

Ageing in a Foreign Land: The Health
Experiences of European-Born Post-War
Migrants to Australia

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TABLE OF CONTENTS

TABLE OF CONTENTS	I
LIST OF FIGURES	VI
LIST OF TABLES	VI
LIST OF APPENDIX TABLES	IX
ABSTRACT	X
DECLARATION	XII
ACKNOWLEDGEMENTS	XIII
ABBREVIATIONS	XV
CHAPTER 1: INTRODUCTION	1
1.1.1 Research question	3
1.1.2 Study aims and objectives	3
1.1.3 Outline of chapters	5
1.1.4 Summary	7
CHAPTER 2: MIGRATION AND SETTLEMENT	8
2.1 Introduction	8
2.2 A general overview of migration and settlement	8
2.2.1 The migration process and other key concepts	8
2.2.2 Settlement, acculturation and issues affecting immigrant health	12
2.3 Migration to Australia: A historical background & policy context	18
2.3.1 Clarification of Australia's post-WWII period	18
2.3.2 'White Australia Policy'	20
2.3.3 'Populate or Perish'	20
2.3.4 Placement of migrants	22
2.3.5 Post-1970's shifts in Australia's migration policies & intakes	23
2.4 Australia's post-WWII settlement policies	25
2.4.1 Assimilation & integration	25
2.4.2 Multiculturalism	27
2.5 Demographic challenges associated with a multicultural Australia	28
2.6 Summary	30
CHAPTER 3: MIGRANT HEALTH & AGEING – A REVIEW OF THE LITERATURE	32
3.1 Introduction	32

3.2 Relationship between health and ageing: quality of life, life-course and active ageing.....	34
3.2.1 Personal and behavioural determinants.....	37
3.2.2 Social and economic determinants	38
3.3 The health of Australia's post-war immigrants.....	42
3.3.1 Healthy Migrant Effect (HME), salmon bias effect and unhealthy re-migration hypothesis.....	43
3.3.2 Chronic conditions and risk factors	44
3.3.3 Mental health	51
3.3.4 Socio-economic patterns of wellbeing.....	53
3.4 Summary.....	55
CHAPTER 4: STUDY FRAMEWORK, RESEARCH DESIGN AND METHODS.....	58
4.1 Introduction.....	58
4.2 Framework determinants.....	58
4.3 Research question, aims and objectives	62
4.3.1 Research question	62
4.3.2 Study aims and objectives	63
4.4 Overall Approach.....	64
4.4.1 Quantitative component	64
4.4.2 Qualitative component	65
CHAPTER 5: STUDY ONE – HEALTH STATUS OF EUROPEAN-BORN AUSTRALIANS OVER-TIME.....	68
5.1 Study aims.....	68
5.2 Methods.....	68
5.2.1 Sample and sampling procedure.....	69
5.2.2 Informed consent and call backs.....	71
5.2.3 Pilot testing	72
5.2.4 Data collection.....	72
5.2.5 Validation	75
5.2.6 NHS data items.....	75
5.2.7 NHS response and participation rates.....	80
5.2.8 Bias.....	80
5.2.9 Weighting	80
5.2.10 NHS study sample	81
5.2.11 NHS data files	81
5.2.12 Data analysis.....	81
5.3 Results	82
5.3.1 Introduction	82

5.3.2 Demographic characteristics	82
5.3.3 Health and health-related outcomes	83
5.4 Summary	87
CHAPTER 6: STUDY TWO – MIGRANT STATUS AS A RISK FACTOR FOR POORER HEALTH OUTCOMES IN OLDER AUSTRALIAN, GERMAN, ITALIAN AND GREEK-BORN SOUTH AUSTRALIANS	89
6.1 Study aims.....	89
6.2 Methods.....	89
6.2.1 Sample and sampling procedure.....	90
6.2.2 Informed consent and withdrawal criteria	90
6.2.3 Pilot testing	90
6.2.4 Data collection.....	91
6.2.5 Validation	91
6.2.6 Ethical considerations	91
6.2.7 SAMSS data items	91
6.2.8 SAMSS response and participation rates.....	95
6.2.9 Bias	96
6.2.10 Weighting	97
6.2.11 SAMSS study sample	97
6.2.12 Data analysis.....	98
6.3 Results	99
6.3.1 Introduction	99
6.3.2 Descriptive analysis	99
6.3.3 Multivariable analysis	106
6.4 Summary	108
CHAPTER 7: STUDY THREE – TRANSITIONS IN HEALTH OVER TIME IN AUSTRALIAN, GERMAN, ITALIAN AND GREEK-BORN SOUTH AUSTRALIANS AGED 50 TO 79.....	111
7.1 Study aims.....	111
7.2 Methods.....	111
7.2.1 SERCIS Migrant HS and Mental HS background.....	112
7.2.2 Sample and sampling procedure (SERCIS Migrant HS and Mental HS).....	113
7.2.3 Informed consent	116
7.2.4 Pilot Testing	117
7.2.5 Data collection.....	117
7.2.6 Validation	117
7.2.7 Data items	117
7.2.8 Migrant HS, Mental HS and SAMSS Response Rates.....	119

