

Cambodian Australians

- Cambodian people first came to Australia as students from the 1950s to 1970s².
- After a coup in Burma in 1970, a civil war began that led to a Communist Khmer Rouge takeover from 1975 to 1979. An invasion by Vietnam in 1979 ended the Khmer Rouge reign, but civil war continued until United Nations troops enforced a cease-fire in late 1991^{2,4,5}.
- Of an estimated population of 7.1 million people in 1975, approximately two million Cambodians were killed during the four year Khmer Rouge reign. Approximately one million people were killed in the civil wars before and after this period^{2,4,5}.
- From 1975, Cambodian people began to seek refuge in other countries including Australia².
- Between 1978 and 1991, more than 500,000 Cambodians sought refuge in refugee camps in Thailand⁴.
- Between 1975 and 1986, 12,813 Cambodians came to Australia as refugees².
- By 2001, there were 23,000 Cambodia-born people in Australia. Between 2001 and 2006, the number of Cambodia-born people in Australia increased by 6.7 per cent to 24,530².
- **Places of transition:** Thailand
- **Ethnicity:** The main ethnic group in Cambodia is Khmer (90 per cent)^{6,7}. Smaller ethnic groups include Vietnamese (five per cent) and Chinese (one per cent)^{6,7}.
- **Language:** Khmer is the official language and is spoken by 95 per cent of the population^{6,7}. Other languages include French and English^{6,7}.
- **Religion:** Buddhism is the official religion of Cambodia and is practiced by

Population of Cambodia-born people in Australia (2006 Census): 24,530¹

Population of Cambodia-born people in Queensland: 1214¹

Population of Cambodia-born people in Brisbane¹: 1029¹

Gender ratio (Queensland): 82.3 males per 100 females¹

Median age (Australia): The median age of Cambodia-born people in Australia in 2006 was 40.3 years compared with 46.8 years for all overseas born and 37.1 for the total Australian population².

Age distribution (Queensland)¹:

Age	Per cent
0-19	7.6%
20-39	39.6%
40-59	39.5%
60+	13.2%

Arrivals – past five years (Source – Settlement Reporting Database³)

Year	Australia	Queensland
2006	699	46
2007	724	46
2008	694	29
2009	940	48
2010	663	48

more than 96 per cent of the population. Muslims comprise approximately two per cent of the population⁶. Less than two per cent of the population are affiliated with other religions⁶.

Ancestry, language and religion in Australia (2006 Census for Cambodia-born)

- The top ancestryⁱⁱ responses of Cambodia-born people in Australia were:
 - Khmer – 54.2 per cent
 - Chinese – 35.6 per cent
 - Not stated – 4.6 per cent².
- The main languages spoken at home by Cambodia-born people in Australia were:
 - Khmer – 65 per cent
 - Cantonese – 10.6 per cent
 - Teochew – 6 per cent.
- The main religion of Cambodia-born people in Australia was Buddhism (79.8 per cent).

Communication

- Traditionally, Cambodians do not address each other by name, but according to relationship (e.g. brother or uncle)⁸.
- The titles *Sir* and *Madam* are used for strangers⁸. It is advisable to use a person's title when addressing a Cambodian person directly (e.g. Mr, Mrs, Doctor)⁸.
- In Cambodia, names are usually written with the person's surname first followed by their given name⁸. Some Cambodians have adopted the Australian style of naming and have changed the order of their names, placing their surnames last⁸. Children can take either their father's surname or a personal name⁸.
- It is considered disrespectful to sit with the legs stretched out and the feet pointed towards a person⁸.
- The head is considered the spiritually highest part of the body and sensitivity is advised if it is necessary to touch the head⁸.
- Cambodian people may consider direct eye contact to be inappropriate. Some people may be reluctant to maintain eye contact with people seen as deserving of respect, such as a senior person⁸.

- A response of *yes* does not necessarily indicate agreement. The word *yes* is sometimes used to indicate that the listener is paying attention. It is important to obtain feedback from the person to ensure understanding, especially when gaining consent to treatment⁸.
- Cambodian people rarely appear desperate or distressed, even when experiencing significant anxiety or pain⁸.

Health in Australia

- Average life expectancy in Cambodia is 62.7 years (male 60.3, female 65.1) compared to 81.7 years for all people living in Australia (male 79.3, female 84.3)⁶.
- There is little research on the physical and mental health status of Cambodia-born Australians.
- Intestinal parasites are a common health problem among Cambodian Australians. A cross-sectional survey showed that 42 per cent of Cambodian Australians had a positive or equivocal serology for *S. stercoralis* and 17 per cent had eosinophilia⁹.
- The blood diseases haemoglobin E and thalassemia minor have been observed in Cambodian refugees and migrants⁸.
- Overseas research shows that other common diseases affecting Cambodian people include tuberculosis and hepatitis B⁸.
- Dental problems including caries are common⁸. Some Cambodian Australians travel back to Cambodia for more affordable dental healthcare¹⁰.
- It has been shown that two decades after seeking refuge in the United States, the Cambodian population continues to have high rates of psychiatric disorders associated with trauma including post traumatic stress disorder (PTSD) and depression⁴.

