

EDITORIAL

Incorporating cultural safety in wound management

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This special issue of the *Wound Practice and Research Journal* presents a collective body of research highlighting the significant disparities in chronic wound care experienced by First Nations people. This theme emerged as a focal point during the Wounds Australia 2024 conference in Sydney and we are delighted that Prof James Charles is the guest editor for this issue. A unifying thread throughout these contributions is an emphasis on delivering culturally meaningful care that respects and integrates traditional healing knowledge.

The issue opens with a review by Cavalcante Silva et al, which examines the social determinants and barriers to healthcare access and telehealth delivery. Their work highlights the elevated risk of chronic wound development among Indigenous Australians and underscores the critical need for targeted research, comprehensive data collection, and healthcare models tailored to unique social, cultural, and geographical contexts.

Research by Abdullah et al further advocates for evidence-based, culturally sensitive integration in diabetic foot ulcer management. The authors argue that while Indigenous knowledge provides vital cultural and spiritual context for treatment decisions, unregulated application can pose risks to outcomes. They conclude that community co-development of treatment plans is essential for success.

Moving to preclinical perspectives, Wahab et al challenge current standard protocols by advocating for the integration of traditional methods, while Maghsoudi et al. present an intriguing study on a new formulation containing propolis and green tea extracts designed to prevent scar formation.

In a practical clinical context, Van Rooyen and Larsen describe the complexities of providing telehealth services for diabetic foot complications in rural Western Australia. They identify late clinical presentation, resource scarcity, and geographic isolation as primary hurdles. The authors stress that improving health outcomes and reducing amputation risks requires multidisciplinary collaboration, deep cultural appreciation, and strong relationships with regional health staff.

Finally, a WHAM evidence summary examines silicone gel sheeting for keloid scars—a condition more prevalent in Indigenous populations. This summary rounds out the issue's focus on incorporating cultural safety to improve outcomes for First Nations people.

We hope you find this issue of *Wound Practice and Research* insightful, and we look forward to receiving your submissions for future editions.