

Relighting the fires:

A Yolŋu-led evaluation of Hope for Health programs

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Dhaṇalkuman gurtha

Glossary and abbreviations

<i>dhudi-dhawu</i>	the underlying story (<i>dhudi</i> = bottom, underneath, <i>dhawu</i> = story)
<i>Balanda</i>	nonYolŋu, white Australians
CDU	Charles Darwin University
CI	Chief Investigator
<i>ḍiltjiŋur</i>	in the bush
Ground Up	a group of researchers at CDU who work with Yolŋu researchers and elders and their methods to undertake research and evaluation under the authority of local elders.
<i>märipulu</i>	the clan of one's mother's mother's people
NHMRC	National Health and Medical Research Council
<i>ṇäṇḍipulu</i>	the clan of one's mother's people
<i>rom</i>	law, culture, proper ways of doing things
<i>wakupulu</i>	the clan of one's mother's mother's mother's people
<i>Yolŋu</i>	the various groups of North East Arnhem Land Aboriginal people

Yolŋu Intellectual Property

The Yolŋu researchers working with Ground Up have shared their intellectual property to frame the evaluation. Their contributions have been made clear in this report. The Intellectual Property belongs to them. If parts of this report are quoted, their IP must be acknowledged.

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Fig 1-2. Food preparation at Hope for Health retreat

Key insights for Yolŋu

- The Yolŋu researchers, Garngulkpuy, Gapany and Yungirrŋa under the guidance of Buthimaŋ, developed this evaluation, and led the Balanda researchers Emily, Michaela and Michael.
- Buthimaŋ reminded the research team of the days when each household at Galiwin'ku (and on homelands and diltjiŋur) had a fire outside where people gathered, told stories, and prepared and shared food. He had a vision of '*Relighting the Fires*', encouraging Yolŋu to return to the days when eating was done outside, in family groups, as they talked together about their lives, their connections, their places and their food.
- At the retreat, Hope for Health helped to reconnect with such past visions of healthy living as participants were reminded and told stories of the connections between Yolŋu and Balanda food, Yolŋu health, and Yolŋu environment.
- Garngulkpuy's story of '*Methodology for Yolŋu Research*' which she had prepared with Lāwurrpa at CDU in 2005 was presented as an important way to conduct, and understand, the Ground Up Hope for Health evaluation. The five steps in the methodology became the five sections of evaluation in this report.
- The five steps in the methodology are
 - *ḷundu-nhina* – properly interconnected in place
 - *rom-ḷakaranhamirri* – reminding each other of lawful ways of doing things
 - *rālmirriyanhamirri* – sharing the tasks to be done
 - *rāl-gāma* – bringing back what we must share
 - *rulaŋdhuna* – putting what we have produced in place for sharing
- Each of those steps reveals a *dhudj-dhāwu* – an underlying story – which helps Balanda understand why some aspects of the retreat and other Hope for Health activities were working well, and other aspects were less successful and could be changed in some way.
- Garngulkpuy made clear the important point: *Yolŋu ŋatha gurruṯumirr* – Yolŋu food has kin connections. Understanding Yolŋu food as gurruṯumirr keeps Yolŋu healthy and properly connected to their identities, their network of kinship, and to various places and their owners. When Hope for Health explained the history and contents of various Balanda foods, it helped Yolŋu understand how Balanda food can connect to a healthy Yolŋu diet which keeps Yolŋu rom strong.

Further insights for health researchers and practitioners

- The Yolŋu philosophy and practice of health involves a complex of healthy bodies, healthy networks of kin, healthy governance, vibrant language and ceremony, and healthy environment. Individual bodies can be focused on as part of these networks, but are not separate from these other relations constituting Yolŋu health.
- The Yolŋu researchers and participants were clear that the Ground Up evaluation should be undertaken using Yolŋu research methods and philosophies. They were also committed to working through an evaluation process that would support and improve ways Yolŋu and health researchers understand each other and work well together.
- The *dhudji-dhawu* – the story underlying Garngulkpuy and Lăwurrpa's description of a hunting expedition, revealed
 - 1) a Yolŋu story of traditional healthy nutrition,
 - 2) things to consider in planning and delivering a health program
 - 3) things to consider in conducting a ground-up evaluation, and
 - 4) a Yolŋu structure for our reporting.

This multiple level of interpretation came much more naturally to the Yolŋu researchers than to the Balanda researchers.

- When Balanda food was discussed at the retreat through stories of its origins and connections, it could be understood as more like Yolŋu food; that is, as something that made the body healthy not only through its nutritional value but through its ability to keep people knowledgeable, confident and safe. "Food has kinship."
- There are different indicators of good health, and these indicators all have their own methods, and roles to play. There was no dislocation between Yolŋu signs of good health (e.g. understanding what the breezes or blossoms were telling you about your diet, knowing where your food comes from and how it is culturally connected) and Balanda signs of good health (i.e. biometric measures). The former tells the story of good integrated health, the latter ensures the health of individual bodies.
- All the Yolŋu researchers and participants affirmed the value of working with Balanda health practitioners and researchers in growing healthy Yolŋu and communities.
- Some of the Yolŋu practices of health – e.g. hunting, sharing food and eating together as a family – were made very difficult by the research trial aspects of the retreat.
- Balanda tended to see Yolŋu health philosophies and practices as working together in partnership with Balanda health. Yolŋu, on the other hand, see Yolŋu health philosophy and practice as a fundamental grounding, with Balanda food and biomedical testing being an addition to its surface.

Further insights for Hope for Health

- The role and success of Hope for Health lies in its revitalising, strengthening and enhancing ancient Yolŋu practices of obtaining food and health from whatever source, and understanding and celebrating where they come from.
- The Yolŋu researchers and participants appreciate and encourage Hope for Health's efforts to integrate healthy bodies, healthy networks of kin, healthy governance, vibrant language and ceremony, and healthy environment. This work was seen as central to the value and benefit of the program.
- A helpful way for this integrated practice to happen and be made clear in the context of retreats is to use the model which the researchers and some participants referred to as *wakir'yun* – the staying out together in a particular place for the purpose of harvesting and enjoying its resources, while reminding each other of who and where we are, and under whose authority. *Wakir'yun* also signals the promise of something new, of going on an adventure and revisiting rich traditional hunting grounds.
- It was challenging to achieve the configurations of healthy Yolŋu kin relations and the practices of *wakir'yun*, in the context of a large-scale research trial. It was only insofar as these practices were both successfully integrated that some participants felt comfortable to attend and remain on the retreat.
- The integration of Yolŋu health philosophies and practices into the work of Hope for Health might necessitate flexibility around some of the retreat rules (e.g. around children, smoking, and attention to family responsibilities) while some other practices (e.g. fasting, massage) are seen as very helpful.
- Such flexibility has been appreciated in the context of ongoing post-retreat activities which are seen as consistent with Yolŋu ways of gathering together as family. In the future, it may prove more effective to monitor biomedical health indicators in the context of these ongoing activities, rather than at a retreat.
- Attendance at retreats and other activities is easiest and most likely when Yolŋu are able to feel comfortably 'in place' (i.e. in appropriate networks of kin-country), in the course of also attending the program and gathering new knowledge.
- Under the guidance of senior Yolŋu researchers, the Ground Up evaluation did not take a teleological approach; that is, it did not focus on cause and effect relations. Rather, Yolŋu stories and insights were mobilised to support better integration of Balanda health practices into Yolŋu relations of healthy people-places in the running of the Hope for Health program, and in Yolŋu life.
- The engagement of senior Yolŋu authority in both the reference group and ongoing evaluation would provide useful 'both-ways' means for continually revisiting and re-learning and reaffirming health knowledges as well as health behaviours in the ongoing life of Galiwin'ku. Expanding this group to include more men, and paid Yolŋu positions, was also seen as valuable.



Fig 3-4. Group meeting and education sessions. Hope for Health retreat.

Executive Summary

Hope for Health is a preventative health program run on Galiwin'ku, Elcho Island in North-East Arnhem Land. It has a local Yolŋu steering committee and is part of the Why Warriors Org Ltd. Amongst its many activities, *Hope for Health* has been conducting health retreats for Yolŋu. These 12-day retreats and associated follow-up activities have been held regularly since 2015. As part of a process of growing the *Hope for Health* program, the Yolŋu steering committee invited biomedical researchers to gather evidence of the effectiveness of the *Hope for Health* program.

Researchers from the University of Melbourne received funding from the NHMRC for the project *Evaluation of a community-led nutrition and lifestyle program for weight loss and metabolic health: a randomised controlled trial*. Although a randomised control trial was planned, this methodology did not prove feasible in this context. The plan was therefore adjusted and a single arm pre-post intervention study was conducted. This study focussed on the potential health gains by participants in *Hope for Health* programs, measured through indicators such as weight, blood glucose levels, blood pressure and other key clinical markers.

Alongside the pre-post intervention study, Ground Up researchers from CDU were invited to work with the steering committee and Yolŋu researchers to undertake a Yolŋu evaluation of the *Hope for Health* retreat and associated activities. Ground up works with Yolŋu (and other Aboriginal) researchers, under their elders' authority to undertake research and evaluation which takes seriously local sovereignty, governance, concepts and knowledge practices.

The first authors of this report all have long term research experience, and involvement with the *Hope for Health* program. Together with CDU Ground Up researchers they interviewed elders, *Hope for Health* program staff members and participants and worked to produce this report. They first articulated their methodology.

Working through Yolŋu knowledge practice, this methodology invokes a collective hunting expedition as a metaphor for good knowledge work, and this metaphor informed the methods of the evaluation, its interpretation and its presentation in this report. Through this Ground Up evaluation, the hunting expedition has become a metaphor for the ongoing guided emergence of healthy people-places under Yolŋu authority and involving intercultural collaboration. It is one of a significant number of vibrant metaphors underpinning Yolŋu research, education and evaluation practices which have been shared by Yolŋu philosophers over many years in different places for different purposes.

- The first step in the method for hunting, for conducting a health retreat, and for undertaking an evaluation is to ensure that everyone involved (in the hunting or the retreat or the evaluation) is networked together in the right way – according to ancestral imperatives. This involves being sure you know who and where you are and why you are together. Non-Yolŋu health practitioners, researchers and evaluators must also be part of the arrangements, so careful networks of respect and authority need to be identified and developed. The Yolŋu participants in the evaluation revealed the ways in which some aspects of *Hope for Health* contributed significantly to the sense of being properly interconnected in place, and other aspects which could be changed or improved.
- The second step involves everyone agreeing upon the correct and appropriate systems of traditional law and authority which pertain to healthy living, productive arrangements of Balanda health work, and healthy evaluation. Once again, biomedical concepts and biometric testing were seen as productive contributors to evaluating *Hope for Health*, when they worked in ways in which Yolŋu understandings and practices could be enhanced and made visible. This often happened, but there

were aspects of the research which inhibited a healthy adherence to traditional networks and practices of care and concern. In particular the randomised nature of the participant selection confounded the usual Yolŋu reliance on their kin networks which would have contributed significantly to agreement and coherence.

