Australian Aboriginal Healing Beliefs and Practices

The Australian Aboriginal Culture is considered to be the oldest living culture in the World (Flood, 2006, p 133) and existed, almost in isolation, from the ice age until colonization in 1788. Traditional medicine, passed down through generations,
is still practiced in parts of Australia today (ibid, p 144) but as
there is no written history of Aboriginal culture it is difficult to
know the healing beliefs and practices of the Aboriginal people as they
were before the invasion by white people. Before settlement by whites, Aboriginal
population in Australia consisted of 250 separate tribes (Flood, 2005, p197) each
having a different language, practicing different healing rituals, and using different
healing plants. Tribal groups led a nomadic existence within a defined area, moving
to utilize seasonal food resources (ibid, p26). The absence of a written
history and the numerous distinct tribal groups present difficulties when
investigating cultural practices of Aboriginal people prior to colonization

because of
the diversity of beliefs and practices used by individual tribes.
However the oral history speaks of a complex system of healing practices involving magic,
spirits, and extensive use of bush remedies and herbal medicines.

This paper presents a general overview of some of the healing beliefs and practices but
acknowledges that these may not apply to all aboriginal groups or individuals because of
the diversity found across Australian aboriginal communities.

Supernatural Cause of illness

Illness that occurred through straightforward physical sources was treated with a variety
of herbal, animal or mineral cures (Isaacs, 1987, p 198). Conditions like burns,
skin infections, cuts and bruises, colds, insect bites and eye infections were common
and could be treated with a variety of bush medicines. Death that occurred in the very old
and very young was understood to be from natural causes but serious illness with an unknown
cause was related to intervention from the spirit world (Burnum, 1991).
Traditional Aboriginal Australians believed that serious illness and death were caused by
sorcery or disruption of the spirits (Byard, 1998). An individuals well being was dependant
on observance of strict obligations and responsibilities to society (Maher, 1990).
Illness could be caused by breaking social taboos or by entering forbidden land areas such as
sacred sites, or by seeing or touching forbidden objects (Elkin, 1945). Under this socio-medical
system preventative measures such as respecting the land, observing obligations of kinship,
respecting the dead, not trespassing on another's land, and avoiding sorcery by not causing
conflict with others were essential to maintain health. Physical symptoms occurred as a result
of social or spiritual dysfunction (Maher, 1999).
Sudden unexplained illness or death was thought to be the result of sorcery directed by distant
groups as a form of retribution for wrongs done to them (Elkin, 1945, p). Sorcery was practiced
through the performance of special rituals to deliberately cause harm to

others (Burnum, 1991).
To cause illness Sorcerers in some areas ritually removed fat and more specifically in some tribes
the kidney fat of a victim by concentrating their thoughts on the victim (Elkin, 1945, p51).

Medicine Men

Medicine men (also called "clever-men") were chosen at a young age to be trained in healing arts.
Their initiation ceremony involved a ritual killing and rebirth (Elkin, 1945, p15). In many tribes
this involved being swallowed and regurgitated by a rainbow serpent. In others areas the initiate
as required to battle a water serpent resulting in his drowning and then being brought back to life
(ibid, p 18-21). Most initiations involved ceremonial removal and then replacement of internal organs
or bones. Powerful objects such as quartz or shells were magically inserted into the new medicine man
while he was sleeping to give him special powers (ibid, p21). After initiation, a healer had the
power to communicate with the sky gods and the dead. A Medicine man has the ability to see the future,
read minds, diagnose and cure illness, travel at extraordinary speed over land and into the sky, and
to see inside of people to know the cause of illness (Burnum, 1991).As a part of his treatment a
medicine man would rub areas of the body and was seen to remove offending object such as small sticks,
stones or shells (Elkin, 1945, p165). The objects were believed to have been placed in the patient
by spirits or sorcery and removing them removed the source of illness. Sometimes medicine men sucked
out objects or bad blood to remove sickness or drew the sickness out into his hands then blew it away
using his breath (Elkin, 1945, p39).

