

Dr Mim Weber on deep listening and becoming better allies to First Nations clients and colleagues

Tania McMahon

Welcome to Digital Mental Health Musings, a podcast series from the e-mental health in practice initiative providing health practitioners with the latest news and developments in digital mental health services and resources.

eMHPrac acknowledges the Turrbul and Yuggera people the traditional custodians of the land on which we bring you this conversation. We acknowledge elders past and present, and honour their continuing connection to land, culture, and community, and that it's these connections that are intertwined in indigenous mental health and social and emotional wellbeing. We acknowledge the strength and resilience of all First Nations people and communities since colonisation of their unceded lands.

Hello and welcome back to Digital Mental Health Musings, thanks for tuning in. I'm your host Dr Tania McMahon, and today we reflect on NAIDOC week and Reconciliation Week held earlier this month, recognising the health and wellbeing of our Aboriginal and Torres Strait communities, the First Nations peoples of this country. We wanted to keep the conversation going by delving more deeply into the role of ally that we, as health professionals, can play in showing up for and supporting our First Nations communities, clients and colleagues.

So, joining me on the podcast today is Dr Mim Webber. Mim is the senior workforce development officer at WellMob. For those who aren't familiar with WellMob, it's an eMHPrac website co-designed with First Nations peoples to help frontline workers access culturally safe digital mental health and wellbeing tools and resources.

The WellMob website also has really fantastic training resources to help non indigenous health professionals better understand the impact of colonization, the need for trauma aware and culturally embedded healing, as well as practical ways of better connecting with the First Nations people we serve. So WellMob really is a a rich source of education and support for practitioners, so it's fantastic to have Mim here today to talk about the ways that we can engage with WellMob to, to understand how we as non indigenous healthcare providers can be better allies to First Nations people.

So Mim grew up on Gurna country in Adelaide where she worked in education and health before working across the Pilbara in WA for six years, And then to Bundalong country in 1994, where she worked across the northern rivers in child and family health, eating disorders and mental health. Mim thank you so much for being here, it's really a great pleasure to have you on the show.

Mim Weber

Thanks Tania.

Tania McMahon

And before we go on, I want to preface this conversation by saying that both Mim and I are non indigenous clinicians and this is something we, and I'm sure many of our listeners, grapple with a lot. That while there are Aboriginal community controlled mental health services doing incredible work, the reality is that many health professionals are non indigenous. So for us to support these services and for us to work well with indigenous clients, communities and colleagues, we need to do the work to educate or perhaps reeducate ourselves about Australia's history. About the impact of this colonist history, the associated intergenerational trauma that continues to impact on First Nations people. About recognising and calling out racism and discrimination in our workplace. The inequity in accessing our healthcare systems, and about our ability to critically reflect on our own biases and privileges.

So, there will be many of us that have asked ourselves, how can we be respectful and useful allies to our First Nations clients and colleagues? How can we privilege the voices of First Nations people? Because sometimes, despite our best intentions, we may actually do harm without realizing it. Because we might not understand how our, our unconscious bias assumptions, behavioural words and the impact of colonisation continues to affect the people and and communities that we support.

So Mim, you've, you've recently written a really interesting and engaging piece for eMHPrac's website, we'll link to it in the show notes, titled 'How to be a good ally.' I found it really empowering because in that piece you give us some ideas around true allyship, and some of the tools to educate ourselves in how we can contribute to building trustful and respectful relationships with Aboriginal and Torres Strait Islander people.

In that post, you say that allyship is a lifelong journey of learning, and I wanted to quote you here because I think the sentiment is really powerful. You say, "although it's sometimes uncomfortable remembering some of the things I've said in the past, it really shows my lack of understanding then and recognising this, I can be different now and into the future." I really love this message and I wonder if you can tell us about, you know, when you started getting interested in allyship and then how that interest has impacted your practice?

Mim Weber

Thanks Tania. I've worked with Aboriginal and Torres Strait Islander colleagues in several different jobs since about the mid to late 1980s. As a social worker, I hold strong belief in the importance of social justice and taking a collaborative approach, and this has informed much of how I've thought about things.

I really began to think more seriously about the concept of allyship during the voiced referendum last year. I was appalled at the negative campaign and the outcome of the vote. I made a promise to myself that I would pursue being an ally this year and WellMob director Dave Edwards agreed for me to take it up through WellMob.

