Walls and others, “Research with American Indian”; Redvers and others, “The determinants of planetary health”; and Wispelwey and others, “Because its power remains”.

systems, values and cultural practices.<sup>13</sup> This omission represents an ongoing form of colonial oppression, resulting in the use of measures that are often culturally inappropriate and incapable of capturing the unique perspectives and experiences of Indigenous communities.<sup>14</sup>

- **Limited availability of disaggregated data.** The scarcity of disaggregated data specific to Indigenous populations inhibits the effective monitoring of health disparities and undermines the development of targeted, evidence-based interventions while disregarding data sovereignty for Indigenous Peoples.<sup>15</sup>
- **Imposition of external definitions and priorities.** Current frameworks frequently impose externally defined health priorities and indicators, sidelining community-driven definitions of health and well-being. This disconnect undermines the relevance and applicability of these frameworks to addressing Indigenous health needs, especially at the regional and community levels.<sup>16</sup>

### C. Urgency of culturally safe and rights-based measurement in Indigenous contexts

13. The development and implementation of effective measurement tools for Indigenous contexts requires a paradigm shift that prioritizes cultural safety and upholds Indigenous rights as articulated in the United Nations Declaration on the Rights of Indigenous Peoples.<sup>17</sup> This shift acknowledges that national and United Nations agencies are often unequipped to provide culturally safe and rights-compliant approaches, underscoring the urgent need for a dedicated measurement instrument for Indigenous determinants of health. The following principles are foundational to achieving this goal:

- **Indigenous self-determination and sovereignty.** Measurement processes must be led by Indigenous communities to reflect their unique priorities and needs.<sup>18</sup> Establishing respectful and equitable partnerships between researchers and Indigenous communities, which ensures Indigenous control over all phases of the research process, including data collection, analysis, interpretation and dissemination, is essential.<sup>19</sup>
- **Free, prior and informed consent.** Adhering to free, prior and informed consent principles throughout the research process is paramount. Indigenous communities must have the authority to decide whether and how research is conducted on their lands and with their people, which ensures that all research respects their rights and autonomy.<sup>20</sup>
- **Recognition and integration of Indigenous knowledge systems.** Measurement instruments must be grounded in Indigenous epistemologies and conceptualizations

<sup>13</sup> Carroll and others, “Reclaiming Indigenous health”; Redvers and others, “The determinants of planetary health”; [E/C.19/2024/5](#); and Wispelwey and others, “Because its power remains”.

<sup>14</sup> Carroll and others, “Reclaiming Indigenous health”; and Walls and others, “Research with American Indian”.

<sup>15</sup> [E/C.19/2023/5](#).

<sup>16</sup> Carroll and others, “Reclaiming Indigenous health”; [E/C.19/2023/5](#); and Walls and others, “Research with American Indian”.

<sup>17</sup> Bremner and Bowman, “EvalIndigenous origin story”; [E/C.19/2024/5](#); and Walls and others, “Research with American Indian”.

<sup>18</sup> Carroll and others, “Reclaiming Indigenous health”; [E/C.19/2023/5](#); and [E/C.19/2024/5](#).

<sup>19</sup> Bremner and Bowman, “EvalIndigenous origin story”; Morelli and Mataira, “Indigenizing evaluation research”; [E/C.19/2024/5](#); and Walls and others, “Research with American Indian”.

<sup>20</sup> [E/C.19/2024/5](#).

of health, embracing the interconnectedness of physical, mental, emotional, spiritual and environmental well-being.<sup>21</sup>

- **Community-based participatory research.** Employing community-based participatory research approaches is essential to conducting research in a culturally safe and respectful manner. Such research prioritizes the active involvement and ownership of Indigenous communities throughout the research process.<sup>22</sup>
- **Cultural safety and humility.** Researchers must approach their work with cultural humility, reflecting critically on their positionality, acknowledging potential biases, and fostering a safe and respectful environment for Indigenous participants.<sup>23</sup>
- **Strengths-based approaches.** Measurement tools should be focused on Indigenous strengths, assets and resilience, shifting away from deficit-based narratives that emphasize inherent vulnerability and health problems exclusively.<sup>24</sup>
- **Data sovereignty and ownership.** Indigenous communities must maintain ownership and control over their data, ensuring their ethical and responsible use. Data sovereignty reinforces the principle that Indigenous Peoples have the right to govern their data collection, access and dissemination.<sup>25</sup>

#### D. Operationalizing Indigenous determinants of health: a framework for action

14. Translating the principles of Indigenous determinants of health into actionable strategies requires moving beyond theoretical frameworks and to practical implementation. Operationalizing an Indigenous determinants of health measurement instrument involves a commitment to Indigenous leadership, rights-based approaches and collaborative practices. Key considerations include:

- **Developing Indigenous-led research and practices.** Empowering Indigenous communities to lead research initiatives is critical to ensuring that their voices, perspectives and priorities are central to health programme design, implementation and evaluation. This approach promotes self-determination and builds capacity within Indigenous communities to address their unique health challenges.<sup>26</sup>
- **Expanding policy tools for non-Indigenous authorities.** Local, regional and global authorities must be equipped with clear guidelines and resources for engaging with Indigenous communities effectively. Policies must promote culturally safe, rights-compliant practices that respect Indigenous knowledge systems and uphold the principles of the United Nations Declaration on the Rights of Indigenous Peoples.<sup>27</sup>
- **Recognizing Indigenous Peoples as rights holders.** Moving beyond the narrow classification of Indigenous Peoples as stakeholders, it is essential to recognize them as rights holders. This reframing emphasizes the inherent rights

<sup>21</sup> Carroll and others, “Reclaiming Indigenous health”; Redvers and others, “The determinants of planetary health”; and [E/C.19/2024/5](#).

