

The Highland Gypsy/Traveller Health & Wellbeing Initiative

FINAL REPORT

April 2005

"I welcome this Report, which is the result of a lot of hard work by the Initiative Team and Gypsy/Travellers in Highland and elsewhere.

I hope you act on the recommendations soon."

Susan Stewart, Traveller Member of the Initiative Steering Group

"This report presents the findings of three years work with Gypsy/Travellers in Highland by the Health & Wellbeing Initiative.

It demonstrates successful methods of working with Gypsy/Travellers and makes recommendations for agencies in Highland, and beyond, to action. In particular, the report draws attention to the severe inequalities in health experienced by Gypsy/Travellers. The need for independent advocacy and for better multi-agency working is highlighted.

Gypsy/Travellers have given their time and trust to the work of the Initiative and it is now up to us to act on the clear recommendations of this report."

Maira Paton, Chair of Initiative Steering Group

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EXECUTIVE SUMMARY

'... Gypsies and Travellers face disadvantage and discrimination in almost all walks of life - including in key public service areas such as accommodation provision and planning, education, health, employment and criminal justice.'

Trevor Phillips, Chair of CRE, speaking at the launch of consultation on the Campaign for Racial Equality's UK Gypsy/Traveller Strategy in October 2003.

This is the Final Report of the 3-year Highland Gypsy/Traveller Health & Wellbeing Initiative, which operated between April 2002 and April 2005. The Report establishes the context of the Initiative, details the work that it did and the things it achieved and makes Recommendations on what needs to be changed and what needs to be done now, based on the experience gained by the Initiative working with the Gypsy/Traveller community in Highland.

The Report highlights the inequalities in health suffered by Gypsy/Travellers in Highland and their continuing socio-economic exclusion. It recommends that agencies in Highland work in partnership with each other and with Gypsy/Travellers to provide culturally competent services. In parallel with this, the Report suggests that resources are made available for community capacity building so that Gypsy/Travellers are empowered to access the services provided.

The Report points to the need for an independent advocacy/support service to build a relationship of trust with Gypsy/Travellers, to create a connection to services and to enable two-way engagement with service providers. The benefits of an outreach approach are noted and the need for creative, innovative and flexible approaches by service providers.

The success of public seminars, led by Gypsy/Travellers to raise awareness of the issues affecting the community is noted and in particular, the empowerment of Gypsy/Traveller facilitators: the Report highlights the opportunity to build on this success.

The Report also notes that action in support of Gypsy/Travellers in Highland should link with and contribute to Scotland and UK-wide activity, in recognition of the broad nature of the challenge and the lack of relevance of geographical agency boundaries to a nomadic community.

Jim Holden
Development Officer

April 2005

1.0 INTRODUCTION

This is the Final Report of the 3-year Highland Gypsy/Traveller Health & Wellbeing Initiative, which operated between April 2002 and April 2005. The Report establishes the context of the Initiative, details the work that it did and the things it achieved. It goes on to make Recommendations based on the experience gained by the Initiative working with the Gypsy/Traveller community in Highland.

1.1 BACKGROUND

1.1.1 In December 2000, Save the Children helped two young Gypsy/Travellers to present evidence to the Joint Highland Council/NHS Highland Committee for Children and Young People. The Gypsy/Travellers highlighted the problems they faced in accessing public services, particularly education and health services. As part of the response to this evidence, NHS Highland and Highland Council made a successful bid to the Scottish Executive Innovation Fund for Children's Services for a 3 year initiative addressing the health & wellbeing of Gypsy/Travellers in Highland (see Appendix 3 for funding details etc.). The membership of the multi-agency steering group established to manage the initiative included Gypsy/Travellers, whose input was critical to the development of the Initiative's Five Objectives:

1. **To improve access to services & support** and to promote health, wellbeing and social inclusion amongst Gypsy/Traveller Families, whether on the road, on Gypsy/Travellers' sites, or housed.
2. **To facilitate the development of policy and practice** within the statutory sector services (primarily, but not restricted to Health, Housing, Education and Social Work services) in relation to the provision of accessible, appropriate and acceptable services for Gypsy/Traveller individuals and families.
3. **To raise awareness** within the service-providing agencies of the discrimination and stigma faced by Gypsy/Travellers and of the legislation and social policy framework within Scotland.
4. **To provide equal opportunities for Gypsy/Traveller children across the Highlands in the delivery of education services**, in line with good practice as nationally agreed.
5. **To build capacity within Gypsy/Traveller communities** to challenge stigma and discrimination from whatever source.

