00:00:06:24 - 00:00:38:09

Bernard Namok

Hi and welcome to Yarning Disability, the FPDN Podcast, I'm your host Bernard Namok Jrn . I'm a proud St Paul, Badu and Erubian man from the Torres Strait. And I'm also the son of the designer of the Torres Strait Islander flag, Bernard Namok Senior and an advocate for the First Peoples Disability Network, join me now on yarning disability as we showcase First Nations people living with a disability as well as their families and carers and other industry professionals.

00:00:44:15 - 00:01:13:17

Speaker 2

Aboriginal and Torres Strait Islander people are warned that the following podcast may contain the voices and names of people who are deceased. The First Peoples Disability Network and the producers of this podcast recognize the traditional custodians of the land on which this podcast is recorded. They pay respect to the Aboriginal and Torres Strait Islander elders past, present and the future leaders of tomorrow.

00:01:13:17 - 00:01:28:23

Speaker 2

If pity and would like to acknowledge our founding elders and their lasting legacy, Uncle Lester Bostock and Aunty Gayle Rankin and acknowledge all first peoples living with a disability.

00:01:28:23 - 00:01:57:06

Bernard Namok

Wiradjuri and and Torres Strait Islander woman Katrina McKechnie balances a busy working life while raising four children on her own, two of which have disabilities. Katrina has ties to Saibai Island, Nadgee and Darnley Island in the Torres Straits and to the community of Bamaga in far north Queensland. But today she and her children live on the lands of the combined people on the sleepy coastal town of Woolgoolga, on the midnorth coast of New South Wales.

00:01:58:05 - 00:02:10:16

Bernard Namok

She, yarned with FPDN advocate, Carly Wallace, about her journey as a First Nations mum of children with disabilities and just a heads up. The following conversation may contain some coarse language.

00:02:14:13 - 00:02:37:07

Speaker 3

I'm a single mum. I work four days a week at the bilingual school here and the first one in New South Wales. I've only just thought of this job. I'm thinking about a month in now since school sent back and it's been pretty full on but also really exciting because I do like learning support, so I'm also working with kids with extra needs.

00:02:37:08 - 00:02:46:16

Speaker 2

So you've got four children. Can you tell me about your kids? First of all, like, who are they? What are they like? What's an average day look like in your house?

00:02:48:03 - 00:03:25:12

Speaker 3

Well, Jairus has just started high school, so that's like a whole different ballgame, especially from him going from, I guess, a private school education for the past couple years into a public school. He's really started to encounter all the things that we all go through as kids in schools. And I think it's been a bit of an eye opener for him, so I'm really just trying to navigate not being reactive, especially because he's never been that kid, just Zara is in year six, she's still at St Augustine's, she's got a diagnosis of ADHD and so on.

00:03:25:12 - 00:03:47:13

Speaker 3

The daily. Like she will just say whatever she thinks, whatever she wants, and especially like she's on medication, but she'll get to a certain point and she don't care. Like to drag a sibling, she'll slam shit in the house like it's full on, like, and I'm with her. Really had to learn not to take things personally when she's having an episode.

00:03:47:23 - 00:04:12:09

Speaker 3

Semi is six. He actually ah sorry he's not six he just ten seven and he comes to work with me when I changed him over school. So before I got a job there and I knew that there are accepting kids with extra needs and stuff and suddenly the second year of opening that school, I was going to be putting him over there just for the extra support and then I get a job there as the extra support.

00:04:12:09 - 00:04:28:03

Speaker 3

So and he's like, Oh, Mom, are you following me? Sort of. But yeah, I think I will probably do that for the majority of his life, like just as a bit of a protection thing. And then I've got Gracie and she's in preschool.

00:04:28:03 - 00:04:32:19

Speaker 2

So desire to semi have a disability diagnosis or.

00:04:32:19 - 00:05:08:18

Speaker 3

Sorry he does he's got is they the paid also says he has ADHD and then he's got like a global developmental delay with like his speech and I don't know there's some genetic abnormalities there which they don't think is why he has his state, which is good. So he's got more diagnosis then I guess just ah, but I actually don't think the ADHD really fits him properly because I just, I reckon I could just give all my kids don't we don't bother.

