

REFLECTIONS ON A DEVELOPMENTAL EVALUATION OF JALNGANGURRU HEALING

AES Conference
Friday, 20th September 2024
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Eva Nargoodah



ACKNOWLEDGEMENT

We acknowledge that this is Wurundjeri Country.

We pay respect to Wurundjeri Elders, past and present, who have been the custodians of this Country for millennia.

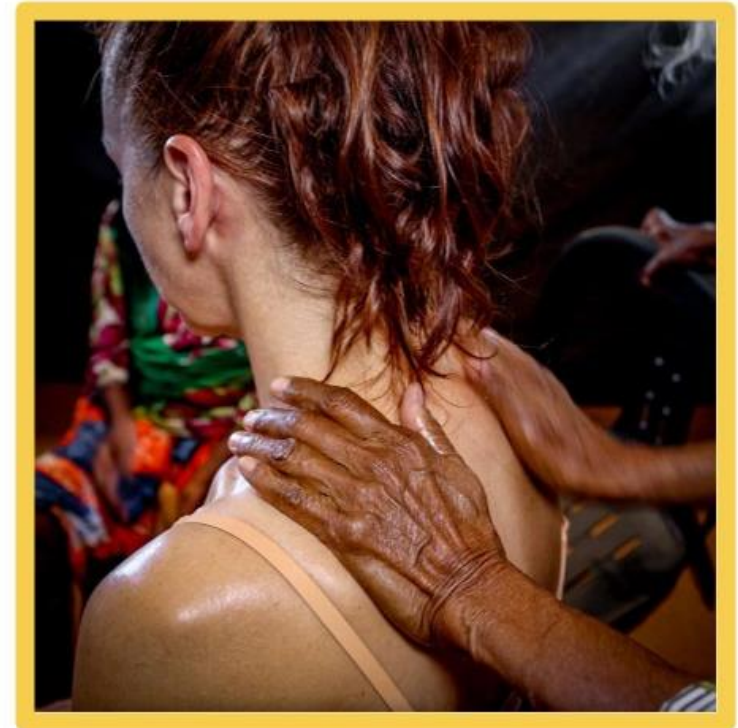
CULTURAL HEALING PRACTICES IN THE KIMBERLEY

Cultural (traditional) healing can address issues including physical ailments, social and emotional well being, mental health issues, spiritual harm and culture bound syndromes.

There are varied practices, with roles for men and women, sometimes separately and sometimes together, including (but not exclusively):

- the use of bush medicinal products,
- the smoking of woods and leaves, and
- the use of ochre and ceremonial songs.

Mabarn is a type of healing practiced by men.



JALNGANGURRU

Jalngangurru means healer in Walmajarri.

Most Kimberley Aboriginal families have access to healers, and healing is done privately within family structures. Due to colonisation, not all Aboriginal people in the Kimberley have access to these practices.

This project seeks to bridge that gap - it does not seek to override the family obligations and practices that already exist.



