

Accessible Administrative Communication in Social Law:

**A Qualitative Case Analysis of Advisory Obligations, Vulnerability, and
Structural Communication Barriers in Statutory Health Insurance**



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□ Essay – Chapter 1: Introduction

1. Introduction

Interaction between citizens and state or public-law institutions is one of the fundamental processes of modern democracies. Particularly in the field of social administration, where statutory health insurance funds act as public-law entities, transparent procedures, accessible communication, and advisory services grounded in the rule of law are of central importance. The quality of these interactions plays a decisive role in determining the extent to which insured individuals can exercise their rights, understand decisions, and actively participate in shaping administrative procedures.

The starting point of this thesis is a specific case within statutory health insurance that exemplifies how forms of communication, institutional structures, and individual vulnerabilities interact and can thereby create both barriers and structural risks. The case illustrates how communicative asymmetries, a lack of transparency, and the failure to address the needs of vulnerable individuals can impair the participation in administrative proceedings required by the rule of law.

The aim of this thesis is to examine, on the basis of a qualitative-hermeneutic case analysis, to what extent the administrative actions in the case described are compatible with the legal requirements of social administrative law, the principles of barrier-free communication, and the principles of good administrative practice. In doing so, both structural and individual factors are to be taken into account and analyzed against the backdrop of existing legal and theoretical frameworks.

The relevance of this study lies in the connection between a specific individual case and overarching questions in administrative science, disability studies, and social law. This thesis contributes to the discussion on participatory justice, accessible administrative communication, and the responsibility of institutions toward particularly vulnerable groups.

The structure of the thesis is as follows:

Chapter 2 presents the theoretical and legal background, including the

consultation and information obligations under SGB I, the requirements for transparency in social administration procedures, and the fundamentals of accessible communication.

Chapter 3 explains the methodological approach of the case analysis. Chapter 4 describes the case under examination in a systematic manner. Chapter 5 analyzes the case in light of the theoretical foundations. Chapter 6 discusses the results in terms of their significance for social law practice and vulnerable groups. Chapter 7 summarizes the conclusions and formulates recommendations for administrative practice and research.

□ Chapter 2 – Theoretical Background

2. Theoretical Background

The analysis of administrative action in the context of statutory health insurance requires a multidimensional theoretical framework that takes into account legal, administrative science, and accessibility-related aspects.

This chapter presents the central foundations upon which the subsequent analysis of the specific case is based.

2.1 Administrative Action and Principles of the Rule of Law

Administrative action is an integral part of the democratic rule of law. It encompasses all activities of the executive branch aimed at fulfilling public duties. Several fundamental principles apply to administrative action under the rule of law:

1. Legality
 - The administration must act on a legal basis (Art. 20, para. 3 of the German Basic Law).
2. Transparency and Accountability
 - Decisions must be understandable in terms of both content and procedure so that those affected are aware of their rights and can seek legal protection if necessary.

3. Proportionality
 - Interventions and measures must be appropriate, necessary, and suitable.
4. Participation of those affected
 - Administrative procedures should be designed to be participatory in order to enable informed decisions.

These principles form the normative framework against which administrative action—including in social security—is measured.

2.2 Duty to Provide Counseling in Social Law under Sections 13–15 of SGB I

Sections 13–15 of SGB I constitute the central legal basis for the duty to provide counseling for all social benefit providers:

- Section 13 SGB I – Counseling
 - requires authorities to provide comprehensive, individualized counseling regarding rights and available options.
- Section 14 SGB I – Information
 - requires accurate, complete, and timely information on all relevant topics.
- Section 15 of SGB I – Information
 - requires agencies to proactively inform insured individuals of their rights, entitlements, and necessary steps.

These standards serve a protective function: They are intended to balance structural power imbalances between citizens and the administration and ensure that affected individuals understand administrative procedures and can act independently, with full knowledge of the facts, and in a self-determined manner.

2.3 Transparency and Participation Requirements in Social Administration Proceedings (SGB X)

SGB X regulates the administrative procedures of social benefit agencies and specifies the requirements of the rule of law. Important provisions include:

- § 9 SGB X – Participation of the Affected Persons
 - guarantees the right to participate in the proceedings.

