

# viewpoint

## A nursing experience in Darwin

BY RASA KABAILA

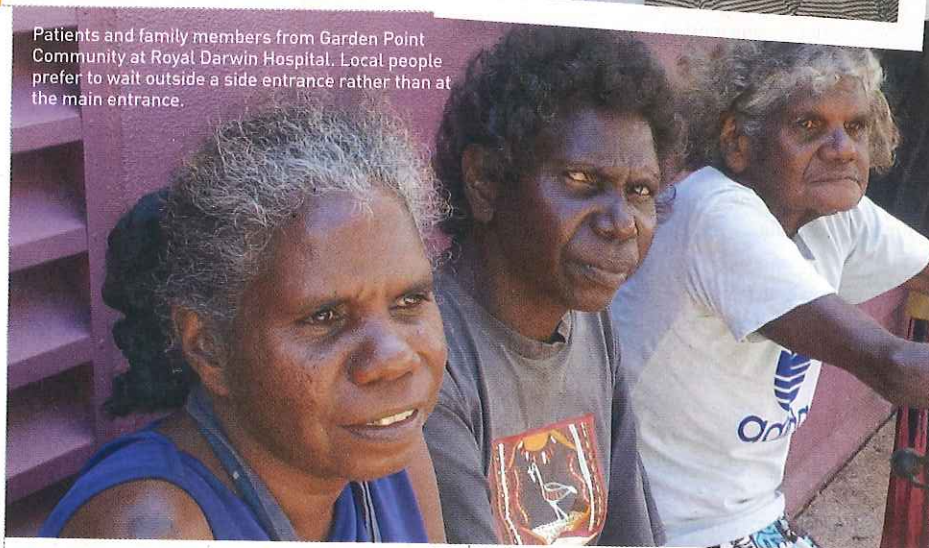
In June this year, I undertook a nursing placement at the Royal Darwin Hospital, Northern Territory.

Darwin's hospital is distinctive. Royal Darwin Hospital is Australia's National Critical Care and Trauma Response Centre, a large and extensive facility. It won international recognition for its role in the retrieval, treatment and transfer of the victims of the 2002 Bali bombings. Within 62 hours of the blasts, medical staff had resuscitated 61 patients. This included 20 intensive care patients and 48 patients evacuated to burns centres around Australia. It again treated more than 20 victims evacuated following the second Bali bombings in October 2005. In 2006 it treated victims evacuated from East Timor.

The biggest difference I found between working in Canberra and Darwin is the large Indigenous population. Being told about the health complications of Australia's Indigenous populations is one thing. Being faced with the reality is quite different. Cardiovascular disease, diabetes, kidney disease, tobacco use, cancer and respiratory disease are significantly higher in Indigenous than non-Indigenous Australians. There are also twice as many injuries amongst the Indigenous compared to non-Indigenous population. These are typically assault, self-harm, environmental injuries and transport accidents.

Many of my Indigenous patients talked about problems with alcohol. I saw Indigenous people living traditionally on the beaches and near the town, consuming large amounts of alcohol. Interestingly, the proportion of people who abstain from alcohol in Indigenous Australian populations is one in three; while in the non-Indigenous Australian population it is only one in eight. However, Indigenous Australians are shown to participate in more risky behaviour when consuming alcohol. This is seen by the number of alcohol-related disabilities and injuries

Patients and family members from Garden Point Community at Royal Darwin Hospital. Local people prefer to wait outside a side entrance rather than at the main entrance.



amongst the Indigenous Australian population at the hospital. I witnessed injuries in the form of neurological impairment as well as broken bones caused by injuries often caused by motor vehicle accidents.

In Darwin there are significant issues related to the social determinants of health. It is shown that Indigenous populations are healthier if they feel safe in the community, without discrimination, have enough money, are working, feel connected to family and friends and feel a connection to their land. However this has been compromised by a historical past that took people away from their families and traditional culture. This historically difficult past includes introduction of alcohol and artificial sugars and fats which are responsible for many health complications.

There are challenges for health care professionals. Some patients have complicated health diagnoses. One man who I cared for was deaf mute with a seizure disorder, affected by schizophrenia, drug and alcohol use. He was also a recent amputee due to diabetes. This patient was already a complex patient. However, by adding a cultural dimension to the formula, a bigger challenge arises. Approaching a culture like this was not completely unfamiliar to me as my father has documented much history of Indigenous Australians in NSW. As a child, I was able to go out on the road with dad to meet many interesting people who have gone through circumstances in their lives that I could not fathom. As a child, my dad had talked to me of

hardships that many Indigenous Australians had gone through. This caused people to no longer trust white people, let alone make eye contact, smile or appear friendly.

I found this to be particularly true when working at the Royal Darwin Hospital. Some patients would appear to warm to me and trust me quickly. One Indigenous woman spoke to me about how she had woken up from a lovely dream about the 'bush tucker' turtle that she missed eating so much while being in hospital. She showed me the beaded necklace made by her granddaughter. Some Indigenous patients had understandable difficulty in connecting with English-speaking hospital staff. Many people of Indigenous descent work as nurses and hospital staff at this facility which helps Indigenous patients connect with staff and trust them.

My time working at Royal Darwin Hospital taught me a lot about respecting and understanding other people. I would recommend and encourage this experience to other nurses, regardless of their field and interest. It is important to understand how the social determinants of health have affected and impacted descendants of Australia's First People.

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