



European  
Commission

## 12<sup>th</sup> meeting of the European Platform for Roma inclusion 8-9<sup>th</sup> October 2018, Brussels



### **WORKSHOP FOCUSING ON HEALTH INEQUALITIES ENDURED BY ROMA** **Rapporteur's summary** by Dr Marek Szilvasi

The workshop focused on identifying areas of interventions needed to improve Roma health outcomes. The workshop participants acknowledge that results of recent reviews of the implementation of National Roma Inclusion Strategies, which demonstrated that EU bodies and member states made, among four priority areas, the least progress in the area of Roma health. In this regard, they welcome the decision of the European Commission (EC) to focus an EU Roma inclusion event on Roma health for the first time. The participants point out three clusters of essential issues for EU bodies and member states to consider in developing policies aiming at closing the Roma health gap.

1. Meaningful Roma participation in all stages of the policy process;
2. Sustainability and funding;
3. Measures effectively targeting discrimination and antigypsyism.

Furthermore, the workshop participants urge the EU and member states to adopt an integrated approach, which tackles the challenges in Roma health outcomes in an intersectional manner. They emphasize three specific areas, where such approach would be largely beneficial:

1. Preventive health policies tailored for specific age groups and particular attention to early childhood development – the workshop participants urged the European Commission (EC) to recognize the importance of the age of 0-3 years for the development of child's cognitive capacities and advocated for including an early childhood focus in the EU Roma inclusion policy framework;
2. Preventive health policies with specific gender perspective and particular attention to Romani women and girls;
3. Comprehensible health policies tackling a variety of social determinants of health (i.e. access to public infrastructure and utilities, access to justice, adequate housing, and education).

When it comes to meaningful participation of Roma in health policy process, the workshop participants agree that policy-makers need to account to people directly affected by their policies and that the mechanism of social accountability (evaluation and monitoring) need to be in place. It is also important that EU authorities and member states invest in strengthening and increasing professional capacities of Roma outreach workers as Roma health mediators. In this regard, the workshop participants would like to seek an EC recommendation for member states on making use, formalizing (i.e. integrating health mediating into national occupation registries), and effectively organizing Roma health mediation programs. Finally, the workshop participants stress the importance of investments in trust-building between Roma communities and medical professionals and urged member states to adopt good practice initiatives developed by civil society organizations (i.e. Roma Health Scholarship Program of the Roma Education Fund and Open Society Foundations).

Among the topics in the cluster on sustainability and funding, participants seek more clarification on the post-2020 funding period, especially when it comes to the funding opportunities for improving Roma health outcomes. Furthermore, they express the opinion that the EU should consider allocating funding specifically targeting Roma health in the EU budget (there has not been a single EU funding scheme on Roma health developed in the current funding period). This said, participants also recognize and articulate that the current legal and policy frameworks organizing health systems in Europe (the EU member states as well as the EU accession countries), requires to pass many administrative thresholds conditioning the full access to health care. They urge the EU and member states to invest in eliminating administrative barriers, among them growing conditionality for accessing the health insurance coverage and access to (essential) medicine. The participants express concerns about the current trend in some European countries (i.e. Bulgaria, Romania, and Czech Republic), in which still larger segments of populations find themselves outside the system, with Roma being disproportionately affected by this development.

As for the workshop recommendations on developing and reinforcing measures effectively targeting Antigypsyism and discrimination against Roma, the participants emphasize that responsible EU and member state authorities should invest in affirmative action programs for Roma to enter medical professions (i.e. scholarships and awareness raising among Roma youth). It is also important that Roma inclusion strategies in general and Roma health policies in particular are mainstream into the general policy process. In this respect, member states should use the opportunity when developing general health care reforms, to include provisions explicitly but not exclusively targeting the needs of Roma. Finally, workshop participants point out that EU and member states should use human rights approaches when developing health policies, and Roma health policies in particular. In this respect, the participants ask the EC to consider earmarking funding for EU-wide advocacy coalitions and strategic/impact litigation that aims at identifying structural deficiencies and discrimination potential of member states' legislation, when it comes to Roma.

## **Annex:**

The list of workshop working panels clustered into the sections above:

- (a)** Sustainability and funding
- (b)** EU budget and Roma
- (c)** Universal health care coverage
- (d)** Roma health mediators
- (e)** Racism and discrimination
- (f)** Early childhood development
- (g)** Involvement of Roma in health policy development
- (h)** Health prevention and health education