00:05:08:19 - 00:05:26:06

Speaker 3

We made one today, you know, like you really start to look into things. So he's got more extensive needs versus Jasira, who's got ADHD for her.

It's more her focus. She's she's very bright. What there's no delays but semi there is yeah.

00:05:26:13 - 00:05:41:16

Speaker 2

So when did I guess you realize obviously because Zara's older that maybe she might have some differences and look, I might have to look into that. Or has somebody else picked up on that or did you pick up on that As a mum?

00:05:42:12 - 00:06:00:22

Speaker 3

I sort of picked up on it, like when she would just be like like really emotionally. I don't ever want to say all over the place because not the what the right word, but it's like a regulation. Like it just not that it wasn't there. I'd just sort of started to realize like this tantrums a lot more. It's, it's really intense.

00:06:00:22 - 00:06:11:10

Speaker 3

Like, it's not it's not a gammin thing. And she gets over like she can really go on and on, which I guess not now I know it's like, ha. Like a pretty big part of ADHD.

00:06:11:24 - 00:06:21:17

Speaker 2

What was it like before you knew as like you're trying to work it out? Because I know a lot of how mobilized this kid's hotheaded because we didn't see disability like did you have that type.

00:06:21:23 - 00:06:50:16

Speaker 3

Of yeah like I actually am I still even to this day sometimes when I come out to this kid moves out but like because it was just so intense, like the intensity of it and I'm like thinking, I've got to deal with this shit on my own every day. And it's heavy and it's still heavy. But I think now, like it's been a couple of years in and I don't know if I've gotten better at it or if it's like the medication definitely helps.

00:06:50:16 - 00:07:21:12

Speaker 3

But yeah, like it was, it was really intense for a while and I think that actually her and Sammi both got diagnosis as in the same. Yeah, now that I'm thinking about it. Pretty certain he was first with ACA and she was a bit later in the year. Like it sort of just gave me like a little bit of a, like a really huge understanding of these like diagnosis and just, you know, going back into the workforce in the same year, I really started to see how much of a spectrum these diagnosis is.

00:07:21:12 - 00:07:25:00

Speaker 3

AH Yeah. With other kids across the board, I'm like, Wow.

00:07:25:01 - 00:07:48:22

Speaker 2

So yeah. And I think early diagnosis is something that is sort of how people but the issue is sometimes we don't always see disability in our community and we just are dealing with so many things. And you know, as, as a single mom, you know, you've had so many things over the years, no doubt, to, you know, survival stuff that people just go into when you try to raise children on your own.

00:07:48:22 - 00:08:10:22

Speaker 2

And yeah, like that emergency, I guess to get kids diagnosed isn't always there. So when you have two and one year and now you have some sort of explanation, I guess of like what you've been what you've been juggling with with that diagnosis, getting the actual diagnosis. Was it easy or was it really difficult for Zara?

00:08:10:22 - 00:08:34:15

Speaker 3

It was like handing out candy , nah gammin. It's quite easy because she just really fit the bill. I guess I didn't. I was a little bit taken aback by it because we'd been through COVID and there was like the home learning and she like she should finish her work by like the Tuesday night or the Wednesday. And I'm like, because, you know, the biggest thing is attention and focus.

00:08:34:15 - 00:09:00:10

Speaker 3

And I just thought, oh shit. Like this kid's just extra go to life. But then I realize now that she done really well learning that way because she could go into her room, mold everything up and be left alone so that, you know, the talking in the class, the other conversations, all of that stuff, it just wasn't there.

00:09:00:10 - 00:09:22:05

Speaker 3

But yeah. So her getting her diagnosis was quite easy with like the teachers reports and stuff like that. When I was doing like the meltdown sort of things and a little bit of the different stuff. So he was like, it's ADHD. Like it's, it's classic basically. And then we sort of left it. I didn't medicate her straight away, but I have for the past year now.

00:09:22:24 - 00:09:25:17

Speaker 2

How do you how come you left that for a while?