Health beliefs and practices

- A belief in the *hot* and *cold* qualities of food and medicine is common. The body is seen as operating in a delicate balance between these two opposing elements. For example, diarrhoea is thought to be due to an excess of *cold* elements and skin rashes to an excess of *hot* elements⁸.
- Many Cambodian people believe that the body of a woman is made *cold* by labour. Women who have recently given birth may want to be kept very warm and may not want to shower post partum for up to three days, or may prefer a sponge bath. New mothers are often kept warm by being fed *hot* foods⁸.
- Spiritual healers may be sought for mental illnesses such as depression, and chronic diseases such as diabetes and hypertension, as these illnesses are thought to be caused by spirits^{8,10}.
- Cambodian people may explain the causes of illnesses in terms of both the natural and supernatural⁸.
- Traditional healing can include cupping, pinching or rubbing (also known as coining). In cupping, a cup is heated and then placed on the skin, usually on the forehead or abdomen, which creates a vacuum. These treatments can often leave some redness or bruising. The marks resulting from cupping and other traditional treatments have sometimes been mistaken by healthcare providers for signs of a more serious illness or domestic abuse⁸.
- Many Cambodian people use complementary and alternative medicines in conjunction with prescription medications to deal with physical or mental illness^{8,11}.
- Attitudes and beliefs about Australian medical practices may vary⁸.
- Some Cambodian people may resist surgery or other invasive techniques. When such procedures are required, it may be necessary to explain the need for such treatment⁸.
- Cambodian people may have a fear of blood tests. Blood is thought to be replenished slowly, if at all, with any loss of blood seen as weakening the body⁸.
- Medication is frequently taken only for as long as the individual feels ill. Compliance with medications for a chronic disease can be difficult⁸.
- Many Cambodia-born women prefer to be examined by female health care providers⁸.
- Some Cambodian people may expect to receive medications for every illness, and injections are often seen as more effective than oral medications. It may be necessary to carefully explain why medication is not necessary⁸.
- When a Cambodian Buddhist is dying, a Buddhist monk or minister should be notified to provide chaplaincy services¹². The monk will chant verses after the person has died to help release the person's *good* energies¹². The state of mind at the time of death is considered important in determining the deceased person's next rebirth¹².

Social determinants of health

- The overall literacyⁱⁱⁱ rate in 2004 in Cambodia was 73.6 per cent (men 84.7 per cent, women 64.1 per cent)⁶.
- Cambodian people were subjected to an extremely traumatic period during the four year Khmer Rouge rein⁴. Cambodian people are considered the most traumatised of all South-East Asian people¹³. Many Cambodian people have experienced famine and starvation, witnessed death and destruction, and have spent long periods of time in refugee camps in Thailand¹⁴.
- Poor English proficiency, unemployment, older age, being retired or disabled, and living in poverty have been shown to be associated with higher rates of PTSD and major depression in Cambodian refugees⁴.

- Proficiency in English^{iv} in Australia (2006 Census)¹:
 - 63 per cent of Cambodia-born men and 76 per cent of Cambodia-born women reported that they spoke English well or very well
 - 32 per cent of men and 20 per cent of women reported that they did not speak English well
 - 5 per cent of men and 4 per cent of women reported that they did not speak English at all^v.
- At the time of the 2006 census, 27.1 per cent of Cambodia-born people aged 15 years and older had some form of higher non-school qualifications^{vi} compared to 52.5 per cent of the total Australian population².
- The participation rate in the workforce (2006 census) was 59.1 per cent and unemployment rate was 11.4 per cent compared to the corresponding values of 64.6 per cent and 5.2 per cent in the total Australian population². The median weekly income for Cambodia-born people in Australia aged 15 years or older was \$328 compared to \$466 for the total Australian population².
- A 2009 large-scale audit discrimination study based on job applications using ethnically distinguishable names showed that people with Asian sounding names were subject to discrimination in applying for jobs. People with Asian sounding names have to apply for more jobs to receive

the same number of interviews as people with Anglo-Saxon sounding names and those with names of more established migrant groups such as Italian, even if they have the same work history and education¹⁵.

