

REGULARISE

A SAFER PATH TO SETTLEMENT

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REMOVING BARRIERS TO ACCESSING COVID-19 VACCINATION FOR UNDOCUMENTED MIGRANTS

Our Mission

[Regularise](#) seeks to improve the quality of life of undocumented migrants who already have established lives in the UK by attaining them basic rights & a safer and more equitable path to settlement and citizenship.

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Background

On Thursday 4th February 2021, Nadhim Zahawi MP, the Minister for COVID Vaccine Deployment, joined a panel to discuss “Equitable Access to COVID-19 Vaccination for Undocumented Migrants”, hosted and facilitated by Regularise. Alongside him on the panel, were Alyna C. Smith, Advocacy Officer Access To Health Care, Justice & Legal Strategies for Advancing Rights from PICUM (Platform for International Cooperation on Undocumented Migrants), Andrea Martinez, Mental Health Programme Head from Kanlungan Filipino Consortium and Anna Miller, Head of Policy & Advocacy from Doctors of the World.

During the meeting, three people joined the call to discuss their lived experiences: One spoke about the difficulties in being able to register with a GP surgery, which is the precursor to getting the Coronavirus (COVID-19) vaccine. The two others spoke after the minister had left, with one voicing his concerns of coming forward for the vaccine due to his insecure status even though he is registered with a GP surgery. The last caller, Simba, spoke about his experience of being charged over £100,000 after experiencing a stroke two years ago and how this example is one of the drivers of fear amongst undocumented migrants, despite Government assurances that COVID-19 vaccination, treatment and testing would be free.

The Minister assured that everyone would be able to receive the COVID-19 vaccine irrespective of immigration status.

Whilst the willingness to engage on this matter represents a fundamental shift from the Government, demonstrating the severity of the pandemic and the need to include everyone in the vaccine rollout, other panelists highlighted the importance of a carefully-directed public information campaign to ensure this information reaches undocumented migrants and those with insecure status. Concerns regarding fears around immigration enforcement were also raised by others on the panel.

We recognise the importance of the assurances made by the Government about COVID-19 vaccine access, in that no person will be denied the vaccine as a result of immigration status. In the week following the 4th February event, this commitment was covered broadly in the media, going some way towards getting the message out to these communities.

As shared in our brief dated 1st February 2021 (sent prior to the panel discussion), our recommendations were as follows:

- **the Government must guarantee that no person will be denied a COVID-19 vaccine as a result of their immigration status**
- **the Government and public health bodies must explicitly state, through a public information campaign, that undocumented/irregularised migrants are included in the vaccine rollout in order to build confidence amongst this population of people**

- **the Department for Health and Social Care must clearly instruct all GP surgeries that immigration status is not required for registration and that nobody, including undocumented migrants, should be turned away from registering as a result of their immigration status;**
- **the Government must provide assurances that NHS data is firewalled from the Home Office.¹**

However, there is a need to address further recommendations to ensure that undocumented/irregularised migrants are able to safely access COVID-19 vaccination confidently, without fear and/or future repercussions. Building trust with migrant communities is essential in the mission to make the vaccination programme as successful and effective as possible.

Next Steps

Inclusion and Data Firewalling

The fundamental rights of migrants to access health (and other public provisions) are protected under international law, yet these rights are often obstructed through exclusionary policies and data-sharing practices that exist between public institutions and immigration enforcement, with tragic consequences. For example, in the UK at the start of the pandemic, a Filipino man, known only as Elvis², died from COVID-19 as he feared accessing healthcare services in the event that this would lead to immigration enforcement. In Spain, the mortality rate of undocumented migrants rose by 15% after restrictions to accessing healthcare were introduced³, with access restored in 2018, after which deaths then decreased.

The introduction of ‘Firewalling’ – preventing the sharing of information— between public service provision and immigration enforcement, allows undocumented migrants to feel safer in accessing their basic rights and improves the capacity of public services to achieve community-wide success⁴. Common examples of how firewalling may assist the broader aims in communities include encouraging cooperation from migrants when they

¹ A similar suggestion was made to Minister of Future Borders and Immigration Kevin Foster by David Davis MP, giving the example of Ireland:

<https://hansard.parliament.uk/Commons/2020-03-23/debates/85919174-3726-42C1-A751-93788ADB2045/TopicalQuestions#contribution-7567243B-71D9-4373-8BC6-8DD39E517307>

² *Undocumented migrants dying of coronavirus because they're too afraid to seek help, MPs and charities warn*, The Independent, 2020

<https://www.independent.co.uk/news/uk/home-news/coronavirus-undocumented-migrants-deaths-cases-nhs-matt-hancock-a9470581.html>

³ *Migrants in Spain are dying after losing healthcare access*, infomigrants.net, 2018

<https://www.infomigrants.net/fr/post/9224/migrants-in-spain-are-dying-after-losing-healthcare-access>

⁴ *The Case for ‘Firewall’ Protections for Irregular Migrants: Safeguarding Fundamental Rights*, European Journal of Migration and Law, 2015 https://papers.ssrn.com/sol3/papers.cfm?abstract_id=2780641

may have witnessed a crime; or encouraging migrants to feel confident in following public health guidance such as accessing tests, emergency care and vaccines in response to public health threats, like a pandemic. Firewalling allows all individuals to participate in civic society regardless of their immigration status, thus making the whole community safer.

