

Immunization among Roma children in Southeastern Europe: What are the true vaccination rates? What are the barriers?

Kristefer Stojanovski, PhD candidate, MPH

Consultant, Center for Regional Policy Research and Cooperation, Studiorum
University of Michigan, Department of Health Behavior & Health Education

Debrecen, Hungary

June 1-3, 2016

Outline

- Introduction
- Rates of immunization across Southeast Europe
- Barriers to immunization
- Conclusion
- Discussion

INTRODUCTIONS

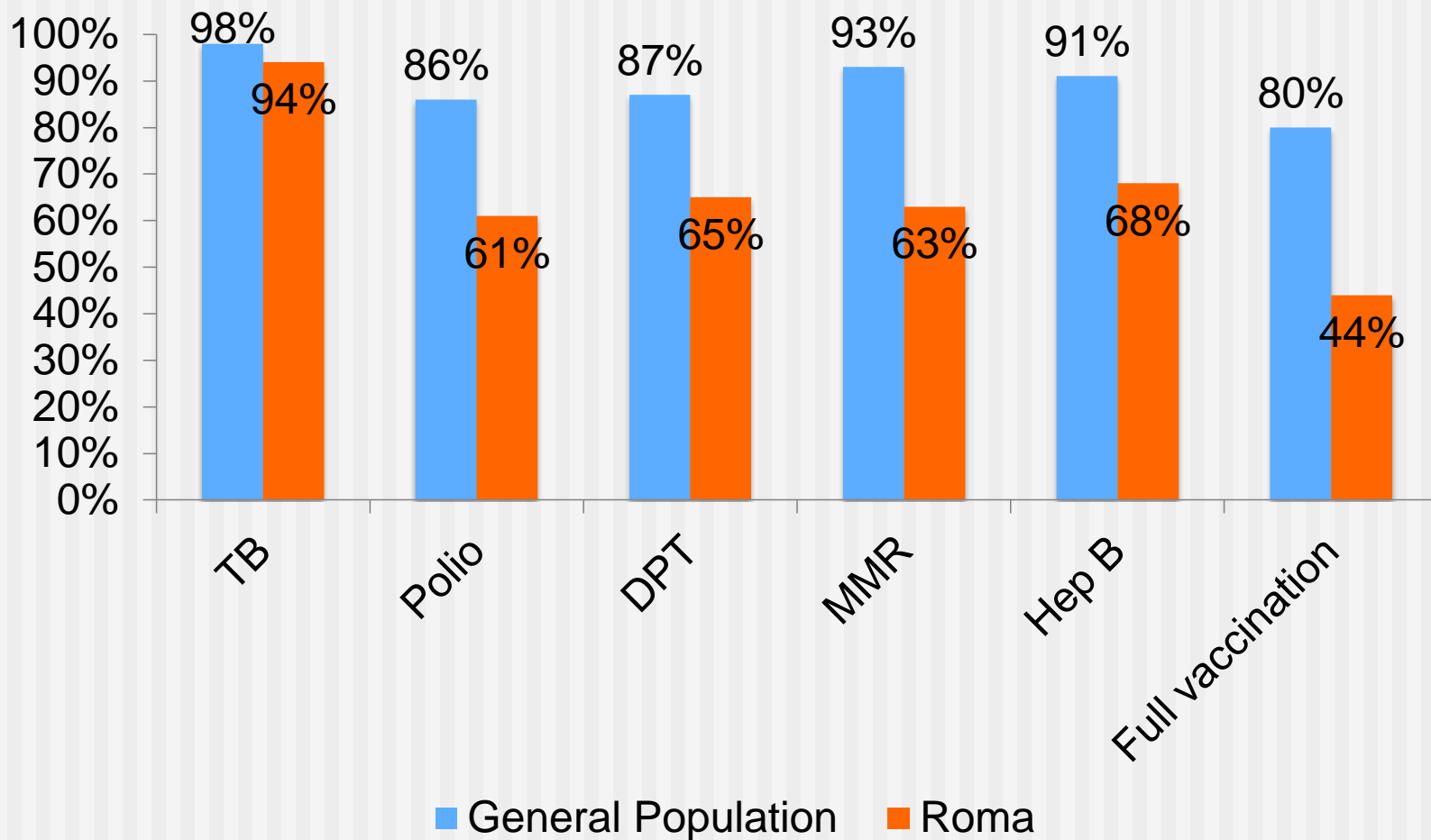
Studiorum

- Center for Regional Policy Research and Cooperation
 - Established in 2002 in Skopje, Macedonia
 - Non-governmental think tank
 - Works on issues of EU economic and social integration, public health, and human rights
- Program Areas
 - Health Policy & Management
 - Human Rights
 - New Media & Society

