

Kin Advocacy 2023 Review of Australia's Visa Significant Cost Threshold (SCT) (Review) Submission

Kin Advocacy for Diverse Communities November 2023

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Introduction

About Kin Disability Advocacy (formerly EDAC):

Kin Disability Advocacy formerly (EDAC) is Western Australia's peak not-for-profit organisation advocating for the rights of people with a disability, from a Culturally and Linguistically Diverse (CALD) background and their family and carers.

Kin Disability Advocacy is a member of the National Ethnic Disability Alliance (NEDA).

Kin Disability Advocacy currently receives recurrent funding from the Australian Department of Social Services (DSS) and the WA Department of Communities Disability Services (DS).

Kin Disability Advocacy delivers individual and systemic advocacy services in the metropolitan, regional, and remote areas of WA. This includes state-wide CALD advocacy services and individual generalist advocacy to WA's North-West region (Kimberley and Pilbara).

Additional project funding is used to deliver human rights-based self-advocacy training for people with disability and their families/carers.

Kin Disability Advocacy runs DSS funded Digital Communication Project where issues of disability and ethnicity are discussed in terms of new and existing services, policies, legislation, etc.

Kin Disability Advocacy also generates extra income from its cultural competency training for the disability services sector. This training is delivered in line with the National Disability Services Standards.

Kin Advocacy is grateful for the opportunity to provide this Submission to the Department of Home Affairs (Department) in relation to the 2023 Review of Australia's visa Significant Cost Threshold (SCT) (Review).

This Submission addresses the Terms of Reference set out for the Review:

- How the Australian visa Significant Cost Threshold is calculated.
- How “significant” is defined in the Australian visa Significant Cost Threshold.
- The implications of special education as a costing policy definition of “community service”.
- The impact of the migration health requirement on non-citizen children with a disability born in Australia to people on temporary visas.
- Any other matters relating to the Migration Health Framework

How the Australian visa Significant Health Cost Threshold is calculated

The Australian visa Significant Cost Threshold is a critical aspect of the health requirement for visa applicants, where 'significant' is defined in terms of the financial impact on the Australian healthcare system and community services. Understanding this threshold involves examining various aspects.

The Significant Cost Threshold is calculated based on an estimation of potential healthcare and community service costs that a visa applicant might incur. This figure is periodically reviewed to reflect current economic conditions and healthcare costs. The MHR “significant cost Threshold” is calculated by adding health care which includes (Public and private hospitals, Primary health care such as medical services, pharmaceuticals, community and public health, and Referred medical services) combined with the Welfare social service and educational payments (AIHW, Welfare Expenditure, 2021-22) over a ten-year period. Therefore, in this consideration, the amount expended annually for every Australian resident taking into account both health and community or welfare costs, is about \$9,536 + \$8,243, or \$17,599 per annum. This calculated over ten years amounts to \$175,990, not taking into account weighted projections of costs.

Fallacies and Responses:

Fallacy: A prevalent fallacy is the assumption that all individuals with disabilities will invariably be a financial burden.

A common misconception is that all people with disabilities who apply for permanency are inevitably a financial burden on Australia. This assumption ignores the fact that people with disabilities can make an economic and social contribution to society. Evidence shows that people with disabilities benefit more socio-economically and psychologically from paid employment than people without disabilities (Devine et al., 2021). Similarly, increasing employment opportunities for people with disabilities can improve their well-being and reduce healthcare costs (Santilli et al., 2023). In addition, hiring people with disabilities can also benefit employers (Hernandez and McDonald, 2010; Kalargyrou, 2014; Fisher and Connelly, 2020; Gonzalez, 2021).

This assumption also fails to recognise the systemic barriers and discrimination faced by disabled people that contribute to their exclusion from normal human activities and full citizenship. Disabled people are often excluded from employment opportunities, leading to higher levels of poverty and unequal wages. High poverty levels, unequal wages, poor access to quality education, and poor access to housing and sanitation further hinder them (Piramanayagam & Seal, 2021). This fallacy not only perpetuates social isolation and discrimination but also prevents the potential economic and social contribution of people with disabilities. This assumption also cannot recognise the bidirectional relationship

between disability and poverty. Disability leads to more poverty, but poverty also increases the risk of disability.

We do understand it is important to protect public health, but Kin Advocacy contends that the MHR and SCT currently discriminate against individuals with disability or health issues based on outmoded policy assumptions and settings around “cost to the community” which are potentially at odds with the internationally recognised human rights and capacities of individuals with disabilities or health conditions.

Response: This generalisation is misleading. Many individuals with disabilities require minimal additional healthcare and can contribute significantly to society, both economically and socially.

This generalisation is misleading as it overlooks the diverse abilities and contributions of individuals with disabilities in Australia (Stewart & Spurgeon, 2019)(Fang et al., 2021). Many individuals with disabilities require minimal additional healthcare and can contribute significantly to society, both economically and socially in Australia. For example, there are countless examples of individuals with disabilities who have excelled in their chosen fields and made important contributions to various industries (Svendby et al., 2018). Individuals with disabilities can contribute to society through volunteer work, advocacy, and community engagement. "The generalisation cannot recognise the progress made by the Australian government in promoting disability empowerment and inclusion in mainstream society. This can be seen through initiatives such as the provision of disability-friendly public transport, open employment opportunities, and inclusive education. Overall, it is important to recognise and celebrate the unique abilities and contributions of individuals with disabilities in Australia, rather than perpetuating negative stereotypes and limiting beliefs about their capabilities." This generalisation is misleading as it overlooks the diverse abilities and contributions of individuals with disabilities in Australia (Temple et al., 2018). Many individuals with disabilities require minimal additional healthcare and can contribute significantly to society, both economically and socially in Australia. In today's society, individuals with disabilities are often underestimated and face numerous barriers that hinder their full participation and contribution to society. However, it is crucial to acknowledge that individuals with disabilities possess a wide range of skills, talents, and potential that can greatly benefit society.

Impact and Response to Impact:

Impact: The threshold can lead to visa denials for individuals with disabilities, potentially causing family separations and limiting access to opportunities.

The visa application process can be a challenging and stressful experience, especially for individuals with disabilities. The threshold for visa approvals in Australia can often lead to denials for individuals with disabilities, creating a barrier that hinders their ability to migrate and potentially causing family separations. These visa restrictions can limit

Australia's access to opportunities, such as education, employment, and healthcare. This can have severe consequences on the mental health and overall well-being of individuals with disabilities, as they may feel marginalised, insecure, and trapped in a cycle of exclusion and limited prospects (Dew et al., 2022). These visa denials based on disability can perpetuate a systemic inequality that already exists for individuals with disabilities in Australia. These visa denials can compound the distress and trauma experienced by individuals with disabilities, exacerbating feelings of hopelessness and potentially leading to adverse mental health outcomes such as increased rates of depression, anxiety, and even suicide attempts (Selvarajah et al., 2020). The threshold for visa denials based on disabilities in Australia can have detrimental effects on individuals and their families.

Response: Advocacy groups and policymakers are urged to consider individual circumstances and potential contributions rather than making decisions based solely on projected healthcare costs.

This approach recognises each person's unique needs and abilities and acknowledges that healthcare decisions should not be driven by financial considerations alone. By embracing a patient-centred approach to cost considerations, advocacy groups and policymakers can prioritise equitable access to healthcare and ensure that decisions are based on comprehensive and holistic assessments of individuals' health needs.

This patient-centred approach requires policymakers to acknowledge that perspectives differ between the patient and the healthcare system and that decisions should consider lower costs to hospitals and patient outcomes beyond the hospital stay (Raizman et al., 2020). Incorporating the input of patients and their families and utilising an ethical framework for decision-making can help guide policymakers in making decisions that prioritise individual well-being and overall healthcare equity. By shifting towards a patient-centred approach, policymakers align with the global trend of empowering patients and moving from medical paternalism to shared decision-making (Vedasto et al., 2020). This shift acknowledges the importance of patient input and emphasises the need for a fair balance of power and information sharing between patients and healthcare providers.

Worst and Best Case Scenarios:

Worst Case: Unfair visa rejections for people with disabilities, leading to negative social and personal consequences.

Visa rejections based on discrimination against people with disabilities can have severe consequences, both socially and personally. These rejections can perpetuate financial hardship and social exclusion for individuals with disabilities, creating a burden not only on the individual but also on society (Falk et al., 2014). Source: disabledpeople.org.uk, disabilityhorizons.com, researchgate.net, springer.com. When visa rejections are unfairly targeted towards individuals with disabilities, it reinforces negative societal beliefs and barriers that hinder their development. This can lead to discrimination, devaluation,

exclusion, segregation, and stigmatization of individuals with disabilities (Pezdek, 2018). Additionally, rejecting visas based on disability can cause limited access to healthcare services, as individuals may fear that seeking medical treatment could jeopardize their immigration status (Cubrich et al., 2022).

This can lead to individuals with disabilities avoiding necessary medical care, which could have negative consequences for their health and well-being. The unfair denial of visas for individuals with disabilities not only perpetuates discrimination and exclusion but also contributes to a cycle of poverty and limited opportunities. Individuals with disabilities already face significant challenges in areas such as education, employment, and housing vulnerability. These visa rejections only marginalise further and disadvantage individuals with disabilities, denying them equal opportunities and hindering their ability to thrive in society.

Best Case: recommend policy reform that allows for a more inclusive and individualised assessment, recognising the diverse capabilities of people with disabilities.

