

# UNderstanding uptake of Immunisations in Travelling aNd Gypsy communities (UNITING): a qualitative interview study

Cath Jackson,<sup>1\*</sup> Lisa Dyson,<sup>2</sup> Helen Bedford,<sup>3</sup> Francine M Cheater,<sup>4</sup> Louise Condon,<sup>5</sup> Annie Crocker,<sup>6</sup> Carol Emslie,<sup>7</sup> Lana Ireland,<sup>7</sup> Philippa Kemsley,<sup>3</sup> Susan Kerr,<sup>7</sup> Helen J Lewis,<sup>2</sup> Julie Mytton,<sup>8</sup> Karen Overend,<sup>2</sup> Sarah Redsell,<sup>9</sup> Zoe Richardson,<sup>2</sup> Christine Shepherd<sup>10</sup> and Lesley Smith<sup>11</sup>

<sup>1</sup>Visiting Senior Research Fellow, Department of Health Sciences, University of York, York, UK

<sup>2</sup>Department of Health Sciences, University of York, York, UK

<sup>3</sup>Institute of Child Health, University College London, London, UK

<sup>4</sup>School of Nursing Sciences, University of East Anglia, Norwich, UK

<sup>5</sup>College of Human and Health Sciences, Swansea University, Swansea, UK

<sup>6</sup>Member of English Gypsy community in Bristol, UK

<sup>7</sup>Institute for Applied Health Research, School of Health and Life Sciences, Glasgow Caledonian University, Glasgow, UK

<sup>8</sup>Centre for Child and Adolescent Health, University of the West of England, Bristol, UK

<sup>9</sup>Faculty of Health, Social Care & Education, Anglia Ruskin University, Cambridge, UK

<sup>10</sup>York Travellers Trust, York, UK

<sup>11</sup>Member of English Roma community in York, UK

\*Corresponding author

**Declared competing interests of authors:** Julie Mytton is a member of the Health Technology Assessment Maternal, Neonatal and Child Health Panel.

**Disclaimer:** This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

Published September 2016

DOI: 10.3310/hta20720

## Plain English summary

### Uptake of immunisation in Traveller and Gypsy communities

Health Technology Assessment 2016; Vol. 20: No. 72

DOI: 10.3310/hta20720

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## Plain English summary

Travellers are less likely to access health services, including immunisation. This study aimed to understand what influences Travellers' immunisation behaviours and identify ideas for improving uptake.

We interviewed 174 people from different Traveller communities (Romanian/Slovakian Roma, English Gypsy, Irish Traveller, Scottish Showpeople) and 39 service providers (e.g. health professionals) who work with Travellers. We identified what helps, and hinders, immunisation uptake, and developed ideas for programmes to help. The ideas were discussed, and agreed, with 51 Travellers and 25 service providers in workshops.

There was widespread acceptance of immunisation. A few English-speaking Travellers worried about multiple/combined childhood vaccines, adult flu and whooping cough. Concerns about vaccines offered during pregnancy and human papillomavirus vaccine were most obvious in the Bristol English Gypsy/Irish Traveller community. Language, problems with reading, discrimination, school attendance, poverty and housing were barriers for some Travellers. Trusting relationships with health professionals were valued. Some English-speaking Travellers described problems of booking and attending for immunisation. Service providers tailored their approach for Travellers. Funding cuts, NHS reforms and poor monitoring challenged their work.

Five programmes were identified as most important across the communities:

1. training for health professionals to understand Traveller ways of life
2. identification of Travellers in health records to tailor support and check uptake
3. provision of a named frontline person in general practitioner practices to provide respectful/supportive service
4. flexible systems for booking appointments, recall and reminders
5. protected funding for health visitors specialising in Traveller health.

Developing a national plan to ensure these programmes are delivered and evaluated would be a useful next step.



ISSN 1366-5278 (Print)

ISSN 2046-4924 (Online)

Impact factor: 4.058

*Health Technology Assessment* is indexed in MEDLINE, CINAHL, EMBASE, The Cochrane Library and the ISI Science Citation Index.

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## This report

The research reported in this issue of the journal was funded by the HTA programme as project number 12/17/05. The contractual start date was in September 2013. The draft report began editorial review in January 2016 and was accepted for publication in April 2016. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HTA editors and publisher have tried to ensure the accuracy of the authors' report and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this report.

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