7.2.9 Weighting	120
7.2.10 Study sample	120
7.2.11 Data analysis.....	121
7.3 Results	122
7.3.1 Introduction	122
7.3.2 Descriptive analysis	122
7.3.3 Comparison across birthplace groups – Age-sex standardisations	129
7.3.4 Comparison across birthplace groups – Percentage difference	133
7.3.5 Comparison across birthplace groups – Marginal probabilities	136
7.4 Summary	138
CHAPTER 8: STUDY FOUR – HEALTH AND WELLBEING EXPERIENCES OF OLDER GREEK-BORN SOUTH AUSTRALIANS, A QUALITATIVE STUDY	140
8.1 Study aims.....	140
8.2 Methods.....	141
8.2.1 Survey design	141
8.2.2 Interviewers and interviewer training.....	144
8.2.3 Informed consent and withdrawal criteria	144
8.2.4 Pilot testing	144
8.2.5 Survey material and questions	145
8.2.6 Ethical considerations	146
8.2.7 Data collection.....	146
8.2.8 Data items.....	148
8.3 Results	151
8.3.1 Demographic characteristics	151
8.3.2 Health outcomes of Greek-born South Australians	152
8.4 Summary	164
8.4.1 Health service use.....	165
8.4.2 Family as a vehicle for health information and support	166
8.4.3 Life-course histories affecting health in later life.....	168
CHAPTER 9: DISCUSSION	170
9.1 Differences in health outcomes	171
9.2 Deterioration of health over time.....	175
9.3 Aggregation of country of birth.....	177
9.4 HME as a concept to explain migrant health	178
9.5 Future research	182
9.6 Limitations	185
9.7 Strengths	188

9.8 Summary	189
APPENDIX A: EXPLANATORY NOTES AND COMPARABILITY OF DATA ITEMS FROM 1989/90, 2001, 2007/08 NATIONAL HEALTH SURVEYS.....	191
APPENDIX B: CONCORDANCE BETWEEN COUNTRY OF BIRTH CLASSIFICATION STRUCTURES	194
APPENDIX C: SOUTH AUSTRALIAN MONITORING AND SURVEILLANCE SYSTEM QUESTIONNAIRE.....	196
APPENDIX D: EXPLANATORY NOTES ON THE SOUTH AUSTRALIAN MONITORING AND SURVEILLANCE SYSTEM DATA ITEMS.....	246
APPENDIX E: SOUTH AUSTRALIAN MONITORING AND SURVEILLANCE SYSTEM WEIGHTING FORMULA	255
APPENDIX F: EXPLANATORY NOTES AND COMPARABILITY OF DATA ITEMS FROM THE MIGRANT HEALTH SURVEY (SERCIS), MENTAL HEALTH SURVEY (SERCIS) AND SOUTH AUSTRALIAN MONITORING AND SURVEILLANCE SYSTEM (SAMSS).....	256
APPENDIX G: MIGRANT HEALTH SURVEY QUESTIONNAIRE	262
APPENDIX H: MENTAL HEALTH SURVEY QUESTIONNAIRE	274
APPENDIX I: GREEK-BORN SOUTH AUSTRALIAN DEMOGRAPHIC PROFILE.....	290
APPENDIX J: PRIMARY DATA COLLECTION SURVEY MATERIAL.....	293
APPENDIX K: PRIMARY DATA COLLECTION QUESTIONNAIRE	301
REFERENCES	326