00:09:26:23 - 00:09:46:08

Speaker 3

Because, again, we you know, there's a lot of stigma, I guess, around these diagnosis is in our community and that you get from family. And I think being a single mum, a lot of my support comes from outside, like extended family. And I was like, oh, that's just, you know, she's just strong and like she's headstrong and blah blah.

00:09:46:08 - 00:10:08:24

Speaker 3

And it's like, well, yes, she is, but it's not like she's trying to be a bad child, like when there's an imbalance, you know what I mean? And often with disabilities, especially when it's like cognitive or psychological, because we don't actually see it, it's an internal thing. It's not treated the same as if she was in a wheelchair, which is really hard.

00:10:08:24 - 00:10:30:07

Speaker 3

And so I did like I sort of left it for a bit and I was like, now like, we need to try this and don't get me wrong, like, it hasn't fixed everything. Yeah, but there's some parts of it where I'm like, you know, that's just who you are. Like, she was talking about all my mum still getting in trouble for chatting in class and I'm like, Yeah, but you're like an 11 year old girl.

00:10:30:09 - 00:10:32:09

Speaker 3

Like that's, you know what I mean?

00:10:33:06 - 00:10:38:00

Speaker 2

It's hard to distinguish what's the behavior of the disability as opposed to just being a normal kid, right?

00:10:38:01 - 00:10:59:08

Speaker 3

Personality. Yeah, but and she is like a really sociable kid and whatever, like all of those things. But yeah, it's her being medicated. Like I was having that year of not doing it was a lot of outside influences. And then I got to a point where I was just like, You know what? Like stuff this like, I need to do, number one, what's best for her.

00:10:59:21 - 00:11:21:16

Speaker 3

And I had at least and then when I did, I was like, Oh, well, that was actually what was best for me too, because she dropped the whole, a whole other level like in just her her way from being emotionally up here like 90% of the time to like, you know, yes, she'll hit a peak, but she can come back down so she could regulate a lot better.

00:11:21:24 - 00:11:40:01

Speaker 3

And I remember one of my closest cousins when we'd gone up to Brisbane to see Catherine and she was like, Oh yeah, 100% like you can say a really big difference in a let's say I think it's really working in education. You see a lot of kids like this as well. I went noticed a difference and then medicated or not and Catherine could pick up on it.

00:11:40:01 - 00:11:58:05

Obviously she was close to us on that. But yeah, like it was one of the best decisions for me to try it and I had to, yeah, consider what was best for my child. But I also know how hard it is when dealing with mob and extra family and it's like, Oh, you're giving them drugs all of it's legalized speed.

00:11:58:05 - 00:11:58:23 Speaker 3 And it's like.

00:11:59:13 - 00:12:03:18

Speaker 2

There's a lot of ifs out there and a lot of like misconceptions and 100.

00:12:03:18 - 00:12:18:13

Speaker 3

Percent and we're still because it's a controlled drug, obviously, for her, I've got to say, the paid every three months, which is time consuming. But that's what I have to do for us to stay on top of it. So adore it.

00:12:18:18 - 00:12:23:17

Speaker 2

And what about semi with his diagnosis, was it a difficult to to get done.

00:12:23:19 - 00:12:51:05

Speaker 3

He had to referral by Doctor Naidu to this place of Randwick Hospital down in Sydney and they actually specialize in like I don't want to say diagnosing kids but kids with like delays and like these things that they can't quite pick. So he thought he had some sammi had ASD but he didn't diagnose him. Semi actually got referred, he was actually diagnosed on a zoom call with these people.

00:12:51:15 - 00:12:53:05

Speaker 2

Okay. How did you feel about that?

00:12:53:10 - 00:13:22:18

Speaker 3

I was it was a yeah, it was really weird. I was like, haven't even I got really defensive actually. Like, you know, you met the kid. But now now with my understanding of autism and the way it can present in children, like I know now that there was a lot of things that I didn't see, but I also know that was due to a limited understanding of what it was like.

