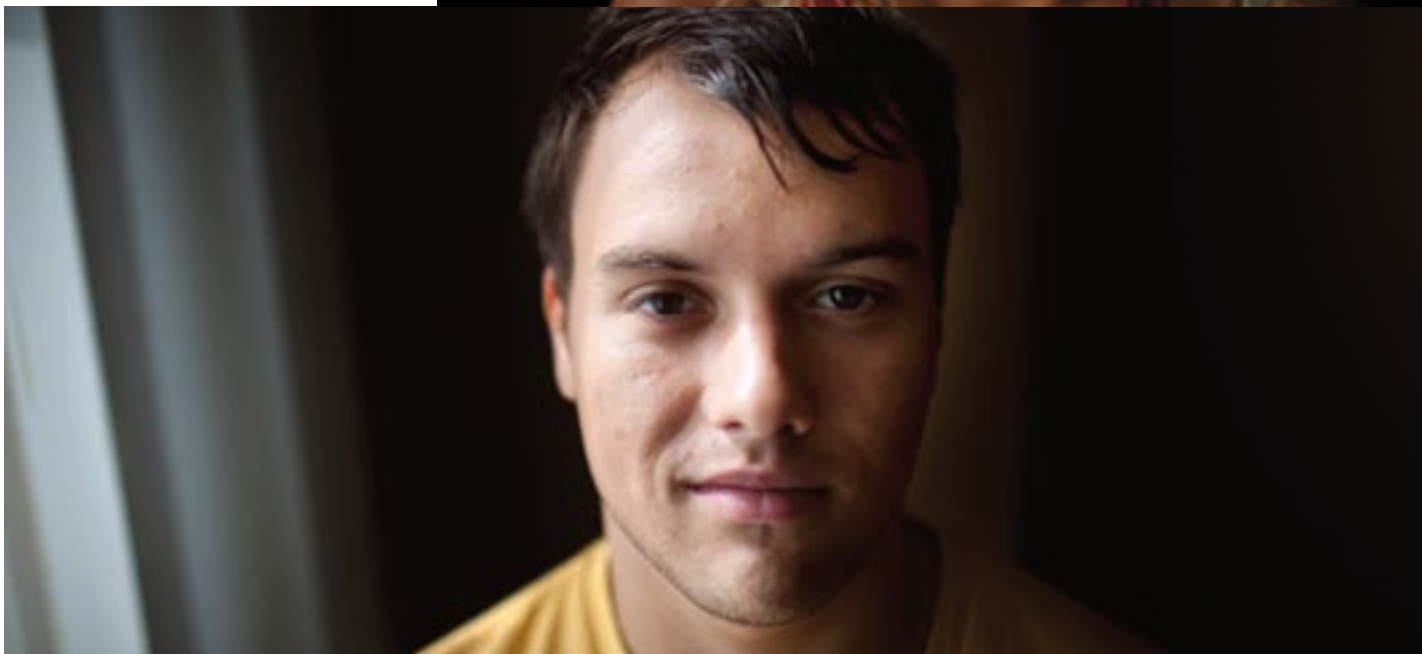


WE ARE ROMA
Roma Health Scholars Learn to
Help Their People

Roma health scholars, studying to become doctors, nurses, and pharmacologists, will help transform health care, shattering stereotypes while combating the discriminatory treatment of Roma patients.

WE
ROMA ARE





At a camp before the start of medical school classes, Roma health scholar applicants learn to become effective advocates for Roma rights in health care settings.

PHOTOGRAPHS BY PAMELA CHEN



Roma health scholars listen to Lacatus Codrea, the *bulibasa*, or elder, of Vanatori, Romania, describe the hardships endured by Roma in his community.



Roma Health Scholars Learn to Help Their People

DURING HIS DECADES as the elder, or *bulibasa*, of a community of about 250 Roma living in the eastern foothills of Romania's Carpathian Mountains, 60-year-old Lacatus Codrea has gathered many insights tempered by adversity.

Codrea saw a mob torch his community, chase the people into a forest, and use automobiles to raze every structure the flames had spared. "We were not allowed to rebuild our homes," he said. Fifteen years passed as he pleaded with local officials to issue the Roma building permits so they could improve the dirt-floored shanties they had clapped together to shelter themselves and their children.