LIST OF FIGURES

Figure 3.1: Active ageing framework	36
Figure 4.1: Study framework investigating the health status of Australia’s post-war migrants	61
Figure 4.2: Summary of analytical plan.....	67
Figure 7.1: Age-Sex Standardised Percentage Difference in Arthritis prevalence from 1996/97 to 2007 - 2012 in Australian, German, Italian and Greek-born South Australians aged 50-79 years.....	133
Figure 7.2: Age-Sex Standardised Difference in Osteoporosis prevalence from 1996/97 to 2007 - 2012 in Australian, German, Italian and Greek-born South Australians aged 50-79 years.....	134
Figure 7.3: Age-Sex Adjusted Percentage Difference in Asthma prevalence from 1996/97 to 2007 - 2012 in Australian, German, Italian and Greek-born South Australians aged 50-79 years.....	134
Figure 7.4: Age-Sex Standardised Percentage Difference in Diabetes prevalence from 1996/97 to 2007 - 2012 in Australian, German, Italian and Greek-born South Australians aged 50-79 years.....	135
Figure 7.5: Age-Sex Standardised Percentage Difference in Cardiovascular Disease prevalence from 1996/97 to 2007 - 2012 in Australian, German, Italian and Greek-born South Australians aged 50-79 years.....	136

LIST OF TABLES

Table 5.1: Summary of sample selection and interviews completed.....	71
Table 5.2: Summary of 1989/90, 2001 and 2007/08 NHS response and participation rates.....	80
Table 5.3: Breakdown of NHS sample by year, age and birthplace group participants aged between 45 and 79 years, in 1989/90, 2001 and 2007/08	81
Table 5.4: Demographic characteristics of Australian and European-born individuals, data limited to specific age groups in 1989/90, 2001 & 2007/08 National Health Survey	85
Table 5.5: Selected risk factors and health conditions for Australian and European-born individuals, data limited to specific age groups in 1989/90, 2001 & 2007/08 National Health Survey	86
Table 6.1: Summary of SAMSS population of interest.....	89
Table 6.2: Summary of SAMSS response rates during January 2004 to December 2012.....	95
Table 6.3: Breakdown of SAMSS sample by year and birthplace group participants aged 65 years and over, SAMSS from (calendar years) January 2004 and December 2012*	97

Table 6.4: Socio-demographic profile of Australian, German, Italian and Greek-born South Australians aged 65 years and over, using SAMSS data from 2004 to 2012.....	102
Table 6.5: Chronic condition profile of Australian, German, Italian and Greek-born South Australians aged 65 years and over, using SAMSS data from 2004 to 2012.....	103
Table 6.6: Risk factor profile of Australian, German, Italian and Greek-born South Australians aged 65 years and over, using SAMSS data from 2004 to 2012.....	104
Table 6.7: Multivariate analysis of socio-demographic variables and risk factors in relation to self-rated health and selected chronic conditions, using SAMSS data from 2004 to 2012	107
Table 7.1: Summary of population of interest	112
Table 7.2: Summary of previous SERCIS surveys undertaken in Stage One of the sampling procedure	114
Table 7.3: Summary of Stage Two and Stage Three sampling procedure.....	115
Table 7.4: Summary of the Mental Health Survey sampling procedure	116
Table 7.5: Migrant Health Survey and Mental Health Survey response rates.....	119
Table 7.6: Summary of SAMSS response rates during January 2007 to December 2012.....	119
Table 7.7: Breakdown of the MHS sample by birthplace group participants aged 50-69 years, October 1996 - July 1997	120
Table 7.8: Breakdown of SAMSS sample by year and birthplace group participants aged 60-79 years, SAMSS from January 2007 and December 2012	120
Table 7.9: Unadjusted weighted socio-demographic profile of Australian, German, Italian and Greek-born South Australians aged 50-79 years, using 1996/97 SERCIS data and 2007-2012 SAMSS data	126
Table 7.10: Unadjusted weighted chronic condition profile of Australian, German, Italian and Greek-born South Australians aged 50-79 years, using 1996/97 SERCIS data and 2007-2012 SAMSS data	127
Table 7.11: Unadjusted weighted risk factor profile of Australian, German, Italian and Greek-born South Australians aged 50-79 years, using 1996/97 SERCIS data and 2007-2012 SAMSS data	128
Table 7.12: Weighted and age-sex standardised chronic conditions using SERCIS data from 1996/97 and SAMSS data from 2007 to 2012	130
Table 7.13: Weighted and age-sex standardised health-related risk factors using SERCIS data from 1996/97 and SAMSS data from 2007 to 2012	132
Table 7.14: Marginal probabilities of developing a chronic condition in 1996/97 using SERCIS Data in 2007-2012 using SAMSS data of those aged 50-69 and 60-79	137

