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## Weaving Wayapa and cognitive behaviour therapy: applying research topic yarning to explore a cultural interface between Western and Indigenous psychology practice in Australia

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### ABSTRACT

**Background:** Indigenous Psychology within Australia reflects the traditional knowledges of Aboriginal and Torres Strait Islander Peoples and their understanding of the cultivation of relational social and emotional wellbeing (SEWB). However, these perspectives are poorly incorporated into dominant “Western” psychological theories and practice, such as Cognitive Behaviour Therapy (CBT). This represents a barrier to the cultural safety of current mental health practice and its decolonisation within Australia.

**Objectives:** This study brought together CBT Practitioners and Practitioners of an Aboriginal Wellbeing practice (“Wayapa”) to engage in a series of yarns (guided focus groups) to share perspectives, insights, and stories on their own and each other’s practices.

**Method:** Indigenous qualitative research approaches including Research Topic Yarning were engaged to decolonise the research environment and support dialogue at the cultural interface of the two practices.

**Results:** Through experiencing Wayapa, CBT practitioners reflected on gaps in their own practice, with an enthusiasm for the opportunities that Wayapa provided to decolonise their practice. Wayapa practitioners were able to celebrate the holistic nature of their practice and the possibility for it to inform dominant “Western” psychological theories and practice, such as CBT, and encourage a more connected and culturally safe way of working with First Nations peoples.

**Conclusions:** Creating safe cultural interfaces between “Western” and Indigenous Psychologies, and building awareness of the value of Aboriginal grounded wellbeing models, can help to promote and expand culturally safe practices within Australian psychological practice.

### KEY POINTS

#### What is already known about this topic:

- (1) The cultural safety and relevance of CBT for Aboriginal and/or Torres Strait Islander Peoples remains uncertain.
- (2) There is limited knowledge of Aboriginal wellbeing practices and Indigenous Psychologies amongst non-Indigenous Australian mental health practitioners, including psychologists.
- (3) Broadened understanding of Aboriginal wellbeing practices such as *Wayapa Wuurrk*, may contribute to decolonising psychology in Australia.

#### What this topic adds:

- (1) CBT and Wayapa share common and unique tools and concepts that can support the social emotional wellbeing of all Australians.
- (2) Wayapa Wuurrk concepts such as earth mindfulness and the centring of Country as a foundation for wellness and social emotional wellbeing represent gaps in current CBT practice.
- (3) Work at the cultural interface of “Western” and Indigenous Psychology offers a pathway to promote appreciation for, and active utilisation of, Indigenous psychologies including the social emotional wellbeing framework (SEWB).

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### KEYWORDS

Indigenous psychology; social and emotional wellbeing; Aboriginal and Torres Strait Islander Peoples; cognitive behaviour therapy; culturally responsive psychology practice; Indigenous research method

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In this article, we recognise both Aboriginal and Torres Strait Islander Peoples as the First Nations of Australia. We acknowledge and pay respect to the knowledge that Aboriginal and Torres Strait Islander cultures are unique, all with their own languages, knowledge systems, beliefs, and histories. We recognise the collective terms they prefer also vary. With respectful consideration to these preferences, typically we will specify Aboriginal *and/or* Torres Strait Islander Peoples when referring to First Nations Peoples in this article. From time to time, we use the term Indigenous. However, we note that for many Aboriginal and Torres Strait Islander Peoples, this is not preferred. As such, we have only used this where we are referencing it's use from another source, or it is the established use of the term, such as its use in "*Indigenous knowledges*". Where referring to individual Aboriginal and/or Torres Strait Islander people, we have endeavoured to incorporate their preferences, including for example, reference to the Country they are connected to.

## Introduction

Indigenous knowledge is defined as the traditional knowledge and cultural expression of Aboriginal and Torres Strait Islander Peoples (Australian Government, n.d.). This knowledge has promoted relational, collective, and environmentally conscious actions for human and planetary wellbeing for tens of thousands of years (Dudgeon et al., 2023; Redvers et al., 2020) and is represented in Indigenous psychological paradigms of mental health and wellbeing (Dudgeon & Walker, 2015; Gatwiri et al., 2021; Gee et al., 2014; Westerman, 2004). Regrettably, "Western" psychological paradigms and practices continue to dominate in Australia and typically fail to take account of these Indigenous psychological frameworks and the need for cultural safety in their delivery. This may be a significant driver of poorer access to mental health care for Aboriginal and/or Torres Strait Islander Peoples when compared to non-Aboriginal Australians (Isaacs et al., 2010) and subsequent disparities in their mental health and wellbeing (Redvers et al., 2022). It also represents a failure to recognise and value Indigenous knowledge systems and healing approaches that have the potential to enhance current mental health care for all Australians and contribute to the decolonisation of the therapeutic space (Milroy et al., 2014; Walker et al., 2014).

Aboriginal and/or Torres Strait Islander Peoples view their individual health (including mental health) as inextricably linked with the health and wellbeing of their culture, community kinship networks, and their land (known as Country; Burgess et al., 2009; Fatima et al., 2023). Protecting and preserving these aspects fosters Aboriginal and/or Torres Strait Islander Peoples' individual and community wellbeing (Gupta et al., 2020). As such, Indigenous perspectives on mental health can differ from "Western" ones, which are typically focused on individual psychological factors and emphasise self-agency to the detriment of social and structural factors (Dudgeon et al., 2023). Notably, there has been a resurgence of psychological concepts in

"Western" practice that take account of social and ecological determinants of mental health (e.g., Bronfenbrenner's ecological model of human development; Bronfenbrenner, 1979), highlighting a growing awareness of their importance in conceptualising health and ill health (Blunden et al., 2023).

Deriving from this wholistic and dynamic view of health, the Australian Indigenous Psychologists Association (AIPA), in consultation with Aboriginal and/or Torres Strait Islander Peoples, developed the Social Emotional Wellbeing Framework (SEWB; Gee et al., 2014). This framework describes the various domains that collectively contribute to Aboriginal and/or Torres Strait Islander Peoples mental health (typically referred to as social emotional wellbeing) and recognises the continual influence of historical, political, and social determinants. It outlines that to facilitate sustainable support and improvement of Aboriginal and/or Torres Strait Islander Peoples' mental health, connections to these various domains (e.g., ecological, spiritual, and social) must be recovered and protected and that the risks and protective factors relevant to each domain must be attended to (Ralph & Ryan, 2017).

