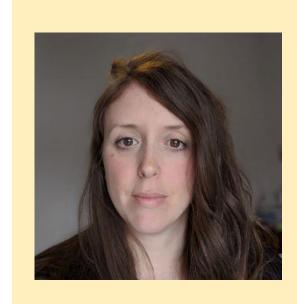


The Roma Health Stories Project



Who Are We?



Lois Orton is a Wellcome Senior Research Fellow in the department of Sociological Studies at the University of Sheffield. She conceived of the Roma Health Stories project and leads in its development and implementation with Olga Fuseini.



Olga Fuseini is a Roma activists, Consultant and Research Associate on the Roma Health Stories project.

Lois and Olga are supported by an advisory board comprising Roma community and academic representatives.

What Are We Doing?

Speaking with Roma activists and Roma-led organisations in the UK and Czechia to explore how best to navigate the risks of reinforcing Roma oppression when researching the concept of 'Roma health'.

Analysing relevant national (UK and Czechia) and local (to Sheffield/Rotherham and Brno) health and social policy documents and interviewing those involved in developing and/or implementing them to explore how they understand 'Roma health'.

Conducting focus groups with Roma people living in Rotherham to explore how they talk about health and wellbeing and what is most important for them.

Conducting life history interviews with Czech and Slovak Roma women living in Rotherham (and those living in Brno) to explore how their experiences have shaped their health journeys.

Using the arts to share the Roma stories among public and policy audiences.

This project is still on-going. Here we present some initial findings from focus groups and policy analysis.



Party celebrating 6 months of the Roma health stories project: Eastwood 2022



Celebration of Roma culture and history: Clifton Learning Partnership 2023.

Roma people are thought to experience some of the worst health outcomes (WHO 2023). However, they are largely absent in UK national policy (Orton 2023). It is left to local areas, such as Rotherham and Sheffield, with perceived pockets of immigration to develop their own approaches.

Here, we present the Wellcome Trust-funded Roma Health Stories Project. The project is led by Roma and non-Roma academics at the University of Sheffield in partnership with local and national Roma organisations and activists (including Firvale Community Hub, Clifton Learning Partnership and the Roma Support Group). Together, we aim to bring the voices of Roma people to life. This is achieved by using participatory and creative approaches to delve deep into the life/health stories of Roma people living in the region (with a focus on women's health and the childrearing years) and then sharing these stories with those working in relevant policy areas.

We are determined to develop new ways of knowing that are Roma-led and challenge taken for granted assumptions; and have produced an animation and a series of free to access written outputs on the

topic: https://www.romahealthstories.org/outputs



Discussion on racism and Roma health: Harvard (USA) 2023.

Preliminary Findings

Key themes from focus group discussions with Roma people living in Rotherham

We conducted six focus group discussions with Czech/Slovak and Romanian Roma people living in Rotherham. Groups were segregated by country of origin, gender and age. Each group had between 2 and 15 participants and lasted around 90 minutes.

The most striking finding that emerged across all focus group discussions was how health is the most important thing to our participants. Many said that 'health is everything' to them.

'Good health has more value to me than some money.... You can't buy health'

Commonly expressed meanings of health include: being able to perform daily functions; a feeling of safety and security; happiness and enjoyment; the absence of illness; physical, mental and spiritual wellbeing (connected).

Across all groups, family was considered central to their identity, with an individual's health intimately connected to that of other family members. When one family member is ill, the whole family suffers. Many participants (particularly female participants) were caregivers for multiple family members (young and old); often providing informal health support.

'And mainly I love to see that my family and my children are healthy, that makes me happy. It is the highest priority.'

Poverty emerged as key determinants of health, with many participants at times finding themselves living in substandard housing and unable to afford good quality food. Exploitation in employment was common (with poor working conditions, long hours and limited benefits). This negatively affected participants' physical and mental health. For others, especially some women, the monotony/mundanity of everyday life (doing the same things every day) and the pressure of making a home and/or providing for the family were seen as a threat to their mental health.

'If you sit at home all day after you have done all your chores ... you will sit and you will get bored and all sorts of bad thought come to your head.'

Participants expressed dissatisfaction with the UK health system. Whilst it was seen as less overtly racist than the system 'at home' it was also perceived as inaccessible with long wait times for appointments and a lack of referrals and/or prescriptions. It felt to them that treatment was being withheld and that you had to shout loudly if you wanted to get seen. Once you got past the GP gatekeepers though, participants were very satisfied with the consultant-led hospital care they had experienced.

Key themes from policy analysis

Findings are based on analysis of 31 English public health and social policy documents produced 2000-2022 and 10 semistructured interviews with those involved in developing and/or implementing them.

Even before Brexit, when we were required to have a National Roma Integration Strategy, it was almost impossible to find specific measures targeting Roma. The elision of Roma happens through the persistence of specific ignorances about who Roma are, where they 'came from originally' and whose responsibility they now should be (within English policy structures).

The perception of Roma as both 'white' European migrants and their conflation with our own 'British' minorities - 'Gypsies and Travellers' - provides a unique context in which the health and social needs of a hypervisible group become invisibilised in the void that is created by confusion.

Outputs

SOCIOLOGY OF HEALTH & ILLNI

Researching the health and social inequalities experienced by European Roma populations: Complicity, oppression and

🎵 PDF 🔧 TOOLS 🧠 SHARE This paper draws on the experience of two Romani and three non-Romani scholars in knowledge production on the health and social inequalities experienced by Europear

ploring how sociologists of health and illness might promote a more actively anti-racist

deologies and practices as well as more obviously oppressive ones. We hope these

Roma populations and health inequalities: a new perspective

Margaret Greenfields ⁴, Daniel La Parra ⁵, Oana Marcu ⁶, Yaron Matras ⁷, Celia Donert ¹, Diane Frost ¹, Jude Robinson ⁸, Eve Rosenhaft ¹, Sarah Salway ⁹, Sally Sheard ¹, PMID: 32082612 PMCID: PMC7032950 DOI: 10.1108/IJHRH-01-2019-0004

a focus of attention in European research and in policy and the possible detrimental consequences

who work directly with Roma communities across European regions from a wide range of academic causes of poor health and wellbeing among diverse Roma populations and; actions that may have



This animation was created in collaboration by various members of the project leadership team and advisory board. Based on our personal experience of conducting research with and for Roma it opens up discussion about how non-Roma (Gadje) scholars can better resist complicity with oppression. It can be accessed here: http://romahealthstories.org/whatsnew

If you would like more information about the project or to get involved please contact Lois or Olga or visit the project website.

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