STAKEHOLDERS



KALACC



WAPHA
WA Primary Health Alliance



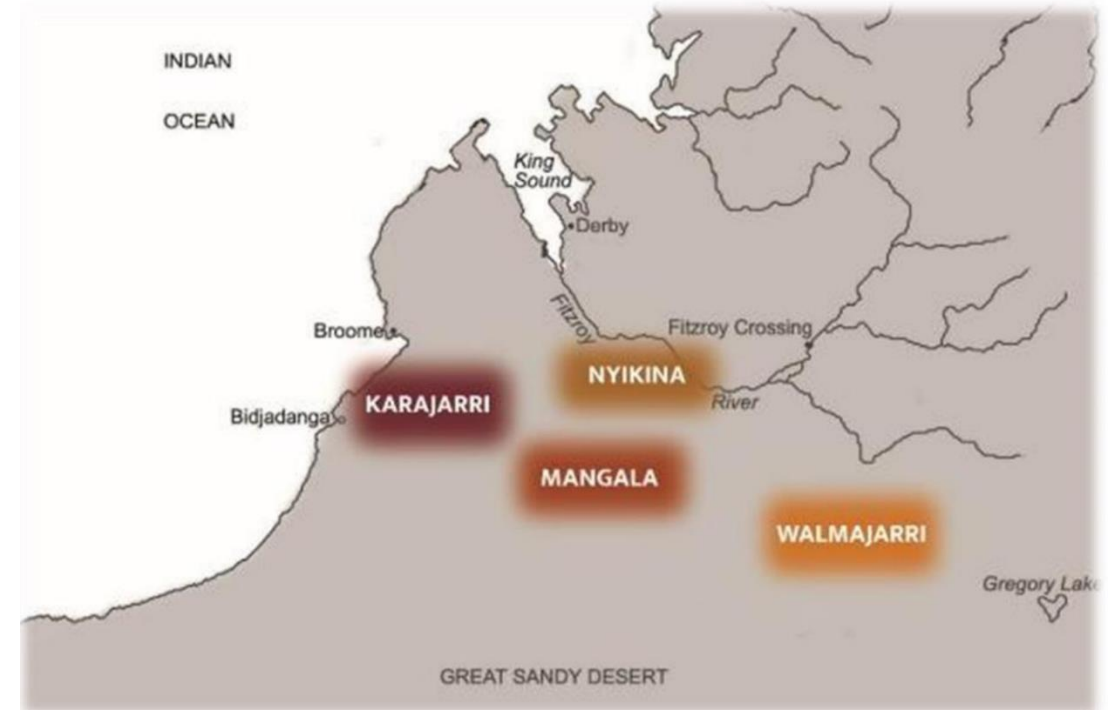
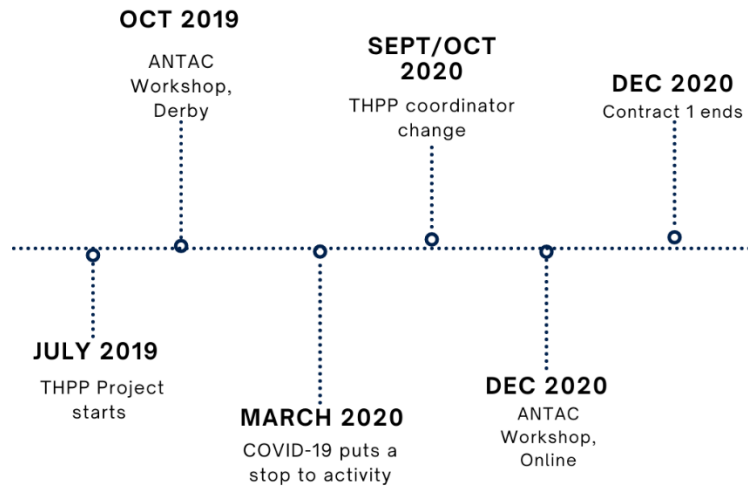
Transforming Indigenous
Mental Health and Wellbeing
www.TIMHWP.org.au



Nulungu
Research Institute
The University of Notre Dame Australia



Ngaanyatjarra
Pitjantjatjara
Yankunytjatjara
Women's Council



BACKGROUND TO THE TRADITIONAL HEALING PRACTICES PILOT

The first year

PROJECT GOALS & FUNDING

The project is funded by WAPHA and the Federal Department of Health, as part of the Kimberley Aboriginal Suicide Prevention Trial (KASPT), as coordinated by KAMS.

Main goals:

1. Develop a model for service delivery of cultural healing in the Kimberley;
2. Trial the model in trial sites in the Kimberley; and
3. Engage with existing health services in the Kimberley.

We are currently contracted by WAPHA until 31 December 2024.