For decades, Codrea watched helplessly as neighbors succumbed to violence and alcohol abuse. He saw children grow to adulthood without being vaccinated, and pregnant Roma women go without visiting a doctor. He still sees the confused gazes of undernourished Roma infants.

Codrea has looked into the dazed eyes of his own 13-year-old granddaughter, Adina, who was partially paralyzed for hours after touching a live power cable; and he erupted in anger at doctors and nurses who refused to examine and treat her.

Yet, despite all he has seen, Codrea has helped convince the people of his

community to emerge from behind walls of mistrust.

On a September morning in 2008, Codrea shared his experiences and insights with participants in an unprecedented new initiative of the Open Society Institute and the Roma Education Fund to improve medical care for Roma in Central and Eastern Europe by addressing the paucity of Roma medical professionals. In the autumn semester of 2008, the Open Society Institute began funding scholarships for 35 Roma students pursuing degrees in medicine, nursing, pharmacology, and related disciplines at accredited schools and universities in Romania.

On that dreary September morning, the program brought scholarship applicants and their mentors to Vanatori to meet and take counsel from Codrea and others in the Roma community. Partners of the Open Society Institute's Roma Health Project considered it critical for the students to visit Roma settlements like Vanatori. With few exceptions, the scholarship applicants were Roma who had schooling and jobs, and who resided in integrated neighborhoods in towns and cities.

The students had to learn firsthand about the hardships endured by less-fortunate Roma who huddle in substandard housing

on the fringes of the greater society. They resort to begging or toil in the lowest-paying jobs. They lack educational opportunities and navigate the world through the fog of illiteracy. They lack health insurance and the money to pay doctors the informal “gratuity” the doctors have come to expect, and depend upon, to augment their low salaries.

In some countries of Central and Eastern Europe, the average life expectancy for the Roma is 10 years less than the average for the majority population, and the infant mortality rates for Roma are twice as high. Throughout the region, Roma suffer disproportionate rates of tuberculosis, HIV and AIDS, viral hepatitis, Type-2 diabetes, coronary artery disease, adult obesity, malnutrition, anemia, dystrophy, and childhood rickets. Human rights groups have even documented instances of emergency services failing to respond to calls for help from places inhabited by Roma.

A crucial element of the Open Society Institute’s effort to help break down the barriers that keep the Roma from accessing health care services is the Roma Health Project, a part of OSI’s Public Health Program. With other programs and grantees in the Soros foundations network, the Roma Health Project is fostering the development of sound public health policies across Central and Eastern Europe—and especially in six priority countries, Bulgaria, Macedonia, Romania, Serbia, Slovakia, and Ukraine. It has initiated programs to respond to the challenges of HIV and sexually transmitted diseases, tuberculosis, and drug addiction.

Bringing Harm Reduction to a Roma Community

The Roma Health Project helped a nongovernmental organization launch Bulgaria’s first methadone program in a

Suing to Improve Health Care

The European Committee of Social Rights in 2008 announced that it would take up a complaint filed by an OSI partner, the European Roma Rights Centre, alleging that Bulgaria has systematically denied Roma access to health care. The complaint charges that the Bulgarian government has violated EU regulations by, among other things, not taking any measures to end widespread discriminatory practices against Roma by doctors and other health care practitioners. “The Bulgarian government, like the governments of other countries with large Roma populations, has taken on many obligations in joining the European Union,” said Robert Kushen, managing director of the European Roma Rights Centre. “But they have yet to live up to these obligations.”

Roma community. “This is important, because drug use in the Roma community is taboo, and it is problematic even to talk about HIV prevention and sexually transmitted diseases,” said Eva Foldes, program coordinator of the Roma Health Project. “Until now, Roma have not had access to a culturally tailored harm reduction program.

This program brings harm reduction right into their community.”

Righting the Wrong of Coerced Sterilization

The Roma Health Project is supporting an advocacy campaign aimed at obtaining justice and compensation for Roma women who have been victims of coerced sterilization. The campaign was launched at the 2008 Women’s World Congress, where activists organized a panel discussion on the issue and promoted efforts to contact officials in Hungary and the Czech Republic. Roma activists subsequently met with government officials in the two countries and urged them to support the amendment of laws on sterilization and provide compensation for victims of coerced sterilization.

Raising Awareness of the Grim Realities of Roma Health

The Roma Health Project in 2008 worked to raise awareness in the English-speaking world about the deplorable health care problems faced by so many Roma in Romania by supporting the translation and distribution of investigative articles commissioned from a number of Romanian newspapers in collaboration with the Center for Independent Journalism in Bucharest.