- The third step entails being clear to everyone what are the particular strengths and roles of each participant, and how they can be allocated for a productive result. In this case, the Balanda roles and their technologies and practices need careful integration into the life of the retreat and ongoing support. There was good evidence that this was happily achieved for some participants, but where people were unsure of the biomedical research aspects, or the unfamiliar Balanda volunteers and researchers, and their unfamiliar roles, participation dropped significantly.
- The contribution of every participant's experience and knowledge is critical to the success of the hunting expedition, or the health retreat or its evaluation. This bringing together what needs to be shared – the fourth step in the process – mostly was seen to work well for the Yolŋu who completed the retreat. The particular concepts and stories contributed by Yolŋu to this evaluation were seen as part of this bringing back to the deliberation of significant insights and implicit recommendations to the future work of Hope for Health.
- The final step is to do with the distribution and sharing of what has been produced for the benefit of the whole community – the networks of kin in place, the Hope for Health steering committee, staff and volunteers as well as the health researchers and practitioners. When outcomes are presented to the right people in the right way, everyone benefits, and everyone has a chance to thank and congratulate the contributors for the excellent work they have done – whether it be biometric testing, cooking nutritious food, or telling stories of traditional hunting for example. For those families participating, the ongoing hunting and cooking programs post-retreat were valued as opportunities for such encouragement and congratulatory work.

For the Yolŋu researchers, this final step is always ongoing. In analysing how a program such as Hope for Health might connect with ancestral ways of being and knowing, the lead researcher discussed the kinship of food. All food, including food from the store, has a story and connections. A Yolŋu consciousness of where food comes from, how it relates to ancestral practices, stories, songs and journeys, which clan group it belongs to, how it should be prepared and with whom it should be shared is critical to a program of exercise and nutrition which conforms to Yolŋu rules and practices. Those who are working to integrate introduced (nontraditional) foods into a healthy Yolŋu diet and lifestyle should remember to explore their kinship collaboratively as part of their program.

The ongoing aspects of Hope for Health programs are appreciated and seen as specifically supporting right ways of coming together in the context of contemporary community life where most Yolŋu in Galiwin'ku purchase their food from the two ALPA shops or two takeaway stores. Given this everyday reality, it is important to remember means of connecting as kin coming together to share food and stories in the right place and speaking the right languages.

A senior elder and father of the first author of this report conceptualized the focus of the evaluation as leading towards 'relighting the fires', that is returning to the ancestral and (until recently) contemporary practices of extended family groups preparing and sharing food as well as culture (ancestral songs, stories, networks of ceremonial roles and custodianship) around the fire every evening. Through this, he articulated a vision for Hope for Health which would guide their activities directed towards healthy nutrition and lifestyle, in ways which were both practical and legitimate from an ancestral point of view. When the

researchers took drafts of the evaluation back to the participants and steering committee, they particularly endorsed the notion of ‘relighting the fires’ – and gave a Yolŋu title for this report: ‘Dhaŋalkuman gurtha’.

Background

Hope for Health aims to facilitate lifestyle change and chronic disease prevention through health retreats and in-community programs providing support in Galiwin’ku (Hope for Health, n.d.). Hope for Health staff include Yolŋu and Balanda health coaches, with the Yolŋu staff bringing in-depth understanding of the local cultural and community context and the Balanda staff bringing knowledge and skills from relevant professional backgrounds (e.g. dietetics). Balanda volunteers recruited specifically to support this health retreat included remedial massage therapists, osteopaths, naturopaths, pilates and yoga instructors, chefs and kitchen hands, nurses and doctors. Most of the Hope for Health Yolŋu steering committee members were senior Yolŋu women who have attended previous health retreats and have a long history with the program.

In August 2022, the Hope for Health team ran two health retreats at a homeland on Elcho Island. In accordance with Yolŋu protocols, the name of this homeland cannot be used in this report due to a recent death in the community. The homeland’s usual name has therefore been replaced with its alternative name: Gaṇapurra. Each retreat lasted for twelve days. Participants camped at Gaṇapurra which is about an hours drive from Galiwin’ku township, on top of a cliff overlooking the Arafura Sea. Gaṇapurra has electricity from a generator but no phone reception. The owners and managers of this homeland area were involved in discussions about the location of the retreat. This location provided some separation from the normal situations and stresses of everyday community life, and was intended to provide an opportunity to learn about and establish, or re-establish, healthy habits and routines. Appendix 1 provides an outline of the structure of a typical retreat day.

Food and nutrition is a focus of the Hope for Health program. During retreat, participants had all meals prepared for them by a team of volunteers and all food intake was measured and recorded. Some participants helped with preparation of some meals. Every morning tests were taken, including blood pressure, cholesterol, blood sugar level, and waist measurement. Daily activities included exercises, hunting, massage, and a daily education session and discussion about Yolŋu and Balanda understandings of food and disease. See Appendix 1 for further information.

This Ground Up evaluation was undertaken as one part of a larger study led by Melbourne University. The overall objective of this study was to evaluate the impact of the 4 month nutrition and lifestyle program being run by Hope for Health. This included an initial 12 day retreat followed by an ongoing program of hunting trips, cooking sessions, personal health coaching, and family-based discussion around nutrition and chronic disease. The study gathered together a variety of methods and research teams, with a significant component of the work focussing on biomedical methods for measuring the impact and effects of the retreat (e.g. through a range of health indicators). The intention of this work was to provide the evidence needed to confirm the potential and value of scaling up the Hope for Health program, as well as potential inclusion of aspects of Hope for Health in mainstream health services.

The Ground Up research team from Charles Darwin University was asked to help with an evaluation to be conducted alongside the biomedical evaluation, supporting processes for Yolŋu steering committee members, staff and participants to be able to share experiences, insights and knowledges generated in the context of the program in ways which are consistent with established Yolŋu knowledge and governance practices, so as to provide guidance to the ongoing conduct and growth of Hope for Health. Ground Up

always engages local researchers to work with community elders to guide the methods and criteria of the evaluation. In this case, the chief investigator Garngulkpuy, working with Gapany and Yungirrnga, led the research team to develop methods and interpretations. All three of these senior women have been recognised as elders and experienced researchers for many years. They worked in collaboration with three CDU-based researchers, Michael Christie, Michaela Spencer and Emily Armstrong who all have long-term experience and established relationships in Galiwin'ku.

What we did

As part of our project planning, Emily flew from Darwin to Galiwin'ku in May 2022 to meet with the Yolŋu researchers and talk with the steering committee about how to conduct this Ground Up evaluation. The research team also talked with other senior people who were not available to be involved in our evaluation but who guided us around working under Yolŋu authority and involving the right people.

As a starting point, Garngulkpuy, Yungirrnga and Buthimanj (Garngulkpuy's Father – a Senior Wangurri man who also used to run the old Galiwin'ku farm and garden) sat together in Garngulkpuy's yard to discuss the purposes of the evaluation, what we hoped to find out and the methods we would use. They talked about all stages of the research process, which we will discuss further below.

Following this visit, we kept in touch over the telephone until August 2022 when Emily returned to Galiwin'ku and the team began data collection under the guidance of the two lead authors Garngulkpuy and Gapany (Yungirrnga was unwell so was not able to participate at this stage). Garngulkpuy, Gapany and Emily interviewed participants and staff before, during and after the retreats, always using the participants' preferred languages for in-depth discussions that were retained as video or audio recordings. The researchers visited the retreat at Ganapurra homeland, talked to people back at Galiwin'ku township who hadn't attended, made audio and video recordings and field notes, and talked to Michaela and Michael in Darwin by Zoom.

Thirty-seven people participated in the ground-up evaluation of the Hope for Health retreat, including: 5 senior community members; 19 Yolŋu who were enrolled as participants in Hope for Health programs and research; 5 Hope for Health staff (3 Balanda, 2 Yolŋu); and 3 Balanda Hope for Health volunteers. In August, before the retreats, we talked with ten enrolled participants, only two of whom attended retreats. Thirteen enrolled participants attended the Hope for Health retreats and we spoke with ten of them. We spoke to eight participants during the August retreats, and the other two before and after retreat. In November 2022, three months after the retreats, we spoke with seven enrolled participants (five of whom had attended retreat, two who had not) and four of their close family members. Family members were included at the request of participants because these people were closely involved in the participants health journeys.

We conducted our interviews in places that were comfortable and convenient for Yolŋu researchers and participants to talk in-depth. Before and after retreats, we met with participants outside their houses, usually sitting on a mat under a tree or on the verandah. During the retreat, we sat and talked with participants in quiet, private and shady areas nearby to the retreat activities, for example on the cliff-top overlooking the ocean or in the weaving and painting area. We also attended a Hope for Health cooking class and talked with participants there as a group, sitting on a verandah outside the kitchen. For Balanda staff we met inside at their house or office. Balanda volunteers participated in writing via email. See Appendix 2 for further information on the discussions that were recorded as part of the Ground Up evaluation.

As we started thinking through how we would make useful sense of the data, Garngulkpuy reminded us of the 'Methodology for Yolŋu Research', a research paper she and Elaine Lăwurrpa had written at CDU many

years earlier. This methodology points to five key steps, or parts, of a Yolŋu research process using the metaphor of hunting. These five steps helped us to focus upon very important processes to which we need to pay attention, and which the non-Yolŋu researchers (and others who we hope may benefit from this report) may have overlooked or undervalued, or valued without understanding why some aspects worked so well.

These steps, pointed to by Garngulkpuy, guided an analysis of the stories shared by participants in the Ground Up research. When an initial draft had been prepared, Emily returned to Galiwin'ku in November 2022 to seek feedback from the Yolŋu CIs and flesh out some of the emerging insights. She worked with Garngulkpuy and Yungirra, sharing the report with them, and working together to make changes so as to best work with the key Yolŋu concepts. The research team spoke with a number of the retreat participants, and people who were enrolled in the Hope for Health program but who had not made it to the retreat. They also spoke with Balanda staff members. The Ground Up researchers sought feedback on the draft and also conducted further discussions to understand people's experiences of the program post-retreat.

Once this feedback was incorporated into the report, the Yolŋu CIs Garngulkpuy and Gapany again reviewed the report, making final corrections and agreeing they were happy for the report to be shared with others. Even at this point Gapany continued to share stories of the significance of the Hope for Health program, and and the research work 'sharing the knowledge of what we have gone through'. She spoke about searching for *guku* (honey/sugarbag) and how for Yolŋu there are two kinds of *guku*, that are Yirritja and Dhuwa and which have particular origin stories, and ways of being collected and shared. Today, collecting this *guku* is part of Yolŋu remembering and living a healthy Yolŋu life, at the same time as many Yolŋu are eating food from the shop. Its important to have Balanda knowledge, to help with the effects of this Balanda food, while also being clear that this knowledge doesn't cover everything. Eating *guku* according to traditional practices won't give you diabetes, but other food will. So learning how to live with both these foods in a Yolŋu community and environments is important, as is gradually growing the sensibilities that enable respectful learning and going on together.

In late July, Emily returned to Galiwin'ku and worked with the three Yolŋu CIs to share the draft report with the participants and the steering committee. They endorsed the report, and made further suggestions which are noted throughout the report and in Appendix 1.