However, the extent to which these Indigenous frameworks *are* or *can be* incorporated into current "Western" psychological models and therapies is under researched. A recent systematic review reported on the effectiveness of current psychological therapies with Aboriginal and/or Torres Strait Islander Peoples (Ponturo & Kilcullen, 2021), suggesting that certain "Western" approaches could be adapted to be more culturally relevant for these peoples. For example, qualitative work led by Kilcullen et al. (2016) suggests that components of Cognitive Behavioural Therapy (CBT) may especially align with Indigenous perspectives on mental health and therefore could be suitable and helpful for Aboriginal and/or Torres Strait Islander Peoples. This study, which aimed to identify similarities and differences in how Aboriginal and/or Torres Strait

Islander Peoples described and understood their mental health within both the SEWB (Gee et al., 2014) and CBT frameworks (Beck & Haigh, 2014), found that cognitive and behavioural coping skills, and the knowledge required for promoting mental health and SEWB, had cross-cultural relevance. Therefore, these components of CBT could represent common space from which non-Aboriginal CBT Practitioners could work with Aboriginal and/or Torres Strait Islander clients helpfully. Nevertheless, it was also found that culture, family, and kinship networks and connection to Country, recognised by participants as vital and dynamic elements of protecting mental health, were missing in typical CBT frameworks. The authors concluded that building understanding in non-Indigenous practitioners of the cultural and social context in which Aboriginal and/or Torres Strait Islander Peoples view and build their mental health was therefore critical. In a similar vein, Ponturo and Kilcullen (2021) also concluded that while some current therapies including CBT, Acceptance and Commitment Therapy (ACT), Narrative Therapy (NT) and Multi-systemic therapy (MST) shared cross-cultural therapeutic elements with SEWB, Aboriginal and/or Torres Strait Islander Peoples need to be consulted to improve our understanding of the acceptability of these models and how to accommodate culturally relevant adaptations.

Prominent Aboriginal voices in Psychology, including Bardi woman, Psychologist, and Academic, Pat Dudgeon (e.g., Dudgeon & Kelly, 2014), also caution that the evidence for the effectiveness of CBT for Aboriginal and/or Torres Strait Islander Peoples remains tentative. They argue that current research cannot overshadow the importance of restoring or strengthening cultural connection to reduce psychological distress for Aboriginal and/or Torres Strait Islander Peoples, nor should it ignore or minimise the importance of inter-generational experiences of trauma and loss associated with colonisation and dispossession (Milroy et al., 2014). Furthermore, they propose that both Australian and other First Nations Indigenous perspectives on psychology, including cultural practices central to Indigenous health and wellbeing, continue to be marginalised within Australian practice. This is despite their potential to improve mental health outcomes for not only Aboriginal and Torres Strait Islanders people but non-Indigenous Australians alike (Dudgeon et al., 2023). Consequently, broadening knowledge of Australian Indigenous wellbeing practices represents an opportunity to

promote and elevate Indigenous psychologies and conceptualisations of mental health and SEWB in the Australian context.

### **The current study**

*“Wayapa Wuurrk”* (or Wayapa), is an Aboriginal wellbeing practice co-founded by Gunaikurnai Maara man, Jamie Thomas, and non-Aboriginal woman Sara Jones. Grounded in Aboriginal wisdom, Wayapa recognises that the health and wellbeing of the individual is in constant and dynamic relationship with the health and wellbeing of the natural environment and community. Honouring 14 elements related to the earth, kinship, and spirituality, the practice is closely aligned with the SEWB Framework (Figure 1) and combines earth mindfulness, narrative meditation, physical movements, and the sharing of Indigenous knowledge systems to support the care of and “connection to Country” and SEWB.

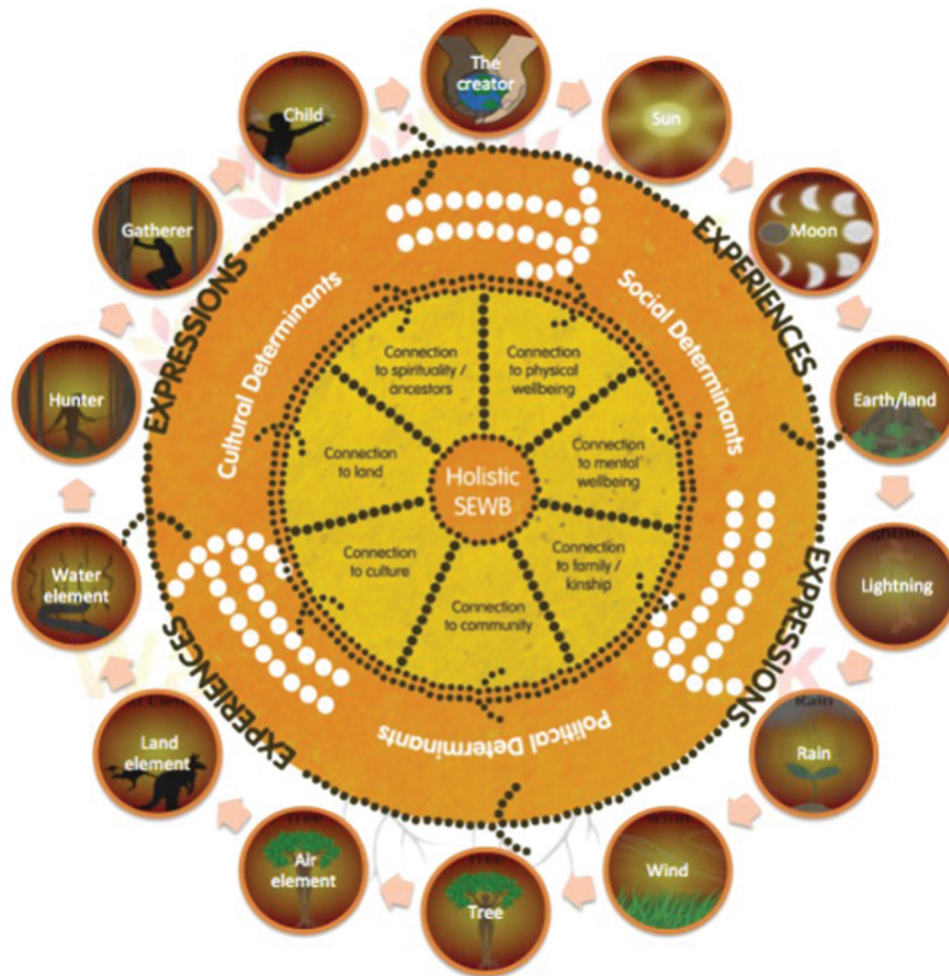
Like other Aboriginal wellbeing and healing practices, there is limited understanding amongst “Western” practitioners of the value of Wayapa for the promotion of SEWB amongst Aboriginal and/or Torres Strait Islander Peoples and non-Indigenous Australians. This is unfortunate since by reflecting the belief held by many First Nations Peoples that human connection and caring for the Earth enriches purpose, belonging and holistic wellbeing, Wayapa offers an opportunity to broaden our understanding and acceptability of Aboriginal wellbeing practices amongst existing mental health treatments like CBT.