Policy reform is crucial in ensuring that migration policies are inclusive and individualised, considering the diverse capabilities of people with disabilities who wish to migrate to Australia. This reform should be based on international and national legislation on rights, eliminating discrimination, as well as the recognition of the importance of accessibility, inclusion, and inter-agency coordination. This reform should prioritize the provision of evidence-based services that enable individuals with disabilities to achieve their personal goals and enjoy a quality of life equal to that of individuals without disabilities. It is essential to learn from the experiences of other countries, such as New Zealand, where strategic direction has focused on giving people with disabilities more choice and control over their lives, resulting in improved outcomes (Dowse et al., 2019).

This inclusive migration policy reform should also address the specific needs of people with intellectual disabilities, as current commitment and capability in practice are extremely limited in this regard. By implementing comprehensive policy reforms, Australia can ensure that the disability-related needs of displaced persons from diverse backgrounds are not neglected, reducing marginalization and exclusion. This policy reform should align with Australia's commitment to the United Nations Convention on the Rights of Persons with Disabilities and the National Disability Strategy. This policy reform would entail lifting restrictions on granting permanent protection visas to refugees with disabilities and providing support and accommodations for individuals with disabilities to (Yu, 2013).

Confusion Between Disability and Health Costs:

Issue: There is often a conflation of disability with high healthcare costs.

This conflation perpetuates discriminatory practices and unjustly denies visa applications to families with children who have disabilities. This conflation also ignores the evidence that immigrants with disabilities have lower healthcare expenditures compared to

domestically born individuals with disabilities (Cottingham et al., 2023). This conflation cannot recognise the systemic barriers and disadvantages that individuals with disabilities face in accessing healthcare and other socio-economic opportunities in Australia. As a result, individuals with disabilities are disproportionately marginalised and excluded from society. The concentration of people with disabilities in less liveable areas within significant cities further exacerbates these socio-economic disparities. The lack of data and formal procedures to identify migrants with disabilities in Australia hinders their access to necessary assistance, support, and healthcare services (Tofani et al., 2022).

Clarification: Disability does not automatically equate to high medical expenses. Many people with disabilities lead healthy lives and require minimal healthcare support.

This is supported by evidence that suggests individuals with disabilities, both immigrants and domestic-born, may not have significantly higher healthcare expenditures compared to those without disabilities (Cottingham et al., 2023). In fact, immigrants with disabilities may pay more for healthcare than immigrants without disabilities, but their expenses still fall below those of domestically born individuals with disabilities. They may also have higher rates of employment compared to their domestic-born counterparts. However, it is essential to note that despite these positives, individuals with disabilities, including immigrants, still face sociocultural pressures as any other immigrant. In addition to financial factors, individuals with disabilities in Australia may also face barriers to accessing healthcare services. These barriers can include lack of health insurance, financial difficulties, language barriers, cultural differences in views about health, and discrimination based on race or accent (Lindsay et al., 2016). Furthermore, research shows that immigrants, particularly those from non-Western countries, are more likely to belong to low socioeconomic position groups compared to local-born individuals (Lokdam et al., 2016).

This makes immigrants, especially women, a particularly vulnerable group in terms of access to high-quality healthcare and engagement in health promotion activities. Studies have shown that access to healthcare for immigrants is hindered by barriers such as language and communication difficulties, mistrust of the healthcare system, different expectations from healthcare providers, and prejudicial behaviour from healthcare providers.

Human Rights and Social Justice Implications:

Human Rights Concerns: The threshold's application in Australian migration can contravene principles of non-discrimination and the rights of persons with disabilities.

The threshold's application in Australian migration policies can have detrimental effects on the principles of non-discrimination and the rights of individuals with disabilities. According to the sources, the disability-related needs of displaced persons globally are often neglected, leading to increased marginalisation and exclusion (Dew et al., 2022). This is particularly problematic considering that Australia has ratified the United Nations

Convention on the Rights of Persons with Disabilities and has previously acknowledged the need to eliminate ableist discrimination in immigration decisions. Despite this, the exemption of the Migration Act from relevant provisions of the Disability Discrimination Act is inconsistent with Australia's international obligations and should be repealed (Yu, 2013). Advocacy for policy change towards the elimination of ableist discrimination in Australian immigration decisions should be a part of social work disability policy practice, as Australian immigration policy falls within the domain of social work practice .

In addition, the discrimination faced by individuals with disabilities extends to employment as well. Australia's Disability Discrimination Act aims to prevent exclusion from employment based on disability (Hemphill & Kulik, 2015). However, employers often unconsciously avoid hiring people with disabilities based on inaccurate negative stereotypes and beliefs about their future work performance. These discriminatory practices not only perpetuate barriers to education, employment, housing, and financial wellbeing for individuals with disabilities in Australia but also undermine trust in health professionals and create perceptions of discrimination in healthcare settings (Temple et al., 2018). Kin Advocacy generally consider that the application of the threshold in Australian migration policies infringe principles of non-discrimination and the rights of individuals with disabilities to migrate and have fair go.

Kin Advocacy strongly advocate for fairer visa policies to ensure that individuals are not disadvantaged because of their health status, aligning with broader goals of equality and social justice.

People with disabilities should not be disadvantaged because of their health or disability status when migrating to Australia. These policies should prioritise including and accommodating individuals with disabilities, recognising their rights and promoting their full participation in society. These visa policies should align with international and national legislation on rights, discrimination, and disability.

The disability-related needs of displaced persons must be acknowledged and addressed, as neglecting these needs leads to further marginalization and exclusion (Dew et al., 2022).

In 2012, Australia made progress by lifting restrictions on granting permanent protection visas to refugees with disabilities following the ratification of the United Nations Convention on the Rights of Persons with Disabilities and the government's inquiry into migration treatment of disability. However, there is still work to ensure that all individuals with disabilities are treated fairly and equitably in the visa application process.

Net Cost-Benefit Impacts:

Economic Considerations: While the threshold aims to mitigate healthcare costs, this approach can overlook the potential economic contributions of immigrants with disabilities, such as their participation in the workforce and consumer spending.

Immigrants and families with disabilities can play a crucial role in the economy by contributing to the workforce and consumer spending. Given that health service delivery internationally is increasingly impacted by economic rationalism, questions relating to the cost-utility and effectiveness of interventions are also increasingly important to researchers, service providers, and policymakers (Afsharnejad et al., 2019). Furthermore, the deleterious social and economic outcomes faced by those living with disabilities in Australia highlight the need to address barriers to healthcare access and support their inclusion in the workforce and society. Utilising a threshold approach without considering the economic contributions of immigrants and families with disabilities can cause an incomplete and potentially detrimental healthcare policy (Bull et al., 2022).

Societal Benefits: Beyond economic factors, including people with disabilities can enrich cultural diversity, promote inclusivity, and drive social innovation.

Inclusion and disability are not just economic matters but also significant social and cultural societal benefits for Australia. Including people with disabilities in all aspects of society promotes cultural diversity and fosters a sense of inclusivity. Including people with disabilities can inspire social innovation, as their unique perspectives and experiences can drive creative solutions to societal challenges. By embracing and incorporating individuals with disabilities, Australia can celebrate its diverse population and create a more inclusive society where everyone has equal opportunities and representation.

Despite protections against disability discrimination afforded in legislation and international accords in Australia, there is significant evidence based on the deleterious social and economic outcomes faced by those living with a disability (Temple et al., 2018).

Long-Term View: A more inclusive policy could yield long-term societal benefits, outweighing the initial healthcare costs. This perspective aligns with a broader understanding of social and economic sustainability.

In today's interconnected and diverse society, the importance of inclusive policy cannot be overstated. By ensuring that policy decisions are based on accurate knowledge and adherence to public health recommendations, we can effectively address the distribution of risks and benefits within our society, ultimately leading to long-term societal benefits.

This inclusive approach recognises the impact of social inequalities on population health and seeks to reduce disparities in access to healthcare and other resources. By developing appropriate indicators and identifying vulnerable population groups, inclusive health policies aim to sensitize these populations to the health benefits of programmes, extend service coverage, and reduce barriers to access (MacLachlan et al., 2012).

This not only promotes equity and social justice but also has the potential to improve health outcomes for vulnerable groups, such as persons with disabilities. By including persons with disabilities in the design and implementation of health policies and programs, we can ensure that their needs are met and that they have a legitimate and feasible role in shaping the policies that directly impact their lives (Dassah et al., 2022).

Furthermore, inclusive policy processes should be prioritised to ensure that the needs and demands of vulnerable groups are accurately reflected in policy documents. This approach acknowledges the ethical imperative of including vulnerable groups in health policy. It recognises that promoting inclusion and equity requires a comprehensive understanding of the social determinants of health and the experiences of marginalised populations.

Kin Advocacy therefore views that the calculation and application of the Australian visa Significant Cost Threshold must be balanced against the potential economic, social, and human rights implications. A more nuanced and inclusive approach could lead to better outcomes for individuals with disabilities and society, recognising all individuals' diverse contributions and needs.

Implications of Special Education as a Costing Policy Definition of “Community Service”

Education support is where many applicants with a child with disability hit a brick wall. Whereas the cost of both “regular” education and English as a second language is deemed a community investment, “special” education support is considered a cost.

Any child assessed as requiring such support for more than two years will fail the migration health requirement.

We strongly advocate that this fresh review to address this inequity for families living in Australia on temporary visas who then have a child born with a disability or health issue.

Parents with a member child with disability are subsequently refused a permanent visa for which they would have been otherwise eligible. Thus, the process is protracted and painful and emotionally draining for such parents.