We hope this report will provide a lens – from a Yolŋu elders' point of view – through which all interested people can reflect upon what worked well and why, and what could be done differently next time.

In the following sections, we first discuss a methodology for Yolŋu research and then we turn to details of the evaluation which we organise through their original categories. In the final section, we provide tentative answers to some of the key questions from the original research protocol from the agreement with the University of Melbourne and the NHMRC. This report is for Yolŋu, for Hope for Health staff, and for researchers.

Methodology for Yolŋu research

In 2004, Garngulkpuy working with another Yolŋu colleague Lāwurrpa, undertook some research for the Cooperative Research Centre for Aboriginal and Tropical Health aimed at understanding and assisting Yolŋu people sleeping under the stars (also known as ‘longgrassing’) in Darwin, on Larrakia country. Michael helped them with the report, called ‘Yolŋu Longgrassers on Larrakia Land’ (Garngulkpuy & Lawurrpa 2004). The methods they had used had surprised some health researchers who struggled to see the ‘science’ in their research practice. So the following year, Garngulkpuy and Lāwurrpa used a hunting story to make clear the Yolŋu way of undertaking research. This showed the way they had been working in the Longgrassers project, and also offered some guidance as to how other Yolŋu researchers might understand themselves as working in the future. It was published as ‘Methodology for Yolŋu Research’ (Garngulkpuy & Lawurrpa 2005). In 2022 Garngulkpuy again shared this story as we thought through the methods for the evaluation. This is, in a sense, the *dhuḍi-dhāwu* (the underlying story) of our methods. This *dhuḍi-dhāwu* is also strongly connected to our findings.

Here is an outline of the story: The ancient everyday Yolŋu practice of gathering food is not just a random or casual activity wandering along the beach or through the bush hoping to get lucky. It needs to be done knowingly, strategically, collaboratively and respectfully. Hunting *tells* us who we are, and *makes* us who we are. Understanding the depth and complexity of hunting will help us do better research, and help us to better understand Yolŋu health.

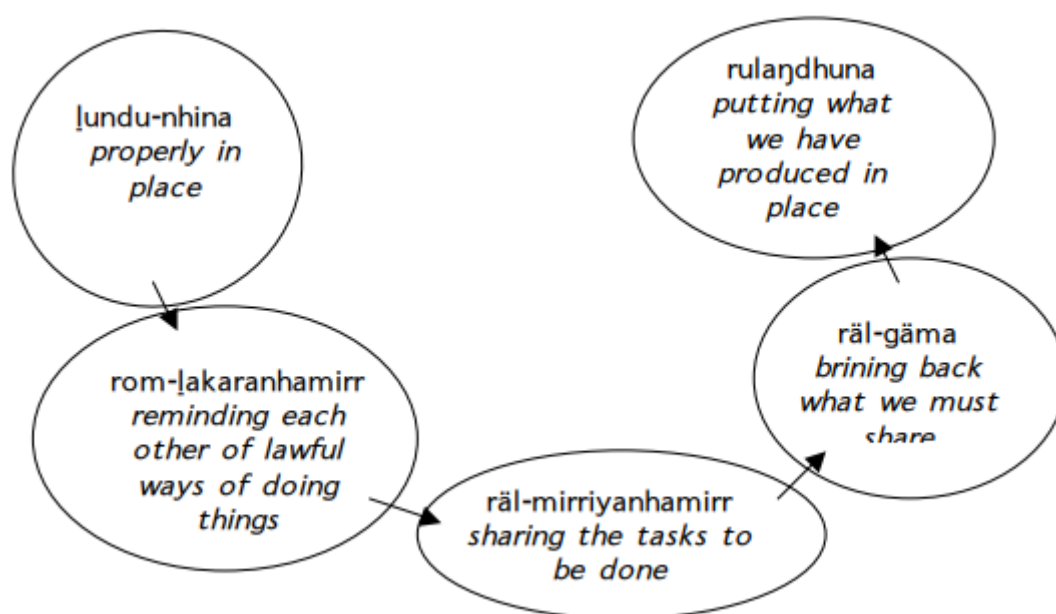


Fig 5. The five steps in a methodology for Yolŋu research (Garngulkpuy & Lawurrpa 2005, p1)

There are five steps in the methodology. They need to be attended to in order. Each stage of the method depends upon the success of the previous stage. In academic terms, we could say that the first four steps put in place the philosophical-social-political commitments which are required for the final step to be consistent with credible authentic Yolŋu knowledge work.

The first step is called *lundu-nhina*. The authors labelled that ‘properly in place’. In the story there are two clan groups, Warramiri mob, and Wangurri mob, sitting in the shade. They are named people, in a named place, sitting under their named shelter. Each clan group has its own name for its own shade. Being the right

people in the right place at the right time is critically important for Yolŋu research. They know what they are doing. When people are not in the right place, as in Darwin for example, special measures may be required. Hence the importance of the original report (Garngulkpuy & Lăwurrpa 2004) carrying the title: 'Yolŋu longgrassers on Larrakia Land' (emphasis added).

The second step was named *rom-lakaranhamirri*. This is a process of reminding each other of where we are, how we came to be here, whose authority are we working under, and asking what are our rights and responsibilities for these activities in this place? It involves careful listening to each other's ideas. It often involves the clever use of names and stories to remind everyone of their ancestral connections and responsibilities. Everything we see has its history and connections. *Rom-lakaranhamirri* involves agreeing together upon the *dhudi-dhawu*.

It's only after those two important steps are in place that the activity planning starts: *rălmirriyanhamirri* – 'sharing the tasks to be done'. There's quite a lot to be agreed upon if we are to make the most of the resources which are on offer. Men and women have different but sometimes overlapping roles and skills (*răl*), the beach and the bush have different and sometimes overlapping things to offer. We need to collect a balance of carbohydrate (*ŋatha*) and protein (*gonyil*) and maybe honey if we're lucky, which men and women collect together. They come to an agreement as to who will go where, seeking what, and off they all go to the various named hunting areas which have been agreed upon.

The next named step is *răl-găma* 'bringing back what we must share'. Everyone gathers back together 'in that same shade, and they will share, giving across to each other, dividing up the food, whatever they have gathered' (Garngulkpuy & Lăwurrpa 2005, p2). People are cooking and eating, waiting for everyone to come back, telling stories of where they have been and making plans for what's next.

The final step is *rulaŋdhuna*, 'putting what we have produced in place for sharing'. In this step, 'they will split up and go in different directions, returning home and back there, give food to all their other kin. And they will taste it carefully. Where did this come from? From over that way. ... Yes! Beloved little brother, daughter, sister. They will call each other by the right kin terms there congratulating each other for their hunting skills, telling them they are good shots. They show affection with those words' (ibid. p3).

The methodology allows us to see a Yolŋu vision of how particular aspects of the retreat and its followup are consistent with traditional understandings of health and diet. The methodology also allows us to see where changes could be made to bring Hope for Health programs into closer alignment with Yolŋu understandings of health, and means for constituting healthy Yolŋu people-places.

Our evaluation

Now we take up the task of making clear our Ground Up evaluation guided by Garngulkpuy, Gapany and Yungirŋja. Each step in the sequence depends upon the previous one being settled and agreed. It was important for the team to find ways to keep centering the authority and leadership of the Yolŋu researchers, and the significance of interconnectedness. We were reminded of these things constantly throughout data collection and analysis and the *Methodology for Yolŋu research* (2005) helped us to organise what we found in Yolŋu terms.



Fig 5. Garngulkpuy, Emily and Yungirrnga, Ground Up research team members



Fig 6. Gapany and Garngulkpuy, Ground Up research team members

LUNDU-NHINA: Properly interconnected in place.

The word lundu is often used to refer to the dreaming track of an ancestor. It is the aspect of the world which is inseparable from the ancestral being. Nhina is to sit or stay. Lundhu-nhina means sitting together in the right relation to each other and to the place and its network of connections to peoples, places, ancestral songs and foods.

Key evaluation question:

How comfortably in place were relevant networks of interconnections as the retreat was planned and undertaken; and as post-retreat support and mentoring unfolded?

Key Points:

1. The Hope for Health story fits comfortably within existing foundations of Yolŋu health and wellbeing.
2. Some of the challenges of the retreat undermined interconnectedness.
3. The randomized nature of the participant selection undermined the possibility of *lundu-nhina*.
4. Being properly in place in the traditional sense is almost impossible for Yolŋu at Galiwin'ku these days.

1. The Hope for Health story fits comfortably within existing foundations of Yolŋu health and wellbeing.

Much of the analysis of the Ground Up research materials and stories shared by participants happened when Emily and Garngulkpuy met together in place – particularly sitting together and enjoying the breeze on Garngulkpuy's elevated verandah or on the cliff overlooking the ocean at Ganapurra.



Fig 7-8. Research meetings at Galiwin'ku and Ganapurra

Emily and Garngulkpuy worked on a venn diagram. Emily's original idea involved the overlapping health systems – biomedical, Yolŋu, and the complementary or alternative health approaches practised by the volunteers. But in the course of the discussion with Garngulkpuy, Yolŋu health was moved to represent the

already existing foundation of all the activity and the three circles in the venn diagram became Balanda Food, Biomedical health, and complementary health treatments.

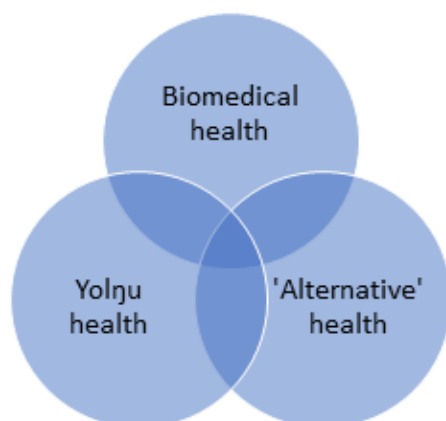


Fig 9. Original suggestion for the Venn diagram

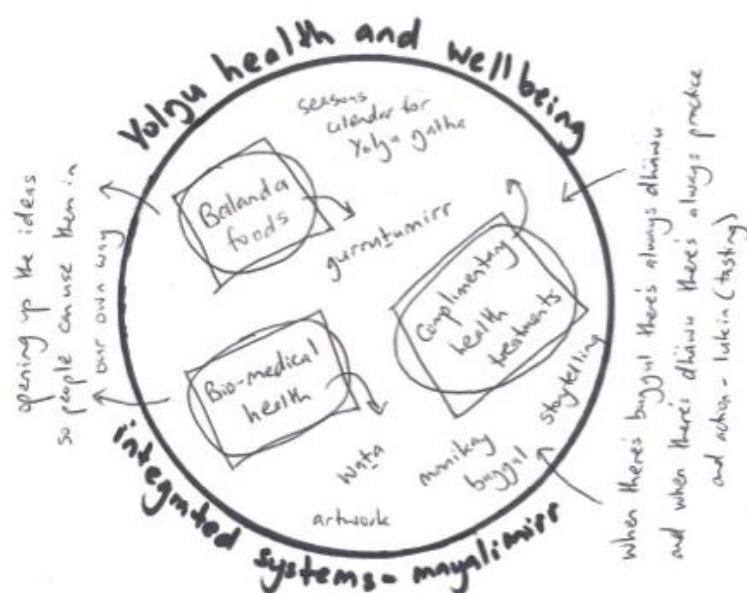


Fig 10. Revised diagram of Yolŋu health and wellbeing

The venn diagram was generated as a working representation of the differing components of the Hope for Health program, and the retreat. Sharing this image led to a reworked presentation of these relations. In the hand-drawn diagram below, the *dhugi-dhäwu* has been set in place: 'Yolŋu health and wellbeing integrated systems – *mayali'mirr* (full of meaning), Where there's *bungul* (ceremonial practices, singing, dancing) there's always *dhäwu* (storytelling) and where there's *dhäwu*, there's always practice and action (*lukin*) – tasting. The words inside the circle are 'opening up the ideas so people can use them in our own way', seasons, calendar for Yolŋu *gatha* (food), *gurruŋumirr* (having kinship) *wata* (breezes which tell us where and who we are), *manikay* (song), *bungul* (ceremony), and storytelling.