As such, the current study aimed to explore CBT alongside the unique, contrasting, and complementary concepts and tools found in Wayapa. As most psychology research has been harmful rather than helpful for Aboriginal and/or Torres Strait Islander Peoples (Dudgeon et al., 2020), Indigenous ways of knowing, being and doing were privileged (for a discussion of decolonisation, we refer to the work of Indigenous scholar Datta, 2018). Utilising a qualitative approach, the primary research questions of the study were: what are the unique practices and concepts embedded in Wayapa?; (2) what are the unique tools and concepts embedded in CBT?; and (3) what, if any, are shared tools and concepts between Wayapa and CBT?

### **Materials and methods**

#### **Study design**

As the overall purpose of this research was to spotlight and give space to Aboriginal epistemologies and ways of practicing knowledge (Wayapa), a qualitative



**Figure 1.** Conceptual model of Wayapa Wuurrk: connection to elements strengthening indigenous social and emotional wellbeing.

approach was employed. Qualitative research is also viewed as more aligned with Indigenous frameworks and ways of relating (Rigney, 2006). Beyond this, its use in the current project also sought to balance the predominance of published quantitative evidence, which often fails to recognise how lived experience and other forms of knowing are important contributors to understanding how therapeutic practices can support health and social and emotional wellbeing (Australian Psychological Society [APS], 2020).

*Yarning Circles* represent the oral language tradition used among many Aboriginal and Torres Strait Islander communities (Faulkhead & Russell, 2006; Garvey et al., 2021), while the everyday form of “*Yarning*” refers to a cultural form of conversation in Aboriginal and/or Torres Strait Islander families and communities, imbued with respect and reciprocal listening and exchange (Bessarab & Ng’andu, 2010; Geia et al., 2013; Hughes & Barlo, 2021). Whilst the conventions and protocols of

*yarning* vary across different Aboriginal and Torres Strait Islander cultural groups, this study adopted Research Topic Yarning (RTY) whereby *yarning* is described as “... an informal and relaxed discussion through which both the researcher and participant journey together visiting places and topics of interest relevant to the research study” or a “*yarn with purpose*” (Bessarab & Ng’andu, 2010, p. 38). RTY is a well-developed research approach that draws on *yarning* to gather community input into areas of importance to Aboriginal and/or Torres Strait Islander groups (Kennedy et al., 2022). Knowledge arising from *yarning* in a research context is always positioned in relation to the social context in which it is shared, including its relationship to land and culture. RTY involves a loose conversational approach amongst researchers and participants regarding questions of shared importance (Byrne et al., 2021; Kennedy et al., 2022).

RTY was employed for data collection within a broader participatory action research (PAR) framework (e.g., Rumsey et al., 2022). Like *Yarning*, PAR protocols when applied to Indigenous research help to privilege Aboriginal and/or Torres Strait Islander voices and practices (Dudgeon et al., 2020; Peake et al., 2021). The study involved the co-development of the research agenda through the participation of all research members in a series of gatherings (a mixture of in-person and online) over a period of 11 months (COVID interrupted) (November, 2020 to October, 2021), led by Aboriginal members of the research team with expertise in Indigenous research methods (TH, FM, JC). Whilst the Wayapa Practitioner community are not exclusively Aboriginal and/or Torres Strait Islander Peoples, Wayapa is led by Wayapa founder and co-author (JT), Senior Knowledge Conduit for his Peek Whuurrung people of the Maara Nation and GunairKurnai Communities. As such, the agency and participation of the Wayapa Practitioner community in the development of the research agenda was the critical first step (see NHMRC, 2018). The research protocol developed from these gatherings reflected several participatory research principles, including: (1) the establishment of co-leadership between Aboriginal and non-Aboriginal members of the research team, (2) guidance on how to value and respect Aboriginal knowledges inherent in Wayapa, (3) an emphasis on cultural safety of the overall research process, (4) the employment of Indigenous research methods, including the development and agreement of the research questions to be examined during RTYs (described below), (5) the development of culturally informed and sensitive consent processes, (6) management and safety of cultural knowledge, (7) the choice of culturally safe spaces in which the data collection would occur, and, (8) advice on how to value the contribution of participating practitioners as co-researchers in the work, for example, by the use of collaborative data analysis (see below).

Ethical approval from Deakin University Human Research Ethic Committee was received 15 October 2021 (Approval Number 2021–271). Although Deakin University does not have a specific Aboriginal Ethics Committee, as this is not required in the State of Victoria, the Research team included several experienced Aboriginal academics (including authors JC, KR) and Aboriginal health practitioners (including authors FM, TH, JS, TF, JT) and was supported by several Aboriginal organisations (Wayapa, NIKERI Deakin University, First Peoples Health Unit, Griffith University). The

research was conducted following the AIATSIS Code of Ethics for Aboriginal and Torres Strait Islander Research (Australian Institute of Aboriginal and Torres Strait Islander Studies, 2020).

### **Reflexivity**

Like non-Indigenous forms of qualitative analysis, such as interpretative phenomenological analysis (IPA; Smith, 1996), RTY is concerned with appreciating individuals' lived experiences of events, situations and circumstances and the meaning they ascribe to them. It also emphasises that meaning-making by participants is not derived in isolation, but in relationship to with whom and in what place these experiences occurred. Therefore, reflexivity statements aim to support readers to appreciate and reflect on the positionality of the research team and their relationships to the research, each other, and Country. Reflexivity can also increase the trustworthiness and integrity of qualitative research as the researcher analyses their role in the research process. Reflexivity statements for all members of the research team are included as a supplementary material to this paper (see Appendix I) and reflect the diverse experiences and perspectives of the research team.

### **Participants**

Eighteen female practitioners participated in the study, nine of whom were trained in Wayapa and nine trained in CBT (Table 1). This sample gave us sufficient information power in which to explore the research topics (Malterud et al., 2016). Six of the participants identified as Aboriginal or as being of Aboriginal descent, one of whom was trained in CBT with experience in counselling in child and family services in regional and rural Aboriginal communities. The remaining five Aboriginal participants were Wayapa practitioners. All practitioners were offered a gift voucher in recognition of their time and contributions. Accommodation costs were also offered for practitioners who travelled to participate in person. A gift voucher of a smaller value was offered to those participants who also engaged in the reflective yarning session which occurred online to support shared engagement.

### **Procedure**

Purposeful sampling, where the focus is upon recruiting those who are especially knowledgeable about the topic at hand, was used to recruit a sample of both Wayapa and CBT Practitioners (Palinkas et al., 2015). Both Aboriginal and/or

**Table 1.** Wayapa and CBT practitioner participants.

Participant	Practice	Cultural Lineage
W1	Wayapa	Non-Indigenous
W2	Wayapa	Dharug & Wiradjuri First Nations
W3	Wayapa	Non-Indigenous
W4	Wayapa	Australian Aboriginal
W5	Wayapa	Non-Indigenous
W6	Wayapa	Saltwater woman of the Mainangal clan of the Worimi Peoples and the Language group Gathang
W7	Wayapa	Aboriginal
W8	Wayapa	Kamilaroi
W9	Wayapa	Non-Indigenous
C1	Psychologist	Non-Indigenous
C2	Psychologist	Non-Indigenous
C3	Mental Health Counsellor	Aboriginal. Mununjali/Bundjalung
C4	Psychologist	Non-Indigenous
C5	Psychologist	Non-Indigenous
C6	Psychologist	Non-Indigenous
C7	Psychologist	Non-Indigenous
C8	Psychologist	Non-Indigenous
C9	Psychologist	Non-Indigenous

W, Wayapa Practitioner; C, CBT Practitioner.

