

Migration and Covid-19 : New and continuing concerns with South Africa's response to the pandemic

Summary of issue brief #4 : Key concerns and recommendations
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Key concerns

- **The exclusion of non-citizens from South Africa's preparedness plans and responses to the current Covid-19 pandemic and the various socio-economic and psychological impacts of the lockdown.** This has and continues to affect documented and undocumented migrants, refugees, asylum seekers and internally displaced persons (IDPs), including children and young people, formal and informal migrant workers, migrant sex workers and LGBTIQ+ migrants, asylum seekers and refugees.
- **The exclusion of those who are undocumented from the vaccine roll-out** and failure on the part of the Department of Health (DoH) to implement a legal firewall to protect those who are undocumented from the Department of Home Affairs (DHA) at vaccination sites.
- **The lack of engagement with migration in health system and social development responses.** The implications of the lack of migration-aware and mobility-competent policies and programmes prior to the pandemic have been exacerbated during the current pandemic response. Non-citizens face challenges accessing preventative and curative healthcare services, in addition to facing challenges accessing Covid-19 vaccines.
- **Difficulties in accessing documentation in order to regularise movement and stay.** The restrictions associated with the Covid-19 pandemic have resulted in multiple challenges for non-citizens, including asylum seekers, who need to access and/or renew their documentation. Although blanket extensions have been issued and an online renewal system has been created for those with asylum and refugee permits by DHA, many non-citizens are not covered by these responses. The inability to access documentation limits access to healthcare, education, food parcels, banking services, unemployment benefits, social grants, and, at times, freedom of movement.
- **Interruptions in established disease control programmes and access to treatment for chronic conditions, including cross-border initiatives addressing malaria, HIV and TB.** This has implications for the management of malaria, HIV and TB with negative implications for individuals and communities.
- **Ongoing xenophobia and xenophobic violence** has been reported throughout the pandemic and has been inadequately addressed by the South African government.
- **The closure of international borders and even provincial borders** (with the exception of the transportation of goods, and formalised repatriation programmes by in-country consulates and

embassies) **creates challenges for those whose livelihoods and access to food are dependent on mobility.** At the time of writing (October 2021), most travel restrictions have been removed. However, concerns remain about the continued use of travel restrictions and border closures in responding to the pandemic.

Ways forward

The Covid-19 pandemic has exacerbated many of the challenges that non-citizens already faced in South Africa, in addition to creating new ones. Consequently, the following recommendations build on a significant body of literature on the importance of migration-aware and mobility-competent health systems that developed prior to Covid-19, in addition to work conducted specifically on the Covid-19 pandemic. Recommendations have been organized by stakeholder and are followed by specific recommendations for the vaccine roll-out.

Department of Home Affairs

- Work with the DoH to develop and implement a legal firewall around Covid-19 health services, including vaccines, so that non-citizens can safely access care and the vaccine without fear of arrest.
- Ensure that future blanket extensions for visas and permits are adequately communicated not only to affected non-citizens, but also to other government departments, services providers, and employers.
- Ensure that other government departments, service providers, and law enforcement are aware of what asylum and refugee documentation issued through the online system looks like so that refugees and asylum seekers are not incorrectly accused of having fraudulent documentation and denied services.
- Issue an amnesty for those who are currently undocumented, and provide avenues for non-citizens, including asylum seekers, to either renew their documentation or apply to regularise their stay.
- Reopen Refugee Reception Offices (RROs) and DHA offices for immigration services.
- Put corrective measures in place to respond to police harassment, deportation, and corruption from DHA officials related to the blanket extension of expired documents and online renewal processes.
- Work with DoH to test and vaccinate detainees and deportees for Covid-19.
- Reassess the efficacy of border closures as a response to the spread of Covid-19, particularly in relation to the adverse effects it has on local economies.
- A moratorium on detention and deportation for immigration offenses is needed due to the inability of many to regularise their stay in South Africa at this time and as conditions of detention and deportation continue to be conducive to the spread of Covid-19

Department of Health

- Work with the DHA to develop and implement a legal firewall around Covid-19 health services, including vaccines, so that non-citizens can safely access care and the vaccine without fear of arrest.
- Ensure that those without documentation, including undocumented non-citizens, have access to the Covid-19 vaccine.
- Implement outreach strategies within migrant communities and provide those who are particularly mobile or hard-to-reach with vaccines that only require one dose.

