

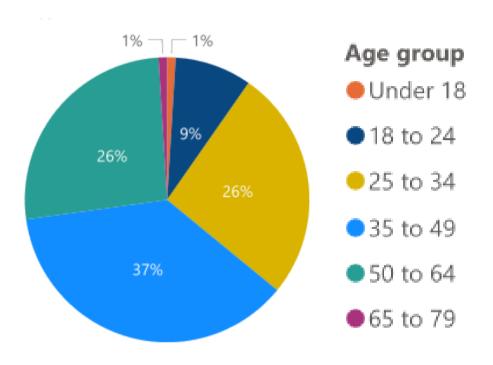


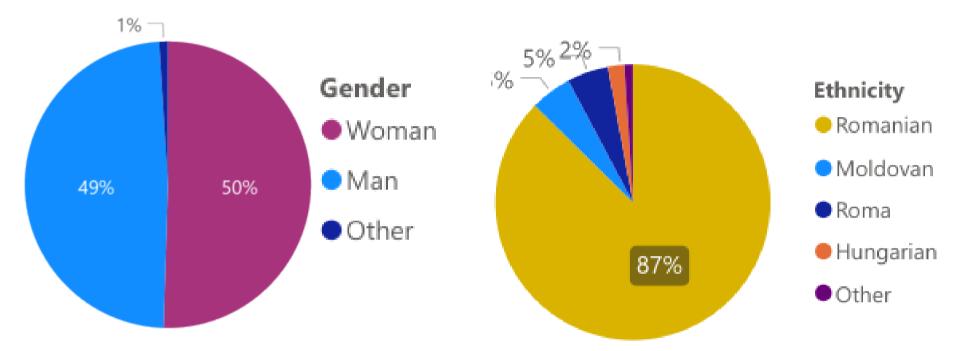


Romanian trust and vaccine project







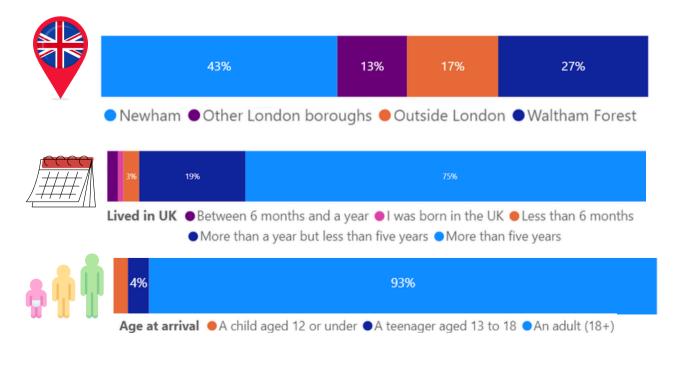


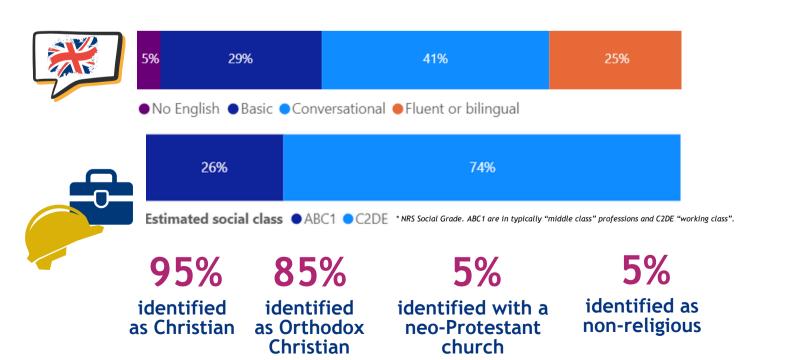


18% lived with a long-term condition

7% were disabled

7% were neurodivergent





Research Questions and Methodology

We designed a survey in order to understand:

- How do Romanians in the UK engage with the NHS?
- What is their experience of the NHS like?
- How do they make decisions about their own health?
- Who do they trust when it comes to making decisions abut their health?
- What is their attitude towards vaccination- including childhood immunisations an the Covid vaccine?
- What drives decisions to have or to refuse vaccination?
- How would an effective communication strategy around vaccination and other health topics look like for Romanians in the UK, and who would be the most trusted communicators?

Fieldwork:

- Online engagement in Romanian Facebook groups and community web pages.
- In-person engagement- local Romanian shops in Newham and Waltham Forest.
- The snowball method-respondents referring other respondents.



Summary: Key findings and recommendations Engagement/ experience with the NHS

Things that matter to Romanians in the UK:

- straightforward and predictable process; without excessive waiting times, excessive bureaucracy or gatekeeping.
- Access to diagnosis and testing procedures (such as blood tests); understanding their health and understanding what their tests results mean.
- Reassurance about concerning symptoms; understanding why they have a certain diagnosis and why a certain course of treatment is recommended.
- Referrals to specialists; GPs and specialists working well together.

What Romanians appreciate about the NHS:

- Free service; absence of corruption and of the expectation to pay for services informally.
- Kind and supportive staff.
- Well-resourced hospitals; access to the latest technologies, especially for serious long-term illness such as cancer and heart disease.
- Good quality of treatment.

What concerns do Romanians have about the NHS?

- Worry that the diagnosis process is too superficial; and that doctors don't always know or understand their symptoms well enough.
- Poor communication between medical professionals and patients; and between services (for example, between GPs and specialists).
- Long waiting lists, especially for children's health.
- User-unfriendly, frustrating booking systems.
- Feeling like they don't have a choice about what kind of treatment they are getting and from whom; not feeling involved in decisions about their own care.
- Poorly organised services; admin , planning and punctuality.

Recommendations for improvement

- where the recommended course of action involves watchful waiting, managing symptoms with over the counter medication, or treatment within the GP practice without a specialist referral. Provide patient information in Romanian and interpreting services.
- Improve access to walk-in/urgent treatment centres for primary care and to health checks in a community setting, with an emphasis on metabolic health.
- Improve booking systems in GP surgeries and referral pathways between GPs and specialist doctors.

Summary: Key findings and recommendations Engagement/ experience with the NHS

To increase levels of GP registration, especially among the most vulnerable:



Provide reassurance that people who may struggle to provide a proof of address (subletting informally in precarious housing) can still register.



Ensure that patients are aware that they need to register again when they move outside of a GP's catchment area.

Populations to target specifically:



Parents of school-aged children.



The Roma community.



People who speak limited English.

For more on Engagement/ experience with the NHS see slides 11-28

To increase uptake of NHS screening:



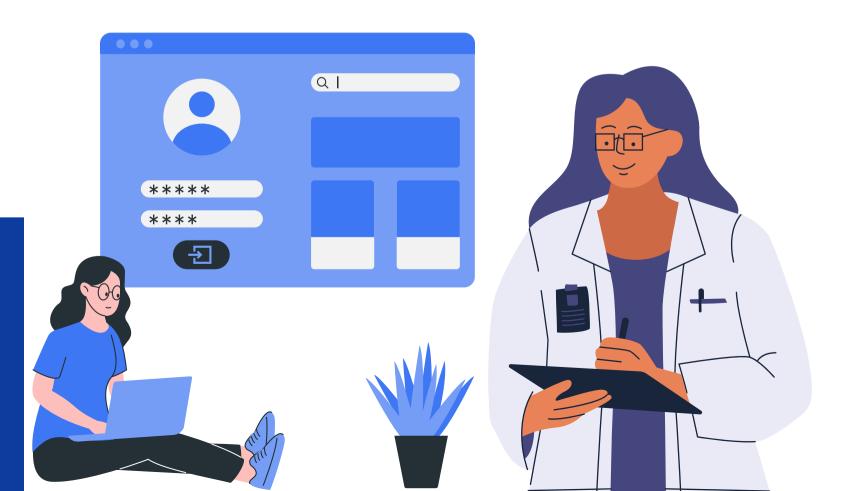
Emphasise the importance of taking part in screening even though you feel healthy and experience no symptoms.



Allow patients to book screening appointments in a more flexible way (for example: appointments available in the evening or at weekends.)



Provide patient information leaflets in Romanian.



Summary: Key findings and recommendations Vaccination

Vaccination is a divisive topic for the Romanian community, and some vaccines are trusted more than others: childhood immunisations and vaccines that have been around for a long time are more trusted; the Covid vaccine and newly introduced vaccines, in general, are less trusted.



Social class and education are important determinants of attitudes towards vaccines: people in middle class (ABC1) occupations are more likely to be vaccinated and to have a positive opinion of vaccines than people in working class (C2DE) occupations; and those who speak English are more likely than those who don't.

Who are the vaccine sceptics?

- Aged 35 to 49 Parents Roma or Moldovan
- In working-class occupations; in part-time, precarious or gig economy work.
- In relatively good health; not frequent users of health services; more likely to not be registered with a GP.
- Relying on news media and online sources/ social media for health information; may prefer video/audio content to written; less likely to actively seek out health information.
- Lower levels of trust in the NHS, British scientists, the British media and the British Government
- Driven by a feeling of distrust in vaccines; strongly valuing autonomy/the desire to make up their own mind without being influenced by others.



Summary: Key findings and recommendations Vaccination

Vaccine sceptics are consumers of information that they themselves say they distrust:

- Online content is the main way they access health information; they are more likely than pro-vaccine respondents to get health information from social media or googling, rather than from specific websites.
- They are more likely than pro-vaccine respondents to use social media to meet new people; and slightly more likely to use social media to ask for advice or look up information.
- They are more likely than pro-vaccine respondents to say that they don't trust at all people whom they know online, but not in real life; or people who take part in discussion groups for Romanians in the UK, when it comes to information and advice about health.
- They are more likely to attend religious services, but less likely to trust priests or religious leaders when it comes to information and advice about health.

Vaccine sceptics are more connected to the Romanian community:

- They are more likely than pro-vaccine respondents to shop in local Romanian or Eastern European shops.
- They are less likely to consume media (TV, news articles) in English.
- They are more likely to keep in touch with friends and family who live in Romania.
- They are less likely to trust their GP or the NHS, but do trust Romanian medical professionals.

Summary: Key findings and recommendations Vaccination

Most important influencers: Romanian medical professionals living in the UK and working in the NHS

Communication channels:

- Social Media communities for Romanians in the UK: specifically well-moderated communities that are dedicated to advice and mutual support; group moderators could organise live information/Q&A sessions with a Romanian doctor.
- Easily shareable social media content, such as graphics and video clips, in Romanian.
- Romanian podcasters, Youtubers, TikTokers could invite medical professionals to speak on their channels.
- Posters and leaflets on noticeboards in Romanian shops.
- Meetings with medical professionals organised in schools, for parents.

Summary: Key findings and recommendations Vaccination

Key messaging strategies:

- Emphasise personal choice: don't condescend.
- Put a human and personal face on the message; "this doctor believes in vaccines" can be a more trustworthy message than "the Government thinks you should vaccinate".
- information (for example: healthy lifestyle, understanding health metrics/test results such as BMI, cholesterol or blood pressure, preventing disease, screenings etc.)
- Focus on earning and building trust, rather than assuming it.

Summary: Key findings and recommendations Wider determinants of health



A healthy diet is by far the greatest aspect associated with living a healthy life.