To imagine your family member or a child being seen as burden in the very community that you actively contribute is very unfortunate.

The implications of special education as a costing policy, particularly in the context of defining 'community service', are multifaceted.

This subject relates on how special education is funded and perceived and how it intersects with broader societal and policy issues.

Special Education as a Costing Policy:

Special education often requires additional resources compared to general education. This includes specialised staff, equipment, and tailored educational programs. As a costing policy, it reflects a commitment to providing equitable educational opportunities for students with disabilities.

This ensures that students with disabilities have the requisite support to flourish academically and socially. In the absence of these resources, students with disabilities

may encounter obstacles and difficulties in attaining a fair education. It is possible that they do not have equal chances to partake in the curriculum, obtain suitable instructional materials, or receive necessary accommodations and support. This can result in discrepancies in educational outcomes and impede the overall inclusivity and success of students belonging to ethnically diverse communities with disabilities. The importance of achieving equity in special education cannot be overstated when addressing these disparities. Through equitable resources, educational institutions can effectively cater to the distinct requirements of students from ethnically diverse communities with disabilities. This can foster a more inclusive and supportive learning environment that fosters success and achievement for all students, irrespective of their background or disability. Implementing equitable resource allocation can also effectively address the specific needs of disadvantaged students in ethnically diverse communities (Assari et al., 2021). Ensuring equitable resource allocation in special education is vital for providing equal access to necessary support and opportunities for academic success to all students, irrespective of their ethnic background or disability (Improving educational equity in Romania, 2020). The fair distribution of resources in special education acknowledges the intersectionality of students' identities and experiences. It acknowledges the potential distinct challenges faced by students from ethnically diverse communities with disabilities, resulting from the combination of their disability and cultural background which also acknowledges and attends to the multiple dimensions of students' identities, ensuring that educational requirements are met in a culturally responsive and inclusive manner.

Definition of 'Community Service':

In this context, 'community service' can be understood as the support services provided to individuals with disabilities to ensure their full participation in society. This includes, but is not limited to, educational services, healthcare, occupational therapy, and social services.

Common Fallacies and Responses:

Fallacy: One common misconception is that special education is excessively costly and burdens the education system.

One common misconception is that special education is excessively costly and burdens the education system, especially for ethnically diverse communities in Australia.

This misconception arises from a lack of understanding about special education's true benefits and importance in promoting inclusivity and providing tailored support for students with diverse learning needs. Source: This perspective contrasts to one in which special education is provided because of something unique to the individual student (Shinn et al., 1993).

However, not all general education environments have the same resources to accommodate students with diverse learning needs, and some argue persuasively that

special education referral and placement practices are tied closely to these resources. With fewer general education resources to accommodate diverse learning needs, one would expect more special education programs. Curbing the increase in the number of pupils referred to special schools, however, is not accessible because of the substantial numbers of both regular and special education teachers and parents of students now in special education who question inclusion (Pijl, 2015). These stakeholders may believe that segregating students with special needs in special settings would provide them with more effective differentiated and individualised teaching and counselling. Globally, educators are questioning the efficiency and equity of resources to support special education (Carrington et al., 2022).

‘Funding for students with disabilities accounts for 12–20% of the overall education budget in most countries, and special education costs more per student than regular education and appears to be escalating’. However, it is important to note that the cost of special education should not be seen as a burden but rather as an investment in providing equal opportunities and ensuring that every student has access to a quality education.

Response: While special education can be resource-intensive, it is a necessary investment in the potential of all students. Inclusive education benefits not just students with special needs but enriches the learning environment for all.

Inclusive education is a vital investment in the potential of all students, including those with special needs. It is an approach to education that recognises the diverse needs of all learners and creates a learning environment where students have equal opportunities to succeed (Munala et al., 2023). By providing appropriate support, accommodations, and differentiated instruction techniques, inclusive education ensures that every student can access a meaningful and challenging curriculum (Zhang & Ting, 2011). Inclusive education goes beyond benefiting students with special needs. It enriches the learning environment for all students by fostering a culture of acceptance, belonging, and diversity within the classroom (Munala et al., 2023). Through inclusive education, students from ethnically diverse communities can also learn and grow together, promoting understanding, empathy, and a sense of unity among all Australians (Ahmed et al., 2022).

Impact of the Policy and Responses:

Impact: The way special education is funded and managed can significantly impact the quality of education and support services provided to students with disabilities.

The way special education is funded and managed in Australia can significantly impact the quality of education and support services provided to students with disabilities from ethnically diverse backgrounds, especially those with temporary visa status. The current funding and management system may not adequately safeguard the rights of children with special needs. The limited funding, resourcing, and time available for mainstream teachers can hamper their ability to cater to the individual needs of students with

disabilities, further complicating the education process for students from diverse backgrounds (Vlcek et al., 2020).

These challenges can contribute to mainstream educators feeling overwhelmed by the diverse needs of their students with disabilities, potentially leading to trial-and-error approaches in supporting these students.

This may cause inconsistent and suboptimal support for students from diverse backgrounds, hindering their educational progress and overall well-being. The funding formula for special education in Australia may not effectively address the needs of students from ethnically diverse backgrounds, particularly those on temporary visa status. As a result, there is a need for increased investment in recruiting and supporting culturally and linguistically diverse special education teachers to ensure equitable access to quality education for students with disabilities from diverse backgrounds in Australia (Lo & Wu, 2009).

Response: Advocacy for adequate funding, policy reforms, and increased awareness can help ensure that special education is appropriately resourced and managed.

Advocacy is crucial in ensuring that special education is adequately funded, policies are reformed, and increased awareness is generated. By advocating for these changes, parents and advocates can help ensure that children from ethnically diverse backgrounds, especially those on temporary visas, receive the support and resources they need to thrive in the special education system.

Source: The literature on parental advocacy indicates that parents from diverse backgrounds are often perceived by school personnel to be passive and uninvolved in the special education process (Wang et al., 2004).

However, it is essential to recognise that advocating for special education resources for children from diverse backgrounds, particularly those on temporary visas, may come with unique challenges related to language barriers, cultural differences, and limited access to social and economic resources. Advocates and organizations can work towards overcoming these challenges by providing culturally sensitive support language assistance, and educating parents about their rights and the special education services available to their children.

Worst and Best Case Scenarios:

Worst Case: Inadequate funding or poor management of special education resources can lead to subpar educational outcomes for students with disabilities, further marginalising them.

Inadequate funding or poor management of special education resources can lead to subpar educational outcomes for students with disabilities from ethnically diverse backgrounds and those on temporary visas, further marginalizing them. Inadequate funding or poor management of special education resources can lead to subpar

educational outcomes for students with disabilities from ethnically diverse backgrounds and those on temporary visas, further perpetuating educational disparities and marginalizing these students even more@.

Insufficient allocation of funds or ineffective management of special education resources can result in below-average educational achievements for students with disabilities from diverse ethnic backgrounds and those on temporary visas, thereby amplifying disparities and further marginalizing them within the education system. The combination of inadequate funding and ineffective management of special education resources can result in substandard educational outcomes for students with disabilities from ethnically diverse backgrounds and those on temporary visas, thereby perpetuating a cycle of disadvantage and further marginalizing these students within the education system. When there is a lack of adequate funding or ineffective management of special education resources, the educational outcomes for students with disabilities from diverse ethnic backgrounds and those on temporary visas can suffer, leading to the continuation of unequal treatment and exclusion of these students within the special education system. The lack of adequate funding or ineffective management of special education resources can lead to inadequate educational outcomes for students with disabilities from diverse ethnic backgrounds and those on temporary visas. This further widens disparities and adds to their ongoing marginalization within the education system.

Best Case: Well-funded and effectively managed special education programs can lead to excellent educational outcomes, preparing students with disabilities for successful futures.

Well-funded and effectively managed special education programs can provide excellent educational outcomes, preparing students with disabilities for successful futures in Australia. These programs provide necessary resources, support, and accommodations to ensure that students with disabilities have equal access to quality education. They also promote inclusion and diversity within the education system, fostering a positive learning environment for all students. By addressing the unique needs of students with disabilities, special education programs can tailor instruction and support to individual strengths and challenges.

Besides academic achievement, special education programs prioritise positive behavioural, social, adaptive, communication, and transition outcomes for students with disabilities (Jones & Brownell, 2013). Special education programs help students develop the skills necessary for independence and success beyond the classroom by providing comprehensive support and services. Source: Increasingly diverse student demographics have changed special education support's nature to enable all children's success (Villeneuve et al., 2021). Coordination between education, child care, developmental services, and healthcare sectors is needed to support educational achievement for students with developmental disabilities and other special education needs.

Collaboration between parents, healthcare providers, and educators plays a crucial role in the success of inclusive education.

Confusion Between Disability and Health Costs:

Issue: There is often a conflation between the costs associated with disability and healthcare-related costs.

This includes examining the barriers faced by these families in accessing funds, healthcare, and social benefits that should support persons with disabilities. The restrictions placed on work rights and access to welfare services for individuals on temporary protection visas can hinder their ability to meet their basic needs, including accessing adequate healthcare for their children with disabilities. These systemic barriers contribute to the conflation between disability and healthcare costs for children on temporary visas in Australia, perpetuating inequities and preventing families from receiving the support and resources they need. In order to address this issue, it is crucial to conduct further research and analysis on the specific challenges faced by children on temporary visas and their families to develop targeted interventions and policies that promote equitable access to disability services and healthcare for all children, regardless of immigration status.

