

Multicultural demographics data explorer

Guidance and notes on
multicultural source data

2023



About the 2021 Census

The five-yearly population Census is the primary source of data on multicultural communities in Australia. The Australian Bureau of Statistics (ABS) — a federal government agency — is responsible for conducting a census of population and housing in Australia every five years. Since 1966, the Census has taken place in each year ending in a 1 or 6.

The 2021 Census was conducted on 10 August 2021. By many accounts, the 2021 Census was a better count of population than many previous censuses, because it was conducted in the middle of the COVID-19 pandemic. While this may seem counter-intuitive due to border closures, a much greater share of Australia's population was actually in the country on Census night. In New South Wales, large parts of the state were in lockdown, which meant people were more likely to be counted at home. The lockdowns did affect some topics in the Census, such as method of travel to work (more people worked at home on Census day), but these topics are outside the scope of this analysis.

For some communities there is an apparent growth in population between Census years, which may be due to a higher count (lower undercount) of population related to those factors above. This is noted in the text where it's likely to be the case and mainly reflects languages and birthplaces which have declining populations over the long-term.

For more information on the five-yearly population Census, and the data and characteristics available from it, please see the [ABS Census page](#). The [Census dictionary](#) includes all categories and classifications as well.



Country of birth

The analyses in this report present information by country of birth. Country of birth is the most objective and easily obtainable measure of multicultural population, though it doesn't accurately reflect all cultural groups. Country of birth reflects the country where a person was born, not necessarily their ethnic origin or language.

Included is a presentation of approximately one page of information about that birthplace for residents of NSW, for every country of birth with at least 10,000 residents in NSW. This includes 45 different analyses, though several birthplaces collected by the ABS are aggregated as follows:

United Kingdom (UK) – Including England, Scotland, Wales, Northern Ireland, Channel Islands and the Isle of Man (as well as UK not further defined). These are combined due to the similarity of cultural background and the fact that the UK is a sovereign nation, while the member countries are not. This is the largest birthplace group in Australia.

Serbia/Montenegro/Former Yugoslavia – Includes Serbia, Montenegro and South Eastern Europe, nfd (nfd in the Census means 'not further described'). This is treated as one grouping for analysis primarily due to a significant number of older people from Serbia who state their birthplace as 'Yugoslavia' which ceased to exist in 1991. These are coded to "South Eastern Europe, nfd" and comprise the majority of those in this category. Taking Serbia alone will undercount the actual Serbian-born population. While other nations may be coded to this category, evidence from the ABS is that the vast majority in this category have stated 'Yugoslavia' and are of Serbian origin. Montenegro is included as it split from Serbia more recently; the numbers from Montenegro are very small and would not meet the cut-off for analysis otherwise.

All other countries of birth included are individual categories. This includes Hong Kong and Taiwan, of which are both recognised by the Australian Government to be administrative regions of China. They are shown separately because these populations are quite different to the Chinese population and the ABS collects them separately in the Census.

The smallest population profiled is from Samoa, with 10,147 people in NSW.



Language spoken at home

These analyses present information by language spoken at home. This is a measure of first, or native language, and does not indicate if a person is bilingual or how many languages they speak. The Census question specifically asks, 'Does the person speak a language other than English at home?', with boxes to mark 'No, English Only', and several major languages, with the option to write in any other language not listed.

Some people may speak English at home even if their native language is different. While others who were born in Australia may speak a language other than English at home.

In New South Wales at the 2021 Census, 26.6% of the population spoke a language other than English at home.

A one-page summary of languages spoken by 9,000 or more people in NSW is included in this resource. This represents 39 languages, with the largest being Mandarin, and the smallest Dari.

Several languages are combined for reporting purposes due to time series and similarity of language considerations, as follows:

Tagalog/Filipino – These languages are collected separately by the ABS but both relate to the population from the Philippines, with similar characteristics. Filipino is a standardised version of the dialect Tagalog. Until the 2011 Census the ABS treated them as a single language, so they are combined as they represent one population.

Neo-Aramaic – This includes the Assyrian Neo-Aramaic and Chaldean Neo-Aramaic, which are modern versions of the ancient Assyrian language spoken in parts of Iraq, Syria, Turkey and Iran. Prior to the 2016 Census this was considered one language, and while there are some differences in these groups, the vast majority of people who speak these languages are of Assyrian descent and represent a single community. In NSW, these languages are almost entirely confined to the Fairfield and Liverpool local government areas in South Western Sydney.