Torres Strait Islander Practitioners and non-Aboriginal and/or Torres Strait Islander Practitioners, were eligible to participate. Wayapa practitioners were recruited via the sharing of the study information flyer on Wayapa social media and email communications limited to registered Wayapa Wuurrk practitioners [November 2021-January 2022]. The flyer promoted that the research was seeking Wayapa and CBT practitioners to take part in a series of workshops and yarning circles to explore how these practices might respectively contribute to mental health and SEWB for all Australians. Due to the connection of the Wayapa founders and co-researchers with the Wayapa Practitioner group, the names of Wayapa practitioners involved in the research were not shared without permission. However, as trust in the research process is critical to ethical research involving Aboriginal and/or Torres Strait Islander Peoples (Laycock et al., 2011), several Wayapa Practitioners voluntarily discussed their participation in the research with members of the research team as part of building confidence in the research process.

CBT Practitioners were recruited via the posting of study information on the weekly research communication to staff within the School of Psychology at Deakin University (December 2021-January 2022). Recruitment was also extended to members of the Australian Indigenous Psychology Education Project (AIPEP), of which one of the authors was a member (MOS). Further snowball recruitment via the networks of interested participants was conducted until informational power was achieved.

Participant demographic data was collected to help contextualise the information obtained during RTY. This included gender, Place of residence allowing for

the identification of Traditional Aboriginal place names, Aboriginal or Torres Strait Islander cultural heritage if participants were comfortable to identify as well as their relevant background to the research (i.e., Wayapa Practitioner, Psychologist and/or other Health or Allied health profession).

RTYs were held on the traditional lands of the Wadawurrung people of the Kulin Nation (Victoria, Australia) in February 2022, in a large conference room on the Deakin University Waurn Ponds campus open to a large natural environment. This allowed for both indoor and outdoor yarning circles and was viewed as a safe cultural space by Aboriginal members of the research group. The gathering coincided with the lead up to the 2022 Australian Federal Election. It was also foregrounded by the Russian invasion of Ukraine, which occurred overnight between the first and second day of the gathering, prompting reflection on Country and ongoing colonisation around the world during periods of social yarning. In recognition of ongoing risks related to COVID-19 transmission at the time of the research, participants had the opportunity to participate remotely via online technology. Eleven participants joined the yarning workshops in person along with three of the research team members and seven participants joining remotely via Zoom. Participants who joined via Zoom were supported by a research team member (Wayapa practitioner) who facilitated online participation. *Therapeutic yarning* was available to all participants. This form of yarning was facilitated by a Wayapa Practitioner and provided participants the opportunity to step out of the research mode, for example, when stories of a sensitive or personally challenging nature were being told (Bessarab & Ng'andu, 2010). In these therapeutic yarns, participants were able to share and process their own reflections

and be supported to make meaning of their thoughts and feelings in a confidential space.

Participation involved four inter-connected stages which occurred over two days, one after the other. This resulted in data collection lasting approximately four hours. These stages are outlined in more detail below and reflects Dawn Bessarab's working depiction of the Research Yarning Process (see Kennedy et al., 2022, p. 3) with Stage 1 and 2 occurring on day one, and Stage 3 and 4 occurring on day two.

*Stage 1: Social yarning (1.5 hours).* Social yarning was conducted online and in person with the aim to build relationships, rapport, and trust between researchers and practitioners and between Wayapa and CBT practitioners themselves. Social yarning is defined as informal and unstructured meandering and guided by all people in the discussion (Bessarab & Ng'andu, 2010). Wilson (2008), in his seminal work, *Research is Ceremony: Indigenous Research Methods*, describes relationships or relationality as being at the core of being Indigenous and as such, highlights the importance of Indigenous researchers "sitting at the table" and hearing the fullness of the stories they are told. This perspective recognises that the connections that participants bring with them to family, to community, and to other participants must all be honoured. In person participants shared a meal together before both in person and online participants were invited to share their strengths and connections, and their intentions to work together in safe and open collaboration.

*Stage 2: Workshops (4 hours).* Social yarning was immediately followed by two workshops back-to-back, approximately two hours each, describing the practices of Wayapa and CBT (See Table 2). All participants took part in each workshop. The aim of these

workshops was to create a space of shared understanding and dialogue rather than an expectation that practitioners would have a full understanding of each other's practices. Participants were invited to make personal notes regarding any reflections that arose for them through their participation for discussion in the RTYs to follow the next day (Stage Three).

*Stage Three: Research Topic Yarning (length: approximately 5 hours)* was held on the day following Stages 1 and 2. It commenced with a brief Wayapa practice (15 minutes) to re-establish each participants connection to themselves, Country, and each other. This was followed by a brief session of social yarning (15 minutes), to re-establish rapport and to enable any story telling of insights and thoughts arising from the previous day. *Research topic yarning* occurred in a series yarning circles to explore the agreed research questions one by one. These were (1) what are the unique practices and concepts embedded in Wayapa?; (2) what are the unique tools and concepts embedded in CBT?; and (3) what, if any, are shared tools and concepts between Wayapa and CBT? Author KR and facilitator of the CBT workshop also facilitated the research topic yarning. This was to mitigate power imbalances between the two practice types and contribute to the decolonisation of the CBT practice itself. Author and facilitator KR carried expertise in developing and delivering culturally responsive, evidence based therapeutic interventions, and evaluating the efficacy of CBT for Aboriginal and/or Torres Strait Islander Peoples.

