

There was never going to be a one size fits all approach when it came to encouraging COVID-19 vaccine take-up among people experiencing homelessness but a good place to start is by listening to homeless people and not being afraid to share one's own experience, write Groundswell's Beryl Cross and Becky Evans.

COMING TOGETHER TO ENCOURAGE VACCINE TAKE-UP



By **Beryl Cross**, Vaccine Caseworker and **Becky Evans**,
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WHERE DID IT BEGIN?

In December 2020 the COVID-19 vaccination was a topic dominating society: who was going to get the vaccine first? How could someone get vaccinated? Amongst colleagues and people across the country working in homelessness and inclusion health (IH), we knew there were some key issues that would deepen the inequalities people impacted by homelessness experience:

- If the 'call' for your vaccine was coming from your GP, what did this mean for the people [not registered with one](#)?
- The first vaccine to be approved (Pfizer-BioNTech) needed to be stored in ultra-low temperature freezers, suggesting people would need to go to large vaccine sites to receive their vaccination – how this was going to be coordinated was unknown.
- The full vaccination is two doses with 8-12 weeks between first and second dose. Managing appointments twice presented a real challenge with a transient group of people.
- The information required to receive a vaccine – address, ID; many people who are homeless don't have these or, if they do, have had bad experiences sharing this personal information with 'authority'.

The solution was never going to be simple, there was no one size fits all approach when it came to vaccinating people experiencing homelessness against COVID-19; what worked for one person was going to be different for another. Services and systems worked differently in London and across the country.

For Groundswell's [Homeless Health Peer Advocacy \(HHPA\)](#) service in London, it made sense to use our peer-led advocacy model (supporting people to access healthcare delivered by people with experience of homelessness) and our existing relationships with homelessness accommodation settings, outreach teams and health inclusion teams to play our part in the vaccine rollout.

BRINGING THE VACCINE TO PEOPLE EXPERIENCING HOMELESSNESS

For the first five months people from these different organisations worked together, using a combination of outreach and in-reach. The priority was going to where the people were, on the streets, in hostels, in hotels. Groundswell's [short video](#) and [accompanying document](#) highlights what we found worked when bringing the COVID-19 vaccine to people experiencing homelessness. Key tips focus on: 'the power of the peer'; honesty; relationships; time; logistics; and information – this only happens when we all work together.

As a Caseworker, I find what's working best is a general introductory chat with the person: building a rapport quickly after the first "hello," introducing myself and what Groundswell does, listening until the person has finished whatever they want to say and answering questions.

After taking up the dare to have a quick ‘boogie’ by one of the vaccine hesitant clients I was chatting to, he said “oh well, let’s seize the day then!””

When going into the places where people are staying (e.g., hostels), a good relationship with the staff running the service is crucial. When they can provide us with a list of people who have been vaccinated, how many doses they have had and a list of those who are unvaccinated, we don’t have to ask people for information they’ve probably given several times before.

One of the top tips I was given by my peers when I joined Groundswell a couple of months ago was to be honest about my own experience –

it’s what creates that trust and connection. As a Vaccine Caseworker I am fully vaccinated, and I tell people this. Incidentally I’m in my sixties and of small build. I mention the latter because more than once the response by clients has been to look me up and down, laugh, and say maybe they’ll consider vaccination. One person’s response was: “well f*** it then, if you’ve had it [the vaccine] and survived..!”

OVERCOMING BARRIERS AND PROVIDING INFORMATION

Having the vaccine is not a simple decision for many. The different reasons people have told me about their hesitancy in having the full vaccination include, being scared about how to cope with possible side effects whilst sleeping rough, a belief in various conspiracy theories, experiencing side effects after their first vaccination, and “because I’m homeless I’ve had to fight off lots of things” or “I haven’t had it so I’m immune”.

