



Submission to the Joint Committee on Mental Health Issues Affecting the Traveller Community.

August
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1. Experience, expertise or background of author:

I am currently the Managing Director of Offaly Traveller Movement (OTM). Prior to this I worked in OTM for 6 years as the Mental Health Social Worker with the Travelling to Wellbeing Mental Health Service (T2WB) and I continue to support this service on a part-time basis. I am member of the Traveller community.

On behalf of Offaly Traveller Movement I welcome this opportunity to make a submission to the Joint Committee on Mental Health Issues Affecting the Traveller Community. The information and recommendations detailed below are based on my knowledge, expertise, lived experience and close daily interaction with Travellers in Offaly and beyond.

2. Background to OTM

The Tullamore Traveller Movement Ltd was launched in 1996 as a response to the needs of the local Traveller community. We have since become the Offaly Traveller Movement (OTM) and continue to work for Traveller rights and social justice throughout the county. We are a community development organisation offering services responding to health, mental health, accommodation, youth, education and human rights. The vision of OTM is full equality and social justice for Travellers in County Offaly.

Mission

The mission of OTM is to empower Travellers and to work as a partnership between Travellers and settled people to achieve equality and social justice for Travellers in County Offaly.

Principles, Values and Commitments

OTM believes in:

- Travellers as a nomadic ethnic group
- Equality
- Social justice

OTM is committed to:

Social Justice, Human rights, Community Development, Empowerment, Participation and Partnership

Our Approach:

- **Traveller-centered:** we believe it is not possible to achieve meaningful, positive change for Travellers without active Traveller participation.
- **Community Development:** embraces empowerment and participation; equality and anti-discrimination; social justice and human rights, all of which are key ingredients to achieving positive outcomes for Travellers.
- **Cultural Identity:** Travellers are a distinct ethnic group with shared heritage, customs and traditions.
- **Traveller Empowerment:** providing opportunities for Travellers to develop their skills and knowledge supports their self-determination. Building the community's and service providers' capacity to understand and meet the needs of Travellers improves outcomes for Travellers.
- **Anti-discrimination:** challenging discriminatory attitudes and practices of individuals, institutions and society is necessary to bring about positive change for Travellers.
- **Anti-violence:** signposting external supports and services for Travellers to resolve conflicts peaceably and constructively – whilst maintaining service neutrality in disputes.

3. Introduction

It is researched worldwide that indigenous minority ethnic groups experience increased levels of mental ill health compared to the majority populations (McGorrian et al. 2013) and indeed the prevalence of poor mental health in the Traveller Community in Ireland is very high. Undeniably Travellers experience poorer outcomes in all areas of their lives and mental health is no exception. Although Travellers represent less than 1% of the total population in Ireland, suicide is the cause of 11% of Traveller deaths. The suicide rate for female Travellers is 6 times higher than their settled counterparts and 7 times higher for males. This represents an alarming high rate of mental ill health and death by suicide within the Traveller community. In a climate where mental health services are at crisis point and Travellers are experiencing higher levels of suicide and mental health issues than any other group in society it has never been more important to highlight this negativity and begin a process of engagement with Travellers and Traveller organisations to redress the imbalance and ensure that the poor mental health status of Travellers is addressed.

4. Factors that affect the mental health of the Traveller community

4.1. Discrimination in Ireland goes largely unchallenged and there is an increasing acceptance for negative stereotyping of Travellers. Racism and discrimination towards Travellers, which is reflected in the 'not in my back yard' syndrome fuels this negative attitude. Travellers continue to experience discrimination in numerous aspects of their daily life including employment, housing, education and the provision of health services. The Traveller Community National Survey 2017 found that 77% of Travellers experienced discrimination in the past year. In relation to Traveller mental health and suicide it states "Mental health is a key 'aspect of life' that is perceived to have gotten a lot worse; over the past 5 years. Over 90% of Travellers agree mental health problems are common among the community (C.F.I. 2017).

Goward et.al. (2006) highlights four main causes of disproportionate mental health concerns among Travellers: hostility (discrimination), reluctance, housing and practical issues. Costello (2015) in her research identifies a number of factors that have a negative impact on Traveller mental health including mistrust, discrimination, and a lack of cultural competence within services. McGorrian et.al. (2013) looks at patterns of health inequality for minority groupings and suggests there is a strong association between mental distress and various aspects of life experience, a combination of discrimination, social exclusion and poverty. Cooper et.al. (2012) reports that racism, a lack of knowledge around mental health and services and cultural competence are factors why those from ethnic minority groups are less likely to seek help for mental health issues. Indeed as far back as the 1980's and 1990's research suggests that persistent discrimination has a negative impact on Travellers emotional wellbeing (cited in Goward, 2006) and what is known is that without tackling societal attitudes towards Travellers there is limited scope for health improvements (Cleemput, 2010).

