

Roma Health and Wellbeing Issues in Northern Ireland

Denise Wright

Context – Romanian Roma as A2 nationals

Members of A2 Accession states (Romania & Bulgaria) have been free to come here since joining the EU in 2007.

They only have right of residence in a member state for their first 3 months and can only remain legally if exercising what is called a treaty right as a student, a self-employed person, not economically active and self-sufficient, or with permission as highly skilled workers.

Unless they can prove they are habitually resident i.e. they have a right to reside, they have no access to public funds and can only access emergency health care - not GP services.

Children do however have the right to access to health visiting and school services.

Romanian Roma

- The Roma people originated in northern India and have been known in Europe for nearly a thousand years.
- For much of that time they have been the subjects of discrimination and oppression, culminating in the extermination of half a million Roma in Nazi Europe.
- Mapping of the Roma community was undertaken last year - there are no exact numbers but estimate approx 500 Roma in NI - mainly living in South Belfast.
- Most are Romanian, however some are from Slovakia, Czech Republic and Albania with different entitlements
- Cultural issues – tight community of extended families - frequent disregard for or suspicion of statutory authorities

Barriers to accessing healthcare

- Restrictions due to immigration category
- Restrictions in terms of employment
- Language – requirement for interpreters
- Difficulty in accessing information – poor literacy
- Suspicion of authorities and social exclusion
- Healthcare workers restricted by or unsure of level of responsibility in light of limited rights and entitlements

Healthcare issues for Roma children

- Frequently parents state vaccinations have been given in Romania – but no records and parents don't always know DOB of children
- Lack of registration with authorities -unknown number of Roma children in Belfast
- Some differences between immunisation programmes in NI and Romania
- Difficulty in offering routine health visiting services
- Seasonal returns to Romania and frequent changes of address make follow up difficult

Cont.

- Health and safety issues at home – overcrowding
- Poverty causing some to resort to salvaging food from bins – hygiene issues
- Bottle feeding but no sterilisation – use of cows milk
- Lack of dental care
- Poor school attendance
- Poor uptake of vaccinations and health appraisals in schools

Child protection issues

- Housing – overcrowding – multiple families
- Health and safety issues in the home e.g. fire risk
- Road safety and lack of awareness of stranger danger
- Older children often left to supervise younger children
- Children often interpreting for parents in healthcare situations
- Early marriage and child birth

Healthcare issues for adults

- Poverty, poor diet and living conditions
- Prevalence to lung and heart disease, diabetes, dental caries
- Stress and poverty contribute to mental health issues
- Large families – may be cultural barriers to accessing family planning
- No health screening – late presentation, poor prognosis
- Lack of GP access leads to A&E services being used to manage chronic conditions – unsatisfactory for patients and poor use of resources

Potential ways forward

- Restrictions on A2 nationals will most likely remain in place until 2014
- It is likely that the number of Roma arriving in NI will increase
- Potential to build upon the existing Belfast Roma Education Project at Multi Cultural Resource Centre
- Potential for a multi disciplinary project providing specific outreach services including: educational support; intensive culturally competent health visiting and family support services; English language skills development and support for community development within the Roma community
- Other European countries are seeing success with Roma Health Mediator programmes