Other languages are all profiled separately, however the ABS may combine some small dialect groups into these single language categories.

Do not assume that all people speaking a language other than English are born overseas. Some languages have large proportions of speakers born in Australia.



Age group definitions

The analyses include commentary on the broad age structures of each birthplace and language group, using five-year age group charts to describe the shape of each. Specific commentary is provided for the Cancer Institute NSW on three age-sex cancer screening cohorts and the percentage they make up of each population:

- Breastscreen – 50–74 year old females
- Bowel screening – 50–74 year old persons of either sex
- Cervical screening – 25–74 year old females

These groups vary enormously between populations depending on their age and sex distribution.

The Census records age at last birthday for all persons, from 0 to 115. The highest age group used in this analysis is 85+.



Sex and gender

The Census reports on sex, not gender, and the only output is male and female. The 2021 Census included an option for 'other' to capture the intersex population. This data has not been released at the time of writing.

Male/female percentages are shown in the analysis for most of the birthplace and language groupings, because they are relevant when two of the three cancer screening cohorts of interest are based on females. Different birthplace and language groups show different percentages of male/female split. The total population is approximately 50.6% female and 49.4% male. As female life expectancy is longer, older communities tend to have more women. Other drivers among migrant groups may be one member of a family seeking employment in Australia before bringing their families over, or Australian-born populations seeking an overseas-born spouse.



English proficiency

For people who speak a language other than English at home, the Census records their proficiency in English, which is self-reported and can either be 'Very well', 'Well', 'Not well' or 'Not at all'. For the purposes of analysis, 'Not well' and 'Not at all' are combined as a number and percentage of people with poor English proficiency. This is an important characteristic if you're trying to communicate with a particular group –for instance informing people of the importance of cancer screening. The average rate of poor English proficiency for the NSW population is 4.5%, but this includes the English speaking population for whom English proficiency is not measured. Among language-other-than-English groups the average rate of English proficiency is 20.8%. It varies greatly between language groups with the lowest rates around 2% while others have as high as 40% poor English proficiency.

It is important to remember that English proficiency is self-reported by the respondent –nobody is interviewed to determine their English proficiency. For people with no English at all, they may have received help from a Census official or family member in filling out the Census (anecdotally this is often the English-speaking children of elderly parents).



Year of arrival

For birthplace analyses, the year of arrival of some groups is looked at. Respondents born overseas indicate the year they arrived in Australia on the Census form, and this is aggregated into 5–10 year groupings. This is one way of looking at the changing patterns of migration of particular groups. Many communities are quite recently arrived, with most of their population arriving since 2016 or 2011. Others, including many European communities, represent older waves of migration, with most of their members arriving prior to 1960. Year of arrival can give an idea of how established in Australia a particular group is.

Year of arrival refers to arrival in Australia. Census data does not collect information about when the person arrived in NSW, or first moved to their local government area of residence.

Year of arrival in the past five years may in some cases be similar to an increase or decrease in population between Census years. However, this is not always the case. Always remember that years of arrival are collected all from one Census, and only from those who are in Australia on Census night. Some communities may have a high percentage of population arrived in the past five years, but the group may not have increased as much since the previous Census. This is likely in the case of a more mobile community, where many of those in Australia in the previous Census had gone back overseas and replaced by a new cohort. For this reason not all groups age in place, and it makes forecasting very difficult for multicultural groups.



Aboriginal and Torres Strait Islander population

The Aboriginal and Torres Strait Islander population (also known as 'Indigenous' or 'First Nations') consists of people who answered the question in the Census form 'Is the person of Aboriginal or Torres Strait Islander origin?' with either 'Yes, Aboriginal', 'Yes, Torres Strait Islander', or 'Yes, both'. There is a significant 'Not stated' component to this question, which in many areas is higher than the Aboriginal and Torres Strait Islander response.

Aboriginal and Torres Strait Islander people are also recorded in the Census question on ancestry, however the use of the ancestry question for the Aboriginal and Torres Strait Islander population is discouraged, as it usually undercounts (many Aboriginal people will mark the 'Australian' box, or choose other ancestries).



