



AAG
Australian
Association of
Gerontology



**CULTURALLY &
LINGUISTICALLY DIVERSE**
Special Interest Group



AAG POSITION PAPER CAPTURING CULTURAL AND LINGUISTIC DIVERSITY IN AUSTRALIA

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Endorsed by



cultural infusion
Building Harmony & Wellbeing



Centre for
Cultural Diversity
in Ageing
Established by Research

ACKNOWLEDGEMENTS

ACKNOWLEDGEMENT OF COUNTRY

Australian Association of Gerontology (AAG) acknowledges Traditional Owners of Country throughout Australia and recognises the continuing connection to lands, waters and communities.

We pay our respect to Aboriginal and Torres Strait Islander cultures, and to Elders past and present, and to all Aboriginal and Torres Strait

Islander peoples including members of the Stolen Generations. For further information see AAG's Aboriginal and Torres Strait Islander Ageing Advisory Group (ATSIAAG)



SPONSOR

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CONTRIBUTORS

This paper was written by Dr Cecilia Gomez Inclan, Policy and Research Officer at AAG, with feedback and guidance by the AAG Policy and Research managers Dr Sandra South and Dr Amber Mills. In addition, Ellen Finlay and Chloe Merrit. Policy and Research officers at AAG, Lisa Tribuzio from the Centre for Cultural Diversity in Ageing and Peter Mousaferiadis from Cultural Infusion provided feedback. The two latter institutions endorsed the present report. This document was inspired by the AAG diversity workshop 'Using government data and data linkage to promote health and improve the ageing experience for Australia's culturally and linguistically diverse population' held in 2021.

The Centre for Cultural Diversity in Ageing is funded by the Department of Health and Aged Care under the Partners in Culturally Appropriate Care (PICAC) program and supported by Benetas. The Centre provides expertise in culturally inclusive policy and practices for the aged services sector.

They have over 20 years of experience in supporting aged care providers to address the needs of older people from culturally and linguistically diverse backgrounds.

Cultural Infusion was founded in 2002, and via its schools program ascended quickly to become a noted industry leader, delivering cultural programs to more than 300,000 students per year. Since 2011, Cultural Infusion has been expanding into the digital world, releasing award-winning apps and cloud-based technologies which are now used by some of the largest organisations in the world to unlock the social, cultural, and economic potential that comes with diversity and equity.

PREFERRED CITATION

Australian Association of Gerontology (2023) AAG Position Paper: Capturing Cultural and Linguistic Diversity in Australia.

USE OF TERMINOLOGY

CULTURE

In this paper, culture is considered as the set of practices, beliefs, narratives, symbols and geographies that provide people with a sense of identity, belonging and protection. Culture shapes our actions in every area of our lives, including areas related to health such as when and how to seek medical treatment.

'CULTURAL AND LINGUISTIC DIVERSITY', 'CULTURALLY AND LINGUISTICALLY DIVERSE' AND 'CALD'

In 1996, Australia substituted the term NESB (non-English speaking background) commonly used in policy discussions for the acronym CALD - standing for 'Culturally and Linguistically Diversity', acknowledging that diversity surpasses languages (Department of Immigration and Multicultural Affairs and Australian Bureau of Statistics 1999; Sawrikar and Katz 2008). Nowadays, the terms 'Cultural and Linguistic Diversity', 'Culturally and Linguistically Diverse' and 'CALD' are used interchangeably in Australia to describe diversity of a whole, as well as to describe sub-groups of people within that population. AAG recognises that the latter use of these terms to describe a type of person or group of people may lead to inconsistent definitions leading to the question of 'who' we are talking about, a risk for 'othering', and it also fails to capture the full breadth of Australia's cultural and linguistic diversity (Mousaferiadis 2020b, 2020a). Therefore, in this paper, we avoid using the acronym 'CALD' and associated terms to describe a particular type of person or group of people in Australia. Instead, 'CALD' is used by AAG to describe the full cultural and linguistic diversity of Australia's population.

GOVERNMENT DATA

This report adopted the definition of 'government data' proposed during the 'Using government data and data linkage to promote health and improve the ageing experience for Australia's culturally and linguistically diverse population' workshop (Australian Association of Gerontology 2022). This definition includes the 'official statistics' produced by national statistical agencies such as the Australian Bureau of Statistics (ABS) and Australian Institute of Health and Welfare (AIHW). The ABS collections in particular—such as the Census, the National Health Survey and the Survey of Disability, Ageing and Carers—are designed from the ground up to meet specified statistical objectives.

Government data can also be 'administrative by-product data' generated from a data system supporting a particular government-funded program—such as Medicare, Disability Support Pension, and Residential Aged Care at a federal level; and hospitals, homelessness services and domestic violence services in the state and territory level. Typically, these data systems are designed to support administrative functions of the program—such as payments—and any statistical value from the collection is derived after the fact. However, analyses of these data sets are also used to monitor and evaluate program outcomes and inform program and policy development.

With appropriate privacy safeguards, single government datasets have been able to be linked to other datasets to add value. Over the past five years, government statistical agencies have been putting together multi-source linked datasets that leverage advances in secure access arrangements and computational power.

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BACKGROUND

The movement of modern humans to different regions of the world has led to diverse populations settling in distinct environments, each with specific conditions and challenges. This resulted in the divergence of some genetic traits, but greater differences emerged in culture, language and socio-economic dynamics. Consequently, this divergence has caused different patterns of disease incidence and risk factors among different cultures and societies at the level of the population across the globe (Bhopal 2016). Nowadays, ~ 3% of the total human population live in a country that is not their country of birth (Czaika and de Haas 2014), merging again cultures, languages and dynamics and resulting in the need to provide relevant and effective services to a population whose diversity keeps increasing.

Human diversity is often categorised according to the physical or linguistic features of individuals (e.g. country of birth, spoken language) but, given the complexity of migration processes, this method often results in inaccurate and incomplete representations of the diversity both within and across populations (Australian Bureau of Statistics 2022). Despite the difficulties in measuring and representing cultural and linguistic diversity, it is essential that such efforts are continued to ensure service delivery is timely and effective. Equity in accessing health, social and aged care services is particularly important for older people, who are some of the most intensive users of these services (Australian Institute of Health and Welfare 2018).

As a starting point, it is essential to acknowledge that access to health, aged care and social services is influenced by cultural and linguistic traits, which in turn influence a person's health and wellbeing outcomes (Khatri and Assefa, 2022). Therefore, service delivery can only be effective if the service meets a person's needs including those across the full spectrum of cultural and linguistic diversities.

This includes, but is not limited to, making services available in a range of languages, respecting religious and other cultural practices and providing these services all across Australia, including rural areas (Kerrigan et al. 2021; Mozooni, Preen, and Pennell 2020; Phillips, Singh Ospina, and Montori 2019; White et al. 2018).

An example of the importance of considering linguistic diversity and preferred languages is ageing-associated neurodegeneration. People with these conditions often lose the capacity to communicate through secondary languages (McMurtray, Saito, and Nakamoto 2009). Another example is that since risk factors of several diseases vary among populations (Gruer et al. 2016), the health providers should be prepared to tackle diseases that are not common in Australia.



AIM OF THIS PAPER

In this paper, AAG explores how cultural and linguistic diversity is captured in Australia in 'government data' (see 'Use of terminology' section at start of paper for definition of government data). We begin by exploring which variables are currently used to measure cultural and linguistic diversity in Australia and how the government selects, analyses, groups and reports on these data to purportedly capture cultural and linguistic diversity. We then go on to formulate the AAG Position Statement on how CALD could be better identified and measured in Australian government data and reports by clarifying inputs and making the thought process of what is meant by the term 'CALD'.



WHICH VARIABLES DOES THE GOVERNMENT CURRENTLY USE TO MEASURE CULTURAL AND LINGUISTIC DIVERSITY IN AUSTRALIA?

In 1999, the Australian Bureau of Statistics (ABS) published an assortment of suggested variables to define and classify attributes related to cultural and linguistic diversity (Department of Immigration and Multicultural Affairs and Australian Bureau of Statistics 1999; Minas et al. 2013). A more recent review of these same variables was published by the ABS in early 2022 (Australian Bureau of Statistics 2022), suggesting a minimum set of four cultural and linguistic variables (marked by *). These variables are:

- 1) **“Indigenous” status*+**
- 2) **Country of birth***
- 3) **Country of birth of father**
- 4) **Country of birth of mother**
- 5) **Ancestry**
- 6) **Religious affiliation**
- 7) **Year of arrival in Australia**
- 8) **Proficiency in spoken English***
- 9) **First language spoken**
- 10) **Main language spoken at home**
- 11) **Main language other than English spoken at home***
- 12) **Languages spoken at home**

* Part of the minimum set of cultural and linguistic variables suggested by the ABS.

