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Review article

The health condition of the Roma population in the context of primary and secondary care



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ABSTRACT

In the Czech Republic the Roma belong to one of the most numerous groups. The health condition of this minority is a sphere requiring more research studies and especially follow-up measures including illness prevention. The given paper tries to map studies considering the health condition of the Roma in the Czech Republic and other European states. It also deals with the approach of the Roma minority to health care in the Czech Republic. The database EBSCO, PubMed, Scopus, Web of Science, etc., were used in order to map this subject. As the analysis of the available source shows, the Roma population in Europe generally has a worse health condition than the majority society. This was also pointed out by the European Commission. The socio-cultural determinants of health and especially the fact that the Roma population remains at the periphery of the majority society seem to be the main reasons. Although these problems are the subject of many studies on a local as well as European level, it can be stated there is only minimal progress, and not only in relation to the improvement of the health condition of this minority. In view of the above stated results it becomes more important to create specific preventive programmes reflecting the specific requirements and needs of the target group, and to support the active cooperation of the Roma population in caring for their health.

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Introduction

The Czech Republic has never been a homogenous society of only one ethnicity [1]. Jarošová [2] states that the demographic changes in our society together with the great migration of population indicate the growth of the population from various national, ethnical and religious groups. The Roma belong to

the most numerous minority in the Czech Republic and they have been living here from the fifteenth century. The position of the Roma within the majority society, accompanied with increasing problems, shows the importance of a deep knowledge of this minority [3] because: “fear comes from unknowability, knowledge brings understanding” [4].

Kutnohorská [1] states that only a general knowledge of the basic specificities and characteristics of particular cultures is

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not sufficient. It is connected especially with the continuous development, contemporary globalization trends and internal diversity of cultures.

According to Vivian and Dundes [5], in order to be able to provide quality and complex nursing care, this knowledge shall be constantly increased considering the local demographic, socioeconomic or national specificities. As Nesvadbová et al. [6] state, the care of members of the ethnical minorities should be part of education at professional schools educating future nursing staff, and at the same time it should be a part of the lifelong education of nursing staff. It should be mentioned that the recommendation considering the implementation of the specific topics into the educational programmes have been realized [7]. One such example can also be the guidelines published in 1999 by the Ministry of Education, Youth and Physical Training of the Czech Republic, in order to educate against the manifestations of racism, xenophobia and intolerance. These guidelines represented the main principles which should have been followed within the multicultural education in Czech schools. These topics also included information on the ethnic groups living here [7].

Since these problems of multicultural education were brought into schools for the first time, education in that area has been much altered.

Recently, multicultural/transcultural nursing has not been taught as a particular subject at secondary nursing schools. However, according to the Frame Educational Programme [8] a school shall make pupils acquainted with this topic. It depends on each particular school how the given problems will be considered and included in education [8]. Universities deal much more with these problems. Archalousová mentions [9] that this subject is included in the syllabus of the study programme “Nursing, study branches Nurse and Midwife”. It has been taught as a separate subject: Nursing care within the multicultural society. However, the implementation of this knowledge in professional training remains an essential problem. It follows for example from the results of a research survey by Straková and Scholtzová who examined the knowledge of nurses in the care of individuals from various nations and ethnicities [10].

In the context of provided health care, patient's opinion relating to health and diseases shall be considered. As mentioned by Jarošová [2], the culture of community plays an important role in the care of one's health. It affects man's understanding, his body or his attitude towards health and disease. All of these factors determine one's approach to the prevention of illness or treatment. These factors are really important in the health conception in the Roma minority. Šlechtová and Bürgerová [11] mention in particular a poor awareness of the importance of prevention. This is also connected with the lower position of health in the Roma value system. According to Vivian and Dundes [5] the Roma understand their health as the absence of an illness, and illness is often associated with failure. The Roma patients most often search for a doctor only at times of advanced illness or injury. They try to postpone a visit to the doctor for as long as possible. As mentioned by Nesvadbová et al. [6], and Hajduchová and Urban [12], considering this aspect, education with a focus on primary and secondary prevention is very important.

Materials and methods

In order to gain information relating to health condition and illness prevention in the Roma, the database EBSCO, PubMed, Scopus, Web of Science and the Information System of Research and Experimental Development and Innovation were used. The information was found through the key words within all these databases. These were: Roma minority, health condition and prevention.

In total, 1702 references according to the key words were found in the mentioned databases. 287 sources were found in the EBSCO database, 567 sources in the PubMed database, 254 sources in the Scopus database, 320 sources in the Web of Science, and 4 relevant sources in the Information System of Research and Experimental Development and Innovation.

Further information has been searched for in professional monographs dealing with Roma psychology or other survey research focused on the health condition of the Roma population mostly in the Czech Republic and in Slovakia. The sources which map the most problems in the health condition of the Roma population in the Czech Republic, as well as all over the world, and primary and secondary prevention in the particular minority have then been chosen from all those information sources.

The access of the Roma minority to health care in the Czech Republic

In the Czech Republic, equal access to health and accessible care for everybody has been declared [13]. Nevertheless, many research studies show that the Roma population has worse access to health care [3,6,12,14,15]. According to Davidová et al. [3], it is followed by many chronic diseases, a generally worse health condition and a lack of preventive programmes. They also mention that the first report on inequality in health was published under the title: “Black Report” in 1980. Equality in access to health care is declared in the Convention on Bio-Ethics (1997) or the Lublaň charter (1996). Nesvadbová et al. [6] mention that WHO is also one of the main propagators of the reduction of inequality in health. They also mention that all states joining this WHO programme are obliged to reduce the existing lack of equality in health, provide accessible health care and increase the amount of years without any health disorder. The Czech Republic has also joined these states.

As Grellier and Šoltésová [15] mention, in joining the European Union our country is also obliged to abide by certain rules concerning providing health care to all minorities living in our territory. Before joining the EU an EC report on the state of the given problems of each acceding country was elaborated. This report did not offer much information on the Roma access to health care because the area of health problems in the Roma population in our country was not mapped enough. Nevertheless, the governments of the Czech and Slovak Republics issued a mutual memorandum of social integration (2004–2006). They pledged themselves to reduce poverty and social exclusion through various national aims and programmes [16]. Also, the National Report [6] of the Czech Republic from 2009 with the title “The Roma Population and Health” refers to the importance of campaigns focusing on the

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