VACCINATION COVERAGE

SERBIA

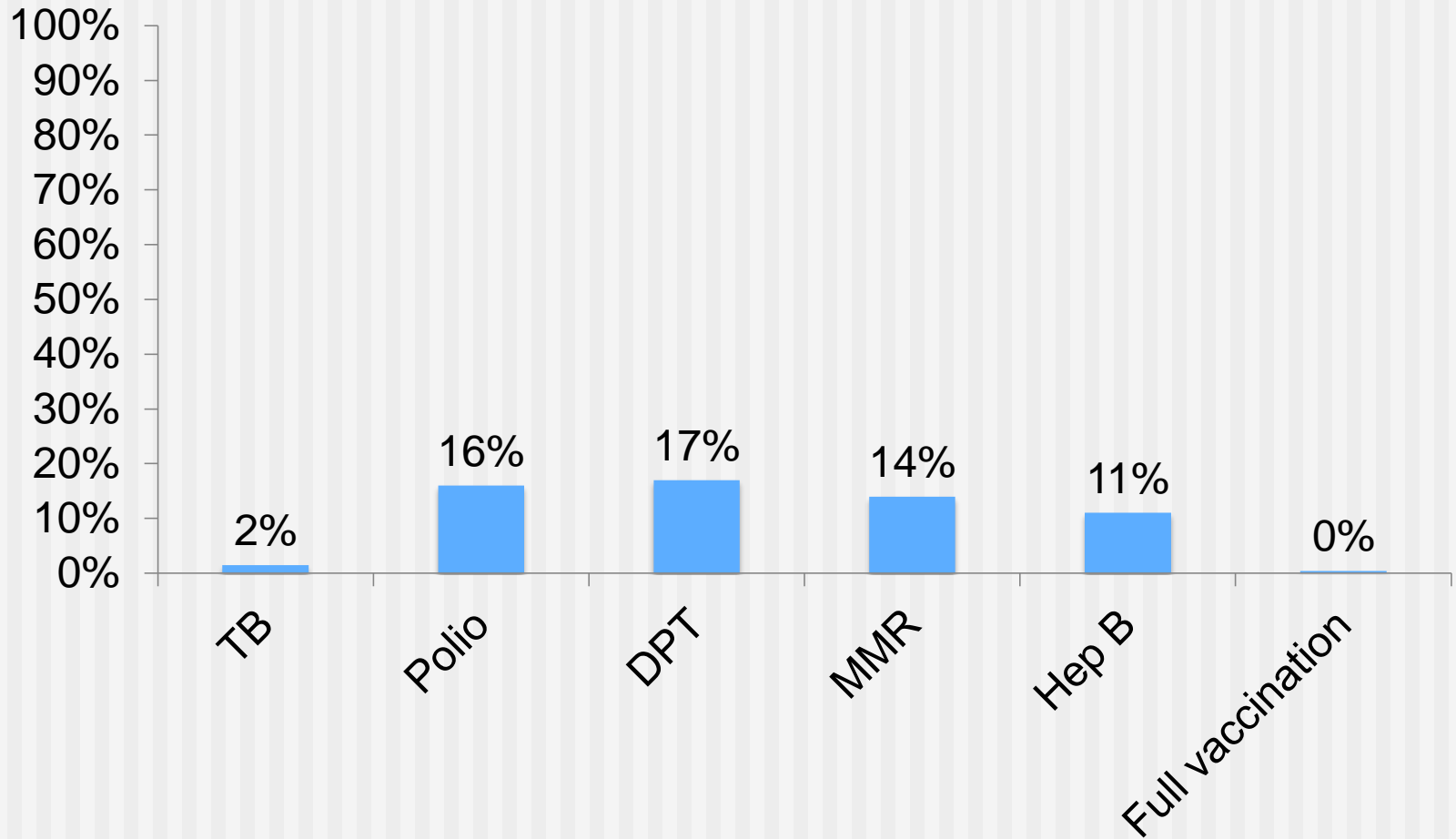
Disparities in vaccination rates in Serbia, MICS 2014



WHO Health & Nutrition Study, Serbia, 2012

- Multi-cluster random sample
- Roma living in Belgrade settlements
 - 42% of settlements considered illegal according to Serbian authorities
- N=468 children
- Aged 6-59 months

