



Health and the Roma Community, Analysis of the Situation in EU

2nd STEERING COMMITTEE

Minute (2)

PROMOTOR



FINANCING



1. Dates:

22nd and 23rd September 2008

2. Location:

Hotel Novotel.
Athens, Greece.

3. Participants.

Name	Organization
<i>Stefan Panayotov</i>	Health of Roma Foundation (Bulgaria)
<i>Simona Barbu</i>	Roma Center for Social Interventions and studies (Romania)
<i>Petra Szeghy</i>	Partners for Democratic Change (Slovakia)
<i>Sandra Araújo</i>	Rede Europeia Anti-Pobreza. REAPN (Portugal)
<i>M^o Jose Vicente</i>	Rede Europeia Anti-Pobreza. REAPN (Portugal)
<i>Angeliki Tseva</i>	EFXINI POLI (Greece)
<i>Gabriela Hrabanova</i>	Office of the Council for Roma Community Affairs (Czech Rep)
<i>Nuria Serrano.</i>	Fundación Secretariado Gitano- FSG (Spain)
<i>Elena Saura</i>	Fundación Secretariado Gitano- FSG (Spain)

4. Objectives.

- Assess the work done during the first year of the project.
- Adjust the schedule to real dates for implementing the activities foreseen in the project.

5. Briefing of the main issues discussed during the meeting and main agreements achieved

○ 22nd September

The meeting started at 9:00 a.m. with the official welcome by Nuria Serrano (coordinator of the project) who stressed the importance of this kind of meetings to share key factors of the ongoing project among all organisations involved.

She introduced Elena Saura, another colleague from the *Fundación Secretariado Gitano*, who works with her in the monitoring of the present project. Also, all the participants introduced themselves as some of them were new in this meeting.

The first topic discussed during the morning session of the steering committee meeting was the assessment of the work done during the first year of the ongoing Roma Health Programme. Firstly, Nuria pointed out the monitoring actions and the coordination carried out by FSG and later on each participating country presented its work.

As announcement Nuria informed that one Bulgarian partner suspended their implementation of the action due to their several difficulties to go on with this project. The Health of Roma Foundation (HRF – Bulgaria) has assumed the total contribution and grant for Bulgaria to assure the actions and results in this country.

The group agreed in highlighting as main obstacle the adaptation of the questionnaire and survey methods to each participating country. Even if each country has particularities in health determinants of the Roma population it was needed to keep the core questions similar to facilitate the comparison for making recommendations at the European level. Also it is important to remark the situation of the Roma population with the differences and similarities within these countries.

A general overview of the work done up to date is summarised as follows:

- The starting date of the project was 1st October 2007 (as it appears in the Agreement with the PHEA) but the real date of starting was February 2008 with the first Steering Committee (SC) meeting hold in Madrid. Anyhow preparative works were carried out during the first weeks of the year 2008.
- The steering committee is made up of 7 people, one coordinator of each participating country. If any change is made in the team, the coordination must know it to assure the fluent communication and support.
- In the first SC we shared coordination tools:
 - Technical: model of minutes, technical follow up report, evaluation form, etc.
 - Financial: partner's bank details, reimbursement of per diem and transportation costs, time sheet, and financial follow up.
- The team agreed in sending technical report in a bimonthly bases. Anyhow this commitment was not accomplished by all partners. The coordination remarked the importance in having real information on time to give further assistance as needed.
- In all countries the questionnaire is adapted and available in their languages and English. Some countries have skipped out some questions, others have included new ones and some of them have been adapted. The core questions remain similar.
- The national expert groups are made up except in Romania due to communication difficulties with stakeholders.
- Regarding the sample, its definition has been a difficult process due to the lack of data in all countries. At the moment, it has been defined in Bulgaria, Czech Republic, Greece, Portugal and Slovakia. Romania's sample is still missing.
- The field work is ongoing in Portugal and the other countries are in the process of selection and/or training the interviewers.
- The following materials were distributed for the field work research: guidelines for interviewers, data collection sheet and guidelines for the manual check of the survey.

- Related to the dissemination activities the team has participated in workshops, seminars and has written articles in newsletters, magazines, and so on. The leaflet of the project is available in eight languages (English, Spanish, Bulgarian, Czech, Greek, Portuguese, Slovak, and Romanian).
- The web page of the project is on air (even if it is still under construction):
http://www.gitanos.org/european_programmes/health/index.html

In detail, each participating country presented the actions carried out (see Annex 4) referring:

- National Expert Groups: composition, meetings, number of participants, functioning, etc.
- Process to adapt the questionnaire to a final version.
- Definition of the cross-section sample. Number of interviews.
- Training interviewers (training tool kits: guidelines, material...)
- Research field work.

During the afternoon, the schedule of the project was adapted to real dates keeping the deadlines of delivery to the PHEA (see Annex 3).

23rd September

The second day started with the technical and financial reports clarifications. Firstly, we discussed about the technical report requirements on the base of a proposal (see Annex 5).

Mainly, the technical report gathers information on: i) the achievement of indicators; ii) a description by work package on the methodology used, obstacles found, an explanation of any change done on the initial proposal and deliverables (document and annex number); iii) results; and iv) the work programme planned for the following period.

Any publication or product developed in the mark of the project will be sent as annexes of the report.

The financial report was explained following the guidelines received from the European Commission (see Annex 6).

The deadline to submit the interim report (technical and financial) by each partner is 31st October 2008. The report will be delivered in English.

The coordination team from FSG will prepare the general interim report to send to the PHEA on time.