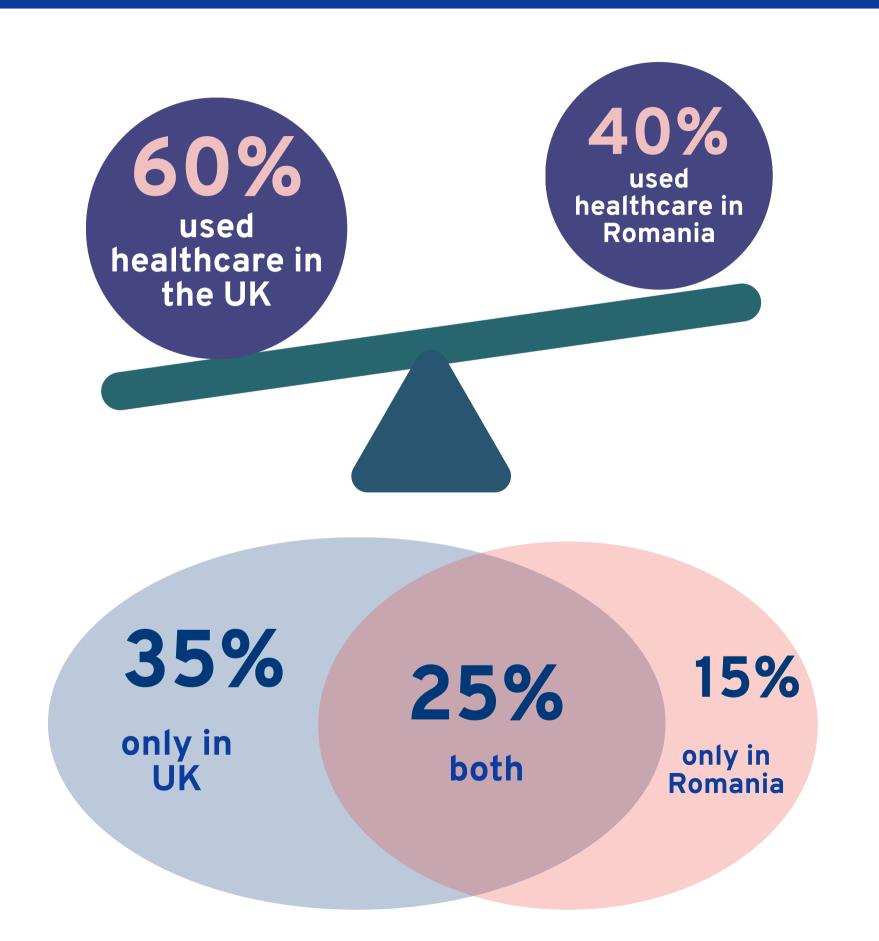
Public health measures aimed at supporting healthy diets should take into account the practical challenges faced by Romanians in the UK:

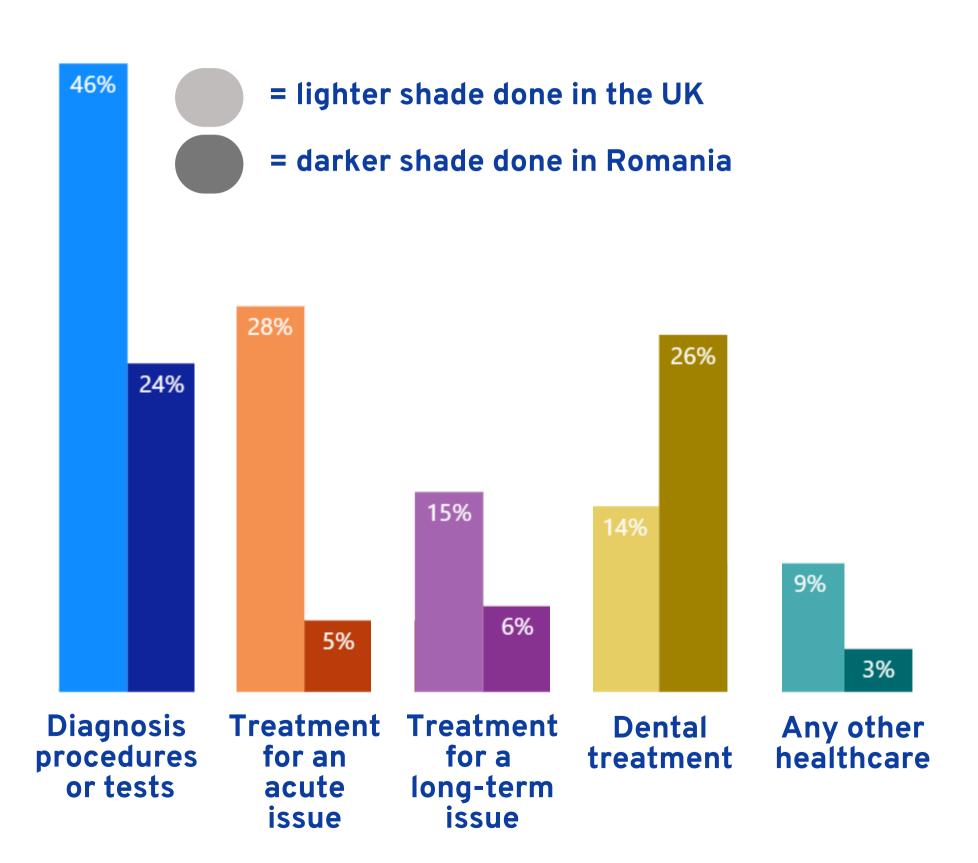






Engagement with healthcare

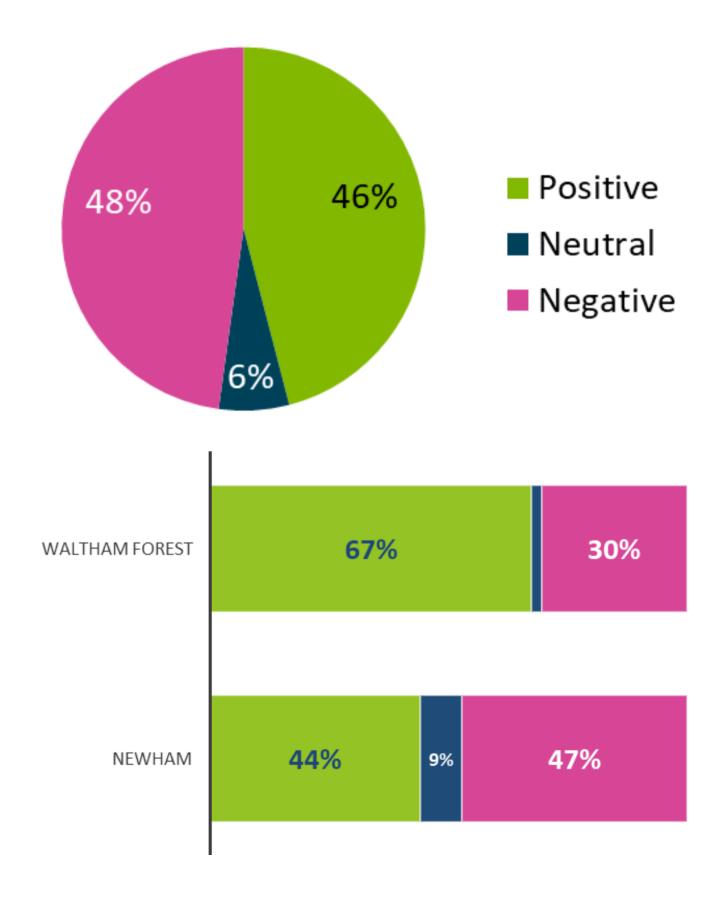




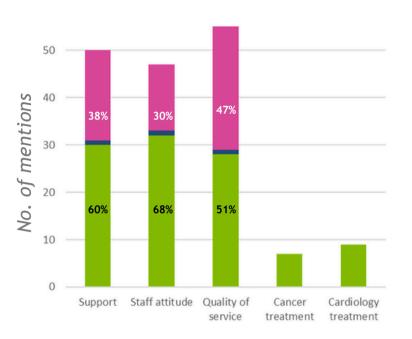
Context: cultural differences in healthcare between UK and Romania

- Both Romania and the UK have universal healthcare; Romania operates a state-owned health insurance model; contributions to it are typically deducted from pay separately from regular taxation.
- While a GP referral is necessary for seeing a specialist in Romania, there is more of an expectation that referrals can be obtained on request, with no gatekeeping, rather than having to be strictly justified. In some cases, the expertise of specialist consultants may be trusted more than that of GPs, and doctors in general may be trusted more than nurses. (For example, some Romanian women living in the UK choose to have cervical screening in Romanian private clinics, with a consultant gynaecologist, rather than for free on the NHS, with a practice nurse.)
 - Screening programmes targeting the general population in the UK tend to be focused on specific conditions, especially cancer (e.g cervical screening, mammograms, bowel screening). In Romania, it is more common to have a yearly blood and urine test panel that can flag a wider range of issues- including metabolic issues and deficiencies. This typically includes blood sugar, cholesterol, triglycerides, liver and kidney function; levels of iron, calcium and magnesium; and a full blood count. For many Romanians, these yearly blood tests are an important indicator of their general levels of health, and they may struggle to understand their own health or to trust that they are healthy without easy access to this information.
- Medicine in Romania may be, in some cases, more interventionist than in the UK. Romanian doctors may be more likely to prescribe medication or surgical interventions as a first port of call for conditions that British doctors may choose instead to address through lifestyle changes and/or watchful waiting.
- Antibiotics abuse is a problem in Romania; some GPs in Romania have spoken publicly about receiving pushback or distrustful reactions from patients for refusing to prescribe unnecessary antibiotics. Pharmacists in Romania can in some cases dispense short term antibiotics for urgent treatment without a doctor's prescription; and there are reports of them doing so inappropriately, upon request from patients, for conditions that they would be inappropriate for, such as viral infections. In the Romanian immigrant communities in the UK, there have been cases of prescription medication such as antibiotics being illegally bought and sold online or in Romanian shops.
- Corruption in the Romanian medical system is a longstanding issue. Bribes or informal payments are often expected of patients for receiving a better standard of care or improving staff attitude; especially for hospital inpatients. In some cases, informal payments function as a social expectation rather than being explicitly requested. Patients of Roma ethnicity and those presumed to be of lower socio-economic status often experience discrimination or poorer treatment. There are also situations, especially in deprived or rural areas, where hospitals and clinics lack basic supplies such
 - as syringes or wound dressings, and patients are expected to purchase them for themselves. The absence of these practices in the NHS is noted as a positive by Romanians in the UK.
 - The number of private hospitals and clinics in Romania has increased in the last 15-20 years. Some Romanians feel that by accessing private healthcare they are merely paying legally and explicitly for what they would have spent in informal payments, bribes and compensation for under-resourcing in the public system. Some Romanians believe that private healthcare is of a higher quality, better run and better organised than public
- healthcare; private services in general may be seen as more competitive and meritocratic. This is somewhat in contrast to the sentiment we have encountered in past research with some British respondents- that the NHS, being a public service, is what makes it more caring and trustworthy than private healthcare services operating for profit.

Experience of healthcare in the UK/ NHS



What works well

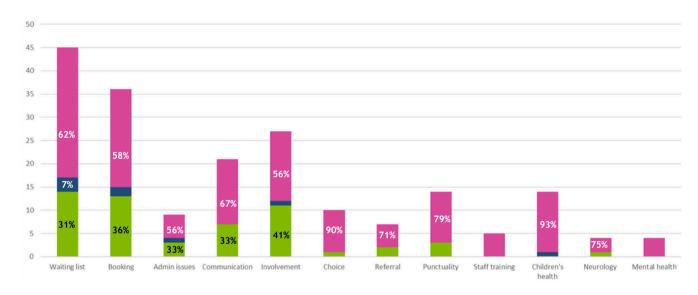


Every time I needed the healthcare system in the UK, I have been happily helped! Not to mention that once I called an ambulance, and it was at my door within a minute!

I called the GP and was told to call Ambulance Services. When I called Ambulance Services, they told me to call the GP. I felt so unwell, that's all I remember.

For the tests, I waited a long time and didn't know when they would be ready. My husband and I requested a referral to IVF, but our GPs had difficulty communicating with each other. We are still waiting..

What needs improvement



■ Positive ■ Neutral ■ Negative

Medical services seem superficial, they are overwhelmed by the high number of requests. I received help from [the Community Mental Health Team], however I was left with the impression that the system is focusing on preventing the imminent risk of death rather than long-term prevention.

Most things went well but there are gaps- for example I was on a waiting list for two years for an operation to fix my shoulder pain.

I didn't have any issues, and I am very pleased, because in Romania I would not have received the same treatment Most things went well but there are gaps- for example I was on a waiting list for two years for an operation to fix my shoulder pain.

Last year, I went with my little boy to the doctor, and we were kept waiting for 12 hours. After 12 hours, they told us there was nothing serious and sent us home.

All my experiences in the UK went well because the doctors were very knowledgeable and understanding. They explained where my health issue comes from.

The good care framework



The good care framework has been developed based directly on what local people have told us.

In the summer of 2023, as part of the Big Conversation project, we asked local people open-ended questions about what good health and care means to them. At community events and in focus groups we helped local people to draw out what their own vision of good care would look like, using Liberating Structures and Participative Appraisal tools.

We took what they told us and and started to use qualitative data coding to identify themes, these themes eventually developed into the good care framework and our four pillars of good care, or four aspects of what makes the difference between good care and inadequate care. We also looked at the wider issues that impact good care at a society level.

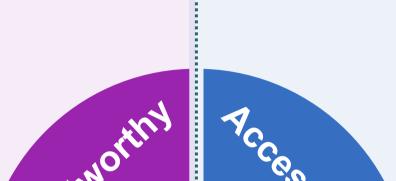
The resulting framework is now being used by by NEL as a success measure.

Care is trustworthy when:

- Patients feel listened to and understood.
- Patients understand why a certain course of action is taken; communication is good; they don't feel fobbed off.
- Patients feel supported.
- Patients are treated with kindness, dignity and respect.
- Confidentiality and privacy are protected.
- Services are accountable to patients.

Care is competent when:

- Patients are diagnosed correctly and receive the best possible treatment for their condition; they are treated in accordance with NICE guidelines and scientific evidence.
- Medical professionals are knowledgeable of patients' conditions and circumstances, above and beyond the one they specialise in.
- Services are well-organised, well-run and free of admin errors.
- Services are adequately staffed and resourced in terms of equipment and environment.