00:13:22:18 - 00:13:40:20

Speaker 3

I just thought he had a speech delay, you know. So we started to chase that up, worsen the initial speech we saw. And he's so lovely through like the hospital and whatever I can do straight away. He's like I say, But you can't just say that to parents either, you know what I mean?

00:13:41:01 - 00:14:03:23

Speaker 2

It's it's a tough subject, isn't it? It's like the changes people's worlds, right? It changes your whole household. Like, because now in the same year, you've got two children with disabilities and like really made their own support. You know, they need extra support. It's not different sport. It's just like, Oh, we need to do extra things for them so they can live their best life, right?

00:14:03:23 - 00:14:07:19

Speaker 2

And so you can have a functioning household.

00:14:07:19 - 00:14:09:18

Speaker 3

That fold and family like it.

00:14:10:01 - 00:14:30:12

Speaker 2

Yeah. Yeah. So giving that diagnosis, like, was there any cultural kind of aspect that ever came into this diagnosis? Like did everyone in those places, hospitals and others, was there anyone in a cultural, I guess, job or position that came in those those times in the health system to help you through this?

00:14:30:20 - 00:14:50:12

Speaker 3

I think we were actually in a really shitty position when all of this happened with it being 2020. Yeah, I guess like that with Sammi being diagnosed as something like we never went to Sydney but like I know, I know what's the right diagnosis and it was all played by stuff that I was leading and they were just watching.

00:14:50:20 - 00:15:09:11

Speaker 3

There was a little this agent say that sort of helps link you up with like NDIS service and does all the you know for Sammi was still young a lot of it was that early intervention stuff until he got his diagnosis and then could get a better NDIS package in that. And that was a career guy that worked there.

00:15:10:01 - 00:15:32:11

Speaker 3

He was a bit shit with his job, but his manager and she was this white woman like she was really on to it and I think she was on to it because number one, like I think she's saying that I was becoming very disconnected. Yeah. Like I just can't deal with this like working of about four kids and my things have changed so much now.

00:15:32:11 - 00:15:50:20

Speaker 3

Like with my youngest being in preschool, just a little baby, you know, sleepless nights. There's all of these things that factor into it. And I was like, You know what? I really don't give a fuck about these

diagnosis. But basically that was my attitude, especially to Sammy. I was like, Well, he's got it. We'll navigate it. What I can do with this right now.

00:15:50:20 - 00:16:13:04

Speaker 3

But she was really patient and like she didn't give up. And I think sometimes as more we need those sort of people that aren't going to be lax or relaxed in their approach to us. And she was really good with that. So she was really good. And Gulbumbila is a the Aboriginal medical services, the child health nurse, she's amazing.

00:16:13:13 - 00:16:37:14

Speaker 3

But she's saying like all of our kids, like, you know from babies all the way through. So she was really good with appointments, with just a yarn, with stuff being faxed over to the page like she was really good. So I think you find like I don't even want to say services. I think it's more one or two people in these services that actually give a crap about what they're doing.

00:16:38:03 - 00:16:49:12

Speaker 3

But like any place, it's like, I'm just here to do my job, the 9 to 5 for me. But when we're dealing with people, you can't always have that approach because it's people and families and that's children like.

00:16:49:12 - 00:17:12:19

Speaker 2

And those disabilities don't switch off from 9 to 5. They keep going right and supports. Now it's like we need the like ADHD is not on the NDIS list as a disability, you know, for people with ADHD, they're not going to be able to get support for NDIS. So someone like Jasira when she's a bit older as well, like I'm sure you could do with that now.

00:17:13:11 - 00:17:14:10

Speaker 3

Really then you.

00:17:14:10 - 00:17:17:08

Speaker 2

Know what I mean. Like how does that affect you? Like should it be on the list?

00:17:17:15 - 00:17:36:12

Speaker 3

Oh, look, I definitely think it should in terms of like, you know, like that respite and there's someone to come in to be able to do activities with them because it's really hard. Like, obviously I'm her mother, but it's like you have to be present all the time for your kids. And it's like the kids just had a meltdown.

