





Mutitjulu Health Service CULTURAL PROTOCOLS

he purpose of this document is to outline cultural protocols that members of Mutitjulu community have highlighted as being *significant* in the operation of the local clinic. This document should be read in conjunction with the Congress Cultural Safety Framework.

The Framework provides both a background to the principles of cultural safety and a broad overview of cultural protocols that should be observed when engaging with Aboriginal people, communities and Congress clinics in Central Australia.

All places or communities are different

It is important to recognise that all Aboriginal communities are unique. While the places where Aboriginal people live in Central Australia share common features there are also differences. These differences are important to people's sense of community. Variation is likely to be greater between places where the residents share no common language. However, even when members of communities speak the same language and share many common cultural beliefs and practices, there are also likely to be differences. Health practitioners risk offending local people by assuming that their values, beliefs and practices are the same of those of another community.

Variations between communities can be due to a combination of factors including: cultural, linguistic and historic factors; the demographic composition of the community; the location of the community in relation to other non-Aboriginal and Aboriginal communities; the availability of infrastructure and resources (tangible and intangible); and the differing histories of engagement of members of the community with non-Aboriginal society, organisations and governments.

Practices and beliefs may also vary among members of the same community. This is likely to be most marked where people from different socio-linguistic groups live in the same place. However, cultural practices may also differ somewhat between elders, young people and others from the same language group. Despite such differences, long-term residents generally feel a strong sense of connection with the place they call home.

While many families at Mutitjulu are long-term residents, Mutitjulu is also something of a meeting place for Anangu people in the wider region and there are often many visitors. The most frequent visitors come from other Pitjantjatjara and Yankunytjatjara speaking communities such as Utju (Areyonga), Imanpa and Kaltukatjara (Docker River) in the Northern Territory, and Amata and Ernabella in South Australia. However, there are also Ngaanyatjarra, Luritja, Warlpiri and Arrernte speakers, some of whom have married into the community. It is important to note that visitors' cultural practices may differ from those of local people.

Respectful interaction and communication

"They've got to respect us and our culture"

Ways of showing respect include using appropriate language that people can understand, while not talking down, loudly or roughly to them. When thinking about appropriate terms and language, keep in mind that effective intercultural communication involves the translation not just of words but foreign concepts. Furthermore, be aware that many clients and Aboriginal health practitioners do not speak English as a first language (or indeed, as their second, third or fourth language) and that they may need time to respond to questions. They may also need interpreting assistance.

"Use an interpreter with clients, a female one with female and male with male if possible"

Learn to be comfortable with pauses in conversations. Pressing for a response before a person has answered a question is likely to be perceived as 'whitefella bossiness' and as an inability to listen well with empathy.

Conveying respect

Customs influence how people convey respect. In addition to speaking style and tone of voice, certain terms of address and reference can signal unequal power relations and lack of respect. For examples,

Aboriginal men should not be called 'boys' (males who have been initiated are regarded as men irrespective of age).

Piranpa is a local Yankunytjatjara and also Pitjtantjatara word for non-Aboriginal person. It is used in preference to terms like 'non-Aboriginal' or 'whitefella' because 'it is kinder'.

In addition to a person's speaking style and tone of voice, a person's body language and actions may be perceived as disrespectful or intimidating.

"Staff shouldn't come in and overpower. It's about listening, watching and connection"

As the following quote indicates, expressions of recognition and appreciation can vary cross-culturally.

"Anangu don't like looking people in the eye too much. It's not polite Anangu way. It is Ok to shake hands. When Anangu shake hands it is a gentle shake, an acknowledgement. It is different to what piranpa might expect"

Anangu tend not to use the English expressions 'please' and 'thank you' but use the term *palya*, meaning good, as an expression of appreciation.

Confidentiality and privacy

"Don't talk loudly about clients in front of others in the clinic. Close doors because otherwise people get shamed—kunta—and won't want to go back to the clinic"

Although Mutitjulu is a small community where people know each other and are interrelated, confidentiality and privacy are important to individuals. It is important not to talk about clients in front of other people and to respect clients' rights to make decisions about their health.

"Privacy is important for young girls, who can be very shy. They don't want others to know everything that is going on in their lives"

Learning about local Aboriginal culture and society

Aboriginal people appreciate non-Aboriginal staff expressing interest in learning about their culture and language. However, clients may respond warily to being questioned by a stranger about cultural matters. New staff at Mutitjulu should seek advice from Aboriginal staff about dos and don'ts in the community.

