



POST-2020 EU FRAMEWORK FOR NATIONAL ROMA INTEGRATION STRATEGIES

Five key recommendations for better health

*EU Framework for National Roma
Integration Strategies post-2020
EPHA Position | October 2017*

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**Co-funded by
the Health Programme
of the European Union**

The European Public Health Alliance (AISBL) has received funding from the European Union, in the framework of the Health Programme. Sole responsibility for the content displayed within this document lies with EPHA and the Executive Agency is not responsible for any use that may be made of the information contained therein.

Transparency Register Number:
18941013532-08



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Introduction

Why focus on Roma health? The European Commission staff working paper on Europe 2020 presented the general view that economic growth needs not to be only sustainable, but also responsive to the needs of equity, social justice, health and well-being of people and society.¹

The mid-term review of the EU Roma Framework² offers an opportunity for European institutions, national governments, and civil society to design a post 2020 EU Roma framework, which by mainstreaming Roma health and early childhood development, ensures meaningful Roma integration.

Poor Roma health is an underlying consequence of segregation. Roma have on average ten years' shorter life expectancy than the mainstream population due to preventable risks, including hunger and malnutrition, squalid housing, and significantly higher rates

of unemployment. Anti-gypsyism in health- and childcare³, the specific form of racism towards Roma, results in substandard medical care and barriers to accessing early childhood education and support.⁴

Jobs and growth cannot be achieved with a sick and segregated Roma population. Addressing Roma health is not only a social but an economic imperative: preventing costly Non-Communicable and Communicable diseases in the Roma population can lead to significant savings and economic benefits and would contribute to the sustainability of national healthcare and social welfare systems.⁵ Every Euro invested in public health gives an average return of €14 to the economy.⁶ Every additional average year of life expectancy is worth a boost to GDP of up to 4%.⁷ Given the cross-border elements of Roma inclusion, it is important to recognize that no individual country can cope with the



challenges of Roma exclusion alone. There is a need for an EU rule of law mechanism to enforce national governments' responsibility to respect laws and fulfil their commitments. Only coordinated effort at EU level reaching all the way to local level can deliver tangible progress to tackle all cross-sectoral elements and determinants of good health, and ensure access to the benefits of early childhood development programmes.

Good Roma health is a precondition for a good education and to secure employment.

It is vital to stress the need for a post-2020 European Roma framework which delivers for all Roma, based on the latest reliable data and evidence. Detailed and realistic action plans should have appropriate, predefined budgets included in the national, county and local council budgets. While the European Commission has made achievements in early childhood education, there needs to be improved access to inclusive schooling, higher education and employment, as well as health.

Recommendation to the European Commission

1. During 2018, develop a post-2020 EU Roma Framework prioritising positive impact on health and early childhood development, including a plan to eliminate health inequalities. Ensure meaningful involvement of Roma civil society in the policy debate and decision-making. Following the Commission Communication on the Mid-Term Review, the results of the 2017 public consultation

and an external evaluation in early 2018, the Commission should develop a vision for the future EU Roma Framework including SMART (specific, measurable, achievable, relevant, time-bound) objectives to protect and improve Roma health and eliminate health inequalities, especially for children from the youngest age.

Recommendation to National Governments

2. During 2018, undertake evaluation of the impact of national Health and Early Childhood Development policies in the National Roma integration Strategy. The approach to health and ECD in most EU and national Roma inclusion documents is too narrowly focused on access to healthcare. All barriers to good health and wellbeing must be considered, including those arising from other policies, including housing, environment, employment, transport, preventative public health policies, education, etc. Targeted measures must respond to specific health challenges facing Roma communities (based on epidemiological data, disease types, vaccination history, local environmental health threats, occupational risks, demography, etc.).

3. Focus policy design and evaluation on impact on Roma health and wellbeing. National Governments should design the appropriate institutional framework within the national, regional and local Health and ECD institutions in order to ensure effective implementation and monitoring of the National Roma Integration Strategies, to demonstrate





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(qualitative and quantitative) results.

