

## Synopsis of Howard Goldenberg's talk.

by Christine Unsworth

A heartfelt acknowledgment of the Ngangkari people, the traditional healers, the first owners of our land was the introduction by Dr Howard Goldenberg in his address to a meeting of the RCH Medical Alumni.



Doctor, author and philosopher Dr Goldenberg entitled his presentation:

### **A Stranger in My Own Land**

This title encapsulated Dr Goldenberg's life journey of discovery and growth, sharing his reflection of Australianness, possession and dispossession, and his experience of being an outsider, 'the stranger'. Born into a Jewish family, Dr Goldenberg was raised in the Riverina town of Leeton, where his father practised medicine from the family home; he enjoyed a relatively privileged life.

He recalled a day in 1952 when two bare footed aboriginal boys attended his school for just two days – never to return. As a young boy, Dr Goldenberg never questioned their absence; he envied their "unshod" freedom, not conceiving of their shame.

In 1991, the 'soft voice' of Reconciliation awoke a realisation in Dr Goldenberg that he was privileged by his possession and to an awareness of dispossession. He had shoes and no reason for such shame. Having lived half a century in comfort and safety, Dr Goldenberg then questioned how as a general practitioner he could help the first owners of our lands and their children in need.

Since then and over a long period Dr Goldenberg has spent several weeks each year as a relief doctor in remote Aboriginal communities, providing medical care in more than fifty regional clinics and hospitals. In so doing he "terrified himself clinically, enriched himself materially and refreshed himself spiritually".

Recounting instances from his rich experience, Dr Goldenberg shared many of the insights and lessons he has gained from the indigenous people:

"Respect for knowledge that lies beyond our categories of thinking – the magical, the secret, the sacred, and the mysterious"

"Respect for country; the realisation that we live in this country but we don't *know* country; we don't even realise that we don't know. Country is all. To not know country is – for the white feller – disabling; for the black feller it is profoundly alienating. Country is all"

The radically different ways that whitefellers and blackfellers see health. A blackfeller patient presenting to Dr Goldenberg would be clinically diagnosed and appropriate treatment provided. The patient is diagnosed, treated and cured of his clinical symptoms. The blackfeller knows the 'Bandaid' doctor has cured nothing. He has become ill by means of spiritual force and his cure must come through the same spiritual means.

Through observing these things, in Dr Goldenberg's words, "the whitefeller comes to appreciate his irrelevance. We doctors are not used to being irrelevant. In a survey of patients, a majority responded that their last conversation with their GP was the most important they'd had in three months. I don't think I am alone or unusual in finding my relevance affirming. That connection nourishes me. But over the course of fifteen years with Aboriginal people I blundered through language, seeking connection. My indigenous patient and I never truly met"

While suspecting correctly that language was a problem, difficulty arose when a patient appeared to understand his meaning and he hers, but in truth they did not come to a meeting of minds. A patient describes an experience in ordinary speech; Dr Goldenberg translates the symptom into some clinical or scientific construct, he devises a response in the jargon of his trade, and then translates it into his patient's tongue. That works well within a shared culture of thought. *Here the translator needs a translator.* That translator exists: she is the Aboriginal Health Worker. She straddles our two worlds of thought and brings us towards understanding. She takes the history, she checks and records vital signs, she shepherds her uncertain patient safely into the clinical encounter. She's invaluable, but regrettably she's scarce.

Dr Goldenberg spoke of the continuing decline in health status of Aboriginal people between 1970 and 1999 in all areas but one - perinatal mortality. "Mothers and babies were saved, however at great cultural cost. No more giving birth in country - expectant mothers were flown out to the nearest hospital where they'd give birth. Lives were saved by means of cultural violation. Imagine your pregnant grand daughter scooped into a plane at 38 weeks, flown to Croatia, where she knows not the land, the language, nor the people. She gives birth there. In the outback that sort of arbitrary, high-handed conduct is the price exacted to save lives."

Returning to the topic of language, Dr Goldberg noted "the gulfs of understanding that yawn between languages". Aboriginal Australia is not a single domain: 256 language groups exist. In his words, "I think I can make an unsurprising generalisation: the lower the English language proficiency of a person, the less the chance of real employment for that person. Now if a person lacks a real job she'll have a greater chance of poverty. Being poor should correlate with poorer health - or so I'd expect. However, I don't feel at all clear on the actual health correlates of language among Aboriginal people. On Elcho Island in northeast Arnhem Land, language is strong and cultural practice remains powerful despite attack from mainstream influences. Here the Menzies School has recorded much better health than elsewhere."

Describing many moving and tragic events he was faced with along his journey, Dr Goldenberg presented the Alumni members and guests with an insightful and thought provoking address. How much do we understand of the ways and wisdom of first owners of the land that we share - or are we too '*strangers in our own land*'?