Utilisation of health services in Australia

- There is little research in Australia on the utilisation of health services by Cambodian Australians.
- Research in the United States showed that a high proportion of Cambodian Americans used American medicine for PTSD and major depression. Only a small percentage used complementary and alternative medicine exclusively. Utilisation of complementary medicine did not inhibit utilisation of American medicine, but was positively associated with seeking American medicine for mental illness¹¹.
- Cost and language issues have been shown to be the major barriers to health care access for Cambodian refugees in the United States, including mental health care utilisation¹⁶.
- Cambodia-born women may avoid regular preventive pelvic and breast examinations because of embarrassment⁸.

References

1. Australian Bureau of Statistics. CDATE Census 2006. Available: <https://www.censusdata.abs.gov.au/CDATAOnline>. Accessed 07/12/2010, 2010.
2. Department of Immigration and Citizenship. *Community Information Summary: Cambodia-born*. Commonwealth of Australia: Canberra; 2006.
3. Department of Immigration and Citizenship. Settlement reporting database. Available: <http://www.immi.gov.au/settlement>. Accessed 07/12/2010, 2010.
4. Marshall GN, Schell TL, Elliott MN, Berthold SM, Chun C. Mental health of Cambodian refugees 2 decades after resettlement in the United States. *Journal of the American Medical Association* 2005;294:571-579.
5. Rummel RJ. *Death by Government*. New Brunswick, NJ: Transaction Publishers; 1994.
6. Central Intelligence Agency (CIA). *The world fact book*. CIA; 2010. Available: <https://www.cia.gov/library/publications/the-world-factbook/>.
7. Daniel K. *SBS World Guide: The complete fact file on every country*. Sixteenth Edition ed. Prahan Victoria: Hardy Grant Books; 2008.
8. Allotey P, Manderson L, Nikles J, Reidpath D, Sauvarin J. *Cultural diversity: A guide for health professionals*. Queensland Government Press: Brisbane; 1998.
9. Caruana SR, Kelly HA, Ngeow JY, Ryan NJ, Bennett CM, Chea L, et al. Undiagnosed and potentially lethal parasitic infections among immigrants and refugees in Australia. *Journal of Travel Medicine* 2006;13:233-239.
10. Khieu P. *Review of Cultural Diversity Profile- Cambodian Australians*. Personal communication; 8 May 2011.
11. Berthold SM, Wong BC, Schell TL, Marshall GN, Elliott MN, Takeuchi D, et al. U.S Cambodian refugees' use of complementary and alternative medicine for mental health problems. *Psychiatric Services* 2007;58:1212-1218.
12. Matzo M, Sherman DW. *Palliative Care Nursing: Quality care to the end of life*. Springer Publishing Company; 2009.
13. Kinzie J, Fleck J. Psychotherapy with severely traumatised refugees. *American Journal of Psychotherapy* 1987;75:1080-1084.
14. Strumpff NE, Glicksman A, Goldberg-Glen RS, Fox RC, Logue EH. Caregiver and elder experiences of Cambodian, Vietnamese, Soviet Jewish, and Ukrainian refugees. *International Journal of Aging and Human Development* 2001;53:233-252.
15. Booth A, Leigh A, Varganova E. *Does racial and ethnic discrimination vary across minority groups? Evidence from a field experiment*. Australian National University: Canberra; 2009.
16. Wong EC, Marshall GN, Schell TL, Elliott MN, Hambarsoomians K, Chun C, et al. Barriers to mental health care utilisation for US Cambodian refugees. *Journal of Consulting and Clinical Psychology* 2006;74:1116-1120.



© State of Queensland (Queensland Health) 2011.

This document is licensed under a Creative Commons Attribution Non-Commercial 2.5 Australia licence. To view a copy of this licence, visit <http://creativecommons.org/licenses/by-nc/2.5/au>. You are free to copy, communicate and adapt the work for non-commercial purposes, as long as you attribute Queensland Health.

ⁱ Brisbane is defined as Local Government Area of Brisbane in ABS Census data

ⁱⁱ At the 2006 Census up to two responses per person were allowed for the Ancestry question, count is therefore total responses not person count.

ⁱⁱⁱ Literacy is defined as those aged 15 and over who can read and write.

^{iv} Missing and not-stated responses to this question on the census were excluded from the analysis.

^v Community representatives state that the prevalence of people who cannot speak English is considerably higher than that reported by the Census and that there is error in census information resulting from children in the household completing the census on behalf of the family.

^{vi} Non-school qualifications are awarded for educational attainments other than those of pre-primary, primary or secondary education.

It should be noted that there is great diversity within communities and people do not fit into a pre-determined cultural box or stereotype. The information presented here will not apply to all Cambodian Australians and this profile should be considered in the context of the acculturation process.