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## Letter to the Editor

## COVID-19 and the Gypsy, Roma and Traveller population



Every European country has been affected by coronavirus disease 2019 (COVID-19), which threatens to disproportionately impact highly mobile populations who may be socially marginalised and experience increased barriers to care or public health protection measures. The Gypsy, Roma and Traveller (GRT) population across the continent is likely to be at particularly increased risk of morbidity, mortality and the psychological, social and economic effects of the pandemic. Care must be taken to protect this group from novel coronavirus and from widening existing disparities.

The GRT population includes 12 million people across Europe<sup>1</sup> and consists of a range of ethnic groups with nomadic ways of life,<sup>2</sup> representing one of the most disadvantaged minorities across the continent.<sup>3</sup> GRT communities have drastically poorer health outcomes including significantly shorter life expectancy, increased prevalence of physical and mental health problems and higher uptake of risky health behaviours.<sup>4</sup> Furthermore, GRT groups are disproportionately affected by communicable diseases, such as measles, hepatitis and tuberculosis,<sup>4</sup> and are less likely to engage with healthcare services, including primary and preventive care such as vaccinations, child health and maternal care, due to barriers including culture, language and health literacy.<sup>3</sup>

These factors disproportionately expose GRT groups to increased risks from COVID-19, including infection, disease requiring care and transmission within their communities. Living conditions also reduce engagement of these groups with mitigation measures, such as regular hand washing, physical distancing and accessing health care. The increased risks presented by COVID-19 for these communities threaten to exacerbate existing health disparities within GRT groups and impact on the wider public health.

A further consideration in the context of COVID-19 is the nomadic way of life traditional to these communities. Public health strategies restrict all non-essential travel, policies which may not be feasible or acceptable amongst GRT groups with high mobility. This may increase the risk of transmission between communities and present challenges for tracking and containing COVID-19.

The distinct risk factors and health needs experienced by GRT groups must be included in COVID-19 responses. These efforts

should prioritise increasing access to health services and health information and be delivered in an equitable, culturally sensitive, non-discriminatory manner using evidence-based strategies including dedicated services, health worker outreach and specialist roles for community leaders.<sup>3</sup> Public health authorities face unique challenges in containing COVID-19 and equitably addressing health disparities amongst GRT communities, with the potential for each to exacerbate the other. Urgent attention must be given to this marginalised group to ensure they are included in the response.

## References

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