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
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 → 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!**

(WHO, 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