

Engaging with Gypsy/ Travellers around Health and wellbeing

Heather Craig

KeepWell Nurse Case Manager

NHS Lanarkshire

Topics for discussion

- Key issues affecting Gypsy/Travellers in Scotland
- Barriers to accessing health care
- Effective ways of engaging with Gypsy Traveller communities to support health and wellbeing

Gypsy/Travellers

The term Gypsy Travellers is diverse and complex to define

There are 2 legal definitions of Gypsy

- Gypsies as a recognised ethnic minority group under the ‘Race Relations Act 2010’
- Planning Law which classifies Gypsy and Travellers as ‘people with a culture of nomadism or of living in caravans and all other people of nomadic habit of life whatever their race or origin’ (also includes Travellers who have opted to live in houses and no longer travel)

‘The term 'Gypsy/Travellers' refers to distinct groups – such as Roma, Romany Gypsies, Scottish and Irish Travellers – who consider the travelling lifestyle part of their ethnic identity.’

(Scottish Government 2017)

Traditional Romany Gypsy Caravan





Ethnicity data



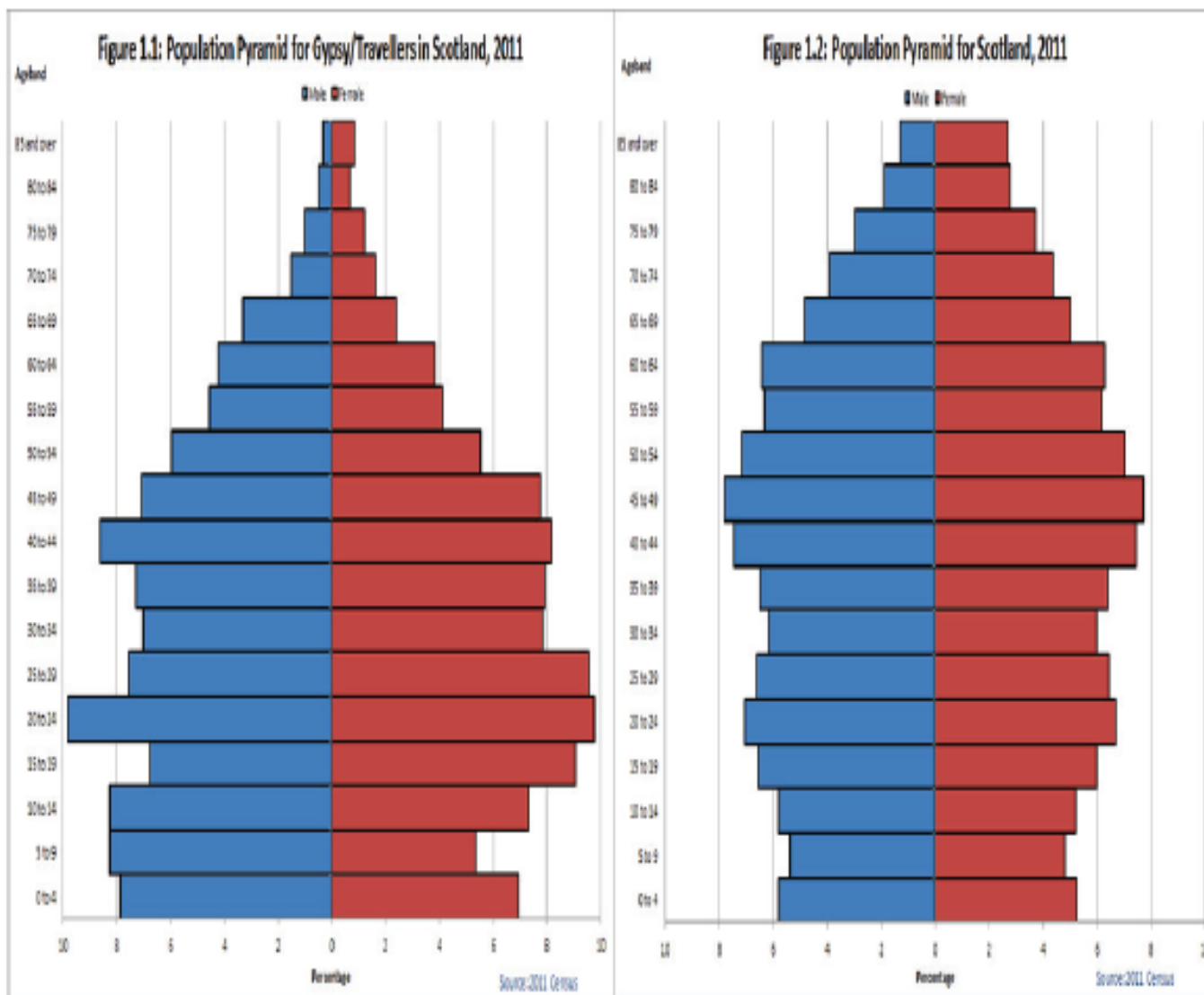
Gypsy/Travellers in Scotland

A Comprehensive Analysis of the 2011 Census

- Gypsy/Traveller included for the first time in 2011
- Just over 4,000 people identified themselves as a Gypsy/Traveller

Gypsy/Traveller Health outcomes

- National data about the health and healthcare status of G/T is not available
- Number of studies have given insights into G/T health
- Health status of G/T is much poorer than the general population
- Also have poor health expectations and make limited use of health care provision



Ethnic Inequalities in Health for Men, 2011 - Age-standardised ratios of long-term limiting health problem or disability for ethnic groups compared to the 'White: Scottish' group