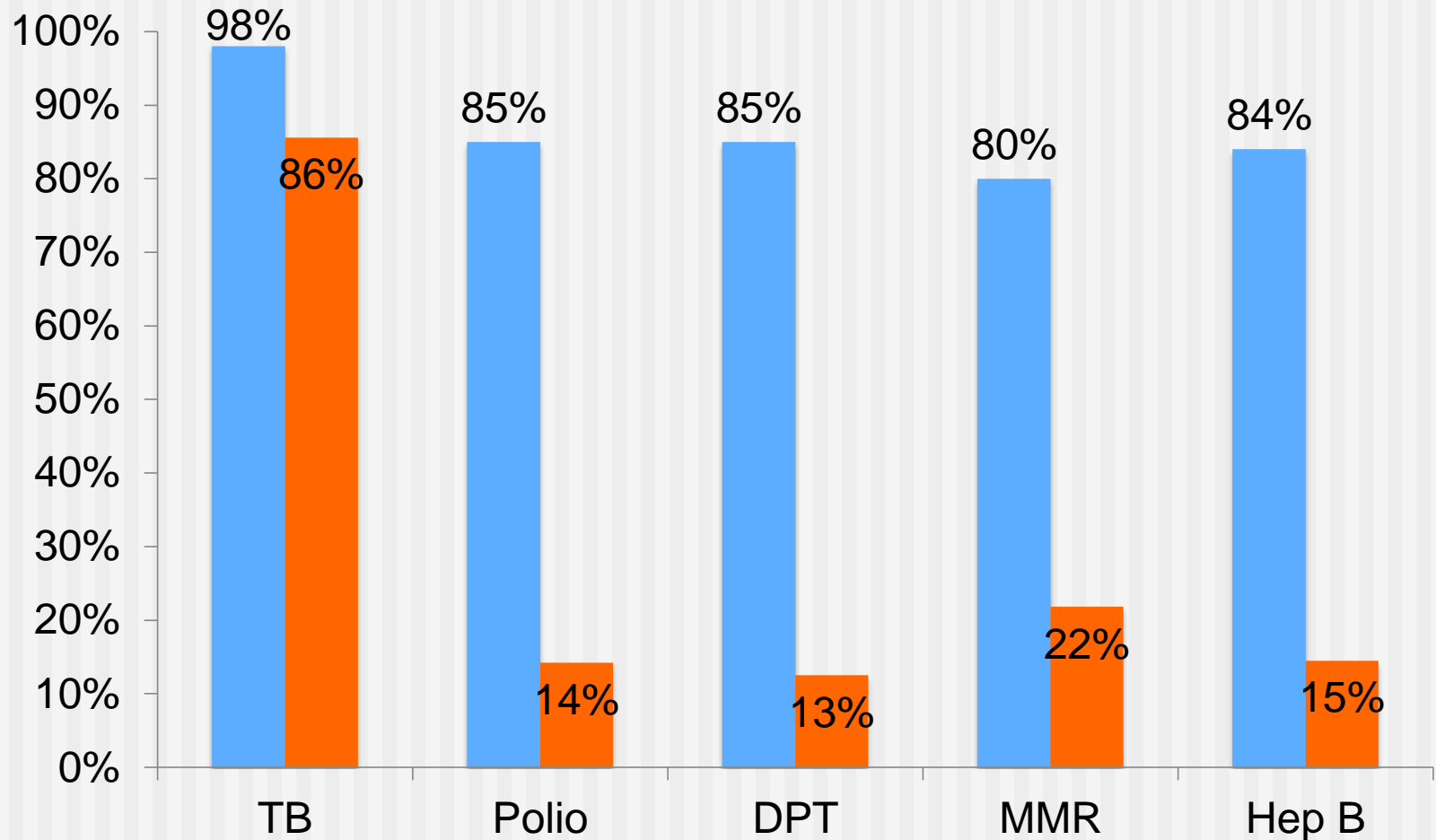
Low vaccination coverage among Roma children in Belgrade settlements



BOSNIA & HERZEGOVINA

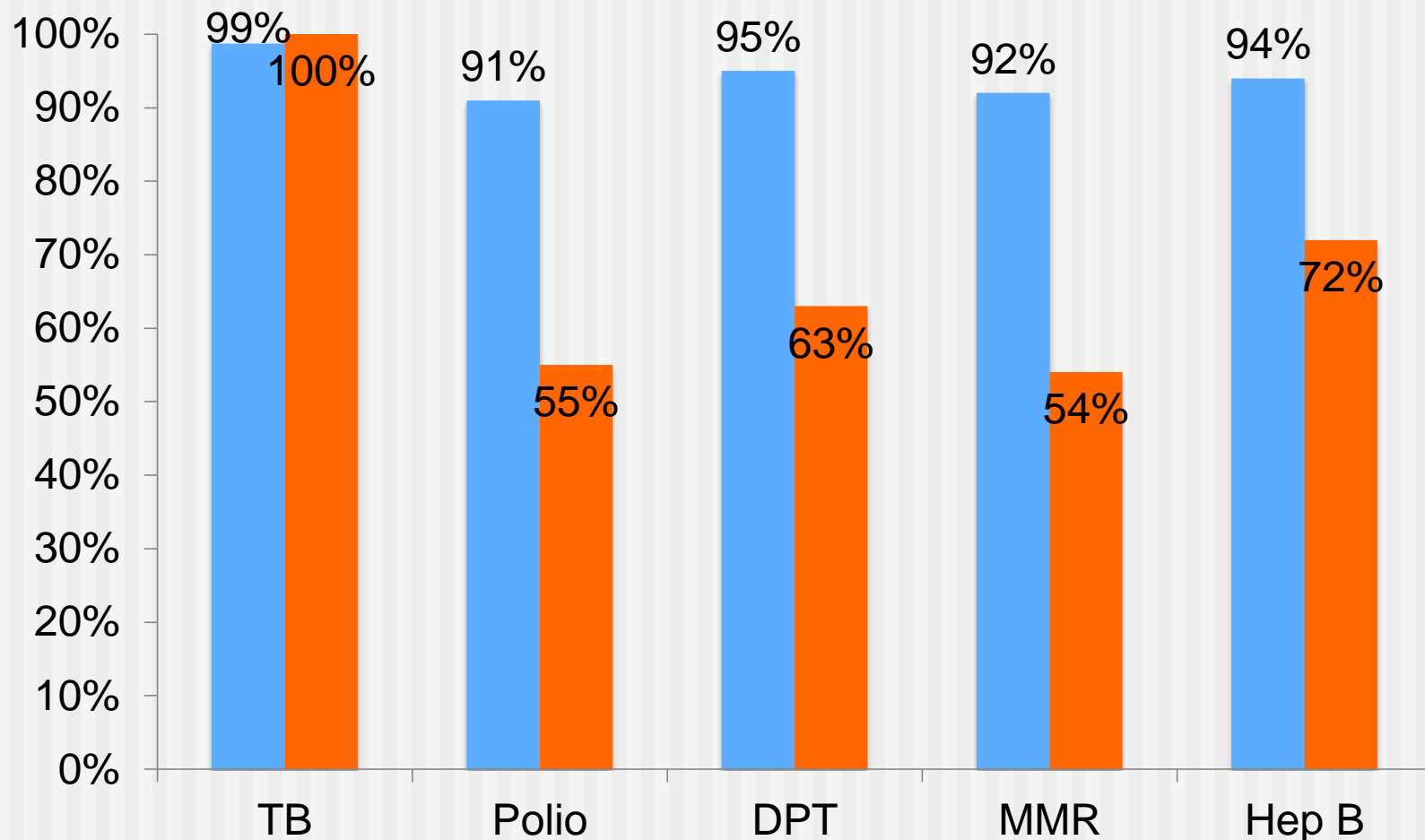
Major disparities in vaccination coverage among Roma children in Bosnia, MICS 2011-2012

