

**LIVING ARRANGEMENTS AND WELL-BEING OF  
CULTURALLY AND LINGUISTICALLY DIVERSE OLDER ADULTS**

Siew-Ean Khoo

Australian Demographic and Social Research Institute  
The Australian National University

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## EXECUTIVE SUMMARY

### Introduction

The study aims to improve knowledge and understanding of the ageing experiences of culturally and linguistically diverse (CALD) older adults by analysing data from the 2006 Australian population census on their living arrangements and social and economic well-being. The research examines these issues mainly by the older adults' country of birth with the focus on the 25 largest birthplace groups of CALD background<sup>1</sup>.

The research is guided by the concept of the "Third Age" as the basis for a more positive discussion of ageing and as a life-cycle stage of independent living in old age (see Laslett 1989; Rowland 2003). Based on this conceptual framework, the study focuses on measures and key indicators of the ageing experience that relate to living arrangements, the pursuit of an active retirement and the absence of a need for assistance with core activities. The measures of social and economic well-being reflecting these dimensions that are available from the 2006 census and examined in this study include: marital status, living arrangements, English language proficiency, education, income, home ownership, absence of the need for assistance with core activities, participation in paid work and volunteering, domestic work, looking after children and caring for an older person or family member with a long-term illness or disability. The study focuses on the population aged 50 and older, which is consistent with the client base of National Seniors Australia. The ageing experiences of CALD older adults are examined for men and women separately in three age groups reflecting the different stages of ageing: 50-64, 65-79 and 80 and over. CALD older adults are compared with older adults of English-speaking background or who are born in Australia.

### Demographic background

The 2006 population census shows there are 1.1 million people aged 50 and over who are born in non-English-speaking or CALD countries. They comprise 19% of the

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<sup>1</sup> Indicators of CALD older adults' well-being based on the census data are also obtained for the 25 largest groups of CALD older adults identified by ancestry and language spoken at home. These are available as separate tables to the report.

total Australian population aged 50 and over. People born in CALD countries have an older age structure than people born in Australia. More than 42% of people born in CALD countries were aged 50 and over in 2006 compared with 26% of the Australian-born population.

There is considerable overlap in the list of the 25 largest groups of older people of CALD background identified by country of birth, ancestry or language spoken at home. People of Italian or Greek ethnic origin are the two largest CALD groups according to country of birth or language spoken at home.

CALD older adults are more likely to live in New South Wales and Victoria compared to older adults of English-speaking background, although there are differences by country of origin in terms of their residential location and concentration. They are disproportionately less likely to live in Queensland and Tasmania than older people born in Australia or from English-speaking countries.

### **Living arrangements**

Older people's living arrangements are an important aspect of their well-being, providing an indication of their independence and access to family support. Older adults born in CALD countries are more likely to live with a spouse or other family members than older people born in Australia or other English-speaking countries. This is particularly so among women aged 65 and older who are born in CALD countries where the percentage living with other family members (not the spouse) is twice as high as for older women born in Australia or other English-speaking countries. CALD older adults are less likely than other older people to live alone or in an institutional care facility. These living arrangements are consistent with those observed in earlier studies of the ethnic aged (eg. Rowland 1991).

### **Social and economic well-being**

Five measures of social and economic well-being are examined. They are English language proficiency, level of education, personal income, home ownership and need for assistance with core activities.

The conclusion from an examination of these five measures of social and economic wellbeing is that as a group, older people of CALD background are not doing as well as older people of English-speaking background. However, as its name implies, the CALD group is diverse and there are differences within the group in all the five measures of social and economic well-being by ethnicity as measured by country of birth (and also by language and ancestry as shown in separate tables to the report). The aged from countries such as Lebanon, Turkey and Vietnam have lower levels of social and economic well-being than the other CALD groups according to the measures examined. Older people of Southern European origins, many of whom migrated to Australia in the 1950s and 1960s, also have lower English language proficiency, education and income but have higher rates of home ownership. The social and economic well-being of older people of Western and Eastern European origins is more similar to that of older people of English-speaking background. There are also differences among the Asian birthplace and ethnic groups. Older people from Malaysia, Singapore, Hong Kong, India and Sri Lanka are generally more proficient in English because English is widely spoken in countries that are part of the British Commonwealth. They are also better educated and have better incomes and some are likely to have been overseas students in Australia in the 1960s or 1970s or skilled or business migrants in the 1980s or 1990s. They are also less in need of assistance with daily core activities than their counterparts from other Asian countries such as Vietnam and China.

### **Productive ageing**

Productive ageing is examined in terms of five measures that are available from the 2006 census data: participation in paid work, volunteering, doing housework, looking after children and care of an older family member or others with a disability or long-term illness. The first two measures examine older people's engagement with the broader community. The other three measures relate to caring responsibilities within the family.

Older adults from CALD countries as a group have lower rates of participation in paid work and volunteering compared to older people from English-speaking countries or who are born in Australia, even after controlling for differences in English language proficiency and education in statistical analyses. This suggests that there are other

barriers besides lack of English and level of education in CALD older adults' participation in paid work and volunteering. The percentage doing domestic work is also lower for men and women of CALD background than other men and women in the age group 50-79. Men and women aged 65 and over from CALD countries have a higher proportion caring for young children compared to the Australian-born and people of English-speaking background of the same age, but there is not much difference between CALD older adults and older adults of English-speaking background in the proportion caring for someone who is ill, old or disabled. Differences are observed by country of origin in the proportion of CALD older adults caring for young children, with the proportion higher for men and women from some Southern European and Asian countries than for men and women from Western European or Middle Eastern countries.

Measures of productive ageing in CALD older adults show that it tends to be focused at home within the family rather than in the community.

## **Conclusion**

Older people from CALD countries differ in their living arrangements and social and economic well-being from older people born in Australia and other English-speaking countries. There are also differences by ethnicity identified by country of origin, and also by reported ancestry and language spoken at home. Differences are observed in the various measures of well-being and productive ageing among older adults of Southern European, Eastern European and Western European backgrounds and among older people from different Asian countries.

The greater likelihood of poorer physical health among some CALD birthplace groups which may be linked to their lower participation in paid employment and lower income status suggest that they are likely to be more dependent on the public health and welfare systems even though they may have family support at home. For those CALD older adults who do not speak English well, their families and ethnic communities will continue to be important in providing social support.

While the current study has examined a number of indicators of the living arrangements and social and economic well-being of CALD older adults and shown considerable diversity in these indicators by ethnic background, questions remain in

relation to the ways in which cultural dimensions of ethnicity can facilitate their adjustment to the ageing process. These questions can only be answered by more detailed studies of specific birthplace or ethnic groups of CALD older adults as there is considerable diversity both between and within geographic regional groups.

