Burundian Australians

- In 1972, conflict between the ruling Tutsis and the majority Hutu population resulted in approximately 200,000 deaths and 150,000 people seeking refuge in Tanzania, Rwanda and Zaire (now the Democratic Republic of Congo).

- In 1988, increasing tensions between the ruling Tutsis and the majority Hutus resulted in violent conflict between the army, the Hutu opposition and Tutsis. As a result, an estimated 150,000 people were killed and tens of thousands of refugees fled to neighbouring countries.

- In 1993, Burundi’s first democratically elected Hutu president was assassinated leading to another wave of violence between the Tutsis and Hutus. This resulted in more than 100,000 deaths within a year, and another 100,000 more deaths and hundreds of thousands of refugees fleeing the country over the next 11 years. This civil war continued until 2005.

- By 2006, there was only a relatively small intake of Burundian refugees into Australia with only 753 Burundi-born people recorded in the 2006 Census. Since 2006, the Australian Burundi-born population has more than doubled with 1266 Burundi refugees settling in Australia between 2006 and 2010.

- Places of transition: Tanzania, Rwanda, Uganda, Zimbabwe, Malawi and the Democratic Republic of Congo.

- Ethnicity: There are two major ethnic groups in Burundi: Hutu (Bantu) (85 per cent) and Tutsi (Hamitic) (14 per cent). Twa (Pygmy) comprise about one per cent of the population and Europeans and South Asians number a few thousand each.

- Language: The main and official languages are Kirundi and French. Swahili is spoken in some areas.

Population of Burundi-born people in Queensland: 188
Population of Burundi-born people in Brisbane: 166
Gender ratio (Queensland): 89.9 females per 100 males

Age distribution (Queensland):

<table>
<thead>
<tr>
<th>Age</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-19</td>
<td>37.8%</td>
</tr>
<tr>
<td>20-39</td>
<td>46.8%</td>
</tr>
<tr>
<td>40-59</td>
<td>15.4%</td>
</tr>
<tr>
<td>60+</td>
<td>0%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Year</th>
<th>Australia</th>
<th>Queensland</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>380</td>
<td>118</td>
</tr>
<tr>
<td>2007</td>
<td>417</td>
<td>142</td>
</tr>
<tr>
<td>2008</td>
<td>180</td>
<td>41</td>
</tr>
<tr>
<td>2009</td>
<td>184</td>
<td>69</td>
</tr>
<tr>
<td>2010</td>
<td>105</td>
<td>16</td>
</tr>
</tbody>
</table>

- Religion:
  - The majority of Burundians are Christian (67 per cent), of which most are Catholic (62 per cent) and some Protestant (5 per cent)
  - About 23 per cent of Burundians, including most of the Twa and some Christians, have maintained traditional beliefs which include forms of animism. Animists believe that inanimate and natural phenomena, as well as living creatures, have souls and
spirits. Certain rituals are believed to control uncertainties and negative influences in life.

- 10 per cent of the population are Muslim.

Communication

- Handshakes are important to Burundians and the type of handshake varies by region. For example, one handshake involves touching one’s left hand to the other person’s elbow. Handshakes are often soft.

- People stand close together in conversation and often continue holding hands for several minutes after shaking.

- There is good to fair eye contact between people of equal stature but little eye contact otherwise. Avoiding eye contact is a way to show respect for the elderly or important people.

Health in Australia

- Average life expectancy in Burundi is 58.3 years (male 56.7, female 60) compared to 81.7 years for all people living in Australia (male 79.3, female 84.3).

- The prevalence of serious mental health problems in Burundian refugees living in Tanzanian refugee camps has been found to be very high (50 per cent using the General Health Questionnaire as a screening instrument).

- A Western Australia infectious disease screening study of 2111 refugees and humanitarian entrants (2003-2004) reported a high prevalence of infectious diseases in sub-Saharan Africans including: hepatitis B (6.4 per cent carrier state, 56.7 per cent exposed), syphilis (6.8 per cent), malaria (8 per cent), intestinal infections (giardia intestinalis – 13 per cent, schistosoma mansoni – 7 per cent, stongyloides stercoralis – 2 per cent, hymenolepis nana – 3 per cent, salmonella – 1 per cent and Hookworm – 5 per cent), a Mantoux test result requiring tuberculosis treatment (28.9 per cent).

- The prevalence of non-communicable diseases such as diabetes and hypertension is increasing in Tanzania, a major source country for Burundian refugees arriving in Australia.

Health beliefs and practices

- Many Burundians use traditional remedies to treat diseases. Potions made from leaves, roots, bark, fruit and herbs may be taken orally or rubbed on the skin. Many Burundian Australians are unable to use traditional remedies in Australia because of the unavailability of ingredients. Some people travel to Burundi to access traditional remedies.

- Animist rituals may be performed to cure a person who is ill.

- The health care system in Burundi is basic and medical facilities are limited, even in cities. About two million people in Burundi (one third of the population) have no access to formal health care. Burundian Australians unfamiliar with the health care system may benefit from orientation to the system, including how to make a health appointment, the importance of regular health checks and immunisation, and how to access emergency departments.

- Burundian Australians are willing to access Australian medical treatments.

- Many Burundian Australians prefer injections to tablets.

Social determinants of health

- The literacy rate of Burundians, particularly female, is low. In 2000, the overall literacy rate for Burundi was 59.3 per cent (male 67.3 per cent, female 52.2 per cent).

- Many Burundians have experienced traumatic and life threatening experiences including prolonged pre-trial detention, harsh and life threatening prison conditions, torture and beatings, witnessing killings, kidnap, rape, extortion, and forced labour.
• About 60 per cent of the Burundian population lack access to safe drinking water.

• Thousands of Burundian refugees have spent years in refugee camps in neighbouring countries such as Tanzania, many for longer than a decade and some for almost their entire lives. Some Burundians have fled their country more than once. Living conditions in these overcrowded camps are primitive, water and sanitation inadequate, infectious diseases a continued threat and, with a mix of ethnicities and political orientations, many people have experienced insecurity and paranoia.

• Settlement is often impacted by changing family dynamics and concern for family members who remain in refugee camps.

• Proficiency in English (2006 Census):
  - 36 per cent of Burundi-born males and 19 per cent of Burundi-born females reported that they spoke English well or very well
  - 46 per cent of males and 49 per cent of females reported that they did not speak English well
  - 18 per cent of males and 32 per cent of females reported that they did not speak English at all.

**Utilisation of health services in Australia**

• A small study of sub-Saharan refugees in Sydney showed evidence of difficulties in accessing health care, including at times when a family member was sick. Barriers to health care access included: language barriers, lower levels of education and literacy, financial disadvantage, lack of health information, and a poor understanding of how to access health services.
Community Profiles for Health Care Providers

References


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1 According to community representatives it is likely that the Census numbers of Burundi-born people underestimate the actual number of Burundi-born people in Australia, Queensland and Brisbane as a result of Burundian Australians' lack of familiarity with and low participation in the Census.

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

3 Defined as a positive Mantoux test result of ≥15mm.

4 Definition of literacy- age over 15 years can read and write.

5 Missing and not-stated responses to this question on the census were excluded from the analysis.

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