<sup>22</sup> Morelli and Mataira, “Indigenizing evaluation research”.

<sup>23</sup> [E/C.19/2023/5](#); [E/C.19/2024/5](#); and Walls and others, “Research with American Indian”.

<sup>24</sup> Maudrie and others, “Community-engaged development”.

<sup>25</sup> [E/C.19/2024/5](#).

<sup>26</sup> Ibid.

<sup>27</sup> Ibid.

of Indigenous Peoples to self-determination, active participation and leadership in decision-making processes affecting their health and well-being.<sup>28</sup>

- **Engaging with Indigenous representatives as co-leads and advisers.** Ensuring the meaningful participation of Indigenous leaders, representatives and knowledge holders in policymaking and decision-making bodies is paramount. This includes their roles as co-leads and advisers within the United Nations, partner systems and Member States, fostering equitable collaboration and accountability.<sup>29</sup>

## E. Promising efforts and the path forward

15. Several initiatives offer valuable insights into the development and implementation of culturally grounded measurement tools for Indigenous determinants of health. These efforts highlight innovative approaches that centre Indigenous knowledge systems, cultural values and holistic perspectives:

- **Indigenous nourishment model and scales.** Developed in collaboration with American Indian and Alaska Native communities, the Indigenous nourishment model conceptualizes nourishment through a holistic lens encompassing physical, spiritual, emotional and relational dimensions. The associated Indigenous nourishment scales offer a culturally grounded measurement tool for assessing nutritional health in Indigenous communities.<sup>30</sup>
- **Indigenous health indicators.** Developed by Coast Salish communities, the Indigenous health indicators framework utilizes constructed measures and scales to assess non-physiological aspects of health, including community connection, natural resource security, cultural use, education, self-determination and resilience.<sup>31</sup>
- **Indigenist ecological systems model.** This framework adapts Bronfenbrenner's ecological systems model to an Indigenous context, recognizing the interconnectedness of individual, family, community and societal levels in shaping the mental health and well-being of Indigenous youth.<sup>32</sup>
- **Indigenous evaluation frameworks.**<sup>33</sup> These frameworks prioritize Indigenous knowledge, cultural values and community participation in the evaluation processes. They emphasize community ownership and the integration of cultural practices, providing a culturally grounded approach to assessing the effectiveness and impact of health programmes.

16. In the literature review, the urgent need for a paradigm shift in the way in which Indigenous health is conceptualized, measured and evaluated is underscored. Existing health assessment frameworks, often employed by entities and agencies, fail to fully account for the unique determinants of Indigenous health, as outlined in previous

<sup>28</sup> Ibid.

<sup>29</sup> Ibid.

<sup>30</sup> Maudrie and others, "Community-engaged development".

<sup>31</sup> Jamie Donatuto and others, "Developing responsive indicators of Indigenous community health", *International Journal of Environmental Research and Public Health*, vol. 13, No. 9 (2016).

<sup>32</sup> Victoria M. O'Keefe and others, "Centering Indigenous knowledges and worldviews: applying the Indigenist ecological systems model to youth mental health and wellness research and programs", *International Journal of Environmental Research and Public Health*, vol. 19, No. 10 (2022).

<sup>33</sup> Bremner and Bowman, "EvalIndigenous origin story"; Fiona Cram, "Lessons on decolonizing evaluation from Kaupapa Māori evaluation", *Canadian Journal of Program Evaluation*, vol. 30, No. 3 (2016); Nadeau and others, "Creating and implementing an Indigenous evaluation"; and Morelli and Mataira, "Indigenizing evaluation research".



reports.<sup>34</sup> In these frameworks, the holistic and culturally diverse nature of Indigenous well-being is often overlooked, limiting their relevance and effectiveness.<sup>35</sup>

17. The development of a distinct and dedicated measurement instrument for Indigenous determinants of health – that is, a rights-based, culturally safe perspective promoting Indigenous health equity and the well-being of Indigenous communities worldwide – is essential for fostering a comprehensive systemic change in the structuring of Indigenous-serving institutions. Such an instrument must be informed by the principles discussed in the present study, building on existing efforts and grounded in the foundational values of cultural safety, Indigenous rights and meaningful community engagement. By accurately reflecting Indigenous perspectives, values and priorities, this tool can address critical gaps in current health assessments.

18. Operationalizing this instrument will require a collective commitment from national and international agencies, Indigenous communities, researchers and policymakers. It demands a collaborative and sustained effort to dismantle structural barriers, challenge entrenched paradigms, and centre Indigenous knowledge and leadership in all aspects of health research, policy and practice. By prioritizing these principles, the global community can take significant steps towards achieving health equity for Indigenous Peoples and ensuring that their rights, perspectives and well-being are fully recognized and respected.

### III. Methodology

19. The drafted Indigenous determinants of health metric (see sect. IV) was developed as a comprehensive tool to assess the implementation of Indigenous determinants of health by global, national and local entities. The methodology leveraged the following two key publications, ensuring cultural alignment and practical application:

#### A. Original 2023 study on Indigenous determinants of health conceptualization<sup>36</sup>

20. The following are aspects of the 2023 study on Indigenous determinants of health conceptualization:

- **Foundation of the metric.** Identified key interconnected determinants of Indigenous health as the framework.
- **Domains and indicators.** Focused on cultural continuity, self-determination, environmental stewardship and social cohesion, translated into measurable indicators.
- **Cultural safety and data sovereignty.** Prioritized Indigenous control over health data and culturally respectful metrics.
- **Holistic perspective.** Incorporated a comprehensive view of health, including physical, mental, spiritual and ecological factors.

<sup>34</sup> E/C.19/2023/5 and E/C.19/2024/5.