A chance to discuss concerns with a Groundswell Peer Advocate or Caseworker, a nurse or trusted key worker, gives people the time and space to consider their options. Nothing beats conversation, building relationships, and a shared understanding. Just as important is ensuring people have information to make an informed decision. Information about COVID-19 restrictions and the vaccine were (and are often still) dominating mainstream news – guidance was often contradictory, making it hard to separate fact and fiction, and written in long, complicated formats. This was an issue as many people experiencing homelessness have poor literacy skills, live with disabilities such as dyslexia or autism or do not have English as a first language.

Groundswell has become a trusted, accessible and relevant source of information about the pandemic; [producing leaflets](#) on how to protect yourself and others when rough sleeping or living in shared accommodation, explaining the ever-changing restrictions, and producing guides on how to manage issues such as benefits, an alcohol addiction or mental health during the pandemic. We were fortunate to receive a grant from [Direct Relief](#) to produce information about the vaccine as well as to deliver vaccine specific outreach and advocacy work. We created [six guides](#) about the COVID-19 vaccine – answering key questions and explaining how it works, how it was developed and how to access it. These were made available in seven languages (including English, Polish, Romanian and Arabic). We find these leaflets helpful to leave with people after we have had initial conversations about the vaccine. In the past five months we have been able to send over 17,000 copies of these leaflets to organisations supporting people experiencing homelessness across the country.

WHERE ARE WE NOW?

In England 'Freedom Day' (where all legal restrictions were lifted) was on 19th July 2021 which coincided with rising COVID-19 cases. There was concern amongst [Public Health England](#) and organisations across the sector that people experiencing homelessness were at increasing risk of COVID-19 due to the combination of a lack of restrictions, people's poor health putting them at high risk of becoming seriously ill, and the fact that a large proportion of people are still not fully vaccinated. We're finding that many people are simply becoming suspicious and fed up with the constant focus on the offer of a vaccination, not seeing it as a priority or necessity.

In London it feels like many of the people who wanted to be vaccinated against COVID-19 are; along with our partners we are primarily working with people who say they do not want to be vaccinated. We're reframing our outreach approach as we move into the "new normal," especially as some services such as day centres are opening properly for the first time in over 16 months. We're continuing to build on what we've learnt and what worked to ensure the most suitable support is provided during this next phase – building trust and working in partnership.

We're working with nurses, homelessness accommodation/service providers, our Peer Advocates (as well as DJ's, hairdressers and many more!) to tie in our health outreach with broader events. At these events you can get the COVID-19 vaccination, but that isn't the overarching message. People can see nurses for health checks on any issues, enjoy food, and socialise with peers in a safe environment. The sole focus is not the COVID-19 vaccine, this seems to be working well and as a result there is a good vaccine uptake from the events.

One of the top tips I can offer for these events as a Caseworker supporting people affected by homelessness is to be prepared to join in with every aspect of partnership events and don't hold back! For example, a great event hosted by a day centre in London included vaccinations with no questions asked or booking required, other health checks with a nurse, as well as lunch, music and dancing. After taking up the dare to have a quick 'boogie' by one of the vaccine hesitant clients I was chatting to, he said *"oh well, let's seize the day then!"* Then he got up from his seat and asked me to accompany him to have his COVID vaccination.

WHAT'S NEXT?

We'll keep listening to people experiencing homelessness – hearing their concerns and responding to these in the best way we can; whether that is by giving more information, having a chat with them or getting a nurse or other medical professional to answer questions.

We're trialling evening outreach, to reach people who may typically be more present during this time due to work, health or addiction. Typical street outreach teams often work during the evening or in the early hours, so it makes sense to work with them and to use their knowledge.

We'll also keep working in partnerships. The work achieved throughout the pandemic is because of partnerships. Everyone put 'normal' barriers and ways of working aside to collaborate, learn from our varying expertise and do what we needed to do. We're going to trial more of the events in different parts of London; everyone has the right to good health and to access healthcare, the vaccine is one of many examples.

Find out more about Groundswell on our website or by following us on Twitter @ItsGroundswell.

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