

Submission No. 99

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BY: Migration

Joint Standing Committee on
Migration

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30 Dec 09

Dear Committee,

BRIEF SUBMISSION ON MIGRANTS WITH OF HIV/AIDS DISABILITY

As a Public Health physician I believe that the committee should assess the question from two perspectives i.e. risk to general community health and cost to the health system.

Disabilities can be minor or major depending on the level of impairment and cost of care. Refugees and other migrants with HIV/AIDS will ultimately be some of the most costly patients to care for as they have a disability that is potentially infectious, unlike cerebral palsy, amputated limbs etc which are confined to the patient only.

The current annual cost of medications (Highly Active Anti Retro-viral Therapy) for each HIV/AIDS patients is about \$25,000 per year – tax-payer funded from the health budget. Currently there are 1000 newly diagnosed HIV patients per year.

Despite being on HAART treatment patients are still infectious, as recently revealed in overseas studies, and thus can potentially infect others if unsafe sexual practices are engaged in.

The predicted overall life-time cost of care for HIV/AIDS patients, if disability pensions and hospital in-patient care are factored into the equation, is between \$ 1 – 2 million dollars per patient.

HIV/AIDS is an expensive disability unlike many others.

I do not believe that it is reasonable, nor socio-financially responsible, to accept HIV infected refugees or migrants in consideration of the possibility of infectious transmission and the significant financial burden placed upon present and future tax-payers of this country.

Yours sincerely,

D. McKenzie