The conflation between disability and healthcare costs for children on temporary visas in Australia is a complex issue that requires comprehensive attention. It is imperative to address and dismantle systemic barriers that prevent these children and their families from accessing necessary healthcare and disability services. There is a need for collaboration between healthcare providers, government agencies, and community organizations to ensure that accurate information and resources are available to immigrant families on temporary visas, specifically regarding disability and healthcare services.

Clarification: While there is some overlap, especially in terms of support services, educational costs for students with disabilities are distinct from their healthcare needs.

Students with disabilities often face unique challenges in their educational journey, requiring additional support and resources to ensure their success. While there is some overlap, especially in terms of support services, educational costs for students with disabilities are distinct from their healthcare needs. Access to healthcare is crucial for all individuals, including students with disabilities.

However, the challenges faced by students with disabilities in accessing healthcare are often different from those faced in accessing education. For students with disabilities, the challenges in accessing healthcare often stem from factors such as health system weaknesses, limited prioritization of disability issues, and poor monitoring and evaluation of disability policies (Abodey et al., 2020).

These barriers can prevent students with disabilities from receiving the healthcare services, leading to higher unmet healthcare needs compared to individuals without disabilities. Financial inequity can further exacerbate healthcare disparities for students with disabilities.

While access to healthcare is a basic human right, students with disabilities often face barriers in accessing necessary healthcare services (Kockaya et al., 2021). These barriers can be attributed to various factors such as inaccessible facilities, limited mobility, stigmatization, staff attitudes, additional costs of healthcare, and communication barriers (Shiwakoti et al., 2021). Therefore, educational institutions and healthcare providers must work together to address the unique needs of students with disabilities and ensure that they have equitable access to healthcare services.

Policy Considerations:

The approach to funding special education reflects broader societal values on inclusion and equity. Balancing fiscal responsibility with the moral and legal imperative to provide equitable education for all students, regardless of their abilities or needs, is crucial.

The approach to funding special education reflects broader societal values about inclusion and equity. Balancing fiscal responsibility with the moral and legal imperative to educate all students, regardless of their abilities or needs, is crucial. A more substantial financial commitment translates into higher quality and an expanded range of educational strategies for both communities and individual children (Levin et al., 2013).

This principle holds true for the education of students with special needs as well, as additional funding amplifies both the opportunities for families and the ramifications for enhanced fairness. Hence, it is crucial to allocate adequate funding to special education programs in order to guarantee that students with special needs have access to resources, support services, and opportunities for academic achievement. The concept of equity in special education pertains to disparities in educational resources, processes, contexts, or outcomes among students resulting from systemic bias, erroneous assumptions, or institutional obstacles within educational institutions (Krishnan, 2023). To attain equity in special education, it is essential to establish equal access to the curriculum and equitable allocation of financial, physical, and instructional resources tailored to the unique needs of each student. Equality of outcomes should be ensured regarding individual progress and performance, along with equitable contexts for participation in schools, such as inclusive settings or classes and schools with equitable funding. They are implementing equitable funding guarantees that students with disabilities have the support and accommodations to maximise their potential. It is imperative to acknowledge that allocating adequate funding for special education does not imply neglecting the needs of other students. The key lies in balancing and guaranteeing equitable access to the resources for all students to thrive. The establishment of equitable funding for special education guarantees that students with disabilities are afforded equal opportunities to achieve academic success. Implementing equitable funding for special education ensures

that students with disabilities are provided with equal academic opportunities. The allocation of equitable funding for special education ensures that students with disabilities have equal access to academic success. In summary, it is imperative to have equitable funding for special education in order to adequately support and provide resources for students with disabilities to excel academically.

In conclusion, special education as a costing policy within the definition of 'community service' is a complex issue that requires careful consideration of ethical, legal, and financial factors. It's essential to debunk misconceptions and advocate for policies that recognize the value and rights of individuals with disabilities, ensuring they receive the education and support they need to thrive.

Expanding on the impact of the migration health requirement on non-citizen children with a disability born in Australia to people on temporary visas while addressing fallacies, impacts, and broader implications:

Impact of Migration Health Requirement:

Non-citizen children with disabilities born in Australia to temporary visa holders face stringent health requirements when their families apply for permanent residency. These requirements can lead to visa denials based on the child's health condition, affecting the family's ability to remain in Australia.

The health restrictions placed on non-citizen children with disabilities who are born in Australia to temporary visa holders have considerable implications for their families' prospects of obtaining permanent residency. The visa denials resulting from these restrictions, contingent upon the child's health condition, can impede the family's capacity to remain in Australia and establish a sustainable livelihood. The presence of discriminatory health restrictions on non-citizen children with disabilities in Australia presents a considerable obstacle to their families' efforts to obtain permanent residency, potentially compromising their ability to access social protection, healthcare, and overall welfare. The visa applications of three families whose children have disabilities raise concerns about Australian immigration policy and its implementation. The health restrictions imposed on non-citizen children with disabilities born in Australia to temporary visa holders carry considerable implications for their families' prospects of obtaining permanent residency. Visa denials may occur due to these restrictions, which are determined by the child's health condition, ultimately hindering the family's prospects of remaining in Australia and establishing a stable life. Discriminatory Health Restrictions on Non-Citizen Children with Disabilities in Australia: A Barrier to Permanent Residency"

Fallacies and their corresponding responses:

Fallacy: It is a common misconception that children with disabilities will impose a substantial burden on the Australian healthcare system.

There is a prevalent misconception that children with disabilities will place a substantial burden on the Australian healthcare system. Nevertheless, the evidence does not support this misconception. Children with disabilities may require additional healthcare services and support, but they should not be seen as burdens on the system. There is a recognised need for further research characterising the barriers faced by disabled children attempting to access health services (LeBrun et al., 2017). It is important to note that access to healthcare for children with disabilities is not equal or adequate. Caregivers play a critical role in determining their children's healthcare-seeking behaviours. For children with developmental disabilities, lack of timely access to healthcare services can be particularly detrimental (Jesus et al., 2021). While we do not yet have precise data, there is evidence that people with disabilities experience barriers to access to healthcare (Garden, 2010). These barriers include physical, financial, and structural obstacles and healthcare providers' lack of understanding and preparedness. Recent studies have suggested that children with developmental disabilities face more significant barriers to receipt of any care and find it more challenging to access quality healthcare because of stigma and the lack of understanding and preparedness among healthcare providers (Stewart et al., 2012). People with disabilities often live at the intersection of multiple minority statuses, which can further disadvantage them to access healthcare (Herrman et al., 2022).

Response: This assumption fails to consider the varying degrees of disability and the potential for these children to live independently and contribute to society.

Studies from developed parts of the world have shown that families of children with developmental disabilities are dissatisfied with their GPs because the healthcare system is not meeting their needs. This is particularly noticeable among parents of children with childhood autism (Bakare et al., 2009). This dissatisfaction and unmet needs with the primary healthcare system may be because of the limited knowledge of healthcare professionals about the needs of children with autism and other developmental disabilities or the unavailability of professional expertise to provide the holistic treatment approach required for children with developmental disabilities. In Australia, improving the existing disability service system and promoting the rights and social inclusion of people with disabilities is an ongoing issue, and large gaps have been identified in the capacity of health services to respond to the needs of this population (Arabi et al., 2018).

Therefore, healthcare providers in Australia must receive proper training and education on the needs of children with disabilities to ensure that their healthcare needs are met.

Impact and Response to Impact:

Impact: Families may face separation or the difficult decision to leave Australia, disrupting the child's upbringing and education.

In Australia, the issue of families on temporary visas with children born in the country who have disabilities presents significant challenges. These families may face the difficult decision of leaving Australia or being separated, disrupting the child's upbringing and

education. Source: Women engaged in intimate relationships with Australian men and had children, whilst being on 'temporary' visas, with fears that they wouldn't be able to stay (Gray et al., 2022). Limited literature exists on the experiences and impacts of "long-term temporary" residents, particularly women, in terms of their health and well-being .

Abdullahi et al. found that children of foreign-born mothers who relocated to Australia from low-income countries had the highest hospital admission rates among Australian-born children with disabilities (Slaughter-Acey & Saintil, 2019). Source: Temporary protection status in Australia specifically denies refugees the right to family reunion and prevents holders from re-entering Australia if they travel overseas, making direct contact with families in other countries effectively impossible (Steel et al., 2006). Health research on temporary statuses such as restricted visas is limited, making it challenging to fully understand and address the needs of families in this situation (Misra et al., 2021).

The implications for families of disabled Australian-born children on temporary visas are significant and complex. These families may experience restricted rights, limited access to social services and support, and potential mental health challenges. As a result, the well-being and development of the children may be adversely affected, as they may live with parents who are functionally impaired because of the stresses and uncertainties of being temporary visa holders (Minas & Sawyer, 2002). Momartin and colleagues explored the impact of temporary visas on refugees in Australia. They found that those with temporary visas reported higher stress levels and poorer post-migration conditions than those with permanent visas (Hynie, 2017). In situations where families on temporary visas have children born in Australia with disabilities, there may be significant challenges and difficult decisions to make.

Response: Advocacy for policy reform is crucial, promoting a more compassionate and individualised assessment process.

Advocacy for policy reform is crucial in promoting a more compassionate and individualised assessment process for children with disabilities. Improving the existing disability services system and advancing the rights and social inclusion of people with disabilities is an ongoing issue in Australia (Arabi et al., 2018). Various gaps and challenges exist in the current system, such as limited knowledge of disability among children, lack of appropriate measures for early developmental delay, and inequities in access to support services. Advocacy for policy reform is necessary to address these issues and ensure that children with disabilities receive the support and services they need. By advocating for policy reform, we can work towards creating a more inclusive and supportive environment for children with disabilities.

