

# Japanese Australians

- Japanese people first migrated to Australia in the late 1800s. Most migrants were men who came to Australia to work in the pearling industry in Broome and Thursday Island, and in the sugar industry in Queensland<sup>2</sup>. The 1911 Census recorded 3281 Japanese males and 208 females in Australia<sup>2</sup>.
- By the end of the World War II, only 74 Japan-born people and their children were allowed to stay in Australia<sup>2</sup>. However, within five years about 500 Japanese *war brides* had entered Australia<sup>4</sup>.
- The end of the *White Australia Policy* in 1973 saw more Japan-born people arrive in Australia to study and for business<sup>4</sup>. The 2001 Census showed there were 25,480 Japan-born people living in Australia<sup>2</sup>. By 2006, the population had increased by more than 20 per cent to 30,780<sup>2</sup>.
- **Ethnicity:** Japanese comprise 98.5 per cent of the population of Japan and are the only main ethnic group. Koreans and Chinese combined account for less than one per cent of the population<sup>5</sup>.
- **Language:** Japanese is the official language and is spoken by the majority of the population<sup>5</sup>.
- **Religion:**
  - The main religions of Japan are Shintoism and Buddhism, and many Japanese people belong to both religions. About two per cent of the population are Christian and eight per cent follow other religions<sup>5</sup>.
  - Shintoism is an ancient indigenous religion of Japan existing before the introduction of Buddhism<sup>6</sup>. It lacks formal dogma and is characterised by a veneration of nature spirits and ancestors<sup>6</sup>. In Shintoism, the wind, sun, moon, water, mountains and trees are all spirits (*Kami*)<sup>6</sup>.

Population of Japan-born people in Australia (2006 Census): 30,776<sup>1</sup>

Population of Japan-born people in Queensland: 8592

Population of Japan-born people in Brisbane: 3297

Population of Japan-born people in Gold Coast: 3125

Population of Japan-born people in Cairns: 1252

Gender ratio (Queensland): 51.3 males per 100 females<sup>1</sup>

Median age (Australia): The median age of Japan-born people in Australia in 2006 was 33.9 years compared with 46.8 years for all overseas born and 37.1 for the total Australian population<sup>2</sup>.

## Age distribution (Queensland)<sup>1</sup>:

Age	Per cent
0-19	16.4%
20-39	52.3%
40-59	23.9%
60+	7.4%

## Arrivals- past five years (Source-Settlement Reporting Database<sup>3</sup>)

Year	Australia	Queensland
2006	2,146	681
2007	2,011	643
2008	1,940	631
2009	1,549	508
2010	693	181

- Confucianism as a code of ethics has an influence on the lives of many Japanese people. High importance is placed on family values and social order<sup>7</sup>.

### Ancestry, language and religion in Australia (2006 Census for Japan-born people)

- The top three ancestry responses<sup>ii</sup> of Japan-born people in Australia were: Japanese (84.0 per cent), Australian (4.4 per cent) and English (2.7 per cent)<sup>2</sup>.
- More than three in four (79.2 per cent) Japan-born people reported that Japanese was the main language they spoke at home, with 17.4 per cent speaking English as the main language at home<sup>2</sup>.
- Almost half of all Japan-born people in Australia (49.2 per cent) reported they had no religious affiliation<sup>2</sup>, with 28.1 per cent reporting they were Buddhists and four per cent Catholic. An additional 11.6 per cent indicated they followed another religion and 7.2 per cent did not state their religion<sup>2</sup>.

### Communication

- Japanese people bow as a greeting, and to show respect and gratitude<sup>6</sup>. The depth of the bow depends on the occasion and social status of the individuals involved<sup>6</sup>.
- The Japanese smile can be difficult to interpret as it can be used to convey happiness, anger, confusion, embarrassment, sadness or disappointment<sup>6</sup>.
- Japanese people nod their heads to show either agreement or concentration during a conversation<sup>6</sup>.
- Japanese people make considerable effort to maintain harmony and may do so by expressing agreement, regardless of level of comprehension or genuine agreement, or simply by following instructions or recommendations<sup>8</sup>.
- A negative response is signalled by holding a hand in front of the face and waving it backwards and forwards<sup>6</sup>.