An important part of understanding another culture is the ability to set aside the assumptions that one takes for granted and not make judgements. This requires critical reflection on one's own standpoint or position.

"An issue is listening to the concerns of a person and respecting them not wanting to make a decision.

This community has suffered a lot under the Intervention.
Staff need to establish trust"

It is important to recognise that clients' lives are complex and that their values and priorities are not necessarily the same as those of the non-Aboriginal staff.

Tjukurpa

The following is an extract from the Parks Australia website, as told by A<u>n</u>angu:

Tjukurpa (pronounced 'chook-orr-pa' in English) is the foundation of our culture. Just as a house needs to stand on strong foundations, so our way of life stands on Tjukurpa.

Tjukurpa has many deep, complex meanings. Tjukurpa refers to the creation period when ancestral beings created the world. From this came our religious heritage, explaining our existence and guiding our daily life. Like religions anywhere in the world, Tjukurpa provides answers to important questions, the rules for behaviour and for living together.

It is the law for caring for one another and for the land that supports us. *Tjukurpa* tells of the relationships between people, plants, animals and the physical features of the land *Tjukurpa* refers to the past, the present and the future at the same time. This knowledge never changes, it always stays the same.

Source: Australian Government, Parks Australia.

Participation in local cultural events

As a general principle, wait to be asked before attempting to participate in any local (non-secret) cultural

events at Mutitjulu. Women should never approach men's ceremonial grounds.

Avoidance of places—ask where you can go and not why

There are particular areas at Mutitjulu which are 'no go zones' or places that non-Aboriginal people *must* avoid. This is of heightened importance when ceremonial business is underway. The location of such prohibited places may change over time. As they are rarely signposted, non-Aboriginal staff should seek advice from local Aboriginal staff about areas to avoid. While some areas are indicated on the accompanying map, be aware that the places can change and that there is more than one place.

"When men's business is on we tell them where not to go and where they can walk their dogs. If staff want to walk their dogs or jog they should stick to the main road out of Mutitjulu"

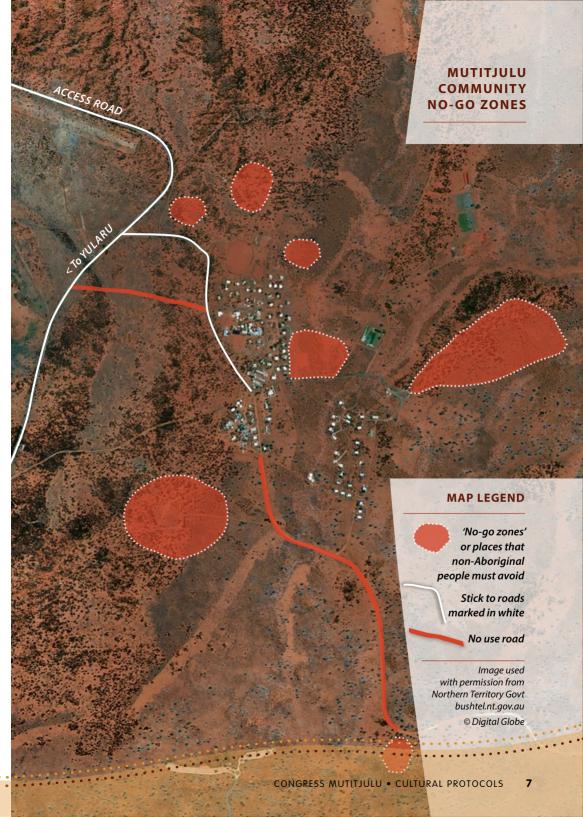
As a general principle, if they want to walk or exercise, non-Aboriginal staff should keep to public areas, for example, the main road. By doing so they will also avoid encounters with local dogs.

Sorry business

People use the term 'bad news' to refer to the death of a relative. It is culturally inappropriate to refer directly to the deceased person or to use their name. The term *Kunmanara* is used as a substitute name when someone has the same name (or a similar sounding name) as the deceased.

'Sorry business' concerns bereavement practices. While protocols can vary among families, it generally involves an initial period of mourning for the deceased person, a funeral and a 'finishing up' stage of mourning. Following a death, close kin of the deceased will establish a specific space for mourning, a 'sorry camp' where relatives come to pay their respects and grieve. At Mutitjulu sorry camps are normally established on the edges of the settlement.

The exact place will depend upon the location of the grieving family.



"If someone gets sick in the sorry camp they will generally come to the clinic. No need for health practitioners to intrude. But it is up to the community if they want a nurse to go down to sorry camp. If asked they should park outside and wait to be asked in.

