Hmong Australians

- The Hmong are a highland group from southern China, and resident in Laos, North Vietnam and Thailand. The Hmong have migrated from their homeland since the end of the Vietnam War in 1975 when they faced persecution or death from the communist movement in Laos²⁻⁴.
- From 1975 to 1997, approximately 138,000 Hmong escaped by crossing the hazardous Mekong River to refugee camps in Thailand. It is estimated that between 50,000 to 100,000 Hmong people died from fighting, disease and starvation^{3,4}. Many of the Hmong seeking refuge in Australia transitioned through a refugee camp in Thailand².
- Places of transition: Thailand
- Language: Hmong was the main language spoken at home by 85.5 per cent of Hmong Australians in the 2006 census⁵.
- **Religion:** Hmong religion is comprised of a cult of spirits, shamanism and ancestor worship. It is a pantheistic religion teaching that there are spirits residing in all things. According to Hmong religious beliefs there are two distinct worlds, the invisible world of *yeeb ceeb*, which holds the spirits, and the visible world of *yaj ceeb*, which holds humans, material objects and nature. The shaman is an important person because he has the ability to make contact with the world of the spirits⁶.
- The main religion responses of Hmong Australians based on the 2006 census⁵:
 - No religion or not stated 42 per cent
 - Buddhism 21.8 per cent
 - Ancestor veneration 10 per cent
 - Animism 8.9 per cent
 - Christian 3.8 per cent
 - Catholic 3 per cent.

Community Profiles for Health Care Providers

Population of Hmong people in Australia (2006 census): 2189¹

Population of Hmong people in Queensland (2006 census): 14471

Population of Hmong people in Brisbaneⁱ (2006 census): 690¹

Gender ratio (Queensland): 94.4 females per 100 males¹

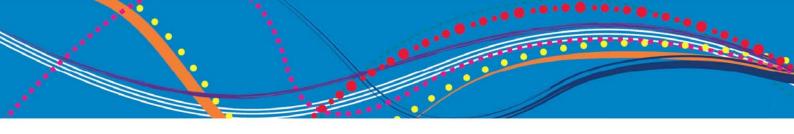
Age distribution (Queensland)1:

Age	Per cent
0-19	55%
20-39	27%
40-59	13.7%
60+	4.2%

Communication

- Hmong people greet each other verbally⁷. Older Hmong people and women may be unfamiliar with the practice of shaking hands.
- Hmong people may be reluctant to make direct eye contact. Traditionally, looking directly into the face of a Hmong person or making direct eye contact is considered rude and inappropriate⁷.
- Hmong people tend to be reserved and may not wish to show or express their true emotions in front of other people. They may say *maybe* or *I will try* instead of giving a definite positive or negative reply⁷. If they feel pressured, they may say *ok* or *yes* when they actually mean no^{8,9}.
- Due to religious beliefs and personal values, many traditional Hmong elders, especially men, may object to a stranger touching their heads, or those of their children⁹.





- Hmong people, particularly the elderly, may not speak English well, or at all, and may depend on their children or family members to communicate².
- Care may be required when explaining health care issues as many Hmong Australians have not completed any formal education².
- There are two distinct dialects of Hmong language: White Hmong (*Hmong Der* dialect) and Green Hmong (*Mong Leng* dialect) 8,10. The names of the languages originate from the colours traditionally used for women's clothing by the different groups 8,10. Although some Hmong people report difficulty in understanding speakers of another dialect, in general speakers of White and Green Hmong can understand each other 8,10.
- Hmong patients often prefer for health care providers to take some time to discuss family or other pleasantries before asking direct questions about their physical health¹¹.

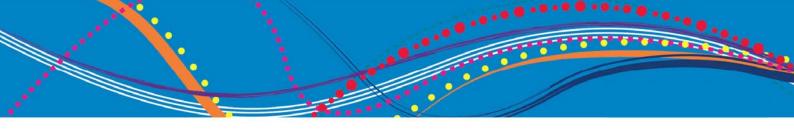
Health in Australia

- Little data are available on the health of Hmong people in Australia. The health information presented here is based on data on Hmong in the United States.
- Hmong people have been shown to have relatively high rates of tuberculosis (approximately 12 per cent of Hmong people who arrived in the United States between 2004 and 2006 had latent tuberculosis infection) and hepatitis B (approximately 10 per cent of Hmong people who arrived between 2004 and 2006 carried chronic hepatitis B infection)^{3,8}.
- Studies show that Hmong people are at increased risk of cardiovascular disease, diabetes mellitus, hypertension and end-stage renal disease^{3,8,12}.
- There is evidence to indicate that Hmong people have an elevated risk for cancers of the stomach, liver, cervix and pancreas⁸. Hmong people have a

- 35 times higher risk for nasopharyngeal cancer and a relatively high risk of leukemia and non-Hodgkins lymphoma^{3,8}.
- A health issue that is of particular concern for Hmong men is Sudden Unexplained Nocturnal Death Syndrome (SUNDS)⁸. This is a regional phenomenon within Asia and occurs in populations that are culturally and genetically distinct¹³. It primarily affects healthy young men in their mid-20s or 30s¹³. Research suggests the risk of SUNDS may be increased by a family history of SUNDS, a pre-existing cardiac abnormality, cadiomegaly and post-traumatic stress disorder (PTSD)^{13,14}.
- The trauma and stress of war, extended periods of time spent in refugee camps, and experiences of repression have contributed to high rates of depression, PTSD, and other psychological illnesses⁸.

