

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

Contract number:

2006 342

Proposal title:

**“HEALTH AND THE ROMA COMMUNITY, ANALYSIS OF THE SITUATION
IN EUROPE”**

Acronym:

ROMA HEALTH

Starting date: **01.11.2007**

Duration of the project: **24 months**

Reporting period: **From 01.11.07 to 31.10.08**

Main partner:

FUNDACIÓN SECRETARIADO GITANO

Number of associated partners: **6**

Total amount of the project: **EUR 611.775,00**

EC Co-funding: **EUR 367.056,00**

First prefinancing payment: **EUR 146.822,40**

Second prefinancing request: **EUR 110.116,80**

Summary

The Roma Community comprises Europe's largest ethnic minority and is generally characterised by the situation of social exclusion it faces. Inequalities in terms of health care and access to health service are one of the main factors contributing to that social exclusion. Despite their glaring visibility, their health conditions are not backed by statistics or reliable updated data. The aim of the project is to have reliable and objective data in regard to the health situation of Roma and the use made of and access to health care resources. This will allow for identification of real needs and the establishment of priority actions. The recommendations produced by the project will set the stage for the development of measures, actions and policies, both national and European, leading to a reduction in the inequalities endured by the Roma in health and favouring their social inclusion.

Main outcomes of the project will be data and analysis of the health situation of the Roma in the partner countries; action proposals and recommendations drafts; comparison of data between countries, awareness-raising of the main stakeholders in the health domain and dissemination of project results.

1st Interim Implementation Report (From November 2008 to October 2008)

The current interim technical implementation report will describe the work carried out and the results obtained during the first year of the ongoing project.

Interim Report

From November 2007 to October 2008

By: FSG

Page 1 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

The input for elaborating this report has been provided by the partners in each participating country (IHF-Bulgaria, EXFINI Poli-Greece, REAPN-Portugal, Romani Criss-Romania, Office of the Council for Roma Affairs-Czech Republic, PDCS-Slovakia and FSG-Spain).

The FSG, as promoter, has coordinated the implementation of the project at the European level and has gathered the following information.

The structure of the present report is as follow:

- I. Objectives and indicators
- II. Development work and methodology
- III. Results obtained to date
- IV. Work programme planned for the following period
- V. Annexes: copies of any product or other relevant output or deliverables of the project to date.

I. OBJECTIVES AND INDICATORS

Specific Objectives		
1. Obtain reliable and objective data about the social/health situation of Roma population in each of the partner countries and the use made of health-care resources available for the mainstream population		
Indicators fixed in the draft	Achievement of indicators	
Reliability of questionnaire / instrument common to all partner countries to be administered in order to carry out the survey, and comprehensiveness of data obtained and compared.	<p>Final questionnaire approved by all participating countries (available in seven languages: 6 local + English)</p> <p>All questionnaires were adapted to local reality (some of them have changed some questions from the core questionnaires and others have added new ones).</p> <p><u>Bulgaria</u>: questions regarding national health and educational system changed (adapted to local reality)</p> <p><u>Czech Rep</u>: questions regarding national health and educational system changed (adapted to local reality). Added 3 new questions regarding death (age and cause)</p> <p><u>Greece</u>: remains the same as the core agreed questionnaire.</p> <p><u>Portugal</u>: remains the same as the core agreed questionnaire.</p> <p><u>Romania</u>: skip out drogues and alcohol consumption questions,</p> <p><u>Slovakia</u>: questions regarding national health and educational system changed (adapted to local reality). Skip out age and added place of alcohol consumption and some drogue questions; and question regarding cause of difficulties in carrying out daily activities.</p> <p><u>Spain</u>: remains the same as the first proposal of questionnaire.</p>	