00:17:37:00 - 00:18:07:08

Everyone else made shit dumb and you've still got to be in control. And sometimes it's like, oh, like it really feels like an uphill battle. So for ADHD to not be on the list for NDIS is it's all shit and it makes it really challenging because Sammy's got a package I know I can tap into and just hours got shit what had paid bulk billed so she can be medicated Sammy doesn't need medication.

00:18:07:08 - 00:18:24:14

Speaker 3

No concentrate at school. You know, it's two completely different things. And basically ever since his diagnosis for Sammy, I haven't taken him back. I haven't taken him back to the page. That's been like a couple of years now. Now doctors at the Aboriginal Medical Service are like, Oh, we should probably get him back in, but I'm exhausted. Yeah.

00:18:25:05 - 00:18:30:04

Speaker 3

So they going to which child needs more? It's like I know for now he's okay.

00:18:30:13 - 00:18:34:01

Speaker 2

Yeah, it's moving, it's managing. Like what you can handle, right.

00:18:34:09 - 00:18:34:17

Speaker 3

Yeah.

00:18:35:00 - 00:18:54:01

Speaker 2

And sometimes you should just be able to be a mum, not a carer, not a child to handle everything. Like you should just be able to be Jasira and Sammy and everyone else in the households. Mom But if you need some support and some respite, you should be able to get that in and then have good mum time with her as well.

00:18:54:06 - 00:19:19:04

Speaker 3

So a lot of things so tense and charged all the time. Yeah, you know, the medication has made it better, but now we're at a different stage because she's hitting puberty. So there's pretty hormonal changes happening as well. We've got an imbalance. So Jesus Christ, but it's full on. But I mean, when navigating it and we're getting there, but it's definitely not easy.

00:19:19:22 - 00:19:45:03

Speaker 2

These systems, I guess, are the things that amp up against and they put the barriers in place, you know, when we're just trying to get get through. But that that medical model of fixing and diagnosing and prescribing, yes, it needs to be there. But we also kind of think about things in our culture of like a cultural model of care, you know, like on top of having some medication, what else would my children need?

00:19:45:03 - 00:19:51:06

Speaker 2

And I guess what role does culture play in your kids lives and their care alone?

00:19:51:09 - 00:20:20:03

Speaker 3

I think culture is actually what brings them back down and what forges jisara know, I know when she's she's done a fair few weaving workshops out at Yarrawonga and it's because her hands are busy and she's got to concentrate. And it's quite, you know, it's it's just soft yarns and it's you're outdoors. So there's all of these good things happening, thereâ \in TMS vitamin D, thereâ \in TMS a yarning circle sort of happening.

00:20:20:16 - 00:20:33:24

Speaker 3

And you don't like when we're out there on these days I won't say the kids for three or 4 hours. She's sitting there engaged in this activity that is regulating helping her regulate herself, I guess therapeutic.

00:20:33:24 - 00:20:36:12

Speaker 2

But she's sitting and listening and just yeah.

00:20:36:24 - 00:20:51:03

Speaker 3

She's in this whole other zone, so little things like that. And what I really need to pursue this more for you because I know how good it is for you. And then Sammy like, oh my God, she's like the proudest black kid ever.

00:20:52:00 - 00:20:52:20

Speaker 2

Tell me about.

00:20:52:21 - 00:21:21:15

Speaker 3

What it was like. And yeah, and I mean, because Jarvis is just like, United's a blackfella, but, you know, he's he's not out not out there, but he's he's not shamed, but he's like, Yeah, well, I know. I'm like, I don't need to go on. And I have a service like yes mum Aboriginal school and Aboriginal flag and all of this, but like a lot of what they do and with it being bilingual, so it really is establishing that connection to land and culture and country and that connection like.

00:21:22:02 - 00:21:41:10

Speaker 3

So he has just thrived and hasn't even been a full term but all the language and because he's had that speech to life when he first started and he does it a lot and I shouldn't laugh, but like when he's not in a comfortable social setting, or if he doesn't know you, he won't. He won't talk. And everyone's like, Oh, he's real shy.