STANDARD



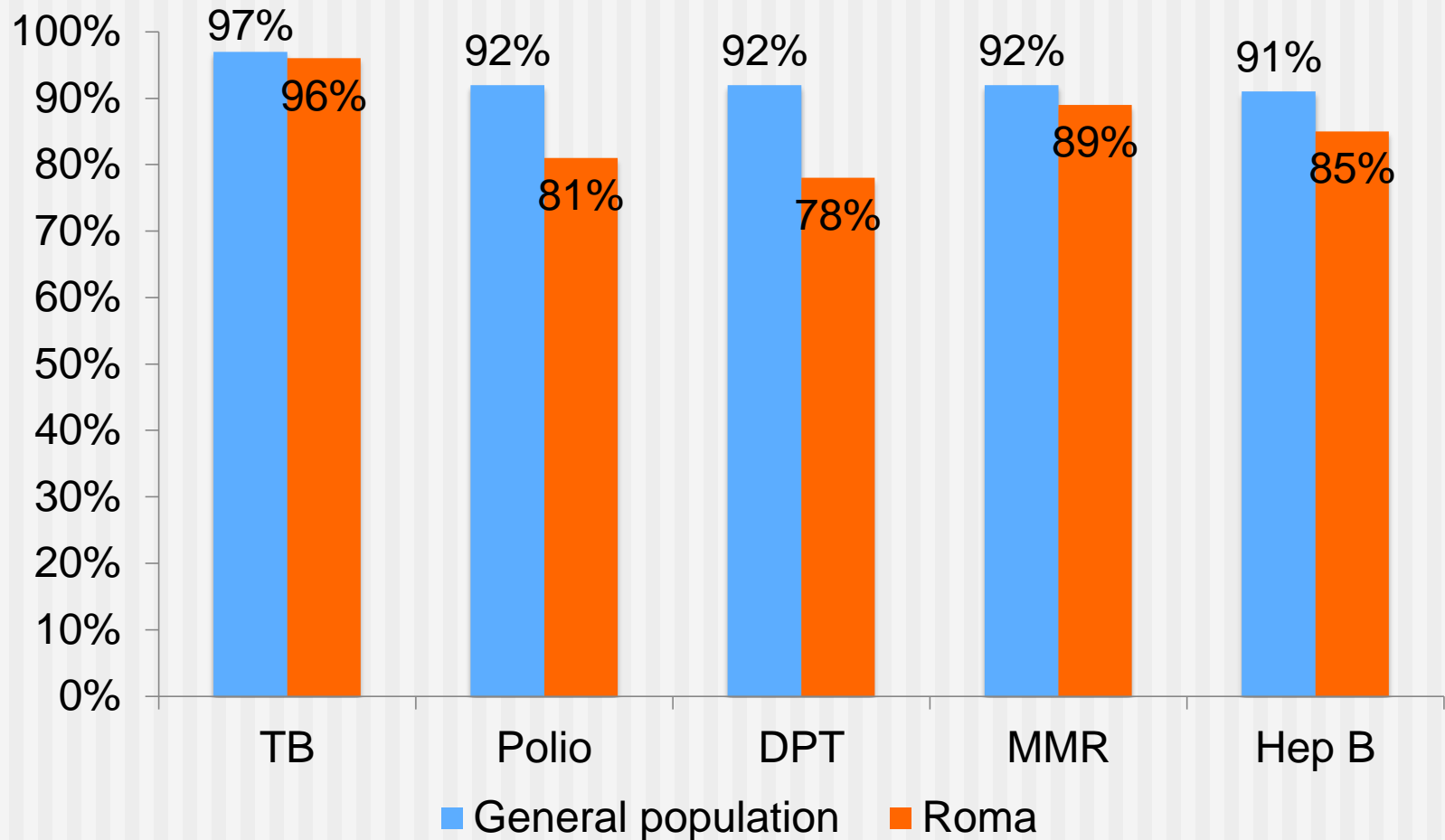
KOSOVO UNSCR 1244

Disparities in vaccination coverage among Roma children in Kosovo under UNSCR 1244, MICS 2013-2014