Interim Report

From November 2007 to October 2008

By: FSG

Page 2 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

Representativeness of the sample in each of the partner countries whom administer the questionnaire to.	<p>Sample defined in each participating country to assure representativeness. The number of interviews done are in:</p> <p><u>Bulgaria</u>: 810 <u>Czech Rep</u>: 800 <u>Greece</u>: 717 <u>Portugal</u>: 360 <u>Romania</u>: tbc <u>Slovakia</u>: 700 <u>Spain</u>: 1500</p>
Inclusion of indicators from studies conducted by national, European and international (WHO) health authorities (minimum 90%) in the information-gathering instrument.	National surveys on health were taken into account to do the present one (Bulgaria, Greece, Portugal, Spain)
Number of stakeholders which receive information produced in the project regarding the social and sanitary situation of the Roma Community and their access to services. Qualitative assessment regarding the utility and interest of this information.	<p><u>Bulgaria</u>: 10 institutions (ERIO, Ministry Health, Eup. Association of Primary Health, Regional Bodies, etc.) <u>Greece</u>: 33 stakeholders <u>Portugal</u>: aprox. 1000 stakeholders (government departments, REAPN members, universities, etc.) <u>Romania</u>: 70 stakeholders (county directions of the Ministry of Health, Regional centres of Romani Criss, human rights monitors) <u>Slovakia</u>: 5 institutions and NGO workers <u>Spain</u>: aprox. 1500 stakeholders at national level (State Council of the Roma Community, Roma entities at national level, Ministry of Health and Consumption, health workers at regional level). <u>International level</u>: WHO, EUPHA, PHEA, etc.</p>
Number of appearances of information related to the results of the Project in public mass media.	<p>Total: 7 Bulgaria: www.sliven.net; www.mighealth.net Portugal: www.reapn.org/proyectos_visualizar.php?ID=69 www.reapn.org/publicacoes_visualizar.php?ID=112 Spain: http://www.gitanos.org/boletines/newsletter_gitanos_org/noticias/26680.html http://www.gitanos.org/boletines/newsletter_gitanos_org/noticias/31546.html http://www.hoy.es/20081118/caceres/comunidad-gitana-tiene-algunas-20081118.html</p>
<p>2. Develop an approximate diagnosis of the social/health situation of the Roma community in each participating country.</p> <p>3. Analyse results obtained in the survey, identifying effective strategies and make recommendations in terms of policy and in terms of health promotion, disease prevention and health monitoring which promote more pro-active measures in improving the standing of the Roma community in the social/health domain and likewise in the orienting the use of resources in each country and at the transnational level.</p>	

Interim Report

From November 2007 to October 2008

By: FSG

Page 3 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

Indicators fixed in the draft	Achievement of indicators
Organization of 4 meetings of group of experts in each country: The number of members in each national working group will be from 5 to 7 and they should represent national, regional and local health administrations, researchers, professionals, NGOs, representative of international organisations active in the countries and members of the Roma community.	<p><u>Bulgaria</u>: 5 members (NGO/institutions/origin balance) 1st meeting: 31.05.08</p> <p><u>Czech Rep</u>: 7 members (NGO/institutions/researchers) 1st meeting: 14.10.08 2nd meeting: 17.10.08</p> <p><u>Greece</u>: 6 members (statistician/researchers/Roma) 1st meeting: 10.06.08</p> <p><u>Portugal</u>: 10 members (researchers/Roma/social professionals) 1st meeting: 09.05.08</p> <p><u>Romania</u>: 5 members (NGO/institutions/researchers) 1st meeting: 18.11.08</p> <p><u>Slovakia</u>: 5 members (researches/statistician/governmental institution) 1st meeting: 30.04.08</p> <p><u>Spain</u>: 14 members (Ministry of Health representatives/Roma entities/researchers/health professionals) 1st meeting: 17.09.07 2nd meeting: 16.10.07 3rd meeting: 28.11.07 National Expert Seminar (Sastipen Va): 28.11.07 (50 participants)</p>
Having recommendations in place and adoption of these recommendations by main stakeholders at national and international level.	<p>In the case of Spain, at national level the recommendations report is already published (August 2008).</p> <p>n.a. for this period for the rest of the participating countries.</p>
Organization of 2 transnational working groups, one per year.	1st Transnational Working Group : 24 th and 25 th September 2008 (Athens, Greece)
Grade of involvement in project activities: ongoing attendance at meetings, drafting of documents. Members from each of the national working groups will participate in the transnational working groups.	<p><u>Bulgaria</u>: 2 members of National Expert Group participated in the Transnational Working Group.</p> <p><u>Greece</u>: 2 members of National Expert Group participated in the Transnational Working Group</p> <p><u>Portugal</u>: 1 member of National Expert Group participated in the Transnational Working Group</p> <p><u>Romania</u>: 2 members of National Expert Group participated in the Transnational Working Group</p> <p><u>Spain</u>: 2 members of National Expert Group participated in the Transnational Working Group</p>

Interim Report

From November 2007 to October 2008

By: FSG

Page 4 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

One national report per country will be produced.	The Spanish edited and published on August 2008.
One transnational report including input from all national reports. – Sastipen Annual Report will be produced.	n.a for this period
Number of regional, national and International organizations and administrations that will receive the diagnosis, intervention strategies and recommendations. (b) Quality and utility assessment of the information produced in the Project.	<u>Spain</u> : stakeholders at national level (State Council of the Roma Community, Roma entities at national level, Ministry of Health and Consumption, health workers at regional level). n.a for this period for the other participating countries.
Number of appearances in the mass media of news related to the results of the project.	n.a for this period
Number of publications or projects including information gathered during the project.	Spain: 2 “Health and the Roma Community” (FSG, August 2008) “Annual Report 2008. Discrimination report” (FSG, December 2008)
Number of invitations received to present the project or its results in events, study centres, universities, etc.	Bulgaria: 14 electronic project leaflet presentation Romania: 1 Spain: 1 European level: 4
Number of stakeholders participating actively in the activities of the project.	<u>Bulgaria</u> : 17 NGO (14 Roma and 3 Non-Roma) <u>Romania</u> : 3 <u>Spain</u> : 2 (Ministry of Health, State Council for the Roma Community made up of Roma entities and the Public Administration)

Interim Report

From November 2007 to October 2008

By: FSG

Page 5 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

4. Raise awareness of the key political decision-makers, programme developers and members of the Roma community itself in the need of implementation of measures and strategies designed to improve the situation reflected by data.

