



Traveller and Roma COVID-19 Vaccination Implementation Plans

Introduction

This briefing paper has been developed by Pavee Point Traveller and Roma Centre to inform the roll-out of vaccines to the Traveller and Roma communities in Ireland. We identify practical mechanisms which we believe will support Traveller and Roma access to, and uptake of, vaccines. The first part of the paper addresses national recommendations to the HSE which are pertinent to the Traveller and Roma communities throughout the State. The second part of the paper focuses on the Eastern Region Traveller Health Unit (ERTHU), which covers CHOs 6,7 and 9, and is coordinated by Pavee Point. ERTHU comprises the largest Traveller and Roma population in Ireland-circa 8,000 Travellers and 2,500 Roma. It has a robust Traveller health infrastructure including 9 Traveller Primary Health Care Projects (TPHCPs) and a dedicated Roma programme in Pavee Point which can be harnessed to support the vaccination roll-out in the region.

We firstly highlight the context and prioritisation of Travellers and Roma for vaccination by HIQA and NIAC. Secondly, we highlight the need for both a mainstreaming approach to vaccination through GPs and mass vaccination centres; but also the need for targeted measures through outreach 'pop-up' vaccination clinics as well as targeted measures within mass vaccination centres. Thirdly we make a series of concrete and practical recommendations which we believe, if implemented, will help to ensure the effective roll-out of the vaccination programme among Traveller and Roma communities throughout Ireland.

Context

In March 2021, both HIQA and the National Immunisation Advisory Committee's (NIAC)¹ recommended the prioritisation of Travellers and Roma aged 18-64 years for the COVID-19 vaccination given significant increased risk of hospitalisation, ICU admission and/or death compared to the general population. As a result of these recommendations, the HSE have confirmed that Travellers and Roma are included in the vaccination allocation Group 9 ('people living/working in overcrowded settings') and will be eligible for vaccination in parallel with age based allocation as per the Department of Health-COVID-19 Vaccination Strategy and Implementation Plan.²

"Travellers (all ages and those aged 18-64 years) were noted to be at an elevated risk of infection, and in those aged 18-64 years there was an increased risk of severe disease (in terms of hospitalisation when considered as a proportion of cases, and hospitalisation, ICU admission and death when considered as a proportion of the population). Notably, these results are considered to underestimate the true prevalence, given limitations with the use of ethnic identifiers and the hard to reach nature of this population (HIQA, 2021:12).

"Members of the Traveller and Roma communities and people who are homeless are the only specific groups identified as being at significantly increased risk of hospitalisation ICU admission or death compared to the general population and should be prioritised for vaccination" (NIAC, 2021:10).

¹ National Immunisation Advisory Committee (NIAC) (2021) Updated Recommendations: Priority Groups for COVID-19 Vaccination. Dublin: NIAC.

² <https://www.gov.ie/en/publication/39038-provisional-vaccine-allocation-groups/>

A number of countries³ have acknowledged that a ‘mainstreaming only’ approach to vaccination delivery strategies will not be effective in optimising the uptake of vaccinations amongst all groups in society, and instead, recognise the need for targeted approaches for indigenous, minority and ethnic groups, including Travellers and Roma. While this document sets out an approach to vaccination for Travellers in the Eastern Region Traveller Health Unit (ERTHU), there is a need for the following mechanisms to be put in place at national levels across all CHOs and THUs to ensure a ‘safe, effective, efficient, agile’⁴ and equitable COVID1-9 Vaccination Programme for Travellers and Roma:

National Recommendations:

1. HSE to issue national communication to all GPs to inform them that all Travellers and Roma (18-64 years) are priority groups for vaccination and to ensure Travellers and Roma are included in local Group 9 vaccination plans to be delivered in parallel with Group 4.
2. The HSE to introduce a priority group ‘Traveller and Roma ethnicity field’ onto the portal so that Travellers and Roma, ages 18+, can register for vaccination appointments with immediate effect given their priority status for vaccination access. The introduction and use of the ethnicity field in the online registration portal is to ensure that Travellers and Roma are identified and invited for vaccination under Group 9 in parallel with Group 4.
3. The HSE to support a family registration approach to vaccinations (similar to batch listings /enrollment bookings for front line health care workers in Section 39 agencies) to ensure that Traveller and Roma extended family groupings can register as a cohort and receive the vaccinations together where possible. This will likely yield in a greater uptake in vaccination and mitigate against ‘drop-outs’ due to lack of access to transport. ERTHU, and potentially other regional Traveller Health Units can support this registration work operationally.
4. The HSE to make provisions for local Traveller organisations/PHCPs to use a generic email address and their EIRCODE to support registration and identification of individual Travellers/Roma who do not have access to internet/ email addresses or cannot provide an EIRCODE.
5. The HSE to issue a national derogation on the need for Roma to provide a PPSN to access vaccinations; alternatively, assignment of generic PPSN to Roma seeking COVID-19 vaccination.
6. The HSE to resource a National Traveller COVID-19 Vaccination Phone Line for a limited time period (e.g. until end of July-depending on vaccine supply and take-up by Travellers) to sign-post, refer and support Traveller queries regarding vaccination.
7. The HSE to continue to resource the existing Roma national COVID-19 Phone Line to support Roma queries regarding vaccination. Ensure that the Roma COVID-19 phonenumber has a directory with the key contact persons for each CHO to ensure a smooth referral process.
8. Where extra doses of the vaccine are identified/available within group 9, Traveller and Roma ‘reserve lists’ should be created by the THUs and provided to the HSE to enable uptake of the vaccine at short notice. A vaccine contact person/point should be identified within each THU.
9. The HSE to prioritise J&J vaccines for Travellers and Roma to support uptake and combat mitigating issues (i.e.) access to public transport, vaccine hesitancy, safety concerns regarding AstraZeneca, follow-up burden for second dose, time, etc. As with the general