This became a useful tool for conversations with participants about their Hope for Health experience. Here is an example.

Participant 5 was interviewed over Zoom (recorded video call) on day 5 of retreat 2 (21/8/22)

Garngulkpuy and Emily watched the video back for analysis (on Garngulkpuy's verandah, 22/8/22)

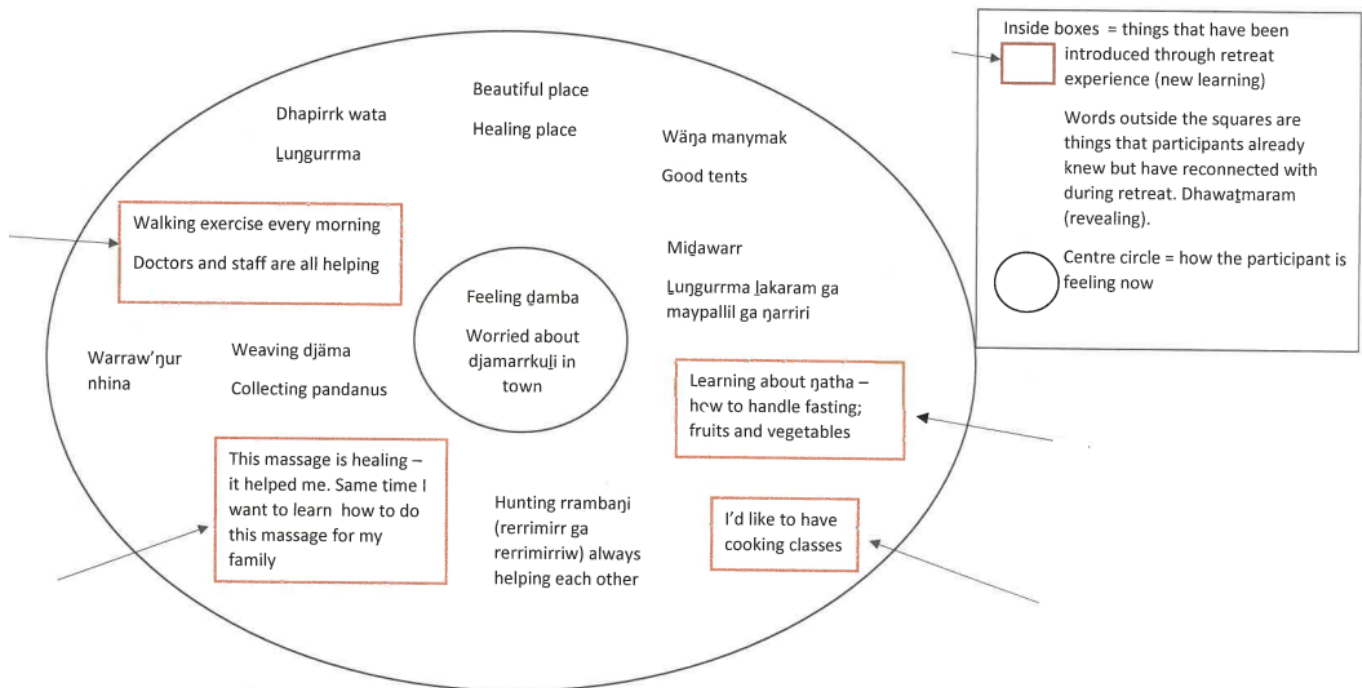


Fig 11. Emerging tool for conversation with participants

The dilemma between feeling well (*damba*) on the retreat, and worrying about children (*djamarrkuḷi*) at home is at the centre of the diagram. The *dhudi-dhawu* of the retreat – the beautiful, healing place, the fresh breeze (*dhampirrk wata*) specifically named for its direction and connection (*lungurrma*) and the seasonal wind telling Yolṇu which shellfish and fish are available (*Miḍawarr lungurrma ḷakarama ga maypallil ga ṇarri*), the sick and the well hunting together (*rrambanji rerrimirr ga rerrimiriw*) always helping each other, sitting in the particular shade (*warraw'ṇur ga nhina*) and doing (*djäma*) weaving and collecting pandanus (for weaving) – all in place. In the squares we see the work of Hope for Health comfortably in place – helping with exercise, doing massage, understanding nutrition and participants wanting to learn more about cooking. We have also developed this into a tool available for ongoing use, potentially within the program or in relation to future planning (see Appendix 3, p.40).

2. Some of the challenges of the retreat undermined the being-networked-together-in-place (*ḷundu-nhina*).

There were challenges for participants being-networked-together-in-place. While the Balanda Hope for Health staff had been working in the community throughout 2022 and had some experience learning about Yolṇu culture and connection to place, they were also supporting many volunteers who did not have this understanding of the complex contexts they were visiting. These volunteers had arrived in this place only a day or two before the retreat began and they would only be staying two weeks.

Being in Gaṇapurra, and *staying* in Gaṇapurra throughout the retreat, was a big focus and challenge for participants and staff. Staff considered this important for the participant experience but it was difficult for participants who also have many responsibilities in town (“I was busy at home because I have 8 children”), and felt unfamiliar with the format (“there were all these Balanda around us and we were in the middle”).

A previous retreat had been held at Riyala in the Darwin rural area and far away from Galiwin'ku, which some looked back on fondly as allowing people to stick together more. "They invented it at Riyala then dhatar'marajal (shifted) it. Here's it's hard to get people together."

There was also disappointment that the Yolŋu participants had to stay in place throughout the retreat but Balanda volunteers and staff did not. Balanda travelled in and out of town during retreat for work tasks or breaks. This reduced interconnectedness and the feeling of being networked together in place. Those Balanda also had access to the things the Yolŋu were missing from town - family connection, news from others, phone reception, shops, flowing water, cigarettes etc.

"Balanda workers were going in and out, in and out, and that was distracting. We were not all staying together."

"Something important about sitting quietly together as a group listening, too much toing and froing."

"Being unable to contact your family, especially people who depend on you like children do, is very tough and different to what we are used to."

In discussing these points, Gapany also explained that young people are often these day are 'growing up in their own world' and that experiences of being with family and senior people, living and learning properly in place is important for growing up healthy Yolŋu and healthy community. And that supporting these experiences for 12-20 year olds is an important task aligned with the focus of Hope for Health.

Participants also pointed out that in previous retreats, the team who had organised and conducted the retreat were already familiar to the participants, and they demonstrated a network of kin which comfortably mirrored the Yolŋu networks.

"They got to know the people first, then how do we work with people through the program? They understand the Yolŋu ngayaju (deep feelings)."

For this retreat, Balanda Hope for Health staff had been on the island for 6 months, but new Balanda volunteers had flown in to help. This seemed, for some people, to compromise the possibility of *lundu-nhina*.

With the retreat at Ganapurra, some distance from family at Galiwin'ku township, many participants felt a dilemma balancing their aspirations and commitments. As one person put it:

"My name was at the retreat, but my body was back at Galiwin'ku."

The disruption that leaving town would cause prevented some from getting into the Troopy at the last minute – for example concerns about who will look after the children and the old people at home, as well as who will support the participants on retreat when they are so used to a supportive family back home. The constant presence of support staff (who were mostly unknown to the Yolŋu participants, and often outnumbered them) also raised concerns about personal space: *"I don't like people watching me"*.

The Yolŋu CIs also suggested that some might be making excuses because they were anxious about the need to stop smoking while they were on retreat (*"thinking maybe I can go or maybe not or maybe I can or maybe I can stay here and keep smoking"*). Participants suggested that further supports may be helpful for people anxious about not being able to smoke on retreat.

"Maybe help the smokers – people that smoke cigarettes, they require back up for their cravings. ... They didn't come [on retreat]. Like, the chewing gum or whatever you know – the quit smoking aid."

It was too hard for people that smoke ... I could see how the smokers were finding it really hard because there were no cigarettes. ... People had to find a really, really good excuse to come back [to town to smoke], I reckon. Because I was the only one out of everybody that didn't come back to town. And I know how it feels when you start to crave – I've been smoking from when I was 16 or 17. I'm telling the truth."

There is a tension between feeling properly in place with tobacco, and Garngulkpuy's assertion the tobacco 'causes cultural breakdowns, humbug and more stress' (as also she added, does the fast food takeaway shop and money-mindedness). Either way, neither being at Galiwin'ku with all its troubles, or being at the retreat without the family, was 'being properly in place'. Many people, torn between the two options finally decided to stay at home.

3. The randomized nature of the participant selection undermined the possibility of *lundu-nhina*.

The biometric research was funded as a randomized control trial so the group of Yolŋu participants was not the extended family that one might expect to see on a hunting expedition, but approximated a random population sample. For each participant leaving the family at home meant moving away from kin for a while, and also meant being on retreat with other Yolŋu who they don't normally spend as much time with. For example, one of the volunteers thought she saw Yolŋu on the retreat making friends with each other for the first time, but they probably knew who each other were and how they were related, but because of different networks of kinship responsibility in the large township of Galiwin'ku, seldom found themselves interacting with each other in the daily unfolding of community and ceremonial life.

These processes are different from the *rom* of Yolŋu *wakir'yun* where extended families do health, nutrition and wellbeing camping out together for a few days at a particular place to enjoy the resources that place makes available.

"Yolŋu say 'What is a retreat? Is it just wakir'yun? Maybe change it."

As Garngulkpuy explained:

"Wakir'yun is not to just play games with. You have to know why you are in the place and how you are connected to it. You know the seasons and learn from it and practice it."

When extended family groups are the focus of Hope for Health's work, the interconnectedness of people and place is enhanced. All Yolŋu in Galiwin'ku are already related and connected through kinship, and Hope for Health can support people to work together and be healthy through these relationships.

"It would be better if Hope for Health could plan ahead for safe ways to include sick people, rather than saying they can't go".

Those that did have the confidence to attend the retreats seemed to find ways in which they may maintain Yolŋu ways of being properly in place with each other, whilst also meeting the requirements of the trial. This left members of the steering committee wondering how they could support other families, indeed all families in Galiwin'ku, to participate more in Hope for Health programs.



