

INTERCULTURAL RESEARCH: AUSTRALIA AND CANADA

ROS PIERCE



COORDINATOR
SHINE
SOUTH AUSTRALIA

JANET KELLY



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SOUTH AUSTRALIA

Ros Pierce and Janet Kelly are Registered Nurses in Australia who work with Aboriginal people around sexual and reproductive health. In May 2003, they traveled to Canada on a study/work tour to learn and exchange ideas around Indigenous health, in particular sexual health and ways of addressing issues for young Aboriginal people. They were also interested in training and employment for Aboriginal nurses and health workers (community health representatives). They visited Vancouver, Vancouver Island and Kamloops in British Columbia, Edmonton in Alberta, Yellowknife in the Northwest Territories, and Rankin Inlet in Nunavut. Originally Toronto and Manitoulin Island were also intended destinations, but this was rescheduled at the last minute due to SARS related travel restrictions.

INTRODUCING OURSELVES



Ros

I am a Njarringejeri Elder from Raukkan, a small mission on the coast of South Australia. As a child I was taken away from my family (in Australia we had the Stolen Generation like Canada had Residential Schooling). It wasn't until my late twenties that I found and returned to my community.

I am now a Registered Nurse and work in mainstream services to create positive changes for my people. My position at Shine SA (Sexual Health, Information Networking and Education) involves researching, co-ordinating and facilitating the Aboriginal Women's Sexual And Reproductive Health Training for Aboriginal workers, which trains workers from across the state, rural, remote and metropolitan areas. I am also involved in a program called Investing in Aboriginal Youth, I provide clinical services with Janet, and support other Aboriginal nurses at university. I am also involved in CATSIN – the Congress of Aboriginal and Torres Strait Islander Nurses (similar to Aboriginal Nurses Association of Canada), which aims to increase and improve Aboriginal nursing in Australia.



JANET

I am a non-Indigenous woman who grew up in a small country town on Kangaroo Island. The year that I was born (1967) is the year that Aboriginal people in Australia were recognized as Australian citizens and given the right to vote, and equal pay. I am a community health nurse at Shine SA with a specific focus and commitment to provide sexual health services with and for Aboriginal women.

My work involves clinical nursing, health promotion, education, group work and community development. I have been working with Aboriginal women around sexual and reproductive health for about ten years now, and have close relationships with many workers and women in Aboriginal communities. I am currently studying part time to explore how sexual nurses can better meet the needs of young Aboriginal women in urban settings.

HOW DID THE TRIP COME TO BE?



Ros

I was awarded a Nursing Scholarship by our State Premier to travel overseas to investigate and share ideas around Aboriginal sexual health. I chose Canada because there are many things similar in our experiences as Aboriginal people and I have heard about good programs there. Also my cousin went to Canada and said that Canadian

Aboriginal people are very welcoming and sharing. As I began planning my trip, I talked to Janet a lot about it, as we work together often. The more we

talked, the more we got to thinking that it would be great if we could travel together. I would much rather travel with another person, and both of us share a passionate for improving health for the Aboriginal community. By travelling together our experiences would be much richer.



JANET

We were all really proud for Ros when she was awarded the Nursing scholarship. I offered to help her find and plan things. I am studying for my masters of nursing and use the computer and email to track down resources and programs. The more we talked, the more I shared her dream. When she asked if I would like to go with her, I jumped at the chance. Canada was the one overseas country I always had a deep yearning to visit. Like Ros, I am actively searching for ideas on how to work more effectively with the community. We saw great value in stepping out of Australia together, sharing and experiencing new ideas, and then supporting each other to make changes when we got back home. I was able to get sponsorship and support to enable me to go. (Many thanks to Newmont Australia, Rotary, Organon and Shine SA).

WHAT WE LEARNT

What hit us both was that we traveled around the world, to find that Aboriginal people's experiences and the effects of being invaded and colonized are almost the same in Canada as they are in Australia. Ros found that she could almost finish people's sentences as they shared their stories, as her story is so similar. Health outcomes and patterns of illness are the same: high levels of diabetes, asthma, drug and alcohol issues, and sexual health concerns. We both found it very disturbing to see so clearly that around the world this is what happens when people's rights and culture are taken away.



We really valued the conversations we had with a wide range of nurses, educators and Elders. Everyone spoke very openly about their challenges and highlights of working with communities and navigating funding and government systems.

WORKING CROSS CULTURALLY



JANET

For me, this was an incredibly rich experience. I learned more about working across cultures, and heard how things are from other perspectives. I spent a lot of time quietly listening, reflecting

and relating what was being said to situations back home. One big piece of learning for me, is that it is not just non-Indigenous nurses who feel unsure about how to go about their work in Aboriginal communities. Aboriginal nurses may have personal, family, cultural and/or community issues that make working in a particular Aboriginal community quite difficult. There are so many cultures within Aboriginal culture that no one Aboriginal nurse can automatically know how to respond to each person as an individual. I think that “white” nurses and health systems can make a lot of assumptions that Aboriginal people will automatically understand each other. I wonder if what many Aboriginal people do have in common is that they experience being treated as a minority by the health system.



Ros

My cross-cultural experience and reflections were a bit different to Janet’s. When I am in Australia, working with non-Indigenous people, I feel I am working cross-culturally. When I was in Canada, with Canadian Aboriginal people, it didn’t feel like that. Instead, it was as if we were one. There was an automatic understanding of what and where we have been as First Nations people.