<sup>35</sup> Carroll and others, “Reclaiming Indigenous health”; Walls and others, “Research with American Indian”; and Wispelwey and others, “Because its power remains”.

<sup>36</sup> E/C.19/2023/5.

## B. Follow-up 2024 study on operationalization of Indigenous determinants of health<sup>37</sup>

21. The following are aspects of the 2024 study on operationalization of Indigenous determinants of health:

- **Practical implementation.** Offered guidance for real-world integration of Indigenous determinants of health.
- **Framework for measurement.** Detailed methods for community engagement and co-design to validate indicators.
- **Justice and safety.** Expanded the metric to include domains such as law enforcement, community safety and equitable justice.
- **Iterative refinement.** Supported regional and cultural adaptability through ongoing improvements.

22. **Initial metric creation.** The first iteration addressed determinants of health holistically, integrating physical, mental, spiritual and cultural well-being through traditional health and culturally specific indicators.

23. **Expansion to safety and justice.** Stakeholder input identified safety and justice as critical areas, leading to new indicators for policing, community safety and fairness in justice systems.

24. **Combining and refining indicators.** To streamline the metric:

- Redundancies were eliminated
- Overlapping items were consolidated
- Cultural relevance and inclusivity were maintained

25. **Integration of feedback.** Input from Indigenous leaders and health experts refined the metrics, scoring systems and alignment with data sovereignty principles.

26. **Current draft of the metric.** The finalized draft integrates key dimensions: intergenerational holistic healing, the health of Mother Earth, decolonizing culture and systems, and institutional compliance with Indigenous rights. A scoring guide (0–3) ensures participatory assessments and regional adaptability.

27. **Approach to metric advancements.** The advancement strategy includes:

- **Cultural contextualization.** Aligning metrics with Indigenous values and practices.
- **Participatory design.** Co-developing indicators with Indigenous leaders.
- **Data sovereignty.** Following ownership, control, access and possession principles.
- **Scalability and flexibility.** Adapting metrics to diverse contexts.

28. The drafted Indigenous determinants of health metric is a culturally attuned framework to guide equitable, inclusive and safe environments for Indigenous communities, with further refinements expected post-pilot testing. Further conversations on the sustainability of this instrument are expected.

<sup>37</sup> E/C.19/2024/5.

## IV. Indigenous determinants of health measurement instrument

### A. Description

29. The Indigenous determinants of health measurement instrument was designed to capture the 33 protective and risk factors affecting the health and well-being of Indigenous Peoples, as well as the structural elements needed in institutional settings to adequately approach Indigenous issues on the basis of the rights of Indigenous Peoples and in a culturally safe manner.

30. This instrument was structured in the form of a scorecard comprising 20 items that cover both Indigenous determinants of health risk and protective factors, as well as the institutional elements supporting them. Tables 1 and 2 are quick-glance tools that show the correlation of a scorecard item to the Indigenous determinants of health constructs covered. Table 1 is based on the 2023 Indigenous determinants of health study,<sup>38</sup> which led to the development of the Indigenous determinants of health protective and risk factors conceptualization under the construct of indigeneity as an overarching determinant of health. Each factor corresponds to one or more scorecard evaluation item numbers. That is, the correlated item number or numbers shown cover that specific factor. Table 2 provides a list of the structural guidelines identified in the 2024 Indigenous determinants of health operationalization study.<sup>39</sup> As in table 1, the scorecard item number or numbers correspond to the item covering that specific guideline.

31. The Indigenous determinants of health scorecard is presented in thematic clusters corresponding to the three major categories of the Indigenous determinants of health: intergenerational holistic healing, the health of Mother Earth, and decolonizing and reindigenizing culture. Section 4 (“Institutional compliance with Indigenous rights and Indigenous health agency structure needs”) below corresponds to the structural guidelines for institutions to comply with the provisions of the United Nations Declaration on the Rights of Indigenous Peoples and develop culturally safe initiatives as presented in the operationalization study.<sup>40</sup>

32. In addition to the scorecard, the Indigenous determinants of health measurement instrument includes an implementation process guidance section, designed to guide institutions on how to proceed with the administration of the instrument. This guidance is found in section C of the present study.

<sup>38</sup> E/C.19/2023/5.

<sup>39</sup> E/C.19/2024/5.

<sup>40</sup> Ibid.

Table 1  
**Indigenous determinants of health covered and corresponding measurement instrument item numbers, in accordance with 2023 Permanent Forum study**

<i>Construct</i>	<i>Covered in evaluation item</i>
1 Intergenerational approach	1
2 Holistic healing	1 and 7
3 Indigenous cultures and languages	2 and 7
4 Language as an Indigenous knowledge keeper and transmitter	2
5 Land and sacred practices	6 and 7
6 Indigenous-specific spirituality	3
7 Overreliance on Western approaches and/or asymmetric treatment of Indigenous knowledge	4
8 Suppression and oppression by substances	5
9 Institutionalized Indigenous-specific racism	5
10 Justified institutional pathologizing of Indigenous Peoples	5
11 Indigenous-specific targeting stigma	5
12 Ongoing trauma exposure	5
13 Forced assimilation and indoctrination	4
14 Physical: environment ecology, water, land and air	6
15 Indigenous food systems	8
16 Access to water sources	6
17 Access to and health of traditional plants	7
18 Indigenous traditional ancestral medicine	7
19 Limited access to Indigenous food systems resources	8
20 Marketed ultraprocessed food replacing Indigenous diets	8
21 Misconstruction of food security for Indigenous communities	8
22 Non-Indigenous concept of planetary health	9
23 Migration and urbanization	10
24 Environmental dispossession	6
25 Dismissal of traditional medicine approaches	7
26 Erosion of traditional lifeways	6
27 Normalization of an ongoing cultural genocide	13
28 Structured, systematic and planned invisibility	13
29 Strengthening and reinforcement of the Indigenous identity	12
30 Acknowledgement of sovereignty of Indigenous rights and beliefs systems	11
31 Indigenizing and decolonizing educational curricula	15 and 16
32 Gender in Indigenous communities	12
33 Indigeneity	All items

