QUESTION TAKEN ON NOTICE

BUDGET ESTIMATES HEARING: 21-22 MAY 2012

IMMIGRATION AND CITIZENSHIP PORTFOLIO

(BE12/0227) Program 1.1: Visa and Migration

Senator Boyce asked:

As a result of a Freedom of Information application abridged copies of discussions between DOHA and the Department of Immigration and Citizenship have just been released. What health monitoring occurs in regard to migrants, refugees or asylum seekers in regard to tuberculosis?

Answer.

Almost all applicants for visas to Australia need to meet the health requirement set out in Australian migration law. An applicant with active infectious Tuberculosis will not meet the health requirement as they would be considered to be a public health risk.

Applicants show they are not a public health risk by filling out a declaration. Some applicants may also be required to complete a chest x-ray. The Department takes a risk based approach to chest x-rays based on:

- the applicant's health declaration
- the Tuberculosis prevalence rates in the country the applicant is from or has spent more than three months
- what the applicant intends to do in Australia, and whether this activity may put them at higher risk of developing, contracting or spreading Tuberculosis.

If an applicant (including a refugee applicant) is found to have inactive (or non-infectious) Tuberculosis they may be found to meet the health requirement only if they undertake to contact and attend any necessary appointments with a State or Territory health authority.

If an onshore protection visa applicant (including an asylum seeker) is found to have active or inactive Tuberculosis they will be referred to appropriate health services. A health condition will not prevent the grant of a protection visa.

State and territory health authorities are responsible for the detection and management of TB in the Australian community, including following migration. States and territories report all cases of tuberculosis (TB) to the National Notifiable Diseases Surveillance System. Further enhanced data, including residency status, are collected by jurisdictional TB services. These data are reported annually and describe trends in TB notifications, including in susceptible populations.