If someone dies at Mutitjulu the body of the person may be kept at the Mutitjulu clinic for a short time and extended family and community members may come and say their goodbyes.

We ask people if they want a viewing. It is quite common. The whole community queues up"

Anangu mourning practices differ to those of non-Aboriginal people. They may also differ within the community depending on the identity, status and prior role of the deceased person. For example, when a ngankari (traditional healer) passes away certain relatives may rub or lay hands on the ngankari's body in order to receive their power. Be aware that some people might ritually cut their bodies during sorry business. It is also common for certain relatives to cut their hair very short.

Non-Aboriginal medical staff may also be asked to arrange access to deceased persons in the Alice Springs hospital morgue. Older female relatives may ask for hair of a deceased person to use for ceremonial business. Such cultural practices should be facilitated.

People are often mobile during sorry business. The family move out of the house in which the deceased lived and do not move back until after the funeral. Sorry business can extend for a long time. As part of the finishing up process relatives may use branches to sweep away traces of the deceased from buildings and places once frequented by the deceased.

It is up to the family to decide. We normally give the clinic notice if it is to be swept with leaves so that the spirits move on. We don't do smoking here; we sweep with leaves.

On the day of the funeral the clinic may close but there is always a health practitioner on duty for emergency calls. Funerals tend to involve the whole community and non-Aboriginal staff may be invited to attend.

"Everyone respects each other here.

Normally the whole community comes to a funeral to show respect for the family.

Some nurses get to know clients really well. If this happens they may get invited by the ladies to participate in certain cultural activities. People should wait until they are invited by a family member to attend"

Recognition and acknowledgement of Aboriginal cultural expertise

It is important to seek the advice of Aboriginal health practitioners and staff and to be guided by them about local social and cultural practices.

Business/Ceremonial time

Matters associated with men's and women's traditional ceremonies and Dreaming stories are referred to as 'men's and women's business' in English. Women must avoid men's business at all times. This is the case for Aboriginal and non-Aboriginal clinic staff.

If a person becomes ill in a men's business camp, the male Aboriginal Liaison Officers (ALOs) and health

practitioners should attend to the matter.

Culture is not only a matter of knowledge, it also involves embodied practices. It is common during ceremonial business for men and women to become ochred and/or have ancestral designs applied to their bodies. The designs are believed to be efficacious, reflecting the belief that 'healing comes from the Dreaming and the land'. Consequently, people allow the ochre to wear off their bodies naturally. It is regarded as culturally offensive to ask people to wash off ochre or designs before being treated in the clinic.

Use of ngankari (traditional healer) and bush medicine

It is common for Mutitjulu people to want to see a ngankari in addition to non-Aboriginal nurses and doctors. People also use bush medicine to heal themselves, for example by rubbing it on their body. The use of traditional healing practices is regarded as complementary to western medicine. If you need advice in relation to these matters or have questions be guided by Aboriginal health practitioners and clinic staff.

"If someone wants to see a ngankari the family will go and get them; the nurse should ask"

Avoidance practices and gender issues

Avoidance practices

Aboriginal people at Mutitjulu practise customary avoidance between certain categories of male and female kin. When people say that they have 'no room' this means that they cannot go near a certain person, nor have eye contact or talk to them.

Categories of persons who should not be in the same room are typically: mother-in-law and son-in-law; and poison cousins, also referred to as *tjampirtiyi* or 'somebody'. The poison cousin avoidance relationship arises through ceremonial business and health practitioners should

not ask questions about it. It is also generally the case that when a girl's brother becomes a man, the brother and sister can no longer speak to each other.

Other gender issues

Aboriginal cultural beliefs about gendered persons are implicated in the appropriate provision of health services. Cultural sensitivities surround parts of the body/organs associated with reproduction and sexual health. During ceremony time, cultural sensitives are especially heightened.

For these reasons, most men (elders and younger ones) prefer to see a male doctor or nurse rather than a female doctor or nurse. The same is true for women; that is, people feel more comfortable with health practitioners of the same gender.

"Men would prefer to see male health practitioners for specific men's issues. If a male is not available then female health practitioners can assist. However, it is important not to mention cultural matters—just treat the person as a normal patient, work around sensitive issues"

Preanancy and the new born

Pregnancy and child birth are considered 'women's business' and pregnant women generally prefer to see female health practitioners. It is Anangu custom that a father does not attend the birth of his child. Females, particularly grandparents, are expected to assist the mother.