+ ‘Indigenous’ is a general term that could be applied to people from all over the world but here, it refers to Aboriginal and Torres Strait Islander identity.



We acknowledge that these variables do not capture the full breath of diversity. Additionally, some of these variables have been described as outdated and in some cases vague, meaning that when questioned for data acquisition, the information might be influenced by the subjective preferences and experiences of both the interviewers and respondents (e.g., how people define ancestry) (Australian Association of Gerontology 2022).

Nonetheless, these variables represent a guideline for capturing cultural and linguistic diversity trends over time for governmental purposes, provided there is a clear understanding of the limitations.

Up to date, these variables are and have been used to compile information about diversity by different government agencies conducting public surveys. Information relevant to measuring cultural and linguistic diversity is also captured as government administrative data that are used in evaluation and to inform policy and practice (see 'Use of terminology' section at start of paper for definition of government data). In this report, the AAG conducted an assessment of eight Australian government data sources relevant to cultural and linguistic diversity and ageing:

- 1. Census**
- 2. Survey of Disability, Ageing and Caring (SDAC)**
- 3. Survey of Income and Housing (SIH)**
- 4. General Social Survey (GSS)**
- 5. National Health Survey (NHS)**
- 6. Personal Safety Survey (PSS)**
- 7. National Screening and Assessment Form (NSAF), and**
- 8. Aged Care Workforce Census (ACWC).**

In general, it was observed that the number of different variables exploring cultural and linguistic diversity measured in each government survey varies (see Appendix Table 1), There are also inconsistencies about the type of information captured in terms of wording of the questions and the response options used among the surveys (see Appendix Tables 2 and 3). The following section summarises some of the different ways 'CALD' is measured and defined in government data.

USE OF 'CALD' VARIABLES IN GOVERNMENT DATA

ABORIGINAL &/OR TORRES STRAIT ISLANDER IDENTITY

Whether or not people identify as Aboriginal and/or Torres Strait Islander (commonly referred to as 'Indigenous' status in government reports) is examined in seven out of the eight surveys:

1. Census, 2. SDAC, 3. SIH, 4. GSS, 5. NHS, 7. NSAF and 8. ACWC.

The questions to address identity are not consistent across all surveys:

- 'Is anyone who usually lives here of Aboriginal or Torres Strait Islander origin?' [Census, SDAC, SIH]
- 'Are you Aboriginal or Torres Strait Islander origin?' [GSS]
- 'Whether the client is part of a vulnerable cohort' [NSAF]
- 'How many employees in each classification identify as either Aboriginal and/or Torres Strait Islanders' [ACWC]
- 'Indigenous language categories required?' [NHS]

COUNTRY OF BIRTH

Country of birth is examined by four surveys: 1. Census, 2. SDAC, 3. SIH, 4. GSS. The questions to address country of birth are not consistent across these surveys:

- 'In which country was the person born?' [Census]
- '...anyone in the household receives overseas pensions or benefits?' [SDAC (we considered this to be an indirect question that may inform about this variable as a proxy)]
- 'In which country were you born?' [SIH and GSS]

COUNTRY OF BIRTH OF FATHER / MOTHER

The country of birth of the father and mother is examined in four surveys: 1. Census, 5. NHS, 6. PSS and 7. NSAF. The questions aiming to capture this information are:

- 'In which country was the person's father born?', 'In which country was the person's mother born?' [Census]
- 'In which country were the mother and father born?' [NHS and PSS]
- 'Whether the client is part of a vulnerable cohort' [NSAF]

ANCESTRY

Ancestry is examined by two surveys:

1. Census and 7. NSAF.

- 'What is the person's ancestry' [Census]
- 'whether the client is part of a vulnerable cohort' [NSAF], seen as a proxy.

RELIGIOUS AFFILIATION

Religious affiliation is examined by two surveys:

1. Census and 7. NSAF.

- 'What is the person's religion'. [Census]

The NSAF approaches the question by asking:

- 'Whether the client is receiving assistance or supervision of another person in order to participate in community-based or recreational, cultural or religious activities' [NSAF], and,
- 'Does the client have any cultural and/or religious values or beliefs that are important to know or would affect services being provided?' [NSAF].

YEAR OF ARRIVAL IN AUSTRALIA

Year of arrival in Australia is examined by four surveys: 1. Census, 2. SDAC, 3. SIH and 4. GSS.

The census approach involves three questions:

- 'In what year did the person first arrive in Australia to live here for one year or more?';
- 'Where did the person usually live one year ago?'; 'Where did the person usually live five years ago' [Census].

The SDAC survey includes a section that requires:

- 'Year of arrival to Australia' [SDAC].

SIH questions:

- 'In which year did [you/[name]] first arrive in Australia to live (for one year or more)?' and
- 'In which month did you arrive in Australia (if less than a year living here)' [SIH].

The GSS asks:

- 'In which year did you first arrive in Australia for one year or more?' [GSS] and
- 'Have you lived in Australia for one year or more?' [GSS].

PROFICIENCY IN SPOKEN ENGLISH

Proficiency in spoken English is examined by six of the surveys: 1. Census, 2. SDAC, 4. GSS, 5. NHS, 6. PSS and 7. NSAF.

The questions addressing this variable are:

- 'How well does the person speak English?' [Census].
- 'Do you consider you speak English very well...?' [SDAC, GSS, NHS, PSS].

Additionally, in the SDAC, communication difficulties during the interview must be reported, while the NSAF contains the following section:

- 'Whether there are any barriers in communicating. This includes communicating over-the-phone and face-to-face' [NSAF].

This last survey also considers language proficiency for the application of the Standardised Mini-mental State Examination.

FIRST LANGUAGE SPOKEN

First language spoken is examined by the 6. PSS and 7. NSAF.

- 'Which language did you first speak as a child' [PSS].
- The proxy 'whether the client is part of a vulnerable cohort' is used in the [NSAF].

MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME

Main language other than English spoken at home is examined by five surveys: 1. Census, 2. SDAC, 4. GSS, 5. NHS, 6. PSS.

- 'Does the person speak a language other than English at home?' [Census].
- 'Main language other than English spoken at home' [SDAC].
- 'Which language do you mainly speak at home?' [GSS].
- 'What language do you mainly speak at home?' [NHS] and
- 'Indigenous language categories required?' [NHS].

HOW REPRESENTATIVE ARE GOVERNMENT DATA SOURCES OF AUSTRALIA'S CULTURALLY AND LINGUISTICALLY DIVERSE POPULATION?

There is a lack of consistency across surveys but there are also more barriers to government data capturing Australia's cultural and linguistic diversity. One of these originates from whether the data collected represent the population fairly. A factor in determining the representation is the accessibility to surveys and administrative data collection practices (Australian Association of Gerontology 2022). In this context, the 'Report on the National Screening and Assessment Form (NSAF) Review – Volume I (February 2018)' acknowledges that they do not have enough nor accurate information about the 'CALD clients' since minorities are usually underrepresented in these surveys (Department of Health, 2018).

OTHER DEFINITIONS OF 'CALD'

Generally, we tend to make assumptions about cultural diversity based on how a person looks or sounds. In fact, these characteristics might have little to do with cultural and linguistic background. This is why it is important to define what 'CALD' and a 'person from culturally and linguistically diverse background' mean. For instance, the 2020 Aged Care Workforce Census Report survey asks aged care providers:

'How many employees in each classification identify as being from cultural and linguistically diverse backgrounds?'

To answer, providers were asked to specify both the number of individuals identified as 'CALD' and the numbers that were uncertain. The survey does not include a guideline for providers to follow when reporting staff as 'CALD' or 'uncertain', leaving this decision to the providers without a unified criterion.

This affects the consistency and quality of the survey results. Additionally, there is no information about language spoken, religion or any other traditions that might be relevant to providing culturally appropriate services (McMurtray, Saito, and Nakamoto 2009).



GOVERNMENT REPORT

HOW DOES THE GOVERNMENT REPORT ON CULTURAL AND LINGUISTIC DIVERSITY IN AUSTRALIA?