Table 8.1: Summary of Study Four sample.....	141
Table 8.2: Study Four Interviewer Summary.....	144
Table 8.3: Summary of Study Four domains included in the questionnaire	146
Table 8.4: Summary Study Four sample characteristics.....	146
Table 8.5: Demographic characteristics of South Australian Greek-born participants aged 60 years and over	152
Table 8.6: Profile of health conditions for Greek-born South Australians aged 60 years and over.....	153
Table 8.7: Profile of mental health issues for Greek-born South Australians aged 60 years and over.....	153
Table 8.8: Health-related risk factor profile for Greek-born South Australians aged 60 years and over.....	154
Table 8.9: Proportion of Greek-born South Australians aged 60 years and over using a range of South Australian health services.....	155
Table 8.10: Proportion of Greek-born South Australians aged 60 years and over reporting on whether there are sufficient Greek speaking medical services available in South Australia.....	156
Table 8.11: Where Greek-born South Australians, aged 60 years and over, get their health advice from and what impacts most on their health decisions	157
Table 8.12: Caring preferences if Greek-born South Australians aged 60 years and over were to have a health problem which made them dependent on others	158
Table 8.13: Proportion of Greek-born respondents, aged 60 years and over, who believed they would be cared for in the way they liked in the future.....	158
Table 8.14: Proportion of Greek-born respondents, aged 60 years and over, who believed they would have been cared for better if you had stayed in Greece	159
Table 8.15: Proportion of Greek-born South Australians aged 60 years and over who agreed or disagreed that older people should be able to depend on their adult children for the help they need	159
Table 8.16: Proportion of Greek-born South Australians aged 60 years and over who agreed or disagreed with being able to seek support from family or friends when sick.....	161
Table 8.17: Proportion of Greek-born South Australians receiving support from children and children-in-law.....	162
Table 8.18: Proportion of Greek-born South Australians, aged 60 years and over who receive adequate information required for their day-to-day life	162

Table 8.19: Main language spoken at home and the English proficiency of Greek-born South Australians aged 60 years and over	163
Table 8.20: Proportion and frequency of which Greek-born South Australians, aged 60 years and over, requiring an interpreter	164

LIST OF APPENDIX TABLES

A.1: Demographic questions asked of participants and coding of variables for 1989, 2001 and 2007/08 National Health Survey Variables of Interest.....	191
A.2: Risk factor questions asked of participants and coding of variables for 1989, 2001 and 2007/08 National Health Survey	192
A.3: Long-Term Conditions asked of participants and coding of variables for 1989/90, 2001 and 2007/08 National Health Survey	193
B.1: Concordance between country of birth classification structures	194
D.1: Demographic questions asked of SAMSS participants including how variables were derived.....	246
D.2: Health and mental health questions asked of SAMSS participants including coding of variables	249
D.3: Health-related behaviours asked of SAMSS participants including coding of variables	253
F.1: Demographic questions asked of survey participants including how variables were derived.....	256
F.2: Health conditions asked of survey participants including how variables were derived.....	258
F.3: Health-related behaviours asked of survey participants including how variables were derived.....	260
I.1: Demographic information of South Australian Greeks, who arrived in Australia between 1945-1975, 60 years and over, Census 2011	290
I.2: Socio-Demographic information of South Australian Greeks, who arrived in Australia between 1945-1975, 60 years and over, Census 2011.....	291
I.3: Proportion of South Australian Greeks in South Australian Local Government Area's (LGAs), who arrived in Australia between 1945-1975, 60 years and over, Census 2011	292

ABSTRACT

It is commonly observed that immigrants display superior health upon arrival, and for some years following settlement, in their adopted country compared to their native-born counterparts. However, with increased years since migration there is a propensity for this health advantage to dissipate and for health trajectories of some migrant groups to reach, and in some cases fall below, the host national averages. This research aimed to explore the health status of older European-born immigrants as the burden and magnitude of disease outcomes in later life is unclear. This is due partly to a large body of dated literature relying on mortality and hospitalisation data to describe the health status of migrant populations and a historical trend to aggregate country of birth (COB) into large groupings ignoring inherent differences within and between birthplace groups.