DEVELOPMENT WORKSHOPS

- ANTAC model, online (Dec 2020)
- Broome, Derby and Jarlmadangah (Feb/Mar 2021)
- Fitzroy Crossing (Mar 2021)
- Alice Springs visit (May 2021)
- Fitzroy Crossing (July 2021)
- Theory of Change, online (Nov 2021)
- Bush Medicines, Broome (Dec 2021)
- Healers' camp, Willare (May 2022)
- Healers' camp, Fitzroy Crossing (October 2022)

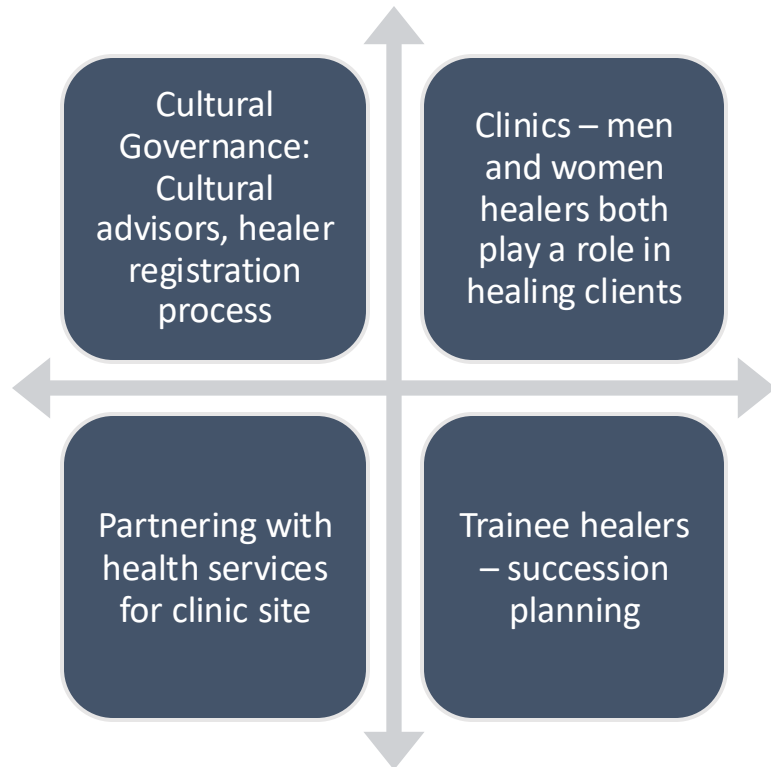


KEY ELEMENTS OF THE SERVICE

- Types of healing practices to be included
- Cultural safety and confidentiality
- Support/coordination team
- Site and scope
- Referral process
- Accreditation and registration of healers
- Documentation and insurances
- Employment and remuneration
- Funding



SERVICE DELIVERY MODEL: CRITICAL COMPONENTS



JALNGANGURRU HEALING OUTPUTS

AUGUST 2022 TO OCTOBER 2023

OUTPUTS

4
Healing clinics

62
Clients seen

14
Healers registered

142
Referrals

7
Workshops

2
Philanthropic engagements

4
Trainee healers

2
Healers' camps

7
Promotional materials

5
Media reports

13
Key documents

13
Funding submissions

13
Presentations

Jalngangurru
Healing

EVALUATION

Research question:

Has a culturally and economically sustainable service delivery model of Traditional Healing been developed in this trial?

THE TEAM

- Aggie Pigram (Yawuru/Bardi)
- Kristen Andrews (Bunuba/Walmajarri)
- Gillian Kennedy (kartiya)



GUIDING PRINCIPLES

- ✓ Strong cultural governance – guided by bosses
- ✓ Cultural advisors say who can be registered
- ✓ Coordination team, cultural advisors & healers all working together
- ✓ Keep it going but with a slow and steady approach

More work to do (and funding needed) in regards to passing on the knowledge to young people and engaging young people



WHAT WE DID: METHODS AND PARTICIPANTS

Mixed methods



Desktop/literature review



Observation



Group discussions/workshops



1:1 Interviews



Client survey

Participants

Stakeholder group	No.
Healing project team	3
Cultural Advisors (men and women)	5
Healers – males – <i>mabarn</i>	7
Healers – women – <i>parnany parnany warnti</i>	6
Yiriman women	3
KALACC staff and directors	6
KASPT team	2
AMS staff	4
WACHS staff	4
Clients	22
Total	62