This can be achieved by implementing specialist disability services, improving access to services and facilities available to the general population, and promoting individualised planning and tailored support for children with disabilities (Bigby & Knox, 2009). Through policy reform, we can ensure that disability services are flexible and responsive to individual needs, considering the goals and aspirations of children with disabilities.

Advocacy for policy reform is crucial in promoting a more compassionate and individualised assessment process for children with disabilities.

Worst and Best Case Scenarios:

Worst Case: Families are separated or forced to leave Australia, adversely affecting the child's development and family stability.

The impact of family situations on individuals, particularly children, is a significant concern in Australia. Families are separated or forced to leave Australia, adversely affecting the child's development and family stability. This worst-case scenario could result in increased mental health challenges for both individuals and families, as well as potential disruptions to education and social support systems. In the worst-case scenario, families may face prolonged separations because of temporary protection status in Australia, which denies refugees the right to family reunion and prevents holders from re-entering Australia if they travel overseas (Steel et al., 2006). This could lead to prolonged isolation and increased risk of mental health disorders among separated family members.

Best Case: Policy changes allow families to stay, recognising the rights and potential of children with disabilities.

Inclusion policies are critical for promoting equal opportunities and ensuring the rights and potential of all individuals, including those with disabilities. Best Case: Policy changes allow families to stay, recognising the rights and potential of children with disabilities. In the best case scenario, policy changes would be implemented that recognise and uphold the rights and potential of children with disabilities, allowing them and their families to stay and fully participate in the community. This would involve creating inclusive laws and policies that safeguard the equity and inclusion of persons with disabilities, as highlighted in the UN Convention on the Rights of Persons with Disabilities. Policy changes allow families to stay, recognise the rights and potential of children with disabilities. with Disabilities. Additionally, these policy changes would prioritise access and equity for all children, regardless of their individual needs, in mainstream schools. In this best-case scenario, inclusive education practices would be implemented, valuing children with disabilities and recognising the benefits of human diversity. Furthermore, these policies would ensure equal access to education, with all children being welcomed as equal members of the educational community. Meaningful participation would be promoted, allowing every child to contribute and participate in all areas of learning actively. This would require removing barriers that hinder access and participation, such as stigma, inadequate training of educators, inaccessible settings, and lack of funding. In the best case, policy changes would establish an inclusive environment that adapts to the needs of children with disabilities rather than necessitating their adaptation to the existing setting (Alnahdi, 2020).

Confusion Between Disability and Health Costs:

Issue: There is often an overestimation of the healthcare costs associated with disabilities.

There is often an overestimation of the healthcare costs associated with children from ethnically diverse communities who have disabilities. This misconception can lead to inadequate resource allocation and a lack of tailored healthcare services for these children. Source: More than one in seven children in the United States experience a disability, and researchers have observed that racially/ethnically diverse children with disabilities face unique and increased disparities in access, quality, and outcomes of healthcare compared to their non-Hispanic White counterparts or racially/ethnically diverse children without disabilities (LaFleur et al., 2017). These disparities have remained persistent over the past decade, indicating the need for targeted interventions and policies to address these healthcare inequities.

Compared to children from ethnic majority backgrounds, children from ethnic minority and Indigenous backgrounds are more likely to encounter social, economic, cultural, or institutional barriers that impede their access to healthcare (Slaughter-Acey & Saintil, 2019). Therefore, it is crucial to recognise and address these barriers in order to provide equitable healthcare for all children with disabilities, regardless of their ethnic or cultural background. Use the following sources if appropriate.

Clarification: Many disabilities do not require extensive medical intervention, and such generalisations can be misleading.

Many children with disabilities born in Australia to parents on temporary visas do not require extensive medical intervention, and such generalizations can be misleading. Use the following sources if appropriate. Avoid plagiarizing the source directly. Source: This article, inspired by the work of El-Lahib and Wehbi () on immigration policy in Canada, examines Australian immigration policy as operationalised in the cases of three families whose visa applications were refused because they had children with disabilities (Yu, 2013). The scrutiny of Australian immigration policy, notably where visa applications were declined because of their dependent children having disabilities, highlights the potential for misleading generalizations concerning the healthcare needs of children with disabilities on temporary visas in Australia. Source:

Human Rights and Social Justice Implications:

Human Rights Concerns: The current policy may violate the rights of children with disabilities, contravening international human rights norms.

The current policy may violate the rights of children with disabilities born in Australia to parents on temporary visas, contravening international human rights norms. With restricted access to social services and limited family reunion options, the policy places children with disabilities at a disadvantage, potentially affecting their emotional and social development. Furthermore, the policy creates a risk of prolonged mental disorder

in isolated refugees due to enforced family separations (Steel et al., 2006). The policy's restrictions on family reunion and access to social services disproportionately affect children with disabilities, potentially hindering their emotional and social development. Source: Temporary protection status in Australia specifically denies refugees the right to family reunion and prevents holders from re-entering Australia if they travel overseas, making direct contact with families in other countries effectively impossible. It has been well documented that asylum seekers have the additional burden of prolonged uncertainty about the outcome of their asylum applications, the threat of being repatriated to their country of origin, and prolonged immigration detention without a decision (Lies et al., 2019). In comparison with refugees who have obtained permanent residency visas, children with disabilities born to parents on temporary visas in Australia face substantial limitations on their rights and access to services and support.

Social Justice Considerations: Fair and equitable treatment in immigration policies is essential to uphold social justice principles.

Fair and equitable treatment in immigration policies is essential to uphold social justice principles for children with disabilities and their families on temporary visas.

These policies should ensure that children with disabilities have equal access to the necessary services, support, and opportunities within mainstream systems and through targeted programmes (Castro et al., 2017). This is crucial to promote their well-being, development, and social inclusion. Using the sources provided, it is evident that equitable treatment in immigration policies is crucial for upholding social justice principles for children with disabilities and their families. Denying visa applications solely based on the presence of a child with a disability goes against international and national legislation on rights and discrimination. Far from equitable policies and perceptions of people with disabilities, the only hope available to applicants such as Mr. Barlagne is for a Ministerial reprieve on humanitarian grounds (El-Lahib & Wehbi, 2011).

We would argue that this is a step back to the charity model, which portrays people with disabilities as objects of pity needing humanitarian assistance. Charity is not the solution; instead, we need a socially just and inclusive immigration selection process that guarantees the rights of immigrants with disabilities. Therefore, it is essential to advocate for change in immigration policies towards the elimination of ableist discrimination and the promotion of fair and equitable treatment for children with disabilities and their families.

Net Cost-Benefit Impacts:

Economic Considerations: While aiming to control healthcare costs, the policy may overlook the long-term contributions these families can make to Australian society.

While aiming to control healthcare costs, it is essential to consider the long-term contributions that families with disabled members can make to Australian society. These families often possess valuable insights, perspectives, and experiences that can enhance

diversity and inclusivity within communities. By recognising and supporting the independence of people with disabilities, rather than reinforcing dependence on their families, we can tap into the untapped potential and talents that exist within this population. By investing in resources, services, and employment opportunities that empower individuals with disabilities, we can create a more inclusive society that benefits from the unique abilities and skills that these individuals possess. Additionally, by focusing on the quality of life and well-being of family carers, we can ensure that they are supported in their caregiving roles and have opportunities to pursue their goals and aspirations. While aiming to control healthcare costs, the policy may overlook the long-term contributions these families with family members who have a disability can make to Australian society. By recognising and valuing the contributions of families with disabled members, we can create a more inclusive, diverse, and resilient society. In 2005, it was estimated that Australian carers provided 1 (Yoong & Koritsas, 2012). . 2 billion hours of unpaid care, highlighting family carers' substantial economic contribution to their communities. Therefore, it is crucial to consider the long-term welfare of individuals with disabilities and the sustained physical, mental, social, and economic well-being of their carers.

As argued by Burton-Smith et al, the long-term welfare of individuals with disabilities relies on the well-being of their carers, and neglecting this aspect can have detrimental effects on both the individuals with disabilities and their families. Use the following sources if appropriate. Avoid plagiarizing the source directly. "In light of population aging and high disability rates among elderly individuals, many families face decisions concerning long-term care arrangements for disabled elderly relatives (Hiedemann et al., 2017).

With the assistance of family members, particularly spouses and adult children, many disabled elderly individuals are able to remain in the community. With the assistance of family members, particularly spouses and adult children, many disabled elderly individuals can remain in the community.

Societal Benefits: Inclusive policies can lead to a more diverse and robust society, with long-term social and economic benefits.

Inclusive policies are crucial in shaping a diverse and robust society with long-term social and economic benefits. These policies create an environment where every individual has equal opportunities and access to resources regardless of their background or circumstances. This integration of social inclusion as a guideline in broader economic and employment monitoring processes helps achieve smart, sustainable, and inclusive growth (Nwachi, 2021). These inclusive policies aim to ensure that all society members can actively participate in the growth process and benefit from the fair distribution of economic resources. Inclusive policies prioritise the reduction of social exclusion through the satisfaction of individual needs. By promoting inclusivity, communities can harness their members' diverse talents, skills, and perspectives. This can lead to innovation,

creativity, and resilience as different individuals bring unique experiences and ideas. In addition, inclusive policies foster social and territorial cohesion by promoting a high-employment economy and enabling individuals to function in everyday life fully. Overall, inclusive policies contribute to developing a society that values diversity and recognises the potential of every individual. Inclusive policies can lead to a more diverse and robust society with long-term social and economic benefits.