Care is accessible when:

- Patients can get the care they need when they need it; waiting lists and waiting times are reasonable.
 - Obstacles to accessing care (such as those relating to language, disability, poverty, geography or bureaucracy) are understood and appropriately addressed.
 - The process of accessing care is smooth and straightforward.

North Personal Personal Property of the Person

Care is person-centred when:

- Patients feel involved in their care and can make decisions about it.
- Medical professionals treat the person, not the condition; care is personalised taking into account patient's circumstances, conditions, preferences and abilities.
- There is continuity of care and handover of information between professionals; patients don't need to repeat their story multiple times.
- Health services work well with each other and referrals run smoothly; they are also integrated with services outside of healthcare (social care, community, advice, leisure etc.)

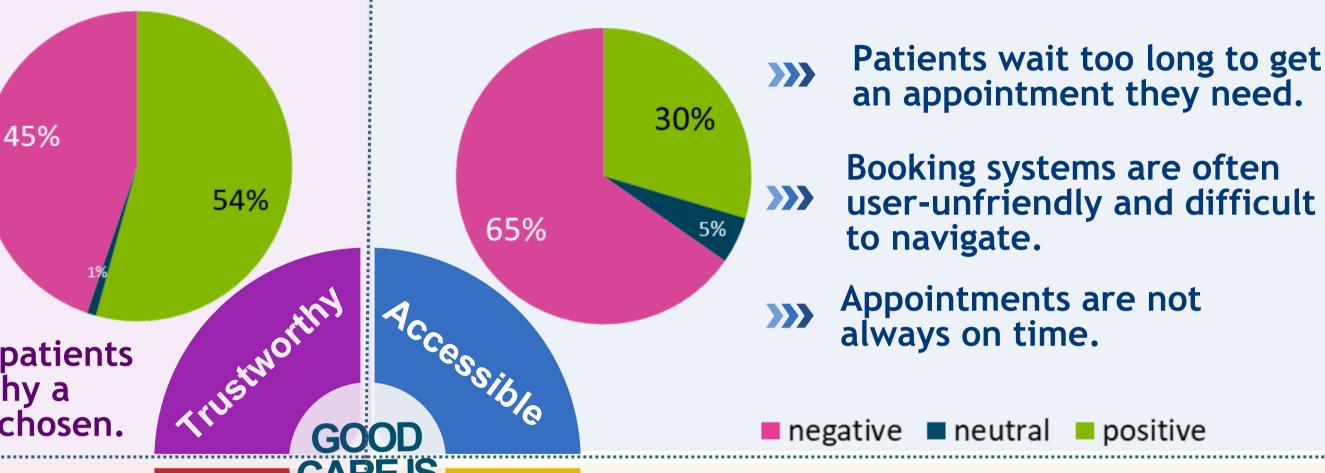
Experience of NHS



Most patients feel supported.

Communication can often be poor, especially around

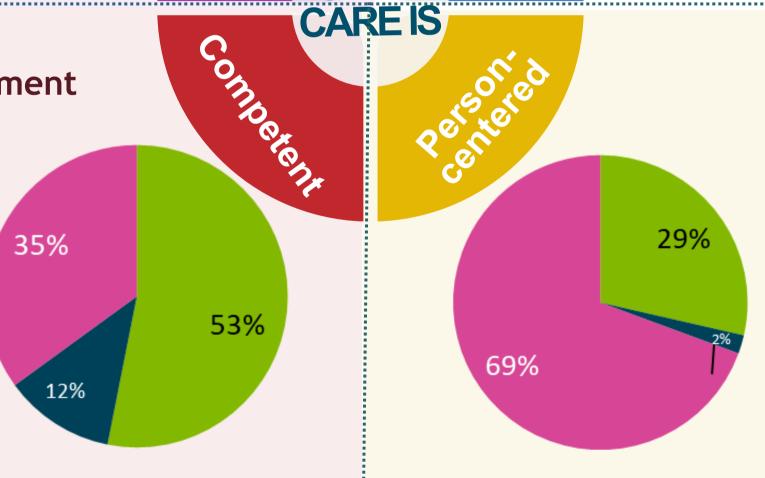
test results and timelines; patients don't always understand why a certain course of action is chosen.



The quality of medical treatment is usually good.

The diagnosis process
can sometimes be
superficial. A few patients
report doctors needing to
look up their symptoms.

>>> Services can sometimes be poorly organised.



negative neutral positive

Communication between

GPs and specialists around referrals can be poor.

Patients often feel like they don't have a choice about what kind of treatment they are getting.

The extent to which people feel involved in their own care varies.

Experience of NHS

CARE IS

The test results are not favorable, but the response is always the same: it's normal. I have several autoimmune conditions, and they seem quite superficial.

Generally, the doctors speak in a nice manner, explain to you what is wrong and usually you leave pleased.

When I have a phone call with my GP, they keep me in the queue for an hour, and to make an appointment with them it takes a month.

The waiting time for appointments is very long. On the other hand, if it's a real emergency, they are very quick to handle the situation.

If you schedule an appointment with the GP for blood tests, they might tell you everything is normal and just give you paracetamol.
Additionally, some of them give diagnoses based on Google.

All my experiences in the UK went well because the doctors were very knowledgeable and understanding. They explained where my health issue comes from.

There is no follow-up, often, it is left to the patient's discretion to follow up on a problem. Or at least it feels that way. You can't discuss too much during an appointment, you have to limit yourself to 15 minutes and one issue.

There is a lack of personal communication with the family doctor. There is a lack of patient-centred care and direct, easy, human communication.

Engagement with primary care/ GP

79%
were registered with a GP



More likely to be registered

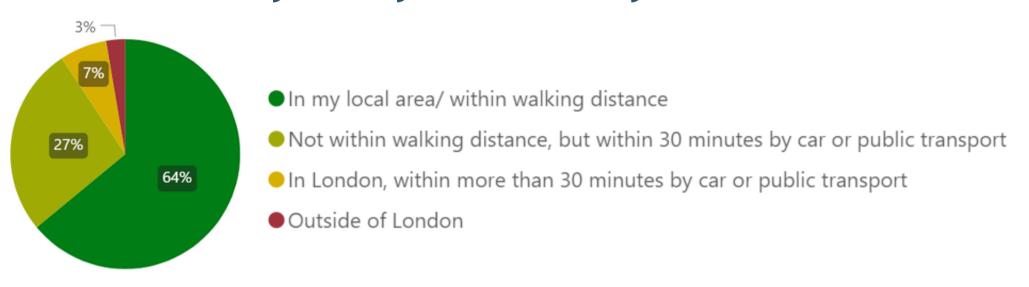
- Not in work
- Living with housemates
- Suffering from a long-term condition
- Living in Waltham Forest

Less likely to be registered:

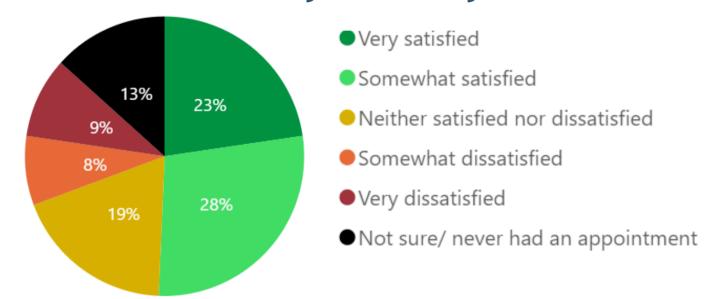
- Lived un the UK for less than 5 years
- Parents, especially parents of children aged 5-18
- Of Roma ethnicity
- Speaking basic English or no English at all
- Living in Newham

Experience of GP services

How far away from your home is your GP?



How satisfied are you with your GP?



What works well

- Staff members usually have a positive, kind and polite attitude.
- The quality of clinical treatment is usually good.
- >>> Patients feel supported by their GPs.

What needs improvement

- Patients don't feel involved in their care and don't feel like they have much choice about the care they are getting.
- Patients feel like the diagnosis process is too superficial; they don't always feel understood by their GP.
- Communication between doctors and patients around diagnosis and treatment is poor.

Experience of GP services

The nurses are always doing my blood tests on time, but the doctor is not really interested. I had chronic anemia and went to the doctor three times, but they told me I was fine. I insisted three times over two weeks to get tests done, and only then did they finally notice that I was anemic. After that, they gave me treatment, but I believe it wasn't adequate.

I had a problem with my hand and they resolved it, giving me the right treatment.

I have heart problems, and when I told them I had chest pains and did not feel well and felt dizzy, they sent me for appointments very quickly.

I struggle with the English language and technology, and they always ask me to schedule appointments online. They don't have a Romanian translator.

Most things are done by phone. The information given by him (GP), I can also find on Google. It is very difficult to find an appointment after 5 PM, very rare to find, and you lose workdays.

The waiting time for an appointment is long, and instead of treatment, I have received advice like 'read the Quran' or 'take a long bath and go for a walk,' not just once. [Note: respondent was not Muslim].

You can't get past the ruddy receptionist! Not being a medical professional, they don't understand some issues. You have only one day a week to call exactly at 8 a.m. to get an appointment, you can't call whenever you want, and often you can't call because of work. When you do call, you wait an hour in the queue only to be told that there are no available slots 90% of the time. They have kept the same organisation as during the lockdown, even though two years have passed since then.

Experience of GP services

Parents of children aged under 5 and respondents who were fluent in English were more satisfied with their GP

Respondents living with a long-term condition were less satisfied with their GP

NHS screening uptake

60%

of respondents invited for cervical screening attended A further

12%

had their screening in Romania instead 41%

of respondents invited for breast screening attended

A further

18%

had their screening in Romania instead

30%

of respondents invited for bowel screening took part.

The most mentioned reason for not taking part in screening was:

not being interested/ not seeing why it's necessary.

NHS screening uptake

What people who did NOT take part in screening are saying

I didn't go to my smear test because as as an older woman, in my fifties- I just didn't want to go to such a thing. I didn't want to do my mammogram either- I feel ashamed.

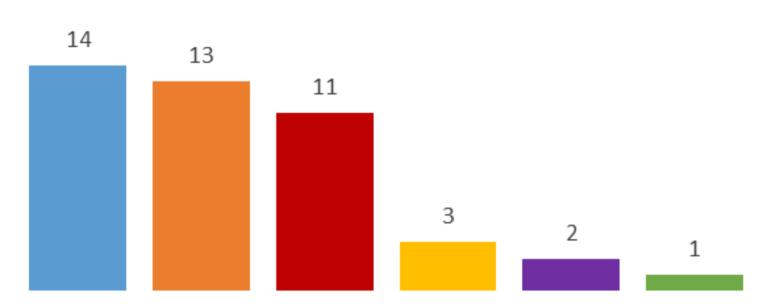
> I don't need doctors, I haven't been to a medical check-up in eight years.

I didn't feel the need for a mammogram, I feel healthy.



Reasons for accessing healthcare in Romania:





- Treatment is cheaper in Romania
- Treatment is better/ trust it more
- I needed treatment not available in the NHS I can communicate better in Romanian
- I can access treatment faster in Romania
- I know the doctor



I needed to have prostate surgery privately- it wasn't available on the NHS.

Iunderstand explanations better in my own language and I have my doctor whom I trust.

I was already on holiday in Romania so I thought I'd just take care of my health issue there. it's cheaper and I know the doctor.

In Romania it's faster, here you wait a long time.

I'm not sure about GPs in the UK, I think they are very inexperienced.

If you've had dental work done in Romania, in the UK they won't touch it unless it's an emergency.

In the UK I couldn't get an appointment through my GP no matter how urgent I was; even if you go to A&E you wait 12 hours.

It was only for financial reasons, because I used private services. I don't trust the public healthcare in Romania, because many doctors are swayed by their religious and moral opinions.

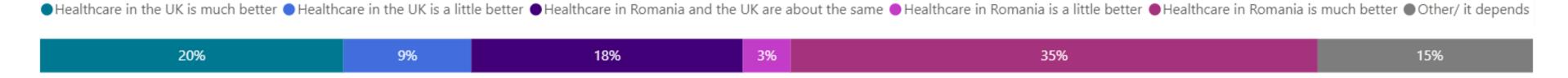
Dental services are very

Romania with a lot of problems and resolve them all within two weeks.

I always go to

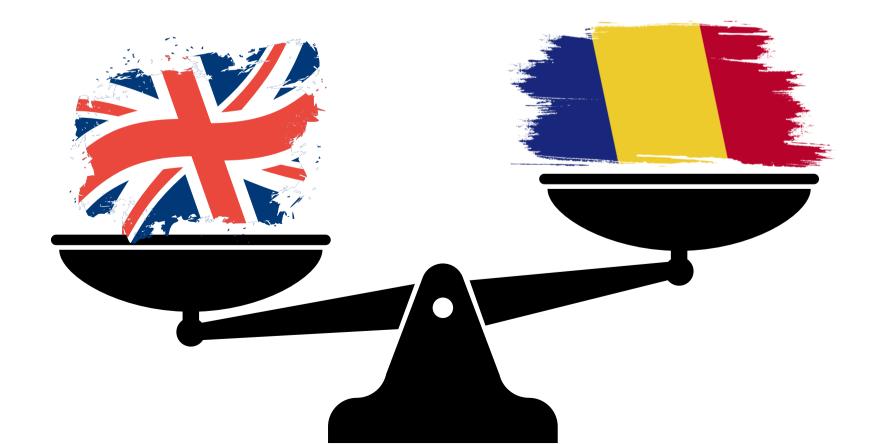
My blood tests done in the UK were not quite right, so my doctor in Romania advised me to repeat them.