So, I began to do some reading and I spoke to Dr Marcel Townsend Cross, who is an academic here at the UCRH. She was really helpful, alerting me to further concepts and directing some more of my research. So just to be clear, this is a beginning journey for me. In no way do I see myself as an expert on this topic. And of course, as I was reading, I began to reflect on my previous roles with First Nations colleagues and how I might have done or said things differently if I had understood more. I really hate it when I offend or upset people because I haven't thought things through more or was too hasty in judging a situation. Of course I've not done it intentionally, but intention means nothing when someone has been hurt. So these are good opportunities for learning.

The blog on being a good ally that I wrote for eMHPrac was timed to coincide with Reconciliation Week, as the WellMob team thought it might be timely if there are non indigenous people who might like to consider what they may be willing to do in this space, especially in the context of the impact of the referendum on race relations. The purpose of our WellMob blogs is to alert people to some great resources on particular topics. Being a good ally, it seems very timely for reconciliation week.

Tania McMahon

I really agree with you there. Especially after the, the referendum result, it really, it feels like a timely moment for us as non indigenous clinicians, and all other non indigenous people in general I'd I'd add, to really ask ourselves, well, what what can we do in this space? What does showing up really look like? And I love what you said there about that process starting with self-reflection, you know which in this space I think can feel pretty confronting, but like you said it's it's such an important opportunity for learning to do that self-reflection.

And I know we'll we'll touch on that more a little bit later on but I mean you've you've also written about the importance of of allyship in in dismantling some of those oppressive structures. The importance of showing up, and not just for the days or the weeks like NAIDOC and Reconciliation week, you know that we set aside for reflection. That there are many ways to demonstrate our support for our First Nations clients and colleagues throughout the year, but to move beyond that to show up in a more genuine way every day. From your perspective, what does practicing true allyship really mean? What are the behaviors and traits of an affective ally?

Mim Weber

For me, it means being clearer and more alert to the signs of systemic racism. Of discrimination or offensive comments or behaviour, even if unintentional. It means having that awareness and alertness more at the front of my consciousness and learning how and when to raise it. And it also means being more mindful to step back with my own commentary or opinion. To listen to and promote the perspectives of my First Nations colleagues. Even when I think I've got something useful to say, I can sit back and listen.

And a very recent example was when WellMob did a webinar with the Black Dog Institute on using digital resources with First Nations clients. And I've been talking about an example of how we could use the resources on WellMob in a client situation. A question was asked by the facilitator and I promptly answered. And then my colleague Angela

Sheridan responded to that question from her experience. It was a much better answer and if I had sat back and waited instead of feeling like I had to give the clinical answer immediately, it would have been better. So I recognise it takes time and practice to behave differently and I will keep practising it.

Tania McMahon

Mim, one of the the specific resources that you direct people are interested in allyship to is a beautiful film presented by Miriam-Rose Ungunmerr on the practice of the Dadirri. It's the practice of deep listening and I'd love to play a short clip from the video for our listeners and viewers here.

Miriam-Rose Ungunbeer

To know me is to breathe with me. To breathe with me is to listen deeply. To listen deeply is to connect. It is sound. The sound of deep calling to deep. Dadirri The deep in the spring inside us. We call on it. And it calls on us.

Tania McMahon

So Mim, can you, can you tell me about the impact of deep listening in allyship and, and what that might look like, you know, both inside and outside the therapy room?

Mim Weber

Yes, the clip of Miriam-Rose Ungunmerr on Dadirri is indeed beautiful. It says so much. But I don't want to analyse it or comment on it. I think we need to connect to it in our own ways. And it may speak different things to us at different times. Or it may say different things to different people. So I invite the audience to check this video out. It's on WellMob and is spelled Dadirri if you search for it. So enjoy it and be open to it.

My First Nations colleagues tell me that listening is most important. Listening is really the beginning of any relationship building. But what are we listening to? What are we listening for? What are we noticing? How are we listening? A teacher of mine once proposed that we will find what we are listening for. If we listen for deficits, we will find deficits. If we listen for strengths, we will find strengths. If we listen for hope and possibility, we'll find that too.

And truth telling is something that many indigenous leaders are telling us is important for many reasons. One of these is for us to understand the ongoing impact of colonisation, the everyday racism and its impact now. Listening to those truths has to accompany the telling of truths. I find some of it very uncomfortable. Painfully even. And it must be even more painful to tell those stories.