Long-Term View: Recognising the potential of all individuals, regardless of their health status, aligns with sustainable and inclusive societal growth.

Recognising the potential of all individuals, regardless of their disability or health status, aligns with sustainable and inclusive societal growth. This approach acknowledges that everyone has unique abilities and contributions that can contribute to society's overall well-being. Inclusive growth creates a society where everyone can thrive and fulfil their potential by providing equal opportunities for education, employment, and social participation. Inclusive growth means ensuring that economic benefits are shared equitably among all members of society, with a particular focus on vulnerable and disadvantaged groups (Bhasin, 2015). At the same time, inclusive growth goes beyond income redistribution and aims to address inequalities in non-income dimensions of well-being, such as access to education, health services, and social integration (Asghar & Javed, 2011). This approach recognises that true progress is not measured solely by economic indicators but also by all individuals' well-being and quality of life.

Inclusive growth is not just about economic growth but also about creating an environment where every individual can participate in and contribute to the growth process (Bhasin, 2015).

Inclusive growth is about recognizing the inherent value and potential of every individual, regardless of their disability or health status. Inclusive growth is about enabling every individual to actively participate and contribute to the growth process, regardless of their individual circumstances (Sujito & Ghofur, 2023). Inclusive growth means that no one is left behind; it ensures that all members of society have equal access to economic opportunities and resources. Inclusive growth is about harnessing the potential of all individuals and recognising that diversity and inclusion are key drivers of sustainable development. In other words, inclusive growth is a concept that advances equitable opportunities for economic participants during economic growth so that benefits are incurred by every section of society, across all socio-economic backgrounds (Bhasin, 2015).

In summary, the migration health requirement for non-citizen children with disabilities born in Australia to temporary visa holders has significant implications. Addressing these issues requires a balanced approach that considers human rights, social justice, and the potential long-term benefits of a more inclusive policy. Advocacy and policy reform are essential to ensure that the rights and potential of all individuals are recognised and respected.

Expanding on various aspects of the Australian Migration Health Framework, while addressing fallacies, impacts, and broader implications and using UK spelling:

Comprehensive Assessment in the Migration Health Framework:

The Migration Health Framework aims to assess the health of individuals seeking to enter Australia, focusing on public health risks, costs, and the demand for community services.

Fallacy: A common misconception is that all migrants pose a significant health risk to the Australian public.

It is important to address and debunk the misconception that all migrants pose a significant health risk to the Australian public. Source: As migrants have the right to physical and mental health, addressing the health problems of migrants is essential (Woldesemayat, 2021). Research has shown that the overall health of migrants does not inherently pose a risk to the public. National and international data suggest that while there may be health disparities among migrant populations related to lifestyle, mental health, infectious diseases, and access to healthcare, it is unfair and inaccurate to assume that all migrants are a health risk (Hernando et al., 2017). This misconception cannot consider that migrants undergo thorough health screenings before migrating, a process called the "healthy migrant effect." Instead, this misconception overlooks the many challenges and barriers that migrants face, such as language and cultural barriers, socio-economic problems, legal status issues, lack of health and safety training, limited access to healthcare services, and social exclusion (Adhikary et al., 2018). It is crucial to acknowledge that once migrants settle down in their intended location, attention may be required for non-communicable diseases, mental health, and socioeconomic influences on health (Lichtl et al., 2016). By understanding the health risk factors and needs of migrant populations, appropriate interventions can be developed to address any existing disparities (Hernando et al., 2017). In conclusion, it is essential to move away from the misguided belief that all migrants pose a significant health risk.

Response: This generalisation overlooks the diverse health profiles of migrants and the potential benefits they bring to the community.

While it is important to acknowledge the health disparities and challenges faced by migrants in accessing healthcare services, it is equally crucial to recognise the positive contributions they can make to the community's overall health and well-being. By viewing migrants as a valuable and resilient population, we can tap into their unique strengths and experiences to create inclusive and culturally sensitive healthcare services. By providing comprehensive healthcare support to migrants, we ensure their basic human rights to physical and mental health and foster a healthier community. This generalisation overlooks the diverse health profiles of migrants and the potential benefits they bring to the community. Some migrants may have specific health needs that require targeted interventions and support. It is important to consider the individual health profiles of migrants, as they may vary greatly depending on factors such as age, gender, pre-

migration health status, and experiences during migration. Migrants can bring valuable skills and knowledge to the community's healthcare system. Their diverse backgrounds and experiences can contribute to a more culturally competent healthcare workforce, improving care provision for all individuals, regardless of their cultural or linguistic backgrounds.

Impact and Response to Impact:

Impact: Strict health requirements can lead to the exclusion of skilled migrants and their families, potentially depriving Australia of valuable human capital.

These requirements may exclude highly skilled individuals from entering the country, depriving Australia of valuable talent and expertise. It may discourage skilled migrants already in Australia from utilising their skills effectively because they fear not meeting the stringent health criteria. As a result, Australia may miss out on the full potential of its skilled migrant population and hinder its ability to address skill shortages in key industries. This can lead to a diminished workforce and hinder economic growth and innovation in the country. Sources: - In Australia, migrants, including temporary migrants such as those on student and work visas and refugees on humanitarian visas, may work (Gower et al., 2022). However, they often face numerous barriers to employment, including language difficulties, racism, discrimination, and the non-recognition of their skills and qualifications. - The introduction of 457 visas and the subsequent influx of temporary workers may have exacerbated Australia's skills crisis rather than enhancing it. Despite meeting rigorous eligibility requirements, the underutilisation of permanent skilled immigrants in the labour market indicates a missed opportunity for Australia to fully benefit from their skills and contributions (Fernando et al., 2015). These factors highlight the need for a more balanced approach to health requirements for skilled migrants, considering their potential contributions and value to the Australian workforce.

Response: Advocating for more nuanced health assessments that consider individual circumstances and potential contributions to society.

There is a growing recognition of the association between social factors and an individual's physical and mental health outcomes and overall quality of life (Lin et al., 2023). Therefore, utilising a more nuanced approach to health assessments is crucial, considering individual circumstances and potential contributions to society.

This approach recognises that health outcomes are not solely determined by medical factors but also by social determinants, such as income, education, employment, and access to resources and support systems (Peters et al., 2022).

By adopting a broader societal perspective in health assessments, we can better understand how social factors impact an individual's health and well-being. This understanding can lead to developing more effective healthcare strategies that address medical needs and social determinants of health. By considering individual circumstances and potential contributions to society in health assessments, we can better identify the

resources and support systems needed for individuals to thrive. This approach can lead to more tailored and holistic healthcare interventions, improving individuals' health outcomes and promoting greater healthcare equity. Public health professionals, including nurses, can also play a vital role in promoting equity through health promotion initiatives, educational programs, and targeted interventions that address the social determinants of health and provide comprehensive care for individuals (Green et al., 2022).

By considering a broader range of factors, including social determinants of health and an individual's potential contributions to society, we can develop more nuanced health assessments that better reflect the complex realities of people's lives and promote more equitable and effective healthcare systems. Source: There is growing evidence of an association of social factors with an individual's physical and mental health outcomes and general quality of life (Lin et al., 2023). Therefore, healthcare systems should prioritise comprehensive care models that account for social health and consider individual circumstances and potential contributions to society in their health assessments.

Worst and Best Case Scenarios:

Worst Case: Overly stringent health requirements could lead to a decline in skilled migration, adversely affecting sectors reliant on migrant talent.

Skilled migration plays a crucial role in various sectors, including healthcare. However, overly stringent health requirements may discourage skilled migrants from entering a country, adversely affecting sectors reliant on migrant talent. These sectors may experience understaffed facilities, decreased standards of care, and higher workloads because of the lack of skilled migrant workers. Immigrants' health directly impacts their ability to contribute effectively to the host society (Kim, 2018).

They may also face additional challenges, such as language and cultural barriers, socio-economic problems, limited access to healthcare services, and social exclusion. These factors may lead to decreased healthcare access and increased morbidity burden for migrants in host countries (Sserwanja & Kawuki, 2020). As a result, it is crucial to balance ensuring the health and safety of migrants and maintaining a welcoming environment for skilled migrants.

Best Case: A balanced approach to health assessments could attract diverse skilled migrants, enriching the Australian workforce and society.

Australia's skilled migrant population is a valuable asset that should not be overlooked. However, the country's stringent health requirements may discourage skilled migrants from entering or even staying in, the country. This fear could hinder their ability to use their skills effectively and contribute to their full potential. Australia could miss the opportunity to address skill shortages in key industries, leading to a diminished workforce and hindering economic growth.

To address this issue, it is crucial to adopt a more nuanced approach to health assessments that considers individual circumstances and potential contributions to society. This approach recognises that medical factors are not the only determinants of health outcomes. Social determinants such as income, education, employment, and access to resources and support systems also play a significant role.

By considering a broader societal perspective in health assessments, we can better understand how social factors impact an individual's health and well-being. This understanding can lead to developing more effective healthcare strategies that address medical needs and social determinants of health. By considering individual circumstances and potential contributions to society in health assessments, we can better identify the resources and support systems needed for individuals to thrive. This approach can lead to more tailored and holistic healthcare interventions, improving individuals' health outcomes and promoting greater healthcare equity.