## **LIVING ARRANGEMENTS AND WELL-BEING OF CULTURALLY AND LINGUISTICALLY DIVERSE OLDER ADULTS**

### **Introduction**

As in many industrialised countries, Australia's population is ageing. The proportion of the population aged 65 and over will increase from 11% in 1987 to 15% in 2011 and to 22% in twenty years' time. Australia is also a country of immigration, and its immigrant population has an older age structure than the Australian-born population. In 2006, 19% of the overseas-born population were aged 65 and over compared with 11% of the Australian-born population. Because of the different waves of immigration during the second half of the last century, some immigrant groups also have relatively high proportions in the older age groups. The 1950s and 1960s were years of high immigration from Southern and Eastern Europe. A large proportion of immigrants from these countries are now aged over 65. For example, 52% of Australian residents born in Italy were aged 65 and over in 2006; as were 45% of those born in Greece, 51% of those born in Hungary and 37% of those born in Poland. With the end of the 'White Australia' policy in the early 1970s, Australia began receiving immigrants from non-European countries, particularly from Asia. Among these more recently arrived immigrants, the proportion in the older age groups is much lower, but the number of older people in some of the larger immigrant communities is still large. Examples are immigrants from China where over 25,000 are aged 65 and over in 2006 (although they form just 12% of the total birthplace group), immigrants from India with nearly 15,000 aged 65 and over (10% of the total birthplace group), and immigrants from Vietnam with over 11,000 (7% of the birthplace group). While some of these overseas-born older adults have been resident in Australia for many years, others are more recent migrants. Also, while some are proficient in English and have adjusted to life in Australia, others may not speak English well or at all and may be less well integrated. There is consequently increasing interest in the ageing experiences of the older population of culturally and linguistically diverse (CALD) background and their social and economic wellbeing.

### **Previous research on the ethnic aged in Australia**

Previous studies of the aged population of CALD background have focussed on the immigrant aged. There was a realisation in the 1980s that immigrants who arrived in Australia during the post-war years would be moving into the older age groups in the coming years. Some of the Eastern and Southern European birthplace groups already had a median age of 50 years or more. In 1984, the Australian Institute of Multicultural Affairs conducted a major study of the ethnic aged based on a survey of over 1100 persons aged 60 and over from six birthplace groups (China, Germany, Greece, Italy, Poland and the former Yugoslavia). The study examined their experiences in relation to retirement, living arrangements, community care and use of services and found differences within and between the birthplace groups in the pattern of these experiences (AIMA 1985; 1986). This and other studies also showed that English proficiency was relatively low in some birthplace groups, even those who had lived in Australia for many years, and this had limited their social networks and participation (AIMA 1985; Rowland 1991). The ethnic aged were also found to have lower incomes, a lower rate of home ownership, more restricted family networks and greater likelihood of feeling isolated (AIMA 1985; 1986; Rowland 1991). However, a higher proportion was married and would have the support of a spouse. The studies point to considerable diversity in the ethnic aged. They also show some similarities to the rest of the Australian population in their preference for remaining in their own home with the support of a spouse and/or family members. These characteristics of the ethnic aged have led to the suggestion that they might be derived from life chances rather than culture or lifestyle preferences (Rowland 1991; 1997).

In 2000 the Department of Immigration and Multicultural Affairs commissioned another study of the immigrant aged to update the earlier studies. Focussing on the social and financial circumstances of the overseas-born population aged 55 and over, and based partly on data from the 1996 population census, the study found an increase in their English proficiency over time, but lower work participation and higher unemployment rates among the ethnic aged compared to the Australian-born aged. The immigrant aged were also more likely to be dependent on government pensions (Benham et al. 2000). The study compared the immigrant aged according to four birthplace groups based broadly on level of English proficiency, which precludes comparison by ethnicity.

The ethnic aged in these studies referred mainly to immigrants from continental Europe as there was little immigration from non-European countries until after 1970 and therefore relatively few non-European immigrants in the older age groups. Comparisons were usually made between the European immigrants of non-English-speaking background with immigrants from the United Kingdom and with the Australian-born aged. Comparisons by country of origin to examine differences by cultural background usually focussed on the larger groups from countries such as Germany, Netherlands, Italy, Greece, the former Yugoslavia and Poland. Immigrants from Western European countries such as Germany and the Netherlands were generally more proficient in English than those from Southern and Eastern European countries and had more similar social and economic characteristics to immigrants of English-speaking background and the Australian-born.

Since it has been ten years since the last major study of the immigrant aged, it is timely that a new study is undertaken to examine the circumstances of the ethnic aged that also includes older people of non-European background since there are now significant numbers of them. With population ageing becoming an important demographic and policy issue in Australia during this twenty-first century, as indicated by the three *Intergenerational Reports* published by the Treasury since 2002, it is also useful to assess the situation of CALD older adults in this context.

### **Study objectives**

The current study aims to improve knowledge and understanding of the ageing experiences of culturally and linguistically diverse older adults by examining their living arrangements and social and economic well-being using data from the 2006 Australian population census. The study focuses on the following research questions:

1. Where do older adults of culturally and linguistically diverse background live in Australia and what are their living arrangements – how many and what proportions live with their spouse, other family members, alone or in institutional care facilities, and do their residential location and living arrangements differ by country of birth and length of residence for those born overseas, ethnic origin and language spoken at home?

2. What do we know about the social and economic well-being of CALD older adults as indicated by their ability to speak English, level of education, income, need for assistance with daily self care activities, and connectedness to family and community through paid work, volunteering, provision of unpaid domestic work for their household, and care of family members?
3. How is the social and economic well-being of CALD older adults related to their living arrangements, access to family support and demographic characteristics such as age, sex, marital status, country of origin and ethnicity?

The research examines these issues by the country of birth, language spoken at home and ancestry of CALD older adults with the aim to identify the birthplace, language and ethnic groups that are experiencing productive ageing and others that are doing less well. The implications of the research findings for the development of initiatives aimed at enhancing the ageing experiences of CALD older adults are discussed in conclusion.

### **Conceptual framework and approach**

Discussion of population ageing is usually focused on the dependency of the aged and the costs of meeting this dependency. In the case of the ethnic aged, it has been suggested that they face the 'double jeopardy' of being aged and ethnic and the consequences of their ageing experiences can be doubly negative (Dowd and Bengston 1978 in Rowland 1991). On the other hand, it has also been argued that the cultural dimensions of ethnicity can facilitate adjustment to the psychical and physical constraints of ageing and that a better understanding of this process can be gained, for example, by examining the influence of country of origin, historical point of entry and the processes of acculturation and social integration on the experiences of the immigrant aged (Holzberg 1982). It is this latter approach that the current study takes in its examination of ethnicity and the well-being of CALD older adults.