4.2. Accommodation is the single most important issue impacting on Travellers lives today. An unprecedented number of Traveller families are living in over-crowded situations, on the side of the road, in un-official halting sites, emergency accommodation and B&B's. For many families there is no access to basic amenities such as running water, electricity or toilet facilities. Young Traveller children attending school often have to move resulting in a disruption to their school attendance. There has been an increase in the number of evictions due to 'illegal encampments'. Living in these conditions greatly reduces the life expectancy of the Traveller community, which is now comparable to that of the settled community in the 1950's. In September 2018 Offaly Traveller Movement conducted a local count and recorded 127 Travellers living with no services in Offaly, 56 adults and 71 children. Research demonstrates that there is a critical link between improved accommodation for Travellers and better uptake of health, education, and employment services.

4.3. Unemployment amongst Travellers is extremely high and is indicative of significant barriers to accessing mainstream employment, with Travellers experiencing 80% unemployment in 2016 compared to a 12.9% rate in general (Census 2016). According to the Traveller Community National Survey 2017 only 17% of people in the national population survey said they would employ a Traveller. Whilst all groups in society face challenges as a result of economic and industrial change, for Travellers these challenges have been significantly compounded, in the context of their cradle to grave experience of deprivation, discrimination and marginalisation. Indeed the labour force participation rate for Irish Travellers is lower than for the general population and where Irish Travellers are in paid employment, they are more likely to work in unskilled (or elementary) occupations. This is a result of the fact that only 1% of Travellers access to Higher Education (HE). Unemployment and reduced social circumstances combine to produce feelings of negativity, depression and low self-worth. There is a strong inter-relationship between poverty, unemployment and mental health (Mental Health Commission, 2011).

5. Barriers to accessing mainstream mental health services

International research suggests that ethnic minorities are often confronted with many barriers when accessing mental health services. These include cultural and attitudinal barriers, discrimination and

practical barriers. Scheppers et al (2006), discusses many factors that hinder the use of mental health services among ethnic minorities which includes discrimination, insecure living conditions, low education, lower social and socioeconomic status and a lack of cultural knowledge by service providers. Leong and Kalibatseva (2011), discussed feelings of shame, low socioeconomic status, discrimination and a lack of culturally appropriate services for ethnic minorities. According to Francis (2013) negative interactions with services was identified by Travellers as a reason for not availing of health services. Goward et al.'s study (2006) include experiences of discrimination within statutory services; negative stereotypes about Travellers, and a lack of understanding of Traveller culture. A lack of cultural competency on the part of service providers and experiences of discrimination can negatively affect Travellers' engagement with services (Carew et al. 2013; Department of Community, Rural and Gaeltacht Affairs 2009). Francis (2013) found that nurses' perceptions of Travellers were heavily influenced by negative media stereotypes and that they lacked understanding of Travellers' culture and health needs. Bergin et al. (2017) found that mental health service providers held negative and mistrustful attitudes towards Travellers who accessed services. As van Hout (2010) explains, mainstream health services are geared to majority needs and culture.

The Travelling to Wellbeing (T2WB), Traveller specific Mental Health Service was independently researched and evaluated in 2015 and Travellers in Offaly identified a number of barriers in accessing mainstream mental health services including:

- Discrimination when trying to engage with mental health services. When discrimination is encountered with one service it can make an individual less likely to engage with other services, for fear they experience it again.
- When facing a crisis situation, delays to accessing support from mainstream services such as long waiting lists and bureaucratic processes can also dissuade Travellers from trying to engage
- Been negatively appraised by mainstream service providers led to feelings of concern and distrust. There was a perception that this was largely grounded in a lack of appreciation of the cultural differences between Travellers and settled people.
- Unfamiliarity with terminology and literacy difficulties also pose as barriers. These issues are aggravated by a lack of awareness or sensitivity among service providers.
- A perception that some mainstream healthcare providers did not always convey concern or real understanding regarding their needs. Again, this was associated with a lack of understanding of aspects of Traveller culture.
- The importance of establishing a trusting relationship with health service providers was emphasised, in particular in relation to mental health. Without this, Travellers may be less likely to engage with mainstream services. Important factors include clear sharing of information and continuity of care with the same provider where possible.

