

Afghan Australians

- The first Afghan people arrived in Australia in 1859 to drive camels in the Burke and Wills expedition².
- The number of Afghanistan-born people living in Australia in 1901 was 394 and there was a gradual decline in the population until the early 1980s².
- As a result of the 1979 invasion of Afghanistan by the Union of Soviet Socialist Republics (USSR) and subsequent civil war in the 1980s, many Afghan people (including educated professionals) sought refugee status in Australia.
- In the late 1990s, a number of Afghan people came to Australia fleeing the Taliban regime².
- After the United States and Britain initiated a North Atlantic Treaty Organization (NATO) supported war on the Taliban in October 2001, more Afghan people fled as refugees.
- Although the United Nations began repatriation of Afghan people from 2002⁴, the numbers of Afghan people settling in Australia peaked in 2005 and 2006 with more than 5000 Afghan refugees arriving in Australia during the two year period³.
- **Places of transition:** Pakistan and Iran.
- **Ethnicity:** The four main ethnic groups in Afghanistan are: Pashtuns (42 per cent), Tajiks (27 per cent), Hazaras (16 per cent) and Uzbeks (nine per cent)^{5,6}.
- **Language:** The main languages spoken in Afghanistan are: Dari (Afghan Persian) 50 per cent, Pashto 35 per cent and Turkic languages (primarily Uzbek and Turkmen) 11 per cent. Thirty other minor languages are spoken. Many people are bilingual⁷.

Population of Afghanistan-born people in Australia (2006 Census): 16,753¹

Population of Afghanistan-born people in Queensland: 840¹

Population in Afghanistan-born people in Brisbane¹: 725¹

Gender ratio (Queensland): 85.6 females per 100 males

Median age (Australia): The median age of Afghanistan-born people in Australia in 2006 was 28.9 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	27%
20-39	47.7%
40-59	19.5%
60+	5.7%

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

Year	Australia	Queensland
2006	2568	117
2007	1862	92
2008	1602	101
2009	2345	166
2010	2665	233

- **Religion:** Islam is the official religion of Afghanistan and is practised by more than 99 per cent of Afghan people. Sunni Muslims make up 80 per cent, Shi'a Muslims make up 19 per cent and other religions one per cent or less^{5,7}.

Ancestry, language and religion in Australia (2006 Census for Afghanistan-born)²

- The top three ancestry responsesⁱⁱ of Afghanistan-born people in Australia were:
 - Afghan – 79 per cent
 - not stated – 6.6 per cent
 - Hazara – 4.5 per cent.
- The main languages spoken at home by Afghanistan-born people in Australia were:
 - Dari – 66.1 per cent
 - Persian (excluding Dari) – 16.2 per cent
 - Pashto – 7.6 per cent.
- The main religion of Afghanistan-born people in Australia was Islam (95.2 per cent).

Communication

- Hazaragi is a dialect of Dari spoken by the Hazara ethnic group of Afghanistan. Hazaras comprise between 16 to 20 per cent of the population of Afghanistanⁱⁱⁱ and they account for more than 50 per cent of the Afghan refugees who have arrived in Australia between 2006 and 2010⁶.
- The rates of education of Hazara people are lower than the other main ethnic groups of Afghanistan and many Hazaras are illiterate⁹. In many cases Hazaragi speakers (particularly those who have lived in rural areas) cannot understand Dari interpreters⁹. There is a shortage of Hazaragi interpreters in Australia^{6,8}.
- There is a fear in the Afghan Australian community that interpreters will not abide by confidentiality requirements⁸.
- Many Afghan Australian women wear a *burqa* (loose body covering) and *hijab* (head covering) in public.
- It is normal for people of the same gender (men/men, women/women) to shake hands, kiss on the cheek and hug (particularly among men) when greeting^{6,8}.

- Muslim men and women may be reluctant to shake hands with people of the opposite gender. It is advisable that in such situations it is left to the Muslim person to decide what is appropriate⁸.
- Afghan Australians may also greet by placing their hands over their heart and bowing slightly^{6,10}.
- Eye contact is generally avoided between men and women. Eye contact between men is acceptable but is usually only occasional, not prolonged¹⁰.
- An Afghan Australian elder's nod may merely be a social custom showing politeness and respect for authority rather than a sign that they understand or agree with what the healthcare provider is saying¹¹.
- As a sign of respect, Afghan Australians do not call older people by their given name⁸.
- Afghan Australians are likely to show their appreciation of a service provided to them by expressing words of blessing⁸.

Health in Australia

- Afghanistan has the fourth highest mortality rate and second highest infant mortality rate in the world, and a life expectancy of only 44.6 years (male 44.5, female 44.9)⁵.
- As a result of their experiences of war and displacement, and their experiences as refugees, which in many cases has included mandatory detention, Afghan refugees are at high risk of mental illness and emotional issues¹³.
- There is little research on the physical and mental health status of Afghanistan-born Australians and Afghan refugees in Australia. High rates of post traumatic stress disorder (PTSD), depression and anxiety have been found in Afghan asylum seekers and refugees living in the Netherlands¹⁴. Afghan women were shown to have higher rates of PTSD, depression and anxiety than men¹⁴.