Indicators fixed in the draft	Achievement of indicators
One national seminar to be organized in each country with the participation of 50 professionals, representing main stakeholders from private and public spheres: Health administrations	Spain: 3 seminars at regional level (instead of doing one national seminar we have done 3 regionals) among 300 stakeholders. n.a for this period for the other participating countries
Participation of key political members in the national seminars.	In Spain: Mayors, General Director of Health Ministry at national and regional levels.
Organization of one transnational seminar with the participation of 100 professionals from all countries involved in the project, representing main stakeholders in the field of health with Roma community.	n.a for this period
Creation of a webpage containing the actions of the project.	http://www.gitanos.org/european_programmes/health/
Dissemination of project's deliveries among main stakeholders	Information about the project has been sent to the Ministries of Health in the different countries.

Interim Report

From November 2007 to October 2008

By: FSG

Page 6 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

Number of stakeholders participating actively in the activities of the project and qualitative assessment of the utility and opportunity of implementation of the recommendations, depending on the role of each stakeholder.	<u>Bulgaria</u> : 2 members of National Expert Group participated actively <u>Greece</u> : 2 members of National Expert Group participated actively <u>Portugal</u> : 1 member of National Expert Group participated actively <u>Spain</u> : 2 members participated actively (Ministry of Health and State Council of the Roma Community)
Coordination of the project	
Indicators fixed in the draft	Achievement of indicators
Development of Internal management tools	Common questionnaire – data collection sheet Work plan - schedule Template for minutes, evaluation form Technical follow-up report Financial report (excel format)
Organization of 4 Steering Committees (2 per year) having at least one representative from each association involved in the project	1st Steering Committee : Madrid, from 11 th to 13 th February 2008 (xx participants) 2nd Steering Committee : Athens, 22 nd and 23 rd September 2008 (9 participants)
Organization of, at least, 4 coordination meetings at national level within the partner association	<u>Bulgaria</u> : one working meeting of members of national experts group hold in Sliven on 31 st May 2008.
Qualitative assessment of the coordination by each partner at the end of the project.	n.a for this period

II. DEVELOPMENT WORK AND METHODOLOGY

➤ Work Package n°1: Coordination of the project

▪ Work Description and methodology

The *Fundación Secretariado Gitano (FSG)*, as a promoter, has coordinated the actions at European level. The project coordinator, Nuria Serrano, has permanently contacted (via mail or phone) each partner in order to keep a good communication channel for the

Interim Report

From November 2007 to October 2008

By: FSG

Page 7 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

implementation of this project. Moreover, the Steering Committee made up of each national coordinator was the board body to take decisions. At present, two meetings were held.

The steering committee is formed by a representative of each partner entity:

- **Mr. Stefan Panayotov** - Initiative for Health Foundation, Bulgaria. Responsible for the project implementation in Bulgaria;
- **Mrs. Angeliki Tseva** – Exfini Poli, Greece. Responsible for the project implementation in Greece; Greece since August 2008 (previously was Mrs. Ioanna Mpalampani)
- **Mrs. María José Vicente** – REAPN, Portugal. Responsible for the project implementation in Portugal;
- **Mrs. Monika Strakova** – PDCS, Slovakia. Responsible for the project implementation in Slovakia. Currently in charge **Mrs. Petra Szeghy**, as Monika is on maternity leave.
- **Mrs. Gabriela Habranová** – Office of the Council for Roma Affairs, Czech Republic. **Mrs. Gwendolyn Albert** – Life Together, Czech Republic. Responsible for the project implementation in Czech Republic since May 2008.
- **Mrs. Simona Nicoleta Barbu** – Romani Criss, Romania. Responsible for the project implementation in Romania since March 2008
- **Mrs. Nuria Serrano** – Fundación Secretariado Gitano, Spain. Coordinator of the project responsible of the area of Health at FSG

1st Steering Committee: Madrid, Spain. 11th, 12th and 13th February 2008.

Objectives

- Identify general partner's situation with regards to the project.
- Discuss main objectives of the project and make a consensus to develop cooperatively those are not clear enough.
- Prioritise and plan actions project.
- Establish a common methodology.

2nd Steering Committee: Athens, Greece. 22nd and 23rd September.

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.

In the first Steering Committee, a battery of tools were presented and approved by all partners. Among them it was a bimonthly technical report to inform everybody else about the progress of the ongoing project at national level.

In the second Steering Committee all partners made an assessment on the progress of the ongoing progress pointed out the constitution of national expert groups, the

Interim Report

From November 2007 to October 2008

By: FSG

Page 8 of 24



particularities of cross sample definition, etc. A common template for the national survey reports was approved and the work plan / schedule for the next year revised.

Regarding these meeting and as agreed the FSG has submitted information and deliverables to the Public Health Executive Agency – PHEA. Also has asked some doubts regarding financial justification.