COMMUNICATING WITH HEALERS



Reporting back - Healing camp sessions - Checklist matrix

Checklist Matrix - Elements of the Service Delivery Model – Stakeholder perspectives - Emerging findings

Interim Report
July 2022

Element → Stakeholder ↓	1. Definition of Cultural Healing Practices in the Kimberley	2. Confidentiality and cultural safety	3. Support/ coordination team for the healers	4. Site and scope (communities to be included in the trial) for service delivery	5. Referral process	6. Accreditation, qualification, registration (as appropriate)	7. Documentation and insurances	8. Employment and remuneration	9. Funding
THPP Project staff (Project Manager, Healing coordinator, trial partner)									
Yiriman Women			Not yet known		Not yet known	Not yet known	Not yet known		Not yet known
Cultural Advisors (KALACC men)			TBD at Healers Camp	TBD at Healers Camp	TBD at Healers Camp	TBD at Healers Camp	TBD at Healers Camp	TBD at Healers Camp	N/A
Healers (men and women)		TBD at Healers Camp	TBD at Healers Camp	TBD at Healers Camp	TBD at Healers Camp	TBD at Healers Camp	TBD at Healers Camp	TBD at Healers Camp	N/A
KALACC staff and directors							Not yet known	Not yet known	Not yet known
Community members who have accessed the service (clients)	TBD – Interviews for final report	TBD – Interviews for final report	N/A	TBD – Interviews for final report	TBD – Interviews for final report	N/A	N/A	N/A	N/A
KAMS (as coordinating agency of the KSPT)	TBD – Interviews for final report	TBD – Interviews for final report	TBD – Interviews for final report	TBD – Interviews for final report	TBD – Interviews for final report	N/A	TBD – Interviews for final report	TBD – Interviews for final report	TBD – Interviews for final report
Funding body (WAPHA)	N/A	N/A	N/A	TBD – Interviews for final report	N/A	N/A	N/A	N/A	TBD – Interviews for final report



All good



Okay but maybe some problems



Careful!
Could be a big problem

Checklist Matrix - Elements of the Service Delivery Model – Stakeholder perspectives

Final Report
October 2023

Element → Stakeholder ↓	1. Types of healing to be included	2. Cultural Way	3. Working together	4. Trial Sites (Derby and Fitzroy)	5. Referral process	6. Registration of Healers	7. Paperwork and Forms	8. Payments		9. Funding
								Amount	How people get paid	
THPP Project staff (Project Manager, Healing coordinator, trial partner)										
Yiriman Women										
Cultural Advisors (men)										
Cultural Advisors (women)										
mabarn (men)										
Parnany <u>parwany</u> warnti (women)										
KALACC staff and directors							N/A			
Community <u>members</u> <u>who</u> have accessed the service (clients)						N/A	N/A	N/A	N/A	N/A
KAMS (as coordinating agency of the KSPT)							N/A	N/A	N/A	
Funding body (WAPHA)	N/A				N/A	N/A	N/A	N/A	N/A	




All good



Okay but maybe some problems



Careful!
Could be a big problem

A close-up photograph of several people's hands stacked together in a circle, symbolizing unity and collaboration. The hands are of various skin tones and are positioned over a wooden table. The background is slightly blurred, showing parts of people's clothing and a small container on the table.

Lessons learned from the Developmental Evaluation process

Opportunities and Challenges

OPPORTUNITIES

- Benefits and 'use' of evaluation are embedded – developing a service delivery model
- 'Critical friend' role
- Building relationships and trust
- Capturing stakeholder perspectives 'on the go'
- Staying true to 'cultural way' principle – evidence able to speak back to pressures
- Embedded learning and reflection

CHALLENGES

- Pressure from mainstream health services for hard evidence re efficacy of healing
- Critical friend role
- Communication with healers: distinguishing between planning talks and evaluation talks - too much talking!
- Logistics, time and resources



Jalngangurru Healing in
the future...?