As part of this report, AAG conducted an assessment among 14 different government agencies' reports that included data from one or more of the surveys and administrative data sources summarised in the previous chapter (Appendix Tables 4 and 5). The reports explored in this chapter and the data sources relied upon are:

1. Australia's Health 2018 Chapter 5 - Census (Australian Institute of Health and Welfare, 2018b)
2. Older Australia at a glance – Census (Australian Institute of Health and Welfare, 2018a)
3. Older Australians 2021 - Census (Australian Institute of Health and Welfare, 2021)
4. Chronic health conditions among culturally and linguistically diverse Australians, 2021 (Australian Institute of Health and Welfare, 2023)
5. Mental health research and evaluation in multicultural Australia: Developing a culture of inclusion – NHS (Minas et al., 2013)
6. Review of Cultural and Linguistic Diversity Data Collection Practices in the WA Health System – Census (Branch, 2018)
7. National Disability Insurance Scheme (NDIS)- Culturally and Linguistically Diverse participants – SDAC (National Disability Insurance Agency, 2019)
8. Review of the Culturally and Linguistically Diverse (CALD) Ageing and Aged Care Strategy – NHS (Department of Health, 2017)
9. Aged care diversity framework-2017 – NHS (Aged Care Sector Committee Diversity Sub- group, 2017)
10. 2017-18 Report on the operation of the Aged Care Act 1997 – NHS (Department of Health, 2018)
11. National Plan to Reduce Violence Against Women and Their Children Fourth Action Plan (2019-22) Background and Evidence Summary DRAFT: 25 September 2018 - PSS and SIH (Department of Social Services, 2018)
12. 2020 General Social Survey: Summary Results, Australia – GSS (General Social Survey, 2021)
13. Report on the National Screening and Assessment Form (NSAF) Review – Volume 1 February 2018 - NSAF (Department of Health, 2018)
14. 2020 Age Care Workforce Census Report – ACWC (Department of Health, 2020)

INCONSISTENT USE OF 'CALD'

Overall, our review found that government reports do not present a consistent definition of 'CALD', and often fail to define who/what is meant by the term 'CALD' (see Tables 4 and 5, and sections below summarising each report). It is noteworthy that the same problem has been reported to occur in academic publications using the term 'CALD' without an explicit definition or consistent interpretation (Pham et al. 2021). Interestingly, when a 'CALD' definition is provided, it tends to exclude people born in Australia and migrants from Anglo-Saxon countries such as Britain and North America. This exclusion oversimplifies diversity in Australian born and Anglo-Celtic ancestries, whilst also implying that these groups are the 'norm' or population standard.

The way in which variables exploring cultural and linguistic diversity are grouped in the reports raises further issues. The reports do not show a consistent grouping method while some of them somewhat arbitrarily group variables related to aspects of cultural and linguistic diversity as a means to compare 'CALD' vs 'non-CALD' participants. This is found, as an example, in the National Disability Insurance Agency 2019 report. These inconsistent and non-specific categorisations fail to be informative, masking the full breadth and depth of diversity across NDIS participants and 'others' anyone who does not fit an 'Anglo-Celtic norm'. Following, there is a recapitulation of the items regarding the usage of the term 'CALD' in the previous 13 reports.



Australia's Health 2018 Chapter 5 (Australian Institute of Health and Welfare 2018)

Data source: Census

Aim: '(to report) on national indicators across the domains of health status, determinants of health, and the health system.' (p. 2)

CALD definition: 'People who were born overseas, have a parent born overseas or speak a variety of languages' (p. 271).

Comments: This report contains information about the percentage of people in Australia that were born overseas or whose parents were born overseas. The report mentions the most common countries of origin of people living in Australia (i.e., United Kingdom, New Zealand, China and India).

Later, the report categorises broadly migrant arrivals by region of last residence (i.e. Sub-Saharan Africa, Americas, Asia, North Africa, Middle East, Rest of Europe, United Kingdom and Ireland, New Zealand and Pacific). The lack of more variables and the arbitrary clustering of data is an obscuring of diversity since each of the migration categories are too broad to capture or translate what is meant by cultural diversity.

Language is also referred to in this publication. The census reports that there are over 300 languages spoken in Australia; the percentage of people speaking a non-English language at home and the percentage of people whose first language is not English. The census also provides information about the percentage of people not speaking English at home. Interestingly, this is not a question included in the census database that this report is based on.

Finally, figures included in this report compare the mortality rate and the number of hospitalisations per 1000 population amongst people born in Scotland, Australia, Germany, Italy, England, New Zealand, Greece, India, Sri Lanka, South Africa, the Philippines, Vietnam, China, Malaysia and South Korea. Although this is more specific than previous categorisations, there is also obscuring of diversity due to the reduced scope.

Older Australia at a glance 2018 (Australian Institute of Health and Welfare 2018a)

Data source: Census

Aim: 'This report focuses on older Australians—generally those aged 65 and over, unless otherwise specified. For older Indigenous Australians, the age range 50 and over is used, reflecting the life expectancy gap between Indigenous and non-Indigenous Australians and the lower proportion of Indigenous people aged 65 and over' (p.2)

CALD definition: None provided.

Comments: This report contains information about the percentage of people older than 65 who were born overseas and in a subsection the report identifies the percentage of those who were born in non-English speaking countries. The report also focuses on the most common non-English speaking countries (i.e. Italy, Greece and Germany) while it also clarifies that the most commonly spoken languages among people older than 65 are Greek and Chinese.

In terms of migration dynamics, they categorise people coming from North-West Europe, Southern and East Europe, North Africa and Middle East, South-East Asia, North-East Asia, Southern and Central Asia, Americas, Sub-Saharan Africa.

Older Australians 2021 (Australian Institute of Health and Welfare 2021)

Data source: Census

Aim: 'The report details the demographic profile of older Australians, and adopts a person-centred model to report on their health and wellbeing across key domains.' (p.2)

CALD definition: 'Australia's older people (aged 65 and over) come from all corners of the world and there is no single way to define what it means to be from a culturally and linguistically diverse (CALD) background. For example, it can refer to people who were not born in Australia, whose preferred language or the language they speak at home is a language other than English, or those who do not speak English well (referred to as English language proficiency). It can also include Aboriginal or Torres Strait Islander people – or can comprise a mix of these elements. People's experiences and circumstances can also vary considerably even within a particular group.' (p.20).

Comments: This report focuses on variables rather than in the 'CALD vs Non-CALD'. Thus, being clear on the data that were used.

Chronic health conditions among culturally and linguistically diverse Australians, 2021 (Australian Institute of Health and Welfare, 2023)

Data source: Census

Aim: 'This report explores the prevalence of chronic health conditions reported by people from culturally and linguistically diverse (CALD) backgrounds in Australia using data on long-term health conditions and 4 CALD indicators collected through the Australian Bureau of Statistics (ABS) 2021 Census of Population and Housing..' (p.4)

CALD definition: "There is no universally accepted or official operational definition of CALD, and approaches to identifying and reporting on CALD populations are inconsistent between organisations (Pham et al. 2021)." (p.4)

Comments: 'This report investigates the prevalence of long-term health conditions in relation to 4 CALD indicators collected in the 2021 Census, individually and in combination as follows...' (p.4)

This report shows a great effort mentioning that 'CALD' is not used consistently and showing clear and interesting data taking the ABS variables into consideration. They explain the variables used, their value and limitations and they are specific while describing and interpreting their data. This paper shows a step forward in how the government thinks about the term 'CALD'.

However and although it acknowledges this lack of consistency, the report keeps mentioning phrases as '...culturally and linguistically diverse Australians' and "People from culturally and linguistically diverse (CALD) backgrounds'. Instead of for instance: 'Cultural and Linguistic Diversity and its Association with Chronic Health Conditions'.

Review of Cultural and Linguistic Diversity Data Collection Practices in the WA Health System (Branch 2018)

Data source: Census

Aim: '(to) review into CaLD data collection practices across key WA health services.' (p.1)

CALD definition: 'Culturally and linguistically diverse (CaLD) includes groups and individuals who differ according to religion, race, language or ethnicity, except those whose ancestry is Anglo Saxon, Anglo Celtic, Aboriginal or Torres Strait Islander (Office of Multicultural Interests, 2010).' (p.4).

Comments: Like other reports, the included data focus on the most common countries of birth, migration waves and religion. The report also mentions the most common languages, leading to obscuring of diversity.