There are many ways to tell the truth. Rachel Perkins documentary 'The Australian Wars' is one such story. An amazing series. And David Marr's recent book 'Killing for country', is another full of painful stories, but so important. In fact, there's so many brilliant truth telling films, books, stories and songs by First Nations Australians. And we can choose to engage with some of those, and if we can listen deeply and openly to what they're telling us, I believe we will learn something. And then we can choose what to do with that listening and that learning. Listening by itself is a start, but it's not enough.

Professor Marcel Townsend Cross alerted me to the concept of cultural humility. As I said in the blog, this term was initially coined by two black African academics way back in 1998. Melanie Tervalon and Jan Murray Garcia. I wish I'd learned this term earlier, as I would have used it in much of my previous education work, and it means reflecting on our own privilege and power in the relationships we have, especially relationships with clients. It recognises that whilst the clinician brings a level of experience and expertise to the relationship, the client is the expert in their own life. And this concept is bread and butter to most social workers and has been for a long time. However, it might not necessarily be so for all other clinical professionals. I would propose that really listening means consulting the client on what they think. Are we even asking the right questions? How much are we able to follow what the client wants to talk about rather than stick to our own Western frameworks of assessment is what we are doing or discussing with them experienced by them is helpful?

When I was still working as a clinician, that's a long time ago now, I was drawn to narrative therapy as a tool or guide to help me, and that was particularly the work of Michael White and Janelle Burton. I've not worked clinically with Aboriginal or Torres Strait Islander people, so I don't want to say how I think clinicians should do that, but I think taking a position of cultural humility might help. And accessing some of the resources we have on WellMob definitely will help.

One of those resources is an eMHPprac podcast with Angela Sheridan and Bec Pevitt. It's called 'Spotlight on WellMob: Connecting digital mental health to culturally responsive healthcare.' Bec is a non indigenous clinician working in the alcohol and other drug space, and she does that with many First Nations clients. Although the focus of the podcast is social and emotional wellbeing, she gives them excellent examples of how to bring cultural humility into the mainstream work context. I think it's a really good podcast in relation to this clinical work.

Tania McMahon

Yeah. That was a really wonderful and insightful episode. If anyone wants to listen to it, it's from the previous season, we'll link to it in the show notes. But yes, I love this. I love this idea of, of listening and really listening because I think it's really at the heart of what we do as healthcare workers and clinicians. And yes, of course, in our, in our Western way of working we're often really focused on assessing or diagnosing or delivering treatment. But to me that's, that's secondary to what we have to do first, which is listen and and really hear what our clients are telling us. And I think it can be easy to overlook that. To just rush through it and just listen out for the things we want to hear, all the things we need to hear to try and, you know, race through our agenda. And I think that idea of deep listening is a lovely reminder to return to the heart of what we do because it's absolutely necessary in order to really get in sync with and properly connect with, and then properly serve the people that we work with. And then particularly our First Nations clients and and family.

In, in the quote I referenced earlier, you mentioned sitting with the discomfort and then getting getting things wrong. You know, chances are that we will make mistakes as we try to connect in in more meaningful ways. But what would you say about that discomfort and how to approach it?

Mim Weber

Yes, we're not always going to get it right. So, what I try to do is just recognise, and I can usually feel it or sense it from a response from somebody. And what I try to do is honor, honor it, sit with it. Talk to someone about it. I try not to be defensive or to justify my actions. And if it's appropriate and possible I have apologised to the person with whom I got it wrong. Taking full responsibility for it. I recognise that learning can be uncomfortable at times, but also rewarding if we truly do change our actions and behaviours because of it.

Tania McMahon

And what, what a, what a, a beautiful and powerful thing to be able to do. What a gift for the person we're working with, for you to be able to give them, is you sitting with that, that discomfort and, you know, potentially experiencing quite a transformative change in how you're working with them because of it.

I want to talk a little bit more about, about sitting with that discomfort and also uncomfortable conversations because as you say, genuine allyship really requires non Indigenous Australians to speak out against contributors to racism, inequality and disadvantage. It requires us to speak up against the racist comments, language and false information that perpetuates negative attitudes and stereotypes about Indigenous Australians. And having these conversations may not always feel comfortable, particularly with family, friends and colleagues. In fact, they might be downright uncomfortable, but avoiding them can mean that important opportunities for change are missed. And I wanted to ask you about your approach to this and the work that we need to do as non indigenous Australians. And particularly as health professionals to recognise and address racial inequality.