- Some external service providers had, over years of working with Traveller clients ,developed a good awareness of sensitive issues and ways of addressing them. But in cases where such steps were not taken, a trustful relationship may never develop, which seriously limits the capacity of mainstream service providers to provide support.
- The absence of a joined up approach among service providers in more complex cases can mean that individuals find themselves dealing with a range of services and often a daunting and difficult process.
- Practical issues identified include, not having a postal service for those without an official address and for those living in chaotic circumstances, becoming homeless, can make it difficult to coordinate ongoing liaison with multiple service providers.

6. Willingness of the Traveller community to engage with mental health services

It has often been levelled at Travellers that they refuse to attend for appointments and they don't use the health and mental health services appropriately. Fear of how someone will be treated when they attend a service and the stigma of mental health issues in the community are still prevalent and need to be addressed together with the services and the Traveller community. There is a growing body of evidence regarding the value of a specialist approach in addressing the mental healthcare needs of ethnic minority groups. This involves dedicated staff addressing the needs of a particular population. This approach enables improved knowledge and understanding among service providers; and means a greater likelihood of client engagement. In order to be effective in working with an ethnic minority community, a specialist model must also be culturally competent.

Research shows that services or models that take a truly culturally competent approach have been shown to be four times more effective in meeting the needs of ethnic minority groups than those that do not (Griner et al, 2006). The research literature also shows that focusing specifically on mental health issues can be inappropriate when trying to meet the mental health needs of Travellers; often what is needed is an approach that focuses on relieving the symptoms of mental health concerns. Indeed the Travelling to Wellbeing Mental Health Service based in Offaly Traveller Movement is over 6 years in operation and the number of Travellers accessing this service is increasing year on year for both 1:1 and group support. This service offers individual support, group support, mental health recovery, suicide prevention, intervention and postvention.

T2WB is a unique service, being the only Traveller-specific mental health service of its kind in Ireland. It takes an evidence-based approach to providing a clinical, therapeutic service to Travellers experiencing mental health difficulties, within a community development context. T2WB staff members develop individualised, culturally-sensitive care plans with service users. Service users play a central role in identifying needs, goals and actions. T2WB takes a flexible, person-centred approach in meeting the needs of individual clients. This means that the approach and type of supports provided can vary quite substantially from person to person. For example, for clients in a crisis situation, a more practical approach is often required, with emphasis placed on issues such as

housing, with a more therapeutic approach introduced once the client's circumstances have stabilised.

Staff carefully navigate a space that allows them to provide a professional, therapeutic service to service users. Support is both practical and emotional in nature. Practical support can include, among other things, facilitating getting to appointments and acting as an advocate on their behalf. A high proportion of T2WB clients present with housing difficulties; sometimes this involves a crisis situation, with the client at risk of, or experiencing homelessness. For many, T2WB played an essential role in helping them, either through accessing appropriate homeless accommodation, or liaising with the local county council, and supporting the client to access social housing. It emerged as important that T2WB staff members had the support of colleagues within the Traveller organisation, such as Social Workers, Family Support Workers, Counsellors, Youth Workers and Peer Community Health Workers, in addressing such issues.

T2WB has also played an active role in supporting clients whose children are at risk of being taken into care or have been placed into care. This could involve supporting the client at child protection case conferences, interagency and interprofessional meetings. Also to attend access visits with their children or, from a more therapeutic point of view, helping the person to deal with their emotional response to such visits, particularly in communications with social services. It is relatively common for T2WB staff members to extend the service to family members of a service user, should this be deemed useful by the family members concerned. In this way, it can be extended to some particularly vulnerable and hard-to-reach people.

T2WB staff members stressed the importance of empowering clients, insofar as possible, to become independent of T2WB. Often, this involved working to improve a client's sense of self-esteem and self-confidence. Clients confirmed this was an important outcome of their engagement with T2WB. T2WB staff members played an important 'translation' or 'bridging' role in addressing communication barriers between Travellers and mainstream service providers. T2WB staff members also helped address communication barriers from the perspective of service providers, for example by helping them to understand aspects of Traveller culture that might have an impact on a client's situation. In some cases, a close working relationship would develop between the external service provider and the T2WB staff member – an example of joined-up working that leads to real outcomes for clients. Indeed external service providers described how T2WB often acted as a valuable resource to them, in supporting Traveller clients.

Stigma associated with mental health issues is addressed with clients through one-to-one work; by creating a safe space for clients to discuss their mental health, the taboo often associated with mental health issues can lessen. Stigma has also been addressed by other initiatives taken by T2WB staff members, namely: mental health and wellbeing workshops with Traveller groups linked to the organisation, seminars; facilitating Traveller participation in local mental health initiatives for the general population; and addressing mental health through art therapy and drama.