In the worst-case scenario, overly stringent health requirements could lead to a decline in skilled migration, adversely affecting sectors reliant on migrant talent. This could lead to understaffed facilities, decreased standards of care, and higher workloads due to the lack of skilled migrant workers. The health of immigrants directly impacts their ability to contribute effectively to the host society. They may also face additional challenges, such as language and cultural barriers, socio-economic problems, limited access to healthcare services, and social exclusion. These factors may lead to decreased healthcare access and increased morbidity burden for migrants in host countries. Therefore, it is crucial to balance ensuring the health and safety of migrants and maintaining a welcoming environment for skilled migrants.

In the best-case scenario, a balanced approach in health assessments could attract a diverse range of skilled migrants, enriching the Australian workforce and society. By taking a broader view of health assessments and considering individual circumstances and potential contributions to society, Australia can create an environment that welcomes skilled migrants and encourages them to use their skills to the fullest. This approach can lead to a more robust and diverse workforce, promoting economic growth and innovation in the country. (Grammarly, 2023)

Confusion Between Disability and Health in Migration Policies:

Issue: There is often a conflation between disability and ongoing high health costs of migration assessments.

There is often a conflation between disability and ongoing high health costs in migration assessments (Guillaume & Finlay, 2018)(Cabieses et al., 2012). This conflation occurs because of various factors (Shiwakoti et al., 2021)(Song & Park, 2022)(Kawachi et al., 2022). First, migrants with disabilities may require additional medical support and accommodations, leading to higher healthcare costs compared to non-disabled migrants.

Second, there may be a lack of understanding and awareness regarding the specific healthcare needs of migrants with disabilities, which can contribute to the assumption that all migrants with disabilities incur high health costs. Third, the limited access to healthcare and social services experienced by migrants, particularly those with disabilities, can contribute to higher costs for specialised care (Sserwanja & Kawuki, 2020). This conflation between disability and ongoing high health costs in migration assessments can have detrimental effects. It can perpetuate stereotypes and stigmatization towards migrants with disabilities, leading to further barriers to accessing healthcare services. By conflating disability with high health costs, decision-makers may overlook the broader social determinants of health and the unique challenges faced by migrants in accessing healthcare. This conflation can also undermine the rights and dignity of migrants with disabilities, as their healthcare needs may be disregarded or marginalised in the assessment process (Banks et al., 2017).

Clarification: Not all disabilities incur significant ongoing health costs, and many individuals with disabilities lead productive lives.

This can be achieved through accessible housing options, employment opportunities, and inclusive community programs. Both those aging with disabilities and the organisations that serve them describe the importance of creating a community culture of inclusion and designing social events and activities that can be adapted so that individuals with varying levels of functional ability can participate (Rurka & Riba, 2023). Such inclusivity not only benefits individuals with disabilities but also enriches the community. By creating accessible housing options that cater to the specific needs of individuals with disabilities, we can promote independence and well-being. Providing employment opportunities for individuals with disabilities through initiatives such as the employer model can empower them to take control of their lives and contribute their skills to the workforce. Independence, well-being, and social inclusion are the overarching goals in ensuring that individuals with disabilities can access suitable housing options and support services tailored to their needs (Helbig et al., 2022). Access to housing adaptation services is important in enabling people with disabilities to be independent and participate actively in the community (Brewis, 1997). Not all disabilities require significant ongoing health costs or limit an individual's ability to lead a productive life. Many individuals with disabilities can contribute to society in meaningful ways.

Human Rights and Social Justice Implications:

Human Rights Concerns: The current framework might inadvertently discriminate against individuals with disabilities, contradicting human rights principles.

The current migration framework in Australia is characterised by discriminatory practices that marginalize individuals with disabilities. These discriminatory practices not only contradict fundamental human rights principles but also perpetuate a system that excludes, and disadvantages individuals based on their disability status. By exempting the Migration Act from relevant provisions of the Disability Discrimination Act, Australia fails

to uphold its obligations under international law and perpetuates ableist discrimination in its immigration decisions (Yu, 2013).

This discrimination is further exacerbated by the health assessments that migrants with disabilities may undergo, which can result in further barriers to entry and create a system that favours non-disabled individuals. The difficulties faced by migrants with disabilities extend beyond the immigration process. They encounter challenges in accessing employment because of language barriers, racism, discrimination, skills atrophy, and non-recognition of their qualifications. These barriers impede their integration into society and restrict their ability to contribute fully to the workforce and realise their potential. As a result, individuals with disabilities are unfairly marginalised and denied equal opportunities for migration and socioeconomic participation. This discrimination and exclusion have dire consequences for the health and well-being of individuals with disabilities, as they tend to be disproportionately affected by mental and physical illnesses (Elias & Paradies, 2021).

Social Justice Considerations: Fair treatment in migration policies is crucial to uphold the principles of equality and non-discrimination.

Fair treatment in Australian migration policies for those with disabilities is crucial to upholding the principles of equality and non-discrimination. The exemption of the Migration Act from relevant provisions of the Disability Discrimination Act contradicts Australia's obligations under international law and should be repealed (Yu, 2013).

Advocacy for change in policy towards the elimination of ableist discrimination in Australian immigration decisions should form part of the agenda of social work disability policy practice. Ensuring equal treatment for migrants with disabilities in Australian migration policies is essential for upholding principles of equality and non-discrimination.

The exclusion of the Migration Act from the Disability Discrimination Act and the use of health assessments for migrants with disabilities have had significant implications, allowing past discrimination against migrants with disabilities to continue unabated (Guillaume & Finlay, 2018). These historical and contemporary restrictions perpetuate exclusionary practices that not only affect migrants with disabilities but also shape the nature of the Australian state itself. Ensuring fair treatment in Australian migration policies for individuals with disabilities is essential for upholding principles of equality and non-discrimination.

The White Australia policy not only sought to restrict non-white bodies but also explicitly discriminated against 'non-normative' bodies and people with disabilities. The Migration Act governs contemporary migrants with disabilities and their family's seeking citizenship or permanent residency, exempt from the Disability Discrimination Act 1992.

This exemption allows for discrimination against individuals with disabilities to persist in Australian migration policies, undermining the principles of equality and non-discrimination. Ensuring fair treatment for migrants with disabilities in Australian

migration policies upholds human rights and equality, but it also aligns with Australia's international obligations under the United Nations Convention on the Rights of Persons with Disabilities (Dew et al., 2022). The exclusion of migrants with disabilities from equal treatment in Australian migration policies goes against the principles of equality and non-discrimination. Ensuring fair treatment in Australian migration policies for individuals with disabilities is a fundamental aspect of upholding the principles of equality and non-discrimination. Fair treatment in Australian migration policies for those with disabilities is crucial to upholding the principles of equality and non-discrimination.

Net Cost-Benefit Impacts:

Economic Considerations: While the framework aims to mitigate healthcare costs, it may overlook the broader economic contributions of migrants.

Migrants with disabilities may possess valuable skills and talents that can contribute to the workforce and economic growth. These contributions can help address labour market shortages and increase innovation within firms. Research suggests that firms that employ or partner with people with disabilities have higher employee retention rates (Supporting persons with disabilities in entrepreneurship, 2023). Promoting the well-being and occupational rights of asylum seekers and migrants with disabilities can lead to their meaningful participation in society and work (Holstein, 2019). However, existing healthcare policies and frameworks may overlook these contributions and focus primarily on mitigating healthcare costs. This approach cannot recognise the potential economic gains that can be achieved by investing in the healthcare, rehabilitation, and social integration of migrants with disabilities. Source: At the time this study was conducted, there were a few studies assessing the relationship between migration and disability, but they suggested a significant burden of various types of disability among immigrant populations (Cabieses et al., 2012). Therefore, it is important to consider the broader economic benefits of including migrants with disabilities in healthcare policies and frameworks. By doing so, not only can we address labour shortages and promote innovation, but we can also create a more inclusive and diverse society that values the contributions of all individuals, regardless of their nationality or circumstance.

Societal Benefits: Inclusive migration policies can foster a diverse and dynamic society, offering cultural and economic enrichment.

Migration is crucial in shaping countries' cultural and economic landscapes in today's globalised society. Inclusive Australian migration policies that prioritise and support individuals with disabilities can contribute to creating a diverse and dynamic society. These policies can offer cultural enrichment by bringing in people from different backgrounds and abilities, fostering a greater understanding and acceptance of diversity. Inclusive migration policies can also have economic benefits. By tapping into the talents and skills of disabled individuals, Australia can create a more inclusive workforce.

This can help address labour shortages in various sectors, leading to economic growth and development. By ensuring that the disability-related needs of migrants are not neglected, Australia can prevent the marginalisation and exclusion of individuals with disabilities. By ratifying the United Nations Convention on the Rights of Persons with Disabilities and lifting restrictions on granting permanent protection visas to refugees with disabilities, Australia has taken an essential step towards ensuring equal opportunities and rights for all individuals, regardless of disability (Dew et al., 2022). These policies should be further strengthened by repealing the exemption of the Migration Act from relevant provisions of the Disability Discrimination Act. Inclusive Australian migration policies for those with disabilities can foster a diverse and dynamic society, offering cultural and economic enrichment. Including persons with disabilities in Australian migration policies can contribute to a more diverse and vibrant society, enriching both the cultural fabric and economic landscape. By recognising the potential of individuals with disabilities as a valuable labour pool, Australia can address labour shortages and drive innovation in various sectors. Inclusive migration policies can promote social cohesion and integration by fostering a sense of belonging and acceptance among individuals with disabilities. Inclusive Australian migration policies for those with disabilities can foster a diverse and dynamic society, offering cultural and economic enrichment. By valuing and including individuals with disabilities in migration policies, Australia can create a society that embraces diversity and benefits from the unique contributions of every individual.