Health beliefs and practices

- Hmong beliefs about the causes of illness can be divided into three basic categories^{3,15}:
 - Natural causes: This includes imbalances of metaphysical forces (similar to the concept of *yin*/ *yang*), changes in weather, bad food, heredity, aging and bacteria. The Hmong understanding of bacteria is similar to that of Australian medicine^{3,15}.
 - Spiritual or religious causes:
 Ancestors, nature and evil spirits
 are all thought to be able to cause
 illness to people in some cases¹⁵.
 - Other causes: There is a broad range of other causes of illness. For example, it is a common traditional Hmong belief that a person who has been wronged by another has the power to curse that person and bring about illness¹⁵.
- Non-Christian Hmong may consult a Shaman to diagnose and treat the causes of illness¹⁶.

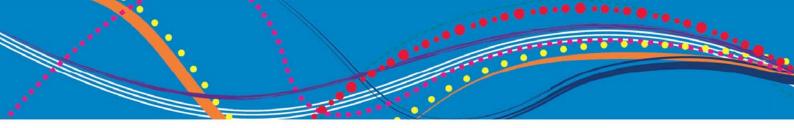


- Many Hmong people believe that illness can result from an individual losing one or more of the twelve souls that are thought to dwell in the human body. For good health, all twelve souls must remain intact in the body. Many aches and pains, depression and symptoms of mental illness are believed to be caused by a person having lost souls. Souls may be lost in a variety of ways including a sudden fright, excessive fear or grief, capture by an evil spirit, or a soul transferring to another being because they are unhappy¹⁵.
- Many Hmong people believe that surgery may interfere with reincarnation or may open access to the body for evil spirits to enter¹⁷.
- Some Hmong people may fear anaesthesia and after a general anaesthetic may feel it is necessary to perform a soul calling ceremony².
- Many Hmong people believe that blood maintains balance in the body and that the body may be weakened if blood is withdrawn¹⁷.
- Traditional Hmong believe that an autopsy may hinder the reincarnation of the deceased person¹⁷.
- Many Hmong believe that after childbirth the mother's body is susceptible to illness because it is *cold* from blood loss. It is believed that the new mother should follow a special diet for 30 days that includes *hot* as opposed to *cold* foods. The father and his mother will often cook these foods for the new mother¹⁶.
- Hmong believe the placenta is required for reincarnation and is usually buried at the place of birth. In Australia, Hmong women may wish to bury the placenta².
- Hmong may have a limited understanding of the concept of chronic illness and may have a consistent impression that these illnesses can be cured rather than managed¹². Adherence to long-term sustained treatment regimes may be

- low. Careful explanation to the decision maker in the family may be required to gain their support².
- Headaches, muscle aches, swelling, tingling, back pains, chest pains and abdominal pains are often interpreted as being caused by a build-up of pressure in the body that must be released³. Traditional healing techniques used to *dim pa* (release the pressure) include cupping, coining and massage³.
 - Cupping uses round glass cups, bamboo jars or water buffalo horns. These objects are placed on the location of the pain and a vacuum is applied to the skin by heat or mouth suction. Cupping can cause a bruise³.
 - Coining or spooning involves applying medicated oil or balm and then rubbing the skin with a flat edged object such as a silver coin or a spoon³.
 - Massage is used to loosen the body (muscles, tendons and veins) and promote better circulation³.
- Hmong people may grow, import and use herbs and other organic substances for healing a variety of ailments³.
- Same sex health care providers are preferred by Hmong Australians, particularly for women². Hmong women may refuse vaginal examinations, especially by male doctors. This may be a reason for late presentation for antenatal care and non-attendance at post partum checks².

Social determinants of health

- Many Hmong have not completed any formal education⁸.
- The written form of Hmong language was only developed in the 1950s.
 Because of this recent development of the written language, many older Hmong Australians may be illiterate in the Hmong language⁸.



- Many Hmong Australians may have spent several years in refugee camps before migrating to Australia, in addition to experiencing the trauma of war and repression².
- Clans are Hmong family groups and the clan name is the family name ¹⁶. Hmong clans are a major source of social support for their members ¹⁶.
 Traditionally, clans also provide economic assistance to their members ¹⁶.

Utilisation of health services in Australia

- There is no published data on health service utilisation by Hmong Australians.
- Hmong Australians believe Australian medicine to be beneficial, but traditional herbal and spiritual

- diagnosis and treatment may preferred as a first option².
- A United States study found that consultation with traditional practitioners such as herbalists and shaman, and lower socioeconomic position were two major barriers to utilisation of health services¹⁸.
- Cultural differences are major barriers to the use of mental health services by Hmong people⁸. The Hmong language has no words for mental illness, except for one word that means *crazy* in English¹⁹. Many Hmong consider self-disclosure and the open display of emotions to be signs of weakness and will not easily acknowledge mental health problems⁸.

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

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