**FORMER YUGOSLAV
REPUBLIC OF MACEDONIA**

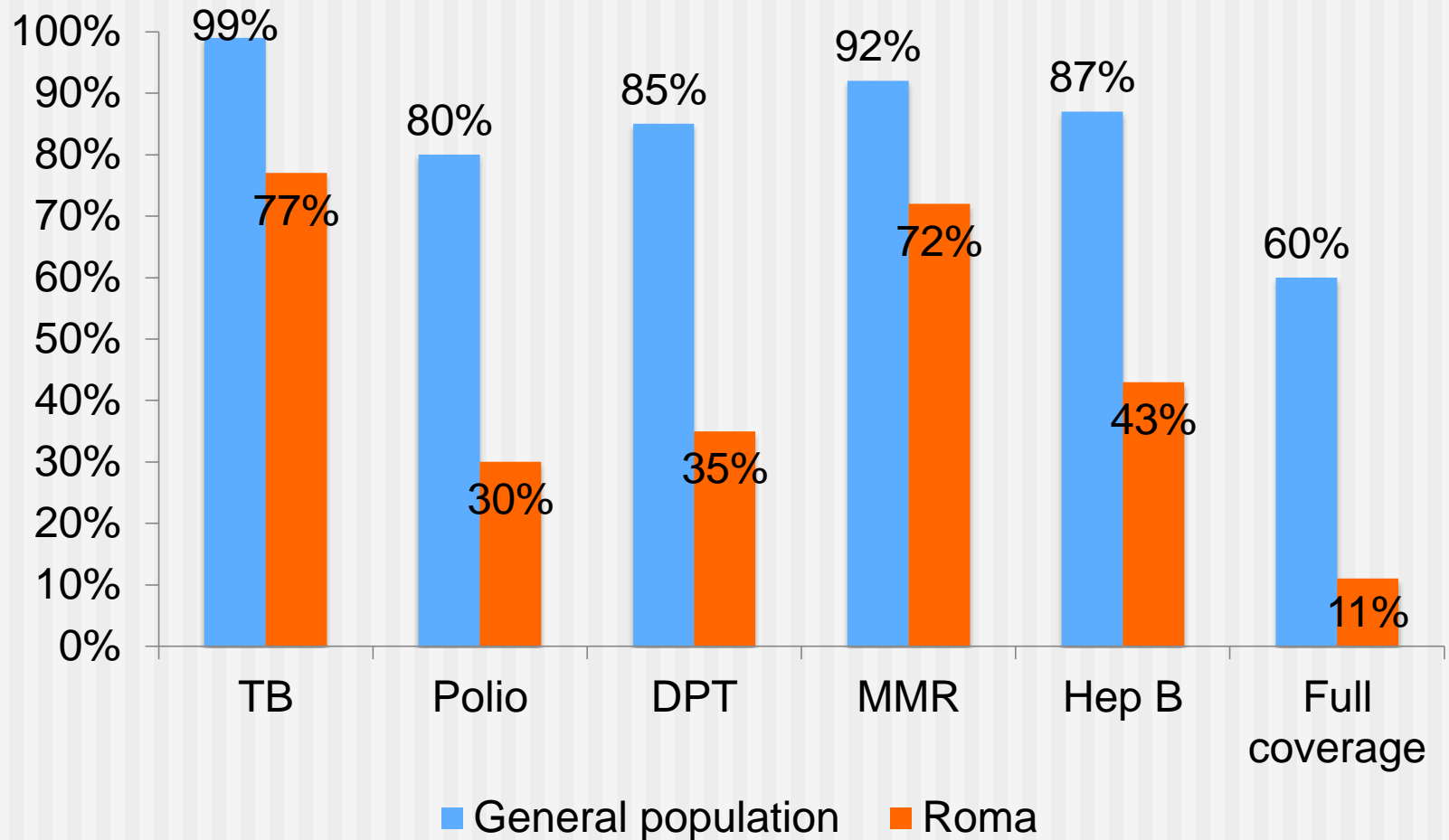
Lower disparities in immunization coverage among Roma children in FYROM, MICS 2011