**Table 2**  
**Indigenous determinants of health operationalization elements covered and**  
**corresponding measurement instrument item numbers, in accordance with**  
**2024 Permanent Forum study**

<i>Structural element</i>	<i>Covered in evaluation item</i>
A Official recognition of Indigenous Peoples and communities	17
B Indigeneity as an overarching determinant of health	All items
C Indigenous knowledge and Indigenous data sovereignty	20
D Avoiding unilateral coercive measures	14, 15 and 16
E Adoption of an overall agency policy	17
F Indigenous representation based on free, prior and informed consent	17
G Establishment of Indigenous advisory bodies	18
H Incorporation of Indigenous staff preference measures	19
I Incorporation of Indigenous Peoples engagement measures	18 and 19
J Adoption of a scientific framework ensuring Indigenous representation in data sets	20
K Equitable recognition of Indigenous knowledge	5 and 20
L Adoption of agency-wide recognition of equitable scientific and technical validity of Indigenous knowledge and systems	1, 7 and 20
M Establishment of Indigenous-led governance boards to guide organizational implementation of Indigenous knowledge	17 and 18
N Incorporation of Indigenous research methodologies and practices	1, 7 and 20
O Adoption of a circular and holistic Indigenous evaluation framework based on culture, language and spirituality	2, 3, 6 and 20
P Development of Indigenous evaluation methods specific to cover the constructs of Indigenous family, land, space and holistic wellness	1, 9, 13 and 20
Q Adoption of a trauma-informed approach	5 and 15
R Policymaker education based on Indigenous evaluation results	15, 16, 18 and 20
S Establishment of just Indigenous land tenure rights	6 and 17
T Instrumentation and monitoring of land tenure rights	6 and 17
U Adoption of an Indigenous-based planetary health determinants framework	1 and 9
V Incorporation of approaches centred on ecology (ecocentric)	1 and 9
W Assessment of systemic racism and discrimination against Indigenous Peoples, based on the United Nations Declaration on the Rights of Indigenous Peoples	3, 4, 10, 12, 13, 14, 15 and 16
X Adoption of an anti-racism and discrimination policy based on the assessment, the Universal Declaration of Human Rights and the United Nations Declaration on the Rights of Indigenous Peoples	3, 4, 10, 12, 13, 14, 15 and 16
Y Adoption of a policy addressing Indigenous issues separate from those of local communities, based on the United Nations Declaration on the Rights of Indigenous Peoples	11, 17, 18 and 19

## B. Indigenous determinants of health scorecard

### 33. Scoring guide

- (a) **Excellent:** 45–60 points – strong alignment with the Indigenous determinants of health, Indigenous rights and the institutional structures needed for a culturally safe and rights-based approach;
- (b) **Good:** 30–44 points – moderate alignment, with room for improvement;
- (c) **Needs improvement:** 15–29 points – limited support and alignment;
- (d) **Poor:** 0–14 points or below – minimal or no alignment; significant improvement needed.

### 1. Section 1: intergenerational holistic healing

#### Evaluation item 1: fostering intergenerational<sup>41</sup> and holistic<sup>42</sup> approaches

34. **Indicator.** Existing approaches incorporating Indigenous perspectives that take into consideration multiple generations-related factors and holistic health and well-being perspectives.

35. **Metrics.** Initiatives and projects (methodologies, interventions, policies and practices) based on holistic or intergenerational aspects of health.

#### 36. Scoring

- (a) **High (3 points):** well-funded support for both intergenerational and holistic approaches in the agency;
- (b) **Medium (2 points):** some support and resources for either intergenerational or holistic approaches in the agency;
- (c) **Low (1 point):** potential support for intergenerational and/or holistic approaches in the agency based on documents or discussions;
- (d) **Very low (0 points):** no discussions on or support for either intergenerational or holistic approaches in the agency.

#### Evaluation item 2: promotion of Indigenous cultures and languages

37. **Indicator.** Support for Indigenous language and cultural programmes.

#### 38. Metrics

- (a) Availability of culturally relevant educational materials and resources fostering Indigenous languages as knowledge transmission techniques;
- (b) Resources for Indigenous language preservation and revitalization programmes.

#### 39. Scoring

- (a) **High (3 points):** significant resources and extensive support for language transmission and cultural programmes;
- (b) **Medium (2 points):** moderate resources, with some language and cultural support resources available;

<sup>41</sup> Taking into account factors that stem from existing alive generations and ancestors and that have an impact on the unborn.

<sup>42</sup> Taking into account all aspects of life-impacting health, e.g. ecological, physical, mental, spiritual, economic, social, cultural and environmental.

(c) **Low (1 point):** minimal support for Indigenous language and cultural programmes;

(d) **Very low (0 points):** no resources/support for Indigenous language and cultural programmes.

**Evaluation item 3: respect for and strengthening of Indigenous spirituality and sacred practices as health factors**

40. **Indicator.** Institutional documents designed to protect Indigenous practices on the basis of belief systems.

41. **Metrics.** Agency policies discussing and establishing the need to protect and foster Indigenous spiritual and sacred practices when implementing operations.

**42. Scoring**

(a) **High (3 points):** existing policies or guidelines for protecting Indigenous spiritual and sacred practices;

(b) **Medium (2 points):** existing documents in which the need to establish policies or guidelines for protecting Indigenous spiritual and sacred practices is discussed;

(c) **Low (1 point):** minimal institutional awareness or mentions of the need to respect and foster Indigenous spiritual and sacred practices;

(d) **Very low (0 points):** no awareness of the need to respect and foster Indigenous spiritual and sacred practices.

