"Our take is that if you’re an Aboriginal or Torres Strait Islander health professional, it’s not just a profession. Our ancestors called us into health and we have a very, very strong obligation to ensure we are taking care of our communities."

– Dr Mark Wenitong

We are survivors

By CHRISTINE HOWES

COMMUNICATING the risks of COVID-19 to remote communities across the Torres Strait and Cape York has been a challenge for health services such as Apunipima Cape York Health Council, Dr Mark Wenitong says.

But, the Kabi Kabi man, who is the public health advisor at Apunipima, said, with the help of a good communications team, they were doing their best and had received some good feedback.

"From the start of this we’ve wanted to get out some messages of hope, as well as all the scary virus information," Dr Wenitong said. "We were trying to also re-assure: ‘Don’t all worry. You know what? We have been through this before. We’ve been poisoned before, they’ve introduced diseases, we’ve been shot at, we’ve had our children stolen, we’ve had our land taken. We will get through this as well.’"

Mark said, although social media wasn’t always the best way in to communities, it was a work in progress.

"I’ve done some material that’s a bit more national as well, though that was pretty generic around how to keep your wellbeing while in lockdown," he said.

"One side is about trying to get out some clear socio-cultural messaging to our community, rather than just a data update. A lot of this is translating what is best practice in mainstream public health into practical solutions in remote communities and where there is less infrastructure for response. Social media isn’t always the best penetration in remote areas, so we’ve been doing some high rotation on community radio, and in Cape York there’s a number of communities we did door-to-door education, before there was a risk of doing this."

"Luckily we got in most of that community-based work well before, and it was mostly through community health workers, who are about 30% of our staff."

Mark said hitting the right note was a balancing act.

"We have a whole lot of ways of getting out more detailed messaging as well, mostly around social distancing, hand washing and restricted entry to communities – ‘don’t stuff up your own community’, kind of thing. Some of the harder ones have been around sorry business – how do you tell people this is not going to be forever?"

"I think in one of the messages we did it was as blunt as, ‘if everyone turns up to a funeral there might be three more funerals straight afterwards because of the contacts there’. We’ve got to be really careful about that, and I’ve had to go out on a limb sometimes regarding customary practice."

"Our ancestors constructed our customs and culture around us surviving, not just for the sake of culture, so they wouldn’t tell us to go and put our entire community at risk. They would say ‘hold off until it was safe’ – because that’s the way our survival works for us, but it’s so sensitive and hard to do because we care so much for our loved ones."

"But remembering, it’s not forever."

However, he said, the messages had to be strong.

"There has to be some strong public health messages, and it’s not going to be to everyone’s liking all the time," he said.

"We sweat on that, trying to get balance, but we’ve had generally good feedback. The national material has been easier, they’re more messages around hope, resilience and culture and I think that’s been well-received."

Mark said another consideration – which was not always considered to be ‘essential’ in terms of flying in and out of locked down communities – was mental health and wellness.

And, he said, supporting staff in communities had also been challenging.

"Our take is that if you’re an Aboriginal or Torres Strait Islander health professional, it’s not just a profession," he said.

"Our ancestors called us into health and we have a very, very strong obligation to ensure we are taking care of communities."

"These messages – which are more a call to arms kind of thing, such as ‘we’re not the ones who run away when there’s a pandemic on’ – were a bit hard to message because we knew people are worried and even health staff were a bit scared, particularly our frontline staff."

"That’s a hard gig, especially when you don’t have the Personal Protection Equipment (PPE) resources and the things that give you confidence you can manage a pandemic safely. You’re still expected to be first in line for your community and you can’t close up shop if you’re a health service."

Mark said community-based frontline staff deserved to be acknowledged.

"We directly addressed that in one of the videos," he said.

"We say, ‘Community-based Indigenous health professionals and health workers have been managing a bigger epidemic than this for the past 20 years around chronic disease, where we’ve lost many of our old people, and where our life expectancy isn’t even reaching the risk age for the rest of the population for this pandemic.’"

"We know these community-based healthcare workers understand that, and they’ve been dealing with these lack of resources and high mortality rates, including those of close relatives, for a long time."

"These are not the fly in fly out staff that often get the accolades, but the ones who do 24/7 and don’t get breaks away."

"They really are our heroes."