Fig 9. Hope for Health retreat, Ganapurra

"Participants who did stay at [the homeland] throughout the retreats are related through kinship to that place – Ganambarr family, Naymil, Djambarrpuyngu – and yapa'manydji"

"I didn't go to the first retreat, but I did go to the second. [The people there] were all my family. Myself, [my daughter] and [my sister]. They are all Gulanhu family."

"Some people who are connected to the land told me that they came back to Galiwin'ku because something else told them to leave. Something was missing – maybe cigarettes, maybe something else."

4. Being properly in place in the traditional sense is almost impossible for Yolŋu at Galiwin'ku these days.

Being properly in place in the traditional sense is seldom possible for Yolŋu anymore because they are living mostly in townships on other people's country and are not associating every day with traditional food in traditional contexts. This to Buthimanj, our most senior adviser, is the nub of the problem of Yolŋu health and nutrition. As we prepared for the evaluation, he told his daughter Garngulkpuy, and Emily and Yungirra about the slow changes he has witnessed at Elcho over many years. Up until a few years ago, every house had a fire outside where people sat together, cooked, ate, and told stories.

He suggested we could think of the role of Hope for Health in the community as one of helping Yolŋu with 'Relighting the Fires'. Fires keep people, places and foods together. Hope for Health is looking for ways to address this and to bring in other health practices to help with 'relighting the fires'.

"People who are left at home don't have a path to go. We need to help them. How do we organise it? Far away or closer? Or one day?"

"Yolŋu today aren't interested in homelands. They are like city people."

"Too many distractions confusions for our mulkurr (head)... various obstacles galmun (prevent) rumbalwu, birrimbirwu, ga djälwu (bodies, spirits, motivations)."

"Today Yolŋu are listening to Balanda instead of Yolŋu to Yolŋu. Yolŋu are seeing each other without respect, not as someone with gurruṯumirr – in a kin network. Before in the past all people used to share things together. Today it is the mind that is controlling us [instead of the heart]. People not long ago, are the people who started culture change so we can only think... with the mind."

ROM-ĻAKARANHAMIRR: reminding each other of the lawful way of doing things.

Rom is often translated ‘law’ and also as the right or appropriate way of doing things. Rom comes from our ancestors. Ļakaranhamirr is a reflexive verb which means to share one’s points of view. Rom-Ļakaranhamirr means to come to agreement about the ways things ought to be done together, properly, for a particular purpose.

Key evaluation question: How effectively were the understandings and aims (i.e. the *dhugi-dhāwu*) of both Yolŋu and Balanda communicated, agreed upon, and woven together?

Key Points:

1. Those who could clearly see the *rom* of the retreat and tell their own stories of themselves were confident of the retreat’s value.
2. The biometric aspects of the research trial were embraced as being useful for participants and they mostly undertood their ‘rom’.
3. When the *dhugi-dhāwu* of the retreat and the arrangements for the research trial were unclear, many people opted not to attend.
4. The Yolŋu CIs set down the *rom* for the Ground Up evaluation.

1. Those who could clearly see the *rom* of the retreat and tell their own stories of themselves were confident of the retreat’s value.

Those interviewed at the retreat spoke with infectious enthusiasm about the program. The way it integrated healthy Yolŋu living and healthy Balanda diet and exercise with education, made them feel comfortable and confident.

“I was hunting, and doing workshop about ŋatha mala food and rerripuy mala dhāwu – about food that stops sickness. Tim showed us stories and talked in Yolŋu matha. Reminding me of foods. Because of that food I learnt about at [the homeland]... I am shopping for it and cooking it at home. I am cooking and showing it to my children so in the future they will stand up and do the same thing.”

Participants at retreat were very confident to share the story (*rom-Ļakaranhamirri*). They gave interviews in which they connected up their experience with stories they had heard, either on the retreat or beforehand – to do with healthy food, nutrition, fasting, healthy exercise, and drinking water rather than sugary drinks. They compared the food on the retreat with traditional bush tucker, contrasting it with the foods from the Galiwin’ku store:

“Food in packets, tinned food, too much additives, too many ingredients, not good for body – hot chips and chicken – bad food affects your organs, muscles, bodies.”

Good Yolŋu food, like the carefully prepared, colourful, nutritious and mostly delicious food on the retreat – has its *rom* (*law, culture, connections*).

One woman commented that when she went into the local store to buy food, she ‘felt blind’ – the food there has no *rom*. In Garŋgulkpuy’s terms, the food was alien because she couldn’t see that it was *gurruṯu’mirr* (has kinship)– that it nourishes through its relations to its source, its connections and its politics (see Rulaŋdhun section).

The younger men especially told the story of healthy food and exercise and recommended the retreat for ‘all Yolŋu families’ (which was in fact not possible since children weren’t allowed at these retreats).

Indeed, it was not only the retreat attendees that spoke of this. Garngulkpuy shared a conversation she had with a Yolŋu man who was a potential participant, but who did not attend the retreat.

“He been trying to get healthier by walking up and down doing hard work on hot days and cooking healthy ṇatha (food). Examples he gave include chicken and vegetables and damper. He’s mainly been doing exercise, a lot of walking with the children. He’s taking the children for a walk to the end of the airport to make himself get out from the rerri (sickness)”.

2. The biometric aspects of the research trial were embraced as being useful for participants and they mostly undertood their ‘rom’.

Participants generally appreciated the efforts taken to explain the processes, including the recruitment, eligibility and consent, and valued the contribution of the testing and measuring regime to their improving health. Every effort was made by Hope for Health to explain why and how the biomedical and other Balanda health practices would be undertaken (*rom-lakaranhamirri*).

Some of the younger or more western-educated participants who were interviewed, and the Hope for Health steering committee, clearly saw the relation between diet, exercise and health, and they seemed to be the participants who were most engaged with the biometrics and with the daily talk/discussion. These connections also seemed most significant to participants, or potential participants, who were engaged in the program because of an existing health issue or scare. Already being involved in these discourses of health, the retreat offered possible means to focus on improving health in biomedically measurable ways.

In reflecting on responses from participants, the Yolŋu lead researchers suggested

“If people are sick, take their hand and lift them up, that’s what we’re going to do.”

“We need to know our blood test results quickly. If you want to improve Yolŋu health, we need to know. If results aren’t given quickly, we’re not sure what to trust.”

3. When the *dhugdi-dhāwu* of the retreat and the arrangements for the research trial were unclear, many people opted not to attend.

A lack of clarity around the underlying story (the *dhugdi-dhāwu*) was a major concern for those people who eventually decided not to go to the retreat. Despite all the background work undertaken by Hope for Health, many people felt they lacked fundamental aspects of the story.

Gapany explained to Emily the reasons she had heard which prevented many people from finally going to Gaṇapurra for the retreat. Some of them were to do with the *dhugdi-dhāwu* – people just not 100% sure of what to expect – whether they could take their medicine on the retreat, for example. Some said that they didn’t know what Hope for Health meant. Others noted that there were stories going around that people had got sick from the past retreats, even while Gapany noted that the people who got sick ‘already had that condition before the retreat’. These problems related to the *dhugdi-dhāwu* are understandable in a community of over 2000 people where every eligible adult was encouraged to enlist.

Language was naturally a barrier between Yolŋu participants and the many non-Yolŋu involved in Hope for Health’s programs. This was noted by non-Yolŋu volunteers in particular, who would have valued sharing and storytelling but encountered language barriers:

“It was good to get the opportunity for a fireside chat, but language was a barrier” (Volunteer)

“I wanted to share my views, but there was already a lot of teaching going on. I didn’t want to hammer them.” (Volunteer)

4. The Yolŋu CIs set down the *rom* for the Ground Up evaluation.

Garngulkpuy worked with Emily and the other authors setting down the scope and practice for the evaluation:

“We need relationships and knowing what sort of things each other do. Helping each other is helping everyone. We don’t want them to get frustrated. We need Melbourne University to be part of the process. Agreements need to be documented on intellectual property. We all see things differently”

“We need to make sure our goals are working together: CDU, Melbourne Uni, Hope for Health, participants ...”

“Nhaltjan limurr dhu djäma rrambanj wiripu’wiripuy birrka’yunawuyu? How can we work all the different questions together?”

Amongst the Ground Up research team, we worked to better understand our *rom*, by looking at the diagrams created by Garngulkpuy and Emily during their early analysis of the data from participants. These showed the *dhudji-dhawu* of how everything could be in place, within a Yolŋu foundation. We found this useful in talking about our different responsibilities – to the project, to Hope for Health, to the biomedical research and to Yolŋu kin and ancestral relationships. This work may also be relevant in helping new volunteers and health workers seeing how their contributions and expertise are involved in the story of Yolŋu health.

“We need good ways of talking between family, Hope for Health, Miwatj and Marthakal clinics, Royal Darwin Hospital and NT Health, Melbourne University, CDU, and Yalu – Yolŋu lead researchers.”

We have included a version of this diagram in Appendix 3, p.40. It has been adapted for use as a potential ‘Talking Tool’ which places elements of Balanda health within a Yolŋu foundation, and invites discussion as to how these practices might work together in the here-and-now of a health program, and in growing healthy lives for Yolŋu.



Fig 10-11. Morning exercise class and meal time. Hope for Health retreat, Ganapurra

RÄLMIRRIYANHAMIRR: sharing the tasks to be done.

Räl can be loosely translated as skill or capacity in hunting. Someone who comes home from the bush or beach with lots of food is described as räl-dumurr - 'big räl'. Rälmirriyirri is to get one's räl organised, knowing the tide, knowing the breeze and the season, reading the calendar plants, working out a strategy for today's work. Rälmirriyanhamirri is a reflexive verb referring to a group organising among themselves who is going to do what – based on agreement of what might be available, the range of foods we might try to get today, and who are the best people to send for which task.

Key evaluation question: How effectively were the skills and practices of both Yolŋu and Balanda communicated, agreed upon, and woven together?

Key Points:

1. The Balanda and Yolŋu *räl* working together
2. The *räl* of the research trial stood apart, which complicated things
3. The Ground Up evaluation team also had to work hard to work their *räl* together and with others.

1. The Balanda and Yolŋu *räl* working together

There was a clear sense of the Yolŋu and Balanda health *räl* working together to produce beneficial effects, and a clear sense among the participants that the daily measurement regime of the pre-post intervention study provided support and evidence for their efforts to become fitter, lighter and healthier.

On the retreat it was very clear to some participants that their knowledge of Yolŋu health in the environment and the health practitioners' knowledge of health in the body could work together.

"The food is natural and traditional, both Balanda and Yolŋu ŋatha (food) for the rerri (disease) we already have. Hope for Health is helping us become strong, steady, learn, grow, the right path."

In particular the healthy food and the massages were seen to be consistent with the bush surroundings, the sea breezes and the signs of life and health in the environment.

The Yolŋu research leaders were clear that the *räl* of working together as Yolŋu and Balanda, was not just about different foods and different ways of knowing and doing health. It also extended to the particular *räl* of education, and ways in which Yolŋu do, and could further, participate in the educational aspects of the retreats and program. The workshops on the retreat were led by one Hope for Health staff member.