00:21:41:10 - 00:22:02:05

Speaker 3

And I'm like, Well, you're like you could say that. But it's more his confidence within himself to speak, isn't there? Because, you know, he's delayed being delayed by a couple of years, but like would be at home or like, you know, we're driving home one day and he's like, Mom, I got to jump out, I got to go jalibuy

00:22:02:05 - 00:22:23:03

Speaker 3

I mean, using, like, their language word for toilet. And this is after like two or three weeks at school. And I was like, okay, how do you like driving and trying to get at like, you know, just rush it, but now he's become a lot more comfortable to give that like the combined your language and that echo. And I said to him one day, like before I started school, I said, you know, we're not from gumbaynggirr we're not from here.

00:22:23:03 - 00:22:47:22

Speaker 3

And he cried and I'm like, Yeah, because he's so attached to it, you know, the language and like and it also is because like there's a whole lot of other factors, but this is where it's strongest for them because we're so far from our own. Yeah. Which it really does suck at times, and I wish I could give them that more, but you know, like we do the best with what we can.

00:22:47:22 - 00:23:02:10

Speaker 3

And I think for him and the setting he's in, like he can only thrive because that is right beside his education. Like it's not something that is two separate things. It's all intertwined.

00:23:03:01 - 00:23:12:12

Speaker 2

And it's working side by side and yeah, western and traditional together and it's having great results for him. So that's awesome.

00:23:12:21 - 00:23:13:05

Speaker 3

Yeah.

00:23:14:10 - 00:23:41:10

Speaker 2

Yeah. So like you were speaking earlier about, you know, your oldest kids and they're getting a bit older puberty coming into the thing and then their identity as, as you know, visible black children as well, I'll say for people that don't know you and your children, what's I guess you know that we talk a double disadvantage, right, to our mob who have disabilities that are also discriminated against because of their race.

00:23:41:10 - 00:23:58:21

Speaker 2

And that's a very real issue in our community. It leads us to places like the justice system and all these issues. As you know, I, I guess what I'm

asking is like, what's your biggest fear? What some of your fears as a mom of of children with depression, all the children with disability? I know it's a hard question to to.

00:23:59:02 - 00:24:39:14

Speaker 3

Sort of already feel that I'm you just don't want your kids to be to end up in those systems. And I mean, you know, I know that my son that's older with learning disabilities is struggling. So imagine what our children with disabilities will go through and especially like I think colleges are because this I can know her self-regulation is quite you know and I know being at the Catholic schools it's not that the the better than a public school don't get me wrong, because there's stuff there.

00:24:39:14 - 00:25:00:22

Speaker 3

But I mean, you know, there's a lot of these lessons that are about love and kindness and it's really pushed with them. But once you're in high school, it's like open season. I know for her I'm like, use will push her too far and she will she will slot somebody and what will come out of it mouth will not be nice at all.

00:25:00:22 - 00:25:19:23

Speaker 3

Like, you know, like the minute the minute like like Jairus was in the car telling us about one boy and he's like, Mum, just all day it's been calling me a black girl, the black say and blah blah blah, and her straightaway from the backseat. She's just not the kid to mess with. And it's okay when you're a child.

00:25:20:14 - 00:25:37:17

Speaker 3

But there's a certain point where, you know, if you're going to be flogging up white kids man, you're going to get charged like and it's not right. But how, you know, it's such a it really makes me worried to let her go into that. So I've been looking at like, you know, I guess in terms of further education for her.

00:25:37:17 - 00:25:56:12

Speaker 3

I'm at school where I am now. They're looking at opening up like a bit like the Murri school where it will be like kindy to year 12. She could go there in year 8, she's too smart for me to repeat I can't keep her down in year six. I'm like, right, so you've got a disability, but you are super smart.

00:25:56:12 - 00:26:15:24

Speaker 3

So, but you know, it's like, I can't not push her. Like she's got to move on sort of thing. So I was thinking of maybe I'm doing like a bit of like distance education for her because I know she's like really good with her own learning and then like coming over to work in. Yeah, right. But I guess we'll navigate that a bit further.

