

# Lessons learned: Supporting the Roma community through Covid-19

## October 2021

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# **About Roma Support Group**

The Roma Support Group (RSG) is a Roma-led registered charity working with Eastern European Roma refugees and migrants. Since 1998, RSG has worked with thousands of Roma families across the UK.

Roma Support Group has developed the following recommendations in conversation with local authorities and community organisations in Bradford, Bristol, Edinburgh, Glasgow, Leeds, Liverpool, Manchester, Newport, Suffolk and Tower Hamlets. We also thank RSG frontline workers and volunteers for their contribution.

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# **Summary of recommendations**

#### Local authorities:

- Continue in-person outreach supplemented with digital communications in community languages
- Bring services to where people are through mobile teams of public health and community workers

- Adapt public health messages to community concerns and services to changing needs, based on twoway communication
- Work with multi-agency networks of local authorities, health professionals and trusted partners
- Work with Roma community champions where possible
- Develop strategies to overcome digital exclusion and barriers to accessing healthcare
- Review whether current service delivery is working for Roma and other migrant communities

#### Government:

- Work with GRT/migrant sector organisations on removing digital and linguistic or cultural barriers to accessing healthcare
- Develop cross-departmental strategy on addressing health inequalities for the Roma population

## **Background**

The pandemic has highlighted the extent of disparity in health outcomes in the UK, and there is considerable evidence to suggest that ethnicity has a strong association to different levels of risk and health outcomes<sup>1</sup>. Though the extent of the impact of COVID-19 on the Roma community is not yet clear, across Europe the Roma population has a significantly shorter life expectancy compared to the non-Roma population<sup>2</sup> and Roma over 65 report a disproportionately high level of chronic disease related problems.<sup>3</sup> In the UK, Roma people often struggle to access health services, and many are not registered with a GP.<sup>4</sup> The disproportionate and unique disadvantages facing the Roma community mean that they may be excluded from services that address the needs of migrant or GRT communities as a whole.

In April 2020, Roma Support Group and partner organisations sent a letter to 29 local authorities with Roma populations, expressing concern for the impact of COVID-19 and outlining our recommendations.<sup>5</sup> The letter sought to address concerns that the onset of COVID-19 would exacerbate the widespread disadvantage experienced by Roma people in the UK.

From the beginning of the pandemic, there has been a lack of recommendations specific to the Roma community in guidance from the Local Government Association <sup>6</sup> and MHCLG <sup>7</sup>. Although the government provided each local authority with a blanket funding package, it was not tied to specific commitments or contained any ring-fenced funding for Roma communities.<sup>8</sup>

Without a centralised, uniform approach there was much variation in how different local authorities responded to the needs of Roma communities during the early stages of the pandemic. RSG received formal responses from half of the local authorities we contacted, and only a handful had made specific efforts to support or outreach to the Roma community. In RSG's previous experience, this is not unusual: few local authorities are aware of their Roma communities, and even fewer have Roma-specific engagement strategies.

Roma Support Group followed up the letter with an online workshop for local authorities and community organisations in May 2021 to share best practice and influence wider policy. The recommendations on best

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/892376/COVID\_stakeholder\_engagement\_syn\_thesis\_beyond\_the\_data.pdf

<sup>2</sup> https://ec.europa.eu/health/sites/health/files/social\_determinants/docs/2014\_roma\_health\_report\_es\_en.pdf

<sup>3</sup> https://ec.europa.eu/health/sites/health/files/social determinants/docs/2014 roma health report es en.pdf

<sup>4</sup> https://academic.oup.com/eurpub/article/28/1/74/4811973

<sup>5</sup>https://www.romasupportgroup.org.uk/uploads/9/3/6/8/93687016/covid 19 roma letter to local authorities.pdf

<sup>6</sup>https://www.local.gov.uk/sites/default/files/documents/COVID-

 $<sup>\</sup>underline{19\%20Suggestions\%20 for\%20 mitigating\%20 the\%20 impact\%20 on\%20 health\%20 inequalities\%20 at\%20 local\%20 local\%20 lovel\%20\%282\%29. pdf$ 

<sup>7</sup> https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/929125/COVID-19 -

mitigating impacts on gypsy traveller communities.pdf

 $<sup>8\ \</sup>underline{\text{https://www.gov.uk/government/publications/covid-19-emergency-funding-for-local-government}}$ 

practice in this paper are based on our information gathering and discussion with local authorities on delivering public health outreach and services to meet the needs of Roma communities.