MONTENEGRO

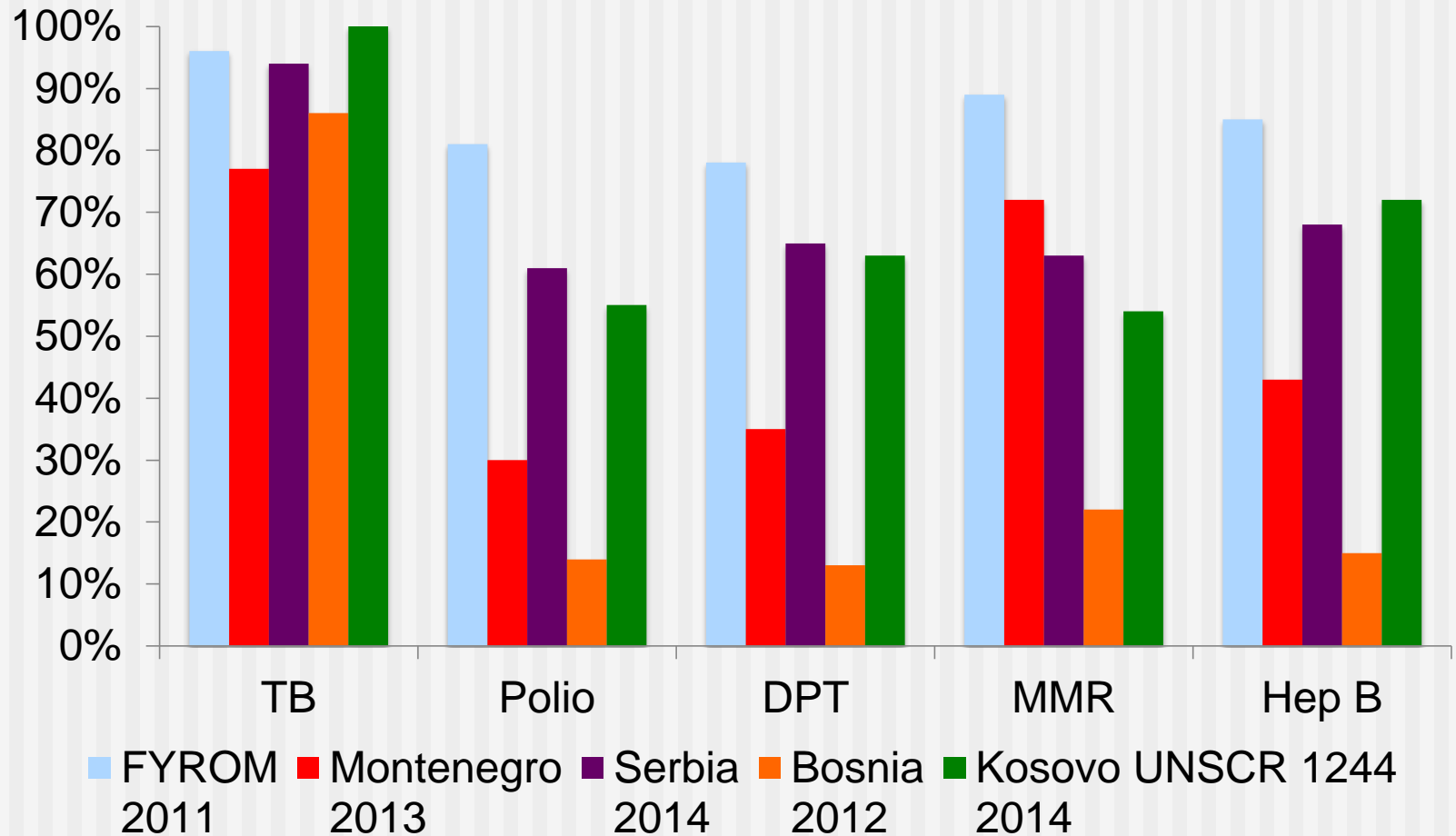
Major disparities in vaccination coverage among Roma children in Montenegro, MICS 2013