OPPORTUNITIES

- Expansion to other areas
 - Partnering with existing health services (e.g. WACHS)
 - Bush medicines
 - High demand for media appearances and conferences – NITV's Our Medicine
 - Mobile clinic – for acute/emergency care
 - Healing centres
-

WHAT WE FOUND: PRINCIPAL FINDING

*A culturally sustainable service delivery model was established in the Jalngangurru Healing trial. This was facilitated by the **strong partnerships** that KALACC made in Emama Nguda, KAMS and DAHS. While indications are that the service is providing **a promising contribution to Aboriginal health and wellbeing**, it is **not yet economically sustainable**.*

EIGHT SUB-FINDINGS

1. There is a strong demand and need for a cultural healing service in the Kimberley

2. Jalngangurru Healing is a culturally secure service model for the trial sites

3. Jalngangurru Healing developed strong partnerships, but more work is needed to integrate into health services in the region

4. Jalngangurru Healing is not yet a financially secure service

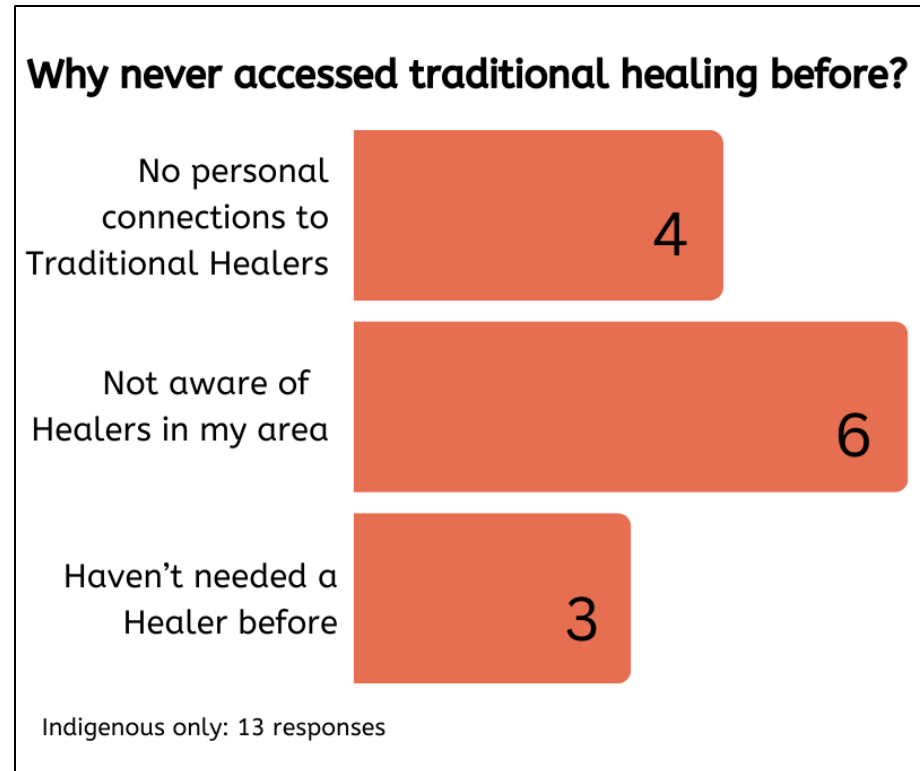
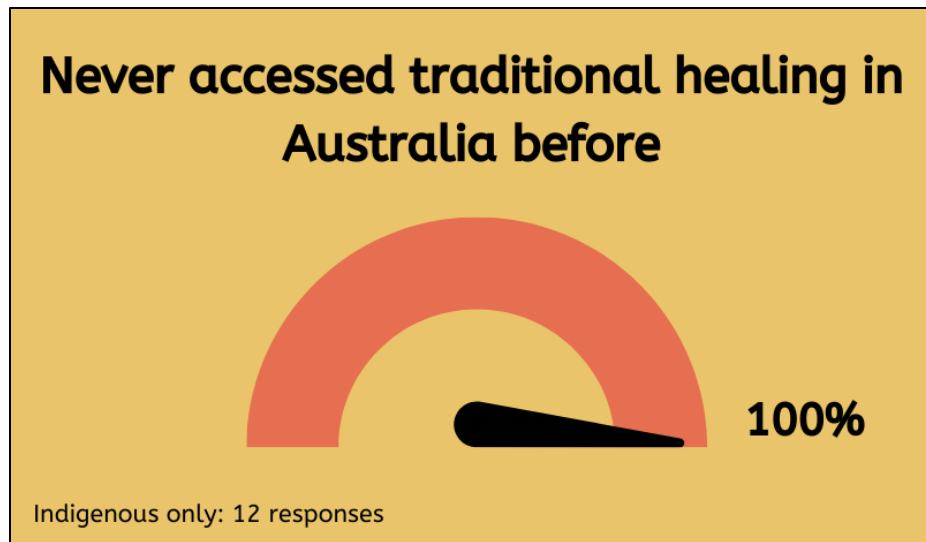
5. There are demonstrated emerging benefits of Jalngangurru Healing for Aboriginal people, including clients, healers, the project team, and younger trainees