1.1.2 These objectives were disaggregated into a Work Plan and approved by the Partners, which provided the context and direction of the Initiative and its staff. The Work Plan became part of the joint Highland Council/NHS Children's Plan - 'For Highland's Children'. The guiding principle underpinning the work of the staff team was - '**nothing about us without us**' - meaning that Gypsy/Travellers were pivotal in the planning and delivery of the Initiative's work.

The *modus operandi* was to establish contact with Gypsy/Travellers throughout Highland by employing two Outreach Workers on short-term contracts. The Outreach Workers were given a very general remit to respond to the requests of Gypsy/Travellers for support, advice, advocacy, etc. and to keep Reflective Dairies of the work they were doing. The Outreach Workers' experiences differed markedly in both geographical range and the nature of the work in which they became involved. The themes which emerged from the Reflective Diaries (see para. 2.2.1.3) influenced and supported the Policy and Practice development work undertaken by the Development Officer. The Initiative was proactive in its work with statutory and

other agencies in Highland to raise awareness of issues of concern to Gypsy/Travellers, particularly perceived discrimination and inequality of access to services.

1.2 CONTEXT

1.2.1 Gypsy/Travellers in Scotland

1.2.1.1. Trevor Phillips, Chair of the Commission for Racial Equality, said recently that -

‘... Gypsies and Travellers face disadvantage and discrimination in almost all walks of life – including in key public service areas such as accommodation provision and planning, education, health, employment and criminal justice.’

[Press release at the launch of consultation on the Campaign for Racial Equality’s UK Gypsy/Traveller Strategy in October 2003]

1.2.1.2. This assertion is supported by the experience of the Health & Wellbeing Initiative and all other organisations working with the Gypsy/Traveller community in Scotland. Gypsy/Travellers in Scotland face discrimination on a daily basis, some of it direct - being called a ‘dirty tink’; some of it indirect - for example, as a result of services being designed around an individual’s ‘permanent address’.

1.2.1.3. There is no generally accepted figure for the number of Gypsy/Travellers in Scotland. The Scottish Executive carries out a Twice Yearly Count of Gypsy/Traveller caravans on Local Authority sites, private sites and roadside camps, which suggests a Scottish population of around 3,000, but this figure excludes housed Gypsy/Travellers. The Community itself estimates that there are between 15,000 and 20,000 people who would identify themselves as Scottish Gypsy/Travellers.

1.2.1.4. There is considerable mobility in the Scottish Gypsy/Traveller population, much of it seasonal for business/work or meeting family or relations: the summer ‘travelling’ population also includes Gypsy/Travellers from Ireland, England & Wales and Europe.

1.2.1.5. The health of the Gypsy/Traveller community in Scotland has been a concern for many years, but for a number of reasons, including the short-life nature of health improvement and/or intervention projects for Gypsy/Travellers, little real progress has been made in either formally quantifying or effectively tackling the issues. Such evidence as there is from Scottish projects, highlights -

- poor levels of general health, particularly lung and bronchial disease, heart problems and mental health

- low levels of GP registration and substitute use of Accident & Emergency services

- lack of health screening, resulting in late presentation of disease and consequent poor prognosis.

All these factors result in substantially reduced life expectancy [see also Dr. I McNicol, evidence to SPEOC].

1.2.1.6. A study, published in October 2004 - near the end of the Initiative’s work, of the Health Status of Gypsy/Travellers in England by Sheffield University for the Department of Health, reported that -

“Using standardised measures (EQ5D, HADS anxiety and depression) as indicators of health, Gypsy Travellers have poorer health than that of their age sex matched comparators. Self reported chest pain, respiratory problems, and arthritis were also more prevalent in the Traveller group. For Gypsy/Travellers, living in a house is associated with long term illness, poorer health state and anxiety. Those who rarely travel have the poorest health.”

and -

“From these results, and from comparison with UK normative data, it is clear that the scale of health inequality between the study population and the UK general population is large, with reported health problems between twice and five times more prevalent.”

[Parry, G., Van Cleemput, P., et al, 2004]

The major health inequalities suffered by the population of English Gypsy/Travellers are very likely to be mirrored in the Scottish Gypsy/Traveller community, given their similar life experience and living conditions. In June 2004, the National Resource Centre for Ethnic Minority Health (NRCEMH) instituted a community-based assessment of the health needs of Gypsy/Travellers in Scotland which is due to report in 2006.