National Disability Insurance Scheme (NDIS)-Culturally and Linguistically Diverse participants (National Disability Insurance Agency 2019)

Data source: Survey of Disability, Ageing and Caring (SDAC)

Aim: 'to present information on the experience of CALD NDIS participants, and to compare this experience to non-CALD participants.' (p.3)

CALD definition: 'The term 'CALD participants' is used throughout the following sections to refer to participants of the NDIS who were either not born in Australia, New Zealand, the United Kingdom, Ireland, the United States of America, Canada or South Africa, and/or where the primary language spoken at home is not English' (p.20).

Comments: This report categorises people as 'CALD' or 'non-CALD'. This approach is not only problematic from a data utility perspective (such a general interpretation is inaccurate) but also due to the 'othering' inherent in this definition. Positively, they clarify their definition of 'CALD'.

Mental health research and evaluation in multicultural Australia: Developing a culture of inclusion (Minas et al. 2013)

Data source: National Health Survey (NHS)

Aim: To examine the knowledge about mental health of immigrant and refugee communities in Australia and to question whether Australian mental health research pays adequate attention to cultural and linguistic diversity (CALD) in the Australian population (modified from page 2).

CALD definition: None provided.

Comments: In general, this document highlights the lack of information gathered in surveys with a mental health focus to approach the Australian population diversity and provides recommendations. They do not categorise nor group variables in this report. They focus on reporting the lack of information available/published in this area.

Review of the Culturally and Linguistically Diverse (CALD) Ageing and Aged Care Strategy (Department of Health 2017)

Data source: National Health Survey (NHS)

Aim: '(to review) the actions undertaken to implement the principles and goals of the CALD Strategy, and considers stakeholders' perspectives on the success of the CALD Strategy as well as opportunities for improvement.' (p.2)

CALD definition: None provided.

Comments: This document mentions that 'In 2011, more than one quarter (27%) of the Australian population was born overseas – 18 per cent from 'non-main English-speaking' (NMES) countries.

Among those aged over 65, more than one third (36%) were born overseas, including 22 per cent from NMES countries (Australian Institute of Health and Welfare 2014).

Aged care diversity framework-2017 (Aged Care Sector Committee Diversity Sub-group 2017)

Data Source: National Health Survey (NHS)

Aim: 'to embed diversity in the design and delivery of aged care; and support action to address perceived or actual barriers to consumers accessing safe, equitable and quality aged care, while enabling consumers and carers to be partners in this process.' (p.2)

CALD definition: None provided.

Comments: This document mentions the following,

'Over 36% of older Australians were born outside of Australia and one in three older people were born in a non-English speaking country.'

'> 80% of older Australians report an affiliation to a religion of some kind.'

This document does not discuss any more CALD parameters.

2017-18 Report on the operation of the Aged Care Act 1997 (Department of Health 2018a)

Data source: National Health Survey (NHS)

Aim: '(to report) an overview of the components of the Australian aged care system (including those not governed by the Act), in order to present a comprehensive snapshot of the system as a whole.' (p. xiii)

CALD definition: '...born overseas in other than mainly English- speaking countries' (p.64).

Comments: This report mentions

'25% of people aged 65 years and over born overseas in other than mainly English-speaking countries.' (p. 64).

'Broadly speaking, people from CALD backgrounds have proportionally higher representation in home care services and proportionally lower representation in residential care services' (p. 64).

This document is obscuring diversity due to the reduced scope they are using to define 'CALD', excluding linguistic diversity and place of birth.



National Plan to Reduce Violence Against Women and Their Children Fourth Action Plan (2019-22) Background and Evidence Summary DRAFT: 25 September 2018 (Department of Social Services (Australia) 2018)

Data source: Personal Safety Survey (PSS) and Survey of Income and Housing (SIH)

CALD definition: None provided.

Aim: 'The purpose of this paper is to provide information on the evidence base for priorities explored through the consultations.' (p.1)

Comments:

This report notes there are limitations within the quality of the data, specifically CALD-related data. The following is a note in the report: 'Interpretation notes relating to PSS CALD data:

While CALD women appear to experience less domestic violence and/or sexual assault than non-CALD women, we should consider the following: While the PSS is the foremost source of violence prevalence data in Australia, the quality of the data diminishes the further down you drill into subpopulation characteristics, including CALD-related characteristics.' (p. 11).

However, since the document focuses on categorising as 'CALD' and 'non-CALD' without clarifying the parameters used, the interpretations offered are compromised.

2020 General Social Survey: Summary Results, Australia (GSS) (General Social Survey 2021)

Data source: General Social Survey (GSS)

Aim: '(to provide) data on the social characteristics, wellbeing and social experiences of people in Australia' (p.1)

CALD definition: None provided.

Comments: The report does not use CALD data in the report while it mentions that 'Generally, people agreed that it is 'a good thing for a society to be made up of people from different cultures' (85%). Although this is a positive comment, it is not informative about cultural or linguistic diversity.

Report on the National Screening and Assessment Form (NSAF) Review – Volume 1 February 2018 - NSAF(Department of Health 2018b)

Data source: National Screening and Assessment Form (NSAF)

Aim: 'The Review aims to make changes to the NSAF to support the existing My Aged Care assessment workforces, with expectations this will lead to a more efficient and streamlined NSAF that improves the quality of assessment and the client experience, and allows for better data capture and flow of information to service providers.' (p.5)

CALD definition: None provided.

Comments: 'NSAF does not collect sufficient or accurate information regarding CALD clients.' (Table 3, page 64).

2020 Age Care Workforce Census Report (Department of Health 2020)

Data source: Aged Care Workforce Census (ACWC)

Aim: '(to present) the findings of the 2020 Aged Care Workforce Census (Census) conducted by the Australian Government Department of Health (Department).' (p.3)

CALD definition: None provided.

Comments: As mentioned in the previous section reviewing the surveys, the questions and the way the information was obtained in the ACWC regarding CALD are compromised. Nonetheless, the report concludes that:

'Providers that have higher proportions of Aboriginal and/or Torres Strait Islander clients have more direct care workers who identify as Aboriginal and/or Torres Strait Islander.

Similarly, providers with more clients from CALD backgrounds have more direct care workers who identify as being from CALD backgrounds.' (p. 6).



CONCLUSIONS

Ageing is accompanied by an increased incidence of non-communicable diseases and physical impairments, demanding support from the health, aged care and social service sectors (Australian Institute of Health and Welfare 2018). Thus, the importance of data-based strategies for service provision to the aged population is beyond question. Related to cultural diversity, the support that a country puts at individuals' disposal is contingent to language and communication barriers, culturally specific norms and taboos that may interfere in the individual-system interaction.

This paper has shown how cultural diversity is identified and classified in Australia. In doing so, we observed inconsistencies in how the government captures and reports data related to CALD. Overall, the term 'CALD' is used in two distinctive ways: (1) as a categorisation tool (Culturally and Linguistically Diverse people/groups) or (2) as an acknowledgement of diversity (Cultural and Linguistic Diversity) if diversity is addressed at all.

Importantly, when used as a categorisation tool (to distinguish sub-groups of people), the term 'CALD' is often used arbitrarily and this often remains unclarified across reports. Discrepancies in the tacit definitions and variables used to group the population can lead to different interpretations of the data, making them incomparable and inaccurate. This is especially important when the data are employed to undertake comparisons between 'CALD' and 'non-CALD'.

In this case, it could be argued that the usage of Anglo-Celtic as the benchmark subpopulation characteristic and 'non-CALD person' lies in the fact that English is the main language spoken (Snapshot of Australia, 2021 | Australian Bureau of Statistics 2022) and that most of the services are provided in English. However, since 1996, the ABS acknowledged that language was not enough to capture human diversity in Australia (Department of Immigration and Multicultural Affairs and Australian Bureau of Statistics 1999). In fact, grouping people coming from Anglo-Saxon countries into 'non-CALD' also fails to acknowledge the migration patterns and cultural and linguistic diversity within their countries of birth (e.g. the cultural and linguistic backgrounds of people born in the United Kingdom).

Furthermore, the census has shown that 29.3% of the Australian population are first generation and 22.2% are only second generation (Snapshot of Australia, 2021 | Australian Bureau of Statistics 2022), evidencing the diversity across the nation. The Australian population is diverse. Furthermore, in the context of ageing, 37% (around 1.5 million people) of older Australians were born overseas in countries from all the corners of the world, 18% (around 750,000 people) speak languages other than English at home and 6% (around 250,000 people) cannot communicate fluently in English (Australian Institute of Health and Welfare 2021). The diversity within these groups and the intersections between different experiences, backgrounds and needs requires a sophisticated and nuanced approach to data collection and analysis.