- Obstacles.

Even if we have agreed in the first steering committee on sending reports bimonthly among partners (to know the ongoing progress of the project), these reports were not received always on time. Nonetheless, the communication with some partners was fluent enough even with some of them as Romania cause difficulties.

It must be mentioned that Czech Republic has many changes in their coordination board.

Bulgaria has mentioned that they would prefer to have more persistent communication via email.

- Explanation of any changes on the initial project.

Initiative for Health Foundation (IHF), a Bulgarian entity, decided to withdrawn from the present Project just after the first Steering Committee and following some discussions at the local level in Bulgaria.

The reason for the retirement was that, between the identification of the proposal and its real start, so many changes occurred in this organisation and up to date they reckon do not have real capacities to carry out the project successfully.

IHF discussed the decision with the other Bulgarian partner of the project – the Health of Romani People Foundation (HRPF) – and they agreed with them to completely implement the Bulgarian part hoping that this will not cause detriment for the success of the project.

➤ **Work Package n°2: Dissemination of the results**

- Work Description and methodology

The dissemination during the period covered by the present report implies the dissemination of the project information. Once the different milestones have been reached, the dissemination will imply project's results.

Dissemination strategy of the Project has included different lines of communication depending on the kind of stakeholder and its role.

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

The communication strategy has been established by all partners always seeking the involvement of all stakeholders. The project's partners have disseminated the information at national level and the FSG has also been in charge of project's dissemination at international level.

We present as follow a summary of stakeholders that have received the project information:

In Bulgaria:

Repeated presentation through project's leaflet-via e-mail to:

Public Bodies: Ministry of Health, European Association of Primary Health Care, National Council for Cooperation of Ethnic and Demographical Issues at Council of Ministries, Sliven's Governor Administration, Health Department of the Municipality of Sliven and Regional Health Centre of Sliven, health workers organisations from Hospitals, Primary Care Health Services.

Non governmental organisation (Roma and non Roma NGOs): ERIO, Initiative for Health Foundation, Integro Association - Razgrad, LARGO - Kjustendil, World without borders association - St. Zagora, Centre for Interethnic Relations – Amalipe - V. Tarnovo, New-generation Romani association - Sliven, Centre for Ethical Relations Tolerance - Haskovo, Together Association - Vidin, Roma Swallows Association - Sofia, CEGA Association, OSF etc.

Private entities: Association of private curative bodies.

Mass media: website -www.sliven.net, Migrant Health website,

Roma Mediators- electronically presentation of the project's leaflet to over 50 Roma mediators throughout the country.

As well the dissemination of leaflets were spread at local level at overcrowded places of Roma quarters such as local administrative structures of directions for social assistance, labour bureau, health care units, coffees, game halls etc.

In Czech Republic:

Presentation of the project at the meeting of the **Governmental Council for Roma** community Affairs, with receiving the support for the work.

Minister for Human Rights and Minorities Džamila Stehliková express publicly the importance of the project. In general she is responsible for the coordination and implementation of all governmental policies on Roma.

Presentation of the project at the meeting of the **Regional Coordinators**. They have the most important role, since they are the links to the regional Romani communities. Romani coordinators are established by the law, therefore they are obliged to collaborate with the governmental office, yet there is also their personal interest to participate.

Distribution of the leaflets at the International Steering Committee in Budapest June 2008.

Interim Report

From November 2007 to October 2008

By: FSG

Page 10 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

The partner Vzájemné soužití is also distributing the flyers at their meeting as well the Governmental office.

In Greece:

The leaflet was send via email to 33 social and medical centres for the Roma community in Greece.

In Portugal:

Presentation of the project by professionals of REAPN to: 18 District Networks of REAPN, within members of REAPN, etc.; National organizations that directly work with the Roma community; the expert group that will monitor the Project and carrying out of the social and health diagnosis of the Roma community.

In the **web** page of REAPN you can find a brief description of the Project in order to disseminate the main activities that will be carried out:
http://www.reapn.org/projectos_visualizar.php?ID=69

Article on the project in REDITEIA nº 40, July / December, pp. 14-15 – December 2008: http://www.reapn.org/publicacoes_visualizar.php?ID=112

In Spain:

In the case of Spain, the dissemination was on the survey results. For this purpose, it was done several regional seminars instead of only one national seminar (health system is decentralised):

They were launched in Barcelona (16.11.07), Valencia (10.12.07), Vigo (12.12.07) and Avila (17.06.07). The results were disseminated among more than 300 stakeholders.

Currently we are still disseminating the results in order to push public administration into action.

Article of the project in the review “Gitanos. Pensamiento y Cultura” nº 45-46, June-October 2008, pp. 56 and dissemination throughout the web page of the FSG:

http://www.gitanos.org/boletines/newsletter_gitanos_org/noticias/26680.html

http://www.gitanos.org/boletines/newsletter_gitanos_org/noticias/31546.html

<http://www.hoy.es/20081118/caceres/comunidad-gitana-tiene-algunas-20081118.html>

At international level:

Venice

On November 29th and 1st December 2007 Elena Buceta (Responsible for the Health Department of the FSG) participated in the seminar “Poverty and Health Technical Consultation” and presented the present project.