1.2.2 Gypsy/Travellers in Highland

1.2.2.2 It is not possible to give a definitive figure for the number of Gypsy/Travellers living in Highland at any particular time (see para 1.2.1.3 above). In terms of ‘nomadic’ Gypsy/Travellers, recorded by the Scottish Executive Twice yearly Count, the average over the last 8 counts is around 120 people, but as noted earlier, this figure does not include Gypsy/Travellers living in houses in Highland, who may travel for part of the year. In terms of housed Gypsy/Travellers, Jack (1999) notes that in the post-war years -

‘.....many of the travelling people in Highland have ‘settled’ into public housing as part of a policy of many of the previous County Councils and Burghs throughout Highland who had housing responsibility. However, whilst travellers were settled into housing, their culture often remains and they continue to have close ties and links, not only with the settled community throughout Highland, and indeed Scotland, but also with the travelling community. As one commentator explained ‘you can take the traveller off the road, but you can’t take the road out of the traveller’ [Para 4.1, Jack, M. L., 1999]

1.2.2.3 It was not part of the Initiative’s remit to quantify the number of Gypsy/Travellers in Highland, but contact with the community over the three years confirmed that Gypsy/Travellers face discrimination wherever they live.

1.2.2.4 There are 4 official Gypsy/Traveller (‘Travelling Peoples’) sites provided by the Highland Council:

Longman, Inverness - 20 pitches

Aonachan, Spean Bridge - 15 pitches

Kentallan - 12 pitches

Newtonmore (April-September only) - 7 pitches

Occupancy of these sites varied considerably during the life of the Initiative.

1.2.2.5 Many Gypsy/Travellers in Highland choose to use ‘Roadside Camps’ i.e. to park their caravans on land not officially designated as a Gypsy/Traveller site (an ‘Unauthorised Camp’ in Local Authority and Scottish Executive parlance), at various times of the year. These Roadside Camps often have a long history of use by Gypsy/Travellers and they are set up for a variety of reasons -

to provide access to economic activity away from a home base

for socialising with, or providing support for, other Gypsy/Travellers

as a resting place *en-route* to other parts of the country

as a place to stay, having been ‘moved on’ from another location.

1.2.2.6 However, in common with Gypsy/Travellers throughout the UK, Highland Gypsy/Travellers now face increasing difficulty in finding suitable places for Roadside Camps: land ownership is better defined and owners are less willing to allow Camps to be established, or to remain for even a short time. In some cases, this has led to

conflict with the settled community and some Gypsy/Travellers see this problem of exercising the 'traditional right to roam', as contributing to the gradual extinction of their culture. The Highland Council, in consultation with Gypsy/Travellers, developed and implemented a Procedure on Managing Unauthorised Camping in Highland (on Highland Council-owned land) during the life of the Initiative. The Scottish Executive issued Guidance for Local Authorities on Managing Unauthorised Camping in December 2004.

1.2.2.7 Highland Gypsy/Travellers are affected by many of the factors that make the Highland area unique in Scotland -

- the geographical size of the area and consequent difficulty/cost of accessing services

- the often harsh climate

- the limited economic opportunities, especially in rural areas.

These negative factors are worsened by the socio-economic marginalisation of Gypsy/Travellers, exacerbated by the discrimination they encounter.

2.0 OBJECTIVE 1 -

'To improve access to services & support and to promote health, wellbeing and social inclusion amongst Gypsy/Traveller Families, whether on the road, on Gypsy/Traveller's sites, or housed.'

2.1 CONTEXT

2.1.1 As noted above (Para 1.1.1), The Health & Wellbeing Initiative was part of the response of NHS Highland, Highland Council and the voluntary sector to evidence of poor access to services and health inequalities experienced by Gypsy/Travellers in Highland.

The World Health Organisation definition of Health Inequalities is-

"differences in health status or the distribution of health determinants between different population groups..." .

NHS Highland's Director of Public Health noted in his 2002/03 Annual Report that -

"Scotland has the poorest health in the United Kingdom and our life expectancy (although improving) lags behind comparable European Countries. Within Scotland.....the gap between the most and least affluent groups has widened. Inequalities exist between individuals, groups, social classes, race gender and geographical locations." [NHS Highland (2003)]

The Annual Report highlights the complex interplay of socio-economic factors which cause health inequalities, for example income, employment, education, housing and environmental factors, indicating that a broad-based approach is required of all public agencies in tackling these inequalities. Paras 1.2.1.5 and 1.2.1.6 noted the major health inequalities suffered by Gypsy/Travellers in Scotland and England: Highland Gypsy/Travellers experience similar disadvantage, exacerbated by geography and climate.