³ This includes [Canada](#); [New Zealand](#); and the [United States](#)

⁴ Government of Ireland (2021) *National COVID-19 Vaccination Programme: Implementation Plan*. Dublin: Government of Ireland.

population, most Travellers and Roma have flagged serious concerns about the safety of AstraZeneca and therefore there will be key challenges in relation to administering this vaccine to both communities. In order to combat this hesitancy and maximize potential vaccine uptake amongst Travellers and Roma, the preferred option is the use of J&J vaccine or mRNA vaccines. This a cost-effective approach and will support the reduction of administrative burden on THUs/Traveller Primary Health Care Projects.

10. The HSE to ensure that the ethnic identifier is included in all data collection systems related to COVID-19 vaccination registration and monitoring systems, including those in GP settings (e.g. Socrates, etc.) in order to monitor and report on:
 - the number COVID-19 vaccines delivered to Travellers and Roma
 - the proportion of Travellers and Roma who have completed their vaccines
 - the progress of the vaccination rollout for Traveller and Roma populations
11. CHOs to develop a Standard Operating Procedure for Traveller and Roma vaccination according to the need in their CHO area. These plans should be developed in consultation with Traveller organisations, and organisations working with Roma. The HSE to work in collaboration with trusted community development/health workers to support the vaccination roll out.
12. Urgent consideration should be given to the appointment of a dedicated National Clinical Lead in Public Health for Travellers & Roma and assignment of public health resources at CHO levels.

Recommendations for an Eastern Region COVID-19 Vaccination Plan

The Eastern Region Traveller Health Unit (ERTHU) is co-ordinated by Pavee Point on behalf of the HSE. The THU work plan is implemented through regional THU initiatives with 9 PHCPs and a local health initiative. As the largest THU in the country, the Eastern region THU works across 3 CHOs (6, 7 & 9) covering approx 8,000 Travellers or a quarter of the total Traveller population in Ireland. Given the demographic profile of Travellers whereby 42% are under 15 years and only 3% live over 65 years we estimate there are circa 3,000 Travellers eligible for the vaccination in our region. However, it is important to note that a small proportion of Travellers have already received the vaccine and an unidentified number remain hesitant. A number of identified key challenges and opportunities to a successful vaccination plan as related to Travellers are as follows:

Opportunities:

- Harnessing capacity and local intelligence of Traveller organisations/PHCPs in reaching the local community and promoting vaccine uptake (e.g. 83% of Travellers receive their health information from Traveller organisations/PHCPs⁵)
- High demand for vaccines in Traveller sites where outbreaks have occurred. There is a need to build on this momentum and to opportunistically provide vaccine options in the immediate aftermath of a COVID outbreak.
- It is envisaged that in May 2021, Level 5 restrictions will be eased and therefore there is an urgent need to ensure that Traveller vaccination plans are rolled out immediately to coincide with the easing of restrictions.
- Pavee Point has a dedicated Roma team, as well as strong links with other relevant organisations working with Roma in the Eastern Region (for example TRIPP Tallaght, and Kildare Leadership Partnership). A collaborative approach is needed to meet the needs of the Roma community in the Eastern region, with approximately half of the 5,000 Roma population residing in CHOs 6, 7 & 9.

Identified challenges:

- Mixed experiences of GPs among Travellers. Some have really good and trusting relationships whilst others have had negative experiences
- Travellers are widely dispersed, with some living in remote areas geographically, throughout our region
- Limited availability and access to public transport given site locations on periphery of towns etc.
- General vaccine hesitancy among Travellers & Roma
- Safety concerns as related to AstraZeneca and its impact on vaccine uptake
- Vaccine follow-up and the probability of vaccine incompleteness (for 2 dosages)

Local Traveller organisations/PHCPs have been critical to the success of the COVID-19 response in partnership with the HSE and public health. The following recommendations outline the approach proposed by the Eastern Region THU which was developed in collaboration with our PHCPs to support effective vaccination rollout to Travellers across CHOs 6, 7 & 9 using the current pathways:

- 1) GPs;
- 2) Mass Vaccination Centres;
- 3) Targeted vaccination programmes (e.g.) congregated settings/home vaccination, etc.