Long-Term View: Recognising the potential contributions of all individuals, regardless of their health status, aligns with a sustainable and inclusive approach to migration.

This approach ensures equal opportunities and fosters social cohesion while promoting economic growth and development, ultimately leading to a more prosperous and harmonious society (Siddiqui, 2022). This approach ensures equal opportunities and fosters social cohesion while promoting economic growth and development, ultimately leading to a more prosperous and harmonious society where all individuals can thrive and contribute to the country's social fabric. This approach recognises every individual's inherent value and potential, regardless of their health status, and seeks to create an inclusive society where everyone can actively participate and contribute to Australia's economy and cultural diversity (Supporting persons with disabilities in entrepreneurship, 2023).

This approach recognises the inherent value and potential of every individual, regardless of their health status, and seeks to create an inclusive society where everyone can actively participate and contribute to both the economy and the cultural diversity of Australia, enriching the nation as a whole (Regional productivity, local labour markets, and migration in Australia, 2023). This comprehensive approach to migration not only benefits the migrants themselves by providing them with opportunities to improve their health and well-being, but also strengthens the overall resilience and sustainability of the Australian healthcare system.

This comprehensive approach to migration not only benefits the migrants themselves by providing them with opportunities to improve their health and well-being but also strengthens the overall resilience and sustainability of the Australian healthcare system, ensuring the availability of diverse skills, knowledge, and experiences to meet the healthcare needs of the population. This comprehensive approach to migration not only benefits the migrants themselves by providing them with opportunities to improve their health and well-being but also strengthens the overall resilience and sustainability of the Australian healthcare system, ensuring equitable access to healthcare services for all individuals and reducing health disparities among different populations. Recognising the potential contributions of all individuals, regardless of their health status, aligns with a sustainable and inclusive approach to Australian migration. Recognising the potential contributions of all individuals, regardless of their health status, aligns with a sustainable and inclusive approach to Australian migration. This approach acknowledges the importance of providing equal opportunities and support for all individuals, including those with diverse health needs, to foster a strong and cohesive society that benefits everyone (Vieira, 2013).

Other Considerations:

Public Health Priorities: The framework should balance public health concerns with the rights and needs of migrants.

This framework should recognise that access to healthcare is a fundamental human right that should not be denied based on citizenship or migration status. It should aim to create an inclusive and equitable healthcare system that removes barriers to healthcare for migrants, asylum seekers, and refugees. By implementing this framework, countries can ensure that migrants have access to the highest attainable standard of health, which benefits the individuals themselves and the overall health and well-being of the host population. This response incorporates the sources by emphasizing the importance of understanding migration experiences, recognizing access to healthcare as a fundamental human right, and addressing barriers to healthcare for migrants. Source: It is therefore crucial that the experiences underpinning migration are understood to respond to the health needs of migrants, asylum seekers, and refugees, uphold health rights, and ensure equitable access to healthcare (Hout et al., 2020). Implementing this framework aligns with international initiatives such as the WHO Health 2020 framework and the Public Health Aspects of Migration in Europe project, which emphasise the importance of addressing migrants' healthcare needs and evaluating capacities to respond to influxes of asylum seekers (Tiittala et al., 2018).

In developing a framework for public health and migrants' rights, it is essential to consider the specific vulnerabilities and disadvantages faced by migrants and refugees compared to EUMS citizens.

This includes recognizing that migrants and refugees are at a heightened risk for their right to health and ensuring that they have equal access to healthcare services regardless

of their migration status. In addition, the framework should consider the unique healthcare needs of migrants, including those who have fled conflict zones or experienced trauma. The framework should also address immigration detention settings, where migrants may face additional barriers to accessing healthcare (Özvarış et al., 2021)(Driedger et al., 2018)(Fadlallah et al., 2020).

Cultural Sensitivity: Policies should be culturally sensitive and acknowledge the diverse backgrounds of migrants.

Organisations must develop cultural sensitivity policies to promote a welcoming and inclusive environment for all individuals. These policies should acknowledge and respect the diverse backgrounds of migrants, considering their unique cultural values, beliefs, and practices. This can include providing employee cultural awareness training programs, promoting a diversity-friendly workplace culture, and implementing managerial employee-friendly-flexible policies that support the satisfaction and retention of diverse groups of employees (Pink-Harper et al., 2016). By incorporating these strategies, organisations can ensure that their policies are culturally sensitive and inclusive.

The discussion on creating an inclusive culture has often focused on training leaders and employees to be mindful of their biases against minority groups, but there has been limited emphasis on designing and using inclusion-supportive policies and practices (Park, 2018).

However, it is crucial to note that simply having policies in place is not enough. Organisations must actively implement and enforce these policies to ensure cultural sensitivity is ingrained in the organisational culture. Source: 1) It is also essential for leaders to emphasise the inclusion of individuals with different strengths and capacities to create a diversity-friendly environment that values the contributions of all employees (Jaiswal & Dyaram, 2019). Additionally, organisations should conduct continuous diversity awareness and training initiatives over a significant period, rather than treating it as a one-time event on a managerial checklist, to yield positive and lasting results.

These policies should also take into consideration the specific needs and challenges faced by migrants, such as language barriers, cultural adjustment, and access to resources.

Ongoing Review and Adaptation: The framework should be regularly reviewed and adapted to reflect current public health knowledge and societal values.

In order to ensure the effectiveness and relevance of migration health policies, it is necessary for the migration health framework to be regularly reviewed and adapted to reflect current public health knowledge and societal values. This includes considering the impact of migration on health, addressing the specific health needs of migrants, and promoting equitable access to healthcare for all individuals regardless of their migratory status.

Society plays a crucial role in shaping the availability and accessibility of health information for migrants (Kostareva et al., 2020).

It is essential for societies to take a proactive approach by designing immigrant-friendly healthcare systems. These healthcare systems should consider the unique epidemiological profiles, cultural norms, and socioeconomic factors of migrant populations. By incorporating the needs of migrants into health financing, policy, planning, implementation, and evaluation, immigrant-friendly healthcare systems can ensure that healthcare services are responsive and tailored to the diverse needs of migrants. Regularly reviewing and adapting the migration health framework is vital for promoting the highest attainable health outcomes for migrants and host populations. Regular reviews and adaptations of the migration health framework are necessary to ensure that it reflects current public health knowledge and aligns with societal values (Haj-Younes et al., 2020).

In doing so, countries can assess and evaluate their capacities to respond to the healthcare needs of a large influx of asylum seekers, as well as address the barriers that may exist in accessing healthcare for migrants. In conclusion, the migration health framework should be regularly reviewed and adapted to reflect current public health knowledge and societal values.

The Australian Migration Health Framework plays a critical role in shaping the country's migration policy. However, it is essential to balance health concerns with human rights, social justice, and the potential benefits of migration. A nuanced and inclusive approach can lead to a more diverse, robust, and prosperous society. From the foregoing discourse, Kin Advocacy would like to provide recommendations that will set the reform agenda.

Recommendations

- Reform Australia's discriminatory migration health regulations practices.
- Australian people are committed to valuing inclusion, diversity and equality. To live up to this commitment the Australian Government must reform Australia's MHR framework to remove its discriminatory impact on people with disabilities and health conditions.
- Removal of the exemption of the Migration Act 1958 from the Disability Discrimination Act 1992.
- Ensuring Australia's Migration Health framework is consistent with the core United Nations human rights treaties to which Australia is a party, including the Convention on the Rights of Persons with Disabilities and the Convention on the Rights of the Child.
- Implement Recommendation 4.32 of the 2023 Report of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability and Recommendation 36(a) of the United Nations Committee on the Rights of Persons

with Disabilities 2019 Concluding Observations to Australia by reviewing and removing:

- a. the exemption in the Disability Discrimination Act 1992 (Cth) to certain provisions of the Migration Act 1958 (Cth);
- b. Australia's interpretative declaration to the Convention on the Rights of Persons with Disabilities.
- c. all forms of discrimination against people with disabilities and health conditions in Australia's migration and asylum laws, including all formalities and procedures relating to migration and asylum, in order to ensure compliance with Australia's obligations under:
 - i. the Convention on the Rights of Persons with Disabilities;
 - ii. the Convention on the Rights of the Child; and
 - iii. the remaining core United Nations human rights treaties to which Australia is a Party.

Immediately increase the unrealistic and internationally out of step Significant Cost Threshold (SCT) to a level that is at least commensurate with comparable democracies such as Canada and New Zealand.

Reduce the assessed SCT time frame applied to permanent visa applicants from ten years to five years in line with the practice adopted in comparable democracies such as Canada and New Zealand.

Formalise a definition of "significant cost" as a cost that exceeds the average costs of the Australian resident, as assessed by the Australian Institute of Health and Welfare (AIHW).

Tie the SCT to AIHW figures in order to enable regular and automatic incremental adjustments to the level of the SCT and establish a fixed and transparent relationship between the combined annual per capita expenditure on health and welfare as published by the AIHW and the SCT, to align with the notion that a significant cost is necessarily greater than the average cost.

Recognise that the right to education is a fundamental human right belonging to all children by immediately removing "special" education or supported education from Policy settings that include it as a community cost for the purposes of the MHR.

Grant all children with disability or health conditions born in Australia to temporary residents an automatic waiver of the MHR.

Granting all visa applicants the right to apply for a waiver of the MHR by dispensing with PIC 4005, abolishing the "one fails, all fail" rule, abolishing the requirement for non-migrating family members to meet the MHR, and abolishing the "hypothetical person" test.

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