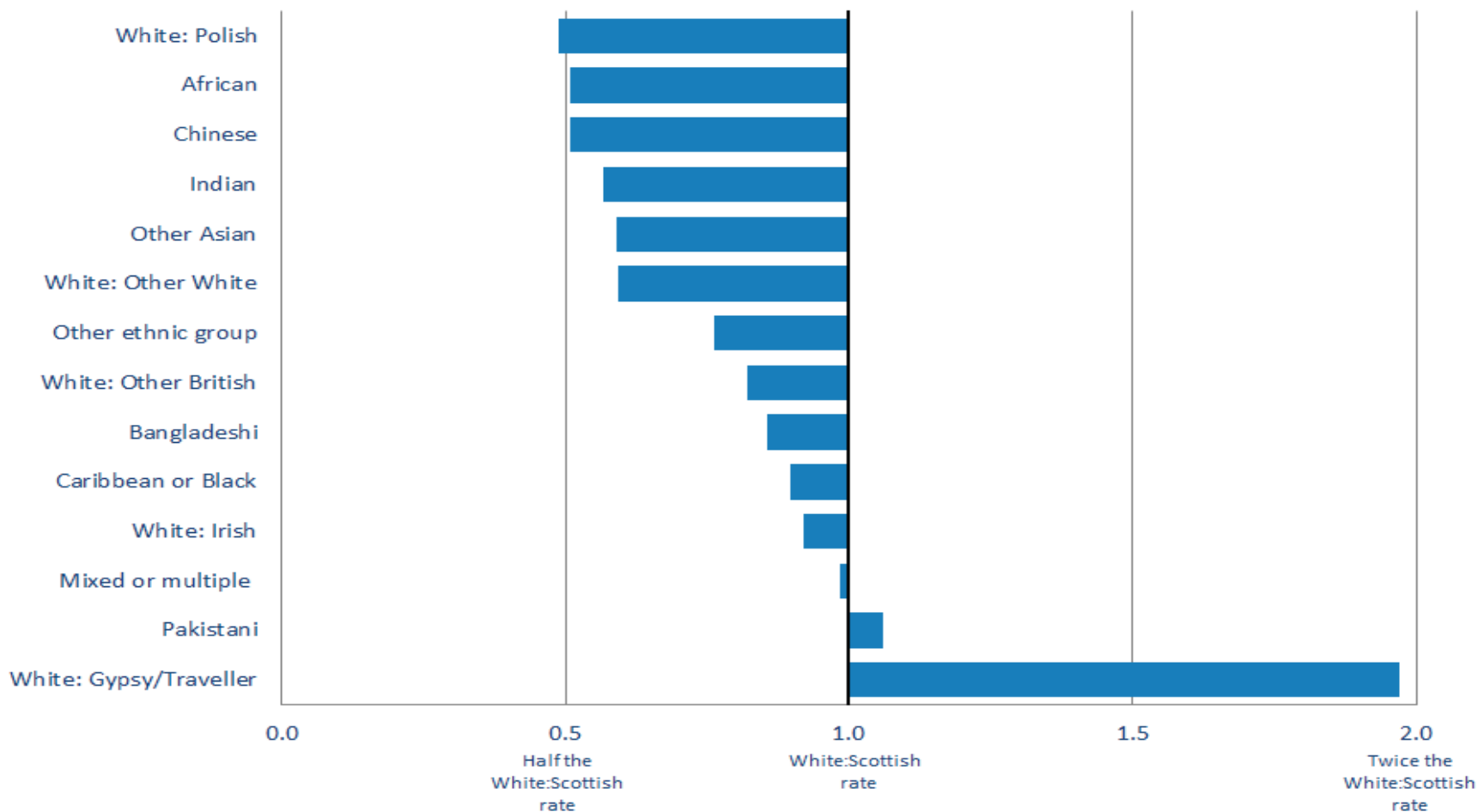