## Survey on the experience of Covid-19 for the Roma community

Roma Support Group (RSG) conducted a questionnaire between February and April 2021 to assess how the Covid-19 pandemic has affected the daily lives of our Roma clients, and whether they were able to access support when needed. A summary of results from the survey is below.

There were 27 respondents, taken mostly from a database of RSG clients in East London and supported by RSG volunteers and staff to complete the questions. As this is a small sample group, we cannot draw conclusions about the whole UK Roma population from this survey.

- Many of the Roma people surveyed were severely affected in their daily lives by the pandemic and lockdown, particularly from job and income loss or increased caring responsibilities.
- Almost a quarter (24%) have relied at some point on charity food banks, and almost half (48%) reported experiencing a financial emergency during the pandemic and having to borrow money.
- Public health information is reaching RSG clients from a number of sources, but family, friends and media/social media in community languages were the most common. This may contribute to higher levels of vaccine hesitancy being reported in the Roma community.
- Dissatisfaction with access to healthcare was high, and many reported struggling with language barriers
  or digital exclusion. These issues are known to RSG from before the pandemic, but digital exclusion in
  particular is likely to have intensified with a move to online services.

The survey's findings were reinforced by conversations with advisers at Roma Support Group (RSG), suggesting that inequalities and barriers to accessing services increased for the Roma community during the pandemic. Many organisations normally rely on drop-in services and without this option during lockdown, they lost contact with some clients as a result. Access to public services, such as housing benefit managed by councils, became harder due to reduced frontline staff and delayed decisions.

Many in the Roma community reported difficulty accessing self-employment income support, and RSG has been contacted by more people specifically for referral to food banks. Roma patients supported by our advisers also found additional barriers to accessing health services, such as long waiting times and difficulty finding someone able to translate and advocate on their behalf.

# Challenges to public health outreach to the Roma community

Early on in the pandemic, public health messages were focused on social distancing and self-isolation measures. From early 2021, the focus was on overcoming vaccine hesitancy, which is high in the Roma community<sup>9</sup>. When Europia in Manchester surveyed Central and Eastern European clients about Covid-19, 40% of respondents indicated they would not have the vaccine, with low levels of trust and fear about the vaccine's side effects as the main challenges. If the respondents to the RSG survey on Roma and Covid-19 are typical, UK media and health services are not the primary information source on Covid-19 for the Roma community, and they may be getting different messages from media and social media from their countries of origin.

# Digital communications adapted to community needs

Finding increased need for support and prevented from providing their usual services, the organisations and local authorities we spoke to adapted and explored new ways of working. Early on in the pandemic, local

9 https://europia.org.uk/what-we-do/research-publications/

authorities and community organisations shifted their messaging online. Liverpool Council produced weekly video messages from the council to keep up with changing Government recommendations, translated into community languages. Glasgow Council co-produced a short video on vaccination for Facebook with local leaders.

In the early stages there was a lack of culturally appropriate resources for the Roma community. Material has now been developed in community languages (includes Polish, Romanian, Czech/Slovak and Romanes see the Resources section below). Some local authorities are engaging in two-way communication with positive results, such as the online Q&A sessions hosted by the Tower Hamlets public health team in collaboration with Tower Hamlets CCG and Roma Support Group to address community concerns.