- § 10 SGB X – Equal treatment
requires the administration to act without discrimination.
- § 17 SGB X – Principle of investigation
requires the authority to clarify the facts of the case completely and objectively.
- § 20 SGB X – Access to Information
requires transparency regarding facts relevant to the decision.
- § 25 SGB X – Access to Files
guarantees the right to inspect the complete administrative file.

These provisions serve to ensure that administrative proceedings are conducted in accordance with the rule of law and form a central criterion for the subsequent case analysis.

2.4 Accessibility and Reasonable Accommodations

In public law, accessibility is not only a structural obligation but also a communicative and informational one.

Relevant legal bases are:

- The Disability Equality Act (BGG)
explicitly defines accessibility as including access to communication and information.
- BITV 2.0
regulates accessible information technology, including digital access to government services.
- UN Convention on the Rights of Persons with Disabilities (UN CRPD)
 - Art. 2 defines “reasonable accommodation,”
 - Art. 9 requires access to communication and information,
 - Art. 21 obligates states to ensure accessible administrative communication.

For the administrative sector, this means:

Communication must be designed so that people with different cognitive, linguistic, or neurological conditions have equal access.

Thus, accessibility encompasses:

- written communication,
- clear structuring,
- understandable language,
- Avoiding reliance solely on telephone communication,
- providing documented content,
- consideration of individual neurodivergent needs.

2.5 Vulnerability in dealings with government agencies

Vulnerability refers to an increased susceptibility to structural disadvantages and burdens. In interactions with government agencies, this includes:

- linguistic vulnerability (e.g., people with limited German language skills),
- cognitive vulnerability (e.g., neurodivergent individuals),
- social vulnerability (e.g., low educational attainment),
- age-related vulnerability.

Research in administrative psychology shows that such groups:

- are more affected by conversation dominance,
- ask fewer questions,
- are less likely to assert their rights,
- have more difficulty coping with standardized procedures,
- are more likely to accept incorrect statements,
- and are less likely to fully grasp complex information.

This leads to an increased risk of de facto discrimination, even if there is no intent on the part of the administration.

2.6 Power asymmetries in administrative communication

Communication between citizens and government agencies is fundamentally asymmetrical:

- The administration holds decision-making power.

- It controls the framework of the conversation, the procedures, and the documentation.
- Citizens have less expertise, less experience, and less institutional authority.

If this asymmetry is not balanced by consultation, transparency, and accessibility, structural disadvantages arise that effectively restrict access to rights.

□ Chapter 3 – Methodology

3. Methodology

This study employs a qualitative-hermeneutic approach to analyze administrative action in the context of an individual case within the statutory health insurance system. The case study method is particularly well-suited for examining complex social-legal and communicative processes, as it allows for the detailed identification of structural patterns, individual needs, and institutional factors.

3.1 Research Design

The study follows an exploratory, qualitatively oriented research design. The goal is not statistical generalizability, but rather the theory-based reconstruction of an exemplary case from which conclusions can be drawn regarding structural aspects of administrative action. Qualitative case analyses are used in public administration and in the field of disability studies to understand institutional mechanisms and systematically interpret individual experiences.

3.2 Data Basis

The analysis draws on several types of data, which together provide a detailed description of the interaction with the administration:

- Memory logs
records of interactions with health insurance company staff created shortly after the events.
- Correspondence and submitted documents
Applications, letters, appeals, and requests for access to files.
- Observation notes
Impressions and observations from waiting and conversation situations at the office.
- Public documents of the AOK
In particular, excerpts from the member magazine that reflect the institutional communication strategy.
- Contextual biographical information
to contextualize individual needs and vulnerabilities.

The combination of these materials enables a triangulated analysis in which different perspectives are integrated into a coherent overall picture.