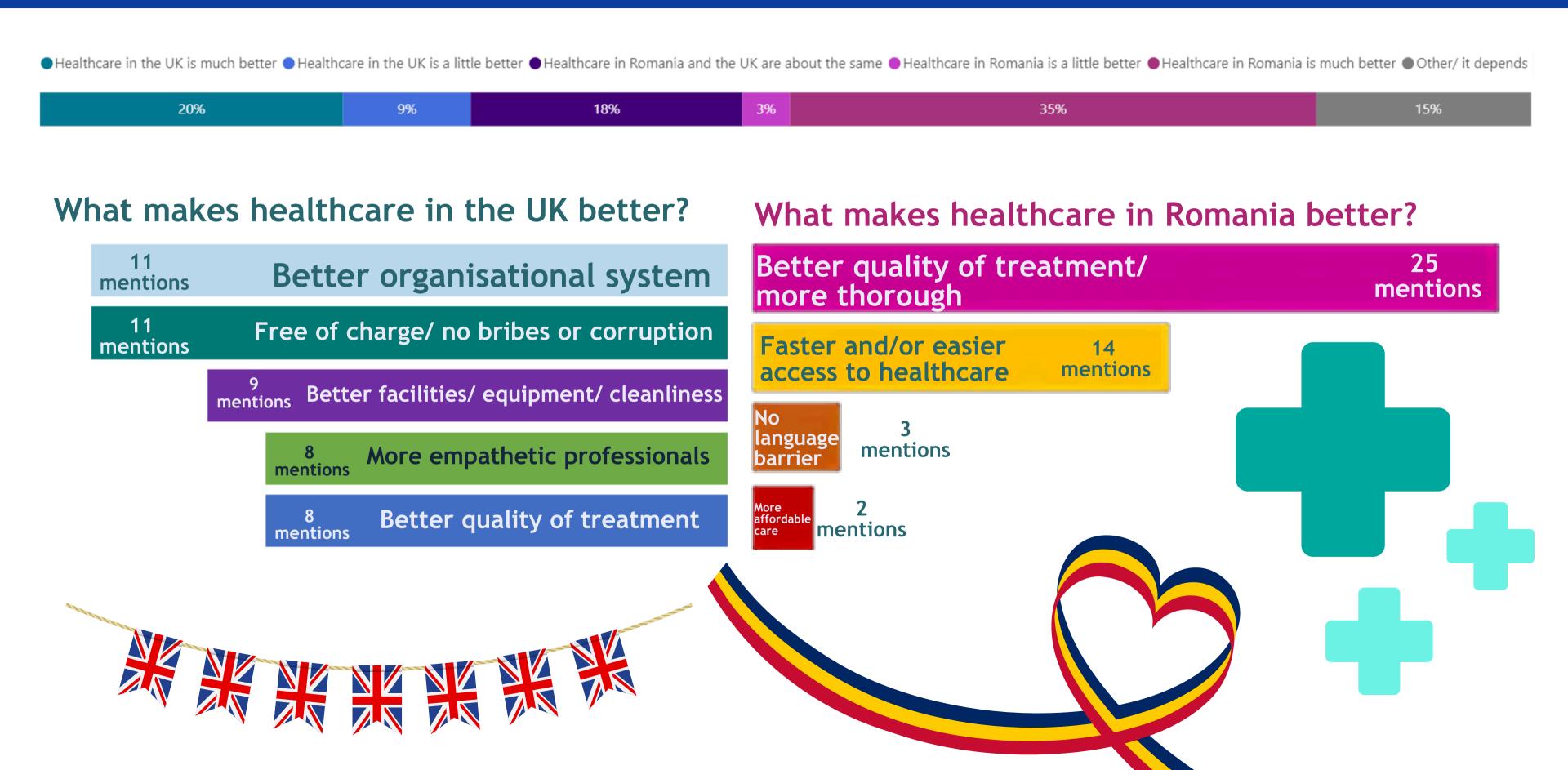
Who believes healthcare in the UK is better?

- In middle class occupations (ABC1)
- In poor health
- Waltham Forest residents
- Satisfied with GP



Who believes healthcare in Romania is better?

- In working class occupations (C2DE)
- Parents, especially of children aged 5-18
- Roma ethnicity
- Speaking little or no English
- Digitally excluded
- Newham residents
- Not registered with a GP
- Dissatisfied with GP



In the UK we had a poorer experience, because everything is done via phone call and not all Romanians speak English.

In Romania we have a bribe mentality, otherwise doctors don't look after patients. In the UK it's very different, doctors look after us.

Romanian doctors just aren't very interested. UK doctors on the other hand just give you paracetamol with no further questions.

In Romania everything is for pay; so doctors are motivated to deliver better.

We're just more used to the Romanian system; though I like that in the UK they don't over-prescribe medication. Doctors in Romania move faster; in the UK there are long waiting lists and it takes ages to do anything through the GP.

Here if you go to the hospital they just give you a pill and send you on your way; in Romania they are a lot more thorough.

Everything in the UK comes with better equipment. Doctors are more experienced and the technology is more advanced. No bribes like in Romania.

Doctors in Romania care more. Here, after you had some tests, no one explains to you what they mean or gives you treatment.

British doctors don't say offensive things and they are more likely to believe women about experiencing pain.

I think we have better specialists in Romania than in the UK; and the waiting lists are shorter in Romania.

There is good and bad in every system; but that's not essential; people should have access to good healthcare locally where they live; problems come from lack of local access or from how

Medication and equipment are better in the UK, you can overcome illness more easily.

services are being delivered.

We have very good doctors in Romania, but the hospitals leave much to be desired.

Healthcare in Romania is of good quality and expensive; in the UK it is of poor quality and cheap.

In Romania there are private clinics where you can see a specialist without a referral, in the UK the GPs sometimes refuse to refer you.

Treatment in Romania is more personalised, not just paracetamol.

Doctors in Romania are better qualified, even if the equipment isn't latest generation like in the UK.

The medical system is worse in Romania, but the actual quality of healthcare is better than in the UK. In the UK staff behave more nicely, the infrastructure is better, they don't expect bribes or a tip. In Romania public healthcare is of a worse quality, but private healthcare is more affordable than in the UK.

British doctors are better trained, equipment is modern and hospitals are very well maintained.

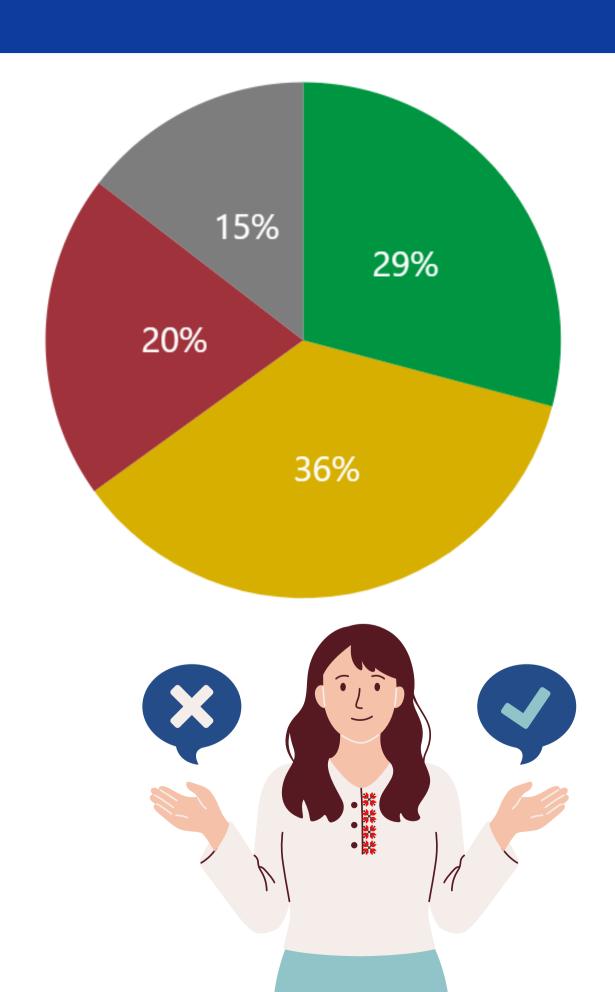
How to improve healthcare for Romanians in the UK

Primary care

Other/ general



Vaccination



Opinion of vaccines

- They do more good than harm/ the benefits of vaccination outweigh the risk
- Some vaccines are beneficial but others are harmful
- They do more harm than good/ the risks of vaccination outweigh the benefits
- I'm not sure
- Standard childhood immunisations and flu vaccines are more trusted than the Covid vaccine.
- Vaccines that have been around for a longer time are more trusted than newly introduced ones.
- Vaccines for children are more trusted than vaccines for adults.

Vaccination

Pro-vaccine respondents are more likely to be:

- In middle class (ABC1) occupations
- Aged under 25
- Disabled or neurodivergent
- Fluent in English
- Recently arrived in the UK
- Non-religious

68%

of respondents in middle class (ABC1) occupations had at least one dose of Covid vaccine. **ONLY 32%**

of respondents in working class (C2DE) occupations did.

Vaccine-sceptical respondents are more likely to be:

- Aged 35 to 49
- Parents
- Digitally excluded
- Roma or Moldovan
- In part-time or gig economy work
- Living alone
- Not registered with a GP
- Dissatisfied with GP
- Not using medical treatment frequently

Vaccination

What influences our decisions to vaccinate or not vaccinate?

Pro-vaccine:

The science behind vaccines is sound; scientists and medical professionals know best; benefits of vaccines outweigh the risks.

Anti-vaccine:

Vaccines are harmful or unsafe: vaccines are untested; healthy people don't need vaccines; vaccine proponents have a hidden agenda.

Protecting yourself

Looking after your own health, well-being and safety

Protecting others

Social responsibility, community, collective action

Social norms and expectations Fitting in, doing what everyone else does

Autonomy

Making up your own mind, not being influenced by others

Personal/immediate family

I had a positive/ negative experience of vaccines;

People I know personally

Friends, peers or acquaintances had a positive/ negative experience of vaccines;

Wider society

I heard of people having a positive/negative experience; I am noticing positive/negative experiences in my community.

Trust or distrust

of vaccines, science, the medical establishment;

Fear

of preventable illness or of vaccine side effects;

Apathy

can't be bothered to vaccinate.

Values

Experience

Feelings

motivation

Uncertainty

Extrinsic

From medical professionals or scientists From official sources From online sources

> From social media From TV/ traditional media From friends and family

> > Getting a vaccine because it is required at work; to avoid quarantine.

to travel somewhere that requires it;

Not being sure vaccines are OK for you

In relation to conditions such as chronic illness, pregnancy etc.