Mim Weber

Hmm. There are some organisations that are doing really great work on this. Reconciliation Australia. The Healing Foundation. The Human Rights Commission with their 'Racism It stops with me.' campaign has some excellent suggestions about responding to racism online and in social situations. There's a little section called Bystander Action. Also the people who've written or filmed the resources that I highlighted in the blog have ideas about what they would like non indigenous people to do when they see racism, when we see racism or discrimination in action. What I do know is that we need to be careful in how and when we respond.

One of the questions we can ask ourselves in self-reflection is why does this make me feel uncomfortable? Calling someone out is probably not going to feel comfortable, but being an ally is not necessarily about being comfortable all of the time and out of adversity can come some opportunity. One of the authors, Alice Curry, says add your voice when asked to do so. The 'Racism. It stops with me' campaign says to promote the voices that are being silenced rather than speaking for them. And a couple of the other people who spoke, Tracy Rigney and Summer May Finley in her article, her excellent article. They both asked us to pull people up who are saying something that's inappropriate or racist, but when we're in smaller social situations.

So, I think it really depends on the circumstances. You know, there are some family members that we're never going to raise that with because that conversation is never going to go anywhere. So, you know, we also have to use our own judgment around that. In the health services sphere, there may be more structural opportunities to call out racism or systemic inequality. There is policy and legislation to support that. And you may be able to find ways of working within the system to make it work for your client. So I do know that some people have been able to advocate for their client in their circumstances as a way of changing or navigating the system. Being an ally means advocating for your client in a system that may be systemically discriminating against them or their circumstances.

Tania McMahon

Hmm. So it sounds like it's, there's there's a lot of ways to to be able to respond. And it really come we we kind of use our clinical and personal judgment about how how we can navigate that. Yeah.

I wanted to ask too about self-determination in the context of allyship. Can you explain that for us? And then our role as health professionals in supporting it?

Mim Weber

Well self-determination is exactly what it says it is. First Nations people making decisions about their own lives. And again, I need to reiterate that I'm not an expert in this film. In one of the articles Trent Nelson explains that self-determination means supporting indigenous communities in the way they want to be supported. And I had a very good friend who was a community development worker. She worked for several years in the Pilbara and Kimberley when I was there and her perspective was you have to start with what the community leaders and members are saying is most important to them. They actually do know. I think the voice was a way in which the rest of Australia could have had a helpful reading on whether or not something was going to be useful to communities.

The classic disaster in my experience was the NT intervention in 2007 when the Howard government was so shocked at the incidence of violence and sexual abuse of children in remote communities. And rather than consult with community leaders about what they thought would be helpful, they sent in the Defence Force and hurried through a raft of other legislation and provisions. Not surprisingly, it did not address the issue and was once again an example of the dominant Western system imposing their own ideas of a solution to something that they really did not understand.

I'm sure Aboriginal and Torres Strait Islander leaders could name many more examples. And it's distressing to me, and it must be even more so to First Nations people that non indigenous decision makers at all levels keep thinking that we've got the answers.

Tania McMahon

Oh, absolutely. And, and it really comes back to that earlier point you were making about about listening and deep listening. I read somewhere that Indigenous Australians are the most consulted, but the least listened to. And in fact the the example you gave there, there wasn't even any consultation, but I think it really does reiterate that point about listening.

Deep, honest, open listening. And really truly hearing what is being said being a critical feature of allyship.

So, we also talked about education earlier and WellMob offers such a rich source of resources to support health professionals through their journey to allyship. As well as other resources to support the health and well-being of Aboriginal and Torres Strait Islander peoples. And I wanted to talk a bit about cultural load. What, what that is and how services like WellMob help to alleviate that burden.

Mim Weber

Yeah, cultural load, also referred to as colonial load. And it's so obvious when you think about it. I wished I'd known this term years ago. It refers to the practice by us as non indigenous workers asking our First Nations colleagues to explain to us anything related to aboriginality or issues relating to Aboriginal and Torres Strait Islander people.