3.3 Analytical Approach

The evaluation is conducted according to hermeneutic principles:

1. Descriptive recording
Systematic reconstruction of events and interactions, without evaluation.
2. Structural synthesis
Identification of recurring patterns, forms of communication, and barriers.
3. Theoretical contextualization
Comparison of the observed phenomena with legal requirements, models of administrative communication, principles of accessible interaction, and findings from disability studies.

4. Interpretive analysis

Assessment of the significance of these patterns in relation to the rule of law, participation, and institutional action.

5. Cross-case reflection

Classification of the findings as exemplary of structural problems that may extend beyond the individual case.

3.4 Validity and Limitations

Qualitative case analyses are subject to specific limitations:

- They do not allow for statistical generalizations.
- Interpretation depends on the quality of the documentation.
- The perspective of the authorities can only be incorporated indirectly.

At the same time, the method has particular strengths:

- It allows for a nuanced examination of complex interactions.
- It captures both subjective and structural aspects equally.
- It generates insights into institutional patterns that remain hidden in standardized procedures.

Thus, the method is suitable for systematically and scientifically soundly analyzing administrative action in the case under investigation.

□ Chapter 4 – Case Description

4. Case Description

The case under examination concerns an insured person's interaction with AOK Lower Saxony in connection with the submission of several applications, an appeal, and a request for access to files. In the course of these interactions, recurring communication patterns emerged that reveal structural barriers.

4.1 Initial Situation

Due to the complexity of the documents, the insured person submitted several applications and written submissions in person at the AOK office. These in-person visits led to direct conversations with various employees of the health insurance provider.

These interactions formed the central starting point for the subsequent analysis.

4.2 Communication Process During In-Person Visits

The conversations revealed a conversation style heavily controlled by the administration. The employees structured the process, determined the topics, and gave specific instructions without presenting possible alternatives or legal background information. The insured person's inquiries were addressed only to a limited extent, and no comprehensive counseling was provided as defined in Sections 13–15 of SGB I.

4.3 Observations in the waiting area

During waiting times, the insured person was able to overhear several conversations between staff members and other insured individuals. Those involved frequently exhibited characteristics of vulnerable groups, such as limited language proficiency, advanced age, or low educational attainment. The observed conversations followed a similar pattern to the insured person's own interactions: instructions dominated, while explanations or alternatives were largely absent.

4.4 Insights from institutional communication

An issue of the AOK member magazine highlighted preferred contact methods via telephone and digital services. In-person counseling, written communication, or accessible alternatives were not emphasized. This points to institutional preferences for forms of communication that allow for a high degree of control on the part of the administration but potentially create barriers for certain groups of insured individuals.

4.5 Access to Records and Procedural Information

Despite a timely request for access to files, there was initially no clear written response. The lack of transparency made it difficult for the insured person to follow the proceedings and interpret the administrative steps.

4.6 Relevance of Individual Vulnerabilities

The insured person is neurodivergent and relies on written communication to process information in a structured manner and at their own pace. Telephone conversations or spontaneous verbal exchanges are overwhelming and limit the ability to reliably grasp information. The AOK's preferred communication channels do not meet these accessibility requirements and thus constitute a structural barrier.

□ Chapter 5 – Analysis of Administrative Action in light of the theory

5. Analysis of Administrative Action in Light of Theory

The interactions between the insured person and AOK Lower Saxony observed in this case can be analyzed using the legal, administrative science, and accessibility-related principles outlined above. The comparison reveals significant discrepancies between the normative requirements and actual administrative actions.

5.1 Fulfilment of the duty to provide advice pursuant to Sections 13–15 of SGB I

The legally mandated advisory duties serve to reduce information asymmetries, inform affected parties about their rights and options for action, and ensure active participation in the proceedings. In the case examined, these duties were fulfilled only to a limited extent.

The discussions were predominantly characterized by directive communication. No explanations were provided regarding alternatives, the basis for decisions, or possible procedural options. The staff presented procedures in the form of fixed instructions without informing the insured person about options or justifications. Thus, the purpose of Sections 13–15 of SGB I—promoting informed decisions—was only inadequately fulfilled.