Joint Recommendation to National Governments & the European Commission

4. Establish at national level - with EU coordination and support - improved, comparable data collection mechanisms, including health, wellbeing and ECD indicators and measures for the post-2020 EU Roma Framework. The European Commission reports on Roma health and Early Childhood Development and Care (ECEC) offer a series of recommendations (eg ensure continuity of institutional arrangements that reflect children's learning progress, ensure pupil-centred pedagogical approaches, promote the vision of continuous child learning starting from the birth, ensure diversity of staff in terms of gender, ethnicity and the development of pedagogical practices etc) as to where further action could be focused.⁸

Recommendation to Roma, pro Roma and Public Health Civil Society Organisations

5. Make your voice heard - Sign the Joint Statement I Pledge for a future EU Roma Framework which delivers.⁹ Get involved and participate actively in the policy debate to ensure that Roma issues stay on the agenda of the EU institutions and national governments after 2020. The experiences and recommendations of Roma people and civil society should be reflected in the discussions,

especially for young children and their families.

Messages for European governments, EU institutions and civil society

Thanks to the evidence on Roma Health and Early Childhood Development compiled¹⁰ ¹¹ by the European Commission, European governments, EU institutions and civil society are well aware of the growing Roma public health emergency and Early Childhood Development (ECD) challenges: almost 12 million Roma from across Europe face barriers to good health and wellbeing, not only in barriers to healthcare but also in education, housing, employment, and local environment, which exacerbate health inequalities. Policy inaction will put the next generation of Roma children at risk of shorter, sicker lives.

A recent civil society shadow report¹² also found that although the EU Roma Framework is an achievement in itself and represents a turning point for Roma communities in Europe, by design, it has several major shortcomings. It concluded that post-2020, the EU Roma Framework should be maintained but should undergo a substantial reorientation of the current policy design.

Lack of transparency and accountability mechanisms are the main obstacles to monitoring and evaluation of the NRISs. The data collection and analysis as the evidence base for policy measures and programmes must be improved, involving local Roma community members, local Roma NGOs and local



Roma professionals. It is essential to ensure independent and external periodic evaluations based on participatory methodologies. These evaluations must be impact-oriented, SMART, and comparable with official national data.

Notes

1. http://ec.europa.eu/eu2020/pdf/overview_responses.pdf
2. http://ec.europa.eu/newsroom/just/item-detail.cfm?item_id=127519
3. http://antigypsyism.eu/?page_id=17
4. European Commission (2014) Report commissioned by DG Health and Consumers 'Report on the health status of the Roma population in the EU and monitoring data collection in the area of Roma health in the Member States' available online at https://ec.europa.eu/health/sites/health/files/social_determinants/docs/2014_roma_health_report_en.pdf
5. <https://epha.org/investing-in-roma-health-can-show-real-benefits/>
6. Masters, Anwar, et al, Return on investment of public health interventions: a systematic review, *BMJ Journal of Epidemiology and Community Health*, <http://jech.bmj.com/content/early/2017/03/07/jech-2016-208141>
7. See e.g. discussion on research on life expectancy and GDP here: <http://voxeu.org/article/disease-and-development-does-living-longer-raise-economic-growth> and the work of Bloom and Canning for the World Bank here: https://siteresources.worldbank.org/EXTPREMNET/Resources/489960-1338997241035/Growth_Commission_Working_Paper_24_Population_Health_Economic_Growth.pdf
8. <https://publications.europa.eu/en/publication-detail/-/publication/db169320-2862-4e47-84ab-0019572639ed>
9. <https://epha.org/joint-statement-pledge-for-a-future-eu-roma-framework-which-delivers/>
10. European Commission (2014) Report commissioned by DG Health and Consumers 'Report on the health status of the Roma population in the EU and monitoring data collection in the area of Roma health in the Member States' available online at https://ec.europa.eu/health/sites/health/files/social_determinants/docs/2014_roma_health_report_en.pdf [accessed October 2017].
11. European Commission (2014) Report of the working group on ECEC 'Proposal for key principles of a Quality Framework for Early Childhood Education and Care' available online at http://ec.europa.eu/dgs/education_culture/repository/education/policy/strategicframework/archive/documents/ecec-quality-framework_en.pdf [accessed October 2017]
12. Revisiting the EU Roma Framework: Assessing the European Dimension for the Post-2020 Future. <https://www.opensocietyfoundations.org/reports/revisiting-eu-roma-framework-assessing-european-dimension-post-2020-future>





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Register Number: 18941013532-08