- It is usual to address Japanese people by their family names<sup>6</sup>. Given names are used only for children or between close friends<sup>6</sup>. *Sensei* or *san* may be added to the end of a name to indicate rank or position. *San* is the equivalent of the title Mr or Mrs<sup>6</sup>. *Sensei* is generally used for teachers or doctors<sup>9</sup>.
- An older Japanese person may not volunteer information, so respectful inquiry may be helpful to elicit pertinent clinical information<sup>7</sup>.
- It is advisable to avoid direct eye contact with a Japanese patient when discussing their illness, including diagnosis and prognosis<sup>10</sup>. Japanese people focus on the other person's forehead when they are talking<sup>9</sup>.

### Health in Australia

- Average life expectancy in Japan is 82.2 years (male 78.9, female 85.7) compared to 81.7 years for all people in Australia (male 79.3, female 84.3)<sup>5</sup>.
- Although there is a scarcity of studies of the health of Japan-born people in Australia, United States studies have shown that Japanese American men have lower rates of many chronic diseases including cardiovascular disease and stroke compared with other American men<sup>7</sup>.
- Type II diabetes is a disease shown to have higher prevalence among Japanese Americans. Prevalence rates of 20 per cent (twice the rate in comparable populations) have been reported among Japanese American men aged 45-74<sup>7</sup>.

### Health beliefs and practices

- Japanese Australians may combine traditional therapies with Australian medicine. It is advisable to ask patients if they are using any other therapies for their medical conditions<sup>7</sup>.
- Common traditional health practices include Kampo, Moxibustion, Shiatsu and Acupuncture<sup>7</sup>:

- Kampo uses herbal medicines which originated in China around the 7<sup>th</sup> Century<sup>7</sup>. The herbs are usually in powdered or granular form<sup>7</sup>.
- Moxibustion involves burning dried mugwort on specialised points of the skin to stimulate life energy and blood flow<sup>7</sup>. This can cause bruising on the skin<sup>7</sup>.
- Cupping uses round glass cups which contain a lit taper and are pressed into the skin to stimulate circulation.
- Shiatsu is a form of massage therapy concentrating on pressure points of the body to redirect or re-establish energy flow and restore balance<sup>7</sup>.
- Acupuncture involves inserting needles into specific points on the body to eliminate toxins and relieve pain<sup>7</sup>.
- Japanese Australian patients may find it awkward if sensitive medical information is given to them directly<sup>10</sup>. Japanese Australian patients may not want to hear the name of their illness directly from a doctor and may prefer to be informed indirectly before their appointment so they can be prepared when speaking with the doctor<sup>10</sup>. In Japan, medical information is usually shared with the family. The doctor may tell close family members about the situation first<sup>10</sup>.
- In many cases, Japanese Australian patients may not want their doctor to know that they are mentally upset by hearing bad news about their illness. Offering comfort to a Japanese patient who has broken down with grief could be very embarrassing for the patient<sup>10</sup>.
- In Shintoism, the state of health is associated with purity<sup>7</sup>. Japanese Australian patients may want to wash their hands frequently and use wet towels instead of washing<sup>8</sup>.
- In Japan, it is a common saying that Japanese people are born Shinto but die Buddhist<sup>7</sup>.
- In Shintoism, there is an emphasis on purity and cleanliness<sup>7</sup>. Terminal illness, dying and death are considered *negative* and *impure*<sup>7</sup>. Therefore, frank and open discussions about death and dying may be difficult<sup>7</sup>.
- Many Japanese people embrace Buddhism later in life. For Buddhists, death is a natural process where life continues in the form of rebirth<sup>7</sup>. Japanese Australians who are Buddhists may be more open to discussion about death and dying<sup>7</sup>.
- A number of Japanese Australians are Christians and embrace a Christian view of the meaning of death, dying and end of life issues.
- Many Japanese people believe that weakness of character is a cause for mental illness and may be reluctant to openly discuss disturbances of mood as these are considered to be indicative of personal weakness rather than treatable medical conditions<sup>11,12</sup>.

## Social determinants of health

- Literacy rates<sup>iii</sup> in Japan are high and equivalent to Australian rates at 99 per cent overall (99 per cent for both men and women based on a 2002 census in Japan)<sup>5</sup>.
- Most Japan-born people currently living in Australia have migrated by choice for work or study<sup>2</sup>.
- Proficiency in English (2006 Census)<sup>iv,1</sup>:
  - 72.9 per cent of Japan-born men and 78.1 per cent of Japan-born women in Australia reported that they spoke English well or very well
  - 23.7 per cent of men and 19.8 per cent of women reported that they did not speak English well
  - 3.4 per cent of men and 2.2 per cent of women reported that they did not speak English at all.