"We need a committee for how to do a workshop – to help with how to prepare and establish health education. Growing our collaboration with developing health education."

"We need to develop a 'curriculum' for teaching Yolŋu. We could build people up before they go on the retreat and teach them how to prepare foods. That education needs to be led by Yolŋu using Yolŋu languages. And we [the Yolŋu steering committee] could find the pathway to create that space for vitality and change this community."

The Hope for Health steering committee are discussing ideas for how to increase Yolŋu involvement in education about healthy eating and healthy lifestyles. Their vision is for Yolŋu to be able to manage their own health. Ideas include a 'train the trainer' model, resources for Yolŋu wellbeing and connection which are accessible in one place, and an app for education of younger people.

2. The *räl* of the research trial stood apart, which complicated things

The Melbourne University team managed and implemented recruitment and consent processes, which focussed on the biomedical aspects of the project so those team members got to know participants before the Ground Up team did. Our team re-visited consent processes with participants to ensure that they understood the Ground Up research methods. The biomedical researchers interacted with local community members before and after the retreat experiences but collection of health data on retreat was conducted primarily by Hope for Health staff and volunteers. This raised some questions for participants and Ground Up researchers who did not understand why the Melbourne University staff were not on the retreat. To some extent this undermined the important sense of interconnectedness.

Although many research projects have been conducted in Galiwin'ku, the structure of a randomised control trial was new. There were logistical challenges – such as managing data in secure online portals when internet connectivity can be very slow and unreliable in a remote community. The methods brought with them many unfamiliar processes that researchers needed to understand and explain to participants and ethical challenges to be navigated. For example, it was challenging during the recruitment process to explain to a participant that they may be assigned to a control group and have to wait a year to go on retreat, despite their desire to change their health now. Exclusion criteria raised concerns for some community members who felt committed to the Hope for Health program but were not eligible as participants because of their pre-existing health conditions

“People who are well and who are unwell go hunting together, support each other.”

Many people wanted to bring their children on retreat but this was not permissible.

In the end, the methodology was adjusted because the randomized control trial did not prove feasible in this community context. A single arm pre-post intervention study was conducted instead. The collection of data verifying the effects of the retreat and Hope for Health program was seen as very important by the Steering Committee. However, the challenge of coming together in place for the retreat, and meeting the conditions that would make the biometric assessments robust, was significant. The confusion and frustration of how different teams of Balanda were working or not working together revealed a sense that the proper roles and practices which would make the retreat (and the research trial) a success could have been more fully negotiated with the participants. As Garngulkpuy pointed out:

“You have to work very hard to make Yolŋu and Balanda health concepts fit together.”

3. The Ground Up evaluation team also had to work hard to work their räl together.

The CDU Ground Up researchers were invited to be part of the original NHMRC application, undertaking ‘participatory analysis’, while others were working on biomedical measurements, the dietary data, and the physical activity data for the research trial. As senior Yolŋu authorities involved in the program, Garngulkpuy, Gapany and Yungirriŋa were in the right position to lead the project, supervise the methods, do the interviews in Yolŋu languages, and work on the analysis. Emily supported the Yolŋu researchers’ work and worked with them to begin data analysis by opening up some of the stories. Michael did translations and an initial draft. Michaela and the team worked on subsequent drafts. Each of us had worked with some of the others on similar projects in the past. We each had our own *räl*, organised and arranged in ways which observed Yolŋu sovereign authority.

The practices of *räl* meant that a strict division between the evaluators and the participants was not possible or desirable. Researchers assisted potential participants to understand the story of the retreat and the trial as they listened to their stories of their own worries, and answered questions about what would be involved. When the Yolŋu CIs arrived at Ganapurra to work as evaluators at the retreat, they were invited to sit by the

fire, share food, have massages and speak with the volunteers who were very keen to talk, share their experiences and learn more about Yolŋu life.



Massage treatments delivered by volunteer therapists on retreat



Herbal teas prepared by a volunteer naturopath on retreat



Yolngu staff and participants spent time painting and weaving on retreat and Balanda volunteers enjoyed learning about their art

Fig 12-14. Activities at Hope for Health retreat, Ganapurra

RÄL-GÄMA: bringing back what we must share.

In the expression räl-gäma, the word räl now refers to the outcome of the skillful work which is brought back (gäma). Individuals may bring what they have caught or gathered, but the expedition can only be a success if it is shared together carefully and generously.

Key Evaluation question: How effectively were the stories and experiences of both Yolŋu and Balanda communicated, agreed upon, and woven together within the Hope for Health programs?

Key Points:

1. Participants told stories about how being on country, thinking about health and the environment, engaging in fasting and a planned diet made them feel well.
2. Participants told of the ways environmental indicators put them into a health-conscious frame of mind.
3. Participants who stayed on the retreat shared how the treatment, diet, and being in place helped clear their heads.
4. A sense of sharing across health and dietary traditions.
5. The benefits of, and limits to, sharing stories.

1. Participants told stories about how being on country, thinking about health and the environment, engaging in fasting and a planned diet made them feel well.

“We notice that the participants are not talking about worries here on retreat. That is very different to the people we talked to in town.”

Being away from town and on a homeland could be likened to visiting a different kind of supermarket. Here, the shop was not the only place to go for food. Instead, you need ways of understanding place, ways of knowing about hunting, and networks of kin relations.

“Rumbal ga guṅga’yunmirr märram ga ganydjarrmirriyanharaw rumbalwu.” Helping the body, getting the power and energy in your body.

“Ḷuka dhu ga ṛatha djoka’miriw ga marṅgithirr nhaltjan dhu bathan manyakkum.” Eating food without sugar and learning how to cook well.

“Dhākay-ṛānhamirr ga ḍamba ga rurrkrurrknha.” Feeling lighter and like floating.

The experience of eating new and healthy foods supported the experience of feeling good in the bush, and feeling good, light and strong in your body.

2. Participants told of the ways environmental indicators put them into a health-conscious frame of mind.

Being out on the homeland was important contributing factor supporting participants’ feelings of health and wellbeing .

While you are out collecting *latjin’* (mangrove worms), as Garṅgulkpuy points out, you are ‘feeling the fresh air and everything’s got to be well’.

Participants who spent time at the retreat talked about the feeling of being on the homeland and how the environment connected with them and supported them to feel healthier.

“Galŋa-djambatjthirr ga watay, ga marrtji ga ranjikurr djambatj ga räl-ŋamatham.” Feeling the wind that makes you think of gathering food, and walking along the beach with expectations for hunting and collecting.

“Gaḍaman’tthirr marrtji burwuy’ djambatjkum ga rälwu ŋamathanharaw.” As you’re going along the way you already know from the flowers what you will hunt and collect well.

“Maybe walking around Galiwin’ku with worries and all the ŋatha (food) – both these things make you heavy. Now at the retreat I am feeling lighter.”

3. Participants who stayed on the retreat shared how the complementary health treatments (particularly massages), diet, and being in place helped clear their heads, firm their resolve and helped them feel relaxed and more comfortable.

“Bäyŋu ga warwuyun aw dhäruk bilyun ga ŋayaŋumiriwyirr – (yäku yän ga rumbanydja dhuwal-banydji).” Not worrying, not two tongued or contradicting they are committed in their ŋayaŋu. (Other people sent their names but their bodies stayed behind.)

“Baḍarratjunamirr rom mala winya’yuna ganarrthaman rumbalnydja winya’yuna ga ŋorrany ŋamatham.” The pain that was there has left the body and we’re sleeping well.

4. A sense of sharing across health and dietary traditions.

People interviewed on the retreat tended to see as entirely compatible, the biomedical theory and its testing (bloods, weights etc) and the Yolŋu practices and signs of good health (a lightness of feeling, the touch of the known breeze on your face, the sight and smell of the sea and what it has to offer). They understood and were happy to share their insights into the connections between traditional food and the special meals prepared on the retreat and the ways in which the foods specially prepared by the dietician and chef complemented and reinforced Yolŋu commitment to healthy, freshly prepared food. The retreat succeeds to the extent that the biomedical story reinforces the Yolŋu story – the *dhudi-dhäwu* – of food and its connectednesses.

*“How did we used to gather *latjin*? With rocks. How do we gather them today? With axes!”*

There was no problem introducing the biomedical testing and teaching, or the special food prepared under the dietician’s instructions – as long as the *dhudi-dhäwu* – the flourishing of Yolŋu in place – is kept in focus.

At the same time, some participants highlighted how sharing the *dhudi-dhäwu* in more depth could have improved the retreat experience. One volunteer observed that:

“There is no opportunity to unpack or explore the understanding of the [massage] experience from the two different worldviews, while on retreat. That would require complex intercultural communication skills.”

Another volunteer commented that they had little chance to engage with any of the depth of meaning in the Yolŋu experiences or context they were witnessing.

Amongst some of the Yolŋu interviewed, sharing good stories about health was also seen as a welcome opportunity to help good stories to circulate, and help nurture benefit and wellbeing. This in contrast to some stories which are shared that damage people’s health (e.g. through gossip, curses).

5. The benefits of, and limits to, sharing stories

Those that attended the retreat spoke of coming home and sharing their stories. Those waiting at home spoke about being interested in the stories their family members will bring back. Ongoing Hope for Health programs in the community supported this sharing.

“I am cooking and showing it to my children so in the future they will stand up and do the same thing.”

“I feel the difference when I eat the food from Hope for Health that my sister is sharing with us. It feels light.”

However, there were carefully respected limits to this sharing, with family members sharing within their close groups, but being careful not to move beyond this so as to allow others to make up their own minds about what is right for them.

“[I] am encouraging my family and helping them and encouraging them to stay healthy and have a long life with healthy food. I’m inviting the family to see what I’m doing and at the same time I am leaving the thinking to other families – whether they are spending their money on good food or food that causes sicknesses.”

Some participants and steering committee members commented on the value of having health checks again after retreat and having the chance to talk about their biomedical results. However, the depth of understanding about these results varied greatly.

“When people just talk in Balanda language, there is uncertainty, we don’t really understand. We need Balanda and Yolŋu to work together to share knowledge. Like with blood results – when you understand your blood results, that can make a difference. It comes back to communication and working in collaboration – rrambarji djäma.”

“How you think in Balanda university and how Yolŋu think in Yolŋu knowledge is different. We need both sides of stories. We need spirit and mind and body to work together for wellbeing.”

Despite much effort to make each others’ stories comprehensible this was often not really possible, with some of the Balanda volunteers and staff noticing these challenges.

“It feels to me like the ideas being introduced by Balanda are hovering around on a surface level and then blow away or are lost – like this simple but surface level health messaging on posters behind the chairs on the airport wall. How could anyone possibly engage this nutritional information and connect it to what Garŋgulkpuy described as an ‘integrated system, mayali’mirr (full of meaning)?”



Fig 15. Post-retreat discussions with a Hope for Health participant

RULANDHUNA: putting what we have produced in place for sharing.