STANISLAV



ACROSS COUNTRIES OF SOUTHEASTERN EUROPE

Roma children's vaccination rates across Southeastern Europe, MICS

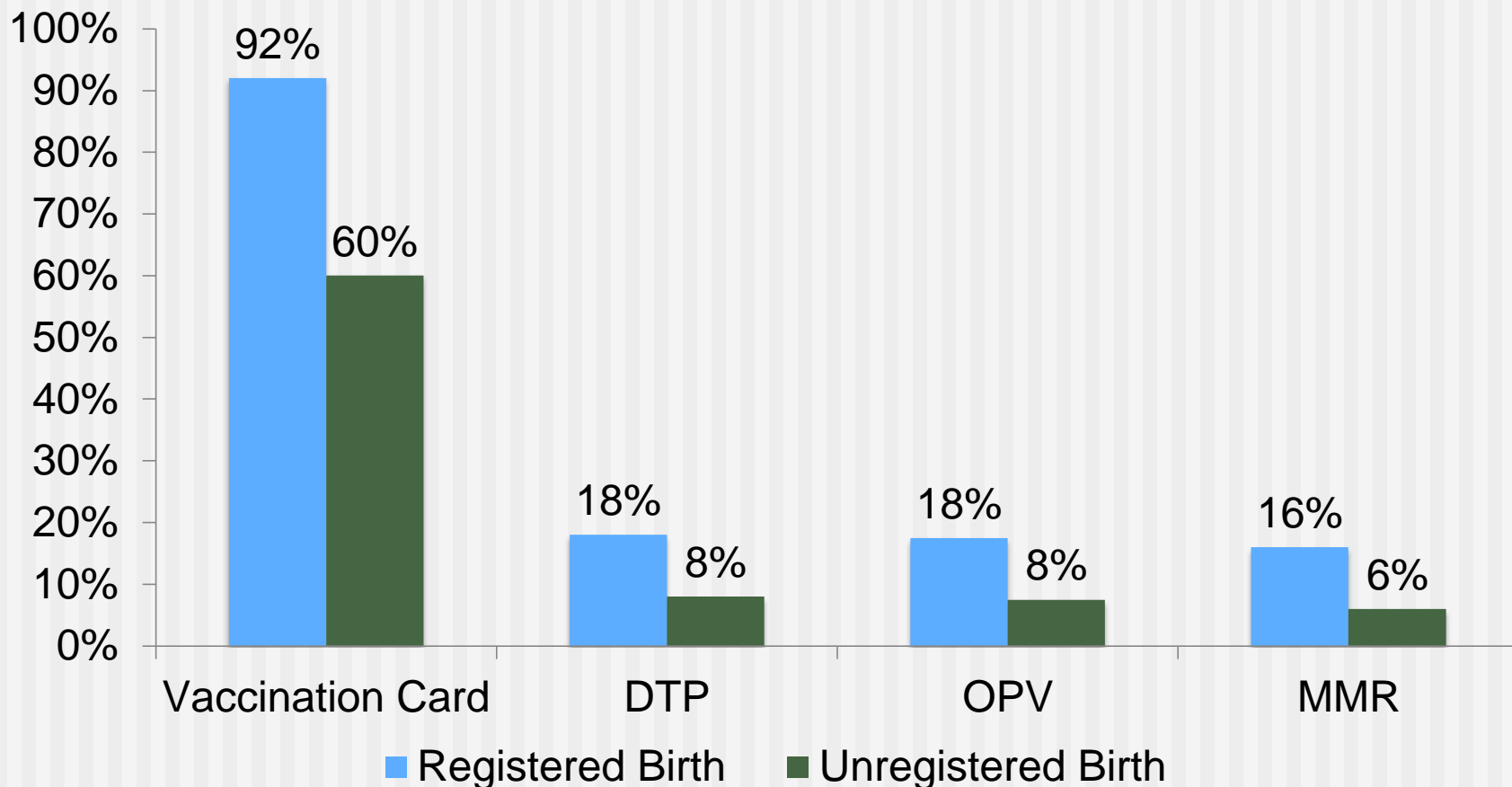


Roma children's vaccination rates across Southeastern Europe, OSCE Regional Report 2013

Country	Vaccination ² (ages 0-6)	
	Roma	Non-Roma
Albania	89%	99%
Bosnia and Herzegovina	82%	97%
Croatia	97%	99%
The former Yugoslav Republic of Macedonia	93%	99%
Montenegro	94%	99%
Serbia	93%	99%

