MEM-TP PROJECT

Training Packages for health professionals to improve access and quality of health services for migrant and ethnic minorities, including the Roma

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Presentation to the EC Expert Committee on Social Determinants and Health Inequities

Luxembourg 18 December 2015
Main project goal

- Review, develop, test and evaluate training for health professionals in order to facilitate the access and improve the quality of health services for migrants and ethnic minorities, such as the Roma
• Service contract of €600 000
• January 2014 – March 2016
• Implemented by a consortium
  – Andalusian School of Public Health
  – University of Copenhagen
  – University of Amsterdam
  – Azienda Unitá Sanitaria Locale Reggio Emilia
• Five subcontractors
  – Jagiellonian University (Poland), National Institute of Public Health (Rumania) and Trnava University (Slovakia)
  – IOM and EPHA
Five work packages

• WP1 – Review migrant and ethnic minorities' situation in the EU and identify common challenges and best practices
• WP 2 – Review existing training materials
• WP 3 – Produce content of new training package
• WP 4 – Train trainers, pilot training programmes and evaluate
  Pilot countries: Denmark, Italy, Poland, Romania, Slovakia and Spain
• WP 5 – Finalise training materials and evaluation report and disseminate results
Timeline

• Reviews (WP1 and WP2): September 2014 (final approval January 2015)
• Training package (WP3): December 2014
• ToT in Granada: January 2015
• Local adaptation and pilots: February – May 2015
• Dissemination workshop: 2 October 2015
• Now finalising various reports
WP1 – MEM situation analysis

Six chapters

1. Demographic data and terminology
2. Migrants’ state of health and determinants
3. Legal and policy frameworks
4. Barriers to access
5. Factors undermining quality
6. European framework for collaboration on ethnic and minority health
WP1: Main take-home messages

• ‘Health in all policies’, diversity and intersectionality increasingly recognised,

• Need for **a joined up way of working** (e.g. social services, schools, families and community organisations),

• **Entitlement ≠ access**: Targeted services and interventions essential,

• **Barriers** to access and quality remain and are **often related to organisational structures**, 

• In adapting the training packages locally
  – Take account of national health system features, characteristics of migrant populations and **local context**, and
  – **Shift** training **towards diversity sensitivity** (intersectional approach) instead of focusing only on cultural differences
WP2: Training review

• Provide overview of training material produced in EU countries in the last 10 years,
• Identify good quality material by assessing against quality criteria
• Produce directory of training materials
• Propose recommendations for the new training package
WP 2: Main recommendations (a)

- Adopt a **holistic and systemic** approach when defining objectives
- **Involves service users and stakeholders** in training development and delivery
- Address training to a **multi-professional audience**
- Develop a clear rationale and **pedagogical approach**
- Avoid passive acquisition of knowledge about different ethnic groups
WP 2: Main recommendations (b)

- **Integrate cultural competence** with other approaches
- **Link** training programmes to **key organisational support** mechanisms
- **Choose a participatory and experiential training delivery** method
- **Focus on outcomes** in training design, implementation and evaluation
WP 3: MEM-TP training materials
ESSENTIAL CORE CONTENTS

Module 1: Sensitivity and awareness of cultural and other forms of diversity

Module 2: Knowledge about migrants, ethnic minorities and their health

Module 3: Professional skills

Module 4: Knowledge application

Additional module 1: Target groups

Additional module 2: Specific health concerns
Example of a guideline

Title of the module

Title of the unit

Type of source
Module 4, Unit 2, Activity 3:
Service Organization and Change Management

PREPARED BY:
Amersh Gueis
Andalusian School of Public Health, 2015

Individual activity
Please complete the template, responding to the following aspects:
- List reasons for taking cultural and ethnic diversity into account in your own instructional context.
- Identify relevant stakeholders.
- List potential barriers for the implementation of management changes.
- Identify strategies for introducing a service organization oriented towards cultural and ethnic diversity in your institution.

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<th>Reasons for taking cultural and ethnic diversity into account</th>
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Example of presentation

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MODULE 2: KNOWLEDGE ABOUT MIGRANTS, ETHNIC MINORITIES AND THEIR HEALTH

Unit 1: Migrants’ and ethnic minorities’ health problems and health determinants

Elaborated by:
Olga Leralta, Andalusian School of Public Health, 2015
Essential core: Module 1

Sensitivity and awareness of cultural and other forms of diversity

*Unit 1* Diversity

*Unit 2* Intercultural competence and diversity sensitivity
Essential core: Module 2

Knowledge about migrants, ethnic minorities and their health

*Unit 1*  Migrants’ and ethnic minorities’ health problems and health determinants

*Unit 2*  Migrants’ and ethnic minorities’ use of health care
Essential core: Module 3

Professional skills

*Unit 1*  Intrapersonal skill development

*Unit 2*  Interpersonal skill development
Essential core: Module 4

Knowledge application

Unit 1  Strategies and procedures for people-centered health care services oriented towards cultural and ethnic diversity

Unit 2  Strategies for planning and implementing actions

Unit 3  Public health, preventative health care and promotion from multidisciplinary perspectives
Knowledge application

*Unit 4* Quality of health care taking diversity into account

*Unit 5* Community-based approaches, promotion of user and community participation and involvement

*Unit 6* Intersectoral approach
Additional module 1

Target groups

*Unit 1* Ethnic minority groups. Including roma and sinti communities

*Unit 2* Migrants in an ‘irregular’ situation

*Unit 3* Refugees and asylum seekers

*Unit 4* Vulnerable groups

*Sub-unit* Children’s health
Additional module 2

Specific health concerns

*Unit 1*  Chronic diseases

*Unit 2*  Communicable diseases

*Unit 3*  Mental health

*Unit 4*  Sexual and reproductive health
• **Length** of the training sessions was **adapted to the local context** (breaks, lunch time…)

• **Activities and practical experience sharing** were very well **appreciated**, occasionally taking **longer** than planned in the agenda.
Objectives:
1. Assess the training materials.
2. Evaluate the development of the pilot training.
3. Evaluate the opportunities for knowledge transfer.
4. Evaluate the professional profile and training needs of the participants before and after the training.
5. Assess the quality and satisfaction of the trainees regarding the teaching activities.

Evaluation Plan

The participants of the pilot trainings had a double role:
1. As participants of the piloting process, assess the training materials,
2. As trainees, follow the evaluation process of professional profile, training needs, quality of teaching and satisfaction to be applied in future uses of the training packages.
• **Assessment of training materials**
  o Training materials questionnaire (participants)
  o Template for a qualitative evaluation of the pilot training, training materials and transference (trainers)
  o Qualitative feedback in the website forum (participants)

• **Evaluation of professional profile, training needs, quality of teaching and satisfaction.**
  o Pre-Test: Professional profile and training needs questionnaire (participants)
  o Post-Test: Training needs questionnaire (participants)
  o Quality of teaching and satisfaction questionnaire (participants)

• **The assessment tools** were prepared as **online surveys** in the **local language**, sent to the trainees by means of a personal e-mail and accessed and analysed by the EASP team.
All materials at www.mem-tp.org
Thank you very much!

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