**Evaluation item 4: combating forced assimilation and indoctrination**

43. **Indicator.** Operations designed to actively address systemic coercion of Indigenous communities to fit into the dominant culture's ideologies and systems.

44. **Metrics.** Initiatives or projects that actively foster activities for Indigenous communities free of (or combating) assimilation and indoctrination ideologies.

**45. Scoring**

(a) **High (3 points):** well-funded and supported projects for Indigenous communities free of (or combating) assimilation and indoctrination ideologies;

(b) **Medium (2 points):** incipient (initial) activities for Indigenous Peoples fostering freedom from (or combating) assimilation and indoctrination ideologies;

(c) **Low (1 point):** existing documents in which the need to establish operations for Indigenous communities free of (or combating) assimilation and indoctrination ideologies is discussed;

(d) **Very low (0 points):** no awareness of the need to combat institutional assimilation and indoctrination ideologies in Indigenous Peoples-related operations.

**Evaluation item 5: healing ongoing trauma exposure**

46. **Indicator.** Institutional guidelines and operations designed to support the healing of Indigenous communities from trauma, stigma, racism, oppression and the retraumatization from historical physical, cultural, psychological and environmental injuries.

47. **Metrics.** Established procedures for institutional operations to prohibit and penalize Indigenous-specific stigmatization, racism, oppression by substances or dismissal of Indigenous knowledge for community solutions.

**48. Scoring**

- (a) **High (3 points):** existing guidelines to recognize and transcend trauma exposure practices;
- (b) **Medium (2 points):** some activities but no guidelines to transcend trauma exposure practices;
- (c) **Low (1 point):** existing documents in which the need to transcend trauma exposure practices is discussed;
- (d) **Very low (0 points):** no awareness of the need to transcend any trauma exposure practices.

**2. Section 2: health of Mother Earth category****Evaluation item 6: incorporation of land, ecological and environmental components into Indigenous Peoples-related initiatives**

49. **Indicator.** Initiatives and resources for Indigenous communities to safeguard their stewardship and management of natural elements, while incorporating ecology, water, land and air components into culturally safe activities.

**50. Metrics**

- (a) Initiatives fostering protection of and respect for Indigenous communities to own, manage and govern over their ancestral lands and resources in a sovereign fashion;
- (b) Availability of resources fostering and expanding the connection of Indigenous communities to environmental elements as part of community care and the health of the planet.

**51. Scoring**

- (a) **High (3 points):** well-resourced, institutionalized support for activities allowing Indigenous Peoples' connection to and ownership and management of Mother Earth's resources;
- (b) **Medium (2 points):** partial or intermittent institutional support and resources for activities allowing Indigenous Peoples' connection to and ownership and management of Mother Earth's resources;
- (c) **Low (1 point):** initial discussions on and potential support for activities allowing Indigenous Peoples' connection to and ownership and management of Mother Earth's resources;
- (d) **Very low (0 points):** no discussions on or institutional awareness of this topic.

**Evaluation item 7: promotion of Indigenous traditional ancestral medicine**

52. **Indicator.** Support for Indigenous communities to implement traditional medicine practices in their communities.

**53. Metrics**

- (a) Agency guidelines for protecting, respecting and fostering the practice and expansion of traditional medicinal methods in Indigenous communities;
- (b) Grants and resources allowing Indigenous communities to implement traditional medicine.



#### 54. Scoring

- (a) **High (3 points):** existing policies and resources to support Indigenous traditional medicine;
- (b) **Medium (2 points):** some institutional support or resources available for Indigenous traditional medicine;
- (c) **Low (1 point):** minimal awareness of the need to support Indigenous traditional medicine;
- (d) **Very low (0 points):** no resources for, awareness of or support for Indigenous traditional medicine activities.

#### Evaluation item 8: respect for and strengthening of Indigenous food systems

55. **Indicator.** Institutional initiatives designed to protect and foster access to Indigenous traditional foods and to improve Indigenous traditional nutrition, agroecology and food production free of agrochemicals based on ancestral wisdom for food production systems.

56. **Metrics.** Operations designed to actively improve access to Indigenous traditional food supplies and foster Indigenous ancestral nutritional practices.

#### 57. Scoring

- (a) **High (3 points):** ongoing operations protecting and fostering Indigenous food systems and traditionally used food supplies;
- (b) **Medium (2 points):** intermittent activities protecting and fostering Indigenous food systems and traditionally used food supplies;
- (c) **Low (1 point):** minimal institutional awareness or mentions of the need for Indigenous food systems and traditionally used food supplies;
- (d) **Very low (0 points):** no awareness of the need to respect and foster Indigenous food systems and supplies.

#### Evaluation item 9: halting the imposition of non-Indigenous environmental concepts and supply systems onto Indigenous communities

58. **Indicator.** Institutional guidelines and operations designed to discard systematic imposition of the unsustainable use of planetary resources on Indigenous Peoples.

59. **Metrics.** Established procedures for institutional operations to avoid the systematic imposition of non-Indigenous ideologies on planetary resources management.

#### 60. Scoring

- (a) **High (3 points):** existing guidelines to avoid imposition of non-Indigenous ideologies on planetary resources management;
- (b) **Medium (2 points):** some activities, but no guidelines to avoid the imposition of non-Indigenous ideologies on planetary resources management;
- (c) **Low (1 point):** existing documents indicate the imposition of non-Indigenous ideologies on planetary resources management;
- (d) **Very low (0 points):** no awareness of the need to avoid the imposition of non-Indigenous ideologies on planetary resources management.