Luxembourg

In order to disseminate the launching of the project “Health and Roma Community, Analysis of the situation in Europe” and present their objectives,

Interim Report

From November 2007 to October 2008

By: FSG

Page 11 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

expected results, actions, methodology, and so on, the 25 and 26th February 2008, Inés Cedrón and Nuria Serrano (representatives from *Fundación Secretariado Gitano* - FSG) have participated in the consultative group "Health and Migration Advisory Group" held in Luxembourg and organised by the Public Health Executive Agency (PHEA). Thanks to the meeting they took contact with others organizations who develop projects aiming at the promotion of Roma population in the European countries in order to not duplicate efforts.

Malmö

The Swedish city of Malmö was the city host of the 2nd Conference of Migrant Health in Europe the last 22 and 23 May 2008, organised by European Public Health Association (EUPHA). The aim was to bring together new and innovative research - in particular with a Public Health emphasis.

The European Project "Health and the Roma Community, Analysis of the situation in Europe" funded by the PHEA was presented in a poster session by *Fundación Secretariado Gitano* as promoter of this project.

The main conclusion of the event was the remark of the need to have reliable data disaggregated by sex, ethnic origin, etc. in order to establish priority actions and develop coherent policies.

Meeting with a **WHO** representative:

On 27th October we had a meeting with Gerry McWeeney, SEE Health and Environment Officer of the World Health Organization at the Regional Office for Europe Country Office in Serbia.

As part of the SWIFT programme in Serbia she will perform an assessment of access to health services and knowledge attitude and practices relating to health. Although Serbia is not a part of the EU, it is commencing the accession pathway and as this assessment is a part of her programme she would prefer to use a template that is standardised and produce comparative data with other countries.

With this aim we have sent her the common questionnaire for the European Project Roma Health.

Aiming at the dissemination of the project a **leaflet** was elaborated with general information (objectives, results, methodology...). It has been edited in all languages and distributed among stakeholders in national seminars, workshops and different events. An electronic version was distributed as well.

In order to have updated information about the progress of the project in each participating country, in the month of June it was launched a **website** on Roma Health project: http://www.gitanos.org/european_programmes/health/

▪ Obstacles.

In general terms and concretely in Bulgaria there have had a few difficulties in making contact with central institutions and favouring its involvement. Many have accepted

Interim Report

From November 2007 to October 2008

By: FSG

Page 12 of 24



electronic presentation of the project's leaflet passively –without any comments but without enough will to collaborate more actively.

In Spain due to the decentralisation of the health system it was considered more appropriate to do regional seminars to disseminate the survey results instead of only one national seminar.

➤ **Work Package n°3: Evaluation of the project**

▪ *Work Description and methodology*

An external evaluation company will be hired at the end of the project in order to carry out a more detailed evaluation. The outcome of this evaluation will be based on the perceived effects (qualitative analysis).

In the period covered by this report, only monitoring actions were developed. Different tools were designed by FSG for the follow up of the project (technically and financially), in terms of coordination and implementation of the activities. These should be used at national level and sent to FSG, as coordinating entity, periodically. The monitoring of the project should be done based on the previously defined indicators to be able to measure the success towards the achievement of the objectives.

Besides, at the steering committees and the first transnational report an evaluation form were distributed to know the degree of success and completion of the activities. Some of the aspects evaluated are the degree of participation in activities, methodology used, material distributed, location and facilities.

The present report, as a formal requirement from the PHEA/European Commission, has also been useful for the follow up of the project.

➤ **Work Package n°4: Survey on the socio / health situation of the Roma Community and their access to health services**

▪ *Work Description and methodology*

The initial activities were the drafting of common questionnaire in Madrid (during the first Steering Committee, February 2008) for the survey on the socio/health situation of the Roma population in the partner countries and their access to health services. The survey was designed in order to enable the comparison with the existing data of the mainstream population as a whole and evaluating in a quantitative and qualitative manner the degree of health and social inequity.

The second step was making a final design of the survey including in the methodology chapter and the calculation of a representative sample in each country. Also, it was

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

drafted the instrument for the data collection recording (data collection sheet) which should be adapted to the final questionnaires for all countries.

The FSG as a promoter presented a questionnaire of 138 questions, covering topics such as housing, nutrition, access to health services, use of health promotion and prevention services (vaccination, screening, etc....), separated into 3 sections which covered the areas of health within the family, minors and adults.

As the survey has already been carried out in Spain, we adapted the questionnaire used in Spain by FSG as a working base to come out with a final version standard for all countries.

