

# Homeless persons and migrants in precarious housing conditions and COVID-19 pandemic: peculiarities and prevention strategies

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**Abstract.** – Homeless persons and migrants in precarious housing conditions are vulnerable populations that have been peculiarly impacted by the Coronavirus Disease 19 (COVID-19) pandemic. These populations are more at risk of contracting COVID-19 as they often find it difficult to adhere to public health directives and, if exposed, may be more susceptible to illness or death due to the higher prevalence of underlying physical and mental comorbidities compared to the general population. In addition, vulnerable populations may have limited access to essential diagnostics and treatments, thus leading to untreated COVID-19 cases and their development into more severe forms. Health, social and government agencies should collaborate to develop services that support these communities, in accordance with the World Health Organization principles. Migrant and homeless centers have a central role, as they provide a significant contribution to prevent infection spread and favor access to early medical treatment to those affected, thus preventing more severe forms of infection.

*Key Words:*

SARS-CoV-2, COVID-19, Migrants, Homeless, Vulnerable populations.

## Introduction

Homeless persons and migrants in precarious housing conditions represent fragile populations that have been peculiarly impacted by the recent Coronavirus Disease 19 (COVID-19) pandemic<sup>1,2</sup>. These populations often find it difficult to adhere to public health directives and are more at risk of contracting COVID-19 for environmental and individual characteristics. If exposed, they

may be more susceptible to illness or death due to the higher prevalence of underlying physical and mental comorbidities and other risk factors compared to the general population and because of the increased difficulty to access health care providers<sup>3-5</sup>. In addition, periods of lockdowns with closure of regular services may represent for people experiencing homelessness and migrants a further difficulty in retrieving food and fulfilling other basic life needing, and put them at risk of other harms, such as those related to unsafe substance use and partner violence. These periods may also lead to complete abolishment of any source of income such as occasional jobs, panhandling or sex work<sup>3</sup>.

### *Factors that Characterize the Different Impact of COVID-19 on Vulnerable Populations*

Several factors characterize the different impact of COVID-19 on people experiencing homelessness and migrants in precarious housing conditions. Standard recommendations to prevent COVID-19 may be difficult for these people to follow. They include frequent hand washing with soap and water for at least 20 seconds; avoidance of close contact with others maintaining an adequate interpersonal distance; the use of personal protective equipment (PPE) such as face masks when in crowded places; and the awareness of COVID-19 symptoms and measurement of body temperature if symptoms develop<sup>6,7</sup>.

Vulnerable people have less possibilities to protect themselves from contagion because of lack of face masks, limited access to soap and hand-sanitizing devices, and scarce adherence

to the maintenance of interpersonal distance<sup>4</sup>. In addition, people experiencing homelessness and migrants in precarious housing conditions often live in congregate settings that may favor contagion, where the spread of Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2) may be rapid and the detection of illness delayed because of limited access to healthcare and social services<sup>2</sup>. Also, they may be part of communities in which social distancing is not accepted or considered as a protective method. Last, mental health disorders, such as depression, anxiety and violence, that are more diffused among vulnerable populations, can be exacerbated by the current pandemic<sup>4,8</sup>.

### ***COVID-19 May be More Severe in Vulnerable Populations***

In case of contagion, SARS-CoV-2 may have a more serious effect on vulnerable populations such as homeless people and migrants. This is mainly due to the underlying poor health conditions, such as hypertension, cardiovascular disease, diabetes, other chronic illnesses or compromised immune system that are commonly found among these people and may favor a more aggressive form of disease<sup>9</sup>; in addition, a significant percentage of people experiencing homelessness are > 65 years, and this may exacerbate the risk of developing severe forms of COVID-19<sup>10</sup>. Also, they may suffer from drug and alcohol addiction that worsen general health status<sup>2</sup>.

People experiencing homelessness and migrants in precarious housing conditions have limited access to essential diagnostics and treatments, thus leading to untreated COVID-19 and its development into severe forms. In fact, screening and treatment services such as primary care clinics may be less accessible for these populations because of economic and social factors that prevent them from referring to healthcare facilities<sup>11</sup>. Last, those suffering from mental illness may have difficulty in recognizing the threat of SARS-CoV-2 infection and its early symptoms, thus representing a vehicle of infection for others<sup>12</sup>.

### ***Recommendations to Avoid Contagion and Limit Infection Spread Among Vulnerable Subjects***

People experiencing homelessness and migrants in precarious housing conditions should follow some recommendations to avoid contagion and correctly and timely treat SARS-CoV-2 infection. They include avoidance of crowded places such as public transportation, meal cen-

ters and congregate living environments for the night without adequate protection; be informed of contagion prevention guidelines; correct use face masks and awareness of their importance; knowledge of COVID-19 symptoms and seek for medical advice if present. Last, if they have a suspect of SARS-CoV-2 infection (onset of symptoms, close contact with infected people), they should stay in a place where they can be isolated from other people to prevent infection spread. The latter may be difficult, as these people often do not adhere to self-isolation or quarantine<sup>12</sup>.

### ***The Role of Health Departments and Homeless and Migrant Centers***

Health departments should be aware that homeless people and migrants in precarious housing conditions are particularly vulnerable groups and should adopt protocols to prevent infection among these populations and immediately treat those infected<sup>13</sup>, focusing their interventions on individuals' health as a whole in accordance with the main objective of the World Health Organization's "Leaving no-one behind" principle of the 2030 Agenda for sustainable development goal<sup>14</sup>.

In details, health departments should identify non-congregate settings where vulnerable people can stay, limiting unsecured living settings and live-on-the-street conditions; distribute PPE and educate vulnerable people to basic rules to prevent contagion and protect themselves and others in their community; encourage people living in encampments or other congregate living facilities to increase interpersonal distance and provide hygiene resources; perform screening programs using rapid and standard serological tests and nasopharyngeal swabs to early identify infected individuals, and isolate/treat them; and develop alcohol programs, overdose prevention support and access to opioid antagonist therapy programs for those who need them<sup>13</sup>. Furthermore, it would be advisable that health departments favor the use of mobile health units and design appropriate interventions to reach vulnerable populations in the city suburbs, thus breaking the wall of mistrust between marginalization and institutions, followed by the development of specific paths to treat and follow up vulnerable people in local healthcare facilities.

Similarly, homeless and migrant centers should perform some basic activities to prevent infection among their guests. They include immediate screening of newly admitted individuals for

SARS-CoV-2 infection using rapid serological or molecular tests and daily evaluation of the presence of fever or other potential COVID-19 symptoms such as respiratory difficulties, hyposmia or anosmia, and fatigue<sup>15</sup>; provide all guests and operators with face masks and instruct them on basic recommendations to prevent contagion; provide adequate distancing in rooms and common environments; follow all prescribed rules for disinfection and protection of their guests and operators; and facilitate access to medical care as needed<sup>13</sup>.

Homeless and migrant centers serve a critical function and should stay open, as they can significantly contribute to limiting the spread of the infection among these vulnerable populations.

### Conclusions

People experiencing homelessness and migrants in precarious housing conditions represent vulnerable populations that are more susceptible to contracting SARS-CoV-2 infection, they may spread it in their communities, and can develop more severe forms of COVID-19 that may not receive adequate medical treatment. Health, social and government agencies must collaborate in a coordinated approach to develop services to support these communities. The role of migrant and homeless centers is crucial, as they can provide a significant contribution to prevent infection spread and favor access to early medical treatment to those affected, thus preventing more severe forms of infection.

### Conflict of Interest

The Authors declare that they have no conflict of interests.

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