The study also takes a more positive approach to examining the social and economic well-being of the aged by basing it on the concept of the 'Third Age' as a new life cycle stage of productive ageing (see Laslett 1989). The concept of 'The Third Age', originating in Europe, refers to a new stage of life of personal fulfilment after retirement, before the Fourth Age of 'true dependency and decrepitude' set in (Laslett 1989;

Rowland 2003). Laslett (1989: 78-91) had suggested several preconditions for the emergence of the Third Age as a significant life cycle stage of ageing in modern societies. These include at least 10% of the population to be aged 65 and over; an average life expectancy showing that the majority of the population will survive beyond retirement age; a society with sufficient national wealth to support its older citizens at a comfortable standard of living; supportive attitudes to the participation of the aged in society; and cultural and educational resources to facilitate that participation. These conditions are present in Australia. The current study uses Rowland's (2003) re-definition of Laslett's concept of the Third Age as a life cycle stage of independent living in old age, and the pursuit of an active retirement as envisioned by Laslett.

### **Data and analytical approach**

The study is based on data from the 2006 Australian population census. The 2006 census was the first to collect a range of data that can be used to examine productive ageing and the well-being of the aged population. These include participation in volunteer work, provision of unpaid child care, care of an older family member or person with a disability or long-term illness, and need for assistance with core daily activities. These and other data from the census are used to derive a number of measures of the social and economic well-being of CALD older adults reflecting independent living and the pursuit of an active retirement, including marital status, living arrangements, absence of core activity restrictions, English proficiency, level of education, income, work force participation, volunteer work and care of family members.

Census data allow these measures of social and economic well-being to be examined for the total population of CALD older adults identified by country of birth, ancestry/ethnic origin and language spoken at home. Older adults are defined in this study as individuals aged 50 and over, which is consistent with the client base of National Seniors Australia. The ageing experiences of CALD older adults are examined for men and women separately to identify gender differences. The data analysis differentiates the older adults into three broad age groups reflecting the different stages of ageing: 50-64, 65-79 and 80 and over. The ageing experiences of CALD older adults are also compared with those of older adults born in Australia or other English-speaking countries, who

report having English/Irish/Scottish/Welsh or Australian ancestry and who speak English only at home to identify similarities and differences. The study focuses on the 25 CALD birthplace, ancestry and language groups that have the largest number of people aged 50 and over.

Most of the census data used in the study are obtained from the Australian Bureau of Statistics online through its TableBuilder program. This allows the researcher to specify the data tables required and to download these tables in Excel format for further analyses. The data set used is based on the person's place of usual residence.

Statistical analyses and modelling are also undertaken to identify factors and characteristics that are associated with well-being and productive ageing among CALD older adults and whether the CALD older adults are different from older adults of English-speaking origin. These analyses are based on the 1% sample file from the 2006 census. The country of birth categories in the 1% sample file are limited to seven countries that have been sources of significant numbers of immigrants to Australia (Italy, Greece, Germany, China, India, Vietnam and Philippines), with the remaining non-English-speaking countries grouped into nine regions (South-Eastern Europe, North-Western Europe, North Africa and Middle East, Southeast Asia, Northeast Asia, South and Central Asia, Oceania, Americas and Sub-Saharan Africa). Because the number of immigrants aged 65 and over from the Philippines in the sample file is relatively small, they have been included in the Southeast Asia category in the data analysis. The multivariate statistical analyses exclude individuals whose birthplace was not stated and two relatively small regional groups, the Americas and sub-Saharan Africa, because it is not possible to separate the small number of immigrants from the non-English-speaking countries in the regions from those from the English-speaking countries. This results in a sample size of 55, 213 individuals aged 50 and over for the data analysis, of which 18,172 were foreign-born. The multivariate logistic regressions are carried out using StataSE 10.

Two sets of regression models are run for each indicator of independent living and productive ageing. The first set of regressions includes the Australian-born aged as the reference birthplace category. The second set of regressions is restricted to the overseas-born only and the reference group is the people from the main English-speaking

countries, United Kingdom and New Zealand. The second set of regressions includes year of arrival as a control variable; however, the coding of this variable in the 1% sample file is not particularly helpful as it groups all arrivals before 1995 into a single category. Therefore the overseas-born is divided into two groups in terms of period of arrival: those who arrived before 1996 and those who arrived in 1996-2006<sup>2</sup>. This grouping does some have relevance in examining economic well-being as immigrants are eligible for the age pension only after ten years of residence in Australia. Thus, overseas-born older adults who arrived during the period 1996-2006 would not have access to the age pension.

## **Demographic background**

### ***CALD older adults by country of birth, language and ancestry***

The 2006 census records over 1.1 million people aged 50 and over who are born in non-English-speaking or CALD countries (Table 1). They comprise 19% of the total Australian population aged 50 and over. People born in CALD countries have an older age structure than people born in Australia. More than 42% of people born in CALD countries were aged 50 and over and 19% were aged 65 and over in 2006 compared with 26% and 11% respectively of the Australian-born population (Table 1).

Table 1 also shows the 25 CALD birthplace groups with the largest numbers of people aged 50 and over. The sources of immigration to Australia have been and continue to be very diverse and this diversity is reflected in the immigrant aged population. Eleven of the 25 countries listed in Table 1 are European countries that have been among the main sources of immigration in the 1950s and 1960s. Many migrants from that period are now reaching old age. Also on the list are nine Asian countries that have been among the main sources of immigration since the mid-1970s, three Middle Eastern countries, one South American country and one Pacific Island country.

Persons born in Italy form the largest birthplace group of CALD older adults with nearly 170,000 people aged 50 and over. Over 85% of Italy-born people in Australia are at least 50 years old and more than half are aged 65 or more. The other European birthplace groups also have a similarly high proportion of older people because of a

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<sup>2</sup> Those whose year of arrival is not stated are excluded in the regression analysis.

decline in immigration from these countries after 1970. Migrants from the non-European countries have a much lower proportion (20-30%) aged 50 and over. However, the number of older people who are born in these countries is still quite large, ranging from over 55,000 who are born in China to nearly 10,000 who are born in Turkey.

As shown in Table 2, most of the immigrant aged from Europe arrived before 1970 and have lived in Australia for more than thirty years. Older migrants from Asia arrived more recently, with nearly half of all older adults from China arriving after 1990. The 1970s and 80s were the peak migration years for older migrants from Vietnam, Philippines, Chile and Turkey.

