

COVID-19 testing and vaccines

What's working for people facing homelessness?

In July 2021, we carried out 134 interviews with people experiencing homelessness in five locations across the country. In this summary, we cover people's experiences of accessing COVID-19 tests and vaccines, and what's working best so far.

Aims

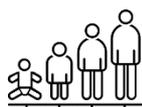
1. To ensure people's voices and experiences directly feed into the system; preventing serious illness and death from COVID-19.
2. To address data gaps on how people experiencing homelessness have accessed and experienced COVID-19 testing and vaccinations.

Who this is for?

- Commissioners
- Policy makers
- Local authority decision makers
- Homelessness and healthcare services

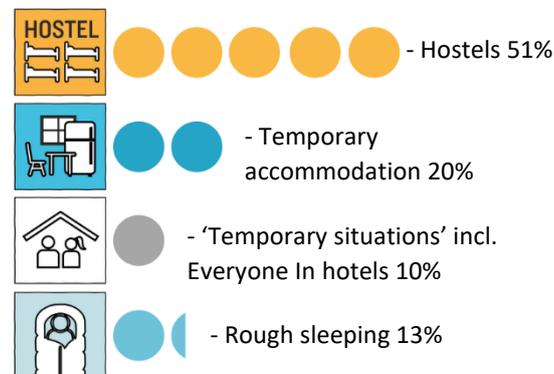
Who took part?

Gender:



Age: A range of age groups took part. The largest was those aged 31-40 (40%)

Living in:



Context

Anyone experiencing homelessness in England was in a priority group (group 6) to have the vaccine from March 2021. At the time of research, this group had been a priority for approximately five months

Findings from [our research into the impact of COVID-19](#) raised significant issues around the stark health inequalities people experiencing homelessness continued to face during the pandemic.

High levels of COVID-19 transmission were reported in institutional settings, including hostels, with a need for appropriate controls to be maintained or enhanced within these



[settings](#). The majority (77%) of participants said they had not contracted COVID-19, some (14%) were unsure but had experienced symptoms, and a smaller number (8%) had had confirmed COVID-19 with a positive test.

Throughout 2021 Groundswell and partners have been working together to gather and monitor the ways in which local authority areas across the country are rolling out the vaccine for people experiencing homelessness to feed back to key decision-makers.

However, data on the uptake of the vaccine amongst the homeless population is still inconsistent and not readily available. This research aims to address some of the gaps.

Key findings - vaccines

Experience:

- The majority of participants had been offered a vaccine (96% of those in hostels and 82% of those who were rough sleeping)
- Nearly 7 out of 10 (69%) had had their first vaccine dose.
- Nearly a quarter of participants (23%) chose not to be vaccinated based on mistrust of Government, doubts of its efficacy, or concerns it would be detrimental to their health.
- Over 5 out of 10 (55%) had had their second vaccine dose at the time of interviews.
- Vaccinations took place in hostels, hotels, prisons, hospitals, GP surgeries and various pop up or mobile vaccination points. Hostels were often preferred as they were deemed easier to access. A few people suggested that they probably would not have received the vaccine had it not been offered in the hostel. People indicated that places for receiving the vaccine should be “local” and “safe”.

Access:

- One fifth tried to get the vaccine but were unable due to barriers such as competing priorities, digital barriers, lack of address, mental health issues, public transport, lack of income, immigration status, and language and literacy barriers.
- Most participants did not need to show ID or NHS number. Some were unconcerned with sharing personal data, others were worried about invasion of privacy or stigmatisation.
- Adverse experiences of vaccines were often characterised by a mistrust of professionals, lack of support and pressure to be vaccinated.
- Less than two thirds felt that support was available for accessing vaccines and that lack of appropriate support risked deterring people.
- Where reported, most people had safe places to recover from the vaccine.
- Few reported severe side effects but there is a concern that these could influence decisions on the second vaccine dose, especially alongside a lack of information.