- At the time of the 2006 Census, 65 per cent of Japan-born people in Australia aged 15 years and older had some form of higher non-school qualifications<sup>Y</sup> compared to 52.5 per cent of the total Australian population<sup>2</sup>.
- The participation rate in the workforce (2006 Census) was 56.8 per cent and unemployment rate was 6.2 per cent compared to the corresponding values of 64.6 per cent and 5.2 per cent in the total Australian population<sup>2</sup>. The median income for Japan-born people in Australia aged 15 and older was \$315 compared to \$466 for the total Australian population<sup>2</sup>.
- 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 education<sup>13</sup>.

### Utilisation of health services in Australia

- Barriers to health service access and utilisation including mental health services include language, cultural differences, lack of appropriate information, communication and stigma<sup>14</sup>.
- There is a general stigma associated with mental illnesses among Japanese people and as a result some people may not seek psychiatric care or psychological counselling<sup>7,15</sup>. In traditional Japanese society, mental illness in a family member could bring embarrassment or shame upon the family name<sup>7</sup>.

## References

1. Australian Bureau of Statistics. CDATA Census 2006. Available: <https://www.censusdata.abs.gov.au/CDATAOnline>. Accessed 07/12/2010, 2010.
2. Department of Immigration and Citizenship. *Community Information Summary:Japan-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. Museum Victoria Australia. History of migration from Japan. Available: <http://museumvictoria.com.au/origins/history.aspx?pid=33>.
5. Central Intelligence Agency (CIA). *The world fact book*. CIA; 2010. Available: <https://www.cia.gov/library/publications/the-world-factbook/>.
6. Coulthard C. *Japan: A cultural profile*. Anti-Racism, Multiculturalism and Native Issues (AMNI) Centre, Faculty of Social Work, University of Toronto: Toronto; 2001. <http://www.cp-pc.ca/english/japan/index.html>.
7. Hikoyeda N, Tanabe M. Health and health care of Japanese American older adults. In: *eCampus Geriatrics*. Periyakoil VS [editor]. Stanford CA: Stanford School of Medicine; 2010.
8. Queensland Health and Faculty of Medicine NaHSaMU. *Cultural dimensions of Pregnancy, Birth and Post-natal care*. Queensland Health: Brisbane; 2009. Available: [http://www.health.qld.gov.au/multicultural/health\\_workers/cultdiver\\_guide.asp](http://www.health.qld.gov.au/multicultural/health_workers/cultdiver_guide.asp).
9. Hirano N. *Review of Cultural Diversity Profile- Japanese Australians*. Personal communication; 4 May 2011.
10. Andresen J. Cultural competence and health care: Japanese, Korean and Indian patients in the United States. *Journal of Cultural Diversity* 2001;8:109-121.
11. Nakane Y, Jorm AF, Yoshioka K, Christensen H, Nakane H, Griffiths KM. Public beliefs about causes and risk factors for mental disorders: A comparison of Japan and Australia. *BioMed Central Psychiatry* 2005;5:33.
12. Radford MH. Transcultural issues in mood and anxiety disorders: A focus on Japan. *CNS Spectrum* 2004;6:13.
13. 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.
14. Long H, Pirkis J, Mihalopoulos C, Naccarella L, Summers M, Dunt D. *Evaluating mental health services for non-English speaking background communities*. Centre of Health Program Evaluation: Melbourne; 1999.
15. Griffiths KM, Nakane Y, Christensen H, Yoshioka K, Jorm AF, Nakane H. Stigma in response to mental disorders: A comparison of Australia and Japan. *BioMedCentral Psychiatry* 2006;6:21.



© 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.

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 Japanese Australians and this profile should be considered in the context of the acculturation process.

<sup>i</sup> A phrase used to describe the restrictive immigration policies of the colonial and Australian Governments from the 1850s until the 1970s that aimed to maintain a predominantly white population in Australia.

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

<sup>iii</sup> Definition of literacy – Age over 15 years can read and write.

<sup>iv</sup> Missing and not-stated responses to this question on the census were excluded from the analysis.

<sup>v</sup> Non-school qualifications are awarded for educational attainments other than those of pre-primary, primary or secondary education.