Rulanduna means simply putting down in place, but here it involves doing it properly, with love and respect, and reminding each other of the networks of connections between peoples, places and delicious things to eat.

Key Evaluation question: How can we share what we have produced to make other people in the community fit and healthy?

Key Points:

1. Some participants were enthusiastic about sharing the benefits of the retreat and the Hope for Health program with other Yolŋu.
2. Food with kin: a suggestion for a performative evaluation.
3. Yolŋu evaluation and the research trial.
4. The generative contribution of a Ground Up evaluation.

1. Some participants were enthusiastic about sharing the benefits of the retreat and the Hope for Health program with other Yolŋu.

Creating spaces and opportunities for Yolŋu participants to tell stories of their experience – stories which interpret their experience through Yolŋu terms – was seen as a way of spreading a health-conscious awareness.

“I’m here because of my weight, I resigned from work to go back to a healthy lifestyle, I fasted 3 days and lost 4 kg, I’m hoping to return to a healthy lifestyle from [the homeland], from the dietician, doctors, and exercise program.”

“I want to encourage any Yolŋu to come here and enjoy a healthy lifestyle, food, nutrition and losing weight, no sickness or asthma - a healthy self, healthy body, that’s why I’m here. I’m committed, I wanted to. I want to encourage anyone to come to this good environment for Yolŋu families.”



Fig 16. Post-retreat cooking class. Hope for Health, Galiwin'ku

Participant stories also often spoke of gradually becoming familiar with the program, and ways of feeling comfortable with new foods, new people and ways of integrating these new practices within existing ancestral knowledges.

“I’m going to tell you about Hope for Health program - very good for you and me. For body, make heart good, drop your weight. First my story is that I was wondering what is it and they gave us lovely food and I ate it. I thought I will join the program and now here I am... I came from Elcho with a heavy body and feeling sick, weight 110, came here, sat down ate good food, salad, and walked around and it’s helping me to lose weight. And nice food, good blood, we are become heathy - cleaning inside our body. I was eating lots of sugar, and now I drink lots of water and feeling healthy, Here [name] and I, every morning go for a walk, exercise for our body, it’s good, helpful, you hear the story of ill health. And good food will return to what we used to eat long ago, not strange food but bush food, but this Balanda food – salad is good, energy, but no sugar. Its big name is sugar but it comes in all forms, it makes you fat and heart attack or stroke, and you need injections. And tobacco, mixed, heart attack, can you see this?”

One participant commented that she’d like to learn how to do the same massage that she was receiving from an osteopath volunteer, who is highly qualified and experienced in his field. The participant practices Yolŋu massage with family but the volunteers may have been unaware of this.

Participants also joined in with cooking classes in the community after the retreat, and shared their enthusiasm with other community members who had not been on the retreat, but who have now started to come to these cooking classes with their families (including some younger people – children and adolescents).

2. Food with kin: a suggestion for a performative evaluation

One afternoon, in August 2022, after completing many interviews and discussions for the evaluation, Emily sat with Garngulkpuy on her veranda and talked about analysis ideas. Garngulkpuy came up with an idea for presenting findings which she shared with Emily and they made notes to share with the other researchers.

Garngulkpuy called her idea for presenting findings ‘*Yolŋu ŋatha gurruṯumirr*’ which could be translated as ‘Yolŋu foods have kinship’. She was thinking of some sort of performance, which could take place maybe on the Hope for Health verandah in Galiwin’ku. That performance may one day take place but for now we reflect upon how food with kinship links Hope for Health to a Yolŋu theory of health. ‘Food is at the bottom of it all’.

In Garngulkpuy’s suggested method, we start off with a particular bush food – for example mangrove worms - *latjin*. All Yolŋu know and love mangrove worms, and Yolŋu know that mangrove worms belong to particular clan groups, are found in particular places, and are celebrated in songs and ceremonies which connect them with other foods belonging to other peoples and places. Yolŋu remember that the *latjin* belongs to groups like the Gandaŋu, the Mandjikay, and the Wangurri (Garngulkpuy’s own group). That’s the *dhudji-dhawu* - the fundamental story, or the ‘bottom story’, the starting place.

In Garngulkpuy’s performative evaluation, everyone would share the story of the foods belonging to their own clan, the songs, dances and images which reveal them, and elaborate their kinship connections with their *ŋaṇḍi-pulu* (mother’s group) and their *māri-pulu* (mother’s mother’s group) and so on. Food exists in a network of peoples and places. Each food has its underlying Yolŋu story, and we must begin with the story of collecting the mangrove worms ‘feeling the fresh air and everything’s got to be well while you are out

collecting *latjin*'. Once we do so, Garngulkpuy notes, it would be good to add the biomedical story – the 'nutrition information' – what *latjin* 'does for your body and bloods'.

Yolŋu also have their nutritional categories: *matha yal'*, *murnyaŋ'* etc. They are not incompatible stories. The Warramiri even have a *milkarri* (keening) for sickness. Setting the Hope for Health story of foods alongside the foundational Yolŋu story of foods, health and sickness makes the nutrition stories make sense, and each story strengthens the other.

If Garngulkpuy tells the story of *latjin*, the other participants can share their own stories of food belonging to their own clan. These stories will create links to others: *ŋāṇḍipulu*, *wakupulu*, *māripulu*. These links were there all the time – a performative evaluation is an idea for reconnecting and revealing (*dhawaṭmaram*) stories of food.

3. Yolŋu evaluation and the research trial.

Garngulkpuy was also interested in the wider question of 'Melbourne Uni and CDU- how can we meet the two?'. The University of Melbourne had funding for all the biomedical research aspects of the retreat – to measure and understand the physical health effects, while CDU was supporting the Yolŋu-led evaluation. How then can we make a Ground Up evaluation useful to medical researchers?

In a progress meeting with the University of Melbourne researchers, they were very interested to hear about the Ground Up approach to evaluation. Yolŋu knowledge of health and nutrition is quite different from the knowledge to be gained from a single arm pre-post intervention study, but Yolŋu can provide understandings of where food and health come from.

The Ground Up practice of *rulwaŋdhun* would be useful in helping health professionals understand how their work can be integrated with Yolŋu theories of health and nutrition. At the same time *rulwaŋdhun* would help the Yolŋu community members better understand and evaluate biomedical health messages.

While some participants were keen to share their stories, it was also understood that different Yolŋu needed to make up their own minds, and come to the program of their own accord and for their own purposes.

4. The generative contribution of a Ground Up evaluation.

How can an evaluation actually produce change? Performing 'food with kinship' – as Garngulkpuy suggested above - would be one way of performing an evaluation, Yolŋu style.

In another example, when Garngulkpuy and Emily were unable to travel to Ganapurra they conducted an interview from Galiwin'ku township using Zoom. Retreat participants spoke to them from Ganapurra over broadband internet using a phone, carrying the phone around the retreat connecting their stories about the retreat with the places where the experiences happened. Connecting up the various locations with the health practices that can happen there is important for putting what we have produced in place for sharing. Hope for Health might continue to think of ways of conducting their activities so that their effects reverberate in the community to enhance the community sense of 'relighting the fires' – of finding small ways, at the family and community level, to stimulate the old interconnections between being together in place, preparing and sharing healthy food together, with storytelling under authority from different traditions. The evaluation helped participants to voice what could be done within the community to continue the benefits of the Hope for Health program, even within other community organisations:

"Later the story will get good, the shop will understand the dhudi-dhāwu. Come and try out the Hope for Health, your future and your children's future... that's the story from me."

OUR CONCLUSIONS

In this section we address specifically the key questions from the original research agreement between the University of Melbourne and Ground Up. We hope this will help Hope for Health to see more clearly what Yolŋu elders, researchers and participants think about how Hope for Health can connect to, and support, an authoritative ancestral Yolŋu understanding of *Hoping* for Health.

A Yolŋu-led evaluation is important for work like this because it e-values (recognises value and makes it visible) what we have found, in terms of what we have learnt is good from our elders and our land.

FROM THE PROTOCOL:

- **Develop ways of articulating Yolŋu understandings of ‘health’.**

A Yolŋu understanding of ‘health’ emerging from the evaluation and the guidance of the Yolŋu CIs depends upon the interconnectedness of peoples, places, and histories. The food we eat and the physical activities which finding and preparing food entails fundamentally contribute to health.

Yolŋu healthy minds and bodies also arise from knowing that different foods belong to different clan groups, that food has kinship, and is sung and cried in ancestral songs, and represented in dance and painting.

Being in the environment is fundamental to Yolŋu health: feeling the strength and direction of breezes, understanding what flowers and fruits are available day to day and how they give us signs of the seasons and what foods are available.

The generous sharing of food, and the telling of stories of where the food comes from, who it belongs to and how skilfully it was produced all contribute to Yolŋu health. Health is about knowing both who, and where, you are.

- **Negotiate means of ‘mobilising’ these concepts as ways of assessing, valuing and verifying the outcomes of the Hope for Health program.**

When the work of Hope for Health is undertood within an existing foundation of Yolŋu understandings of ‘health’, we have a new means for assessing, valuing and verifying the outcomes of the retreat and follow up activities.

The specially prepared diets on the retreat, the Balanda stories of health and nutrition, and the biometric testing and sharing of results are welcomed and received when they are seen to reinforce and supplement the ancestral Yolŋu knowledge of health.

Working together the Yolŋu and Balanda stories of health and nutrition is difficult but important work which could potentially be enhanced by also incorporating more Yolŋu teaching and learning styles in the daily learning time on retreats.

The language barrier made sharing stories difficult for the volunteers.

- **Work with local researchers to elicit participant, staff and stakeholder views on:**
 - **How individuals and households could achieve improved nutrition outcomes in daily life**

‘Relighting the fires’ is both a metaphor and a practical suggestion for how we might go about bringing together ancestral knowledge of health and the difficult day to day life in a large town.

Every trip to the beach or bush, especially when food is collected, prepared and shared, leads to improved bodily health, as well as to the health of Yolŋu people-places.

When attention is paid to where and who we are, and where our food and selves come from, then mental and spiritual health can be sustained and improved.

- **How participants address the challenges of adhering to Hope for Health**

Adhering to Hope for Health is seen to be a collaborative process. Having the Hope for Health retreats and follow-ups addressed to *family groups* rather than to *individuals* is one way to address the challenges. This would mean including children and possibly a more relaxed approach to some of the rules and expectations of the retreat. Also the randomised nature of the participant selection increased the difficulty of adherence.

If the Hope for Health staff and the volunteers participate in the program alongside the participants and they do everything together, that would help with the challenges of adhering. When there is a split between what the staff can do and what the participants can do, that makes adherence more difficult.

The structure of the post-retreat activities more easily allowed collaborative processes of intergenerational food collection, sharing and learning. It may be fruitful in the future to focus on these activities, as well as or rather than retreats, when measuring the biomedical effects of the program on bodies of participants.

- **How Hope for Health could improve the program**

The methods of evaluation are something to be taken seriously and celebrated if they conform to a Yolŋu theory of methods for hunting and for research. Yolŋu methods always start from and work towards the *dhugdi-dhāwu*.