Secondly, it was presented a proposal of structure and contents of the National Survey Reports. With the participant's contribution the proposal content were approved as follows:

- Index
- Introduction
- Methodology
 - Methodological approach
 - Universe of the sample
 - The sample and its design

- Sampling
 - o Fieldwork
 - o Questionnaire
 - o Limitations of research.
- Questionnaire
- Characteristics of the Roma population of the country
 - o Residence of the Roma population
 - o Demographic description
 - Sex structure and age groups
 - Principal occupation
 - Level of studies
 - o Principal household
 - o Care of the minors
 - o Health coverage of the Roma population
 - o Population with difficulties carrying out daily activities
- Health situation. Diseases.
 - o State of health perceived.
 - o Diseases and health problems.
 - o Disability and chronic illness
- Accidents.
 - o Percentage of population affected by some sort of accident
 - o Place where the accident occurred
- Main limitation of the activities.
 - o Percentage of Roma population during the past two weeks has had to reduce or limit their main activity due to some symptom.
- Medicine consumes.
 - o Type of medication
 - o Consumption of medicines (amount)
 - o Self consumption
- Medical consultations.
 - o Time elapsed since the last visit to the physician
 - o Place in which the visit took place.
 - o Main reason for the last visit to the physician
 - o Ownership of the last visit to the physician (private, public)
 - o Medical assistance not attended (causes)
 - o Child vaccination programme
 - Minors who don't follow correctly the vaccination programme
- Dental visits.
 - o Frequency of visits to the dentist
 - o State of teeth and wheels
- Hospitalisations
 - o Roma population hospitalized in relation with the non-Roma population
 - o Time spent in hospital
 - o Cause of admission
 - o Waiting list to be hospitalized
 - o Type of financing hospitalization
- Use of emergency services
 - o Use of the emergency services (in the previous 12 months)
 - o Frequency of use of the emergency services
 - o Type of emergency services used the last time.
- Preventive action taken by women
 - o Visits to the gynaecologist
 - Percentage of women who have gone to the gynaecologist for a reason other than pregnancy or childbirth
 - Time elapsed since the last visit to the gynaecologist
 - Reason for the last visit to the gynaecologist
 - o Gynaecological tests (cytology and mammography)
- Audition and visual characteristics
 - o Percentage of population with hearing difficulties
 - o Percentage of population with visual difficulties

- Social support
 - Percentage distribution of the population depending on the degree and type of social support it receives
 - Population with deficit of social support
- Lifestyles: consumption of tobacco and alcohol
 - Smokers and non-smokers
 - Alcohol consumers
 - Type of drink and frequency of consumption
 - Roma population with problems of alcohol and other drugs.
- Lifestyles: physical activity and rest.
 - Sleep
 - Physical activity
 - Proportion of Roma who do physical activity according to age group
 - Television usage among minors
- Lifestyles: nutrition.
 - Breastfeeding on Roma children
 - Breakfast
 - Food consumed
 - Body mass index
- Conclusions and recommendations.
- Bibliography.

The deadline to present these national reports will be 30th May 2009. Each participating country will elaborate an extended document (maximum 100 pages) in their own language and the executive summary will be translated into English (at around 10 pages) to facilitate the elaboration of the transnational report.

The deadline to present the national surveys to the PHEA is 25th June 2009 and the coordination team will make the edition for publication purposes.

All products will be published and disseminated among the main stakeholders.

The Transnational Report will remark the common points and compare what is comparable and explain the differences when possible. It will gather the most relevant information of each participating country and will focus on the recommendations at the European level, prioritizing areas of intervention for policy action.

The deadline for delivering the transnational report to the PHEA is 25th October 2009. It means that we have agreed with their contents in advance. Therefore, in the next steering committee to be held in Prague (first week of June 2009), with the results of the national reports, will be the main point of the agenda and discussion.

During the afternoon we put in common the work package 2, dissemination of results. We presented the website: http://www.gitanos.org/european_programmes/health/index.html. The information needed for the different pages was requested to keep the site updated.

For this result (WP2) it was made a general leaflet of the project in all languages (available in: English, Spanish, Bulgarian, Czech, Greek, Portuguese, Slovak, and Romanian). Each partner had disseminated this material among the stakeholder in their countries.

As well, the team has participated in several meetings, seminars, workshops, etc. at a national and local level to inform about the ongoing programme. An article was published in a Portuguese magazine on this topic.

Special mention was done to the participation at the European level in the consultative group "Health and Migration Advisory Group" held in Luxembourg and organised by the Public Health Executive Agency (PHEA) on 25th and 26th February 2008 and in the 2nd Conference of Migrant Health in Europe the last 22 and 23 May 2008, organised by European Public Health Association (EUPHA). Both were important to disseminate the objectives of the project.

We finished the session with a few ideas and expectations of the upcoming Transnational Expert Group meeting. In general, there were how the sample was defined and share the process and information about the discussions in each country of the ongoing survey (obstacles, limitations and opportunities).

6. Main Deadlines

Information for the website: as your earliest convenience.

Delivery to FSG of the interim report (technical and financial) by each partner: 31st Oct. 2008.

Field work research ends and post to FSG: 15th Nov. 2008.

EDIS data processing delivery to each participating country: 15th March 2009.

National reports delivery to FSG: 30th May 2009.

Third Steering Committee: first week of June (Prague, Czech Republic)

National surveys delivery to the PHEA: 25th June 2009

Transnational Report delivery to the PHEA: 25th October 2009.

7. Other issues

We would like to thank the host country for their warm reception and all participants for their effort, contribution and illusion upset to this project and meetings.

Thank you all...

8. Annexes

1. Agenda
2. List of participants
3. Work plan (Schedule)
4. Country by country presentations (power points)
5. Model of the technical report
6. Guidelines for financial justification.