Understanding that knowledge is inherently connected to land and place in Aboriginal epistemology (Dudgeon et al., 2023), research topic yarns 1 (Unique elements of Wayapa) and 2 (Unique elements of CBT) were symbolised (with the agreement of all participants) as two rivers that ultimately converged in

**Table 2.** Workshop descriptions.

	Wayapa workshop	CBT workshop
Aims	To build a shared understanding of the Wayapa practice while supporting participants' connection with themselves and to each other.	To provide participants with the theoretical underpinnings of CBT and how it can be applied therapeutically.
Facilitation	Co-led by two research team members and Wayapa Practitioners ([omitted for blinded manuscript]).	Led by an Aboriginal Psychologist and member of the research team ([omitted for blinded manuscript]).
Content	The workshop introduced ancient Aboriginal wisdom that emphasizes caring for Country as crucial for wellbeing and belonging. Ways to integrate this ancient knowledge into modern life were discussed, emphasizing reconnecting with nature, oneself, and others, drawing from practices maintained for millennia. The workshop also reminded participants that accessing this connected way of being is possible by reconnecting with their own ancestral heritage.	The workshop centred on exploring CBT within the Australian context, fostering discussions to share initial experiences and clarify understanding. Key concepts and tools of CBT were defined and described.
Delivery	After learning of the ancient wisdom foundational to the Wayapa practice, participants were invited to engage in a 15-minute Wayapa narrative movement meditation led by the facilitators. Participants could choose between standing or seated movement practice.	Participants were invited to apply some CBT tools to themselves and to reflect on the applications of the tools in practice. An example was to identify and challenge any unhelpful thoughts in response to a minor stressor from the day.

Collaborative yarning, which occurred following research topic yarning (described below). Participants were also encouraged to talk about how they related with both practices and reflect on the important tools and concepts of the practices from their perspective. Importantly, yarning research methods privilege all participant contributions equally to ensure that diverse views are incorporated. Participants were guided to share in generalities any stories or reflections regarding either practice that might relate to third persons. To help participants reflect and collaborate with one another, participants were encouraged to use Whiteboards and butchers' paper to capture key ideas and narratives in real time as they arose.

*Stage Four: Collaborative yarning (length: 1 hour).* Collaborative yarning emerged out of the final research topic yarn (Topic 3: Common tools of practice, points of connection) as the participants were invited to reflect on how the two practices might relate to each other and if so how and for whom. They were also asked to reflect on the potential relationships between these emerging ideas. Collaborative yarning occurs when information is shared, ideas are come up with and bounced between people, creativity flows in all directions. This enables new discoveries and understandings for the research project to arise (Bessarab & Ng'andu, 2010).

### **Data analysis**

Data collected via RTY is well suited for participatory action research as it allows for data to be synchronously collected and analysed by participants, including via collaborative yarning (described above; Bessarab & Ng'andu, 2010). Perspectives and views relating to the various research questions are shared and discussed amongst all present, whereby salient perspectives are agreed on by all participants which serves as a foundation for subsequent data analysis and theme generation. This means that data analysis occurred in two stages, the first during data collection (as described above) and the second after data collection ended.

In the first stage of data analysis, we drew on rapid evaluation and assessment methods of qualitative data (REAM; see McNall & Foster-Fishman, 2007) including those to support the rapid identification of themes from live data collection and audio recordings (RITA; Watling Neal et al., 2015). This was done to help guide real-time and participant driven analysis of emerging views and ideas arising from the yarning circles. Participants were encouraged to continuously record and illustrate emerging ideas and perspectives within

yarning circles. This included in the form of creative and culturally inclusive representations of symbols and imagery (including in the form of mind maps or Indigenous forms of mind maps such as "Thought Rituals" (Yunkaporta & Moodie, 2021)) which had been developed by each participant throughout each session via the use of butcher paper and online equivalents. When yarning with all participants, these ideas were shared with others and collective codes and themes begun to be agreed upon via the facilitator and research team relevant to each research question. This was supported by audio recording of all topic yarns to capture nuance and detail in the qualitative data, which were reviewed after data collection had ended. Transcription of quotations that were particularly good illustrations of key emerging concepts and themes occurred where possible in real time but otherwise time-marked for later review.

The second stage of data analysis followed the research topic and collaborative yarning, occurring approximately 6 weeks after the first stage. All the audio data generated from the RTY was transcribed verbatim by a member of the research team (TJ). Notes generated by participants during the yarning circles were also collected and organised, which included interim themes that were identified by participants relevant to each RTY. All these data points were then used by the lead author (MOS) to create the interim "coding template". This template was then expanded and elaborated upon following multiple readings of the transcribed audio recordings of all research yarns. This expansion of the coding template was primarily guided by the research questions, so information from the audio recordings that did not answer the research question were discarded or ignored. This ensured that additional themes or concepts that were relevant, but not captured collaboratively in the stage one data analysis, were also included in the coding template. These were then organised thematically by the first author and shared with all members of the research team for review, elaboration, and approval two months following the gathering, before sharing with the broader participant group for final review and endorsement.

### **Reflective yarning and building trustworthiness in the data analysis**

To build confidence and participation in the data analysis (that is, to improve the trustworthiness of the data), the jointly developed thematic analysis was finally shared with members of the participant group for any further refinement via *reflective yarning*.

Occurring in May 2022, approximately three months after the initial research yarns, this two-hour online session allowed for subsequent reflections from practitioner participants to be shared. It also provided an opportunity for all practitioners to share and process feelings and questions arising from their participation and ensured that the ideas and perspectives captured in the thematic analysis reflected the views of the group. Ten of the initial 18 participants engaged in this final collaborative yarning with an additional participant sharing their views directly with the research group via email. All practitioners were given the opportunity to bring new perspectives to

the analysis and share a role in the finalisation of the findings, ensuring trustworthiness of the data. Given the importance of images, symbols and other art forms in Indigenous ontology and storytelling (Yunkaporta & Kirby, 2011), an artistic representation of these yarns was also created during this stage of analysis.

## Results

The themes generated from Research Topic and Collaborative Yarning are described in Table 3. They are also reflected in an artistic impression of the shared yarning process by an Aboriginal Artist and Wayapa

**Table 3.** Yarning about Wayapa and CBT: Emergent themes and concepts from research topic yarning.

Uniquely Wayapa	Uniquely CBT	Shared Elements	The promise of Wayapa in therapeutic practice
(Earth) Mindfulness	The CBT model- thinking, feeling, and doing	(Psycho) Education	Building cultural safety
Holistic Healing of earth, mind, body and spirit	A structured process for enquiry (into thoughts and feelings)	Guided Discovery	Decolonising psychology practice
Advocacy and Earth Activism	Tools and Strategies	Collaboration	Re-energising CBT
Storytelling	Problem focus	Models for healing	Integrating Embodiment
Physical movement	Western research evidence		Integrating the natural world
Strengths-based			Thinking and doing, language and movement
Recognising culture and spirituality			Experiential strategies
Practice and Wisdom based evidence			



*My approach to the art piece was to begin with two separate perspectives, moving towards a blending or crossover that bloom into a unique combination mutually beneficial to both. The triangular shapes in the CBT side of the picture represents the Thought, Feelings and Behaviour cycle. The triangles also flow along a straight-lined path to highlight the scientific method behind the modality. A free-flowing natural form of journey lines hold the Wayapa circles, each with 14 spokes to represent the elements in the Wayapa method. Each stream winds its way to the centre of the picture, where they combine and blossom into a unique point of potential healing.*

Mark Lumley, Yorta Yorta/Wiradjuri, Artist

**Figure 2.** Two gunngang (goo nung) - two streams. Mark Lumley (Artist, Yorta Yorta, Wiradjuri).

Practitioner (Mark Lumley, Wiradjuri/Yorta Yorta), who created the art with the engagement of the research group (See [Figure 2](#), shared with the Artist's permission).