Table 3 shows the 25 largest language groups (other than English) of older adults aged 50 and over. There is a fair amount of overlap in the list of countries of origin with those in Table 1, but there are also differences. People speaking Italian and Greek are the two largest groups of CALD older adults. They are followed by two more recent migrant groups, those speaking Cantonese and Arabic. Older people speaking Cantonese and Mandarin come from many other Asian countries besides China and Hong Kong, hence the numbers exceed the number of older people born in those two places. Many older migrants from other European countries, such as the Dutch and Germans, no longer speak their native language at home and so the number of Dutch and German speakers is smaller than the number of older people born in the Netherlands and Germany.

The 25 largest CALD groups of older people identified by ancestry are shown in Table 4. People can identify up to two different ancestries in the 2006 census and these numbers include people who identify that ancestry as one of two ancestries. People of German ancestry are the largest group of older adults of CALD background, followed by people of Italian ancestry. There are more than 25,000 people of Italian or German ancestry who are aged 80 or older. Among the 25 largest ancestry groups, the Ukrainians have the highest percentage (9%) of people aged 80 or older.

Two thirds of older people of German ancestry are born in Australia (Table 5). Other major ethnic groups of CALD background with a high proportion of Australian-born older people are those of Danish or Swedish ancestry. Nearly half of older people of French ancestry are also born in Australia. Analysis of the 2001 census data on ancestry shows that over 60 per cent of people of German, French, Danish or Swedish ancestry

also reported another ancestry, usually Australian or English (Khoo and Lucas 2004). More than 90% of older people of most Asia-Pacific ethnicities, for example those of Vietnamese, Filipino, Indian, Sinhalese or Maori ancestry, are born overseas. As indicated earlier, some are relatively recent migrants to Australia.

The discussion of CALD older adults' living arrangements and well-being in this report focuses on country of birth as an indicator of their ethnic origin. The main limitation of using country of birth as an indicator of ethnic origin is that it excludes people of CALD ethnicities who are born in Australia. Ancestry and language spoken at home also have their limitations as indicators of the ethnicity of CALD older adults. While ancestry data would include the Australian-born, they also include people who state that ancestry as part of a multiple response, resulting in double counting of these people. Data on ancestry show a high correlation with country of birth responses for the immigrant aged (for example, 97% of those born in Italy stating Italian ancestry), with the exception of a few countries. The 1% sample file shows that a significant proportion (42%) of the immigrant aged born in India claimed English or Irish ancestry. The ancestry data also mask considerable heterogeneity among people of Chinese ancestry who (or whose immigrant parents) come from many different countries and have very different migration histories and social and economic characteristics. The main limitation of language spoken at home as an indicator of ethnic origin is that not all CALD older adults speak their ethnic language at home. This can result in a significant underestimate of CALD older adults of some ethnicities many of whom speak only English at home. Therefore, while the discussion of CALD older adults in the report will be based on their country of birth, references will be made to ancestry or language group characteristics and well-being where relevant. Part of the product of the research project is a set of key indicators of the ageing experiences of CALD older adults for the 25 largest CALD groups identified by country of birth as well as by ancestry and language spoken at home, available as a separate appendix to this report.

### *Age and sex*

Because of higher mortality rates among males than females, the number of women usually exceeds the number of men in the older ages. In the case of CALD older

adults in Australia, the ratio of males to females in the older ages is also affected by the sex ratio of past cohorts of immigrants. Consequently, the excess of females over males in the older ages due to the sex differential in mortality rates is reduced or not observed in some birthplace and ethnic groups where there has been a predominance of male immigrants. Conversely, a predominance of female migrants from some countries can also result in exceptionally low sex ratios in the older ages in some birthplace and ethnic groups.

Table 6 shows that the sex ratio (the number of men per 100 women) is higher among the overseas-born population aged 50 and over than the Australian-born population of the same age. This is due to a higher proportion of males than females in past migration cohorts to Australia. The ratio of men to women is relatively high among the immigrant aged from Southern and Eastern European countries and also from the Middle Eastern countries. Migrants from these countries have included more men than women. In contrast the sex ratio is particularly low among older migrants from the Philippines. A distinctive feature of Filipino migration to Australia since the 1970s is its female dominance, due to the large number of women who migrate as spouses of Australian residents. Females have outnumbered males by about 2 to 1 in the Philippines-born population in Australia since 1981.

### *Marital status*

Marital status can be an important indicator of family resources (Rowland 2003) and social well-being. Older people who are married have the family support and companionship of a spouse in contrast to those who are widowed, never married, divorced or separated. On the other hand, some married older persons are also the primary carers of their spouse and marital status can also affect the living arrangements of the aged.

Older Australians who are born in non-English-speaking countries have a higher proportion who are married and a lower proportion who are separated or divorced or never married than their peers who are born in Australia or other English-speaking countries (Table 7). CALD older adults are therefore more likely to have the companionship of a spouse compared with other older Australians. Older adults from

Southern European countries such as Italy, Greece and Macedonia have the lowest proportions divorced or separated (4-6% of those aged 65-79) among the 25 CALD birthplace groups examined. Much higher proportions divorced or separated are observed among the immigrant aged from Eastern and Western European countries (13-19% in the same age group from Poland, Hungary, Austria, Germany and Netherlands).

Because of higher mortality rates among men than women and because the husband is usually older than the wife, the percentage married is higher for men than women in the older ages and the gap increases with age. Just 56% of women from CALD countries who are aged 65-79 are married compared to about 80% of men in the same age group, and in the 80+ age group only 22% of the women are married compared to two-thirds of the men. The situation is the same for older adults born in Australian and the main English-speaking countries.

### ***Location by state/territory***

Knowledge of the residential location of CALD older adults is important for delivery of programs and services for older people. Previous analysis of census data has shown that ethnic diversity is not observed uniformly across the country and that there are considerable differences across states and territories and between cities and regional areas (Khoo 2003; Khoo and Lucas 2004). Also different immigrant groups seem to prefer certain locations because of the presence of relatives and friends, employment opportunities and lifestyle choices.

CALD older adults as identified by country of birth are more likely to live in New South Wales and Victoria compared with their peers who come from English-speaking countries or who are born in Australia (Table 8). They are disproportionately less likely to live in Queensland and Tasmania than older people born in Australia or are from English-speaking countries. NSW and Victoria have always received a disproportionate share of immigrants, particularly those from Southern European, Middle Eastern and Asian countries. This is due partly to Sydney and Melbourne being important ports of arrival of immigrants and also many immigrants joining relatives later through family reunion migration (Hugo 2003).