This rationale has informed the introduction of firewalling in other countries. In Sweden⁵, a robust firewall has meant that emergency healthcare is free for all without any need to provide documents. Rules of confidentiality for citizens have been extended to include non-citizens, therefore ensuring that undocumented migrants can access emergency healthcare without fear. During the COVID-19 pandemic, Ireland has recognised the need for the inclusion of undocumented migrants in relation to social, welfare and health care – demonstrated by the elimination of data sharing between service providers and immigration officers⁶.

GP Surgeries Registration

Registration at a GP surgery is a necessary requirement in order to access a COVID-19 vaccine. With significant numbers of undocumented migrants discouraged from registering with their local GP,⁷ registration remains a focal point for the direction of any meaningful efforts towards vaccine equity for those who are undocumented or have insecure status. Barriers to registration are often located within the surgeries themselves, with evidence of undocumented registrants being turned away for a variety of inconsistent reasons, such as not having photo identification or proof of address.⁸

The unpredictable nature of GP registration processes are indicative of inaccurate information amongst primary healthcare staff and their management regarding the health entitlements of undocumented migrants. While some doctors' might have a strong commitment to the health and confidentiality of their patients⁹, without clear and widely-distributed guidance for GP surgeries, this potentially life-threatening obstacle will remain for undocumented migrants. Whilst the NHSEI's 'Everyone is welcome in general practice' initiative¹⁰ is a step in the right direction, undocumented migrants are not specifically named.

⁵ "Firewall": A tool for safeguarding fundamental rights of undocumented migrants, PICUM, 2020
<https://picum.org/firewall-tool-safeguarding-fundamental-rights-undocumented-migrants>

⁶ Statement on the Upcoming EU Pact on Asylum and Migration, PICUM, 2020
<https://picum.org/statement-on-the-upcoming-eu-pact-on-asylum-and-migration/>

⁷ Migrants deterred from healthcare during the COVID-19 pandemic, The Joint Council for the Welfare of Immigrants, 2021
<https://www.jcwi.org.uk/Handlers/Download.ashx?IDMF=fa346f70-cb08-46c1-b366-9a1f192ff4f3>

⁸ Registration Refused: A study on access to GP registration in England, Doctors of the World, 2017
https://www.doctorsoftheworld.org.uk/wp-content/uploads/import-from-old-site/files/Reg_Refused_2017_final.pdf

⁹ GPs register migrant patients as 'no fixed abode' to block Home Office, 2017
<https://www.gponline.com/gps-register-migrant-patients-no-fixed-abode-block-home-office-tracking/article/1431129>

¹⁰ Everyone is welcome in general practice, NHS, 2020
<https://www.england.nhs.uk/blog/everyone-is-welcome-in-general-practice/>

Building Bridges: It's About Trust

The Government's recently-published plan¹¹ clearly accepts that it is necessary to build bridges with vulnerable groups who may not access information easily. Migrants are often unaware of the healthcare they are entitled to due to a lack of information and some migrant communities, including those who are undocumented or with insecure status, have been reported as having a lack of trust in NHS services during the COVID-19 pandemic due to historical, present and perceived data sharing practices for immigration enforcement purposes – such as enforced removals or deportations¹².

In order for information from healthcare providers to be trusted, the dissemination of essential communication through charities, voluntary organisations, friends, family, and local communities has been recommended as an effective approach.¹³

“I am so afraid to put my name on the government website...[if]...the Home Office find out, they'll use it against me. I can't trust the Home Office because they don't trust us.”

Undocumented migrant, UK

While the Government itself are to run a public information campaign¹⁴ concerning access to vaccines, many undocumented migrants and their communities do not trust the Home Office and other public bodies due to justifiable fears resulting from Government policies introduced in the last decade.

An example of a partnership recommended by the NHS can be seen in the Primary Care Network (PCN) 'Safe Hubs' established in the London Borough of Lewisham by community primary care group *One Health Lewisham*, in collaboration with *Doctors of the World* and *Lewisham Food Banks*. The hubs allow GP practice managers and reception staff to overcome the undocumented migrants' fear of being traced by the Home Office by registering them at a hub address.¹⁵

Funding has been recently allocated to Community Champions, but with no reference to migrants, let alone undocumented migrants and those with insecure status.¹⁶

¹¹ *UK COVID-19 vaccine uptake plan*, UK Government, 2020

<https://www.gov.uk/government/publications/covid-19-vaccination-uptake-plan/uk-covid-19-vaccine-uptake-plan>

¹² *Beyond the data: Understanding the impact of COVID-19 on BAME groups*, UK Government, 2020

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892376/COVID_stakeholder_engagement_synthesis_beyond_the_data.pdf

¹³ *Access to healthcare for people seeking and refused asylum in Great Britain*, EHRC 2018