In June 2001, the Scottish Parliament's Equal Opportunities Committee's (SPEOC) first inquiry, 'Gypsy/Travellers and Public Sector Policies', confirmed the problems encountered by Gypsy/Travellers in accessing services and made 37 recommendations for action. (see Appendix 11).

2.1.2. Evidence from other projects working with Gypsy/Travellers also suggested that take-up of State Benefits was less than for similarly disadvantaged communities in the settled population. Low levels of literacy, complexity of process and a system based on permanent addresses, had all been cited as contributory factors.

2.2 ACTION

2.2.1 Initiative Outreach Workers

2.2.1.1. To gain a better understanding of these problems in Highland, the Initiative's Outreach Workers initiated direct contact with Gypsy/Travellers living on official sites, in Roadside Camps and a small number living in houses. The Outreach Workers also networked with Highland Council and other staff who were already in contact with Gypsy/Travellers.

The Outreach Workers were given a broad remit to -

support Gypsy/Travellers to claim Benefits, access health services, explore housing options and liaise with other Agencies, advocating on their behalf where necessary.

build social capacity and support Gypsy/Travellers to challenge stigma and discrimination.

encourage Gypsy/Travellers to be involved in existing Gypsy/Traveller forums.

provide financial support to Gypsy/Travellers from Highland to attend national events on Gypsy/Traveller issues - e.g. health forums, UK Seminars.

enable Gypsy/Travellers to develop presentation skills for the 'Working with Gypsy/Travellers' seminars.

work in partnership with Housing Services and with Gypsy/Travellers at Longman, Inverness to identify the latter's priorities for the site.

Record and reflect on their experiences in Reflective Diaries.

2.2.1.2. This remit enabled them to quickly become involved in direct problem solving for Gypsy/Travellers, which then provided an opportunity for discussion of broader, more complex, or more personal issues. Para 1.1.2 noted the difference in the experience of the two Outreach Workers - Sara Sims, Outreach Worker West, spent the majority of her time working with Gypsy/Travellers on Roadside Camps, while John Duff, Outreach Worker East, worked on the Longman 'Travelling Peoples' site and with a few housed Gypsy/Travellers.

2.2.1.3. The principal theme that emerges from Outreach Workers' Reflective Diaries is the requirement for a **relationship of trust** to be established and maintained with the Gypsy/Traveller 'client' by the outreach/liaison person, in order to effect change of any sort. While the need for this relationship of trust is not unique to Gypsy/Travellers, it has to be a priority with this community because of the legacy of mistrust and discrimination which has characterised relationships historically.

Building the relationship of trust **requires time**, both in terms of the time taken to build up the relationship, but also time (service) provided flexibly and in response to expressed needs. This can be a real challenge to service providers whose interaction time may be limited e.g. an 8 minute GP consultation, by appointment.

Once established, the relationship of trust can be used to **create bridges** or connections to services and enable two-way engagement with service providers.

Other themes include -

Recognition by some Gypsy/Travellers of their socio-economic disadvantage and acknowledgement that their wish to protect family and cultural values sometimes makes them reluctant to address this issue.

The disadvantage faced by Gypsy/Travellers often arises from institutional racism, to which Gypsy/Travellers often respond with stoicism or resignation, rather than challenge.

The need for greatly improved inter-agency communication and working, at a Highland level and nationally.

Paucity and 'inappropriateness' of information about basic services, e.g. only available in written form, often in bureaucratic language/jargon.

The wish of many Gypsy/Travellers to choose their own accommodation to suit their situation at particular times in their lives, i.e. living in a house when children are of school age, or when age/infirmity require it, or a caravan with the freedom to travel.

Poor State Benefit take-up, particularly of Disability benefits.

[Using the standard voluntary sector multiplier of '*weekly award achieved x 12 months, plus one-off grants/loans*', the Initiative levered in approximately £150,000 of State Benefits for Gypsy/Traveller clients, mainly during the 15 month period of the Outreach Worker's contracts.]

The 'improved social capacity of the Gypsy/Traveller community' is more dependent on change within society, than change within the Gypsy/Traveller community.