HOLISTIC HEALTH

Holistic health interests us both greatly. We are always looking for ways incorporate it into our lives and our work. What we found in Canada was



that spirituality and spiritual links to culture were really strong. We saw that weaving these links through health and healing was much more effective in meeting people’s needs with real healing. We also saw the inclusion of Elders in health programs, and the incred-



ible strength and depth that this gave. The combining of western medicine and traditional culture and healing practices allows more holistic approaches to modern diseases and issues. It was also clearly expressed that health concerns today, such as diabetes, are directly linked to the effects of Residential Schooling and colonization. We do not think that it is so clearly expressed at home in Australia, and there is still a lot of “victim blaming” related to health concerns and social disadvantage.

In Canada we also found that Aboriginal people are very open and willing to share with other cultures, respecting where other people are coming from.

THE HIGHLIGHTS

There were many highlights during our stay in Canada. Meeting so many beautiful people both Indigenous and non-Indigenous, who shared their lives, thoughts and ways of working with us was very special. We saw, learnt and experienced many things that we could not have understood by merely reading an article. The countryside too was totally awesome and magnificent. For both of us, personal highlights included spiritual and cultural events.



ROS

THE SWEAT LODGE

The sweat lodge was the most amazing experience. Every time I crawled out of that sweat at the end of a round, it felt like I had been born new again. It was such a deep spiritual experience.



JANET

I have experienced sweat lodges in Australia, demonstrated by visiting Canadian and American healers. To be invited into a sweat lodge in Canada was a very special experience for me. I was missing my own daughters terribly while in Canada. The many stories of Aboriginal people having their children taken away in both countries, overwhelmed me with my own white heritage, and the removal of children. My “mother” heart was weeping, and I could feel and hear the wailing of women over many years. The sweat helped me find spiritual guidance and feelings of peace about my white inheritance. To be trapped in guilt is not to move forwards at all.

THE ROUND DANCE



ROS

The Round Dance was such a celebration. In Australia, we often only get together for death and funerals. To see people coming together to celebrate was so uplifting. And to see the young people so involved, the young men drumming, coming from all around, all the different bands, and the smoking ceremony. The ceremony involved the whole of the community, all ages, all people. Everyone was welcome. The drumming was so strong; it felt like the heart of mother earth coming up through me.



JANET

Like Ros, I found it incredibly positive. To see the community celebrating was fantastic. The openness, warmth and acceptance toward us by all the people there was great. We were made to feel very welcome, and very special.

WHY DID JANET TRAVEL WITH ROS, RATHER THAN AN ABORIGINAL PERSON?



Ros

It didn't matter if Janet was Aboriginal or not. She is one of us, accepted by me, and by the community. We are both trying to do the same thing — improve sexual health in the community.

Here in Australia, we adopt someone into the community when we can see they are genuine and care for the Aboriginal people. Janet has been working in the community for a while now. We Elders watched her, saw the way she was working and where her heart was. We saw that she was there for the community, and she cared. Then trust and respect grew. We sent the young women to see her. They had to check her out for themselves, and she had to earn their trust too. Now we know we can tell and share things with her. She is my sister. She calls the other Elders "Auntie," but we work close together and she is my sister.

OUR RECONCILIATION JOURNEY

In Australia as a country, we — non-Indigenous people and Indigenous people — are still trying to reconcile our past, our differences, and discover how to move forward together. For us, our trip was a mini reconciliation project. By working and walking together we show that it can work, and can work well. Our relationship together is very equal and sharing, and there are no power imbalances. We share our backgrounds, cultures and differences with each other and connect on a deep level. Travelling together has strengthened our relationship, our understanding of each other and has brought us closer together. We have had these incredible experiences together, and now we can bring our dreams into reality together. We know each other so well now, that we can work together in a totally different way. There is deep trust, respect, love and friendship between us.



Ros

The relationship that Janet holds with me, and community, is unique. I feel that in Australia we as Indigenous people and communities need to reconcile with each other more in order to then reach out and have relationships with the wider community.

WHAT WE SHARED

While we learnt a lot, we found we also had a lot to share. The way our organization and workers present and represent sexual health care in South Australia was of great interest to many in Canada. We brought with us



our posters, pamphlets and T-shirts with slogans like “Safety – Pleasure – Respect” which we use a lot, especially during Sexual Health Awareness Week. The Aboriginal Worker’s course in sexual and reproductive health,



which is provided separately for men and women in South Australia (as is appropriate culturally), also attracted a lot of interest and conversation.

Many commented on how we work with a very positive approach and outlook on sexual health. While including issues such as infections, assault and diseases, our work also focuses on individuality, informed choices and empowerment of Aboriginal people.

THE VALUE OF REFLECTION

Our time away has allowed us to step out of the health system and society we know, and to compare our issues in Australia to those in Canada.



Returning home, we can see things around us more clearly, some as new ideas, and some as a strengthening of our own thoughts and realizations.



We have come back challenged. We find ourselves with many questions.

“How can we best provide holistic sexual health services in a country that in many ways does not even respect the basic rights and history of our Australian Aboriginal people?

Is sexual health the place to begin, or does some other healing need to come first?

Are our sexual health programs a reflection of a specific government agenda, or do they represent a holistic view of life?

Where does what we do fit within the wider social, political and historical agenda?

Would we recommend this experience to others? The answer is yes. This was both the most rewarding and challenging experience of our lives. It has cemented our friendship and relationship in a very deep way, and enabled us to make many special friends in Canada. By stepping out we have created for ourselves and each other a much richer view of the world. This in turn has changed the way we think, create relationships with others, and provide health and education services.

