Access to Covid-19 vaccinations for homeless people and undocumented migrants in Germany

Vaccines for all? Undocumented Migrants and Homeless People Left Behind

Dr. Johanna Offe, Médecins du Monde Germany
Médecins du Monde/Doctors of the World Germany

- Domestic projects, providing medical services and social support to people with limited or no access to healthcare
- Services are free of charge and anonymous if wanted
- Combined with advocacy on the human right to access healthcare as a state duty.
- Majority of clients are
  - undocumented third country nationals and
  - unemployed EU citizens without residence right,
  - 88% are homeless
Access to healthcare for undocumented migrants in Germany

- Legal entitlement to restricted health services (acute illness and pain, asylum seekers benefit act §1 and §§ 4,6)
- But: Duty to report exists for public authorities (Residence Act §87) including social service departments responsible for covering cost of health services
- Thus: undocumented avoid medical care
- Exception for emergency care does not work properly
Access to healthcare for homeless

» Often, health insurance exists, but due to debt in contributions only entitlement to limited health services

» New law (2019): health insurance ends if contributions are not paid and person cannot be contacted

» Many unemployed EU citizens no entitlement to health services (since 2016)

» Other barriers: language, discrimination, fear/embarrassment
Consequences for Covid-19-Vaccination

Lacking access to healthcare

More important to reach
Undiagnosed and untreated chronic diseases $\rightarrow$ higher risk of severe consequences of infection

Not easy to reach
- Not connected to GPs for information/motivation
- Mistrust and fear of healthcare system

Prioritisation in vaccination strategies!
(UN, EU Council Bioethic Committee, Red Cross EU Office)
Access to vaccination: legal situation in Germany

» Vaccine regulation:
  > entitlement with habitual residence or registered address
  > People in homeless accommodations prioritized (prio 2)

» April 2021: Clarification by the ministry of health: undocumented migrants are entitled to vaccinations (but not prioritised)

» Vaccination free of cost. But:
  > no exception on duty to report for public authorities involved (e.g. for cost coverage)
  > Health insurance card often needs to be shown
Access to vaccinations: situation in practice

1) Administrative barriers:

> Proof of habitual residence difficult without registered address

> Prioritized groups were often contacted via their registered address - no possibility for priority groups without registered address

> Need to have ID

  - in registration process
  - in the vaccination centre
  - for second vaccination
  - for digital vaccination certificate
Access to vaccinations: situation in practice

Communication and other barriers
- homeless/undocumented not linked to regular health system
- high level of fear and mistrust
- Low level of information – little adapted information/outreach
- Language barrier, alphabetisation barrier
- Discrimination
Outreach approaches in different cities (2)

Munich

> Mobile vaccination teams, special vaccination dates and vaccination by civil society providers
> Written confirmation by the city’s health department: no reporting in vaccination process.
> Confirmation of habitual residence is easily accepted.
> City offers hotel rooms for vaccination reaction
> MdM provides information for clients, refers to vaccination centres and doctors, and carries out vaccinations
Outreach Approaches in different cities

Berlin:

> Mobile vaccination teams at 20 service sites for the homeless – vaccination also possible without documentation

> Until end of May, 2278 homeless people vaccinated, mostly with J&J

> Vaccination through civil society health service providers (including cooperation project MdM/Medizin Hilft)

> Homeless can get vaccinated in all so-called „focal area vaccinations“ with proof of identity
Key recommendations

1. Prioritisation in vaccination strategies: reduction of administrative barriers

2. Adapted information and outreach, developed with participatory approaches

3. Abolishment of the duty to report for those public authorities necessary for accessing healthcare – firewall!

→ Learn lessons from pandemic: ensure sustainable access to healthcare!
Thank you!

Contact: Dr. Johanna Offe, MdM Germany
johanna.offe@aerztederwelt.de

Campaign on the duty to report: www.gleichbehandeln.de