

## **QUESTION TAKEN ON NOTICE**

### **BUDGET ESTIMATES HEARING: 21-22 MAY 2012**

#### **IMMIGRATION AND CITIZENSHIP PORTFOLIO**

#### **(BE12/0226) 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. This document also goes on to say the following and I quote: 'It is noted that there are currently at least two outstanding requests for advice which have been on hand for a significant period. These include: - Tuberculosis and illegal fisherpersons (requested 19 August 2008) - DoHA is awaiting the a provision of a discussion paper from DIAC before it provides additional advice'. Has this issue been resolved, what advice was sought and what advice was given?

*Answer:*

Following a workshop in 2006, hosted by the Department of Immigration and Citizenship (the Department), the National Tuberculosis Advisory Committee (NTAC) drafted a report on the Procedure for Health Assessments of Unauthorised Fisherpersons Apprehended off the North Coast of Australia. Endorsement by Communicable Diseases Network Australia was delayed pending advice from the Department.

In December 2007, the Department advised the Department of Health and Ageing (DoHA) that the requirements of the Migration Act 1958 (the Act) would not support the proposal to continue the detention of Illegal Foreign Fisher Persons (IFF) in Australia for a full course of Tuberculosis (TB) treatment and sought to reflect this in the draft procedure.

Under Section 198(1) of the Act, the Department must return an IFF to their home country as soon as practicable. Where the Department receives medical advice that the health status of an IFF is not a barrier to return, the Department is legally obliged to progress return arrangements.

The Department supports all IFFs with TB treatment, including making arrangements to ensure they receive treatment on return home and in some cases being supplied with an amount of TB medication prior to return.

In February 2009, NTAC reconfirmed its position that ideally IFFs found to have TB should be allowed to remain in Australia for a full course of TB treatment when circumstances are such that curative treatment elsewhere is not possible. NTAC recognised that there will be visa and legal issues in these cases which would also be relevant to the approach taken.

In light of existing arrangements to support IFFs with TB treatment, and the legal obligations on the Department, further work on the draft Procedure has not been necessary.