⁵ https://www.ucd.ie/t4cms/AITHS_SUMMARY.pdf

We are seeking clarification in relation to the role of GPs in the vaccination programme once high-risk and priority groups have been offered the vaccination as this will have an impact on the Traveller vaccination plan.

Strong communication is imperative for the success of a regional Traveller vaccination plan and the THU will continue to work with the HSE in driving a communications campaign to support rollout on a regional level (e.g.) importance of vaccination, registration process, pathways to vaccination, etc.

Pathway 1: GPs

GPs have been key in delivering the mainstream approach to vaccinations in their local areas. However, it is important to note that not all Travellers, and less than 50% of Roma, are registered with GPs. Many also have mixed experiences of engaging with GPs ranging from really positive to negative. To help facilitate provision of vaccines to Travellers & Roma through GPs we recommend:

- HSE to issue a national communication to all GPs to inform them that all Travellers and Roma have been included as priority groups for vaccination and to ensure Travellers and Roma are included in local Group 9 vaccination plans to be delivered in parallel with group 4.
- The HSE to ensure that the ethnic identifier is included and implemented in all data collection systems related to COVID-19 vaccination registration and monitoring systems, including those in GP settings (e.g. Socrates, etc.) in order to monitor and report on locally:
 - the number COVID-19 vaccines delivered to Travellers and Roma
 - the proportion of Travellers and Roma who have completed their vaccines
 - the progress of the vaccination rollout for Traveller and Roma population

Pathways 2: Mass Vaccination Centres

A number of mass vaccination centres have been established as a mainstream mechanism to deliver vaccinations nationally. In order to ensure Traveller and Roma engagement with the Centres, we recommend the following:

- The HSE to identify a key contact person within each Mass Vaccination Centre for Traveller organisations/PHCPs and Roma groups to liaise with
- The THU to identify a key contact person to coordinate regional responses and liaise with the HSE Mass Vaccination Centres and provide the following supports:
 - Supporting registration of Travellers in the local area (e.g.) collecting information on site for the purpose of registration
 - Appointment reminders and follow-up (where needed)
 - Organising Traveller and Roma access to the closest vaccination centres given the lack of availability of public transport and the cost factors involved for families dependent on social welfare
 - If there are still transport challenges, the THU will explore with the HSE how to address these
 - Provide support on site for the HSE and Travellers at the Vaccination Centres during vaccination
- The HSE to support a family registration approach to vaccinations (similar to batch listings /enrolment bookings for front line health care workers in Section 39 agencies) to ensure that Traveller and Roma extended family groupings can register as a cohort and receive the vaccinations together where possible.
- The HSE to support dedicated walk-in appointment slots for Travellers and Roma in each of the regions; and the THU to support on-site registration for walk-in appointments.

- The THU to create a priority reserve list for Travellers where extra doses of the vaccine become available (e.g. leftover vaccines becoming available through homeless vaccination initiatives etc.
- The THU to signpost Travellers to Mass Vaccination Centres, and to engage with the relevant organisations working with Roma to signpost Roma to Mass Vaccination Centres also.

Pathways 3: Targeted Vaccination Programme- Pop-up clinics

PHCPS have identified pop-up clinics as a special measure to support Traveller vaccination uptake in the region, particularly for Travellers who are isolated and dispersed throughout county level (e.g.) Co. Wicklow, etc. Throughout COVID, PHCPs have worked in partnership with the NAS and SafetyNet to undertake mass testing and outbreak control measures and trust has been built with these agencies. We want to build on this work as a confidence building measure, making the vaccine choice the easier choice, we believe that bespoke outreach pop-up vaccine clinics should be considered and provided in areas of significant Traveller population. This will help in creating the conditions to support vaccine uptake- in terms of role-modelling where they see family members and other Travellers they know being vaccinated we think it will create momentum and encourage more Travellers to get vaccinated. This was our experience in organising outreach mass testing.

- The HSE to resource pop-up clinics in each of the CHOs where local needs exist as identified by the THU
- HSE to use existing resources (NAS, SafetyNet, dedicated Traveller PHNs) to support administration of vaccines/other clinical needs in pop-up clinics
- The HSE to explore the use of local GPs to support administration of vaccines/other clinical needs in pop-up clinics
- Local Traveller organisations/PHCPs to provide the necessary operational and logistical support:
 - Identification and provision of site locations (group housing, halting sites, etc.) for pop-ups clinic which are accessible for the majority of Travellers in the local area. This includes: space for registration desks; waiting areas (with social distancing); clean area for vaccine storage and vaccine preparation; designated area for vaccine administration; designated private area for post vaccine observation for 15-30 minutes.
 - Registration support, including family cohorts which will address transport issues.
 - Facilitate engagement of local Travellers and promote vaccination uptake at the clinics .
 - Where feasible and appropriate, liaise with relevant organisations working with Roma to include Roma in pop up vaccination clinics.
 - Provide physical and practical supports (PPE, refrigeration, electricity, possible venues, etc.)
 - Appointment reminders and follow-up (where needed)
 - Monitor Traveller vaccination uptake in the area in collaboration with the HSE/public health/NAS/SafetyNet.