Keeler healing—helping an Aboriginal community heal themselves

Suzanne Taylor¹, Linda Sharman², Garry Taylor¹
¹WA Country Health Service—Wheatbelt

Suzanne Taylor is manager of the Wheatbelt Aboriginal Health Service. She has a background in nursing, health promotion and public health and is passionate about making health services work for those most in need.

Garry Taylor is a moorditj Noongar Keela Marum from Ballardong Boodja. In other words, Garry is a ‘solid’ Noongar Kellerberrin man from Ballardong Country. Garry’s family is Keela (bull ant), from Kellerberrin in Western Australia and his wife’s family is Kwaria (small kangaroo), from the nearby town of Quairading. Garry and Raelene have raised two sons and a daughter and are proud grandparents. Garry has been very fortunate on his journey with many lessons learnt. Garry grew up on a reserve called Djuring because his family were not allowed to live in town. This is where he learned to love and respect the bush as well as his role and responsibility to country. Fortunately the missionary couple assigned to the reserve were compassionate role models who allowed language to be spoken and protected the children from being stolen from their parents. At age 7 or 8, Garry and his family were moved to town to a house with indoor lights and running water but concrete floors. The house was hot in summer and cold in winter. Life lessons were learning how to adapt. Football was an opportunity to be accepted and he was welcomed for his skill. Garry spent time in Darwin studying theology. Valuable lessons learnt here were how the Gospel can link with culture and how important it is to be one’s self. Garry has moved throughout the Wheatbelt with various jobs from labourer to prison welfare officer, assistant pastor, marriage celebrant, community bus driver, educational liaison officer to his current position as Aboriginal Health Coordinator. All of these roles have prepared Garry to be an advocate for his people.

Kellerberrin is a small Wheatbelt town in Western Australia with an Aboriginal population of 110, or 9% of the town’s population. This community suffers from the same high rates of chronic diseases as the total Western Australian Aboriginal population and the level of illness and death in the community has had significant negative impact on their emotional and mental health.

The problems facing the Kellerberrin Aboriginal Community are well described by artwork drawn by Garry Taylor, Aboriginal Health Coordinator. It shows the traditional home of the community (Djuring) where there was a good supply of physical, emotional and cultural food. As the community has moved into the township, they have lost their links to this place of nurturing. The township is a place of comparative poverty and illness. The only place of cultural connection in the township is the cemetery and, with the high number of Aboriginal deaths, this results in death having a high profile in the consciousness of particularly young men.

While there were some metaphorical trails back to Djuring these were either not well established, or not sufficient to counteract the negative effects of the current lifestyle of Aboriginal people.

There was particular concern within the Aboriginal community and the health professionals who service the town that, if the community was not assisted to find a way to heal itself, there was a risk of a suicide cluster within Kellerberrin.

The aim of this project was to assist the Kellerberrin Aboriginal community to identify the specific interventions they need to move from the impacts of low social, emotional wellbeing to a place of community and individual strength using the of the ‘Asset Based’ and ‘Strengths Based’ models of practice.

The Keeler Healing Project was established in early 2009 and, while there is still a high burden of disease, mental health problems and social disadvantage, the changes in the community since that time are quite amazing. There is now a women’s group, regular access to alcohol and drug counselling, ‘Bringing Them Home’ counselling for members of the Stolen Generation, and regular social work services to assist community members to meet basic needs. Mental Health First Aid training has been provided and Aboriginal Health Workers in the town say they feel ‘lighter’.

This paper will detail how these changes have occurred, and how a picture has been transformed into action.