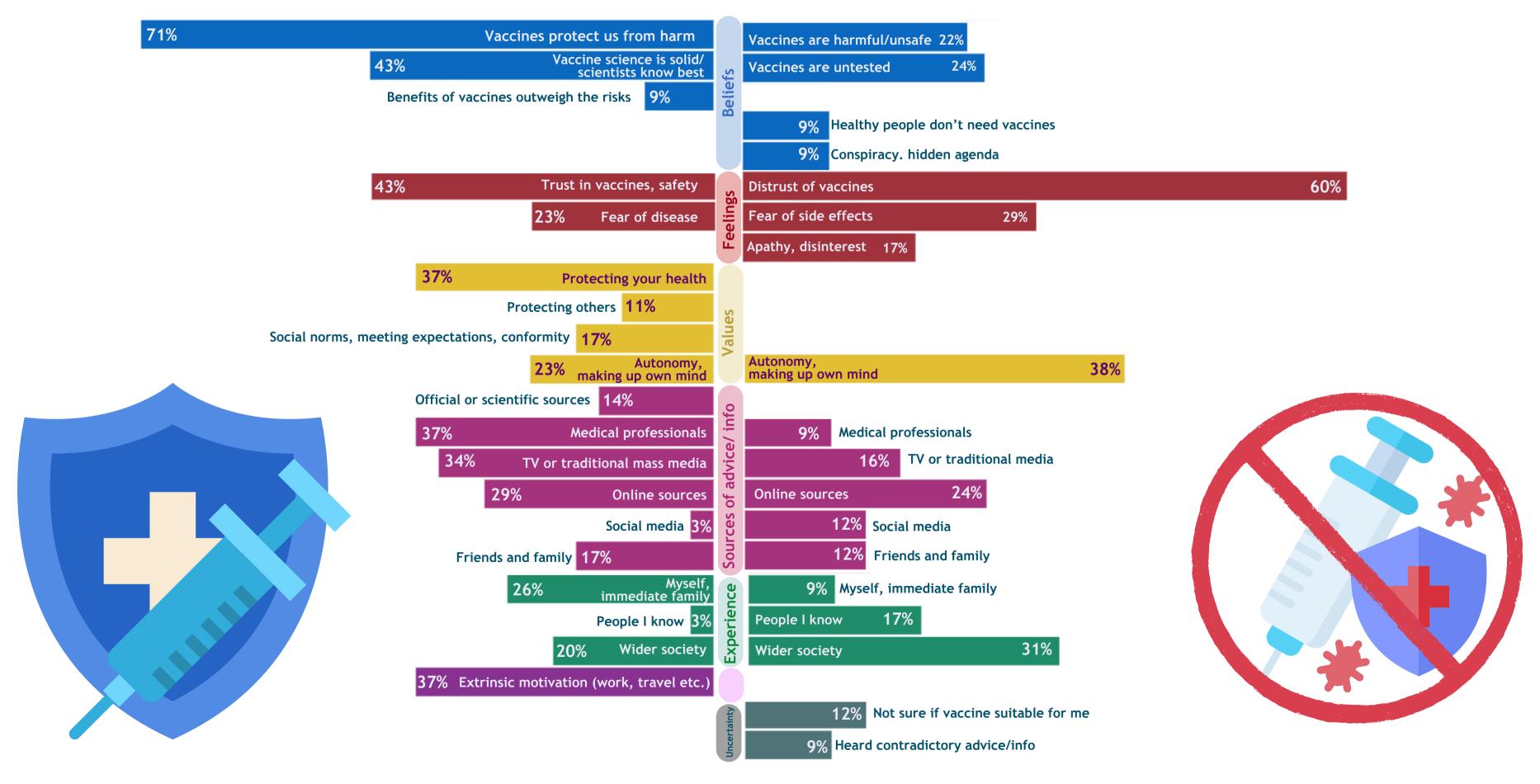
Contradictory information

Some trusted sources advise vaccinating and some advise against it.

Vaccination- what influences our decision?



Anti-vaccination



Vaccination- what influences our decision?

What people said: autonomy

I vaccinated my
children, for their own
safety, but I refused the
Covid vaccine. I took
this decision on my own.

My friends told me that they got the vaccine, but I felt worried so I decided against it.

I had all Covid vaccines doses including boosters, because that's what I consider necessary. I made up my mind based on the available information.

I didn't seek information about vaccines anywhere; I just decided not to have the vaccine because that's my personal opinion.

Context on:

advice from medical professionals

Most medical professionals, in Romania as well as in the UK, are in favour of most or all vaccinations, including for Covid.

Only a small minority are anti-vaxers, but some of them may have notoriety online or through mass media channels, specifically because of the controversy.

For example, Dr. Flavia Grosan, a pneumonologist in Oradea, Romania, criticised the treatment scheme utilised by most doctors for Covid patients in Romanian hospitals, accusing them of killing patients; and claiming that she had developed a better treatment scheme. Eventually, she also said publicly that she didn't take the Covid vaccine.

Some TV channels, especially the news channel Antena 3, the second most popular news channel in Romania, presented her case in what some believed to be a sensationalised and biased manner, portraying her as a hero and patients' rights crusader. She garnered a large following and support network on Facebook and other social media channels. She was investigated by the Romanian College of Physicians, but she retained her medical licence and continues to practice medicine.

While she was not named explicitly by any respondents, seeing someone with medical training express vaccine-sceptical views may have influenced some patients; especially validating those who already had lower levels of trust in vaccines and/or the medical establishment.



Vaccination- what pro-vaccine respondents are saying

Vaccines are made by qualified professionals, so I trust them.

I had all the vaccines because my sisters also did, and I trust my sisters.

Because scientists research and regulate this aspect, and I tend to believe that some fields are more useful if we let people with specific studies, who carried out experiments and research, take the lead.

I've read up on it, I watched TV, newspapers, used the internet...

I believe in medicine and in

researchers. I took the

Covid vaccine because I

trust that they wouldn't

have launched something

unsafe into society.

Doctors say that

vaccinating is a good

decision for my child..

I heard on BBC News that vaccines stimulate our antibodies and immunity.

I'm not a conspiracy theorist, I understand the situation and the fact that disease can have very severe consequences, so I had the vaccine to protect not just myself but also others. I trust medicine.

I did it for my

Covid was dangerous to many people, vaccines are only dangerous for a few.

long-term safety.

Vaccines are created to help our bodies, not to destroy them.

That's what scientific data shows.

Vaccines protect you

After I had the Covid vaccine I stopped catching so many colds, and there used to be a lot of them!

Without vaccines we'd return to the plague from 500 years ago; to epidemics where people died by the thousands.

It's scientifically proven that vaccines are safe, for the future of humanity.

History has shown that vaccines do a lot of good.

There are fewer fatal cases of Covid since vaccination started.

Vaccines are approved by scientists.

For example whooping cough can be avoided with vaccines. If you've ever seen a baby with it then you know it's an awful condition and can cause infant death.

somewhat from viruses.

Vaccination- what anti-vaccine respondents are saying

Just from talking to friends- many had problems after vaccination.

I heard a lot of negative news about vaccines.

I was vaccinated in school as a child and nothing bad happened; but I heard that the Covid vaccine will activate in five years and kill everyone who took it.

I didn't have any health problems in the pandemic, so I felt like I didn't need the vaccine; I don't trust vaccines much anyway.

> I didn't think it was important to have the Covid vaccine, and I don't trust it either.

Opinions are divided- some people say vaccines are good and others say they are harmful; better not to take the risk and then regret it.

Covid vaccines were on trial until 2024. You can't rush the process of creating a vaccine, those who took it were guinea pigs. I don't want to risk vaccinating myself with something that isn't solidly researched.

I have a chronic illness so I was scared to take the vaccine. I heard of people who took it and had negative outcomes.

I decided not to take the vaccine based on my own personal intuition. I saw a lot of cases [of dangerous vaccine side effects] on TV.

I just waited until I didn't need to do a Covid vaccine anymore. My husband and I were both key workers and none of us had Covid, even though we worked through lockdown.

I just didn't trust the information offered. I even turned down jobs to avoid required vaccinations.

My mother had the vaccine and then she passed away. I don't trust it.

I don't want to experiment on myself.

The Covid vaccine is experimental; it caused a lot of disease and death sadly.

I'm healthy and I just didn't want to do it.

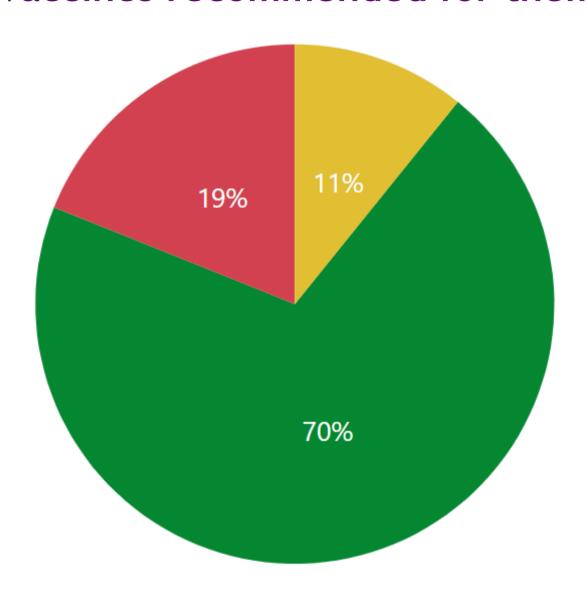
Vaccines are not safe, I heard that vaccine producers said they won't be held accountable for side effects.

I don't want to experiment on my children.



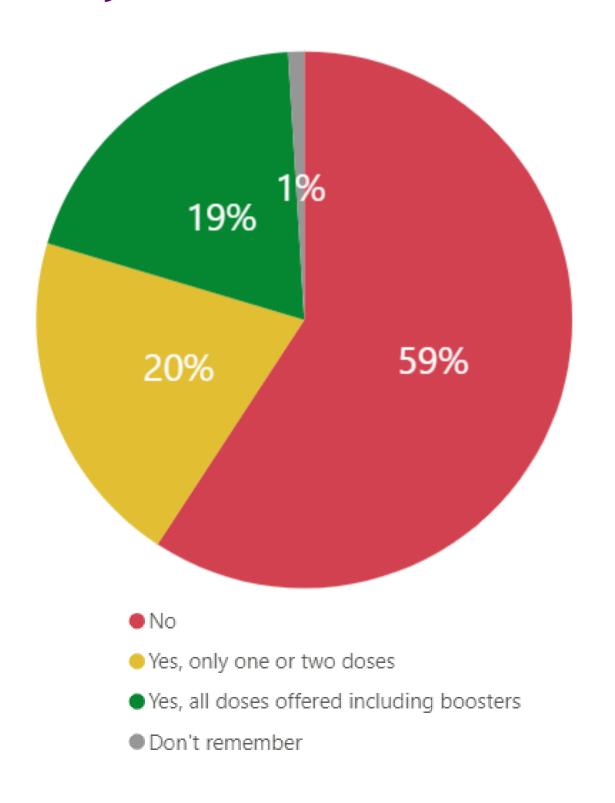
Vaccination behaviour

Did you allow your children to have the vaccines recommended for them? *



- Yes, all vaccines offered
- Yes, but only some of them; or on a delayed schedule
- No, none of them

Did you have the Covid vaccine?



^{*} parents of children under 18 only

Did you have the Covid vaccine?

Yes, all doses including boosters

Value: rotecting your ow health 65%

Belief
Vaccines
protect us
65%

Advice/info:
TV or mass
media
35%

Feeling: trust, safety 40%

Belief: science is sound/ scientists know best

54%

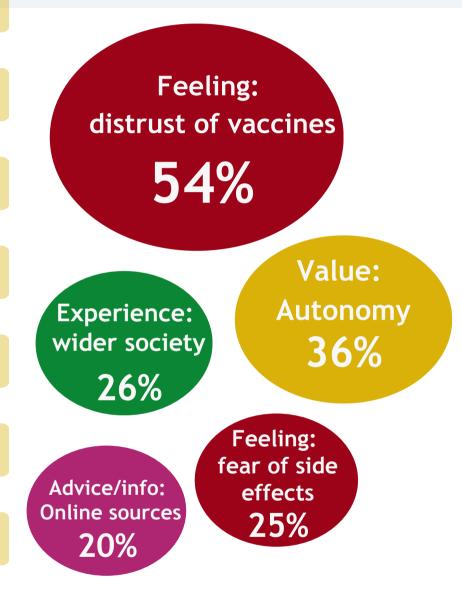
Advice/info: medical professionals

"Because I believe in science, not in religion. Having all vaccine doses makes me feel safe." Advice/info: online sources 30%

Only one or two doses



"I work in healthcare, so I did it because it was mandatory." No



"I don't trust the vaccine, many people died because of it."

Did you allow your children to have the vaccines recommended for them?

