

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

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

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## Plain English summary

### Uptake of immunisation in Traveller and Gypsy communities

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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.



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