The newspaper *Ziarul de Vrancea*, for example, discovered that, due to a lack of medical personnel and infrastructure, Roma living in Romania’s Vrancea County—who suffer a high rate of infant mortality and a relatively high incidence of measles, tuberculosis, lice, and chronic diseases—have difficulty gaining access to public health services. In another article, *Dacii Liberi* focused on a Roma health mediator in Nocrich working to improve

the Roma community’s access to health care by organizing courses to train new health mediators as liaisons between the Roma community and local health care providers.

Roma Health Mediators

The Open Society Institute and its partners have in recent years helped broaden the skill sets of Roma health mediators in Romania and introduce the Roma health-mediator concept to Ukraine and other countries of Central and Eastern Europe. These mediators inform Roma of their rights, and document cases of discrimination in health care settings. They help Roma obtain necessary documents that give them access to state health care services. They help effect vaccination campaigns. They calm tempers when disagreements arise between Roma and medical professionals.

One health mediator, Carmen Andrei, called upon the bulibasa, Lacatus Codrea, in an attempt to enroll the Roma of Vanatori in a mass vaccination program. Andrei pleaded with the Roma for over a year, and they did not respond. It was a matter of mistrust and, Codrea said, miscommunication.

Even though Andrei was herself a Roma, Vanatori’s Roma considered her a *gajo*, someone from outside the Roma community. Codrea said, “The first time she came in, she started talking and didn’t stop for half an hour. Back then, when someone tried to give me advice that was good for me, I would ask myself, ‘Why is he giving me this advice?’ I had no trust.” Codrea said the change came when Andrei learned to listen. Andrei said a measles outbreak convinced the Roma of Vanatori to have their children vaccinated and to get vaccinated themselves.

“Now, if she speaks,” Codrea said, “it is impossible for people not to listen to her. Now the local general practitioner knows

all of us. The women go to the doctor. The children are vaccinated. The problem now lies with the hospital. The doctors in nearby hospitals expect to be paid a tip, *baksheesh*, to provide care. If you don't have the money, you die outside."

Medical Scholarships for Roma Students

One goal of the Roma Health Scholarship Program is to increase significantly the presence of Roma doctors in Romania's hospitals, not just to treat patients, but to combat discrimination and human rights abuses. Greater interaction with Roma doctors and nurses can counter negative stereotypes among health professionals about the Roma, and the Roma themselves will feel more comfortable seeking health care.

The recipients of the first Roma Health Scholarship were selected on the basis of academic merit, professional motivation, and leadership skills. The applicants attended Open Society Institute-supported training programs to help them become effective advocates for Roma rights in health care settings. The field trip of scholarship applicants to Vanatori was a part of this training, and it included resident physicians participating as mentors. They too crowded into the sitting room to hear the bulibasa. Most of them had also never visited a Roma settlement like Vanatori.

The students and residents listened in silence as the bulibasa told of Andrei's communication problem, of the lack of vaccinations, and of how, two years earlier, he had come upon his granddaughter Adina lying still on the ground next to the power cable. Codrea took her in a horse cart to a nearby clinic. In the clinic's car they went to a hospital, then to a pediatric center, and then back to the hospital. "The first doctor didn't

want to touch me," said Adina. "I was sick to my stomach and my feet and hands were paralyzed. He did not want to touch me."

Codrea argued with a doctor and finally took Adina into a room and put her on a table. "The doctor was unhappy," he said. "He was threatening. And I think I spoke badly, but the child was worse and worse, and I had waited for two hours." Adina spent several weeks in the hospital recovering from electrocution.

Codrea advised the students and mentors that they had to adjust the way they speak when dealing with Roma: "This is a group that gets angry easily. When they talk loud, it doesn't mean that they are bad. They think this is the way to get action. You have to be patient. You have to listen. If you don't, the person will conclude that you have something against them."

After several hours, the students and mentors left. "I have heard of places like this," said Corina Stanciu, a medical student from the city of Ploesti. "I have seen Roma begging on the streets, but I haven't seen Roma like these. Where I live, Roma have houses, not like this."

"I could not want to be a doctor any more than I want to be one now."

OSI ONLINE

Read more about barriers to health care for Roma in articles by investigative journalists in Romania.
www.soros.org/ar08/romafellows