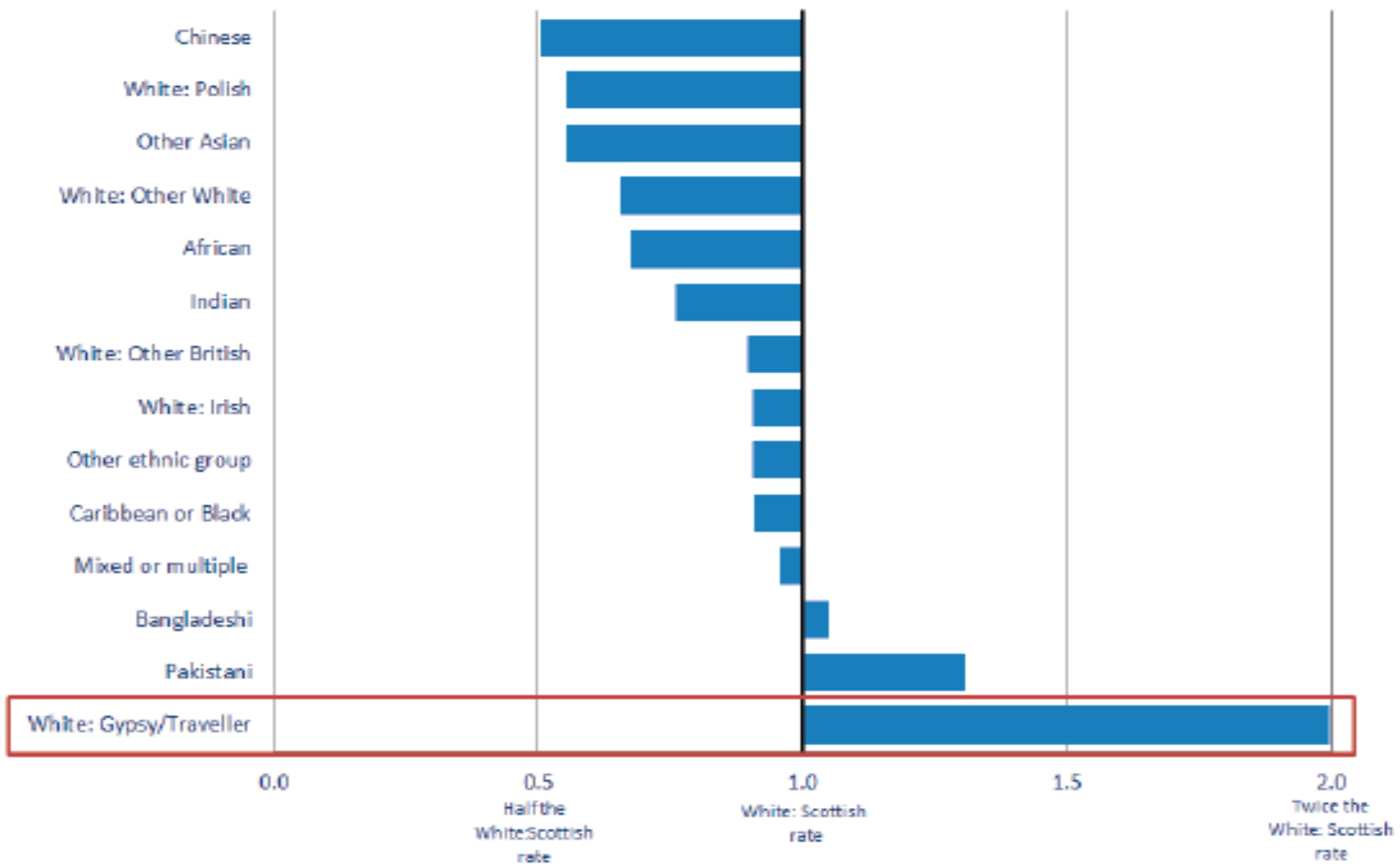