2.2.1.4. It is important to record the impact of inter-communal disputes at the Longman site in late 2003. In October 2003, the site was fully occupied (20 pitches), but when the disputes flared into violence, Health & Safety Policies of Highland agencies required the temporary withdrawal of staff and services from the Longman site. The majority of residents, including many who had lived there for some years, left the site in November and many did not return. Contacts and networks that had been established over a long period were disrupted and different support issues became a factor for families who had been forced into new and unfamiliar situations. In January 2005, the site was still less than half full.

2.2.2 Health Visitor at Longman site

2.2.2.1. With support from the Inverness LHCC Public Health Practitioner, the Initiative sought funding for the provision of a Health Visitor service to the Longman site. Resources were made available from January to July 2003 for a Health Visitor and Community Specialist Practitioner service, to Gypsy/Travellers resident on the Longman site and a Reflective Account was completed in June 2004. [Watson, E, (2004)].

2.2.2.2. The Account confirmed conclusions reported by Janet Williams [Williams, J. 2002] on her experience of providing a Health Visitor service on the same site from January to December 2001 and identified service deficiencies. The recommendations of the Reflective Account are detailed in Appendix 2 of this Report. Health Visitor services are still provided at the Longman site for 4 hours per week, under a temporary professional development arrangement, pending a decision on funding for a permanent service.

2.2.3 'Equally Healthy' Lochaber

2.2.3.1. The Health & Wellbeing Initiative worked in partnership with Gypsy/Travellers, Food for Thought Lochaber and Lochaber Health for All, to develop and fund Health Equalities sessions specifically targeted at adult Gypsy/Travellers in Lochaber. Lochaber Routes (see Appendix 9) also helped by enabling housed Gypsy/Travellers to access to these 'Equally Healthy' sessions. Project outputs were anticipated to include -

- a health map of those attending
- improved understanding of the issue of Health Equality and what this means for Gypsy/Travellers in Scotland
- improved understanding of healthy eating and its role in general health
- improved capacity in the voluntary and statutory sector to deliver similar programmes
- project materials that could be used elsewhere.

The Project aimed to run 4 sessions in May 2004, entitled

- Healthy Self/Healthy Community
- Feed a Cold, Starve a Fever?
- Equally Healthy?
- Community Choices for Health.

Attendance at early Sessions was limited, so following further planning with Gypsy/Travellers, the format was modified and run successfully in autumn 2004.

Key factors in the success of later Equally Healthy sessions were:

- Making family enjoyment the focus of the day, with opportunities for educational fun
- Starting sessions from late morning onwards and including lunch
- Using one-to-one rather than group exercises

Securing the support of a range of Gypsy/Traveller families about dates, venues and times.

The Equally Healthy approach now forms the community engagement model for the Scottish Gypsy/Traveller Health Needs Assessment being undertaken by the NRCEMH (see also para 1.2.1.6.)

2.2.4 Give me Five' project

2.2.4.1. In early 2003, the Initiative match-funded an award of £1200 from the Primary Care Development Fund for a project called 'Give Me Five'. This Project provided fresh fruit and vegetables free to residents of the Longman site and, in partnership with the Highland Council Education Service and the Health Visitor, promoted healthy eating. Fruit and vegetable deliveries were made from September to December 2003 and anecdotal evidence suggests that the project achieved its aim of raising awareness of the importance of Fruit and Vegetables in a healthy diet. The exodus of Gypsy/Travellers from the Longman site in November 2003 prevented both the implementation of the planned second stage of the project - to improve access to fruit & vegetables by developing a sustainable food co-operative - and the monitoring of dietary change. However, Healthy Eating continues to be part of health education messages delivered on site by the Education and Health staff.

2.2.5 NRCEMH - Patient Record of Personal Health and Health Needs Assessment

2.2.5.1. At the request of the National Resource Centre for Ethnic Minority Health (NRCEMH, part of Health Scotland), the Initiative Development Officer was seconded for 2 days a month from June 2003, to lead the development of a Patient Record of Personal Health (PRPH) for Gypsy/Travellers in Scotland and to assist with the process of Health Needs Assessment for this community. These pieces of work comprised the NRCEMH response to the SPEOC Recommendations (see para 2.1.1) and aimed to facilitate Gypsy/Traveller access to health services and improve knowledge of the health needs of Gypsy/Travellers to enable effective targeting of resources.

2.2.5.2. After a complex process of community involvement, Gypsy/Travellers finally approved the PRPH in June 2004 and it will be distributed throughout Scotland in Spring 2005. It is anticipated that the PRPH will be an important means of addressing the health inequalities suffered by Gypsy/Travellers. The Development Officer also line-managed the Health Needs Assessment Link-worker post from July 2004 and oversaw the development of the community-based 'Equally Healthy' approach to health needs assessment.