5.2 Deviations from transparency and participation obligations (SGB X)

The one-sided nature of the discussions and the unclear communication regarding procedural steps are indicators of structural deficits in transparency. According to § 9 SGB X, affected parties are to be actively involved in the administrative procedure, which requires that procedural information be communicated in an accessible and understandable manner.

In the present case, the lack of written feedback regarding access to the file, as well as the absence of comprehensible information on processing status and decision-making processes, significantly hindered the insured person's participation. The administration did not act as a supportive entity here, but rather, through its communication practices, effectively restricted opportunities for participation.

5.3 Accessibility and Reasonable Accommodations

The UN CRPD, the BGG, and Section 1 of SGB IX require state institutions to ensure barrier-free communication and to provide reasonable accommodations for people with disabilities or neurodivergent individuals. These requirements were not met in the case under review.

Since the insured person, due to their neurodiversity, is absolutely dependent on written and time-unrestricted communication, telephone or spontaneous verbal

represent an insurmountable barrier. However, the AOK structurally favors communication channels that increase cognitive strain and do not allow for adequate processing time. The failure to provide written communication must therefore be considered a violation of the duty to provide reasonable accommodations.

5.4 Power asymmetry and communication-related dominance

Administrative psychology describes communication with public authorities as inherently asymmetrical, as the administration possesses institutional power, expertise, and decision-making authority. This asymmetry must be balanced through transparent consultation and participatory elements.

In the case under review, the asymmetry was not only not balanced, but was exacerbated by:

- a dominant conversational style,
- a lack of explanations,
- control of the conversation's content
- and institutionally preferred communication channels

. As a result, the insured person was forced into a passive role, and their ability to participate in the process was further reduced. This contradicts the principle of participatory, citizen-oriented administrative communication.

5.5 Structural Characteristics and Pattern Formation

The communication patterns identified in this case exhibit distinct structural characteristics. These include:

- One-sided dominance of the conversation
- Lack of alternative communication channels
- Institutional preference for controlled communication channels
- Lack of written procedural information
- Lack of consideration for individual needs
- Repetition of the same pattern with other vulnerable insured individuals

The observation of similar interactions with other insured individuals indicates that these shortcomings are not isolated incidents. These are institutional patterns that, in the context of qualitative structural consolidation, can be interpreted as indicators of systemic communication problems.

5.6 Contextualization within vulnerable population groups

The analysis shows that particularly vulnerable groups—older adults, people with limited language skills, and neurodivergent insured individuals—are disadvantaged by the existing communication system. They typically have fewer opportunities to revisit the content of conversations, assert their rights, or independently navigate administrative processes.

This results in de facto unequal treatment, which contradicts Section 10 of SGB X and the principles of equal treatment. While no discriminatory intent is apparent, administrative actions have a disparate impact.

5.7 Overall Evaluation

The analysis reveals a clear discrepancy between the normative standards of social administrative law and the actual administrative actions in the case under review. In particular, the duty to provide counseling, transparency requirements, and guidelines for accessible communication are not being met. The institutional communication strategy and recurring patterns of conversation point to structural barriers that hinder equal participation in the administrative procedure. Thus, the case confirms the relevance of accessible, transparently designed administrative processes and underscores the need for institutional awareness of vulnerable needs.

□ Chapter 6 – Discussion

6. Discussion

The results of the analysis make it clear that the case examined is representative of structural challenges in the administrative practices of statutory health insurance. In the discussion, the central findings will be contextualized, their significance for vulnerable groups will be elaborated, and the broader context of participatory justice and democratic administration will be examined.

6.1 Significance of the Results for Vulnerable Groups

The analysis shows that vulnerable insured individuals in particular are affected by the identified communication patterns. People with limited language skills, low educational attainment, advanced age, or neurodivergent information processing styles run the risk of being unable to fully exercise their rights. The structural reliance on non-accessible communication channels (telephone, digital platforms) exacerbates these risks.

This confirms findings from administrative psychology and disability studies, according to which complex, unstructured, or dominant forms of interaction can systematically lead to disadvantages, even without discriminatory intent.