Clever-men possess "the strong-eye" (Elkin, 1945,p49) that was vital for seeing the cause of illness,
to see a persons soul, see the spirits, or identify a murderer who was using sorcery. In some regions
soul stealing or soul-wandering was the cause of sickness and the 'strong-eye' was able to see these
conditions. If the medicine man could convince the patient that his soul had been restored he would recover.

Chanting and singing are also important rituals performed by medicine men when healing the sick
(Flood, 2006, p 144). Singing induced a trance like state in the patient so magical objects or
spirits could be removed.

Medicine men were consulted when no physical cause could be blamed for illness (Isaacs, 1987, p198).
They held exceptional power and knowledge and were responsible for the well being of the whole group
through intervention with the spiritual realm. They were able to remove the influence of sorcery or
evil spirits to restore health. A medicine man needed to have acute powers of observation to understand
the people of his tribe and their interactions with each other and their environment. They provided
culturally appropriate explanations for sickness in their community.

Women as Healers

Healers were usually men but women undertook this role in some communities (Maher, 1999) and
underwent a similar initiation into the healing role as men did (Elkin, 1945, p130). In daily
life women played a major role in healthcare (Flood, 006, p15). Older women had the most
expertise in herbal and bush medicine although knowledge of healing plants was shared amongst
all members of the community (Isaacs, 1987, p198). Menstruation, pregnancy, childbirth and contraception
were all the domain of women. In some groups it was the grandmother, not the mother, who was responsible
for administering treatment to children (Jeffries-Stokes et al, 2004).

Plant Medicines

Plant remedies were used to treat the day-to-day ailments, alleviating the symptoms for such things
as burns, skin conditions, eye problems, digestive upsets, tooth wear, insect bites, stonefish &
jelly fish stings, snake bite, bruises and cuts (Low, 1990, p19). Even in the richest environments,
people moved camp several times a year as local food supplies were exhausted (Flood, p 199) so remedies

were the plants that were to hand when the need arose. This helps to explain why different tribes had different remedies and why many of the plants used had a broad spectrum of uses.

Plant materials were prepared by infusion, decoction and maceration and were often mixed with animal fat such as emu, goanna, or kangaroo for topical application (Pearn, 2005). Sometimes leaves were simply crushed in the hand and the vapours inhaled or rubbed directly onto the skin. Plant material was sometimes burned and the ashes crushed before use, sometimes applied directly and sometimes incorporated into animal fat ointments. Plants were freshly prepared for use and were seldom stored (Pearn, 2005). Many plants had a broad spectrum of use and were used primarily to treat symptoms rather than specific diseases (Pearn, 2005). Most remedies were applied externally (Low, 1990, p26) so toxicity issues were minimized.
Over 50,000 years the pharmacopoeia was developed, through trail and error, and passed down through the generations. A small selection of bush medicine and herbal remedies can be found in Appendix 1.

Smoking

Smoking was used extensively for healing and in ceremonial rituals. As a form of preventative medicine, newborn babies were smoked with resinous pieces of termite mounds and various leafy branches including eremophila and,eucalyptus species were added to the hot coals to produce smoke (Pearn, 2005). Smoking was believed to make the baby strong and calm. The new mother is also placed in the smoke to aid her recovery (Isaacs, 1998, p 210). Where the cause of illness is not known smoking can be used as a ritual cleansing agent with the bark of melaleuca species often used to produce smoke.

Singing

'Singing' was another form of healing practiced by Aboriginal people and could be practiced by anyone not just medicine men. Healing songs were very personal and belonged to the singer and it was inappropriate to sing a song that belonged to someone else (Maher, 1999).

Singing did not counteract
spirits or sorcery but strengthened the patient so that they may be able to overcome its effects
(Dobson, 2007, p47). Singing was sometimes used to help induce a trance-like state to help with pain
(Flood, 2006, p144)

Bone pointing

Pointing the bone is a way to inflict a curse on another person (Flood, 2006, p144). The bone can be
from a person or animal and is tied with a cord of human hair. The belief is that when pointed at
someone, that person's blood or soul is drawn through the string into the bone and a magical disease
causing object or spirit is transmitted to the other person along the cord (Byard, 1988). Bone
pointing could be performed by medicine men or by sorcerers or older initiated men and women
(Flood, 2006, p144). The victim was made aware of the spell, sometimes because the bone had been
left where they would find it (ibid). Victims became ill or died unless the medicine man could reverse
the spell. Bone pointing had a powerful psychological effect.