Attention to the *dhugdi-dhāwu* allows us to see where there are tensions which compromise the potential of the retreat. For example a major issue was the tension between the healthy food, environment, exercise on the one hand, and maintaining healthy connections with children, elders and the sick back in the community. This may be an ongoing issue for Hope for Health retreats.

If the retreats and other activities were based on (and framed through) a traditional hunting expedition (as in the Methodology paper), then interactions between Balanda and Yolŋu could be more productive and on Yolŋu terms. Further exploring the entailments of the Yolŋu practice of *wakir'yun* (extended family's hunting expedition over several days) may be useful for planning further activities.

The groups could be extended families so there would be less worries about those left behind. The Balanda food and health stories could be told alongside Yolŋu stories. Education would need to be developed and delivered collaboratively. The daily timetable could reflect the daily Yolŋu practices of agreeing, remembering, strategising, gathering, preparing, sharing and celebrating food and health.

References:

- Garnggulkpuy & Lawurrrpa 2004 'Yolngu Longgrassers on Larrakia Land'
https://www.cdu.edu.au/centres/yaci/pdf/Garnggulkpuy_Lawurrrpa_Longgrassers.pdf
- Garnggulkpuy & Lawurrrpa 2005 'Methodology for Yolngu Research'
https://www.cdu.edu.au/centres/yaci/pdf/Garnggulkpuy_Lawurrrpa_Methodology.pdf
- Hope for Health (n.d.) <https://hopeforhealth.com.au/whatwedo>

Appendices

Appendix 1. Hope for Health Steering Committee feedback on Evaluation Report

24th June 2023



Emily (CDU), Garngulkpuy, Yungirrrja, Yikaniwuy, Malku, Biritjalawuy, Gapany, Guyupul, Hasthi (Uni Melbourne), Reet (Uni Melbourne)

The Steering Committee was happy that the report was consistent with the Hope for Health vision <https://hopeforhealth.com.au/whatwedo> : “reclaiming rom walŋaw – the Yolŋu way of vitality – achieving vibrant health, for their families and their communities.” We want Yolŋu to be able to manage their own health. Maybe it might be better to call it Hope for Wellbeing?

The Steering Committee endorsed the recommendations that Hope for Health continue to integrate traditional Yolŋu understandings of food and wellbeing into its programs. This could include:

- Focussing retreats on the traditional practice of *wakir'yun*: an extended family group out bush or beach for a few days, sharing and making health and wellbeing together.
- Remembering the importance of fires (and relighting the fires) *dhaŋalkum* in Yolŋu being together, eating cooking and talking together, and being properly in place together.
- More inclusion of ceremonial work (singing, dancing etc) in HfH programs
- Elders singing *milkarri* while food is being prepared.
- Remembering and reminding people about how foods have kinship and connect them to ancestral songs, stories, peoples and places.
- Remembering and reminding that Yolŋu food has its own ‘policy’ ie as you eat it, you know what’s right and wrong for you. You are *rumbal-waŋaju* (in charge of you own body) but also *ŋayanju-waŋaju* (in charge of your feelings). For example, your body knows how much it can take, e.g. turtle

fat, you don't eat too much. (This in contrast to the many bad foods from the store that you can't say no to – they are full of flavour – dhäkay – but that's all.)

- Beja made clear that the Balanda medical stories about the great importance of white and red blood cells and bones make the same point as the Yolŋu understanding of the sacred nature of bones and blood. They work together.

The committee agreed that the retreats are only a part of Hope for Health.

- We need to find a *dhukarr* (pathway) to change this community and create that space for vitality. It needs everything to be integrated as a whole.
- This is urgent, we are losing many young people.
- We need to support Yolŋu to do the things that they can do at home, not just on retreat.
- We could build people up before the retreat and teach them how to prepare food etc.
- Maybe if they relaxed the rules (eg about smoking) the participation in the retreats would be more successful and positive.

The committee endorsed the need for further work on education.

- We need more research on different foods and their values
- We need to develop a 'curriculum' to teach people – so many Yolŋu are just walking around and around in this community
- Education should be led by the Yolŋu in Yolŋu languages, we (steering committee) can support this. This could be done through a train-the-trainer model – we need a trainer to train the trainers!
- We need to continue building language skills – Yolŋu skills in Balanda language, and Balanda skills in Yolŋu languages.
- Also listening skills. (Emily, they pointed out is being taught to listen properly, and respect that, and take that in.)
- Yolŋu need to be able to read and understand our own results from the doctor. We need Balanda and Yolŋu to work together to share knowledge.
- It needs to be done 'both-ways'. *"When people just talk in Balanda language, there is uncertainty, we don't really understand. We need Balanda and Yolŋu to work together to share knowledge. Like with blood results – when you understand your blood results, that can make a difference. It comes back to communication and working in collaboration – rrambanji djäma."*
- "How you think in Balanda university and how Yolŋu think in Yolŋu knowledge is different. We need both sides of stories. We need spirit and mind and body to work together for wellbeing." *Gumurr-däl* (resolute), *ŋayanju wangany* (caring for each other), *liya-wangany* (of a like mind).
- The 'talking tool' (Appendix 4) provides that sort of opportunity to tell a holistic story which goes back to HfH's vision.

Appendix 2: Typical Retreat Day Structure

<i>6:15am</i>	<i>Wake for the sunrise and exercise</i>	<i>Who</i>
	Health Monitoring and assessments (Obs, BSL, blood pressure)	According to case management plans
	Roll call	Everyone
	30 min walk	Men & Women separate
	Morning stretches and Exercise	Men & Women separate
<i>8:00am</i>	<i>Breakfast</i>	Everyone
<i>9:00am</i>	<i>Learning time – about the body, food and disease</i>	Everyone
<i>10:30 am</i>	<i>Health coaching consultations and free time</i>	
	Treatments – osteopathy, and massage	Rostered
	Hunting - those without treatments or consultations can go hunting between now and sun-down most days	Optional
	Crafts – weaving, painting, spear making	Optional
<i>1:30pm</i>	<i>Lunch – (those hunting might skip this meal)</i>	Everyone, unless hunting
<i>2:30pm</i>	<i>Treatment and Free time</i>	
	Treatments – osteopathy and massage, Yolŋu health treatments	Rostered
	Hunting – those without treatments might go hunting	Optional
	Optional learning workshops – like home hygiene, cooking lessons, Milkarri, Balanda and Yolngu herbs, Exercise classes	Optional
	Sport	Optional
<i>6:15pm</i>	<i>Bone Broth or soup at sunset</i>	Everyone, unless hunting
	Hunting groups might cook what they have collected and share Yolŋu way	Optional
<i>6:45pm</i>	<i>Free time and ready for bed</i>	Everyone
	Once people start feeling well, they often worship, or dance at this time	Optional
<i>9:00pm</i>	<i>Lights out – (generator off)</i>	Everyone

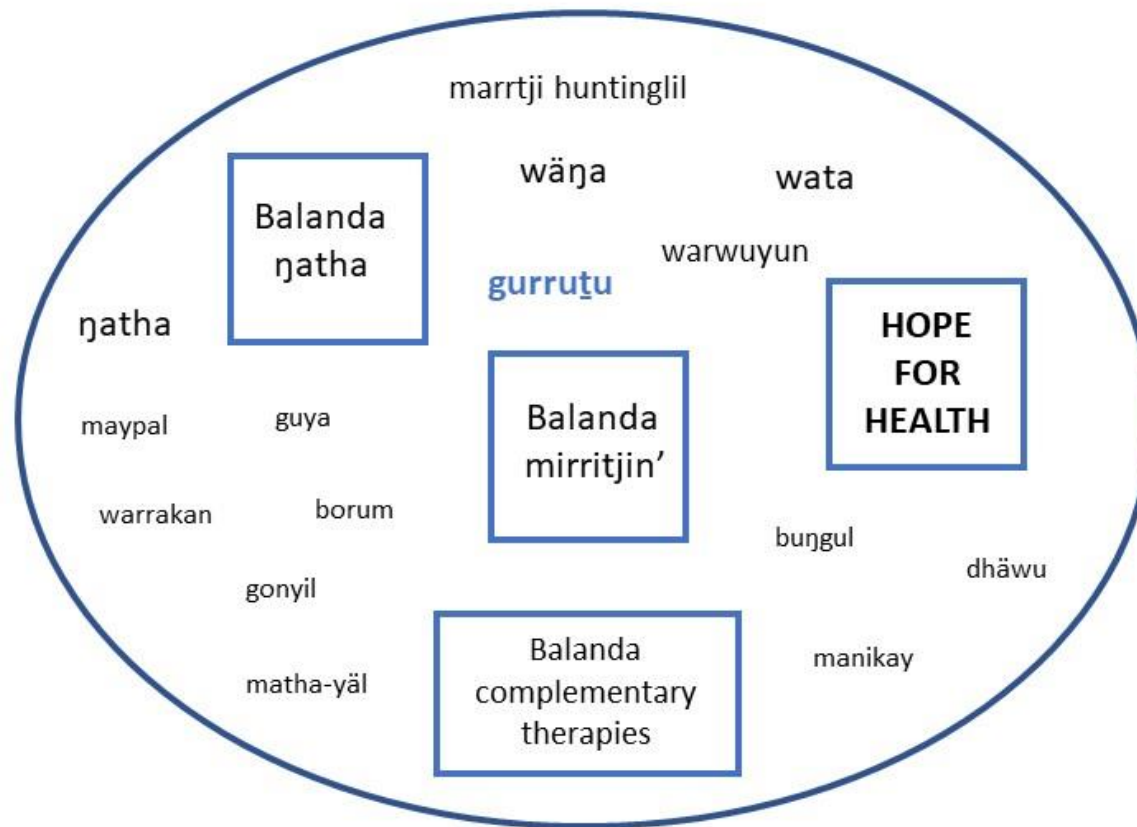
Note: Days 3 – 5 were different for participants because they were fasting days when participants did not have normal meals for breakfast and lunch but instead had juices, smoothies and broths.

Appendix 3. Ground Up evaluation discussions with participants, staff and volunteers

Who Ground Up researchers spoke with	Before retreat	During retreat	3-months after retreats
Senior community members	4		4
Enrolled program participants who didn't attend retreat	8		2
Enrolled program participants who attended retreat	2	7	5
Family members and non-participants	1		4
Hope for Health staff		1	4
Hope for Health volunteers			3
Enrolled participants who talked with us both before and after retreats	2 (1 did not attend retreat; 1 did attend)		
Enrolled participants who talked with us both during and after retreats			3

Note: Discussions were held with 37 people. As some participants were interviewed at multiple time-points, these numbers do not tally to 37

CONVERSATION TOOL: YOLŲU WALŲA & HOPE FOR HEALTH PROGRAMS



This tool is designed to support YolŲu involved in Hope for Health as they have conversations with Balanda staff, researchers and volunteers about what creates healthy YolŲu life.

This tool is adapted from the collaborative analysis developed by GarŲgulkpuy and Emily. It deliberately does not include a cross-translation of terms, inviting mutual inquiry into how elements of Balanda health may sit within foundations of a healthy YolŲu life.