An extra level of complexity to understand 'CALD' arises from the lack of representative data. Everyone must be able to participate in government surveys and administrative data collection processes no matter their English proficiency, age, or income. Additionally, there should be clear guidelines as to how to answer these questions and every sector should consider human diversity.

Finally, we consider it important to reflect on the sources from which relevant information can be obtained to improve the experience of ageing through health, aged care and social service provision. While this report focusses on 'government data' (see Use of terminology section at beginning of report for a definition of government data), there are other valuable information sources such as surveys conducted at the service level or as part of academic research projects with a selected sample.

Combining population-level knowledge of Australia's cultural and linguistic diversity together with the more specific or local experiences of all Australians can lead to improvements in both policy and practice. Service-level data and research can provide valuable insights into the unique characteristics and needs of the individuals currently using the service and inform its appropriate delivery.

On the other hand, the data collected at the broader Australian population level can be used to inform service gaps and emerging needs of the local population.

To acknowledge the existence of different cultural and linguistic identities within a collective represents the first step towards a fair multicultural society. The next step relies on working to gathering reliable information about cultural and linguistic diversity and how it relates to peoples' needs and experiences in order to improve the experience of ageing for all Australians. Data collection and analyses to explore cultural and linguistic diversity must be conducted in a safe and respectful way that does not reinforce stereotypes or contribute to marginalisation or 'othering' of groups of people.



AAG RECOMMENDATIONS

AAG RECOMMENDATIONS TO THE AUSTRALIAN GOVERNMENT TO IMPROVE HOW CULTURAL AND LINGUISTIC DIVERSITY IS CAPTURED IN GOVERNMENT DATA SOURCES

AAG has developed four core recommendations to the Australian Government based on a consideration of the findings of this paper and feedback from experts at the 2021 AAG workshop 'Using government data and data linkage to promote health and improve the ageing experience for Australia's culturally and linguistically diverse population' (Australian Association of Gerontology 2022).

1.

CONSISTENTLY CAPTURE THE 12 VARIABLES SUGGESTED BY THE ABS

AAG recommends that the 12 variables suggested by the ABS in the 'Standards for Statistics on Cultural and Linguistic Diversity' (Australian Bureau of Statistics 2022) should be used to capture information all across the government surveys. Whilst the 4 minimum variables provide a range of insights into cultural and linguistic diversity, they are not necessarily enough to inform specific policy or practice changes to improve the experience of ageing. Additionally, AAG notes that the language and aspects of cultural and linguistic diversity including response options (Appendix Table 3) need to be revised to be inclusive of all Australians and reflect current identities.

2.

STOP USING "CALD" TO DESCRIBE A TYPE OF PERSON

AAG recommends that the acronym 'CALD' and associated terms should only be used to describe the full cultural and linguistic diversity of Australia's population. 'CALD' should not be used to describe a particular type of person or group of people in Australia (e.g. 'CALD people', 'a CALD person').

The terms 'Cultural and Linguistic Diversity', 'Culturally and Linguistically Diverse' and 'CALD' are used interchangeably in Australia to describe diversity of a whole, as well as to describe sub-groups of people within that population. The latter use of these terms to describe a type of person or group of people may lead to inconsistent definitions leading to the question of 'who' we are talking about, a risk for 'othering', and it also fails to capture the full breadth of Australia's cultural and linguistic diversity (Mousaferiadis 2020a, 2020b).

3.

IDENTIFY AND REPORT ON VARIABLES THAT RELATE TO CULTURAL & LINGUISTIC DIVERSITY BASED ON THE AIM OF THE REPORT

A report that claims to explore cultural and linguistic diversity in Australia should clearly define why this is being explored (i.e. the aim) and how the data sources chosen relate to this aim. For example:

- ▶ If the aim of the report is to explore whether there are language barriers to access services in Australia, the variables assessed should relate to languages spoken and English language proficiency.
- ▶ If the aim is regarding genetic traits that can lead to a disease known to have evolved thousands of years ago in isolated populations in certain parts of the world, the variables assessed should relate to ancestry.
- ▶ If the aim is regarding the effects of early childhood arrival to Australia or recent migration effects, the variables assessed should derive from year of arrival to Australia and potentially country of birth.
- ▶ If the aim of the report is to inform broadly about Australia's cultural and linguistic diversity, explore a broad range of variables that capture the full diversity of Australia's population (see Recommendation 1).

4.

REPORT CLEARLY ON WHICH VARIABLES YOU HAVE USED TO EXPLORE AUSTRALIA'S CULTURAL AND LINGUISTIC DIVERSITY

The AAG suggests that the use of the acronym 'CALD' is used as an umbrella term to identify that the report will be exploring aspects relating to Australia's cultural and linguistic diversity and therefore facilitating searches for relevant literature by others. Beyond this, reports should clearly describe the specific variables explored informed by the aim of the report (see Recommendation 3) and avoid simplifying these into the umbrella term.

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TABLE 1. OVERVIEW OF VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY MEASURED IN GOVERNMENT SURVEYS RELEVANT TO AGEING.

SURVEYS	VARIABLES TO DEFINE AND CLASSIFY ATTRIBUTES RELATED TO CULTURAL						
	COUNTRY OF BIRTH	FIRST LANGUAGE SPOKEN	INTERPRETER SERVICE REQUIRED	MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME	PERIOD OF RESIDENCE IN AUSTRALIA (YEARS)	PREFERRED LANGUAGE	
CENSUS	x		x	x	x		
SURVEY OF DISABILITY, AGEING AND CARING (SDAC)	x			x	x		
SURVEY OF INCOME AND HOUSING (SIH)	x				x		
GENERAL SOCIAL SURVEY (GSS)	x			x	x		
NATIONAL HEALTH SURVEY (NHS)				x			
PERSONAL SAFETY SURVEY (PSS)		x		x		x	
NATIONAL SCREENING AND ASSESSMENT FORM (NSAF)		x	x			x	
AGED CARE WORKFORCE CENSUS (ACWC)							

AND LINGUISTIC DIVERSITY									
	PROFICIENCY IN SPOKEN ENGLISH	YEAR OF FIRST ARRIVAL IN AUSTRALIA	COUNTRY OF BIRTH OF PARENTS	ABORIGINAL OR TORRES STRAIGH ISLANDERS	CULTURAL IDENTIFICATION	RELIGION	ANCESTRY	CALD BASED DISCRIMINATION	CALD
	X	X	X	X		X	X		
	X			X					
				X					
	X			X	X			X	
	X		X						
	X		X					X	
	X		X	X	X	X	X	X	
				X					X

TABLE 2.

DETAILS OF VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY IN GOVERNMENT SURVEYS RELEVANT TO AGEING.

SURVEYS	VARIABLES ASSESSED EXPANDED
CENSUS	
COUNTRY OF BIRTH	Is the person an Australian citizen?; in which country was the person born?
FIRST LANGUAGE SPOKEN	
INTERPRETER SERVICE REQUIRED	Does the person ever need someone to help with or be with them for communication activities?
MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME	Does the person speak a language other than English at home?
PERIOD OF RESIDENCE IN AUSTRALIA (YEARS)	In what year did the person first arrive in Australia to live here for one year or more?
PREFERRED LANGUAGE	
PROFICIENCY IN SPOKEN ENGLISH	How well does the person speak English?
YEAR OF FIRST ARRIVAL IN AUSTRALIA	Where did the person usually live one year ago?; Where did the person usually live five years ago?
COUNTRY OF BIRTH OF PARENTS	In which country was the person's father born?; In which country was the person's mother born?
ABORIGINAL OR TORRES STRAIT ISLANDERS	Is the person of Aboriginal or Torres Strait Islander origin?
CULTURAL IDENTIFICATION	
RELIGION	What is the person's religion?
ANCESTRY	What is the person's ancestry?
CALD BASED DISCRIMINATION	
CALD	
SURVEY OF DISABILITY, AGEING AND CARING (SDAC)	
COUNTRY OF BIRTH	... anyone in the household receives overseas pensions or benefits?
FIRST LANGUAGE SPOKEN	
INTERPRETER SERVICE REQUIRED	
MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME	Main language other than English spoken at home
PERIOD OF RESIDENCE IN AUSTRALIA (YEARS)	Year of arrival to Australia
PREFERRED LANGUAGE	
PROFICIENCY IN SPOKEN ENGLISH	Do you consider you speak English very well...; communication difficulties during interview
YEAR OF FIRST ARRIVAL IN AUSTRALIA	
COUNTRY OF BIRTH OF PARENTS	
ABORIGINAL OR TORRES STRAIT ISLANDERS	Is anyone who usually lives here of Aboriginal or Torres Strait Islander origin?
CULTURAL IDENTIFICATION	
RELIGION	
ANCESTRY	
CALD BASED DISCRIMINATION	
CALD	

TABLE 2. DETAILS OF VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY IN GOVERNMENT SURVEYS RELEVANT TO AGEING. (CONT.)