There are some differences by country of birth in terms of the residential patterns of CALD older adults. Older people from Lebanon are highly concentrated in NSW, with three out of four living there. About half or more of all older people from China, Hong Kong, Philippines, Fiji, Chile and Egypt also live in NSW, mostly in Sydney. The largest number of older adults born in Italy, Greece, Malta, Sri Lanka and Turkey live in Victoria, mostly in Melbourne. Western Australia has disproportionate numbers of older people from India, Malaysia and Singapore perhaps because, of all the States, it is closest to their home countries.

The distribution by location of residence of CALD older adults identified by ancestry and language spoken at home is shown in Tables 9 and 10. As expected, the pattern is similar for the country of birth, ancestry and language groups where there is a strong correlation between these three ethnicity indicators. For example, older people born in Greece, speak Greek at home or identify as having Greek ancestry have similar distributions across the States and Territories. The ethnic group showing the most geographic concentration is the Lebanese, with over 70% of those identified by country of birth, ancestry or language (as Arabic speakers) living in New South Wales, mostly in Sydney.

Ethnic groups that are shown among the 25 largest language groups but not among the 25 largest country of birth groups are Korean, Portuguese and Ukrainian speakers. Older Korean speakers are overwhelmingly located in NSW reflecting the concentration of the Korean community in Sydney. More than 50% of Portuguese are also in NSW while the largest number of Ukrainian speakers are in Victoria.

Ethnic groups included among the 25 largest ancestry groups but not among the 25 largest groups identified by country of birth or language include Maoris and people with Danish or Swedish ancestry. One-third of all people aged 50 and over of Maori ancestry are in Queensland, and another one-third in NSW. Queensland also has the largest number of older people of Danish ancestry.

### **Living arrangements**

Older people's living arrangements are an important aspect of their well-being, providing an indication of their independence and access to family support. Previous

research has indicated that the ethnic aged, like other older Australians, prefer to live in their own homes as long as they can, with support from family members and others if they become dependent (Kendig 1986; Rowland 1991). Rowland (1991:250) has referred to the notion of 'supported independence' in the Third Age where older people support each other in ways that allow them to live independent lives, such as the interdependence between spouses in older couples where one can drive and their other can cook.

The living arrangements of CALD older adults are examined in terms of four measures: living with a spouse; living with other family members; living alone; and living in an institutional care facility. The census has information on whether each person is enumerated in a private dwelling or a non-private dwelling. Older persons enumerated in a non-private dwelling that is a hospital, nursing home or other accommodation for aged or disabled persons are considered to be in an institutional care facility.

As shown in Table 11, the percentage of older people living with a spouse decreases quite rapidly in the older ages, especially for women because of higher male than female mortality rates and also because women tend to marry men older than themselves. Living alone increases in the older ages, as does living in an institutional care facility. While these trends occur for all older adults, there are some differences between those from CALD countries and other older adults.

Older adults born in CALD countries are more likely to be living with a spouse or partner than Australian-born older adults (Table 11). They are also more likely to be living with other family members, usually their children, than older people born in Australia and other English-speaking countries. This is particularly so among CALD women aged 65+, where the percentage living with other family members is twice as high as among their peers who are born in Australia or other English-speaking countries. CALD older adults are less likely than other older people to be living alone or in an institutional care facility. These living arrangements patterns are consistent with those observed in earlier studies (eg. Rowland 1991).

Differences by birthplace and between some birthplace groups and the Australian-born in the proportion living with other family members are quite large, particularly for women (Table 12). The proportion living with other family members was three to four times higher for women aged 80 and over from Asian countries, and twice as high for

women from Southern European countries, than for Australian-born women and women from Germany or Netherlands in the same age group. The aged from Vietnam and the Philippines have the highest percentage living with family members other than the spouse. Living alone is much less prevalent for older persons from Asian and Southern European countries than for older persons from Western or Eastern European countries or Australian-born older adults.

The percentage of older people in institutional care facilities is very small until after the age of 80. Among older people aged 80+ about 10% of men and 20% of women are in hospitals, nursing homes or other accommodation for the aged or disabled. The percentage is lower for the aged of CALD background than for other older people (Table 11). There are differences by country of birth as shown in Table 12. Less than 10% of women aged 80+ from Vietnam or Philippines are in institutional care facilities compared with over 22% of women of the same aged from the Netherlands or Hungary. The percentage of old people in institutional care facilities is also relatively low for the aged from Lebanon and Macedonia. Older people from these countries are much more likely to live with family members than in institutional care facilities.

### **Social and economic well-being**

Using the conceptual approach of the Third Age as a life cycle stage of independent living in old age and productive ageing, this section examines five measures of social and economic well-being that are correlated with independent living in old age including one that applies specifically to CALD older adults, i.e. English language proficiency. This is followed by discussion of five measures of productive ageing and the pursuit of an active retirement in the next section.

Two measures of human capital that are associated with the social well-being of the ethnic aged in Australia are English language proficiency and level of education. Being able to speak English is essential for immigrants from CALD countries to engage with Australian society beyond one's ethnic community. Not being able to speak English well can inhibit the formation of social networks and increase the risk of social isolation among older people. Education has been considered an important personal resource that may contribute to both quantity and quality of life in old age through its effect on health

and lifetime earnings (Rowland 2003). Level of education is also correlated with immigrants' social and community participation, with recent studies showing that migrants with more education are more likely to participate in social and community groups and activities (Khoo 2007; Khoo and Temple 2008).

Table 13 shows the percentage of CALD older adults who speak English only or can speak it well or very well. As expected, English proficiency among CALD older adults declines with increasing age and women are less likely than men to speak English well. In the 80+ age group, two-thirds of the men and less than 60% of the women are proficient in English. Differences by country of birth are evident. Table 13 shows the 25 largest CALD birthplace groups ranked by percentage of English speakers among older adults. Most immigrants from Western European countries and Commonwealth and other countries such as the Philippines where English is widely spoken are proficient in English. The lowest English proficiency is found among the immigrant aged from Vietnam and China. Less than half of all men aged 50 and over and less than one-third of the women from these two countries are able to speak English well. These older people are mainly family reunion migrants and many are relatively recent arrivals. Their low level of English language proficiency would suggest that their social networks are restricted to their families and ethnic community. Older men and women from Southern European and Middle Eastern countries such as Greece, Macedonia, Lebanon and Turkey, also have relatively low proportions who speak English well even though they have lived in Australia for many more years.