At the Work Rights Centre, a multilingual team produced infographics to share in community language Facebook groups as a visually engaging way to share information for low literacy users. The messages, easy to change with a template, reached 20,000 people a week. Facebook and WhatsApp have been the main channels of distribution as the most commonly used platforms in the Roma community.

Although using digital channels and messages in community languages has had some success, there is a limit to the effectiveness of digital service provision as many Roma people do not have their own email addresses, access to hardware or digital skills beyond basic social media use <sup>10</sup>. Some councils were aware of the high levels of digital exclusion in the Roma community and took steps to overcome it. Bradford Council provided Wi-Fi devices and tablets to those considered most vulnerable, and planned for the provision of smartphones and IT equipment.

As the pandemic developed, many organisations working with the Roma community found that in-person contact was still necessary and moved to socially distanced outreach, supplemented with new initiatives such as Facebook live streaming to reach a wider audience. Even when normal service resumes, many organisations are likely to continue to supplement with digital communications adapted to community needs.

# Community-based outreach

Suffolk Council's public health directorate adopted a community-based approach to outreach on Covid-19, based on the principles of two-way communication and "talking to people where they are". The aim was to work with individuals who are not reached by other public health efforts, such as new migrants and homeless people. A mobile community engagement team with diverse language skills went to town centres, schools, social spaces and workplaces with a known outreach worker, gathering information about Roma-specific community concerns. The involvement of GPs and health professionals enabled people to ask questions and find their own answers.

As family and friends are the key source of information for the Roma community, working with individuals increases the chances of changing the message that is passed on. The team has successfully built a relationship of trust where community workers are now recognised by the Roma community and approached with questions on other issues such as taxes and employment, which they can signpost to other organisations.

Organisations without dedicated outreach teams gathered information about the community in other ways: Glasgow Council commissioned a baseline study with local organisations to find out the issues of concern, while Europia in Manchester produced audiovisual content in community languages to survey clients about vaccines and the "test and trace" programme.

<sup>10</sup>https://www.romasupportgroup.org.uk/uploads/9/3/6/8/93687016/statement on the impact of the eu settlement scheme digital only st atus on roma communities in the uk final oct 2020.pdf

#### Case study 1: Overcoming language barriers and digital exclusion

Bradford City Council took a collaborative communications approach at the start of the pandemic, holding regular 'District Gold' meetings with community groups, voluntary groups, and faith groups, along with public and private partners, to discuss the district's response to COVID-19. Over the Easter weekend, the council distributed letters from local religious leaders translated into Romanes containing a combined message about celebrating Easter whilst staying at home. Bradford council also ran a Slovak/Czech helpline which was promoted and advertised in person by neighbourhood support team staff fluent in community languages who distributed leaflets and spoke to residents directly about how to access services.

To counteract digital exclusion, the council provided Wi-Fi devices and tablets to those considered most vulnerable and made plans for the provision of smartphones and IT equipment. An i-Van was deployed to areas with known Roma community populations to provide COVID-19 related information. This was a truck with panels on the sides that could display digital content in different languages.

## Working with trusted organisations

The Roma community is usually seen as hard to reach because of comparatively low literacy, language and digital barriers. In disseminating public health messages, it is therefore important to provide information through a trusted source, ideally organisations already embedded and skilled in community languages.

As an example of how this approach can work, Liverpool had a spike in Covid-19 cases in a local area and needed to inform Roma and other migrant communities living there about UK public health measures, including self-isolating after arrival in the UK. Liverpool Council worked with Granby Toxteth Development Trust to ensure that existing links to the community through trusted organisations stayed strong throughout the pandemic, so that messages could disseminate quickly. This was achieved by in-person outreach: door knocking in the community and distributing translated leaflets to Romanian and Polish businesses, while gathering information about community needs.

Where there are no existing Roma-supporting community organisations or advocates, councils have disseminated vaccine information through GP practices in areas where the Gypsy, Roma and Traveller communities live. In Haringey, health workers will visit the area with a Roma church leader to discuss the vaccine. Bristol Council has had success engaging Roma people with community workers from other migrant backgrounds, who inspire trust because of the shared experience of coming to the UK.