Therefore **the initial criteria was working from the experience obtained in Spain during 2006**, having 1.500 Roma people being directly interviewed (being the universe, the Spanish Roma community from 0 of age – approximately 670.000 Spanish Roma) obtaining specific information about 1.500 interviewed individuals but also about 1.500 households (average 4.5 individuals in each family, which means obtaining general information on over 6.750 individuals). The data were obtained through **personal and direct interviews** (via anonymous questionnaires) **by outreach workers in Roma households**, according to the distribution of the sample (location size, age and gender).

Different **variables** such as sex, age, Roma cultural group (where applicable), social status, representative sample locations, etc. has been taken into account with a view to selecting a representative sample in each country and experts has been on hand in each country for consultation purposes. The aim is to obtain general data on illnesses, accidents, limitations on daily activities, medicaments consume, medical consultation, hospital stays and emergencies use, cigarettes and alcohol consumption, lifestyle, nutrition and others.

The intention was to come up with a questionnaire obtained from those used in the survey carried out in Spain. The final questionnaire has a core group of questions with represent the majority of them, but also has had space for specific questions applicable to each of the countries according to their specificities.

Each participating country has discussed the questionnaire template and a final version was approved in all of them. Greece and Portugal questionnaires remain the same as the core agreed one. Bulgaria has changed questions regarding national health and educational system to adapt them to their local reality, as well as Czech Republic even if they have added 3 new questions regarding death (age and cause). Romania has skipped out drogues and alcohol consumption questions and Slovakia has changed questions regarding national health and educational system to adapt them to their local reality and has skipped out the question about the age of alcohol consumption and some drogue questions, but they added place of consumption and a question regarding cause of difficulties in carrying out daily activities.

Interim Report

From November 2007 to October 2008

By: FSG

Page 14 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

At the end, final questionnaires were approved by all participating countries and they are available in seven languages: 6 local + English.

Once the **representative sample** was defined in each country and the interviewers trained the research field work started. **Training for interviewers** has been organised in each country focused on methodology and questionnaire administration. A common manual was developed, translated and used during the trainings in all countries.

The **groups of experts** formed in each country on health and the Roma community to monitor the project has contributed in the supervision of the sample definition. They will work on the elaboration of the national survey report based on the information result of the research field work.

At the moment, all participant countries have had expert meetings in order to revise the questionnaire and support the cross sample and universe definition.

Moreover a **transnational expert group** will assist the project and supervise the ongoing survey. Their first meeting was hold in Athens in September 2008 (24th and 25th) with the following objectives:

- Exchanging results on the process of diagnosis of the social/health situation of the Roma community in particular the cross sample definition, universe and methodology of the survey among experts of each participating country.
- Define the structure of the national survey reports and the transnational report.
- Share and clarify details of the guidelines on the manual depuration of data.

Quantitative data collected will be processed statistically to facilitate comparison and analysis, by an external company called EDIS (Spanish firm). Currently, the data is been recorded and once EDIS has the exploitation we will submit it to partners for the elaboration of the national survey report.

In the case of Spain in 2007 made the first exploitation of data and the first analysis in comparison with the National Health Survey results of 2003. The expert group and the health group of the State Council of the Roma Community decided to do another exploitation of the database and make the analysis in comparison with the figures of the National Health Survey results of 2006.

With the results of the first exploitation of data was published the survey “Health and the Roma Community. The situation of the Roma community in Spain in relation with health and the access to sanitary services” (August 2008) with the first recommendations made by the group of experts. Nonetheless, currently with the new exploitation of data it is foreseen to publish another edition at the beginning of 2009.

Interim Report

From November 2007 to October 2008

By: FSG

Page 15 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

▪ Obstacles.

Bulgaria expressed as an obstacle the time lacking for activities implementation and some difficulties concerning prompt e-reaction within the expert's mutual communications.

Greece expressed as difficulty to estimate the Roma population since there is no official data. Therefore, they have used the data from a current research conducted in May to get the necessary information by the Ministry of Health. They decided to hire a statistician to do the representative sample so they started the training of interviewers with delay.

Portugal stated some difficulties. Regarding the **definition of the sample**, for instance, they have had difficulties on the application of the questionnaires in all districts due to the lack of resources (human and financial) and they have had a difficulty in building a representative sample of the District: since there is no reliable data on Roma community in the different districts (e.g. gender, age, etc.).

Regarding the **application of questionnaires**, when it is being applied, there is a tendency from other individuals of the Roma community to concentrate close by the interviewer; this fact creates difficulties to fill up the questionnaire and to the dialogue between both parts (interviewer / interviewee); when explaining to other individuals of the family or community that the questionnaire is only aimed at one person not to the group, family, etc. (to overcome this, the interviewer had to simulate other applications); When questioned about illnesses they tend to answer positively to all... the interviewer has to filter the information....; when obtaining information on the weight and height of the person (most of the times they don't know); Alcohol – they admit its consumption but it is difficult to ascertain the quantity they drink per day (may be because they cannot quantify or feel embarrassed to admit how much they drink).

▪ Explanation of any changes on the initial project.

In relation to Portugal, it was necessary, in a first moment, to collect the number of Roma families living in the country, because this information doesn't exist. This was fundamental to define the sample, but produced a delay in the development of the activities, specially this one. However this delay is not a problem for the well development of the project and they have stated that it's very simple for them to "make up for lost time".