SURVEYS VARIABLES ASSESSED EXPANDED

SURVEY OF INCOME AND HOUSING (SIH)

COUNTRY OF BIRTH In which country were you born?; country of birth

FIRST LANGUAGE SPOKEN

INTERPRETER SERVICE REQUIRED

MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME

PERIOD OF RESIDENCE IN AUSTRALIA (YEARS) In which year did [you/[name]] first arrive in Australia to live (for one year or more)?; In which month did you arrive in Australia (if less than a year living here)

PREFERRED LANGUAGE

PROFICIENCY IN SPOKEN ENGLISH

YEAR OF FIRST ARRIVAL IN AUSTRALIA

COUNTRY OF BIRTH OF PARENTS

ABORIGINAL OR TORRES STRAIT ISLANDERS Is anyone who usually lives here of Aboriginal or Torres Strait Islander origin?

CULTURAL IDENTIFICATION

RELIGION

ANCESTRY

CALD BASED DISCRIMINATION

CALD

GENERAL SOCIAL SURVEY (GSS)

COUNTRY OF BIRTH In which country were you born?

FIRST LANGUAGE SPOKEN

INTERPRETER SERVICE REQUIRED

MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME Which language do you mainly speak at home?

PERIOD OF RESIDENCE IN AUSTRALIA (YEARS) In which year did you first arrive in Australia to live for one year or more? Have you lived in Australia for one year or more?

PREFERRED LANGUAGE

PROFICIENCY IN SPOKEN ENGLISH Do you consider you speak English very well, well, not well or not at all?

YEAR OF FIRST ARRIVAL IN AUSTRALIA

COUNTRY OF BIRTH OF PARENTS

ABORIGINAL OR TORRES STRAIT ISLANDERS Are you Aboriginal or Torres Strait Islander origin? Are you Aboriginal origin, Torres Strait Islander origin, or both?

CULTURAL IDENTIFICATION Is your current visa a humanitarian or refugee visa?

RELIGION

ANCESTRY

CALD BASED DISCRIMINATION Thinking about your most recent experience of discrimination in Australia, do you think it was because any of the following?

CALD

TABLE 2.

DETAILS OF VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY IN GOVERNMENT SURVEYS RELEVANT TO AGEING.(CONT.)

SURVEYS	VARIABLES ASSESSED EXPANDED
NATIONAL HEALTH SURVEY (NHS)	
COUNTRY OF BIRTH	
FIRST LANGUAGE SPOKEN	
INTERPRETER SERVICE REQUIRED	
MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME	What language do you mainly speak at home?; Indigenous language categories required?;
PERIOD OF RESIDENCE IN AUSTRALIA (YEARS)	
PREFERRED LANGUAGE	
PROFICIENCY IN SPOKEN ENGLISH	Do you consider you speak English very well...
YEAR OF FIRST ARRIVAL IN AUSTRALIA	
COUNTRY OF BIRTH OF PARENTS	In which country were the mother and father born?
ABORIGINAL OR TORRES STRAIT ISLANDERS	
CULTURAL IDENTIFICATION	
RELIGION	
ANCESTRY	
CALD BASED DISCRIMINATION	
CALD	
PERSONAL SAFETY SURVEY (PSS)	
COUNTRY OF BIRTH	
FIRST LANGUAGE SPOKEN	Which language did you first speak as a child?
INTERPRETER SERVICE REQUIRED	
MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME	What language fo you mainly speak at home?
PERIOD OF RESIDENCE IN AUSTRALIA (YEARS)	
PREFERRED LANGUAGE	Main language spoken?
PROFICIENCY IN SPOKEN ENGLISH	Do you consider you speak English very well...
YEAR OF FIRST ARRIVAL IN AUSTRALIA	
COUNTRY OF BIRTH OF PARENTS	In which country were the mother and father born?
ABORIGINAL OR TORRES STRAIT ISLANDERS	
CULTURAL IDENTIFICATION	
RELIGION	
ANCESTRY	
CALD BASED DISCRIMINATION	What are your reasons for [reactions upon abuse]?; reasons for not studying other educational qualifications?
CALD	

TABLE 2.		DETAILS OF VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY IN GOVERNMENT SURVEYS RELEVANT TO AGEING. (CONT.)
SURVEYS	VARIABLES ASSESSED EXPANDED	
NATIONAL SCREENING AND ASSESSMENT FORM (NSAF)		
COUNTRY OF BIRTH		
FIRST LANGUAGE SPOKEN	Whether the client is part of a vulnerable cohort	
INTERPRETER SERVICE REQUIRED	Rowland Universal Dementia Assessment Scale (RUDAS) should be applied in the language in which people feel more comfortable and are most competent; Whether the client is part of a vulnerable cohort	
MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME		
PERIOD OF RESIDENCE IN AUSTRALIA (YEARS)		
PREFERRED LANGUAGE	Rowland Universal Dementia Assessment Scale (RUDAS) should be applied in the language in which people feel more comfortable and are most competent; Whether the client is part of a vulnerable cohort	
PROFICIENCY IN SPOKEN ENGLISH	Whether there are any barriers in communicating. This includes communicating over-the-phone and face-to-face; Whether the client is part of a vulnerable cohort; Standatised Mini-mental State Examination cannot be applied to clients with language difficulties or education in a language other than English	
YEAR OF FIRST ARRIVAL IN AUSTRALIA		
COUNTRY OF BIRTH OF PARENTS	Whether the client is part of a vulnerable cohort	
ABORIGINAL OR TORRES STRAIT ISLANDERS	Whether the client is part of a vulnerable cohort; Does the client have a history of childhood experiences that are important to know or would affect services being provided?	
CULTURAL IDENTIFICATION	Geriatric Depression Scale (GDS) tool since it has some questions that are inappropriate for people coming from particular cultures; Whether the client is part of a vulnerable cohort; Is there anything important to you in relation to the support you may receive?; Does the client have a history of childhood experiences that are important to know or would affect services being provided?	
RELIGION	Whether the client is receiving assistance or supervision of another person in order to participate in community-based or recreational, cultural or religious activities; Does the client have any cultural and/or religious values or beliefs that are important to know or would affect services being provided?	
ANCESTRY	Whether the client is part of a vulnerable cohort	
CALD BASED DISCRIMINATION	Whether the client is part of a vulnerable cohort	
CALD		

NOTE:
 In the NSAF user guide, a person is considered from a vulnerable cohort if they are: Aboriginal or Torres Strait Islander; veterans; refugees, asylum seekers or recent migrants without support; LGBTI; Culturally and linguistically or ethnically diverse, socially isolated.

TABLE 2.		DETAILS OF VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY IN GOVERNMENT SURVEYS RELEVANT TO AGEING. (CONT.)
SURVEYS	VARIABLES ASSESSED EXPANDED	
AGED CARE WORKFORCE CENSUS (ACWC)		
COUNTRY OF BIRTH		
FIRST LANGUAGE SPOKEN		
INTERPRETER SERVICE REQUIRED		
MAIN LANGUAGE OTHER THAN ENGLISH SPOKEN AT HOME		
PERIOD OF RESIDENCE IN AUSTRALIA (YEARS)		
PREFERRED LANGUAGE		
PROFICIENCY IN SPOKEN ENGLISH		
YEAR OF FIRST ARRIVAL IN AUSTRALIA		
COUNTRY OF BIRTH OF PARENTS		
ABORIGINAL OR TORRES STRAIT ISLANDERS	How many employees in each classification identify as either Aboriginal and/or Torres Strait Islanders	
CULTURAL IDENTIFICATION		
RELIGION		
ANCESTRY		
CALD BASED DISCRIMINATION		
CALD	How many employees in each classification identify as being from cultural and linguistically diverse backgrounds?	



TABLE 3. RESPONSE OPTIONS FOR VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY IN GOVERNMENT SURVEYS RELEVANT TO AGEING.