# Roma community champions

The Roma community's language, Romanes, is largely a spoken language, so providing interpreters and advocates is important as a supplement to written communication. Some organisations have succeeded in developing Roma community members to be role models and provide a trusted link to the community. Connecting Opportunities in Yorkshire were able to find the resources to develop Roma "Covid champions", and two leading members of the IRIS (Ipswich Roma Inclusion Support) group are from different Roma communities. Leeds Council has involved Roma "community influencers" in the vaccination programme, and TGP Cymru runs a community centre in Newport where Roma women can volunteer and move into a job.

Although there are still very few Roma supporting registered charities in the UK, RSG work with local authorities in Ipswich and Newham on the EU Settlement Scheme has shown that active volunteer members from the community (eg. in Roma churches) can be developed into community workers with funding and support.

Financial support from the Cabinet Office to develop the community champions scheme is welcome, but the few existing Roma-supporting registered UK charities have little capacity to fundraise from the scheme, and guidance is needed at the national level to ensure all vulnerable communities including Roma are included in the work.

Alexandra Bahor, a Roma advocate and community worker at Granby Toxteth Development Trust, commented that "Roma people are not hard to reach, but you have to find someone who is connected to the community - a teacher, GP or community worker."

#### Case Study 2: Community outreach and working with Roma community champions

In Leeds, activities such as door knocking and a roving bus with health professionals have taken place in neighbourhoods where there are larger numbers of Roma residing. Community leaders speaking Romanian, Czech and Slovak have contributed to raising awareness of the Covid19 vaccination and encouraged uptake through language support and translation of information.

The Council have also pro-actively engaged 'influencers' in the Roma community to come forward and get vaccinated at local pop-up sites such as the Bilal Centre in Harehills. These 'influencers' have volunteered to be filmed to talk about their experiences of being vaccinated. One such example is Marian, a youth worker at Community Action to Create Hope (CATCH): <a href="https://www.youtube.com/watch?v=MaKhWuuHjAQ">https://www.youtube.com/watch?v=MaKhWuuHjAQ</a>

## Continuation of services and responding to changing needs

To continue to provide advice services to Roma and other migrant communities throughout the pandemic, community organisations initially moved some advice sessions online and also provided socially distanced advice in person. Roma Support Group and TGP Cymru moved to phone appointments supplemented with WhatsApp groups and Facebook live streaming advice sessions. Europia rented a space in a church to continue to support their Roma clients via face to face meetings.

Public health workers and community organisations have become more proactive during the pandemic in bringing services to the community. In Glasgow, a vaccination bus going to areas with a high rate of Covid-19 or vaccine hesitancy (arranged by NHS Greater Glasgow & Clyde) has made vaccination easily accessible and seen uptake rising as a result.

Some local authorities use a targeted approach to researching and providing health services to the Roma community: Public Health Leeds completed a comprehensive "health needs assessment" of the GRT community before the pandemic<sup>11</sup>, and have established a GRT Outreach & Inclusion Team to provide specialist support for children and families on health and educational issues<sup>12</sup>.

Many community organisations have been flexible in response to changing community needs and are now providing different services from before the pandemic, with some organisations moving to frontline advice or extending services to eg. delivery of food parcels. The TGP Cymru community centre in Newport previously worked primarily on benefits and job services, but now provides "baby bundles" with clothes and food for Roma mothers.

Bristol Council has increased in-person engagement with its Roma community after closing the community playground during the pandemic, moving instead to socially distanced home visits on the doorstep. The team is in contact with many more parents than previously and is supporting families with baby milk and nappies. After a year of this engagement, trust has increased and many more people are coming to community spaces as a result.