The following success factors of the T2WB model have been identified:

- Involvement of well-established Traveller organisations, which enabled the T2WB model to achieve a strong buy-in from Travellers;
- Capacity to address a multiplicity of issues presented by clients;
- Operating within a relatively low-cost model;
- Evidence-based approach, drawing from established good practice in both fields of clinical mental health care and community development;
- The professionalism and qualifications of its staff;
- Provision of structured clinical support and external supervision within the context of a well-established community development setting;
- Facilitation of meaningful referrals to mainstream services.

7. Suicide levels in the Traveller community

Suicide is a significant concern within the Traveller community as it represents 11% of Traveller deaths. According to the National Traveller Survey 2017, 82% of Travellers have been affected by suicide, 90% in the Dublin area. 44% of those affected by suicide in their immediate family have also experienced suicide in their wider family (C.F.I. 2017).

In Offaly suicide has had such an impact on the Traveller community that Offaly Traveller Movement in partnership with the HSE developed a culturally appropriate *Guide to Developing a Local Coordinated Crisis Response Plan for the Traveller Community* in 2018. The aim is to respond to the community following the occurrence of an attempted suicide, suicide or unexpected death. This Guide provides a framework for developing a Local Coordinated Crisis Plan for the Traveller community in partnership with relevant organisations and services, which is activated for 4-6 weeks following the occurrence of an attempted suicide, suicide or unexpected death. Since the development of the guide the local plan was initiated to support a family bereaved by suicide.

Anecdotal evidence through our work highlights the impact suicide is having on families with one family locally having lost 7 first cousins to suicide in a short time frame and another family losing a brother, son and a nephew over a five year period. In any other group in society if this were happening we believe a national crisis would be declared and initiatives with ring fenced supports would be prioritised however in the Traveller community the perception is that no one cares.

8. Mental Health Initiatives to Support the Traveller Community

8.1. Travelling to Wellbeing Traveller Specific Mental Health Service

When it was established in Offaly Traveller Movement six years ago Travelling to wellbeing (T2WB) was a pilot mental health project for Travellers. It was a unique project, in that it takes an evidence-based approach to providing a dedicated clinical, therapeutic service for Travellers within a community development context. Originally funded by Genio the T2WB is now funded by the HSE. The evidence from the programme has shown significant improvements in the number of Travellers accessing support through the project. OTM feels strongly that this fundamental service should be replicated across the country in all Traveller organisations.

Through this service OTM has engaged in work with the Resource Officer for Suicide Prevention to develop materials, information and targeted events specific to the Traveller community. These materials and events prove helpful in sharing information and reducing stigma related to mental health, recovery, wellbeing and suicide prevention. It is an important piece of work for OTM and participation in events such as the Green Ribbon Campaign, World Mental Health Day, World Suicide day, Traveller Pride and other local mental health initiatives and wellbeing activities ensures that Travellers are involved, informed and some of these events encourage referrals to services.

8.2. A Guide to Developing a Local Co-ordinated Crisis Response Plan for the Traveller Community 2018

Offaly Traveller Movement in partnership with the local HSE Resource Officer for Suicide Prevention and the HSE, recently launched a “*A Guide to Developing a Local Co-ordinated Crisis Response Plan for the Traveller Community 2018*”. This Guide was developed in response to the increased number of suicide deaths that have occurred within the Traveller community and the need for a co-ordinated response when such incidences occur. It provides a framework for developing a Local Co-ordinated Crisis Response Plan for the Traveller community which is activated following the occurrence of an attempted suicide, suicide or unexpected death. The aim of this Plan is to facilitate the co-ordination of multi-agency responses and will ensure more support for individuals and families who are experiencing these crisis situations. This Guide is in line with Goal 3 of Connecting for Life Midlands Louth Meath 2018-2020: ‘*To target approaches to reduce suicidal behaviour and improve mental health among priority groups*’. It is hoped that with the support of the new Traveller Mental Health Service Coordinator in the HSE this can be replicated and core teams will be established in other counties in the CHO area who will also respond to suicide.

8.3. Offaly Traveller Counselling Service

In 2018 the Travelling to Wellbeing Mental Health Service supported 128 individual Traveller clients; 69 female and 42 males aged between 18 and 85, and with many children in the context of their family systems. For many of these Travellers this was their first interaction with a mental health service and many of these cases were at crisis level, highly complex and with multiple needs. Given how vulnerable these clients are the long waiting lists to access counselling for those who needed it has been a barrier that has at times resulted in a disengagement with the service altogether. In order to address this, we piloted a Traveller specific psychotherapy service for two years and this included an evaluation report *My Geels Glorifying 2016* on same. A total of 16 adults and 24 children engaged in individual, couple and family therapy. Following on from the success and recommendations of this report Offaly Traveller Movement with limited funding from TUSLA now offer a culturally inclusive counselling service to individuals, families and children who are in crisis and require an immediate response to ensure that they are supported without delay and therefore continue to engage in order to improve their mental health and wellbeing.