SURVEYS	QUESTIONS		RESPONSE OPTIONS		
CENSUS	Is the person an Australian citizen?	CENSUS	Yes, Australian citizen	No	
	In which country was the person born?		Australia	England	New Zealand
	Does the person ever need someone to help with or be with them for, communication activities?		yes, always	yes, sometimes	no
	Does the person speak a language other than English at home?		No, English only	Yes, Mandarin	Yes, Italian
	In what year did the person first arrive in Australia to live here for one year or more?		Open	Will be in Australia less than one year	
	How well does the person speak English?		Very well	Well	Not well
	Where did the person usually live one year ago?		Open (complete address, including country details)		
	Where did the person usually live five years ago?		Open (complete address, including country details)		
	In which country was the person's father born?		Australia	Other (Specify)	
	In which country was the person's mother born?		Australia	Other (Specify)	
	Is th person of Aboriginal or Torres Strait Islander origin? (y/n)		NO	Yes, Aboriginal	Yes, Torres Strait Islander
	What is the person's religion? (optional)		No religion	Catholic	Anglican
	What is the person's ancestry? (people can choose two)		English	Irish	Scottish
	SDAC		Scope	SDAC	In on scope
Country of birth		Australia	England		New Zealand
Which language do you mainly speak at home?		English	Mandarin		Arabic
Do you currently receive any of these pensions, allowances or benefits?		One of the options is: overseas government pension			
Do you consider you speak English very well, well or not well?		Very well	Well		Not well
Is anyone who usually lives here of Aboriginal or Torres Strait Islander origin?	No	Yes, Aboriginal	Yes, Torres Strait Islander		



	India	Italy	Vietnam	Phillippines	Other (specify)			
	Yes, Arabic	Yes, Cantonese	Yes, Greek	Yes, Vietnamese	Yes, other (specify)			
	Not at all							
	Uniting Church	Presbyterian	Buddhism	Islam	Greek Orthodox	Baptist	Hinduism	Other (specify)
	Italian	German	Chinese	Australian	Other (specify)			
	Out- Non Australian defence force member or dependant							
	India	Phillippines	Vietnam	Italy	South Africa	Malaysia	Scotland	Other (specify)
	Cantonese	Vietnamese	Italian	Greek	Hindi	Spanish	Punjabi	Other (specify)
	Not at all							



TABLE 3. RESPONSE OPTIONS FOR VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY IN GOVERNMENT SURVEYS RELEVANT TO AGEING. (CONT.)						
SURVEYS	QUESTIONS		RESPONSE OPTIONS			
SIH	Scope	SIH	In on scope	Out-short term overseas visitor	Out- non Australian diplomat or non Australian member of household/staff	
	In which country were you born?			England	New Zealand	
	In which year did [you/[name]] first arrive in Australia to live (for one year or more)?		Enter date			
SIH	In which month did you arrive in Australia? (if less than a year living here)	SIH	January	February	March	
	Is anyone who usually lives here of Aboriginal or Torres Strait Islander origin?; aboriginal/Torres Strait Islader/ or both		No	Yes, Aboriginal	Yes, Torres Strait Islander	
	Do you currently receive any of these pensions, allowances or benefits?		one of the options is: overseas government pensions/benefits			
GSS	In which country were you born?	GSS	Australia	England	New Zealand	
	In which year did you first arrive in Australia to live for one year or more?		Open			
	Have you lived in Australia for one year or more?		Yes	No		
	Are you Aboriginal or Torres Strait Islander origin?		Yes	No		
	Are you Aboriginal origin, Torres Strait Islander origin, or both?		Aboriginal	Torres Strait Islander	Both Aboriginal and Torres Strait Islander	
	Is your current visa a humanitarian or refugee visa?		Yes	No	Don't know	
	Which language do you mainly speak at home?		English	Mandarin	Arabic	
	Do you consider you speak English very well, well, not well or not at all?		Well	Not well	Not at all	



	Out- Non Australian defence force member or dependant								
	India	Italy	Vietnam	Philippines	South Africa	Scotland	Malaysia	Other (specify)	
	April	May	June	July	August	September	October	November	December
	India	Philippines	Vietnam	Italy	South Africa	Malaysia	Scotland	Other (specify)	
	Cantonese	Vietnamese	Italian	Greek	Hindi	Spanish	Punjabi	Other (specify)	



TABLE 3. RESPONSE OPTIONS FOR VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY IN GOVERNMENT SURVEYS RELEVANT TO AGEING. (CONT.)

SURVEYS		QUESTIONS	RESPONSE OPTIONS				
GSS		Thinking about your most recent experience of discrimination in Australia, do you think it was because any of the following?	GSS	Your ethnic/cultural background or appearance	Your gender	Your sexual orientation	
NHS		Indigenous language categories required?	NHS	Yes-Indigenous language categories required	No-Indigenous language categories NOT required		
		What language do you mainly speak at home?;		English	Mandarin	Italian	
		Do you consider you speak English very well, well or not well?		Very well	Well	Not well	
		In which country was the person's father born?		Australia	England	Italy	
		In which country was the person's mother born?		Australia	England	Italy	
		Type your country of birth		Open			
PSS		Which language did you first speak as a child?	PSS	English	Mandarin	Italian	
		Which language do you mainly speak at home?		English	Mandarin	Italian	
		Main language spoken?		English	Mandarin	Italian	
		Do you consider you speak English very well...		Very well	Well	Not well	
		In which country was your father born?		Australia	England	New Zealand	
		In which country was your mother born?		Australia	England	New Zealand	
PSS		Language spoken by current partner	PSS	Open			
		In which country was your mother born?		Australia	England	New Zealand	
		What were your reasons for not contacting the police?		One of the options being: Cultural/language reasons			
		What was the main reason (for not contacting the police)?		One of the options being: Cultural/language reasons			

	Your age	A disability of health issue	Your marital or family status	Your political/religious beliefs	Your occupation	Other (please specify)	Don't know		
	Arabic	Cantonese	Greek	Vietnamese	Spanish	Hindi	Tagalog	An Aboriginal language (specify)	A Torres Strait Islander language (specify)
	Not at all								
	New Zealand	Scotland	Greece	Netherlands	Germany	Vietnam	Lebanon	Other (specify)	
	New Zealand	Scotland	Greece	Netherlands	Germany	Vietnam	Lebanon	Other (specify)	
	Arabic	Cantonese	Greek	Vietnamese	Spanish	Hindi	Tagalog	Other (specify)	
	Arabic	Cantonese	Greek	Vietnamese	Spanish	Hindi	Tagalog	Other (specify)	
	Arabic	Cantonese	Greek	Vietnamese	Spanish	Hindi	Tagalog	Other (specify)	
	Not at all								
	India	Italy	Vietnam	Philippines	South Africa	Scotland	Malaysia	Other (specify)	
	India	Italy	Vietnam	Philippines	South Africa	Scotland	Malaysia	Other (specify)	
	India	Italy	Vietnam	Philippines	South Africa	Scotland	Malaysia	Other (specify)	

TABLE 3. RESPONSE OPTIONS FOR VARIABLES EXPLORING CULTURAL AND LINGUISTIC DIVERSITY IN GOVERNMENT SURVEYS RELEVANT TO AGEING. (CONT.)

SURVEYS	QUESTIONS
NSAF	Whether the client is part of a vulnerable cohort
	Rowland Universal Dementia Assessment Scale (RUDAS) should be applied in the language in which people feel more comfortable and are most competent
	Whether there are any barriers in communicating. This includes communicating over-the-phone and face-to-face; Standatised Mini-mental State Examination cannot be applied to clients with language difficulties or education in a language other than English
	Does the client have a history of childhood experiences that are importat to know or would affect services being provided?
	Geriatric Depression Scale (GDS) tool since it has some questions that are inappropriate for people coming from particular cultures; Is there anything important to you in relation to the support you may receive?;
	Does the client have a history of childhood experiences that are importat to know or would affect services being provided?
	whether the client is receiving assistance or supervision of another person in order to participate in community-based or recreational, cultural or religious activities; Does the client have any cultural and/or religious values or beliefs that are important to know or would affect services being provided?
	Whether the client is part of a vulnerable cohort
ACWC	How many employees in each classification identify as either Aboriginal and/or Torres Strait Islanders?
	How many employees in each classification identify as being from cultural and linguistically diverse backgrounds?



RESPONSE OPTIONS

NSAF

This information has to be considered and recorded when undertaking Home Support Assessments or Comprehensive Assessments.