00:26:15:24 - 00:26:44:11

Speaker 3

I'm like a bit later down the track in a couple months time, I'll have to really consider what I'm going to do with her because I know she's not the child and she never has been even prior to having a diagnosis or anything. She's not the child to test. And then for Sammy I'm like, Oh, because when we were at the geneticists for all the genetic stuff, you know, they do your height and your weight and they take they really like and I don't want to say the work because it wasn't like that when I was in the appointment.

00:26:44:24 - 00:27:03:03

Speaker 3

But they really scrutinize you. Like I take photos of his face and it's to check for any abnormalities. It's a difference in his head size, his foot size, and they measure everything. They basically ask him to take his shirt off his he stood there, you know, just that would really lovely about it. But no one no one gives you a heads up.

00:27:03:03 - 00:27:29:01

Speaker 3

And that's the thing. You know, I didn't know that this is what this appointment meant, what was going to happen when they went and done that. So he's like 90th percentile for height and weight He's a big black boy now, but he's going to grow into a big black man with a disability. And it's like, oh, you know, like it actually really scares me and him, you know, like out of all the kids, he's really tolerant.

00:27:29:01 - 00:27:48:00

Speaker 3

Like he puts up with a lot from the others before he'll react, but when he reacts, like he'll drive them and he's not afraid of Java. So Zara and they got like five or six years on him, you know, like yeah, it's like open season when he starts and I've physically it's like because once he gets to that point is wild and that's it.

00:27:48:00 - 00:28:16:05

Speaker 3

And you know how some of our kids go like, you know, it's like, that's it. Especially for their brothers and sisters. They yeah, yeah. So I'm like, that sort of scares me for him because I'm like, you know, but, but I know what will save him is the fact that he's over where he is now. And he's only gone to school with other black kids where it's like his blackness is like celebrated, you know what I mean?

00:28:16:05 - 00:28:29:04

Speaker 3

And there's that culture and all that. So I think that is something that will really help to bring him back. And there's other pathways within that, but there's no way I'd put him into a normal high school.

00:28:29:11 - 00:29:01:15

And it's hard, isn't it? Because like other parents, like people with kids that don't have disabilities, you know, they never get parenthood. And it's hard for everybody. Everyone has their own challenges. But the added difficulties of race, you know, and and our society for our mob and our own country. And we know what it's like, you know, when our kids present differently to society with their disability, it often is misunderstood on top of their race and it leads to all sorts of places.

00:29:01:15 - 00:29:17:16

Speaker 2

So it is something that most parents would not have to think about, whereas Aboriginal mothers, Social Islander mothers have to think about how do I protect my child on an extra level, which is it's not fair, hey, it's really doesn't a.

00:29:17:16 - 00:29:35:16

Speaker 3

Hundred percent it's not. And I think about a year ago, maybe 14 months ago now, I was actually thinking of packing up and going back for my it was actually it was just before Sammy started school and I was like a new like in my head. I was weighing it up because I'm like, what are the pros and cons?

00:29:35:16 - 00:29:54:11

Speaker 3

And that was one of the biggest things of why I want to go back. I'm like, if you're around people that are just like you and that look like you, yes, you will have a disability. But your family is here. Like my kids really do stand out like a sore thumb. And when not, you know, it's not really our mob.

00:29:55:00 - 00:30:15:14

Speaker 3

And I don't mean to take that away from the really amazing support networks that we do have. Yeah. Especially like the friends and that, that we have made. But when they're around their own mob, it's like it's almost like there's a bit of safety in that. Like there may be mocking or whatever, but it's more like a quirk rather than a slow, you know.

00:30:16:08 - 00:30:20:11

Speaker 2

We see each other as each other. Yeah. Like I think that's what. Yeah.

00:30:21:07 - 00:30:41:02

Speaker 3

And I think, you know, prior to, it's not even prior to colonization, but early colonization, you know when you, you read the stories and accounts of like white people that were accepted into mob and you know what? Like we only have to look around us now to say how many of these watch white fullas or whatever we had.