### Research Topic Yarn 1: Uniquely Wayapa

Yarning about Wayapa facilitated a process of practitioners connecting with each other, which naturally led to reflections on the process of connection facilitated by Wayapa. Practitioners reflected that their understanding of the interconnectedness of the natural elements promoted an experience of themselves that was deeper and more connected to a wider community and spirituality and "not separate from (their) ecology".

So no matter what nationality you are, you belong to the earth. You are the earth, you are made up of the elements of the Earth. So it's a sense of belonging (that CBT doesn't offer). [C9]

And I think you learn ... the more you involve yourself and release yourself in Wayapa you actually learn more about yourself and that connection, it's there. But I think we've lost a little bit of it, but with Wayapa, it brings it back to us. [W8]

The incorporation of Storytelling was viewed as integral to this process, supporting people "to actually attach their feelings and thoughts within their own story ... (and to be) able to learn as well [W7]". Participants reflected that the Earth narrative as a form of meditation and incorporating 14 elements of earth, human and more than human species, was immediately relatable and was viewed as familiar and universal. Unlike other forms of mindfulness, participants saw it as highly accessible and providing people a means to build awareness and observation and expand thinking and experience.

(Wayapa has) this transportive element ... to tap into ancestral wisdom, to place, deep imagining. Once they've done the meditative experience, everything is expandable, our feelings are expandable, our abilities, our creativity, all of that expands after a session of that narrative meditation. [W6]

The more collectivist perspective offered by Wayapa was also seen to support people to feel open to reach out to others to heal, but also to see the ecological world as a form of healing itself. The corollary of this was that Wayapa reminded participants that degradation of nature had the effect of causing illness and disease. This deeply held view in Indigenous culture that the land and all within it are intrinsically related was viewed as missing in other forms of healing.

As an Indigenous person, you think of the Earth as your mother. And it's as simple as your mother is sick, and you feel it ... and you feel sick. If the Earth is not well, then we can't have full wellbeing. [W2]

Taking this a step further, the focus in Wayapa to build practical means to support Earth advocacy and environmental action was seen as uniquely important and energising, stepping away from what some viewed as the self-advocacy of CBT and other more individually focused modalities. One participant reflected "the more disconnected we are (from life and natural cycles), the less we care ...". This call to engage in practical actions to support the natural environment and to live sustainably was observed as an important form of healing as it provided people a "purpose" and "obligation" and took a strength rather than a deficit approach to recovery.

... It brings people back to the purpose of looking after Country, which is ultimately what we were born to do" [W7]

Another mode of healing that was emphasised by participants was the physical movement practice typically accompanied by the Wayapa earth mindfulness narrative. Regarded as a gap in other therapies, the inclusion of this movement practice was viewed as a means for people to become embodied. Participants revealed that the process of engaging with a sequence of physical movements supported people to divert from patterns of overthinking and get back in touch with their physicality and "rhythm" and through this, came opportunities for "joy" and "release".

you know ... CBT ... I think, can be very cerebral, but the Wayapa practice, you know, really connecting you to Earth and your body. I can see so much potential there. [C2]

Importantly nevertheless, it was the holistic "mind, body, spirit" approach to wellbeing that was a recurring pattern across the yarn. Rather than seeing one element of Wayapa as being uniquely related to healing, it was its' integrative approach to wellbeing that was emphasised and valued. In this way, place, culture, and spirituality, sat alongside the mind and the body as integrated aspects of health and wellbeing and for consideration and incorporation for healing.

### Research Topic Yarn 2: Uniquely CBT

The CBT model, which theoretically links thoughts and behaviours with feelings, was also viewed by all participants as a valuable tool in which to understand how people influence their own feelings and actions. Rather

than feeling deterministic, there was hopefulness that accompanied this understanding, with one Wayapa Practitioner noting:

*"I think something that really stood out to me during this couple of days is how the thoughts ... (well), they do create a reality, and then the behaviours accompany those thoughts. And it's very, very powerful. Yep". [W9]*

Participants also highlighted that CBT provided structured tools which people could use to monitor their thinking and draw links between their thinking patterns and their circumstances. Tools such as thought diaries and activity scheduling were viewed as helpful to promote understanding and compassion as well as opportunities to step out of (and sometimes challenge) unhelpful thinking or behavioural patterns and feel empowered to make positive changes.

We get stuck in the wound of it, or we get stuck in a moment (of) overanalyzing. And we need to step back sometime. And I mean ... if we look at the perspective of the air animal, like, you're too in the detail. Coming out of it, it gives me more perspective of ... almost like ... you know ... there's a part of us more than just ourselves. [W6]

(With CBT) ... that's the comfort and the hope, when I get stuck in those loops. My thoughts aren't my destiny, they're not fixed, they're not me ... .And it gives me distance. [C1]

Flowing from these observations, was an acknowledgement that focusing on a single issue or problem within the structured CBT model was also helpful for many people. So too, was the fact it was "talk oriented" and included the application of homework and other therapy tasks that gave people tools to use outside of therapy.

... And sometimes we just need the simplicity of just taking one element, that one issue. And using that process to be able to address that issue, to empower in a way. [W5]

The structure of CBT naturally led to yarning about the presence of a large pool of research evidence that accompanies the therapy. Whilst there was agreement that CBT had a significant evidence base associated with it, how applicable this research evidence was to all people was raised as a point of significant enquiry. Perspectives reflected in the following view: *"I think why we're discussing CBT is because of the overwhelming research evidence that is available. And that's why it's taught. That's why people use it and practice it. Because we know it works, at least in a variety of situations"* were weighed against perspectives that identified the limits of this research evidence and the limits of empirical versus Indigenous forms of research more generally:

... I just want to say a couple of things (relating to) 'it's what the science says, it's what the data says, you know ... like ... First Nations people have been living off of Country and through observation ... you know, our history was verbally handed down. It wasn't put down in writing, you know, so there is evidence continuously catching up ... to practices that have been played out for centuries and centuries. [W7]

Collectively, these points of view appeared to lead to an expanded assessment of evidence-based practice for all participants.