 $<sup>\</sup>textbf{11} \underline{\text{https://observatory.leeds.gov.uk/wp-content/uploads/2019/06/GTR-HNA-post-consultation-June-2019.pdf}$ 

<sup>12</sup> https://www.globgov.com/GB/Leeds/1575991182709532/GRTLeeds

The COVID-19 pandemic has exacerbated existing educational disadvantages while also bringing new pressures for Roma children, who have in many cases not had access to the equipment they need or a quiet space to study in. Although a national strategy to support Gypsy, Roma and Traveller children has been lacking, some local authorities have prioritised access to educational materials for Roma children. In Bradford, the council district's Anti-poverty Events Group worked with the local creative Artworks project to distribute a hard copy activity pack for young children who lacked digital means of access. Edinburgh council worked with the Scottish Traveller Education Programme to distribute iPads and SIM cards to Roma families to help them access digital learning.

## Case Study 3: Meeting the needs of the Roma community

Leeds City Council looked beyond the immediate health crisis to maintain or increase support for Roma across other sectors. Leeds Council ran virtual drop-ins which were attended by Roma Migrant Community Networkers who could help make communities aware of the support available. The council also set up a discretionary fund where vouchers for supermarkets were provided and the Roma Networkers made referrals to community hubs coordinating the delivery of food parcels.

Leeds also provided employment support and access to welfare support for migrants. POMOC (Help!), a free drop-in service which offers advice and guidance to migrants from Eastern European countries with limited English and has in the past supported hundreds of Roma people to access services through language support, had a virtual version set-up during the early stages of the pandemic. The council continued to fund local organisations to support Roma as a targeted client group to apply to the scheme, including delivering POMOC to support those in need and extending this by inviting the Romanian and Czech Consulates to Leeds to help with ID documentation.

# Organisational and system changes

Local authorities and health services have had to respond effectively to a public health emergency and reach out to every part of the community, which has meant new structures set up to collaborate across local authorities, the NHS and community organisations.

In Liverpool, a new team of public health and community workers set up to deliver engagement ensured Liverpool Council's public health team understood the Roma community and adapted messaging to group needs. Bradford City Council held regular meetings from the start of the pandemic with community groups, voluntary groups, and faith groups, along with public and private partners, to discuss the district's response to COVID-19. Leeds City Council have established a Migrant Health Board which focuses on a range of issues that affect migrant health.

Suffolk Council was able to draw on the existing Ipswich Roma Inclusion Support Group (IRIS) network, made up of multi-agency partners including members of Suffolk County Council, Ipswich Borough Council, Roma community members and other NGOs. IRIS distributed information and developed awareness sessions for GPs to increase their understanding of Roma communities and how to better engage with them.

In Suffolk some support has also been given to easing processes within the health system, such as outreach workers acting as "care navigators" to provide support on accessing healthcare and registering for Covid-19 tests.

The form of engagement used by Suffolk and Liverpool, where the community is developed as a user group, is not normally used by local authorities who have traditionally taken a more top-down approach to engagement with Roma. Although more information is needed about the outcomes, Roma Support Group welcomes any approach that strengthens collaboration with organisations already embedded in the community. Ideally, local authorities

would create permanent in-house teams dedicated to supporting Roma and the implementation of Roma-specific approaches and plans across different sectors.

#### Case study 4: Collaboration across services

Suffolk County Council and its COVID Hub have worked alongside district and borough councils and external partners to deliver integrated and holistic services to the Roma community throughout the pandemic and to support Roma access to healthcare. Outreach work on health from the COVID Hub team has linked up with wider services, referring community members to support charities with appropriate language skills, such as GYROS, as well as providing advice beyond healthcare, such as providing financial advice relating to managing loss of income from time off work due to COVID.

This collaboration across local authority and health services has included working with local community organisations. Two of the leading members of the IRIS (Ipswich Roma Inclusion Support) group are from different Roma communities and the COVID Hub worked with a local Roma church to organise drop-in sessions with a panel of local healthcare professionals. The drop-in sessions were attended by over 100 people, and the recorded sessions were posted to the church Facebook page, an audience of 5000 community members. Sessions also distributed home-testing kits and taught community members how to use them.