Learning Points for Objective 1 - *To improve access to services & support and to promote health, wellbeing and social inclusion amongst Gypsy/Traveller Families, whether on the road, on Gypsy/Traveller's sites, or housed.*

The Initiative took a holistic view of Health & Wellbeing and social inclusion and responded to the broad range of issues raised by Gypsy/Travellers. The experience of the Outreach Workers was that once they had established that they were 'trustworthy', they were asked to try to resolve long-standing Benefits, accommodation, or health problems. Their success in doing this indicates two things –

that advocacy and direct service provision to Gypsy/Travellers in the past has been inadequate and

that services are not easily accessed by Gypsy/Travellers.

The latter problem exacerbated by low levels of literacy and a lack of confidence based on a history of discrimination.

While it was never the aim of the Initiative to become a long term provider of services to Gypsy/Travellers in Highland, the availability of the Initiative's staff to tackle problems raised this expectation, particularly when close professional relationships had been formed with individuals or families. Disengagement from client work towards the end of their contracts was problematic for Initiative staff, particularly since in many cases it had not been possible to create or maintain effective bridges to mainstream services, meaning that for example, unresolved benefit claims had to be abandoned or that health improvement work was left incomplete.

After the Outreach Worker's contracts had ended, Gypsy/Travellers continued to seek support from the Development Officer, expressing the view that "*once again, just when a service is being provided and doing an excellent job, it comes to an end*": this view was repeated many times over the last months of the Initiative – "*What are we going to do when you're gone?*". The conclusion to be drawn from this is that it is difficult, if not impossible, to have short-term, effective engagement with a client group, particularly when a needs-led service is provided, without raising expectations which cannot be fulfilled if the project is time-limited. While this dilemma is not unique to Gypsy/Traveller projects, Gypsy/Travellers' experience of support and advocacy is characterised by short-term projects, confirming their view that the settled community has no real, long term interest in Gypsy/Travellers.

The Initiative was less successful than it aimed to be in working with Gypsy/Travellers living in houses – the 'invisible majority' of Gypsy/Travellers in Highland – mainly because of the difficulty of identifying them. Those that the Initiative did contact, were referred by family members already supported by the Outreach Workers. It is likely that given more time, this network of referrals could have been extended: this has been the experience of Lochaber Routes in Fort William, but it remains an area for more work, particularly given the poor health of Gypsy/Travellers living in houses noted by Sheffield University study (para 1.2.1.6).

The 3 year timescale of the Initiative coincided with very significant re-structuring of NHS Highland and health service provision which was still ongoing in 2005. This context of major change of personnel and responsibilities, coupled with the Initiative's limited life, made it challenging to identify individuals and services to target for change – this challenge was only met in a limited way and the recommendations of this Report set out future changes required.

3.0 OBJECTIVE 2 -

'To facilitate the development of policy and practice within the statutory sector services (primarily, but not restricted to Health, Housing, Education and Social Work services) in relation to the provision of accessible, appropriate and acceptable services for Gypsy/Traveller individuals and families.'

3.1 CONTEXT

3.1.1. The 2001 SPEOC Inquiry into 'Gypsy/Travellers and Public Sector Policies' confirmed the unequal and, in some cases discriminatory nature of service provision for Gypsy/Travellers. This discrimination arose principally from the design and delivery of services, policies and procedures for a population with a permanent address.

3.1.2. The Race Relations (Amendment) Act 2000 (RRAA), required Public Authorities to prepare Race Equality Schemes by November 2002, detailing proposed action to deliver services which are culturally appropriate for minority ethnic communities. For the purposes of the application of legislation in Scotland, the Scottish Executive has defined Scottish Gypsy/Travellers as a minority ethnic community, a position adopted by other Scottish public bodies: this status has yet to be confirmed by a Court case (see also Appendix 8, Policy & Legal).

3.1.3 Fair for All [Scottish Executive, 2000] focused on ensuring that people from black and minority ethnic communities have access to appropriate and adequate health services. In 2003, the Fair for All stock-take [fair enough?, Scottish Executive, 2003] highlighted that whilst there were some areas of good practice, there was a need within the NHS to take effective action to ensure that services were open and accessible to all. (See also 'Beyond Labels' [Kandirikirira, N. and Macaskill, D. 2004]. The study by Sheffield University highlighted the persistent, gross health inequalities suffered by Gypsy/Travellers in England.