It also refers to the practice, quite a frequent one, of the lone First Nations worker on a team being asked to sit on every committee as the indigenous or being asked for solutions on all sorts of issues. And that's exhausting for that person and clearly unfair, expecting them to represent the diverse range of cultures and perspectives that Aboriginal and Torres Strait Islander people have in this country.

Cultural load also refers to the lack of understanding by some non indigenous managers and workplaces regarding the cultural and community responsibilities many First Nations workers carry. However, willingly they meet those responsibilities. An example of that is sorry business where First Nations people are much more likely to be attending funerals more regularly than their non indigenous colleagues. As well as the disparity in life expectancy and suicide compared to non indigenous Australians. First Nations peoples have strong obligations to their extended family, kin and communities and cultural protocols around death and burial.

I have to admit that I too have unwittingly added to the colonial load of my First Nations colleagues at times. They've usually willingly and generously responded. However, one of the authors I referenced, Phoebe Mcilwraith, in her article, proposes that we non indigenous people can share that load by doing our own research. And it's pretty easy to do these days. There is so much information out there and if we regularly tune in to certain podcasts or programs, we can hear from First Nations leaders, their views on a whole range of issues.

One of my favorite podcasts is Speaking Out on ABC Radio National, facilitated by Professor Larissa Behrendt. And I came across it by accident, listening to the radio during wakeful hours in early morning when I should have been asleep, and now I tune in deliberately and regularly. I've learned so much from that weekly program, anything from interviews with political leaders, film makers and authors, to songwriters and political activists. And professor Behrendt is a beautiful interviewer. There's a fabulous recent two-part interview with Professor Gary Foley really interesting to hear and for me to be reminded of this history. So, I'd encourage the audience people to check it out.

A few of the authors of the articles I referred to in the blog give their ideas about how we can educate ourselves. And it doesn't all have to be serious academic research. We can learn so much through other media.

Tania McMahon

And I think this is such a great point because it feels like a very practical and meaningful way to take some responsibility and shift some of the burden of reconciliation onto our own shoulders as non indigenous people. And we're so, we're so lucky to be able to have access to information like this. You know, whether it's podcasts or videos and websites, info sheets. There's so much out there. It's information that that might have been difficult to access in the pre digital era. So it feels like our part now is to do that work. The learning. The understanding. To reflect on what our knowledge gaps are and and for us to do the work of filling them because that information is out there, if we if we just take the time to look for it.

I remember the the first time I watched the video on, there's a short animation on. It's only about four minutes or so. It's it's really not long, on intergenerational trauma from The Healing Foundation, narrated by Uncle Jack Charles, which can be found on the WellMob website. It had such a profound impact on me. It brought such deep understanding of the issue and I found so much value in all the other resources on WellMob since then.

So as we kind of come to a close in our in our conversation for now at least. While recognizing that the education and awareness needed to become a true ally is is lifelong, do you have some advice about the practical steps in the short term that non indigenous health professionals can take today to start their allyship journey?

Mim Weber

Sure. And we all have our preferred ways of learning and WellMob definitely can help with that. So you don't have to go trawling through the Internet to find some fantastic resources. And I'm glad that you mentioned that one that you did. There's that one, and then there's a couple of others. Again short animations.

So on WellMob we have written, audio and video resources on many of the topics around allyship. If you have a computer and you look at the training resources tab at the top of the toolbar, that's a good start. Have a look at the topics and click on the impact of colonisation, understanding social and emotional wellbeing and the best practice ideas they all have really fantastic resources on there to educate us as non indigenous workers.

But also click on the culture icon, which is the green tile on our landing page. And if you click on that, the music and dance topics you'll see has a wealth of delightful videos, podcasts, and music. There's also the our stories topic tile, and it has a wonderful list of podcasts. The ABC indigenous portal that lists books, websites and videos.

Learning can be fun as well as meet our obligations to be good citizens of this country. So just start in whatever way appeals to you. This should not be a dutiful slog, but rather an enlightening and engaging journey of lifelong learning.

Tania McMahon

Hmm. Beautifully put, Mim. And a really lovely note to end on. Thank you so much for for joining us and and having this conversation. It's been a really, really lovely and insightful chat.

Mim Weber

Thanks Tania.

Tania McMahon

Thank you for joining us. If you enjoyed this conversation, please remember to search for Digital Mental Health Musings on your favourite podcast platform and subscribe to catch new episodes. And to find out more about digital mental health or to access resources and digital mental health education head to emhprac.org.au