## **Recommendations for local authorities**

#### Continue in-person support and outreach supplemented with digital communications

Targeted online public health messages in community languages can help to counteract information Roma people are receiving about Covid-19 from media and social media in their country of origin. However, due to high levels of digital exclusion and language barriers for Roma people, it will not be possible to reach the whole of the community with a public health message through digital and other UK media channels. Local authorities have found that the best way to engage is through existing trusted community organisations, or through regular community outreach with in-person contact and support.

#### Bring services to where people are

The inaccessibility of drop-in services during the pandemic has led to trialling new proactive methods of providing outreach and support. Some local authorities have taken the community development approach and created mobile outreach teams to target homes, workplaces, schools and social spaces within social distancing guidelines. This approach is effective at gradually building trust, reaching new parts of the community, and increasing engagement with existing services.

The key elements are consistency and accessibility: regular contact, community language skills and having known outreach workers who people can approach. The same principle applies to removing barriers to health services: while vaccine hesitancy in the Roma community is still high, making the vaccine easily available through a mobile service has increased uptake in some places.

#### Adapt public health messages to community concerns and services to changing needs

RSG's survey and adviser workshop suggests our clients' needs have become more acute during the pandemic, with more people in financial distress and relying on food banks while experiencing barriers accessing public services. Regular contact with Roma families through community outreach means local authorities can reach a

wider range of people and respond more effectively to changing needs beyond the immediate health crisis. Another way of assessing Roma community needs is by surveying the local organisations that work with them.

Surveys targeting Roma people on public health messaging may be useful in gauging community concerns about the vaccine, but equally important is creating the space for a two-way conversation about health issues via Q&A sessions with a GP or health worker. Addressing vaccine hesitancy is more likely to be successful if people can address individual concerns and come to their own conclusions in a context where they feel comfortable.

#### Work with multi-agency networks of local authorities, health professionals and trusted partners

With the range of financial, employment, immigration and health issues experienced by the Roma community during the pandemic, trusted outreach workers need to be able to link with wider services and signpost effectively to organisations able to provide specialist support. This could mean creating a network model of council, community and health partners to deliver integrated services, as with Suffolk Council's "Covid Hub", or the community hub approach adopted by Leeds Council with POMOC. As well as providing holistic support, the aim should be to make Roma people aware of the variety of services available to them.

#### Work with Roma community champions where possible

The most effective way of reaching the Roma community is to work with established Roma-supporting organisations that have already built a relationship of trust. We have provided a list of organisations across the UK on p. 12-13 of our engagement toolkit on the EU Settlement Scheme<sup>13</sup>. Some of these organisations are also developing Roma people who are active volunteers to become community workers and advocates.

We hope that the Cabinet Office "Community Champions" scheme will do more to make its funding accessible to the community organisations doing this work, and ensuring that all vulnerable communities including Roma are targeted. Where there are insufficient resources for a champion from the Roma community, we recommend funding an outreach worker with community language skills to build trust and facilitate communication.

#### Develop strategies to overcome digital exclusion and barriers to accessing healthcare

RSG's client survey and our previous policy work on digital-only proof of EU settled status confirms that many Roma people struggle to access online services due to lack of hardware and digital skills<sup>14</sup>. This has increased barriers to public services during the pandemic, and we are concerned that the issue will persist with the NHS direction of travel towards increased online service provision<sup>15</sup>.

While initiatives to provide laptops or teach Roma clients technology skills are welcome, local authorities and health trusts should also consult with the Roma community on their experience and assess whether community needs are being met as part of designing online services.

#### Review whether current service delivery is working for Roma and other migrant communities

With barriers to the usual forms of engagement, the pandemic has also brought the opportunity to review existing structures and services and assess community needs. Some local authorities have found that having to provide services in a more proactive way has unexpectedly improved their engagement with Roma and other migrant communities. Others were able to look beyond the immediate health crisis to strengthen support for the Roma community across other sectors and improve partnership working in the borough.