BARRIERS TO COVERAGE

Immunization rates among Roma children in Serbia, WHO Health and Nutrition Study

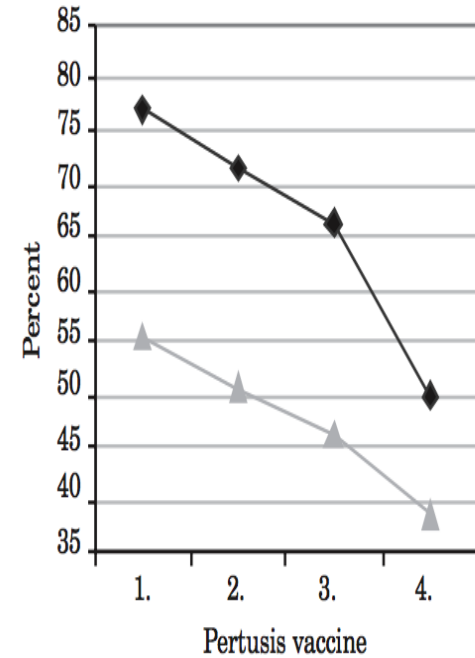
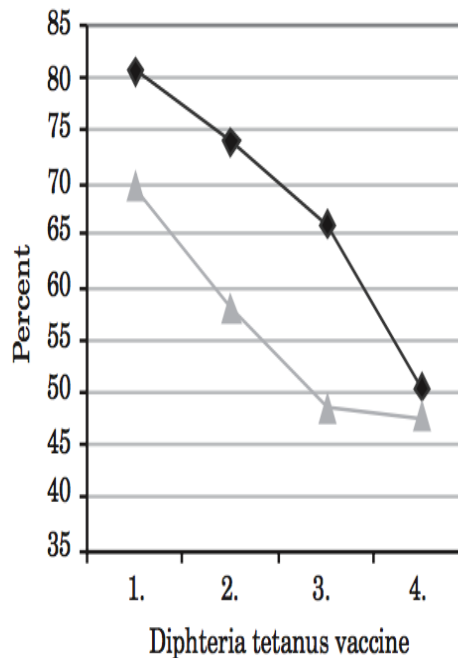
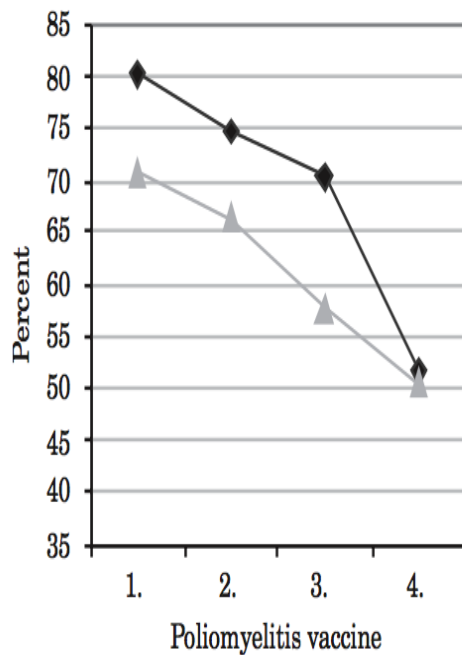


Stojanovski, K, McWeeney, G., Emiroglu, N., Ostlin, P., Koller, T., Licari, L., Kaluski, D. (2012). Risk factors for low vaccination coverage among Roma children in disadvantaged settlements in Belgrade, Serbia. *Vaccine*. 30;5459:5463.

Birth registration predicted vaccination coverage among Roma children in Serbia

- **Vaccination card**
 - OR=6.1, CI(2.5, 15.0)
- **Age appropriate vaccination**
 - DTP, OR=3.8, CI(1.5, 10.0)
 - OPV, OR=3.2, CI(1.5, 6.6)
 - MMR, OR=4.8, CI(1.1, 20.9)
 - HepB, OR= 5.4, CI(1.4, 21.6)

Reduction in vaccination as Roma children age in Slovenia



◆ Preschool-aged Roma children ▲ School-aged Roma children

Kraigher, A., Vidovic, M., Kustec, T., Skaza, A. (2006). Vaccination coverage in hard to reach Roma children in Slovenia. *Coll. Anthropol.* 4:789-794.

Reduction in MMR vaccination due to movement in Poland

- Mass immunization campaign in 2009
- Outbreak of measles in Roma community
- Opportunity to estimate Roma population size and vaccination coverage

- First dose of MMR during campaign, 56%
- Second dose of MMR during campaign, 37%

Findings from WHO vaccination guide pilot study in Bulgaria

- Parents lacked information about importance of vaccinations and timing of vaccinations
- Lack of language fluency
- Costs of transportation, although vaccines are free
- Trust in the healthcare system

Other barriers

- Administrative barriers
 - Lack of identity documents
 - Lack of child registration with primary care clinic/physician
 - Lack of health insurance documents
- Access to health care
 - Discrimination in health institutions
 - Lack of cultural competency

CONCLUSIONS

Conclusions

- Vaccination rates of Roma children are 10-70% lower than children in the general population in countries of residence
- TB immunization has the highest rate across all countries because it is immediately done after birth in the hospital
- Highest rates of immunization in FYROM
 - Roma health mediators extensively used

DISCUSSION

Why are rates low?

- Policy-level barriers
 - Birth registration procedures
 - Informal payment for health services
 - Costs such as transportation to go to health clinics
 - Neighborhood displacement and resettlement
- Institutional-level barriers
 - Discrimination in health institutions
 - Lack of knowledge regarding importance of vaccination
 - Lack of trust in government institutions

How can we improve rates?

- Need for longitudinal research on immunization among Roma
- How can we improve upon best practices?
 - Why are disparities lower in Macedonia?
- Could local community-based organizations be an avenue for improved immunization?
- How does the diversity of Roma communities influence immunization?
 - Roma settlements vs. stable housing

What are the true rates?

- Who is included in analyses of rates?
 - Roma from Census?
 - Low level of identification as Roma
 - Illegal vs. legal settlements?
 - Displaced settlements?
 - School enrolled children?

- All of the above are methodological challenges
 - Must overcome the challenge of estimating Roma populations in their countries of residence

QUESTIONS?

Contact Information

Kristefer Stojanovski

Center for Regional Policy Research and
Cooperation, Studiorum

kristefers@gmail.com

Skype: kstojanovski

www.studiorum.org.mk