I just want to acknowledge (from a white person's perspective) ... that science is not an equal thing. And actually, it's disadvantaged Aboriginal and Torres Strait Islander people, because it's what you focus on ... what you choose to investigate ... and where the money's coming from ... And, the power structures man that, yes, we don't know about a lot of things because they haven't been looked at. [C2]

### Research Topic Yarn 3: Shared elements

Through this process of reflecting on one another's practices, shared threads, and points of common practice between the CBT and Wayapa naturally arose and were celebrated: *"I didn't realise there were so many touch points between the two (Wayapa and CBT). And it's, it's exciting". [C3]* Participants were able to recognise and acknowledge that both CBT and Wayapa shared a common goal of *"wanting people to be well."* They also agreed that while differing in their modes of enquiry, both practices were guided discovery: *"And I think the commonality is, like, a discovery, like a guided discovery! I think that's one of the techniques in CBT, of discovery of mind; (of Wayapa) of body. like they are common"* [W4] Both practices were also viewed as supporting empowerment, including through a process of education, and learning new knowledge about what supports health and wellbeing and healing from trauma. Both practices were also appreciated for what was seen to be their collaborative approaches, working with people and their networks to bring about change.

(Both) modalities give the individual the advocacy to operate, how they need to, Agency! Agency is the word I'm looking for. [W4]

### Collaborative Yarning: The promise of Wayapa in therapeutic practice

Building on the observation that CBT and Wayapa shared some common elements and purpose, discourse naturally led to the different ways in which

these practices might complement each other. This was represented by the imagery of two different rivers running together or meeting. For many CBT practitioners, the process identified various gaps in their current practice, that they saw could be complemented by incorporating practices from Wayapa: *“Wayapa doesn’t need something else. But CBT does”*. [C2]

Of these gaps, a lack of focus on bringing the body safely into therapeutic practice within CBT was viewed as conspicuous, with an emphasis on the importance of embodiment as part of overall wellness.

I don’t actually mean to say that CBT has not been extremely helpful. I think it is, I think it has a place ... examining our thoughts and how they relate to our behaviours, and our feelings is really important (but) I think we need to be in our bodies first. [C2]

Structured ways to integrate the healing aspects of nature were also viewed as missing in CBT. Most importantly, there was acknowledgement that an appreciation of culture in understanding the healing process was given insufficient attention in CBT: *“I think there’s a cultural element here that, that matters, and CBT is just, it just came from a very individualist perspective [C8]”*. This lack of cultural foregrounding in the treatment was viewed to be a threat to CBT’s cultural safety and a missed opportunity to draw on cultural resources and cultural stories that supported growth and understanding.

Culture is within you, you are part of the culture, and that has to be integrated as part of any kind of intervention that we provide .....(and) I think we really have to connect with our spirit and how often do we really talk about that in CBT?...I think we need to do that more often. [C4]

In contrast, the process of yarning seemed to emphasise to Wayapa practitioners that their modality was already in itself holistic. Rather than focused on deficits in their practice, the process served as further revelation to some that many CBT concepts were already integrated in their work: *“You know, like, I actually use parts of CBT within the work that I do anyway, without even knowing that, that’s what CBT is”* [W7]

Nevertheless CBT was seen to offer tools that might strengthen and enhance Wayapa practice, particularly the ways in which CBT offered structured opportunities to support people to unpack and process thoughts, beliefs and feelings that surfaced during Wayapa practice. There was also a recognition that CBT was being taken up by Aboriginal and/or Torres Strait Islander Peoples and with this came an obligation to support it to be delivered in more culturally sensitive ways.

And I thought, “wow”, being armed with that (CBT) and Wayapa is like win win! [W2]

Bringing CBT into that process (of Wayapa) you know, collaboratively doing that together ... it can bring a structure of documenting and helping people process through their feelings, their thoughts, their beliefs, you know, and then unpacking that a little bit in a structured form, if that makes sense”. [W7]

These reflections were accompanied by suggestions from the group of how to meaningfully integrate the two practices. This began with considerations of how Wayapa could offer experiential strategies to enhance CBT, whilst also building cultural inclusiveness. This specifically included suggestions of the incorporation of Earth mindfulness practices, movement, and positive environmental action as practical tools for mindfulness and behavioural activation. These then were expanded to ideas whereby the practices were viewed to complement each other in complex and less linear ways. Importantly, rather than being focused on how one practice could enhance the other, the possibility for integration and the development of “new” wholistic therapeutic work was emphasised.

I think that (we) can come up with a new protocol, that is an amalgamation of Wayapa to start off with, and that is all about getting the person embodied [] ... . And then we’ve got our ... , guided discovery of CBT, a top-down process. And then we’d, we finish off, whether this is an Indigenous client or a non-Indigenous client with another (practice) of Wayapa, just to allow that, that integration to happen. So, they have time to kind of digest that, metabolize that in their body. [C5]

Ultimately, through the process of coming together, feelings of promise and kinship arose, as practitioners felt a renewed sense of possibility in their own therapeutic work alongside the possibility of shared work that respected both Indigenous and “Western” models of healing. While CBT practitioners felt energised to be more creative and culturally inclusive, Wayapa practitioners were reminded of the value of their own practice and empowered to see a place for it to enhance CBT practices for Aboriginal and/or Torres Strait Islander Peoples.

(this process) just shows that it’s a really positive comforting thing, knowing that both these things (Wayapa and CBT) can work together, and it will reach ... it’ll have a bigger reach ... .I just feel so comforted and so excited about how many people this will reach and how powerful both those things, those tools can be in a tool box for practitioners and people that are benefiting from it. [W2]

For all, the yarning process was viewed as a healing process itself, reminding them of the power of having time to share, listen and reflect with others, and how equal representation can lead to powerful co-creation of knowledge which advances practice.

In the Wiradjuri language, we have a common greeting, “Djinjamarra”. And that actually means respect or move forward slowly, with respect. And always, the greeting is done in a circle. So it's (been) like Arthur and the Knights of the Round table, everyone's on equal terms, and it breaks down those barriers. [W2]

## Discussion

Unlike studies that have focused on the development of adaptations to CBT to build its cultural appropriateness for Aboriginal and/or Torres Strait Islander Peoples (e.g., Bennett-Levy et al., 2014), this study instead attempted to create an equalising space in which CBT and Wayapa practitioners shared and learnt about one another's practices and healing systems. This approach has been highlighted to work safely at the cultural interface of Indigenous and non-Indigenous knowledge (Kilcullen et al., 2016; Nakata, 2007). Through experiencing Wayapa, an Aboriginal derived wellbeing practice, CBT practitioners expressed enthusiasm for challenging their existing views of health and healing and were prompted to reflect on gaps in their own practice. Concepts central to Wayapa, including the location of the earth and Country as a foundation for wellbeing, and meditative movement, were viewed to significantly transform recovery practices for all people. Described as therapeutic place-based knowledge systems of flourishing (Dudgeon et al., 2023), these Indigenous psychologies recognise human wellbeing is derived from being reciprocally connected to and caring for the natural environment, including its human and non-human inhabitants.

Indigenous Psychology is imbued with spiritual philosophies about the stewardship of Country or land and guiding relational principals of reciprocity, responsibility, and respect that aim to safeguard, empower, and heal communities, revitalize healing systems through participatory action research, strengthen the protective benefits of cultural continuity, and restore individual and collective self-determination over everyday life (Dudgeon et al., 2023, p. 259).