➤ Work Package n°5: Development of proposals and Recommendations for Action

The activities of this work package will be developed during the next period of the project as it is necessary to have the survey results to define a set of proposals and recommendations for action.

Interim Report

From November 2007 to October 2008

By: FSG

Page 16 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

For Spain, once carried out the field work and extracted some early results, a more qualitative work were started aiming at defining the recommendations that would remedy the weaknesses and situations of unfairness identified. This was done through the following:

- The organization of a Group of Experts Professionals.
- The development of the Conference on Health "Sastipen Va," attended by Roma organizations throughout Spain and the Health Group which forms part of the Roma State Council.

Expert Group

The expert group had the following objectives:

- To interpret the results and conclusions of the study "Health and Roma Community".
- Based on the findings of the study "Health and Roma Community", and the interpretations made on them, establish priorities and recommendations for action in the area of health.

This group was made up of 14 professionals belonging to the health and social fields. They were members of the following organizations:

- Ministry of Health and Consumption
- Institute of Public Health. Health Service of Navarra.
- Institute of Public Health. Health Counselling of the Community of Madrid.
- Department of Public Health and Participation. Regional Health Ministry - Junta de Andalucía.
- Sociological research team (EDIS)
- Health Speciality Centre Avenida de Portugal – Madrid.
- Roma State Council (non presential)
- Fundación Secretariado Gitano.

1st Expert Group Meeting: 17th September 2007:

The meeting of the 17th of September was focused on analyzing the structure and contents of the report of the study on health and Roma community, developed by EDIS, which reflects the methodology used to conduct the study, its results and the findings.

Before analysing and evaluating the results of the study, the professionals raised the suggestion with regard to the structure and drafting of the report and the contents of the chapter on methodology.

Regarding the results, the professionals emphasized the data that had been most striking for them and considered the factors that could explain them.

Interim Report

From November 2007 to October 2008

By: FSG

Page 17 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

2nd. Expert Group Meeting: 16th October 2007:

At the second meeting of the group, besides continuing to analyze the results of the study and make contributions to report results, professionals contributed with ideas regarding the organization of the Conference on Health "Sastipen Va."

3rd. Expert Group Meeting: 28th November 2007:

The third meeting was focused on the professional recommendations for the intervention with the Roma community in the field of health.

In this meeting they took the decision of editing a new comparative report with the current data of the National Health Survey results of 2006.

Conference on Health "Sastipen Va"

On the 12th and 13th of November took place in the Ministry of Health and Consumption the Conference on Health "Sastipen Va," organized by Fundación Secretariado Gitano, the State Council of the Roma Community and the Ministry of Health and Consumption. It involved more than 50 professional bodies of twenty-one organizations all around Spain (foundations, associations, federations and platforms).

This conference intended to provide a meeting point and active participation in the social organizations that work with the Roma community, in order to analyze and discuss the state of health of this community at national level. With this aim, throughout the conference were held the following actions.

- Presentation of the progress of research results on Roma community and health, conducted by the FSG within the collaboration agreement between the Ministry of Health and the FSG.
- Presentation of good working health practises, in the field of Roma organizations. A "round table discussion" was organized in which five of the participating organizations presented their programmes.
- Analysis by the participants at the conference, of the results of the study on Roma and health and proposal of strategies and recommendations addressed to intervention in health, with such community. In order to provide participation and data collection of as many potential contributions, the following working groups were organized: i) Preventive practises; ii) Use of health services (emergency) and monitoring of chronic diseases; iii) Consumptions: Alcohol, tobacco and other drugs; iv) Lifestyles: Feeding, physical activity and accident rate.

The recommendations raised by the Panel of Experts and Roma institutions participating in the Conference on Health "Sastipen Va" have been reflected, together with the most significant data from the first operation of the database in "Health and the Roma Community. The situation of the Roma community in Spain in relation to health and access to sanitary services. Conclusions, recommendations and proposals".

Interim Report

From November 2007 to October 2008

By: FSG

Page 18 of 24



- Explanation of any changes on the initial project.

Both the FSG and the Ministry of Health and Consumption of Spain considered essential the involvement of Spanish Roma organizations in the analysis of results and in the definition of recommendations to intervene with the Roma community in the field of health. For this purpose the seminar "Sastipen Va" was developed, a seminar that wasn't originally planned.

➤ **Work Package n°6: Identification of priorities areas to work with the Roma community and development of material**

The activities of this work package will be developed during the next period of the project as it is necessary to have the survey results to define a set of proposals and recommendations for action.

