SOME LESSONS LEARNED FROM THE COVID-19 PANDEMIC ON THE RIGHT TO HEALTH FOR UNDOCUMENTED MIGRANTS
Introduction

Covid-19 impacted everyone in the world. But it did not impact everyone equally. Intersecting forms of discrimination, marginalization and social exclusion exacerbated pre-existing inequalities and meant that certain vulnerable populations were disproportionately impacted by the pandemic.

PICUM surveyed its membership during the pandemic to gauge the ways in which Covid-19 and the restrictions had impacted undocumented migrants. The survey showed that the main concern for undocumented people during the pandemic was the loss of income due to the interruption of work, and the impossibility to access state support, including unemployment benefits. The inability to maintain social distance due to living in crowded precarious settings, including detention centres and informal camps, was another prevalent concern.

In addition, many PICUM members also reported that they were less able to support undocumented people as restrictions during lockdowns made it hard to carry out community work. While many members indicated a rise in requests for support, it was harder to advocate towards their governments for inclusive policies, as in person meetings were largely discontinued and the management of the health emergency trumped other priorities. This double jeopardy of increased needs while at the same time reduced ability to support was a particular challenge during the pandemic.

Vaccines for All?

From the outset, international and regional public health and human rights institutions were vocal about the need for inclusive and equitable national vaccination rollouts. This was argued on principles of equality, fairness and human rights, but also on public health grounds. In a joint guidance note on access to vaccines,¹ international human rights experts noted that “attention must be given to those migrants who are most exposed and vulnerable to the SARS-COV-2 due social determinants of health, such as migrants in irregular situations, low-income migrants, migrants living in camps or unsafe conditions, in immigration detention, migrants in transit.”

¹ The UN Committee on Migrant Workers, the UN Special Rapporteur on the human rights of migrants, the Office of the United Nations High Commissioner for Human Rights, the Special Rapporteur on Refugees, Asylum Seekers, Internally Displaced Persons and Migrants in Africa, the Special Representative of the Secretary General on Migration and Refugees of the Council of Europe and the Rapporteur on the Rights of Migrants of the Inter-American Commission on Human Rights, Joint Guidance Note on Equitable Access to COVID-19 Vaccines for All Migrants.
Nevertheless, across Europe, policies to include undocumented people remained fragmented, at times vague and open to interpretation. In early 2021, as EU member states started rolling out Covid-19 vaccines in the EU, PICUM began mapping two main issues concerning undocumented migrants: administrative barriers and the risk of immigration enforcement as a consequence of getting the vaccine. Administrative barriers considered mainly whether undocumented people had to provide proof of residence, identity documents or social security numbers to access the vaccines. Safeguards concerned preventing the transfer of data on residence status for the purpose of immigration control (“firewalls”).

In March 2021, PICUM began working with the investigative non-profit newsroom Lighthouse Reports to assess the extent to which European vaccination policies and strategies included undocumented people.2

### Country Examples of Covid-19 Vaccines for Undocumented Migrants

The **United Kingdom** announced in February 2021 that all UK residents could access the vaccine for free, regardless of their migration status, with only a requirement (for those without a national health number) to register with a general practitioner. This was reflected in official national guidelines.3 Access has, however, been hampered by fears linked to the “hostile environment” and the fact that most GPs refuse to register undocumented patients because they cannot provide documentation, such as a valid residence permit, even if this is not required by law.4

In **Belgium**, the federal government was receptive to the concerns of non-governmental and community-based organisations and collaborated with them early on in the development of its strategy and approach. The Brussels region worked proactively with local organisations to craft practical solutions to ensure that undocumented people and others facing exclusion could get vaccinated, including through mobilisation of mobile clinics.5

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2 Lighthouse Reports, 2021. Vaccinating Europe’s Undocumented: A Policy Scorecard
4 The term “hostile environment” is used to describe all policies which make life difficult for migrants living in the UK - treating them as less deserving of rights, dignity and humanity than citizens. It was first introduced as a set of policies in 2012 by the Home Secretary Theresa May, with the aim of making life unbearably difficult in the UK for those who cannot show the right paperwork. Or, as she said at the time; “The aim is to create, here in Britain, a really hostile environment.”
5 The Bureau of Investigative Journalism, 2021. Most GP surgeries refuse to register undocumented migrants despite NHS policy: Survey finds official guidelines being extensively ignored to leave hundreds of thousands facing a vaccine labyrinth.
6 Croix Rouge de Belgique, 2021. Lancement de Mobivax, l'équipe mobile dédiée à la vaccination des personnes sans abri.
The Spanish federal vaccination strategy explicitly mentions undocumented migrants\(^7\) and other marginalised populations as groups to be vaccinated in Spain. It doesn’t, however, detail how to reach them. While there are examples of inclusive approaches in some regions, non-governmental organisations have been pushing for clear guidelines from the Ministry of Health to the regions to address inconsistencies in practices that lead to exclusion.