**Evaluation item 10: fostering equitable and culturally safe circumstances for displaced and urban Indigenous Peoples**

61. **Indicator.** Culturally safe and equitable initiatives addressing the need for displaced and urban Indigenous Peoples to improve the circumstances faced as immigrants or in urban settings.

62. **Metrics.** Operations and resources fostering equity and culturally safe environments for Indigenous Peoples away from their motherlands.

**63. Scoring**

(a) **High (3 points):** existing and well-funded initiatives fostering equity and culturally safe environments for Indigenous Peoples away from their motherlands;

(b) **Medium (2 points):** some activities or resources fostering equity and culturally safe environments for Indigenous Peoples away from their motherlands;

(c) **Low (1 point):** initial awareness of or discussions on fostering equity and culturally safe environments for Indigenous Peoples away from their motherlands;

(d) **Very low (0 points):** no awareness of or actions fostering equity and culturally safe environments for Indigenous Peoples away from their motherlands.

**3. Section 3: decolonizing and reindigenizing culture and system structures**

**Evaluation item 11: promoting awareness of Indigenous sovereignty rights and belief systems**

64. **Indicator.** Ongoing activities designed to create awareness of Indigenous rights and the need to protect and respect Indigenous culture and belief systems.

65. **Metrics.** Existing campaigns and available materials disseminating information for the general public to understand the need to respect, protect and foster Indigenous culture, rights and belief systems.

**66. Scoring**

(a) **High (3 points):** well-resourced, steady campaigns and materials disseminating information for the public to understand the need to respect, protect and foster Indigenous culture, rights and belief systems;

(b) **Medium (2 points):** some materials and sporadically run campaigns disseminating information for the public to understand the need to respect, protect and foster Indigenous culture, rights and belief systems;

(c) **Low (1 point):** discussions on the need to disseminate information so that the public can understand the need to respect, protect and foster Indigenous culture, rights and belief systems;

(d) **Very low (0 points):** no discussions on or institutional awareness of the need to disseminate information so that the public can understand the need to respect, protect and foster Indigenous culture, rights and belief systems.

**Evaluation item 12: enhancing and respecting Indigenous identities in society, inclusive of gender roles and lesbian, gay, bisexual, questioning and two-spirit (LGBTQ2+)**

67. **Indicator.** Systemic change educational initiatives to strengthen Indigenous identities and change the discriminatory narratives about Indigenous gender constructs, including LGBTQ2+.

## 68. Metrics

- (a) Agency activities to protect, respect and foster Indigenous identities and gender constructs;
- (b) Resources allowing Indigenous communities to change discriminatory narratives about Indigenous Peoples.

## 69. Scoring

- (a) **High (3 points):** well-resourced and steady initiatives to strengthen Indigenous identities and change the discriminatory narratives about Indigenous gender constructs;
- (b) **Medium (2 points):** sporadic institutional activities supporting Indigenous identities and changing the discriminatory narratives about Indigenous gender constructs;
- (c) **Low (1 point):** minimal awareness of the need to support Indigenous identities and change the discriminatory narratives about Indigenous populations;
- (d) **Very low (0 points):** no resources for or awareness of the need to support Indigenous identities and to change the discriminatory narratives about Indigenous gender constructs.

### Evaluation item 13: combating Indigenous cultural genocide and halting the systematic and planned invisibility of Indigenous Peoples in society

70. **Indicator.** Operations designed to actively address systemic practices and policies designed to deprioritize, erase, appropriate or misuse Indigenous cultural elements, ancestral practices, or intellectual property and products.

## 71. Metrics

- (a) Initiatives or projects that foster the protection of respect for and awareness of the rights of Indigenous Peoples with regard to their Indigenous cultural elements, ancestral practices, or intellectual property and products;
- (b) Established procedures for institutional operations preventing the inequitable treatment of Indigenous Peoples and avoiding invisibility by grouping them with other diverse or vulnerable populations that outnumber Indigenous communities.<sup>43</sup>

## 72. Scoring

- (a) **High (3 points):** institutionalized protection of the rights of Indigenous Peoples with regard to their unique Indigenous cultural elements, ancestral practices, intellectual property and value in society;
- (b) **Medium (2 points):** some sporadic support to protect the rights of Indigenous Peoples with regard to their unique Indigenous cultural elements, ancestral practices, intellectual property and value in society;
- (c) **Low (1 point):** initial discussions on the need to protect Indigenous rights with regard to their unique Indigenous cultural elements, ancestral practices, intellectual property and value in society;
- (d) **Very low (0 points):** no awareness of or actions on the topic.

<sup>43</sup> Grouping Indigenous Peoples with other populations under intercultural or diversity initiatives, thus neutralizing any equitable actions that benefit Indigenous Peoples, has proved to be detrimental to their interests, given that other communities do not share the same cultural understanding and practices.

**Evaluation item 14: access to rehabilitation and re-entry support**

73. **Indicator.** Rehabilitative and re-entry services for Indigenous individuals.

74. **Metrics**

(a) Availability of culturally relevant rehabilitation and re-entry programmes for Indigenous Peoples making the transition from incarceration;

(b) Partnerships with Indigenous organizations to provide post-incarceration job training, housing support and mental health services;

(c) Policies that support the successful reintegration of Indigenous individuals into their communities.

75. **Scoring**

(a) **High (3 points):** comprehensive and culturally relevant re-entry programmes with strong partnerships for community reintegration;

(b) **Medium (2 points):** partial or intermittent re-entry programmes with limited cultural relevance or partnerships;

(c) **Low (1 point):** initial awareness of the need for culturally relevant re-entry programmes or partnerships;

(d) **Very low (0 points):** no availability of culturally relevant re-entry programmes or partnerships.