Data on the percentage with post-school qualifications as a measure of educational attainment show that older adults from CALD countries have lower proportions with post-school education than older adults born in Australia or other English-speaking countries (Table 14). Very low proportions of migrants from the Southern European countries who arrived in Australia in the 1950s and 1960s have post-school qualifications. This contrasts with older migrants from Western and Eastern European countries who are relatively well educated. Older migrants from Lebanon, Turkey and Vietnam also have relatively low proportions with post-school qualifications. In contrast, the majority of more recent migrants from Asian countries such as the Philippines and Malaysia have some post-school qualifications. Some of the older people

from Malaysia had come to Australia as foreign students in the 1970s or as skilled migrants in the 1980s as did some of the migrants from the Philippines.

Two measures of economic independence and well-being are examined: personal income and home ownership. Older people with income of their own generally have more control over their lives; they are less dependent on other family members and can afford to live on their own. The population is divided into two income groups in the data analysis: those with a weekly income of less than \$250 and those with a weekly income of \$250 or more. These two categories provide an approximate differentiation between those whose income does not exceed the government age pension at the time, which provides for a basic standard of living, and those with (other sources of) higher income. Obviously older people who live in homes that they own also have more security economically and in their living arrangements than those who live in rental accommodation.

A lower proportion of the older people from CALD countries have a weekly income of \$250 or more than older adults from English-speaking countries and those born in Australia (Table 15). Within the CALD birthplace groups, the proportion was also lower for migrants from the Southern European countries and from Vietnam, China, Lebanon and Turkey, and higher for migrants from Austria, Germany and the Netherlands, and from Malaysia, Philippines, Hong Kong, India and Sri Lanka. As noted earlier the aged from Vietnam, China, Lebanon and Turkey are mainly family reunion migrants and have lower levels of education attainment, while the birthplace groups that have higher proportions with a weekly income of \$250 or more are more likely to have post-school qualifications, as shown earlier.

Home ownership is higher among older adults from CALD countries than those from English-speaking countries, although on average it is still slightly lower than the rate for Australian-born older persons (Table 16). The Southern European birthplace groups have much higher rates of home ownership than Australian-born older adults, with close to 90% of all adults aged 50+ owning their homes, compared with just over 80% of the Australian-born aged 50+. Groups with lower rates of home ownership are those from Chile, Lebanon and Turkey and also those of more recent migration, such as

those from China, Vietnam and Fiji. The Western and Eastern European groups are more similar to the Australian-born in their rate of home ownership.

Comparison of the two measures of economic wellbeing shows that while some CALD older adults, such as the Southern Europeans, may have lower current income, they have higher than average rates of home ownership. Other groups such as those from Vietnam, Lebanon and Turkey rate below average on both economic measures. Many older people from these countries live with family members including adult children and may be more dependent on them for some economic support.

A direct indicator of physical independence in old age and a strong measure of both physical and social well-being is the absence of a need for assistance with daily self care activities such as getting out of bed, dressing, eating, showering, toileting and being able to do other things around the house. In the 2006 census, four questions were asked of each person whether he/she ever needs someone to help with, or be with him or her for, self care activities, body movement activities or communication activities and the reasons for the need for assistance. The Australian Bureau of Statistics then classifies people as needing assistance with core activities if they need assistance with any or all three of the core activities because of a disability, long-term health condition (lasting six months or more) or old age.

The percentage of older adults not needing assistance with core activities is the measure of independent living examined here for CALD birthplace, ancestry and language groups. CALD older adults are more in need of assistance than other older adults. A lower percentage of men and women from CALD countries indicate that they have no need for assistance with daily activities compared to their peers who are born in Australia or other English-speaking countries (Table 17). Differences in the 50-64 age group between CALD and Australian-born or English-speaking older adults are small, although men and women from Lebanon and Turkey in this age group have lower than average proportions not needing assistance. In the 65-79 and 80+ age groups, men and women from these two countries as well as from Vietnam and Macedonia have lower than average proportions not needing assistance. Older people from Western and Eastern European countries have better physical health by comparison.

The conclusion from an examination of these five measures of social and economic well-being is that as a group older people of CALD background are not doing as well as older people from English-speaking background. However, as its name implies the CALD group is diverse and there are differences within the group in all the five measures of social and economic well-being by ethnicity as measured by country of birth (and also by language and ancestry as shown in separate tables), with some groups doing much better than others. The aged from countries such as Lebanon, Turkey and Vietnam have lower levels of social and economic well-being than the other CALD groups according to the measures examined. Older people of Southern European origins, many of whom migrated to Australia in the 1950s and 1960s, also have lower English language proficiency, education and income but have higher rates of home ownership. The social and economic well-being of older people of Western and Eastern European origins is more similar to that of older people of English-speaking background and the Australian-born. There are also differences among the Asian birthplace and ethnic groups. Older people from Malaysia, Singapore, Hong Kong, India and Sri Lanka are generally more proficient in English because English is widely spoken in those countries that are part of the British Commonwealth. They are also better educated and have higher incomes. Some are likely to have been overseas students in the 1960s or 1970s or skilled or business migrants in the 1980s. They are also less in need of assistance with daily core activities and are therefore in better health than their counterparts from other Asian countries such as Vietnam and China.

### **Productive ageing**

Productive ageing is examined in terms of five measures that are available from the 2006 census data: participation in paid work, volunteering, provision of unpaid domestic work, looking after children and care of family members, an older person or others with a long-term illness or disability. The first two measures examine older people's engagement with the broader community. The other three measures relate to caring responsibilities within the family. Obviously the ability of older people to pursue these activities in the community and the family is correlated with their social and economic well-being.

### ***Participation in paid work***

Older adults from CALD countries as a group have a lower rate of participation in paid work than Australian-born older adults and those from English-speaking countries (Table 18). The gap between CALD older adults and other older adults in the percentage employed is particularly large in the 50-64 age group, where just two-thirds of the men and less than half of the women of CALD background is employed in paid work compared to more than 70% of men and nearly 60% of women of English-speaking background in the same age group. The lower employment rate of the CALD group is due mainly to lower rates of participation in paid work by older adults from European and Middle Eastern countries and from Vietnam. This may be the result of early retirement from low skilled work and low English proficiency in these birthplace groups as shown earlier. Older people from a number of Asia-Pacific countries such as India, Sri Lanka, Malaysia, Singapore, Philippines, Hong Kong and Fiji who are more proficient in English have higher participation in paid work than other CALD groups and are more similar to the Australian-born and older men and women from English-speaking countries. It is also notable that about 5-7% of men and 3-4% of women aged 80+ from several Asian countries are employed in paid work, which is more than the rate for that age group. It is likely that many of them are in their early 80s and are working in family businesses.