The inclusion of nature within “Western” clinical practice has had limited attention but the rising interest in nature-based therapies, such as Forest Therapy (Kotte et al., 2019), suggests there is potential for models of mental health care to incorporate connection to the natural world (Danon, 2019; Evans et al., 2022). Equally, there have been tentative steps to extend on Maslow's hierarchy of needs (Maslow, 1943, 1987), a humanistic framework describing fundamental human needs for health and wellbeing, to recognise the basic human

need for healthy *habitat* beyond shelter alone as a basis for psychological wellbeing (Mollica et al., 2021). Our findings suggest that Indigenous knowledges and specifically wellbeing practices such as Wayapa are critical to this discourse.

Furthermore, our study found that CBT and Wayapa practitioners shared a view that the inclusion of movement and storytelling within Wayapa provided a safe entry point for deeper reflection and engagement theoretically missing in CBT. This highlights that Wayapa and other healing practices grounded in Indigenous wisdom have important contributions to the broader integration of body-based (e.g., yoga, O'Shea et al., 2022) and narrative tools in psychological practice, viewed as particularly important in recovery from trauma (Geller & Porges, 2014; van der Kolk et al., 1996).

Notably, while some participants in this study reflected how aspects of Wayapa could be integrated into CBT practice to build its cultural safety and sensitivity for Aboriginal and/or Torres Strait Islander Peoples, for most, the experience fundamentally changed their view about their own practice. CBT practitioners were challenged to move beyond individualistic to collectivist and socio-political formulations of ill-health and healing and to better recognise cultural connection and spirituality as sources for healing, not just for Aboriginal and/or Torres Strait Islander Peoples, but for all people. For Wayapa practitioners, the process of yarning with CBT practitioners reinforced the holistic nature of their own practice and the wisdom inherent in Indigenous frameworks for wellbeing such as SEWB (Gee et al., 2014). As such, our findings strongly support the relevance of activities that support exposure to Indigenous healing practices to non-Indigenous practitioners whilst offering opportunities to decolonise current psychology and other mental health practice more broadly.

The current study also provided further support for the existence of cross-culturally understood themes for mental health and healing, including those highlighted in a CBT framework (Kilcullen et al., 2016). Concepts such as psycho(education), agency, problem solving and guided discovery were agreed by both Wayapa and CBT practitioners to be shared components of their respective practices and reflect previous studies examining cross-culturally understood mental health concepts (Bennett & Babbage, 2014; Kilcullen et al., 2016; Nelson et al., 2014). The CBT model was viewed as a powerful tool for self-enquiry and one that gave people the opportunity to change problematic thinking and behavioural patterns in the “here and now”. Wayapa practitioners reflected that incorporating

elements of CBT within their practice as structured tools to support people to unpack thoughts and experiences raised by their engagement with Wayapa held promise to augment their practice. Nevertheless, as cautioned by Dudgeon and Williams (2000), whilst the use of “Western” psychological techniques can be incorporated into healing models that come from a grounded Indigenous framework, this must be done in ways that do not lead to an assimilation of Aboriginal and Torres Strait Islander realities. Importantly, the yarning process identified that elements of Wayapa might already contain “CBT-like” concepts. CBT practitioners identified for example, that in describing the *eagle* as one of 14 elements in the narrative (earth) mindfulness practice, concepts akin to viewing thoughts and behaviours from a distance were reflected. Moreover, in promoting positive environmental actions that care for Country, negative patterns of inactivity were naturally addressed. In this way, Wayapa may offer specific guidance in translating CBT’s formal language in culturally appropriate ways, viewed as an important consideration when working with CBT for Aboriginal and/or Torres Strait Islander Peoples (Bennett-Levy et al., 2014).

Finally, our study also lends support for a broadening of Indigenous research methods in psychology. Psychologists readily embraced yarning as a valid means of knowledge generation, whilst deepening their understanding of oral traditions such as yarning as critical forms of scientific knowledge. We encourage further uptake of methodologies such as ours to safely facilitate discourse at the cultural interface of Indigenous Psychology and other psychological approaches (e.g., Narrative Therapy, Acceptance-based Therapies), which we hope will continue to build the cultural safety of psychological practice in Australia and honour Aboriginal and Torres Strait Islander scientific traditions (Dudgeon et al., 2020; Peake et al., 2021).

Nevertheless, our findings are considered in the context of the following limitations. Firstly, we recognise that in focussing on Wayapa, our findings do not necessarily extend to other wellbeing practices grounded in Indigenous wellbeing frameworks. The Wayapa Practitioner Community hold respect for the range of healing practices that are offered by Aboriginal and Torres Strait Islander wisdom and that are held and passed on by various Ancestral lineages. By sharing knowledge about Wayapa and broadening understanding of its value for promoting social and emotional wellbeing, it is hoped that further discourse and appreciation for Indigenous frameworks for wellbeing will be promoted. Saying this, the broader subject of research evidence being necessary to establish the

value of any healing practices drawn from Indigenous wisdom is also understood as contested (Krusz et al., 2020) and this stance was strongly expressed by Wayapa practitioners in this study. We hope that by highlighting yarning as a legitimate research approach that allows for the valuing of storytelling and the incorporation of practice-based evidence (Dudgeon et al., 2020), we have raised further awareness to the possibility of alternate and more culturally diverse research models and epistemologies. We also acknowledge that two hours of exposure of either practice is insufficient to fully understanding the salient and important therapeutic elements of either practice despite the rich yarns that took place. We note, for example, that the work of Bennett-Levy et al. (2014) undertook to train Aboriginal counsellors in CBT over a period of 10 days before seeking their views and perspectives regarding its effectiveness in enhancing the mental health of Aboriginal Australians. Finally, the research group also acknowledge that Wayapa Practitioners do not speak for “Community” and understand that the views and perspectives of Aboriginal and/or Torres Strait Islander Peoples vary across the many kinship groups, tribes and nations that make up Indigenous Australia (Social Health Reference Group, 2004).

## Conclusions

A strength of this study was its commitment to build a safe cultural interface between “Western” and Aboriginal therapeutic practice through the adoption of participatory action research methods and an Indigenous form of enquiry: Research Topic Yarning. In doing so, areas of common practice were identified and seen as points for connection and “*walking together*”, while unique therapeutic contributions offered by each practice were honoured. Transformative moments naturally occurred through the research process for both practitioner groups, leading to a shared respect and a desire to support each other’s work. These outcomes support the notion that by creating safe cultural interfaces and building awareness of the value of Aboriginal grounded wellbeing models, culturally safe practice can be promoted and pathways to reconciliation can also be established (Dudgeon & Kelly, 2014).

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A single member of the research team, who provided input into the Indigenous research methods applied, elected to participate in the research topic yarns. The engagement of researchers as participants is suitable for PAR.

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