6. More research is needed to systematically capture outcomes of Jalngangurru Healing

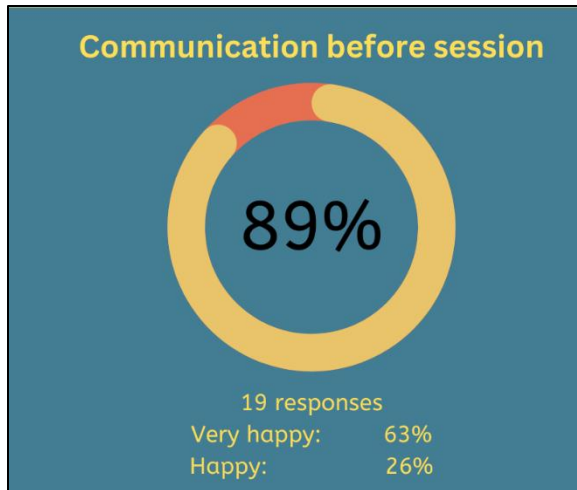
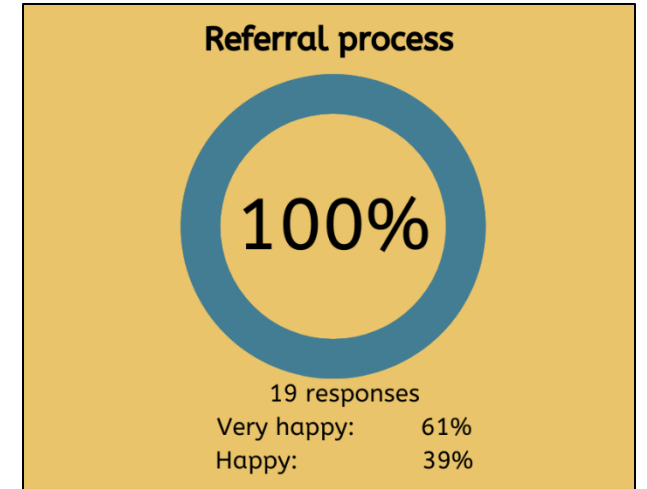
7. The loss of cultural knowledge and healing practices due to the age and frailty of the healers is a critical risk for the future

8. There are barriers within mainstream health that may make it difficult for Jalngangurru Healing to operate in the way that the cultural advisors and healers want to work

ABORIGINAL AND TORRES STRAIT ISLANDER CLIENTS



CLIENT SATISFACTION



SOME COMMENTS FROM THE ABORIGINAL AND TORRES STRAIT ISLANDER CLIENTS

Brilliant service and very much needed

Life changing

*Thanks for having me. I would love to try it
again*

*Thank you all who were involved in the healing
sessions.*



Thank you

Jalngangurru Healing Summary Evaluation Report:

<https://doi.org/10.57981/E78B-JT04>