public infrastructure, environmental harms, geographic and social exclusion are very much related to the health condition of Roma in East-Central-Europe. When it comes to closing the health gap between Roma and non-Roma, evidence suggests that social determinants of health—social, economic, cultural, political, and environmental factors—play a more significant role than their limited access to health care services.

Our project's main objective is to collect relevant evidence on social and environmental determinants of Roma health based on fieldwork research in a certain Hungarian location, to strengthen understanding of the necessity of research based evidence in influencing relevant policies and mobilizing local Roma community for public participation in the improvement of their health outcomes. Research activities connected to our project will start on October 2018.

Participatory methods will be used for fieldwork research, including interviews, mental mapping and participatory observation of the everyday life of neighbourhood located household's members' practices connected to housework and their relationship to their environment. We will focus on the neighbourhood's environment, public infrastructure and services' availability, accessibility and affordability. There will be in-depth interviews and mental mapping with residents and other local stakeholders connected to environmental issues effecting everyday health conditions, getting an insight of the neighborhood's hidden environmental and social factors as proximities of different environmental hazards, forms of social exclusion and inefficient public services.

Based on the research participatory and mediation process will be started between neighbourhood's residents and other relevant stakeholders – local councils, public utility and health services, public institutions – strengthening evidence-based local empowerment and advocacy for public health.

REFERENCES

Our foundation's research project called Water Inclusion: <https://pad.network/projects/water-inclusion/>

Our project focused on the limited access to affordable and quality water and sanitation due to interference of social factors. Our research has been unfolding details of water usage accessibility, affordability and quality challenges in socially excluded neighborhoods. PAD had investigated possible, socially and environmentally conscious and sustainable local community sanitary and public service solutions – e.g. community sanitary blocks – through participatory planning and implementing processes.

Our new research project connected to Roma public health will be used and developed some of the methods used

in our previous Water Inclusion project but in a broader perspective.

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TRADITIONAL HEALERS AND TRUSTING COMMUNITIES IN GHANA: A CONSTRUCTIVIST GROUNDED THEORY APPROACH

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Background In Ghana, Traditional herbal and Western medicine exist in parallel with underlying contradictions between their values and beliefs. Traditional medicine is ingrained in the ancestral and cultural history of most Ghanaian communities with an estimated 70%–80% of the population using herbal medicine alone or alongside western medicine.

Aim/Objective To explore the experiences and motivations of cancer patients to use traditional herbal medicine and traditional herbal practitioners (THPs) in Ghana in parallel to conventional medicine.

Methods Semi-structured interviews with adult cancer patients aged 25–76 years (n=35) and ethnographic observations of their staff interactions and engagement with patients at the participating hospitals and herbal clinics. The interviews were audio recorded on a digital recorder and formed the core data for the analysis, using coding and constant comparison.

Results Five main categories reflected the patients' motivations to use traditional medicine: *Tradition: Ancestral and cultural connections, Linguistic comprehension, Community and relational accountability, Reputable virtues of the THPs, Power disparity and lack of trust in doctors*. The present findings highlight the profound subtleties of trust in the THPs because of shared traditions and ancestral quintessence. Participants were found to trust the THPs because they felt they had a collective community, language and relational accountability to them and because of their renowned reputation of good character and healing practices. In contrast, there was a lack of trust in conventional medical practitioners because of inequalities of power between doctors and patients, economic disparity, and cultural divide brought about by doctors' European or Western foreign-like manner and language during the clinical encounter

Conclusions The study provides evidence that the motivations of cancer patients in their use of herbal medicine in Ghana are more profound and complex than mere socio-economic factors that most previous studies identified.