- Ensure frontline health providers are up to date regarding recent directives from DHA, including the blanket extension of documents, so that non-citizens are not turned away from vaccination sites or healthcare facilities.
- Ensure that testing and care for Covid-19 remains accessible to non-citizens, including through outreach strategies.
- Given the effect that the pandemic has had on routine healthcare and continuity of care for chronic conditions, it is imperative to engage in outreach strategies to provide healthcare to those who have not been able to access services due to the pandemic.
- Ensure that non-citizens are correctly means-tested in line with the Uniform Patient Fee Schedule when accessing care.
- Work with DHA to test and vaccinate detainees and deportees for Covid-19.
- Develop a National Migration and Covid-19 Task Team (NMCTT) to ensure that current and future responses to the pandemic are migration-aware and mobility-competent.
- Bilateral and regional collaboration is needed between Departments/Ministries of Health in the region to ensure that vaccination rollouts are synchronized and that vaccine certificates issued across the region are accepted in South Africa.
- Improve communication about the vaccine, its importance, and the ways in which non-citizen populations can access it. Such efforts should use community and religious leaders, in addition to leveraging local organisations and fora like Migrant Health Forums.

Department of Social Development

- Ensure that barriers non-citizens face when trying to access the Social Relief of Distress (SRD) grant and Temporary Employer-Employee Relief Scheme (C19 TERS) are resolved.
- Ensure that future grants – including the proposed Basic Income Grant – include all in South Africa, regardless of nationality or immigration status.
- Include non-citizens, regardless of immigration status, in social housing programmes.

Civil society

- Engage collectively with all government departments to ensure that all departments implement migration-aware and mobility-competent policies and programming.
- Funders and donors should consider adapting their approach to ensure that civil society organisations can use funding to assist those without documentation and that organisations can be flexible and responsive in their programming.

Recommendations specific to the vaccine roll-out

On 25 August, MiCoSA held a High-level dialogue on vaccine access for migrant and mobile populations. The dialogue brought together nearly 40 participants, under Chatham House Rule, representing various sectors including government departments, international organisations, civil society groups and researchers. The results of the dialogue are framed in five take home messages that South Africa's covid-19 vaccine program needs to consider, these are:

1. Be cognisant of the xenophobic climate in the country:

- Non-citizens have been turned away by nurses and site administrators, reportedly due to being foreign nationals. This cannot be tolerated and clear communication is needed from the NDOH to this effect.
- However, ensuring that non-citizens are included in the country's vaccination programme should not draw unnecessary attention to migrant populations:
 - Approaches that separate non-citizens from citizens are not recommended, rather **non-citizens must be integrated into existing responses.**



- **Networks trusted** by non-citizens should be actively involved in supporting vaccination registration and roll-out. This includes:
 - Community leaders, religious organisations, and NGOs
 - Community Health Workers who understand the dynamics within the communities that they serve
 - NGOs and CSOs who work with migrant and mobile communities
 - Migrant Health Forums – Ehlanzeni, Musina, Waterberg, Johannesburg
 - International organizations including UNHCR and IOM

2. Improve communication for vaccination teams and non-citizens

- Communication of current and future policies and system changes **to vaccine roll-out teams** is imperative – including about policies and legislation regarding the rights of non-citizens to access the vaccine.
- Communication in appropriate languages **about the vaccine is needed to counter misinformation.**
- **Communication in appropriate languages about the ways in which non-citizen populations can access the vaccine** is needed.

3. Engage bilaterally and regionally on complementary vaccination programming across SADC

- **Synchronised regional programmes** are needed, including **clear communication about what vaccine certificates (will) look like** from other countries to avoid non-citizens being accused of fraud if they accessed their vaccine elsewhere.
- **Cross-border spaces are key sites for vaccine roll-outs:**
 - These are areas in which many mobile and migrant groups are found
 - Healthcare workers are often well-equipped to understand the needs of migrant and mobile groups in these areas and how to reach them
- What happens in SA has implications for the region and SA needs to be cognisant of this in its approach to integrating non-citizens, specifically those who are undocumented, in the roll-out in the coming months.

4. Develop and implement a legal Firewall

- Inter-departmental communication and collaboration between the NDOH and the DHA is key to implementing a **respected legal firewall that ensures undocumented non-citizens or those with expired documents can access the vaccine** without facing any penalty.
 - This should include an agreement that the DHA will not access vaccination sites and that staff at vaccination sites should provide services regardless of documentation status

5. Work with the DHA to improve access to documentation

- **Fear of being arrested is a key deterrent to accessing vaccines**
- **Timely access to documentation is a key priority for non-citizens**
- The reopening RROs and DHA offices are key

The full brief can be accessed at mahpsa.org alongside others in the series.

