Learning from the Experts: combining Indigenous Knowledge with western health models to build cultural bridges and improve health services for Indigenous peoples

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**Background story**

Study aimed at improving renal services for Aboriginal people with kidney disease

Invited to write paper by Renal Society of Australasia

Co-written with 2 Bundjalung Elders and Indigenous scholar

“We’ll only publish if you remove ‘story’ and intro of authors/Elders”

Paper then published unchanged!
My story for renal nurses

“It’s my first shift on the renal ward. As I start to recover from the shock of my own ‘initiation’ into the ward, I notice that several of the patients are Aboriginal Australians. After the morning patients are weighed, assessed, cannulated and commence treatment, I have a moment to look around the ward a bit more and it dawns on me that a high percentage of the regular dialysis patients are Aboriginal. OMG! — I still haven’t had the opportunity to attend the ‘mandatory’ cultural awareness training! And don’t most of them look like they’re too young to have reached end-stage kidney disease requiring dialysis?”
Introducing co-authors

In accord with principles of ‘relational accountability’

Helps readers to engage with content and relate to authors

Grow understanding of inclusion of Elders as Experts: essential to their peoples’ health & well-being

Inclusion of Indigenous knowledge into mainstream medical literature
Uncle Charles Moran
Bundjalung language custodian
& Gnibi Elder

Talk Softly, Listen Well
Profile of Bundjalung Elder, Charles Moran

Charles Harold Moran, as told to Glennis Moran

Ngalunga Booloonj:
(OUR KIDNEYS)
Russell Kapeen
CE of Koori Mail & Karachi Land Council, Coraki, NSW

Ngalunga Booloonj:
(OUR KIDNEYS)
Dr. Shawn Wilson

- Indigenous scholar from the Opaskwayak Cree Nation in Northern Manitoba, Canada
- Director of Research, Gnibi College of Indigenous Australian Peoples
- Expertise in Indigenous ways of knowing & methodologies
- My PhD supervisor
Elders and Community ‘Experts’

Indigenous knowledge:
• under valued; ignored; disrespected;

Western health dominance

Culturally shaped services informed by ‘Experts’

Counter fear and avoidance of mainstream health: Australian history of overt racism and blatant injustices

Equal partners in promoting health and well-being
Aboriginal Health Workers: Cultural Bridges

Expertise vital in acute hospital settings (currently only in Aboriginal controlled primary healthcare settings)

Initiate building of positive relationships

Provide patient stronger voice

Present in rooms at diagnosis: support patient & families to engage

Vital input: proposed engagement pathway
Minimal Individual racism

HOWEVER.....

Apparent DISCONNECT between Aboriginal Australian people & renal clinicians

DISCONNECT extends beyond individual relationships

Institutional barriers to gaining cultural knowledge and understanding

Little opportunity for clinicians to learn
A better model of cultural education/experience ...

There be no good just any old black fella coming and talking to our staff about this because that fella don’t have a clue what a dialysis machine looks like, he wouldn’t have a clue what’s going through the Aboriginal’s mind ... so we need a dialysis patient to work at doing that with the staff ... partners or the mother to come in and talk about the cultural issues from the dialysis patient perspective.

[Aboriginal Man, 50s]

PATIENT DRIVEN CULTURAL EDUCATION:
Delivered on-site by Aboriginal patients, family or Elders

AUSTRALIA LEARNING FROM NEW ZEALAND
Family (Whanau) are given priority
Inclusion of Indigenous ways of knowing, being and doing

Counter fear and avoidance of mainstream services

Respect and promotion of Indigenous knowledge

Indigenous ‘Experts’ working as equal healthcare team members

Increases cultural understanding of non-Indigenous staff
In Conclusion

Strategies for improving delivery and acceptability of mainstream healthcare services to Aboriginal Australians:

- Improve cultural knowledge, skills and competence of individual non-Aboriginal health care providers
- Health institutions to commit to and prioritize this change
- But also reflect on and URGENTLY address residual racist policies and practices embedded in their systems!!!
- Requires commitment to building two way understanding
- Working with and listening with mutual respect
Thank you for listening