III. RESULTS

The results obtained to date are the following:

- Awareness raising and dissemination actions. Project methodology seeks to involve the greatest number of stakeholders in its actions, raising their awareness of the social/health reality of the Roma population, its needs, how to address the specific needs and certain specific aspects of the Roma community health behaviour and how to improve their access to health-care resources, particularly to health promotion and primary care services. In public spaces, international, central, local institutions and NGOs and at community level.
- Project's leaflet in 7 European languages: English, Bulgarian, Greek, Romanian, Czech, Slovak, Portuguese and Spanish.
- Final tools available in 7 languages to make the research: questionnaire, guidelines for the interviewers, manual check of the survey.
- Identified the cross-section sample: in six of the seven countries of the project (except Romania)
- Interviewers identified and trained to develop the research field work.

In addition to these direct project results the following indirect results must be added:

- Putting the subject of health and the Roma community on national and European institutional agendas.

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

- Promotion and consolidation of cooperation between different institutions on the national level (government, university, health services, NGOs, Roma representatives, etc.) collaborating in the framework of the national working / expert groups.
- On the European level, transnational and inter-institutional cooperation will be fostered between partner entities from the different countries, sharing their work approaches, methodologies and practices.
- Cooperation with international organisations as WHO has been developed and encouraged in order to better manage knowledge and exchange of information.

Interim Report

From November 2007 to October 2008

By: FSG

Page 20 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in
the framework of the Public Health Programme

IV. THE WORK PROGRAMME PLANNED FOR THE FOLLOWING PERIOD (from 1 November 2008 – 31 October 2009)

		2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
	Activities / Months	D07	Jr08	F08	M08	A08	My08	J08	Jy08	A08	S08	O08	N08	D08	Jr09	F09	M09	A09	My09	Jn09	Jy09	A09	S09	O09
	WP1: Coordination of the project																							
1	Steering committees			Mad							Ath									Prg			Mad	
2	Technical report (Bimonthly)											31												
3	Financial report											31												
	WP2: Dissemination of the results																							
4	Project Leaflet																							
5	Leaflet dissemination																							
6	Web page design																							
7	Website management																							
8	Website dissemination						Proj													Res				
9	Participation in Forums																							
10	Contact thematic reviews																							
11	National Seminars																							
12	International seminar leaflet																							
13	Transnational seminar																						Mad	
	WP3: Evaluation of the project																							
14	Monitoring actions																							
15	Mid-term evaluation													doc										
16	Final Evaluation																				ToR			
	WP4: Survey on the socio/health situation of the Roma Community and their access to health services																							
17	Base Questionnaire			13																				
18	National Expert Groups (4 meetings per country)			14																				31
19	Cross-section sample																							

Interim Report

From November 2007 to October 2008

By: FSG

Page 21 of 24

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



ROMA HEALTH 2006 342

Project funding from the European Union in the framework of the Public Health Programme

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Interim Report

From November 2007 to October 2008

By: FSG



V. ANNEXES

WORK PACKAGE I:

1. Programme **1st Steering Committee** (Madrid, 11-13 February 2008)
 - a. Minute 1st STC
 - b. Programme
 - c. List of participants
 - d. Evaluation forms
2. Programme **2nd Steering Committee** (Athens, 22-23 September 2008)
 - a. Minute 2nd STC
 - b. Programme
 - c. List of participants
 - d. Evaluation forms
3. **Technical tools:**
 - a. Model bimonthly technical report
 - b. Model Minutes
 - c. Time sheet
 - d. Evaluation form
 - e. Interim report template

WORK PACKAGE II:

4. **Leaflets:** English version, Bulgarian version, Greek version, Romanian version, Czech version, Slovak version, Portuguese version, Spanish version.
5. Print screen of the **website** of the project Roma Health:
http://www.gitanos.org/european_programmes/health/
6. **Articles:**
 - Bulgaria:*
Scannergram of media article in www.sliven.net
 - Portugal:*
REDITEIA n° 40;
Print screen of the website of the REAPN where a brief description of the project can be found.
List of organisations which REAPN has distributed the leaflet.
 - Spain:*
Article in “Gitanos. Pensamiento y Cultura” n° 45-46, June-October 2008, pp. 56



Print screen of the website of the FSG where articles of the project appear:

http://www.gitanos.org/boletines/newsletter_gitanos_org/noticias/26680.html

http://www.gitanos.org/boletines/newsletter_gitanos_org/noticias/31546.html

<http://www.hoy.es/20081118/caceres/comunidad-gitana-tiene-algunas-20081118.html>

7. **Poster** of the project: Malmö
8. National and regional **seminars**.

WORK PACKAGE IV:

9. **Final Questionnaires** and **data collection sheet**:
10. **Training guidelines** for **interviewers**
11. **Manual check** guidelines
12. **Methodology: Samples** definition. Bulgaria, Portugal, Czech Republic, Greece and Slovakia.
13. **National Experts Groups**: Bulgaria, Greece, Romania, Czech Rep., Slovakia, Portugal and Spain.
14. **1st Transnational Expert Group** (Athens, 24-25 September 2008)
 - a. Minute 1st STC
 - b. Programme
 - c. List of participants
 - d. Proposal of the template for the National Survey Report
 - e. Evaluation forms
15. **National Survey Report**: Spain

WORK PACKAGE V:

16. Recommendations chapter (National Survey Report): Spain