- According to a 2002 population-based mental health survey in Afghanistan, women had significantly lower mental health status and poorer social functioning than men¹²:
 - The prevalence of depression was 73 per cent in women and 59 per cent in men
 - The prevalence of symptoms of anxiety was 84 per cent in women and 59 per cent in men
 - The prevalence of PTSD was 48 per cent in women and 32 per cent in men.

Health beliefs and practices

- Beliefs about preserving health include living in accordance with the precepts of Islam which strongly emphasises personal daily hygiene including washing before prayer. Regular exercise, eating fresh food and a balanced diet, staying warm, and getting enough rest are also seen as important for health¹⁵.
- Traditional Afghan causes of illness include: an imbalance of *hot* and *cold* forces in the body, not adhering to the principles of Islam and the will of God, possession by evil spirits called *jinn*, being given the *evil eye*, or sometimes witchcraft¹⁵. *Jinn*, the *evil eye* and witchcraft are mainly seen to cause mental illness⁶.
- Prayer is traditionally seen as important in healing illness¹⁵.
- Doctors are held in very high regard⁸.
- Financial hardship has meant a major lack of health care services in Afghanistan, especially in rural areas. As a result, there has been a reliance on the use of medicinal herbs and plants to treat various illnesses⁸.
- Older Afghan Australians may prefer traditional treatments to Australian medical treatments⁸.

- Older Afghan Australians have a strong preference for receiving care from same sex health care providers, particularly in nursing tasks such as assistance with personal care¹⁵.
- Religious rituals and customs at birth and death are important. A Muslim birth custom involves having an adult male be the first person to speak to a newborn infant. This male, who becomes a special person in the infant's life, whispers a secret blessing in the ear of the child¹⁶. This is usually the *Adhan*, or what is usually recited as a call for prayer⁶.
- Muslims may prefer to decrease sedation at the time of death so that the patient is able to hear the final part of the same blessing he or she heard at birth. The final part of the blessing, which is called the *Kalima* or confession of the faith, should be the last thing one hears at death¹⁶.
- For more information on Islamic beliefs affecting health care please refer to the [Health Care Providers' Handbook on Muslim Patients](#)¹⁷.
- A strong cultural stigma is attached to mental illness. Many mental health conditions such as depression may not be considered an illness. Afghan Australians may be reluctant to access mental health services⁸.
- There is a strong stigma attached to men having a mental illness as it is seen as a sign of weakness^{8,6}.

Social determinants of health

- Education and literacy^{iv} rates in Afghanistan are low. The overall literacy rate in 2000 in Afghanistan was 28.1 per cent^{5,7}. Female literacy was 12.6 per cent and male 43.1 per cent^{5,7}.
- Many Afghan women experienced severe restrictions to their movements under Taliban rule in Afghanistan. This includes being banned from attending educational institutions and foregoing medical treatment including attendance at pre and post natal clinics due to a fear of being in public and affordability issues^{18,19}.

- Afghan refugees have been exposed to terror, destruction and loss from political violence. Many have experienced the destruction of homes, the disappearance or death of family members, sexual assault by armed combatants, arbitrary detention, torture and a chronic fear of being injured or killed²⁰. In addition, many Afghans have experienced poverty, displacement, and the loss of social connections and social isolation before seeking refuge in countries such as Australia²⁰.
- The conditions in detention centres and the delay in the processing of refugee claims adds to the trauma which refugees have already experienced in Afghanistan²¹.
- Proficiency in English^v in Australia (2006 Census)¹:
 - 72 per cent of Afghanistan-born men and 59 per cent of Afghanistan-born women reported that they spoke English well or very well
 - 19 per cent of men and 26 per cent of women reported that they didn't speak English well
 - 3 per cent of men and 11 per cent of women reported that they didn't speak English at all.
- At the time of the 2006 census, 33.7 per cent of Afghanistan-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 46 per cent and unemployment rate was 17.7 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 Afghanistan-born people in Australia aged 15 and older was \$234 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 names from the Middle East were subject to discrimination in applying for jobs. People with Middle Eastern sounding names had 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 had the same work history and qualifications²².

Utilisation of health services in Australia

- The use of hospital services among people born in refugee-source countries including Afghanistan is lower or similar to that of the Australia-born population^{23,24}.
- Identified barriers to accessing health care services in Australia include: services and procedures incompatible with Islamic beliefs, discrimination on the part of service providers, exclusion based on language (lack of translated information and insufficient numbers of professional interpreters), loneliness and insecurity based on the want of customary family support, alienation based on a sense of not belonging, and not being able to negotiate the health care system¹³.



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

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 Although some official estimates of the population size of Hazara in Afghanistan report it at 9 per cent (5.), the basis for this data is the successive Pashtun dominated governments who are believed to incorrectly represent the population of different Ethnic groups. Some Hazara leaders say that they are 30 per cent of the population. Many agree that the correct proportion is likely to be between 16 and 20 per cent.

^{iv} Literacy is defined as those aged 15 and older who can read and write.

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

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