### ***Volunteering***

Participation in volunteering is also lower among older men and women of CALD background than those of English-speaking background or born in Australia (Figure 1). There is also a decrease in participation in volunteering among CALD adults after age 65 compared with the 50-64 age group that is not observed among men and women born in Australia and other English-speaking countries. For these latter two groups, participation in volunteering increases after age 65 when people are usually retired from the work force. The participation rate in volunteering of older persons aged 65 and over is more than twice as high for men and women from English-speaking countries and the Australian-born as for men and women from CALD countries (Figure 1).

Within the CALD group there are differences in the rate of volunteering by country of origin (Table 19). Volunteering rates are much higher in Western and Eastern European birthplace groups than in Southern European and Middle Eastern birthplace groups. There are also differences among the Asian birthplace groups. Older adults from India, Sri Lanka, Malaysia, Singapore and Indonesia have a higher proportion volunteering than those from Vietnam and China. Differences in volunteering rates among the CALD birthplace groups are similar to those in employment rates, with the same groups showing higher participation in both paid work and volunteering.

An ABS survey on volunteering in 2000 also found that people born overseas are less likely to volunteer than people born in Australia (ABS 2001). Some studies focussing on volunteering by the overseas-born population in Australia have suggested that some people of CALD background may not have identified the unpaid work they do in their communities as volunteering or that it fits the formal definition of volunteering (see discussion in *Volunteering Australia 2007*). Studies have also identified some of the barriers to volunteering by people of CALD background. English language comprehension is the most common barrier identified by the overseas-born of CALD background themselves as well as by organisations involved in volunteer work (*Volunteering Australia 2007*). Other barriers identified by CALD adults are time and family and travel constraints.

### ***Domestic work***

The census question asks each person how many hours of unpaid domestic work they do for their household the week before the census. The census form states that domestic work includes all housework, food/drink preparation and cleanup, laundry, gardening, home maintenance and repairs, and household shopping and finance management. Persons who indicate a number greater than zero are considered as doing some domestic work for the household.

The percentage doing some domestic work is lower for older men and women of CALD background than other older men and women in the age groups 50-64 and 65-79. In the 80+ age group, there is not much difference between women of CALD background

and those of English-speaking background. Over 40% of people aged 80 and over still do some housework.

As in the other measures of well-being and productive ageing, there are differences by country of birth within the group of CALD older adults in the proportions doing housework (Table 20). Among the 25 birthplace groups shown in Table 20, men and women from Germany, Netherlands and Austria are similar to the Australian-born and persons from English-speaking countries in their proportions doing some housework. The Southern European older adults are less likely than their Western European counterparts to be doing domestic work. Differences are also observed among the Asian birthplace groups. Those from China and Vietnam are less likely to be doing domestic work than those from India, Sri Lanka, Malaysia and Singapore. The percentage doing some domestic work is lowest for older men and women from Turkey and Lebanon. These differences may be related to differences in marital status and living arrangements and/or social norms in relation to the role of older family members in the household.

### ***Looking after children***

Men and women aged 65 and over from CALD countries have a higher proportion caring for children compared to the Australian-born aged and others from English-speaking countries (Table 21). A higher percentage of older men and women from Greece and Macedonia contribute to caring for children than older people from other European countries. The proportion looking after children is much lower for men and women from the Western and Eastern European countries compared to the Southern European countries. The percentage looking after children is also higher than average for men and women from most of the Asian countries. While the proportion looking after children is relatively low for men and women in the age group 65-79 from Lebanon and Turkey, it was higher than average in the oldest 80+ age group. It is likely that the greater likelihood of co-residence with other family members among older adults from Asian, Middle Eastern and Southern European countries contributes to their involvement in caring for young children in the family even as it reduces their likelihood of doing other housework.

### *Caring for an older person or family member with a long-term illness or disability*

There is not much difference in the proportion caring for someone who is old, ill or disabled between the older people from CALD countries and the Australian-born and others from English-speaking countries (Table 22). Differences within the CALD group by country of origin in the proportion caring for other elderly, disabled or sick family members are also small. About 10% of men and women aged 65-79 are carers of someone who is ill, old or disabled. However, about 20% of women in the 50-64 age group from a number of European countries are carers, either of their older spouses or parents. The percentage is much lower among women in this age group from Asian countries. Among older people from all ethnic backgrounds, women are more likely than men to be carers, but in the oldest age group, those aged 80 and over, a higher proportion of men are carers. Men in this age group are less likely than women to be widowed and therefore are more likely to be caring for their spouse.

### **Factors associated with well-being and productive ageing in CALD older adults**

The descriptive results show some consistent patterns of differences in many of the measures of social and economic well-being of older adults from CALD countries by country of origin. One pattern of difference is between the European birthplace groups, with older people from Western European, Eastern European and Southern European countries showing differences in living arrangements, English proficiency, education, income, absence of restrictions with core activities, participation in paid work and volunteering and taking care of children. Asian birthplace groups also differ from one another in many of these characteristics. Older people from Malaysia, India and Sri Lanka have higher proportions with post-school education, English language proficiency, participation in paid work, volunteering and higher income than those from Vietnam and China. Older people from Vietnam appear to be the most disadvantaged on a number of measures of social and economic well-being.

To determine if the observed differences by country of origin are related to differences in older persons' demographic characteristics, level of education and English language proficiency or whether they reflect ethnic differences and other characteristics

associated with country of origin, multivariate logistic regression analyses are carried out to control for the effects of these characteristics.

Table 23 presents the results on two indicators of independent living: living at home (not in an institutional care facility) and no need of assistance with daily activities. The regression analysis on living at home is carried out for only persons aged 65 and over as very few people aged 50-64 are in institutional care. Differences by birthplace in the proportion living at home and not in institutional care remain after controlling for demographic and human capital characteristics, suggesting the influence of factors associated with ethnicity and culture. Older people from Italy, Greece and other Southern European and Asian countries are more likely to be living at home and not in an institutional care facility than immigrants from the English-speaking or Western European countries and the Australian-born aged, even after taking account of differences in their marital status, English language proficiency and level of education.

Differences by birthplace in the likelihood of needing assistance with core activities also remain after taking account of their demographic and human capital characteristics. Older people from the Middle East and the Pacific region are the most likely to need assistance with daily activities, implying poorer physical health. This is consistent with the descriptive results showing the relatively low percentage of older people from Lebanon not needing assistance. Older people from Southern and Eastern European countries (aside from Italy and Greece) are also more likely to need assistance with daily activities compared to older people born in Australia or other English-speaking countries. Many migrants from Southern and Eastern Europe who arrived in the 1950s and 1960s had worked in physically demanding jobs in construction and manufacturing and this might have affected their physical health in old age. Older people from Northeast Asia (excluding China) and Southeast Asia (excluding Vietnam) are significantly more likely not to need assistance with daily activities when compared with the Australian-born. The data analyses also show that better health in old age is associated with being married, being proficient in English and having post-school education.