**Evaluation item 15: community safety and violence prevention**

76. **Indicator.** Support for violence prevention and trauma services.

77. **Metrics**

(a) Availability and accessibility of culturally tailored trauma and violence prevention services in Indigenous communities;

(b) Funding for Indigenous-led initiatives focused on domestic violence, substance abuse and trauma recovery;

(c) Presence of community safety programmes (e.g. tribal law enforcement partnerships, youth intervention programmes).

78. **Scoring**

(a) **High (3 points):** comprehensive support, funding and availability of culturally tailored trauma services and safety programmes;

(b) **Medium (2 points):** moderate support with some programmes available, limited access to culturally specific services;

(c) **Low (1 point):** minimal support for violence prevention or trauma services specific to Indigenous needs;

(d) **Very low (0 points):** no awareness of or support for violence prevention or trauma services specific to Indigenous needs.

**Evaluation item 16: trust in and relationship with law enforcement based on fairness and equity in criminal justice outcomes**

79. **Indicator.** Culturally respectful policing, fair law enforcement and fair criminal justice outcomes.

#### 80. Metrics

- (a) Existing policies for culturally respectful policing, alternative sentencing programmes, restorative justice and access to culturally relevant legal support for Indigenous defendants;
- (b) Data on the frequency and nature of Indigenous (positive and negative) interactions with law enforcement and on incarceration rates and sentencing patterns, compared with non-Indigenous populations;
- (c) Existence of formal partnerships between State law enforcement and Indigenous law enforcement authorities.

#### 81. Scoring

- (a) **High (3 points):** strong policies for culturally respectful policing, support for equity in criminal justice, data tracking, alternative sentencing and access to legal resources;
- (b) **Medium (2 points):** some initiatives supporting culturally respectful policing, support for equity in criminal justice, data tracking, alternative sentencing and access to legal resources;
- (c) **Low (1 point):** initial discussions on or awareness of culturally respectful policing, support for equity in criminal justice, data tracking, alternative sentencing and access to legal resources;
- (d) **Very low (0 points):** no actions on or awareness of the topic.

### 4. Section 4: institutional compliance with Indigenous rights and Indigenous health agency structure needs

#### Evaluation item 17: institutional integration of Indigenous rights and self-determination

82. **Indicator.** The extent to which an agency integrates Indigenous rights into its policies, structures and operations, ensuring alignment with international standards such as the United Nations Declaration on the Rights of Indigenous Peoples and prioritizing Indigenous self-determination through consistent institutional and operational practices.

#### 83. Metrics

- (a) Policy compliance with Indigenous rights;
- (b) Adoption of the United Nations Declaration on the Rights of Indigenous Peoples (or equivalent) as institutional policy;
- (c) Codification of free, prior and informed consent as a standard operating procedure;
- (d) Institutional structures supporting Indigenous rights:
  - (i) Existence of dedicated institutional units for Indigenous issues;
  - (ii) Recognition of Indigenous Peoples as rights holders (distinct from stakeholders);
  - (iii) Operational incorporation of Indigenous self-determination;
  - (iv) Mechanisms for Indigenous guidance in institutional decision-making (e.g. advisory boards or consultations).

**84. Scoring**

- (a) **High (3 points):** strong institutionalization of Indigenous rights with comprehensive policies, dedicated structures and operational guidance prioritizing Indigenous self-determination;
- (b) **Medium (2 points):** moderate integration with acknowledgment of Indigenous rights, but limited operationalization or institutional support;
- (c) **Low (1 point):** minimal effort, with general diversity policies and limited recognition of Indigenous rights;
- (d) **Very low (0 points):** no substantial engagement in Indigenous rights or self-determination.

**Evaluation item 18: representation of Indigenous Peoples in institutional decisions and policy cycles**

85. **Indicator.** Meaningful and comprehensive engagement of Indigenous leaders.

**86. Metrics**

- (a) Level of engagement in decision-making structures;
- (b) Extent of engagement in full policy cycles.<sup>44</sup>

**87. Scoring**

- (a) **High (3 points):** substantial high-level and ongoing engagement in decision-making throughout the full policy cycle;
- (b) **Medium (2 points):** temporary involvement of Indigenous leaders in decision-making through consultative means or in some components of the policy cycle;
- (c) **Low (1 point):** hiring or involving Indigenous representatives in a minimal number (one or two) of policy cycle workgroups or with no decision-making capabilities;
- (d) **Very low (0 points):** no internal Indigenous representation in the policy cycle or in decision-making.

**Evaluation item 19: representation of Indigenous Peoples in institutional operations**

88. **Indicator.** Appropriate incorporation of Indigenous Peoples into agency staff.

89. **Metrics.** Level of representation in internal administrative structures.

**90. Scoring**

- (a) **High (3 points):** representation of Indigenous staff at all levels of administration;
- (b) **Medium (2 points):** representation of Indigenous staff at the middle and lower levels;
- (c) **Low (1 point):** temporary involvement of Indigenous staff in projects;
- (d) **Very low (0 points):** no Indigenous representation in operations.

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<sup>44</sup> Full policy cycles involve, in this order, initial discussions, design, implementation, evaluation and refinement of policies.

### **Evaluation item 20: meaningful interventions based on Indigenous research paradigms**

91. **Indicator.** Incorporation of Indigenous research systems into research programmes.

#### **92. Metrics**

- (a) Equitable recognition of Indigenous knowledge;
- (b) Culturally safe participatory approaches;<sup>45</sup>
- (c) Representation in data sets.