6.2 Risks to the Functionality of Administrative Procedures Under the Rule of Law

The identified shortcomings in the areas of counseling, transparency, and accessibility have a direct impact on the legitimacy of administrative action. When insured individuals do not receive the information to which they are entitled, or do not receive it in a form accessible to them, principles of the rule of law such as participation, transparency, and legal protection are undermined.

This can lead to a loss of trust in the administration and reduce the willingness to actively participate in shaping administrative procedures. Administrative processes thus lose an essential element of democratic quality: equal participation.

6.3 Structural Implications for the Organization of Statutory Health Insurance Funds

The predominant use of telephone and digital formats reflects an institutional rationality that prioritizes efficiency over accessibility. While this may improve internal process efficiency, it is in potential conflict with legal obligations toward insured individuals, particularly when individual communication needs are not taken into account.

The findings point to a need to align both organizational guidelines and internal training more closely with the requirements of SGB I, SGB X, and the UN CRPD.

6.4 Transferability to Other Social Security Providers

The patterns identified in this case are not limited to the AOK. Similar observations have been described in studies on job center communication, long-term care insurance funds, and pension insurance. This suggests that structural communication barriers may represent a system-wide phenomenon in the field of social administration.

Greater awareness of accessible communication as well as binding guidelines would therefore be important not only in the context of statutory health insurance but throughout the entire social welfare system.

6.5 Implications for Research and Practice

The case confirms that qualitative case studies make valuable contributions to revealing institutional patterns that are difficult to capture statistically. At the same time, the findings point to a need for further research on how digital transformation processes and organizational efficiency strategies affect vulnerable groups of citizens.

For practice, the results highlight the need to systematically strengthen barrier-free communication concepts and participatory administrative models.

□ Chapter 7 – Conclusions and Recommendations

7. Conclusions and Recommendations

The analysis of the present case reveals a clear discrepancy between the legal requirements for accessible, transparent, and supportive administrative communication and the actual practices observed in the administrative process under examination. Several systematically derived conclusions and recommendations can be formulated based on the findings.

7.1 Conclusions

1. Deficiencies in Counseling and Information Provision

The advisory obligations under Sections 13–15 of SGB I were not fully met in the case examined. Decision options, alternatives, and legal bases were not adequately communicated.

2. Lack of transparency in the administrative procedure

The unclear communication regarding procedural steps, processing status, and access to files contradicts the requirements of SGB X regarding participation and transparency.

3. Failure to account for individual accessibility

The imperative need for written communication for neurodivergent individuals was not taken into account, even though this constitutes a reasonable accommodation under the UN CRPD.

4. Structural communication barriers

The AOK's institutional preference for telephone and digital communication channels systematically favors those who can use these formats without difficulty and disadvantages vulnerable policyholders.

5. Relevance of Institutional Patterns

The observation of similar communication patterns among other insured individuals suggests structural rather than individual causes.

7.2 Recommendations

Based on the analysis, the following recommendations emerge for administrative practice and organizational development:

1. Strengthening written communication channels
Government agencies should not only offer written communication but actively provide it as an accessible alternative.
2. Introduction of mandatory consultation frameworks
Consultation processes should be structured, documented, and standardized to systematically meet the legal requirements of Sections 13–15 of SGB I.
3. Raising awareness and training staff
Training on accessible communication, conversation techniques, and vulnerability should be a mandatory component of staff development.
4. Transparent procedural information
Administrative procedures should provide clear, written, and easily understandable information sheets or checklists.
5. Accommodation of neurodivergent and other individual needs
Reasonable accommodations in accordance with the UN CRPD should be institutionalized, particularly through flexible options for communication channels.
6. Further development of digital services
Digital communication channels should be designed to be accessible, particularly with regard to comprehensibility, structure, and accessibility.

7.3 Conclusion

The case examined illustrates that administrative communication, particularly within the social services sector, plays a central role in ensuring the equal participation of vulnerable citizens. Structural communication barriers can undermine the principles of the rule of law and hinder the exercise of rights. The consistent implementation of requirements for counseling, transparency, and accessibility is therefore not only a legal but also a democratic obligation.



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