00:30:41:07 - 00:30:43:02

Speaker 2

That took about my dad like that nah gammin

00:30:44:15 - 00:31:15:07

Speaker 3

Theres so many mob in my family that are like that, too, and they're basically like they find a place among mob. Like I feel like mob super accepting like I hate taking desirous to anything that is to do with mob like any events or anything they when she's around mob the way that she present it's not seen as a she's this dominant aggressive kid it's like all she's staunch and she is she'll tell whoever straight like, oh, hang on, that's mine or that's my brother.

00:31:15:09 - 00:31:32:02

Speaker 3

And, you know, and I'm like, oh my God. He she goes like, Yeah, that mob. They don't take that offensively. They say this side of her, you know, whereas when she's around white people, it's like, Oh, you're disrespecting me. You speaking out of line, you shouldn't walk back.

00:31:32:02 - 00:31:36:23

Speaker 2

And she's polarizing as opposed to staunch and to different communities. Isn't it funny?

00:31:37:04 - 00:31:42:18

Speaker 3

And it's really hard for her to navigate like she's sent out of class like every other day.

00:31:42:18 - 00:31:52:13

Speaker 2

And if you found the right person to work with her and the right teacher now harnesses that stop, it's a different story, right? You know, she different stories.

00:31:52:13 - 00:32:21:04

Speaker 3

Yeah. And I mean, I think for Sammy you know, like at work where he is like we're all Aboriginal staff and everything. It's almost like a family sort of thing because our school is quite small and I think just having teachers that a mob just it makes a massive difference even if you had like white teachers. So there's this one teacher over where Zara is and I used to work there too, but she's been married into my husband.

00:32:21:04 - 00:32:44:01

Speaker 3

She got three kids, you know, knows what it's like out of Brewarrina And like, you know, she knows what it's like to be around mobs and how to work with mob children to bring out, you know, their strength. She thinks $Jisaraâe^{TM}s$ great Yeah. So I'm like, if only you know, you could have been a teacher, but you get what you get and you try and navigated the best you can.

00:32:44:10 - 00:33:02:21

Well, I think the thing, too, is that we have had to walk in two worlds for so long, four generations as blackfellas. I think there is that. Now we can point the finger and say, Hey, I would love you to walk in our world and understand us. So I don't think that's something that you should take what you get.

00:33:02:21 - 00:33:12:06

Speaker 2

I think it's us, you know, self-determination and wanting better. What's what do you hope? Sweet children, all your kids, especially kids with disabilities?

00:33:12:12 - 00:33:34:20

Speaker 3

I actually and it's probably like, oh, probably a bit of a gammin thing, but like I just want them to grow up and to be happy and safe. Like, you know, I want them to be able to navigate the world without these barriers of, number one, being black or to being disabled. You know, there are two really big things that they have to overcome.

00:33:35:04 - 00:33:57:18

Speaker 3

And then it's like Al Jazeera and I'm like, Oh, and you're a girl. Like, you got to be a black woman. And staunch girl, you know? And it's not a bad thing. But I just I just know it's not going to be easy for them. That worries me. And then I sort of think, you know, I'll get to a point like love.

00:33:57:18 - 00:34:18:21

Speaker 3

Obviously, I'll die. It's like who then will be the person to advocate and step up for these guys and without a doubt like, I know, desirable advocate for herself and my family. But, you know, it's it's such a big it's my that's my main worry because them all I want is for them to be able to be okay.

00:34:19:04 - 00:34:33:08

Speaker 3

Like they grow up, be happy, do what makes you happy, you know, in the context of not do whatever you want, there's obviously limits, but just to be happy and functioning within society means.

00:34:33:08 - 00:35:29:21

Bernard Namok

Thanks to Katrina McKechnie for sharing her family's story on yachting disability. If there's anything you heard in today's episode that raises concerns for you, there is help available. You can contact one three Young on 1390 276 or beyondblue on one 300 double to 4636 or Lifeline on 13, 11, 14. Thanks for listening to Yarning Disability. I'm your host Bernard Namok Junior. Follow FPDN and on our social media accounts to stay up to date with future episodes and information, you can also visit our website at www.fpdn.org.au