3.1.4. Communities Scotland has a Regulatory function in relation to Local Authorities, benchmarking against Performance Standards published in April 2002. The Standard relating to Local Authorities and Gypsy/Travellers states that:-
"We plan and provide or arrange good quality serviced stopping places for Gypsy/Travellers. We let pitches in a way that ensures fair and open access for all. We take Gypsy/Travellers views into account in delivering our services, and we are responsive to their needs."

Communities Scotland's pilot study in 2002 of Local Authority performance across Scotland against this Standard found:-

- some good progress in relation to service provision
- no council performing well across all key assessment areas
- poor strategic planning
- need for better consultation
- poor locations of Gypsy/Traveller sites
- high rents
- Scottish Executive figures not used in planning of services.

[Communities Scotland, 2002]

3.1.5. Within the Highland Council, Housing Services is the lead service for Gypsy/Traveller issues and the Director of Housing Services has retained responsibility for this work. The actions of Highland Council Housing Services have a direct and potentially very significant effect on the health and wellbeing of Gypsy/Travellers, because Housing Services -

provides, maintains, allocates and controls the 4 'Travelling Peoples' sites in Highland (para 1.2.2.4)
leads the operation of the Unauthorised Camping Procedure for the Council
is a provider of rented social housing
provides housing support services (directly or via Lochaber Routes) to Gypsy/Travellers.

3.1.6. Education provision for Gypsy/Travellers in Scotland has until recently, been only through the standard school-based system. School attendance by Gypsy/Travellers has generally been poor, particularly secondary schooling - it has been suggested that less than 20% of Gypsy/Traveller children attend secondary school. Work by the Scottish Traveller Education Programme (STEP), particularly *'Inclusive Educational Approaches for Gypsies and Travellers, within the context of Interrupted Learning'* (2003) recommended the inclusion of Gypsy/Travellers in the Interrupted Learning strategies being developed by local authorities and this process is ongoing.

3.1.7. Social Work services are designed to be universally available and applicable, but focussed on vulnerable and disadvantaged individuals and communities. However, many Gypsy/Travellers believe that Social Workers' main task is child protection and as a result of (now historical) experience of 'the Cruelty Man', contact with Social Work Services is very uncommon and Social Workers are viewed with distrust.

3.2 ACTION

3.2.1 Health Services

3.2.1.1. The Initiative's role in promoting the provision of direct health services to Gypsy/Travellers resident on the Longman site in Inverness, was reported in Para 2.2.2 above. The Initiative also enabled networking of Health Visitors working with Gypsy/Traveller in Highland and linked them with colleagues elsewhere in Scotland to share knowledge and experience.

3.2.1.2. Following discussion with a number of female Gypsy/Travellers about health screening, the Initiative made representations to both the Highland and Scottish Breast Screening Services about breast screening services for Gypsy/Travellers. The two main concerns were:

The need for cultural awareness and sensitivity

The potential for the 'call-up' process (which is based on GP lists) to exclude Gypsy/Travellers and others without a 'permanent address'.

While some progress has been made in raising the awareness of screening service providers of the need for such a culturally competent service and the potential benefit of the Patient Record of Personal Health, more work is needed to ensure Gypsy/Traveller women are properly screened.

3.2.1.3. Poor dental health amongst Gypsy/Travellers has often been noted by health practitioners working with the community. In response to concerns noted by Williams [op cit] and Watson [op cit], discussions were held with NHS Highland Dental Services about the provision of outreach services to the 4 Highland Gypsy/Traveller sites, using the mobile dental van. Regrettably, the existing demand for this service and the resultant need to arrange visits at least 3 months in advance, meant that it was insufficiently flexible to meet the needs of Gypsy/Travellers, particularly during the summer travelling season. As a (less satisfactory) substitute, the Emergency Dental service was publicised on Highland Gypsy/Traveller sites and individual Gypsy/Travellers were supported to use the service. Supplies of toothpaste and

toothbrushes were made available to the Education and Health workers in Highland and dental health messages continue to be promoted by them.

3.2.1.4. The Initiative's involvement in the development of a Patient Record of Personal Health for Gypsy/Travellers was noted above (para. 2.2.5.1). Gypsy/Travellers have often reported problems accessing GP care and thus more frequent use of hospital Accident & Emergency departments, particularly when travelling. This has resulted in late presentation with serious health conditions, resulting in poor prognosis and substantially reduced life expectancy in some cases (see evidence to SPEOC 2001). The aim of the PRPH is to facilitate continuity of health care by improving access to GP services and providing a record of contacts with health professionals. A secondary aim is to support the wish of Gypsy/Travellers to take greater control of their health and promote healthy living by encouraging health screening and other interventions.