Information:

- Over 6 out of 10 (63%) felt they had received sufficient information on vaccines.
 - 3 out of 10 (30%) felt there was not enough information.
 - Participants said they searched the internet or found information through TV.
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Key findings - testing

Experience:

- More than two thirds (68%) of participants had been tested for COVID-19, mainly in hostels, prison, and hospitals but also in airports, testing centres, chemists or online.
- However nearly a third (30%) had not been tested
- In prison, there were pressures to test. Reporting symptoms could lead to isolation.
- Testing was often a pre-condition for accessing hostel accommodation.

Access:

- Four out of five (79%) knew how to access tests
- Nearly one out of five (19%) were unable to access tests despite wanting them
- The barriers to access included digital barriers, competing priorities or health issues, language and literacy barriers and discrimination.
- Those who needed support to access testing stated hostel/daycentre staff and key workers assisted them.

Information:

- More than two thirds (67%) felt there was enough information on testing
 - Nearly a quarter (24%) felt there was a lack of information on testing, especially for people who were rough sleeping.
 - Most preferred non-digital testing information including posters, billboards, and leaflets.
 - Many wanted more verbal information and the opportunity to talk to people about queries or concerns.
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What works

1. Clear, appropriate, and accessible information about testing and vaccines

- Particularly non-digital information and the opportunity to discuss any concerns with someone in advance
- Make information locally tailored/adapted
- Highlight that vaccines and testing are free and people have a right to access them
- The presence of professionals to talk through any concerns can also help, especially where there are language or literacy barriers
- As a result of this insight, we have created a winter health guide for people experiencing homelessness, [free to download here](#).



2. Make sure access to testing and vaccinations is flexible and timely

- Go to homelessness settings using outreach or in-reach models to improve uptake, instead of expecting people navigate services that often have inbuilt barriers to good healthcare.

3. Ensure people **have informed choice and have time to make decisions**, without feeling pressured or forced. There **is also a role for peer workers** who may be in a trusted position to offer support and information ([see our video for more information](#)).

4. **Efforts to communicate** with people experiencing homelessness, reduce hesitancy and do outreach, learning from what works, should continue, **as part of general health services**.

Here are some examples of what Groundswell's frontline Caseworkers have found to be effective in supporting access to vaccine take up:

- **Co-ordinated work with partners:** work on the ground with staff known and trusted by the people we work with and for.
- Having a quick **introductory chat** about how people are feeling and their health in general, and in some areas including what Homeless Health Peer Advocacy [LINK] offers and how to access it.
- **Providing clarity** on the vaccination offer (what/where/when/how to get there) and a gentle ask about whether people have been vaccinated yet or not.
- Ideally **offering a health event** hosted by a local trusted service that includes wider health promotion and checks, the offer of vaccination, foodand a bit of fun!
- **Listening** to what people say about any hesitancy they may have, acknowledging and respecting person concerned. **Tailoring response** as appropriate.
- **Respecting individual choices;** offering health advocacy whatever their choice.
- **Learning** from what works and what doesn't, **trying out new things**.
- Staff, peers and advocates **modelling what is being offered** (and demonstrating survival of vaccination) by being open and honest, sharing their own experience of vaccination, including any initial nervousness they may have had.

More resources

- [Free winter health guide](#) for people experiencing homelessness.
- [Vaccine video](#) for frontline workers sharing experiences of 'what works'.
- [Vaccine information leaflets](#) for people experiencing homelessness (scroll down).
- [Testing information leaflet and poster](#) for people experiencing homelessness.
- [Blog:](#) How we rolled out the COVID-19 vaccine quickly with North West London Homeless Health Partnership.
- [#COVIDstories:](#) read raw reports from people experiencing homelessness during the pandemic.
- More information on [Homeless Health Peer Advocacy \(HHPA\)](#).
- ['My right to healthcare' cards](#) – free to order for services thanks to NHS England.