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Short Communication

Discrimination and self-reported health for the Spanish Roma



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Introduction

The health of the Roma population has begun to receive attention from the EU candidates, following the Copenhagen Criteria, a set of conditions requiring respect for and protection of minorities that must be followed by all candidates for entry to the European Union. Several papers conclude that there exist ethnic health gaps for the Roma population, although not all of these studies include the same variables when measuring health.

In 1948, the World Health Organization defined health as ‘a state of complete physical, mental and social well-being, and not merely the absence of disease’. This open characterization expands the concept of health to include such pathological and clinical variables as chronic diseases, accidents, and disabilities, and subjective indicators.

While Zeman et al. (2003)¹ provide a broad review of the literature, focussing on the pathological and clinical differences in the Roma population, Koupilova et al. (2001)² and Kolarcik et al. (2009)³ analyse health considering more dimensions: an individual's physical condition, and self-

reported health. This subjective variable, self-reported health, has been included in several studies as one important indicator. Koupilova et al. (2001)² conclude that the health status of the Roma is inferior to that of the non-Roma in the Czech and Slovak Republics. Kolarcik et al. (2009)³ conclude that Slovakian Roma respondents reported poorer health and more accidents during the previous year than non-Roma respondents. The most common explanation for these health gaps is that minority groups have a socio-economic gap, as well as a lesser ability to purchase medications and medical procedures as required. While the former explanation can be applicable to the Spanish Roma population, the later cannot be a justification for lower self-reported health, because all Spanish residents have free access to the national health care services.

However, apart from these factors, there is a growing body of literature providing evidence of the effect of discrimination in health (see Schulz et al., 2000⁴), confirming that there are institutional and individual forms of discrimination that operate through multiple pathways in the health gap.

Our aim in this paper is to study the effects of socio-economic and discrimination variables on the health of the Spanish Roma population. Due to the difficulties inherent in measuring health, we study self-reported health as an indicator because it includes physical and mental states, as well as a kind of perceived well-being.

Descriptive analysis and econometric model

Main database features

The database contains demographic, sociological, and economic characteristics for the Spanish Roma population

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Table 1 – OGLM estimation results. Dependent variable: self-reported health.

	Ordered generalized linear Model I		Ordered generalized linear Model II		Marginal effects very poor health		Marginal effects poor health		Marginal effects average health		Marginal effects good health		Marginal effects very good health	
Socio-economic characteristics														
Age	−0.0633	***	−0.0735	***	0.0006	***	0.0007	***	0.0087	***	0.0019	**	−0.0118	***
Female	−0.4544	***	−0.4965	***	0.0038	**	0.0045	***	0.0589	***	0.0127	**	−0.0801	***
Number of children	0.0659		0.1187	**	−0.0009	**	−0.0011	**	−0.0141	**	−0.0031	*	0.0191	***
Marital status (ref. single)														
Married	−0.4981	***	−0.4696	***	0.0035	**	0.0041	**	0.0544	***	0.0155	*	−0.0775	***
Cohabiting	−0.4988	*	−0.5587	*	0.0055		0.0065		0.0768		−0.0118		−0.0770	**
Widowed	−1.1729	***	−1.2474	***	0.0177	**	0.0202	**	0.1963	***	−0.0946	*	−0.1395	***
Divorced	−0.6056		−0.7746	*	0.0087		0.0102		0.1130		−0.0332		−0.0987	**
Separated	−1.0669	***	−1.1276	**	0.0153		0.0176		0.1758	**	−0.0799		−0.1288	***
Education (reference > high school)														
No education	−0.3684		−0.3572		0.0031		0.0036		0.0456		0.0013		−0.0536	
Incomplete primary education	−0.4803		−0.3882		0.0031		0.0036		0.0470		0.0078		−0.0615	
Complete primary education	−0.5562	*	−0.3771		0.0033		0.0039		0.0481		0.0013		−0.0565	
Incomplete secondary education	−0.4348		−0.3667		0.0032		0.0038		0.0474		−0.0002		−0.0542	
Complete secondary education	−0.0699		−0.0247		0.0002		0.0002		0.0030		0.0006		−0.0040	
Urban	−0.1247		−0.0424		0.0003		0.0004		0.0051		0.0010		−0.0068	
Income per adult in household	0.0022		0.0036	**	−0.000027	**	−0.000033	**	−0.000424	**	−0.000093	*	0.000577	**
Income per adult in household squared	−0.000004	*	−0.000005	**	0.000000	*	0.000000	*	0.000001	**	0.000000		−0.000001	**
Religious	0.0280		0.0933		−0.0007		−0.0009		−0.0113		−0.0018		0.0147	
Integration variables														
Ethnicity of closest friends (ref no friends.)														
From my ethnic group only	−1.1728	*	−0.7101		0.0075		0.0088		0.1005		−0.0225		−0.0943	
Predominantly from my ethnic group	−1.0235		−0.6827		0.0060		0.0071		0.0877		0.0009		−0.1018	
the ethnic group does not matter	−0.5366		−0.2672		0.0020		0.0024		0.0311		0.0085		−0.0439	
Roma community discrimination (ref. Equal to or less than before)	−0.1031		0.0536		−0.0004		−0.0005		−0.0063		−0.0016		0.0087	
Personal discrimination														
Job interviewer discrimination	−0.0209		0.1754		−0.0012		−0.0015		−0.0198		−0.0070		0.0296	
Public Employment Service (INEM) discrimination			−0.0747		0.0006		0.0007		0.0091		0.0015		−0.0118	
Company providing temporary employment discrimination			−0.0994		0.0008		0.0009		0.0121		0.0017		−0.0156	
Co-worker discrimination			0.1590		−0.0011		−0.0013		−0.0180		−0.0063		0.0268	
Boss/manager discrimination			−0.2423		0.0021		0.0025		0.0308		0.0011		−0.0364	
Customers or providers discrimination			0.1361		−0.0010		−0.0012		−0.0155		−0.0052		0.0228	
Fellow students (school, college, etc.) discrimination			−0.1307		0.0011		0.0013		0.0161		0.0019		−0.0203	
Teacher discrimination			0.5355		−0.0032		−0.0039		−0.0537		−0.0383		0.0991	
Staff at health centers, hospitals discrimination			0.0565		−0.0004		−0.0005		−0.0066		−0.0017		0.0092	

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