Long-term health conditions

Based on the Census question 'Has the person been told by a doctor or nurse that they have any of these health conditions?', with a listing of 10 conditions plus 'other'. This was asked for the first time in the 2021 Census. It is a multi-response question (people can nominate more than one condition). The available health conditions are:

- arthritis
- asthma
- cancer (including remission)
- dementia (including Alzheimer's)
- diabetes (excluding gestational diabetes)
- heart disease (including heart attack or angina)
- kidney disease
- lung condition (including COPD or emphysema)
- mental health condition (including depression or anxiety)
- stroke
- any other long-term health condition(s)

The question is specifically intended to capture only conditions diagnosed by a health professional, hence the wording of the question.

In 2021, 30.9% of the NSW population reported one or more of these conditions (or other). The most reported condition was arthritis with 8%.

Cancer was reported as a health condition by 2.8% of the population in NSW. This is quite a low percentage but reflects those living with cancer as a long-term health issue at a point in time. It's likely that the percentage of people who will be diagnosed over a number of years will be much higher.



Population forecasts

Population forecasts by language and birthplace are not offered as part of these analyses. For some groups, a sentence or short paragraph is included with a qualitative assessment of the likelihood of future population increases, changes in age structure based on recent migration trends (high or low) and the current age of the population. There is no quantitative analysis and no exact numbers are provided, just a broad indication of the likely future direction of change.



Geography

The main geographic unit used in this report is the state of New South Wales (NSW), and component local health districts (LHDs).

There are 16 LHDs covering all of NSW, plus Albury, which is in a combined health network with the neighbouring state of Victoria.

The LHDs are:

- Metropolitan or Greater Sydney:
 - Nepean Blue Mountains
 - Northern Sydney
 - South Eastern Sydney
 - South Western Sydney
 - Sydney
 - Western Sydney
- Regional and rural:
 - Central Coast
 - Far West
 - Hunter New England
 - Illawarra Shoalhaven
 - Mid North Coast
 - Murrumbidgee
 - Northern NSW
 - Southern NSW
 - Western NSW

Please note that the Central Coast is considered by the ABS to be a part of Greater Sydney, which is different to the NSW Health definition.

The boundaries used for these LHDs have been taken from the NSW Health website, and approximated for 2021 using a best fit of 2021 Census year SA1 boundaries. These should be very accurate in most cases but may vary marginally in some places around the perimeter of LHDs.

Local government areas (LGA) are also used in some of the analysis, particularly when there are a few LGAs which have a very high concentration of a particular birthplace or language group. Most LHDs are aggregates of whole LHDs, but some are split. Notably, the Canterbury-Bankstown LGA crosses the Sydney and South Western Sydney LHDs.

Confidentiality

The ABS take the confidentiality of Census data very seriously, and there is a strict requirement that no information can be released which identifies any individual in the Census. Data are released only in aggregate.

This has an effect on the data output, where the ABS applies 'perturbation', making small random adjustments to the numbers in each cell of a table, so that they rarely add up to the same figure as the total. For this reason, users of these reports may find that the numbers given for any particular characteristic (e.g. the number of people speaking a particular language) vary marginally when viewing information from a different table, even sourced from the same Census. For example, the total number of people born in Vietnam in NSW in 2021 is 97,995. This figure is likely to be the most accurate as it's a provided total (but may still not be exact). Adding up males and females born in Vietnam at the state level gives a total of 97,993, while summing all the age groups by all the NSW LHDs arrives at a total of 97,960. These are very similar figures, but they are different. The effect is much higher as a percentage of population on a small number. (Eg. if there were only 100 Vietnamese in the population rather than nearly 100,000, perturbation would in this instance make a difference of around 40% in the total population number). For this reason very small populations in the Census are not considered reliable indicators. Small populations are also more susceptible to non-sampling error (e.g. people make errors on a Census form) which is actually much larger than the perturbation effect.

No commentary in the accompanying reports is made for any characteristics with less than 100 people in the state. Birthplaces and languages in the rankings are generally excluded if they have less than 1,000 people in the state, and the main commentary reports go down to groups with a total population of about 10,000.

Contact

This document is provided current as of February 2023, referring to Census data from the 2021 and earlier Censuses.

For more information please email the Cancer Institute NSW: CINSW-Multicultural@health.nsw.gov.au

Cancer Institute NSW
1 Reserve Road
St Leonards, NSW 2065

Locked Bag 2030
St Leonards NSW 1590

Office Hours: Monday to Friday
9.00am–5.00pm

T: (02) 8374 5600
E: CINSW-Multicultural@health.nsw.gov.au
W: cancer.nsw.gov.au