Adaptation and Change

Although anthropologists claim that Aboriginal culture remained static for millennia there is evidence
that Aboriginal medicines have changed and adapted over time especially in the last 200 years
(Flood, 2006, p 24). The Macassans from Indonesia made annual voyages to northern Australia hunting
sea cucumber well before the arrival of Europeans. They brought new songs and ceremonies and also
diseases such as smallpox and syphilis (Flood, 2006, p 7). Colonization brought changes to diet and
lifestyle and a new array of introduced diseases that had a devastating effect on the aboriginal
population. Aboriginal medicine (or colonial medicine for that matter) was ill equipped to cope with
these outbreaks that killed a large proportion of the aboriginal population. Introduced plants where quickly included into herbal medicine lore and many plants that are remembered
as traditional treatments are actually introduced species (Low, 1990, p23). Many remedies that are

remembered as 'Traditional' involve boiling herbs in a billycan (ibid). The billycan was not a
traditional implement but was introduced by white men and changed the way that traditional medicines
were prepared and almost certainly changed the active ingredients extracted.

Influences on Herbal medicine today

The use of herbal and bush remedies has not had a significant influence on modern herbal medicine.
Nineteen century pioneers did adopt some aboriginal remedies but the Aboriginal influence on herbal
medicine in Australia was not long lasting (Low, 41). Kino (the resinous gum of eucalypt trees),
wattle and quinine tree bark, corkwood leaves and dugong oil were sold for a while (Low, 1990, p 40)
but their use in herbalism is no longer heard of. Kino from the river red gum was included in the
British Pharmacopoeia until at least 1949 (Low, 1990, p 85). Tea tree oil and eucalyptus oil are
probably the two Australian contributions to herbal medicine that immediately spring to mind but
commercial methods of distilling these oils and they way they are used now, is very different to
the way they were used by aboriginals. Aboriginal remedies relied on aromatic oils and tannins found
in the plants that they used but the properties of these chemicals contained in Australian plants have
not been investigated fully or incorporated into Western herbal medicine today. However some studies
are starting to be done.

The fuscia bush was used by aboriginals for just about everything including for washing wounds and
sores (Low, 1990,p99). One of these fuschia bushes Eremophilla Duttoni has demonstrated antibacterial
action against methicillin-resistant Staphylococcus aureus (MRSA) and vancomycin-resistant enterococci
(VRE) in invitro studies (Palombo & Semple 2002). Cardioactive compounds have been isolated from
Eremophila myoporaceae (Pennacchio et al, 1996).

Other Issues Relating to Modern Aboriginal Health care

Nurses in central Australia have found that Aboriginal beliefs surrounding pain are an important

consideration when caring for aboriginal women in hospital (Fenwick and Stevens, 2004).
They found that Aboriginal women expressed pain by withdrawing into themselves, as it is not culturally
correct for them to discuss pain possibly because of the connection between illness and things such as
violating taboos, that would make them too ashamed to complain. The study found that Non-aboriginal nurses
were expected to 'just know' (as their traditional healers would) that they were in pain whereas
non-aboriginal nurses would expect a patient will ask for pain relief when needed. Aboriginal patients
expected nurses to have the skills of their traditional healers to 'see within'.

Similar issues were identified in a study of palliative care for aboriginals in the Northern Territory
(McGrath, 2006). This study found that Aboriginals were reluctant to accept pain medication because
traditional rules about who should be providing their care, concerns about 'blame' and 'payback'
involved in their beliefs about illness, and because they feared that medications may stop them from
passing on traditional secrets and knowledge before death.