<https://www.equalityhumanrights.com/sites/default/files/research-report-121-people-seeking-asylum-access-to-healthcare-evidence-review.pdf>

¹⁴ *Coronavirus public information campaign launched across the UK*, UK Government, 2020

<https://www.gov.uk/government/news/coronavirus-public-information-campaign-launched-across-the-uk>

¹⁵ *OHL Safe Hub - Lewisham protocol for registering migrants*, One Health Lewisham, 2020

<https://onehealthlewisham.co.uk/ohl-safe-hub/>

¹⁶ *Community Champions to give COVID-19 vaccine advice and boost take-up*, UK Government, 2021

<https://www.gov.uk/government/news/community-champions-to-give-covid-19-vaccine-advice-and-boost-take-up>

Whilst it is a positive step that the government is supporting front line charities like Doctors of the World to translate COVID-19 resources into over 60 languages, it is vital that the government use all possible channels of communication to ensure that both NHS staff and undocumented migrants are informed in order to accelerate GP registration for those who aren't registered and vaccine uptake for those who are.

“Vaccine amnesty is a trap.”

Undocumented migrant, UK

For a population of people that continue to live in fear and on the margins of society, it will take a concerted effort and fundamental shift in how both Government and civil society view and interact with undocumented migrants in order to make people feel safe, and included, building trust both in the short-term and long-term.

Beyond COVID-19

The COVID-19 pandemic has highlighted the pre-existing inequities in the UK, especially of those living on the margins of society. Without support, undocumented migrants and migrants with insecure status—including those seeking asylum—will continue to experience multiple risks even as the rest of society recovers from this crisis.

Providing people with tools for survival works better when people are confident to access these tools in the first place and in an equal manner to the rest of society. The risks to lives and livelihoods will continue as long as there is an at-risk population of people living

“No one is safe until everyone is safe.”

World Health Organisation

in the UK who, despite being part of British society with many having lived here for many years, have limited rights and barriers in accessing support when needed.

Looking to the future, the risk of further pandemics remains significant¹⁷. As the UK looks to manage this risk, it is important to recognise the impact that underlying conditions and health inequities have had on hospitalisation and death during the COVID-19 pandemic. Pandemic-proof public health policy of the future will focus on the long term management and prevention of conditions throughout every community.

With the structural barriers faced by undocumented migrants having been highlighted even more during this pandemic, lessons can be learned from COVID-19 to ensure that all members of every community are taken into account in public health planning. Overall public health can improve by removing the structural barriers faced by undocumented migrants.

¹⁷ *IPBES Workshop on Biodiversity and Pandemics*, IPBES, 2020

https://ipbes.net/sites/default/files/2020-12/IPBES%20Workshop%20on%20Biodiversity%20and%20Pandemics%20Report_0.pdf

Recommendations

Following the discussion Regularise held with the Minister for COVID Vaccine Deployment on the 4th of February, the feedback we have received from those with lived experience of being undocumented and those who work with them suggests that the Government must build confidence and trust with these migrant communities and individuals who continue to live on the margins of society.

We have developed a new set of recommendations with this in mind:

- **A complete firewall between NHS data systems and the Home Office must be initiated, as in other countries, such as Sweden and Ireland.**
- **All staff at GP surgeries must be directly instructed, as a matter of priority, that neither proof of identification, immigration status nor address are required for registration, and that no one must be refused registration for not being able/willing to provide any of this proof, in line with the NHSEI's 'Everyone is Welcome Here' Initiative. GP surgeries must also highlight this on their websites.**
- **Public information campaigns must be widened by the Government, providing resources to trusted community groups and migrant specific community leaders in each local authority, reaching populations of undocumented migrants and migrants with insecure status so that they understand their rights and are reassured regarding data sharing.**
- **A guarantee to indefinitely remove barriers to healthcare for undocumented migrants, such as in Spain, must be made to improve the overall health of the population and in preparedness for future pandemics.**

"These are dark days, but they are not without hope. We have a rare and short window of opportunity to rebuild our world for the better. Let us use the pandemic recovery to provide a foundation for a safe, healthy, inclusive and more resilient world for all people."

António Guterres, United Nations Secretary-General

About Regularise

Regularise are a grassroots collective of migrants, British citizens and allies campaigning for the UK government to implement a regularisation scheme for all undocumented migrants and migrants with insecure status in the UK.

The regularisation scheme must allow undocumented migrants who have lived in the UK for at least 5 years to be able to apply for settlement (Indefinite Leave To Remain) and those who have lived here for less than 5 years to be given a 'right to remain' similar to the pre-settled status in the EU Settlement Scheme that will allow them to apply for settlement after they reach the same period of 'continuous residence' (5 Years).

Regularising undocumented migrants will grant these marginalised members of British society some fundamental rights including being able to work and access housing safely, and access health services without fear. This will mean that they can live with dignity and participate in society fully. Regularising undocumented migrants will ensure that they gain a safe, lawful and defined route to settlement in the UK.

You can read more on our FAQs: <https://regularise.org/about/#faqs>