Using national Australian data, the health status of European and Australian-born groups were explored to provide a descriptive assessment of health outcomes at three points in time. This study illustrated that although both European and Australian-born groups displayed increases in the prevalence of selected chronic conditions, the European-born generally had better health and health-related outcomes. There was also some evidence to suggest that a health advantage may exist for European-born migrants in relation to some chronic conditions.

Cross-sectional data collected from the South Australian Monitoring and Surveillance System (SAMSS) explored differences in chronic conditions and health-related risk factors between selected birthplaces (including those born in Australia, Germany, Italy and Greece). This study demonstrated that significant differences exist in the health profiles of birthplace groups, where Italian and Greeks experience higher prevalence of some chronic conditions and risk factors compared to the Australian and German-born.

Pooled data collected via SAMSS and the Migrant Health Survey described and compared the demographic, health and health-related characteristics of selected birthplace groups at two points in time and examined the magnitude of change in disease outcomes relative to their Australian-born counterparts. Overall, the results indicated that the Greek and Italian-born had poorer health outcomes over time and displayed the largest change in their health and health-related outcomes. These findings suggested there is a considerable divergence in the long-term health outcomes experienced by selected COB groups and highlighted the value in undertaking birthplace specific analysis.

Semi-structured interviews with Greek-born South Australians aged 60 years and over was undertaken to gain a deeper understanding of the health experiences and health-related outcomes of ageing Greek-born South Australians. The findings from this study indicated that 1) health service utilisation may not be an adequate indicator to explain the health differentials experienced by this cohort; 2) children may be Greek-born older migrants most important social resource and act as a vehicle for gaining access to health advice and the support they need in their day-to-day lives; and 3) life-course histories are pivotal in explaining health in later life.

This research allowed for the comparisons of demographic, health and health-related outcomes to be analysed over time and across birthplace groups, providing additional information and insight into the diversity of outcomes within and between birthplace groups and adding depth to existing knowledge around migrant health outcomes.

DECLARATION

I certify that this work contains no material which has been accepted for the award of any other degree or diploma in my name, in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. In addition, I certify that no part of this work will, in the future, be used in a submission in my name, for any other degree or diploma in any university or other tertiary institution without the prior approval of the University of Adelaide and where applicable, any partner institution responsible for the joint-award of this degree.

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ABBREVIATIONS

ABS	Australian Bureau of Statistics
AIHW	Australian Institute of Health and Welfare
ASCCSS	Australian Standard Classification of Countries for Social Statistics
ASGC	Australian Standard Geographic Classification
ASGS	Australian Statistical Geographic Standard
BMI	Body Mass Index
CAI	Computer Assisted Interviewing
CALD	Culturally and Linguistically Diverse
CATI	Computer Assisted Telephone Interviewing
CDC	Consumer Directed Care
CDs	Census Collection Districts
COB	Country of Birth
COPD	Chronic Obstructive Pulmonary Disease
CURF	Confidentialised Unit Record Files
CVD	Cardiovascular Disease
DIAC	Department of Immigration and Citizenship
ESB	English Speaking Background
EWP	Electronic White Pages
GHQ-28	General Health Questionnaire (28)
GOCSA	Greek Orthodox Community of South Australia
GWC	Greek Welfare Centre
HME	Health Migrant Effect
HILDA	Household Income and Labour Dynamics in Australia
HREC	Human Research Ethics Committee
IPND	Integrated Public Number Database
K10	Kessler Psychological Distress Scale
LGAs	Local Government Areas

Mental HS	Mental Health Survey
MHS	Combined data from the Migrant Health Survey and the Mental Health Survey
Migrant HS	Migrant Health Survey
NES	Non English Speaking
NESB	Non English Speaking Background
NHMRC	National Health and Medical Research Council
NHS	National Health Survey
NSW	New South Wales
post-WWII	post-World War II
PROS	Population Research and Outcome Studies
QoL	Quality of Life
RADL	Remote Access Data Laboratory
SACC	Standard Australian Classification of Countries
SAHC	South Australian Health Commission
SA Health	Department of South Australian Health
SAMSS	South Australian Monitoring and Surveillance System
SAS	Statistical Analysis System
SERCIS	Social Environment Risk Context Information System
SES	Socio-economic Status
SPSS	Statistical Package for the Social Sciences
STATA	Statistics and Data
UoA	University of Adelaide
UCLA	University of California, Los Angeles
VoIP	Voice over Internet Protocol
VTPU	Victorian Transcultural Psychiatry Unit
WAP	White Australia Policy
WHO	World Health Organisation
WWII	World War II