Table 24 presents the regression analysis results for two indicators of productive ageing: participation in paid work and volunteering. Older people from Europe, the Middle East and Vietnam are significantly less likely to be working compared to the

Australian-born even after controlling for English proficiency and education. The regression results show significantly higher employment among older immigrants from China and other Northeast Asian countries. This group includes people from Hong Kong, Korea and Taiwan some of whom may be business migrants and would be working in their own or family business. Older people from Southern and Eastern European countries, Germany, North Africa and Middle East, China and Southeast Asia are significantly less likely to volunteer compared with older migrants from other countries, even after controlling for English proficiency and education, suggesting other barriers to volunteering besides English language proficiency and education. As expected, participation in paid work and volunteering by older people is positively correlated with English proficiency and education. While older men are more likely to be in paid work than older women, the reverse pattern is seen in volunteering. Among overseas-born older people, recent migrants are significantly less likely to be in paid work or to volunteer than earlier migrants.

The regression results for the other three indicators of productive ageing that relate to contributions to the household and family are shown in Table 25. Older adults from CALD countries are less likely to be doing domestic work for their households than older people of English-speaking background. To test whether this may be due to their living arrangements or poorer physical health, separate regression analyses controlling for these characteristics are carried out. The results (not shown in the table) still show that CALD older adults from Southern European countries, the Middle East, China and Southeast Asia are less likely to be doing some domestic work than Australian-born older adults or those from English-speaking countries.

The statistical analysis shows that older people from Greece and the Pacific region are more likely to be caring for children compared to the Australian-born or older adults from other English speaking countries, but other CALD older adults are either less likely or not very different from older adults of English-speaking background or Australian-born older adults in caring for children. Older adults from Italy, other Southern and Eastern European countries and Vietnam are more likely than older people of English-speaking background to be caring for an older, sick or disabled person, but other CALD older adults are either less likely than or not significantly different from the

Australian-born or older persons from other English-Speaking countries as carers. The regression results also show that older women are more likely to be carers than older men, that those who are married are more likely to be carers than those who are widowed and that those with more education are more likely to be carers than those with lower education. More recently arrived migrants are also more likely to be caring for children than earlier migrants.

Parallel analyses using the ancestry variable in the 1% sample file (which has the same broad regional categories as for the birthplace variable, plus some larger ancestry groups) instead of the birthplace variable produce broadly similar results<sup>3</sup>.

## **Conclusion**

CALD older adults differ in their social and economic well-being by their country or region of origin and ancestry even after taking into account differences in their demographic and other characteristics. This suggests that cultural factors and migration experiences associated with country of origin as a measure of ethnicity of the overseas-born older adults may have some influence on their well-being and ageing experiences.

Older people of Italian and Greek origins are the two largest birthplace and language groups of CALD background. Those born overseas have lived in Australia for more than thirty years. They show many distinctive characteristics. Both groups have a strong family network, are more likely to be still married and/or living with family and helping to look after (grand)children and other older family members. Although the indicators of independent living show they are more likely to need assistance with daily living activities and to be in the lower income group, they also have higher rates of home ownership and are less likely to be in institutional care than the Australian-born aged. In contrast to the older people of Italian or Greek background, older people of Western and Eastern European origins are more similar to the Australian-born and older adults from the English-speaking countries, particularly in their living arrangements with family.

There are also differences among older people from the Asian countries by country of origin. While they are all more likely to be living at home with family, many

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<sup>3</sup> Statistical analysis using the language spoken at home variable as a measure of ethnicity was not undertaken as the language variable was coded into regional language groups only in the 1% sample file. Indicators of living arrangements and well-being for each of the 25 largest language groups other than English-speakers are presented in separate appendix tables.

older men and women from China and Vietnam may also be more dependent on their family because they do not speak English well and have lower income. Older adults from China and other Northeast Asian countries are more likely to be involved in paid work which may be related to their families or themselves being business migrants. Older people from Malaysia, Philippines, India and Sri Lanka are generally more proficient in English, have more education and higher income.

The findings indicate that ethnicity appears to contribute to productive ageing that is focussed more within the family than in the broader community. While it was thought initially that perhaps the lower education and lack of English of some of the CALD older adults might have been barriers to their community participation, controlling for these characteristics in the data analysis did not eliminate the differences in work participation and volunteering between CALD and other older adults. This may suggest the absence of a tradition of community volunteering in some cultures or less social integration among some of the immigrant aged that are related to other (perhaps cultural) factors besides lack of proficiency in English.

The data show that older people from some of the Southern European and Asian countries and the Pacific region are more likely to help with the care of children or an older, sick or disabled person. While it has been suggested that having a productive role in the family can give purpose and meaning to the daily lives of the aged (Holzberg 1982), the data do not inform us about the perception of the elderly in relation to their care-giving role. The greater stability of marriage that is likely to be related to social, cultural and/or religious beliefs that are associated with some of the Southern European and Asian ethnicities also means that these immigrant aged are more likely to have the support and family resource of a spouse, which is shown to facilitate living at home.

The lower participation in paid employment among some CALD birthplace groups may be related to their greater likelihood of poorer physical health. Those from Southern and Eastern Europe, the Middle East and the Pacific region are particularly at risk of needing assistance with daily activities, while the lower income of older people from some Asian countries and the Middle East suggest they are likely to be dependent on government income support. Their circumstances may be related to their migration or personal histories associated with country of origin rather than ethnic or cultural factors;

however, it is not possible to examine this with a cross-sectional dataset. The findings suggest that the older adults from these countries and regions are likely to be more dependent on the public health and welfare systems, because of poorer health and lower income, even though they may have family support at home.

While mainstream health and welfare systems will remain important to the health and economic well-being of CALD older adults, their social well-being is much more dependent on their families and ethnic communities. This is particularly the case when they do not speak English very well or they have a tradition of strong family networks that encourage co-residence and co-dependence across generations. Families and CALD communities therefore have an important role in enhancing the ageing experiences of their older members.

While the current study has examined a number of indicators of the living arrangements and social and economic well-being of CALD older adults and shown considerable diversity in these indicators by ethnic background, questions remain in relation to the ways in which cultural dimensions of ethnicity can facilitate their adjustment to the ageing process. These questions can only be answered by more detailed studies of specific birthplace or ethnic groups of CALD older adults as there is considerable diversity both between and within geographic regional groups.

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