Motivation for vaccinating children:

- Belief that vaccines keep us safe (7 mentions)
- Reccomended by medical professional (5 mentions)
- General belief that vaccines are good (4 mentions)
- Trusting science behind vaccines (4 mentions)
- It's the normal/ expected thing to do (3 mentions)

Motivation for not vaccinating children

- Not convinced vaccines are safe (7 mentions)
- Concern that there are too many/redundant vaccines (1 mention)
- Opposition to vaccines in general (1 mention)

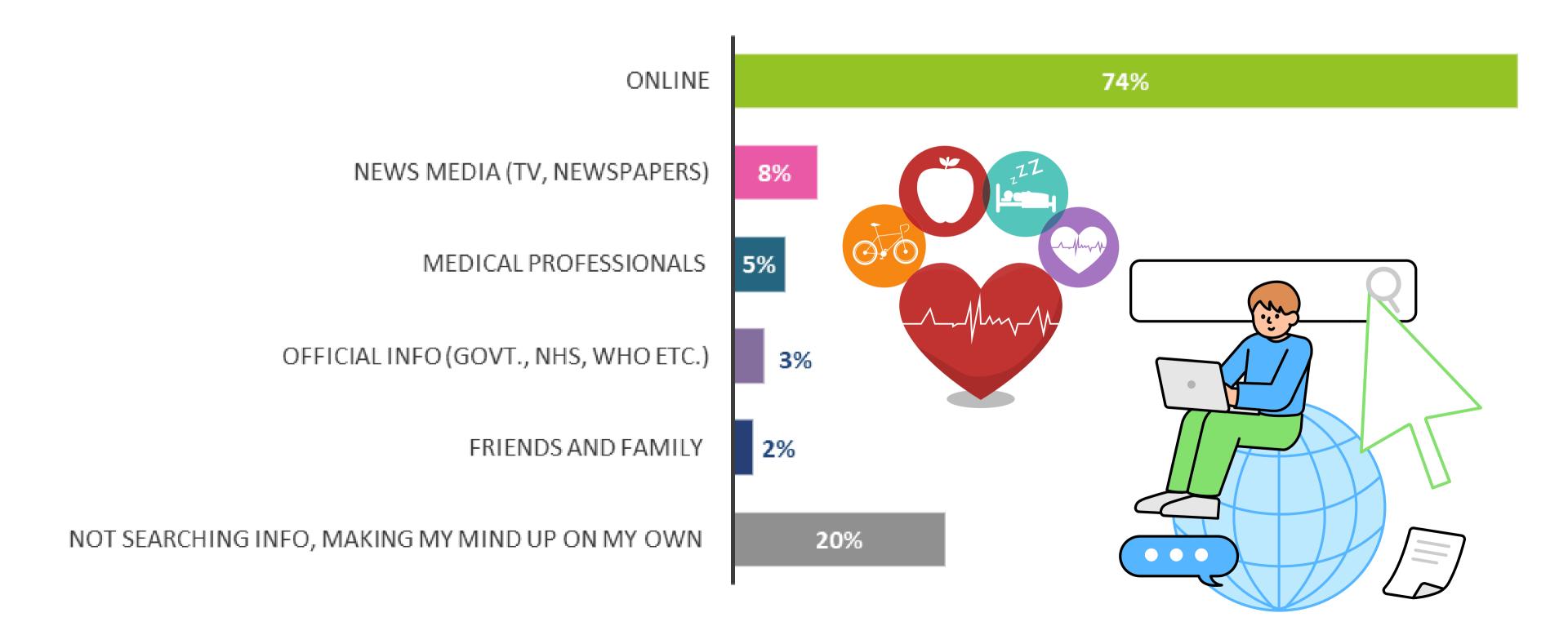
"I was vaccinated as a child too, with no ill-effects" "Vaccines are made by specialised people, so I trust them"

"I don't want to experiment on my children"



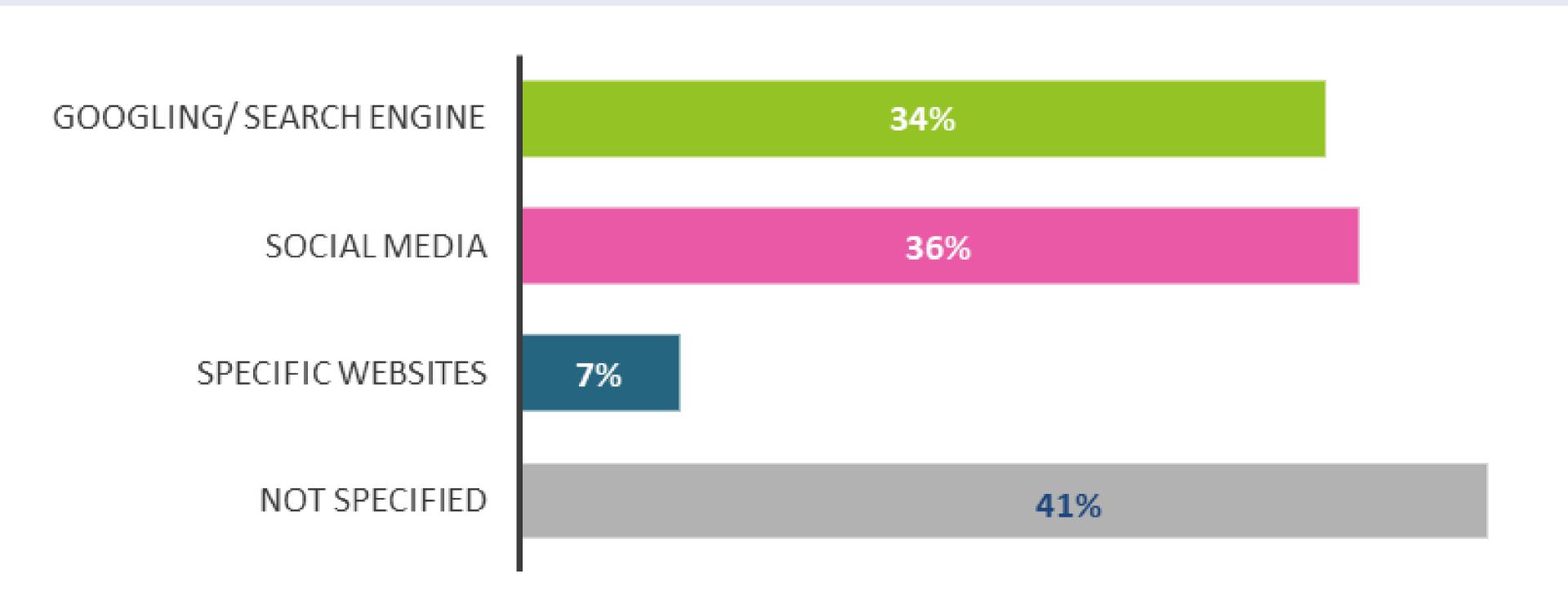
When considering information and making decisions about your health, where do you look for information?

An overwhelming majority of respondents looked for health information online.



When considering information and making decisions about your health, where do you look for information?

How people used the internet to find health information



When considering information and making decisions about your health, where do you look for information?

Pro-vaccine

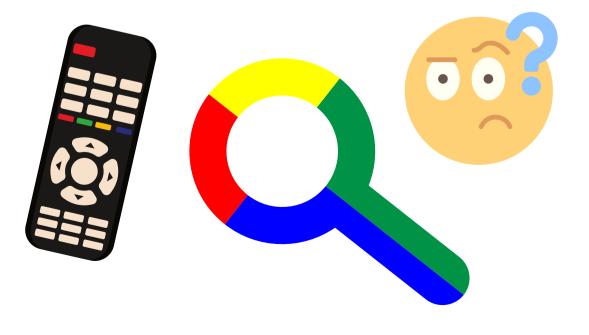
- More likely to get health information from medical professionals.
- More likely to get health information from official sources such as the NHS, WHO or Government communications.
- More likely to get health information by accessing specific websites.

Anti-vaccine

- More likely to say they make up their mind without looking for information.
- More likely to get health information from news media.
- More likely to get health information by googling or from social media.







When considering information and making decisions about your health, who do you trust?

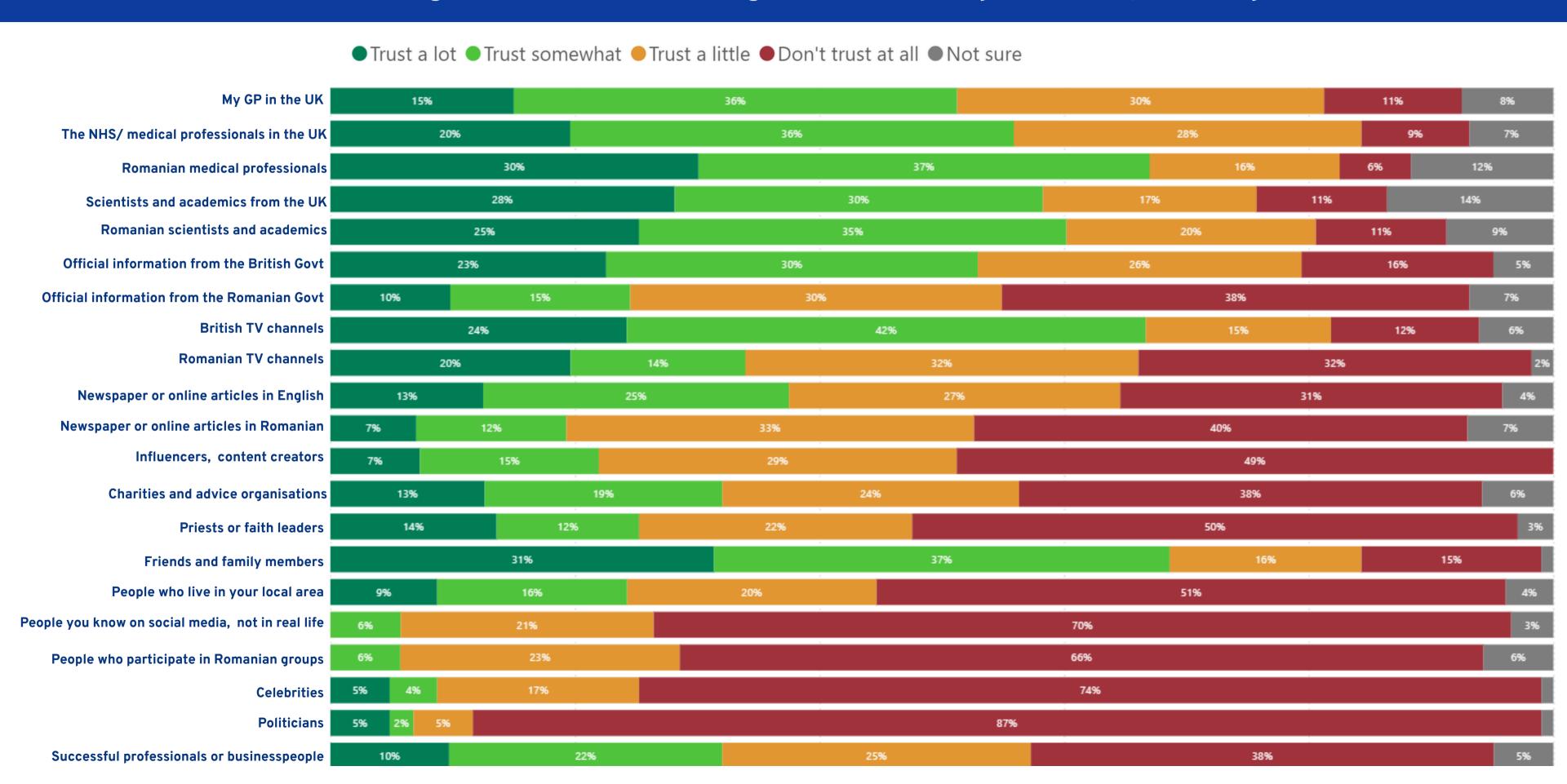
- Most trusted sources of information/influencers were: **Least trusted were:**
 - Romanian medical professionals
 - British TV channels
 - >>> Friends and family

- Politicians
- **Celebrities**
- Peers not personally known
- The NHS as a brand was more trusted than respondents' own GPs, but less than Romanian medical professionals.
- Vaccine-sceptical respondents had noticeably less trust in their GP and the NHS, but only slightly less trust in Romanian medical professionals.
- Respondents trusted Romanian medical professionals more than British ones; but British scientists, official information from the British Government, British TV and articles written in English more than their Romanian counterparts; this effect was stronger with pro-vaccine respondents than with vaccine skeptics.
- Vaccine-sceptical respondents were more distrustful than their pro-vaccine >>> peers of most influencers queried, except for Romanian medical professionals and friends and family, who were equally trusted by both groups.