Chart 14: Ethnic Inequalities in Health for Women, 2011 - Age-standard ratios of long-term limiting health problem or disability for ethnic groups compared to the 'White: Scottish' group



Health Facts

- **30% of Gypsy/Travellers live beyond 60 years of age and 4% beyond 70**
- **Men live 10 years less, women live 12 years less than non Gypsy/Travellers**
- **Significant higher rates of self reported anxiety and depression within this community**
- **Infant mortality in 3 times higher in Gypsy Traveller communities**
- **High incidence of respiratory conditions, diabetes and heart disease are reported**

Other facts

- Family values are very important to the travelling community
- The male is recognised as the head of the family and the woman as the heart of it
- Issues relating to gender and sexuality are not discussed between older and younger generations in the travelling community
- Communities experience social exclusion

Keep Well work

- In 2009 KW began to offer health checks to the Gypsy/ Travelling community in Lanarkshire.
- Engagement with the community is based on mutual trust, relationship building and having knowledge and awareness of the needs and culture of the community
- Partnership working is vital to on going relationship building
-word of mouth speaks volumes

Key health Issues identified by Gypsy/ Travellers

- Low expectations of health
- Access to health
- Ageing Population

What matters to Gypsy Travellers when it comes to health?

'I am a Traveller and it is difficult when I move to a new area to get registered with a Doctor there. Where ever we are staying it is difficult to get treatment for me and my family.

(Lanarkshire Gypsy Travellers conversation with Scottish Health Council 2018)

Communication

Tell me how it is!
No medical jargon
or big words

‘Good communication
important when you suffer
from mental health. If clear
and spoken to you and
explained to you-makes you
feel confident in your
treatment-
A smile makes all the
difference’

‘People taking the
time to speak and
explain things’

Case Study

- Background

Mr L is a 54 year old Gypsy Traveller from England who attended a convention in Lanarkshire and opted to attend a KW health check.

He is self employed and maintains a traditional way of G&T culture travelling to find work to support his family

He was unable to read or write and was unsure of his date of birth, he was registered with a Doctor in the North of England

Case Study (continued)

- Keep Well Health Check

Non smoker , no alcohol intake, BMI =obese range
random capillary blood cholesterol level was high
blood pressure was exceptionally high,
he had a family history of heart disease.
Cardiovascular risk score was 23%
indicating a high risk of a heart event

Mr L was advised to register as a temporary resident in Lanarkshire and was given details of Practices in the local area to have his BP reviewed as he planned to stay in the local area for a few months for work purposes.

Outcome

- The following day a local GP surgery contacted KW advising they were unable to see Mr L as he could not provide proof of identity and as such they had no appointments for temporary residents.
- The KW Nurse contacted Mr L who explained his difficulties trying to see a GP in the local area and consented for KW to act as his advocate.
- KW then approached a Practice in the area and an appointment was given for the following day which Mr L attended.
- There was some improvement in his blood pressure however the Doctor felt it necessary to review him again in 4 days and arranged for blood tests and follow up appointments with the Practice Nurse which resulted in him being commenced on blood pressure medication.
- Mr L maintained contact with KW and began to make some changes to his diet and weight as he was keen to improve his health.

....and finally

- He did return back to England deciding after a few weeks to move his family to live in Lanarkshire and contacted KW again to ask for support to register with a GP as he was in a different area and was having difficulty getting registered with a GP as he was unable to provide photographic ID and documentation to prove identity.
- The KW Nurse contacted Practices within the local area and managed to find a Practice willing to take on the family. The Nurse arranged to meet up with Mr L at the Practice to support completion of the necessary new patient registration paperwork.
- Due to Literacy difficulties the family asked the KW Nurse to support them with the registration process. completed the information on the family's behalf as they felt uncomfortable explaining their issues at that stage of the relationship with the Practice.
- Mr L felt his experience with KW was positive and as a result encouraged other Travellers at future conventions to attend for health checks which has resulted in more contacts for the team from the community.

What's Next

- Ministerial Action Plan: Listening and learning about what Gypsy Travellers need/want and what Health and other services can do to support this
- Partnership working with the Gypsy Traveller community: Engage, Involve and consult when making decisions affecting the community
- Cultural awareness training eg: E learning modules: raising awareness of Gypsy Traveller culture



Lifting the
barriers to health
is a shared
responsibility

References and information

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- Working with Gypsy, Roma and Traveller Communities: Information and Best Practice Guide May 2008 County Durham Youth Offending Service
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- Travellers Aid Trust. www.travellersaidtrust.org
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