#### **93. Scoring**

(a) **High (3 points):** Indigenous knowledge systems are equitably incorporated, Indigenous Peoples are represented in data collection, and research approaches are adaptable to include culturally safe Indigenous Peoples-led structuring;

(b) **Medium (2 points):** Indigenous knowledge is incorporated as part of a minority (intercultural and diversity-focused) perspective through customized, partially safe components, and some data representation is available;

(c) **Low (1 point):** minority-based interventions and research approaches with no safe components and minimal existing data representation;

(d) **Very low (0 points):** no interventions or data covering Indigenous Peoples.

## **C. Process for implementing the Indigenous health scorecard**

94. Implementing an Indigenous evaluation scorecard ensures culturally responsive assessment frameworks that respect Indigenous knowledge, values and perspectives. The following steps provide the tools with which to conduct appropriate implementation. The process is aimed at enhancing accountability, inclusivity and self-determination by incorporating Indigenous-led evaluation criteria.

### **1. Establish a collaborative advisory group**

95. **Objective.** Create an advisory group composed of agency officials, Indigenous leaders, health experts and community representatives to guide the scorecard implementation.

#### **96. Activities**

- Identify and invite key stakeholders, including representatives of Indigenous Nations and community advocates
- Define roles and responsibilities within the advisory group to ensure that Indigenous voices are central to every decision

### **2. Conduct initial orientation and training**

97. **Objective.** Ensure that all participants understand the purpose, structure and indicators of the scorecard and the importance of Indigenous determinants of health.

<sup>45</sup> Cultural safety is a reflexive practice that promotes organizational responsibility to recognize and examine the structural relationships of power in every context. Cultural safety provides the context to better ensure respect for Indigenous world views.

**98. Activities**

- Host an orientation session covering scorecard goals, metrics and the importance of Indigenous cultural and health perspectives
- Provide training on the principles of Indigenous data sovereignty, cultural respect and community-led assessment methods

**3. Adapt the scorecard to regional contexts**

99. **Objective.** Tailor the scorecard indicators to reflect regional and cultural specifics of Indigenous communities.

**100. Activities**

- Hold a series of workshops or focus groups with Indigenous communities to gather feedback on the indicators, ensuring that they resonate in local contexts
- Work with community representatives to adjust indicators and metrics on the basis of specific cultural practices, health priorities and local determinants of health

**4. Pilot the scorecard with selected communities**

101. **Objective.** Test the scorecard in a few communities to assess its feasibility, relevance and ease of use before broader implementation.

**102. Activities**

- Select a diverse group to participate in the pilot, ensuring representation across diverse Indigenous communities and regions
- Facilitate guided assessments with each community, using the advisory group to support and ensure cultural sensitivity
- Collect feedback from participants on the scorecard's applicability and adjust on the basis of their input

**5. Conduct the assessment with Indigenous participation**

103. **Objective.** Roll out the scorecard across the agency or entity, using a participatory approach that includes Indigenous leaders and community representatives in every phase.

**104. Activities**

- Partner with Indigenous community members with agency or entity officials to conduct the assessment collaboratively, reinforcing shared responsibility and trust
- Use a mixed-methods approach, incorporating quantitative data along with qualitative insights from community discussions, interviews and focus groups
- Ensure that data are collected and managed in accordance with Indigenous data sovereignty principles, allowing communities to maintain ownership and control over their information

**6. Analyse results with Indigenous input**

105. **Objective.** Interpret the scorecard results collaboratively, ensuring that Indigenous perspectives, including all minority groupings within Indigenous communities, guide the interpretation of findings.



**106. Activities**

- Host data interpretation sessions with Indigenous representatives, allowing them to provide context, insights and cultural relevance to the results
- Work together to identify key themes, strengths and areas for improvement in agency/entity support for Indigenous determinants of health
- Compile the results in a report, emphasizing Indigenous interpretations and recommendations

**7. Present findings and develop action plans**

**107. Objective.** Share the results with all stakeholders and create action plans for improving alignment with Indigenous determinants of health.

**108. Activities**

- Organize a public presentation and discussion session with agency or entity leaders, Indigenous representatives and the broader community to review findings
- Develop actionable steps for addressing gaps identified in the scorecard, guided by Indigenous priorities and solutions
- Assign clear responsibilities to agencies/entities, Indigenous representatives and community organizations to ensure follow-through on recommended actions

**8. Monitor progress and conduct regular evaluations**

**109. Objective.** Track the progress of the agency or entities towards meeting Indigenous health goals and conduct periodic assessments to ensure sustained improvement.

**110. Activities**

- Set up a system for regular, perhaps annual, scorecard assessments to evaluate progress and update action plans
- Include Indigenous representatives in ongoing evaluations to ensure that the process remains accountable and culturally aligned
- Publish progress reports that are accessible to all stakeholders, demonstrating transparency and commitment to long-term Indigenous health priorities

**V. Conclusion**

111. The present study represents an initial effort to measure the systemic change needed for Indigenous Peoples-serving institutions to comply optimally with key standards, international instruments, policies and commitments to protecting, respecting and fostering the right of Indigenous Peoples to culturally safe approaches. The study's findings highlight and underscore the need for the current systems to establish transparent, accountable and reliable mechanisms that align their work with their commitments in terms of Indigenous health and well-being. It is therefore vitally important for Indigenous Peoples to have a tool to measure compliance, given both the increasingly complex international and national arenas and the lack of expedited improvement in terms of health outcomes for Indigenous Peoples across the globe.

112. As an initial endeavour, it is vital to recognize and honour the legacy of Indigenous evaluation systems while acknowledging the constraints posed by time and funding in developing the present study. The contributors, including members of the Indigenous Determinants of Health Alliance, are hopeful that future iterations of

this framework, enriched by the feedback of Indigenous leaders, will continue to evolve. This process will ensure that the framework is adapted to the dynamic challenges facing Indigenous Peoples and the institutions that serve them, advancing the cause of meaningful and lasting change.

## Annex

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