8.4. Travellers Recovery in mental health

Mincéars Táirien (Travellers Talking) is a process to support Travellers to proactively manage their mental health and is currently being designed by the Travelling to Wellbeing Service in OTM. The purpose of this Traveller specific mental health process is to equip Travellers with the innate tools to manage their

mental health and, subsequently, build their sense of self and self-esteem. Over 10 sessions participants will:

- Be introduced to mental health, resilience and wellbeing
- Explore tools to develop resilience and wellbeing
- Identify factors that challenge their mental health and resilience and develop an action plan to manage them
- Explore supportive services, locally and nationally
- Develop a personal plan to build and then maintain their mental health, resilience, sense of self and self-esteem

The *Expected Outcome*:

OTM will develop an evidence based process named Mincéars Táirien to engage Travellers to manage their mental health and, subsequently, build their sense of self and self-esteem. Mincéars Táirien will be facilitated by the team in OTM specifically, however at this time funding has not been sourced to develop this Traveller specific mental health recovery model.

8.5.Supporting a culture of wellbeing in the organisation

As a large local Traveller organisation with over 20 staff we are cognisant of the importance of mental health and wellbeing not only for the community but also for the staff within the organisation. We are the first Traveller organisation to participate in the Healthy Workplace Initiative where we support ongoing mental health and wellbeing initiatives for staff. This is having a positive impact and fosters a culture of mindfulness and supports productivity of staff.

9. Recommendations

9.1.Funding should be provided for the expansion of the Travelling to Wellbeing Mental Health Service and the model rolled out to other well-established Traveller organisations.

9.2.Given the significant inequalities in health experienced by Travellers there is an urgent and imperative need to increase and introduce funding for targeted mental health services for the Traveller community and Traveller organisations.

9.3.Implement the recommendations from the All Party Oireachtas Committee on the Future of Mental Health in Ireland: “The Committee recommends as Sláintecare is implemented that the recommended increase to 10% for mental health services be ring-fenced and prioritised, with a portion of this budget ring-fenced for a National Traveller Mental Health Strategy. This is vital as mental health services have been chronically underfunded in the past few decades. The Minister for Health should publish a timeline for the implementation of Sláintecare setting out the progress made to date.”

9.4.Traveller specific health programmes have been consistently underfunded and neglected and our peer Community Health Workers hours cut. We in OTM have found that this impacts on our service and our abilities to respond to the demand and therefore we urgently recommend the reinstatement of lost funding. Increased funding for the delivery of peer led Traveller-specific mental health supports through Traveller Primary Health Care Projects in local areas is urgently

required to respond to crises as they arise and provide appropriate interventions in the event of an attempted suicide and in providing supports to the family members in terms of bereavement following a suicide.

- 9.5. Specialist training should be provided to professionals (support workers, community workers, nurses, doctors, social workers, counsellors etc) who are endeavouring to deliver a service to members of the Traveller community who are accessing the mental health services.
- 9.6. Local funding for Traveller counselling services is urgently needed to ensure OTM and other Traveller organisations are able to meet the demands of members of the Traveller community who are in crisis.
- 9.7. Prioritise and implement an ethnic identifier across mental health services to monitor participation, equality of access and outcomes for Travellers.

10. Conclusion

Travellers experience notable disadvantage compared with their settled counterparts. They are less likely to engage with mainstream services and fair poorer on all indicators of the social determinates of health. Travellers have lower education levels, poorer health outcomes, low employment rates and poor accommodation. Impacting significantly on this is high levels of discrimination and social exclusion. Travellers are socially and economically disadvantaged with a high number experiencing a lack of self-worth and self-confidence, where they feel out of place with settled counterparts. Travellers are being excluded from society as a result of being a member of a socially and economically deprived community. There is a clear need to re-invest and invest in community development and human rights work in Ireland to ensure the voices of the most marginalised are heard.

Significant investment in community development is needed to build up trust with this most marginalised community. There are many innovative and interesting projects that Offaly Traveller Movement are involved in and offer that addresses many of the issues highlighted here however, further investment is required in order to have significant impact on the mental health of the Traveller community.

08th August 2019