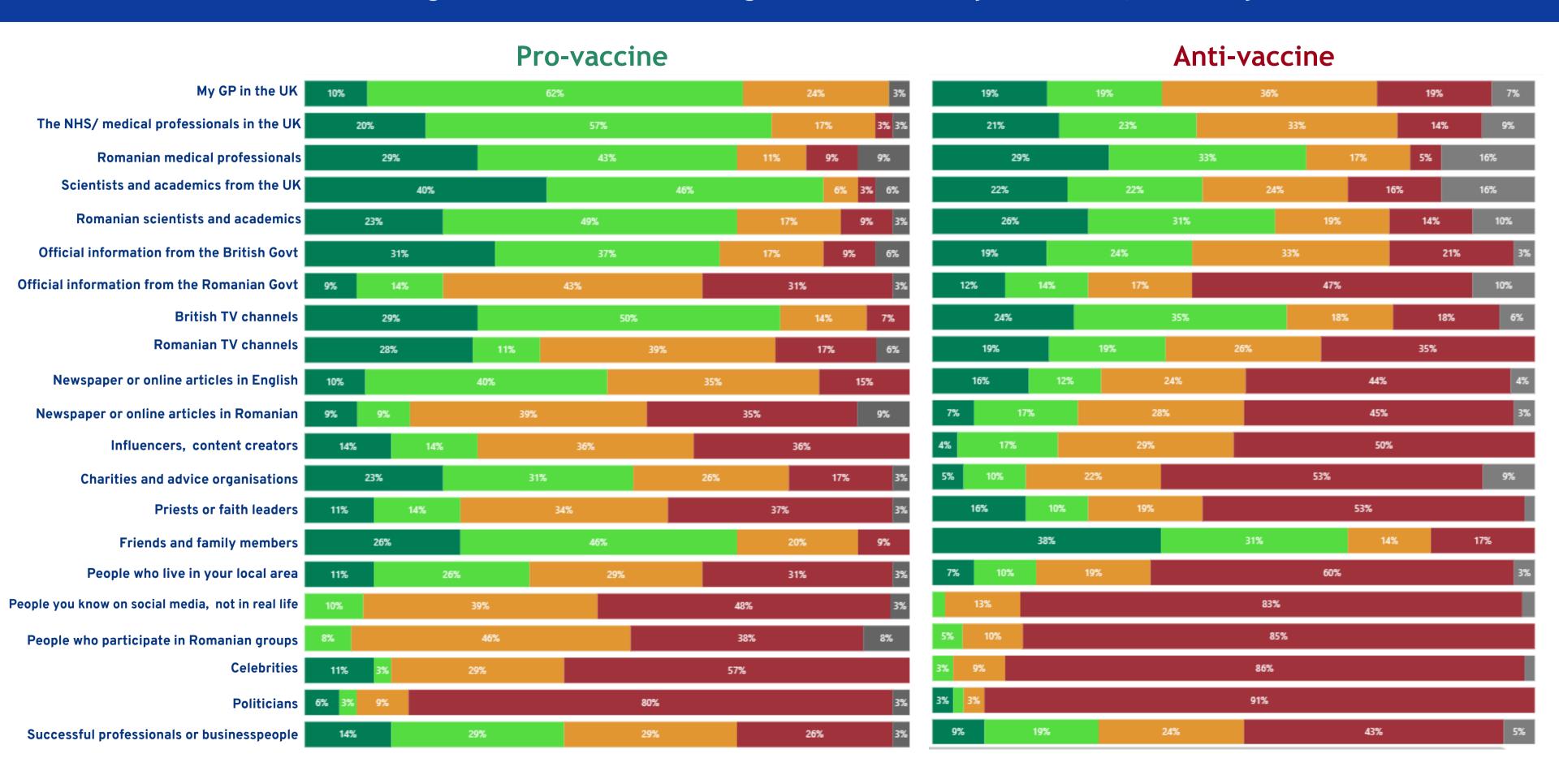
Romanian medical professionals living in the UK and working in the NHS could play a crucial role in tackling vaccine hesitancy in the Romanian community.



When considering information and making decisions about your health, who do you trust?



When considering information and making decisions about your health, who do you trust?



Context: anti-vaxer celebrities and politicians in Romania

Just because Romanian survey respondents state that they have a low level of trust in politicians and celebrities as a category when it comes to making decisions about health, and even though vaccine-sceptical respondents stated that they are even more distrustful of politicians and celebrities than average, it does not mean that specific public figures cannot have an impact.

In the case of those who explicitly promote anti-vaccine messages, they are often of a political orientation that could be described as far right and/or populist; they often espouse various other conspiracy theories along with vaccine scepticism and feed into the population's general distrust of State institutions, the political class and the public sphere as a whole.

At the latest EU Parliament elections, in June 2024

of Romanians who voted in the UK diaspora voted for political parties whose leaders and membership explicitly especiated vaccine scentic explicitly espoused vaccine scepticism.

This is a significantly higher percentage of the vote than in Romania (20%) or the diaspora as a whole (30%).



Antivax campaigner Diana Iovanovici-Sosoaca and her party SOS Romania won 20% of the votes and came in first in multiple UK polling stations. She gained notoriety in Romania during the COVID-19 pandemic, by protesting restriction measures and then vaccination campaigns on social media.

On the other hand, London mayor Sadiq Khan, Moldovan President Maia Sandu and Romanian neurosurgeon and senator Leon Danaila have been named by some pro-vaccine respondents as public figures that they would trust with health information.

Trusted information channels/ influencers: potential allies

Trusted TV Channels

English







Romanian language:





Trusted influencers



Dr. Oana Cuzino

Romanian doctor (specialist geriatrician) and journalist; with a PhD in medicine. Best known for presenting a medical information TV show on Pro TV, Romania's most popular TV channel, between 1999 and 2021; as well as authoring health education books.

While not specifically campaigning on vaccines, she has provided reassurance to viewers that they are safe when the topic came up.

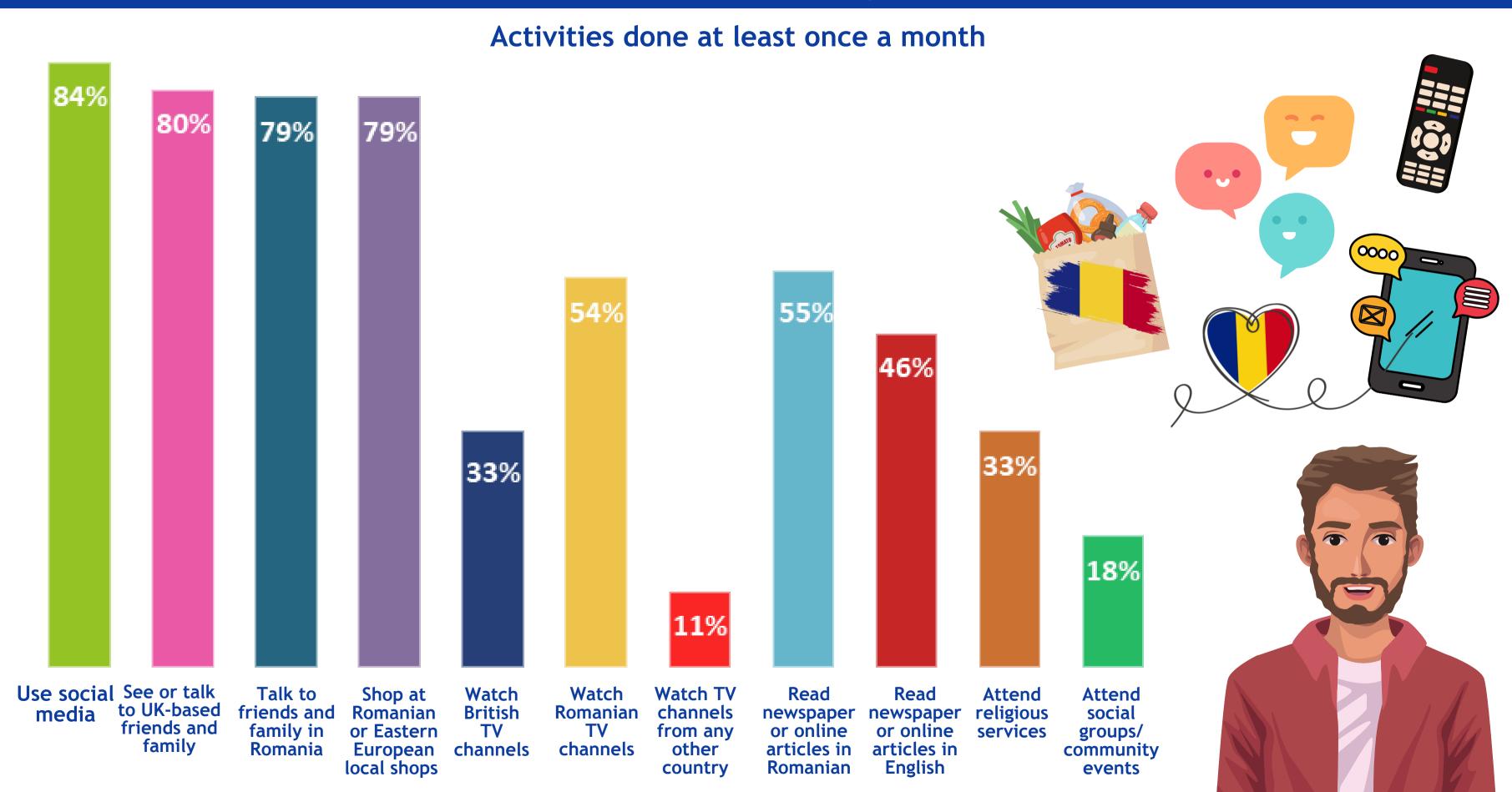


George Buhnici

Romanian TV personality and blogger; producing content relating primarily to technology, IT and cars.

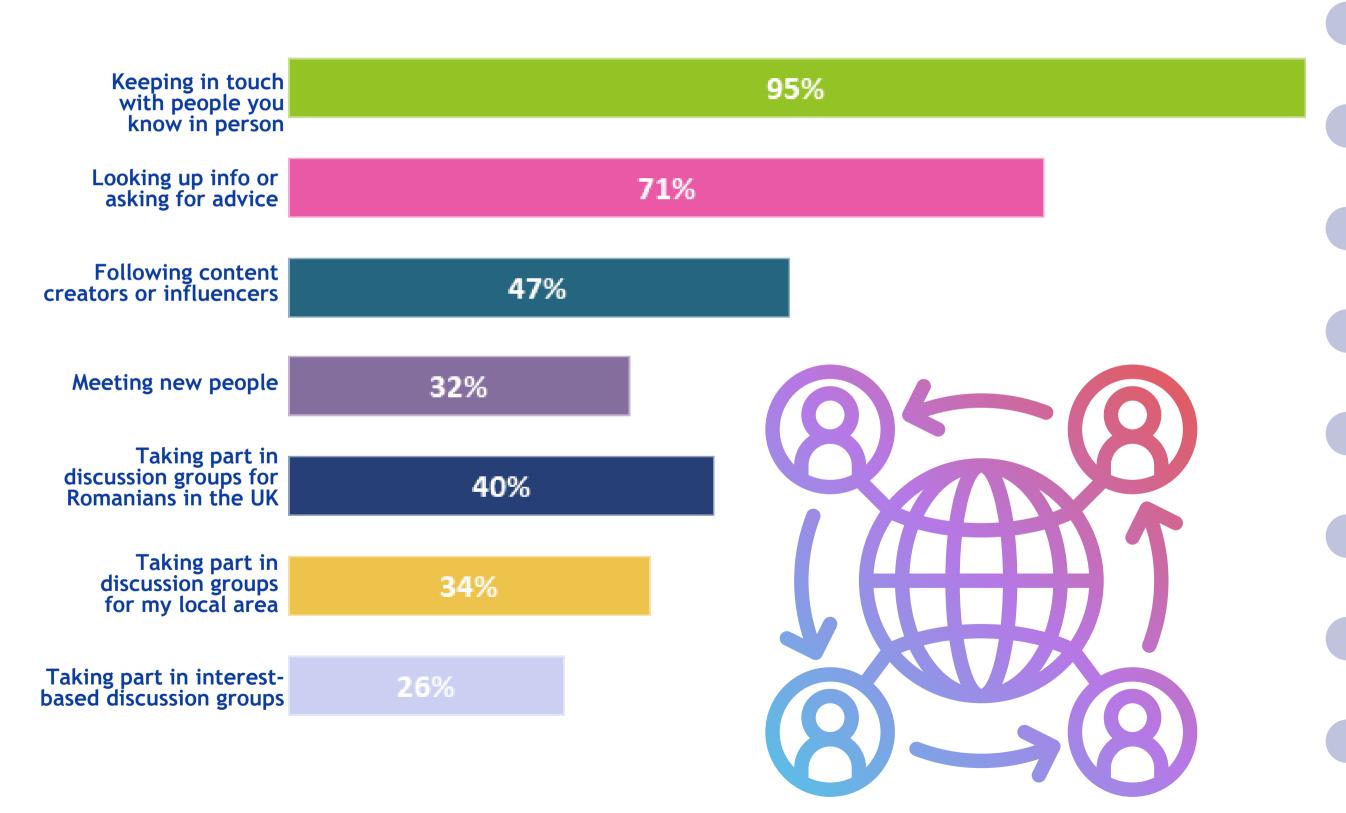
While health is not his main area of focus and he is not medically trained, he has been an outspoken vaccine advocate during the pandemic; and he often expresses opinions about public health and healthy lifestyles. His style can be considered controversial by some; for instance, he has been accused of fatphobia for some of his remarks on obesity.