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ACWC

Number of Aboriginal, Torres Strait Islanders or both

Number of CALD

Number of Don't know



TABLE 4.		OVERVIEW OF VARIABLES EXPLORING CULTURAL & LINGUISTIC DIVERSITY (CALD) REPORTED IN GOVERNMENT REPORTS RELEVANT TO AGEING.		
REPORT	SURVEY	CALD DEFINITION YES/NO	DEFINITION STATED BY AUTHORS	
AUSTRALIA'S HEALTH 2018 CHAPTER 5	Census	yes	"...people who were born overseas, have a parent born overseas or speak a variety of languages."	
OLDER AUSTRALIANS (2021)	Census	yes	"Australia's older people (aged 65 and over) come from all corners of the world and there is no single way to define what it means to be from a culturally and linguistically diverse (CALD) background."For example, it can refer to people who were not born in Australia, whose preferred language or the language they speak at home is a language other than English, or those who do not speak English well (referred to as English language proficiency). It can also include Aboriginal or Torres Strait Islander people – or can comprise a mix of these elements. People's experiences and circumstances can also vary considerably even within a particular group."	
REVIEW OF CULTURAL AND LINGUISTIC DIVERSITY DATA COLLECTION PRACTICES IN THE WA HEALTH SYSTEM	Census	yes	" Groups and individuals who differ according to religion, race, language or ethnicity, except those whose ancestry is Anglo Saxon, Anglo Celtic, Aboriginal or Torres Strait Islander."	
OLDER AUSTRALIA AT A GLANCE (2018)	Census	yes	"This article considers this diverse population from multiple perspectives and presents an overview of what key data sources tell us about CALD older Australians. Due to data availability, it primarily focuses on country of birth and English language proficiency as measures of cultural and linguistic diversity."	
CHRONIC HEALTH CONDITIONS AMONG CULTURALLY AND LINGUISTICALLY DIVERSE AUSTRALIANS, 2021	Census	yes	"There is no universally accepted or official operational definition of CALD, and approaches to identifying and reporting on CALD populations are inconsistent between organisations"	
NATIONAL DISABILITY INSURANCE SCHEME (NDIS)-CULTURALLY AND LINGUISTICALLY DIVERSE PARTICIPANTS	SDAC	yes	"The term 'CALD participants' is used throughout the following sections to refer to participants of the NDIS who were either not born in Australia, New Zealand, the United Kingdom, Ireland, the United States of America, Canada or South Africa, and/or where the primary language spoken at home is not English."	



TACIT DEFINITION

VARIABLES INCLUDED IN DEFINITION

	LANGUAGE	COUNTRY OF BIRTH	YEAR OF ARRIVAL IN AUSTRALIA	RELIGION	RACE	ETHNICITY	ANCESTRY
	X	X					
	X	X					
	X			X	X	X	X
	X	X		X			X
	X	X	X				
	X	X					



TABLE 4.		OVERVIEW OF VARIABLES EXPLORING CULTURAL & LINGUISTIC DIVERSITY (CALD) REPORTED IN GOVERNMENT REPORTS RELEVANT TO AGEING.	
REPORT	SURVEY	CALD DEFINITION	DEFINITION STATED BY AUTHORS
		YES/NO	
MENTAL HEALTH RESEARCH AND EVALUATION IN MULTICULTURAL AUSTRALIA: DEVELOPING A CULTURE OF INCLUSION	NHS	no	
REVIEW OF THE CULTURALLY AND LINGUISTICALLY DIVERSE (CALD) AGEING AND AGED CARE STRATEGY	NHS	no	
AGED CARE DIVERSITY FRAMEWORK-2017	NHS	no	
2017- 18 REPORT ON THE OPERATION OF THE AGED CARE ACT 1997	NHS	no	
NATIONAL PLAN TO REDUCE VIOLENCE AGAINST WOMEN AND THEIR CHILDREN FOURTH ACTION PLAN (2019-22) BACKGROUND AND EVIDENCE SUMMARY DRAFT: 25 SEPTEMBER 2018	PSS and NHS	no	
GENERAL SOCIAL SURVEY: SUMMARY RESULTS, AUSTRALIA	GSS	no	
REPORT ON THE NATIONAL SCREENING AND ASSESSMENT FORM (NSAF) REVIEW – VOLUME I FEBRUARY 2018	NSAF	no	

TACIT DEFINITION		VARIABLES INCLUDED IN DEFINITION						
		LANGUAGE	COUNTRY OF BIRTH	YEAR OF ARRIVAL IN AUSTRALIA	RELIGION	RACE	ETHNICITY	ANCESTRY
	"...mental health services for the general community is not known to the same extent in relation to immigrant and refugee communities, particularly those who do not speak fluent English. "	X	X					
	"In 2011, more than one quarter (27%) of the Australian population was born overseas – 18 per cent from 'non-main English-speaking' (NMES) countries. Among those aged over 65, more than one third (36%) were born overseas, including 22 per cent from NMES countries (Australian Institute of Health and Welfare 2014). In 2015, three in ten people in permanent residential aged care were born overseas (18% in NMES countries), and 13 per cent spoke a language other than English at home (Australian Institute of Health and Welfare 2017)."	X	X					
	"Older people display the same diversity as the broader population across one or more attributes including race, religion, language, gender, sexuality, health, economic status and/or geographic location. "	X	X					
	"... 25 per cent of people aged 65 years and over born overseas in other than mainly English-speaking countries"; "The department offers interpreting support to people from CALD backgrounds via free access to the Department of Home Affairs' Translating and Interpreting Service (TIS National)."	X			X	X		
	"people born overseas in a country in which English is not the main language spoken"	X	X					
	"Generally, people agreed that it is 'a good thing for a society to be made up of people from different cultures'"							
	"NSAF not inaccurate in capturing info from consumer due to language & cultural barriers. "							

TABLE 5. CULTURAL AND LINGUISTIC DIVERSITY (CALD) DEFINITIONS AND RELATED VARIABLES REPORTED IN GOVERNMENT REPORTS RELEVANT TO AGEING.				
REPORT	SURVEY	VARIABLES INCLUDED		
		CALD/NON-CALD	COUNTRY OF BIRTH	
AUSTRALIA'S HEALTH 2018 CHAPTER 5	Census		X	
OLDER AUSTRALIA AT A GLANCE (2018)	Census		X	
OLDER AUSTRALIANS (2021)	Census		X	
CHRONIC HEALTH CONDITIONS AMONG CULTURALLY AND LINGUISTICALLY DIVERSE AUSTRALIANS, 2021	Census		X	
REVIEW OF CULTURAL AND LINGUISTIC DIVERSITY DATA COLLECTION PRACTICES IN THE WA HEALTH SYSTEM	Census		X	
NATIONAL DISABILITY INSURANCE SCHEME (NDIS)-CULTURALLY AND LINGUISTICALLY DIVERSE PARTICIPANTS	SDAC	X		
MENTAL HEALTH RESEARCH AND EVALUATION IN MULTICULTURAL AUSTRALIA: DEVELOPING A CULTURE OF INCLUSION	NHS	X	X	
REVIEW OF THE CULTURALLY AND LINGUISTICALLY DIVERSE (CALD) AGEING AND AGED CARE STRATEGY	NHS			
AGED CARE DIVERSITY FRAMEWORK-2017	NHS		X	
2017-18 REPORT ON THE OPERATION OF THE AGED CARE ACT 1997	NHS	X		
NATIONAL PLAN TO REDUCE VIOLENCE AGAINST WOMEN AND THEIR CHILDREN FOURTH ACTION PLAN (2019-22) BACKGROUND AND EVIDENCE SUMMARY DRAFT: 25 SEPTEMBER 2018	PSS and NHS	X	X	
GENERAL SOCIAL SURVEY: SUMMARY RESULTS, AUSTRALIA	GSS			
REPORT ON THE NATIONAL SCREENING AND ASSESSMENT FORM (NSAF) REVIEW – VOLUME I FEBRUARY 2018	NSAF	X		
2020 AGED CARE WORKFORCE CENSUS REPORT	WFC	X		

REGION OF BIRTH	COUNTRY OF BIRTH OF PARENTS	INDIGENOUS STATUS	ANCESTRY	RELIGIOUS AFFILIATION	YEAR OF ARRIVAL IN AUSTRALIA	PROFICIENCY IN SPOKEN ENGLISH	LANGUAGE SPOKEN
X							X
X		X		X	X	X	X
X		X			X	X	X
					X	X	X
	X		X	X	X	X	X
X	X	X	X	X	X	X	X
		X		X			X
							X



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