Aboriginal society has clear rules dividing the roles of men and women that have an impact in a health
care setting (Maher. 1999). This can cause problems for Aboriginals when seeking Health care in the
Western system. For instance a male doctor doing a gynaecological exam or a female nurse attending to
the intimate personal care of a male aboriginal patient. While these two examples are not directly
relevant to Western herbal medicine or naturopathy they do point to a need to be sensitive to
aboriginal cultural issues and act in a way that is appropriate for them.

These two examples are from remote rural areas of Australia where Aboriginals are more likely to be
living by traditional practices. It is difficult to know how much of the traditional beliefs are
still held by urban aboriginals. Aboriginal people now use a combination of Western and Traditional
medicine for symptom relief but many hold on to their traditional beliefs as to the cause of
sickness (Maher, 1999). It is important to recognize aboriginal beliefs when providing treatment
in a Western healthcare environment.

National Aboriginal and Torres Strait Islander Health Strategy Working Party (NAHS, 1988) define
health as a "life and death cycle" whereby "land, social structures, culture, spirituality and
story are all intimately related".

Australian Aboriginals have a much poorer health status and life expectancy when compared to the
larger Australian population. They have a connection to the land that few white people understand.
Their land is the core of spirituality and sickness and health are spiritual events. In losing
their land aboriginals also lost their good health. Degradation of the Aboriginal culture and
loss of control over their own lives has led to a spiritual despair and social instability which
needs to be addressed before the health status of Aboriginal people will improve.

Dreamtime or Dreaming is a concept that connects the land and people (Gibbs, 1974, p3).
It links the past and present, the living and the spirit world. The accumulation of losses trauma,
sickness, early death and grief from the past has a continuing effect on the well-being of future
generations of Aboriginal people that will be hard to overcome.

The belief that health comes from living up to your obligations to the land and your society are
rather foreign to many Westerners in today's world where the needs and wants of the individual seem
to be paramount. We can learn so much from Aboriginal people and their holistic view of health that
encompasses so much more than our 'person-centric view' of health. The 'whole person' idea of health
looks very short sighted when placed alongside the aboriginal picture of health that consists of
their whole universe both past and present.

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Appendix 1

Some examples of Bush Medicine

The following is a small selection of herbal and bush remedies to illustrate the wide range of
plants and other materials that were used for healing. It is by no means a complete list and
there a many different healing practices found in different areas and tribes.

Sores and infections

River Red Gum - eucalyptus camaldulensis- boiled inner bark rubbed on sores or scabies (Isaacs, 1998, p 204)

Kino- the resinous sap from gum trees called kino was used extensively by aborginals for its high tannin content
and astringent action (Low, 1990, p14). Dissolved in water and used for dysentry, sores, inflamed gums and sore
throats (Low, 1990, p 84).

Diarrhoea

Emu Bush-grewia restusifolia- as a decoction. High in mucilage. (Isaacs, 1998, p 212)

Clay- Arnhem land aboriginals eat small amounts of white clay or termite mound to cure diarrhoea(Low, 1990, p28)

Tooth ache

Wild Plum- buchanania obvata- inner bark packed into tooth cavity to ease pain (Isaacs, 1998, p 214)

Headache

Snake vine- tinospora smilacina - bound tightly around the head (Isaacs, 1998, p210)

Beach convolvus- ipomoea es-caprae- used in the Northern Territory, lightly roasted and pressed to the forehead (Low, 1990, p66)

Ants

On Elcho Island crushed green ants were rubbed onto the breasts of lactating mothers when the baby was suffering from a respiratory complaint so the baby could "smell the rubbing medicine and feel better" (Isaacs, 1998, p199).

Arrernte people near Alice Springs used a solution made by soaking meat ants to treat eye infections. (Dobson, 2007)

Ointments

In Aranda and Pitjantjatjara communities the roasted and powdered bark of hakea eyreana is mixed with emu fat and applied to burns (Pearn, 2005).

Ashes

Arrernte people used ashes from the fork leafed corkwood tree -hakea divaricata - to treat heat rashes on babies and for sores and skin irritations (Dobson, 2007, p45)

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