Be aware that, in some cases, non-Aboriginal health practitioners may be asked to arrange for the child's umbilical cord to be saved and given to the mother or grandmother. This is a cultural practice that should be facilitated.

Kinship

Kinship is concerned with notions of 'family'—that is, who counts as a relation (both close and distant) and how they care for one another. These notions vary cross-culturally as does the role of kinship. Aboriginal people in Central Australia construct kinship in different ways to Anglo-Australians and people of other cultures. This is not just a matter of different kin structures and terms, it also concerns patterns of behaviour between different categories of kin with associated responsibilities and sentiments. Different systems of kinship have implications for caregiving and other social responsibilities.

> "The Aboriginal system of kinship can be confusing for new staff. They need to understand that A<u>n</u>angu have a big family network.

An important way of showing cultural respect is by recognising that other models of family and caregiving exist apart from one's own. For example, the English system of kinship limits the category of people classed as kin to a small family group, that of the genealogically related nuclear family.

In contrast, Aboriginal people recognise a much larger group of people as both close and distant kin. It is important to be aware that distinctions made between close and distant kin are not necessarily based on what Anglo-Australians refer to as 'blood relations'.

The majority of people at Mutitjulu use the Pitjantajatjara kinship system. It is helpful to know some key features of the system as these have implications for caregiving and expectations and obligations associated

with different types of relatives. A person calls his/her mother and mother's sister(s) by the same term for 'mother'; he/she calls her father and father's brother(s) by the same term for 'father'. Importantly, a person regards his/her mother's sisters as 'mothers', similarly he/she regards his/her father's brothers as 'fathers'. Significantly, these other mothers and fathers are regarded as having the same kind of responsibilities and obligations toward the person as the person's biological parents. This has implications for consent regarding medical care for children.

Kinship carers (next of kin and who can give consent if a child's parents or normal caregivers are not available)

As mentioned earlier, Aboriginal ways of reckoning kin relations have implications for the care of children. For example, there is a wide range of kinship carers available to assist in looking after and nurturing children. It is frequently the case that the person taking a child to the clinic for medical treatment will not be the child's biological parent but a mother's sister, grandparent, aunt or uncle. As mentioned, mother's sisters, and grandmothers, play an important caregiving role in Aboriginal society. However, other kin may also be called upon. This reflects the fact that kinship relations are not just about genealogical relatedness but about caregiving and family belonging.

A child's mother's sisters are like mother and they and the child's grandmothers are regarded as really close to the child.

In a case of emergency involving a child, where the mother or primary caregivers are not available, the mother's sister, grandmothers and mother's brother can make decisions and provide consent. Otherwise the ALO should be asked to contact the family to find out who has responsibility to make a decision. This will ensure that family are aware of what is happening and an individual is not blamed for making a wrong decision.

Anyone under 14 years of age needs a guardian or family member accompany them to the clinic. School teachers should not bring children to the clinic unless it is an emergency situation.

Age and seniority

Age confers status in Aboriginal societies and is associated with familial and community obligations. At the same time, the expectation is that elders must be treated with care and respect. Unless there is an emergency, aged clients should not be made to wait before being seen in the clinic.

Kin accompanying a sick person to the clinic

In cases where a person is very ill or elderly, numerous family members may accompany them to the clinic.

"They do this to support them and check up on how they are going. They may want to go in to where the person is sitting for a little while"

While health staff need space in order to secure the situation of the sick person and work without impediments, family need to be treated with respect.

"We have a few people here with mental illness. Some people might become aggressive in certain situations. In such cases it is important to get a family member to talk with them.

Family know who is good to talk with them, a relative who the person looks up to. In the case of a man, for example, it might be a brother. New staff might not understand and call the police"

Respecting socio-spatial boundaries: approaching people in their houses

Always rely on advice from Aboriginal health practitioners regarding the location and identity of individuals. If non-Aboriginal health practitioners need to visit a person's house they should only do so with a Malpa or Aboriginal health practitioner. This is particularly important after hours. Malpa are there to support health staff.

"If a piranpa health practitioner needs to visit a client at their home it is best to sit in the car outside and 'bip' the horn. People feel shamed when piranpa go into their houses. They are also concerned that their dogs do not attack strangers"

If non-Aboriginal health practitioners need to visit a house by themselves during the day, rather than knock on a person's door, they should call out from the car and wait. This is not only a matter of respect but also a precaution against unwelcoming dogs.

More information

Refer to the

Congress Cultural

Safety Framework

for the following matters:

- Acknowledgement of Traditional Owners
- Welcome to Country
- Appearance and dress
- · Community politics