The Irish Minister of Health stated unambiguously that there would be no immigration consequences for people coming forward to be vaccinated in Ireland and encouraged undocumented people to get the vaccine\(^8\). During the lockdowns in 2020, Ireland had already announced that undocumented people could access COVID-19-related care without risk of data sharing with immigration authorities – and that they would be included in the country’s Pandemic Protection Program for workers who lost their jobs\(^9\).

Portugal published a COVID-19 vaccination registration website where undocumented people could book their vaccinations, and which is adapted to be less burdensome in terms of the information that must be provided (address, birth date, phone number and nationality). According to official figures from June 2021, more than 19,000 undocumented migrants\(^10\) had registered via the website, often with assistance from local NGOs.

In 2022, the Greek Ministry of Health launched a campaign to improve access to COVID-19 vaccines for undocumented migrants, refugees and other marginalised groups in Greece\(^11\). The initiative follows campaigning led by a coalition of Greek NGOs including INTERSOS Hellas, Greek Forum of Migrants and Greek Forum of Refugees\(^12\). The campaign aims to ensure that undocumented migrants are aware of their right to access the vaccine; to tackle misinformation, fear and lack of trust in public authorities due to previous insufficient healthcare policies; and to ensure a national vaccination scheme that is inclusive and open to all.

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12 INTERSOS Hellas, the Greek Forum of Migrants and the Greek Forum of Refugees. Vaccines for All.
It is clear that much work remains to be done to include undocumented people in accessing Covid-19 vaccines. Beyond the removal of administrative barriers and the introduction of safeguards, building trust between state institutions and marginalized communities will be a key priority to ensure that undocumented people do not fall through the cracks, if and when other major spikes in infections occur. This includes ensuring clear, accessible and effective public communications in relevant languages for marginalized communities.

The Health Services Opportunity

Despite the numerous challenges, the portrait is not entirely bleak. In fact, the pandemic has opened windows of opportunity for the inclusion of undocumented migrants in quite unlikely ways. Pushed by considerations about public health, some European countries adopted measures which aimed to reduce the exclusion of undocumented people from public services.

For instance, Portugal temporarily regularised the status of all people with a pending residence application, so they could have access to state support, including full access to health care. Ireland granted safe access to health care to undocumented people, ensuring no data is shared with immigration authorities.

Imperfect and impermanent as many of these measures may be, civil society should seize the opportunity to show policy makers that change is possible and that more inclusion benefits everyone.

This message was reinforced by the World Health Organization, who stated that the COVID-19 pandemic “has demonstrated the relevance and importance of universal health coverage and the role of properly functioning medical services accessible for everyone regardless of legal status and nationality.”

Many PICUM members noted that they were able to forge new working relationships with different levels of governance in their countries. For instance, where the door to national decision-makers may have been shut prior to the pandemic, local and regional health

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13 PICUM, 2022. A snapshot of social protection measures for undocumented migrants by national and local governments.
14 Publico, 2020. Governo regulariza todos os imigrantes que tenham pedidos pendentes no SEF.
departments and authorities have been more amenable to working with PICUM members in some countries to address various health issues. In Norway, civil society organisations noted that they had found new avenues of collaboration with specific hospitals and local health authorities, who were initially interested in discussing due to the pandemic and access to vaccines and who are now looking more broadly at access to healthcare beyond the scope of the pandemic.

Conclusion

The pandemic laid bare the existing inequalities in our societies in terms of exposure to Covid-19, the socio-economic aftermath and access to health services. Undocumented migrants felt the impact of the lockdowns especially due to the inability to socially distance, loss of income and a lack of access to state support.

The World Health Organization stated that “the pandemic may be an opportunity to devise coherent and evidence-informed policies leaving no one behind in the spirit of the Sustainable Development Goals”. Some governments made access to vaccines and healthcare available to undocumented migrants as a part of holistic emergency health strategies. Campaigners should leverage these emergency measures as well as the partnerships they have created during the pandemic response to argue for equal access to health.

The pandemic demonstrated that governments are capable of developing inclusive measures concerning access to health care for undocumented migrants. The challenge for civil society organisations will be to ensure that this reality lives beyond the pandemic.

17 Ibid.