<sup>13</sup> https://www.romasupportgroup.org.uk/uploads/9/3/6/8/93687016/rsg toolkit roma euss outreach for las.pdf

<sup>14</sup>https://www.romasupportgroup.org.uk/uploads/9/3/6/8/93687016/statement on the impact of the eu settlement scheme digital only st atus on roma communities in the uk final.pdf

<sup>15 &</sup>lt;a href="https://www.longtermplan.nhs.uk/online-version/chapter-1-a-new-service-model-for-the-21st-century/4-digitally-enabled-primary-and-outpatient-care-will-go-mainstream-across-the-nhs/">https://www.longtermplan.nhs.uk/online-version/chapter-1-a-new-service-model-for-the-21st-century/4-digitally-enabled-primary-and-outpatient-care-will-go-mainstream-across-the-nhs/</a>

Looking beyond the pandemic, it is important that future policy addresses the underlying factors that result in health inequality. For example, Leeds Public Health service has researched the effects of housing on the health and wellbeing of migrant communities, and the council is planning to use this research to inform further action.

## **Recommendations for government**

- Work with GRT/migrant sector organisations on removing barriers to accessing healthcare
- Develop cross-departmental strategy on addressing health inequalities for the Roma population

While the initiatives from some local authorities are welcome, a national level effort will be needed to overcome barriers to accessing healthcare and other public services for the Roma community, including digital exclusion and linguistic or cultural barriers. The Roma community's lived experience and specific concerns should be included in the Department of Health and NHS England's work with VCSOs to ensure that planning and commissioning health services is inclusive towards Gypsy, Roma and Traveller communities and addresses wider health inequalities. Easier GP registration, better access to language support and targeted public health materials would be welcome first steps.

In the longer term, it would be valuable to have more Roma community members working in healthcare to help support key public health messages in the community. We hope that any cross-departmental strategy for the Gypsy, Roma and Traveller community will include support for the younger generation who aspire to an education, especially those who want to become professionals in the health sector.

## Conclusion

The pandemic has led to increased financial vulnerability and need for support among RSG's clients, and also created new barriers for Roma people to access services. From our extensive experience with advice and advocacy, the Roma community can be reached with engagement and support that is trusted, culturally appropriate and responsive to community needs. Local authorities have found that community-based outreach with a mix of online and offline services, involving trusted organisations and public health messaging based on two-way conversations have produced the best results.

Although only a handful of councils initially made specific efforts to support or outreach to the Roma community, RSG engagement with local authorities has shown that there is an interest in taking targeted measures to provide support and engage with the community on public health measures. We have been encouraged to find that local authorities and community organisations that have sought to proactively engage, stayed responsive to changing needs and tried new delivery models have found that in some cases their communication with the Roma community has improved during the Covid-19 pandemic. We hope this paper will suggest workable solutions to engage and support the Roma community through the next phase, and help organisations seeking to develop Roma-specific strategies for local engagement and service delivery.

## Resources

### Roma Support Group videos in community languages

- Applying for universal credit during COVID-19 (English/Polish)
- Facts about the Covid-19 virus (Romanian)
- ESOL video on protecting yourself and others (English/Polish)
- ESOL video on coronavirus symptoms and social distancing measures (English/Romanian)

## Research and material by other organisations

- Doctors of the World: <u>Translation of government advice on Covid-19 into 60 languages</u>
- Public Health England: <u>Material on the Covid-19 vaccination in community languages</u> Europia: <u>Central and Eastern European Attitudes to Covid-19</u>
- Doctors of the World: A Rapid Needs Assessment of Excluded People in England During the 2020 COVID-19 Pandemic
- NHS England: <u>Improving uptake and delivery of health services to reduce health inequalities experienced</u> by Gypsy, Roma, and Traveller people
- NHS England: <u>Improving GP registration among socially excluded groups</u>
- University of Dundee: Enhancing Gypsy, Roma and Traveller peoples' trust