Communication and community networks

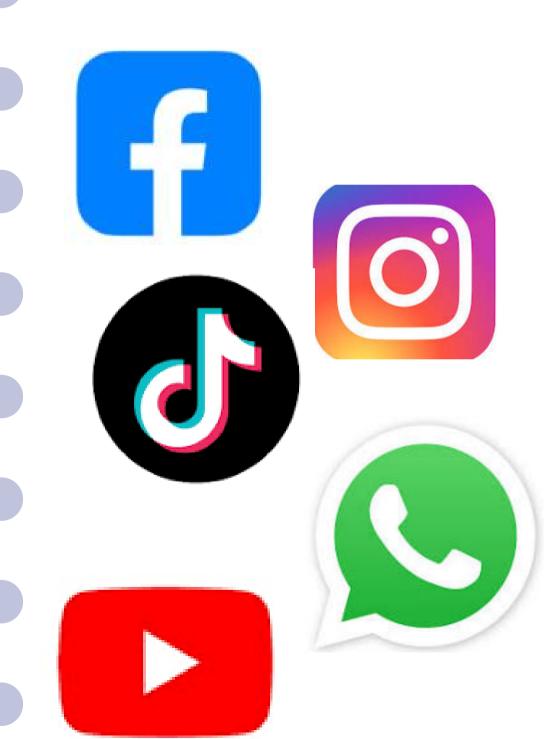


Communication and community networks

What respondents used social media for



Most utilised social networks:



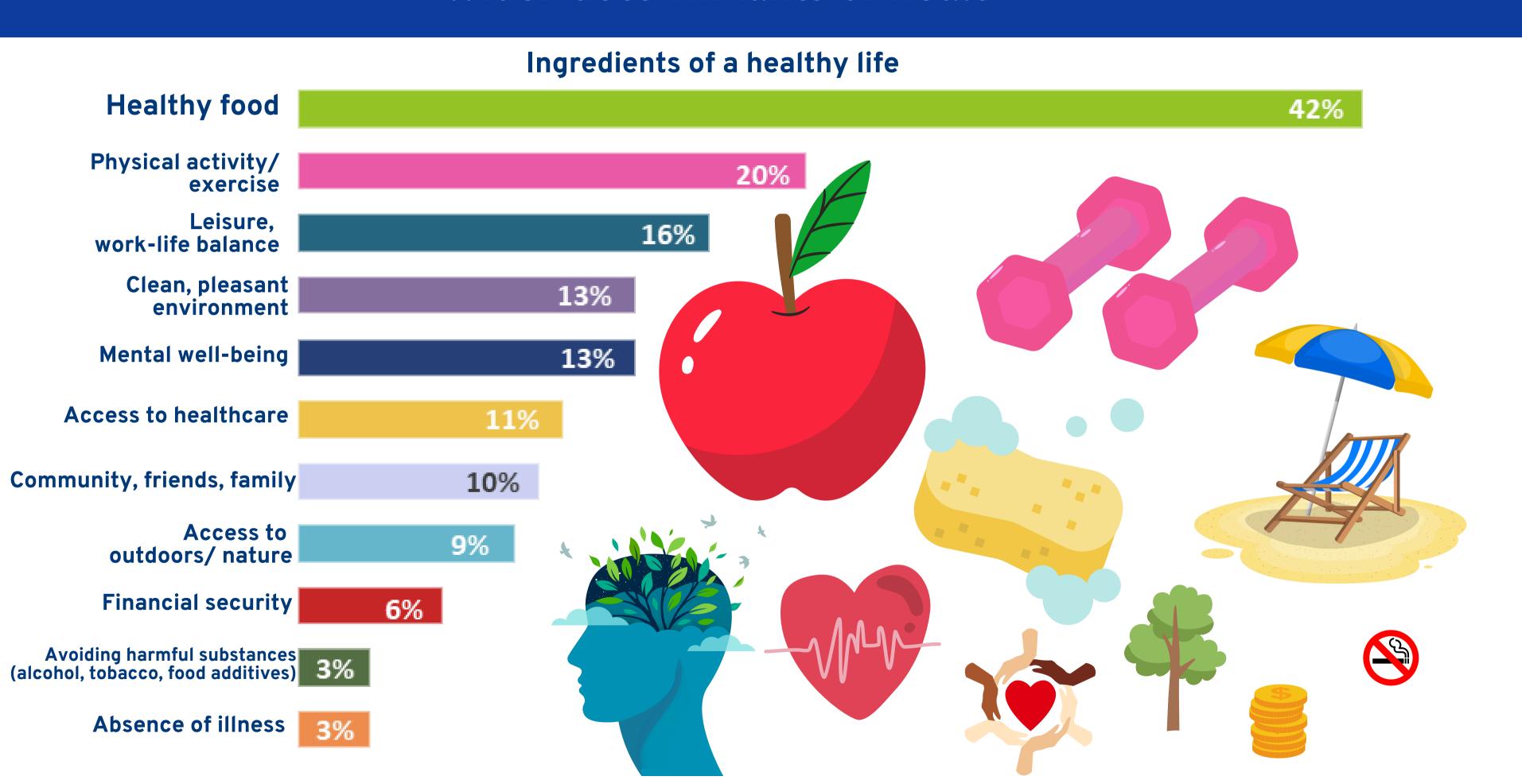
Communication and community networks

Pro-vaccine

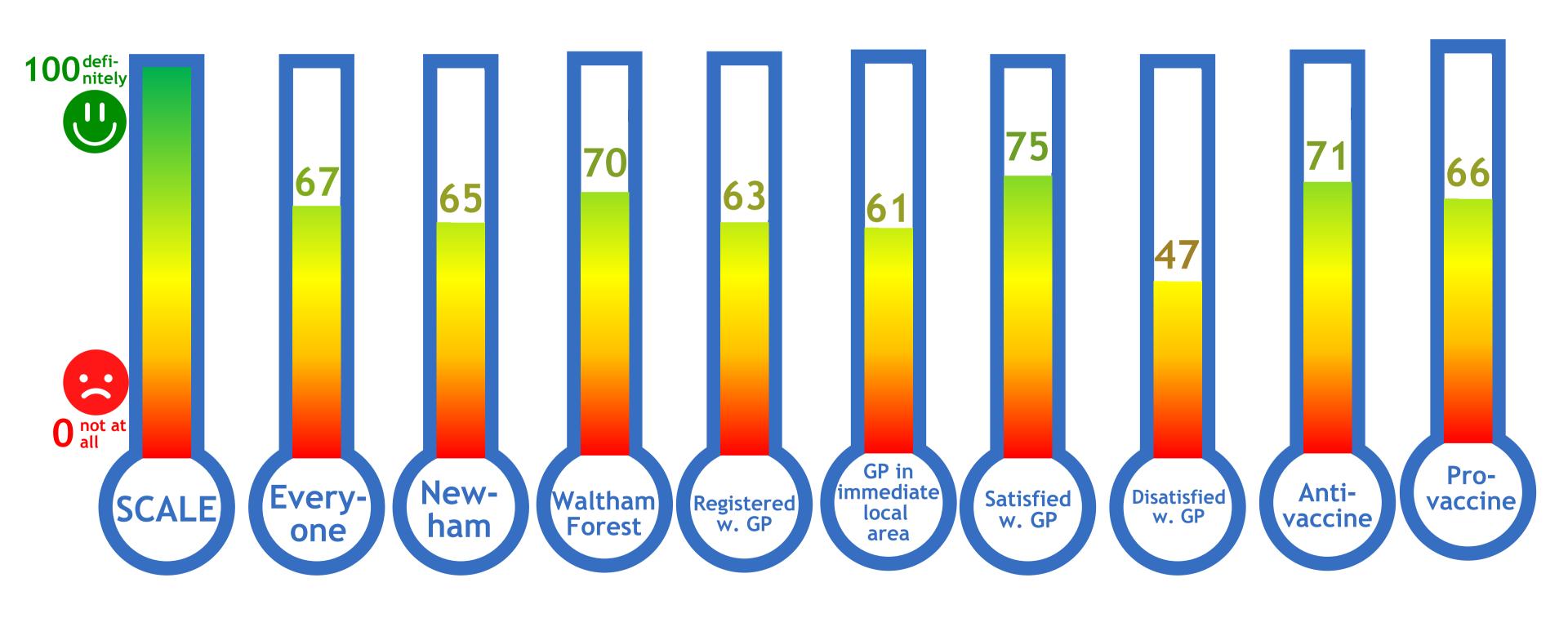
- More likely to read articles- online or in newspapers.
- Less likely to shop at local Romanian or Eastern European shops.
- Less likely to attend religious services.
- Slightly less likely to use social media to look up information.
- Slightly more likely to take part in discussion groups on social media dedicated to their local area,

Anti-vaccine

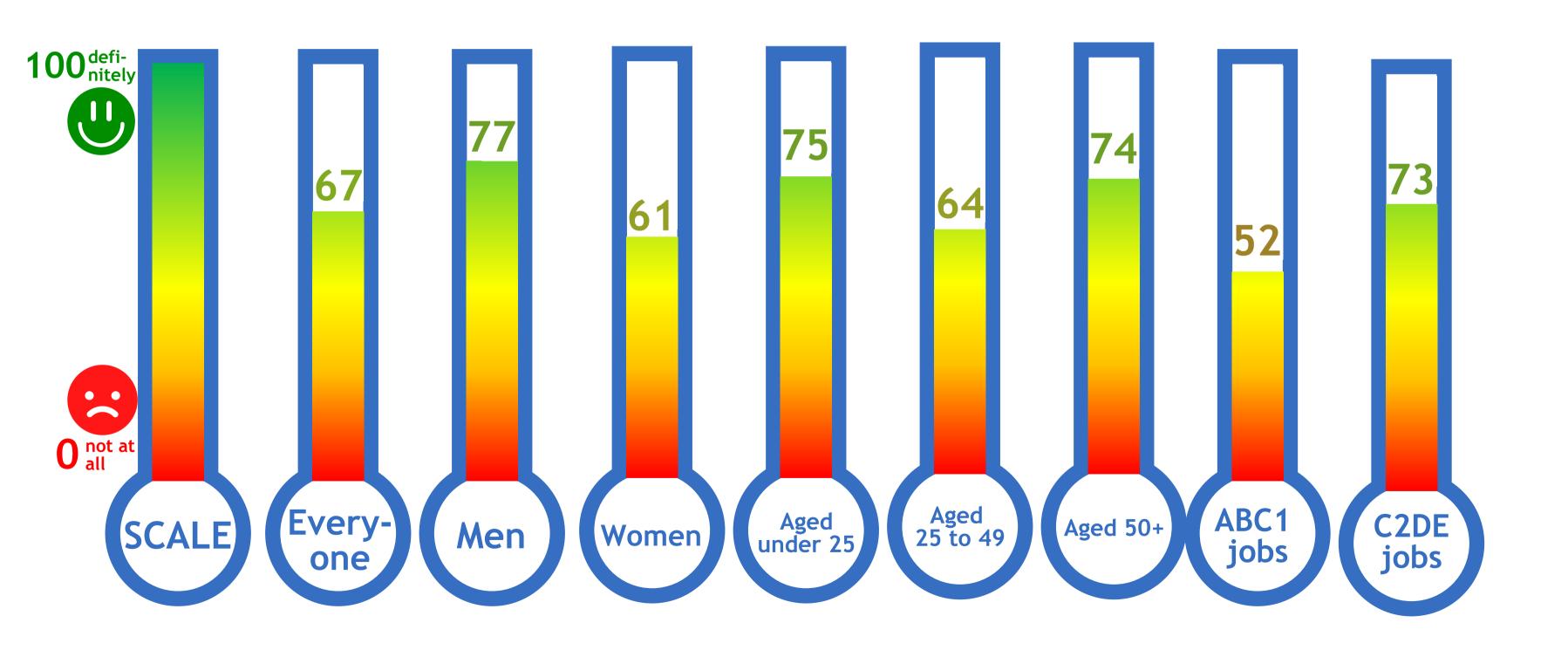
- More likely to shop at local Romanian and Eastern European shops
- Less likely to watch British TV channels.
- More likely to use social media to meet new people
- Slightly more likely to use social media to look up information.
- Slightly more likely to attend religious services.
- Slightly more likely to stay in touch regularly with friends and family who live in Romania.



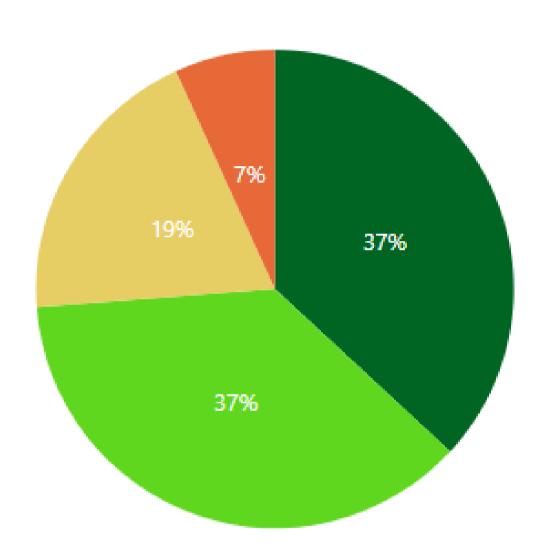
Do you believe your neighbourhood is a place where you can live a healthy life?



Do you believe your neighbourhood is a place where you can live a healthy life?



How happy are you with your life in general?



- Very happy
- Reasonably happy
- Neither happy nor unhappy
- Quite unhappy

More happy

- Living in Newham
- Came to the UK as a child or teenager
- Parents of children
- **Attending local groups and events**
- **Attending religious services**
- >>> Men
- In full time work

Less happy

- Disabled or with a long term condition
- Digitally excluded
- >>> Speaking limited English
- >>> Women
- Arrived in the UK recently
- In part-time or unstable work