3.2.1.5 The Initiative advised and supported individual Gypsy/Travellers as they moved along health care pathways and provided information to hospital staff in response to specific requests. (See Appendix 7 for an example of a Gypsy/Travellers experience of a care pathway).

Through involvement in NHS Highland's Equality & Diversity Group, the Initiative contributed to the development of resources on ethnic diversity being developed for use throughout the service.

3.2.1.6 Following approaches from Argyll & Bute Council, the Initiative's aims and objectives were outlined at a seminar in Dunoon in 2003, with a view to supporting policy development in a neighbouring local authority with a substantial Gypsy/Traveller population, both resident and nomadic: there are close links between Gypsy/Traveller families in Lochaber and Argyll & Bute. The Development Officer subsequently became a member of the Steering Group of the Healthy Together project in Argyll & Bute, which is working with Gypsy/Travellers to improve outcomes from heart disease and cancer.

3.2.1.7 The Initiative sought to influence policy development in the health arena by active involvement in a range of working groups, seminars and consultation events. Critiques and comments were also provided on a number of draft policies and other documents, with a view to ensuring cultural competence relative to Gypsy/Travellers. Examples of this action include-

Membership of NHS Highland Equality & Diversity Group

Steering Group membership of:

- o Healthy Together Project, Argyll & Bute
- o Action on Smoking and Health (ASH) Project with Gypsy/Travellers
- o Men's Health Project, Highland

Contribution to development of NHS Tayside Gypsy/Traveller health assessment project.

Input to

- o NHS Knowledge and Skills Framework Guidance, 6th Draft: May 2004
- o PPF Development in NHS Highland: December 2004

3.2.2 Housing Services

3.2.2.1. Paragraph 3.1.5 above noted the potential impact of Housing Service's actions on the Health & Wellbeing of Gypsy/Travellers. The Initiative -

supported the development of a new 'Tenancy' Agreement for pitches on the 'Travelling Peoples' sites.

assisted with the development and promulgation of the Unauthorised Camping Procedure in 2002.

surveyed the views of Gypsy/Travellers on the Highland Council Unauthorised Camping Procedure and was instrumental in reviewing the Procedure (2003) and contributed to the development of a Help & Advice leaflet about it (2004).

supported individual Gypsy/Travellers to

- o review their accommodation options
- o access housing or pitches
- o obtain or increase Housing Benefit.

The Initiative was also represented on the Lochaber Gypsy/Traveller Forum, Inverness Gypsy/Traveller Forum and the Highland Gypsy/Traveller Partnership Group, which provided opportunities to influence the development of policy and practice.

3.2.2.2. In recognition that the only significance of Local Authority boundaries to Gypsy/Travellers relates to differing standards of service when they are travelling through or living in that area, the Initiative was instrumental in persuading Moray Council to employ an independent Gypsy/Traveller liaison worker to support the process of re-provisioning of the Chanonry Gypsy/Traveller site in Elgin and development of Gypsy/Traveller policy. The Initiative was also a member of the steering Group for the Health Together project in Argyll & Bute, which aims to address health inequalities experienced by Gypsy/Travellers living and travelling through the area.

3.2.3 Education Services

See Objective 4 (Section 5.0) below.

3.2.4 Social Work Services

3.2.4.1. The Initiative Outreach Workers' contact with Gypsy/Travellers included a range of tasks which appeared to fall within the remit of Social Work, including -
personal support with disability issues
child protection

Requests were also made for -

- assistance with state benefits,
- drug and alcohol advice and support
- family mediation
- sourcing emergency accommodation
- domestic abuse

While these latter tasks are not part of Social Work's statutory duties, Social Work involvement in the development of holistic support packages for individuals and families seemed appropriate.

Based on this experience, attempts were made to establish a Social Work presence on site at Longman in Inverness while there was a 'bridge' with the trusted Outreach Worker to enable contact. Staff shortages within Social Work prevented this opportunity being seized, but given the above experience and the socio-economic disadvantage and exclusion of Gypsy/Travellers, this remains an area for urgent development.

3.2.4.2. A joint piece of work between Education and Social Work led by the ILDO and a Children's Service Worker focused on working with a small group of Housed G/T pupils who were displaying challenging behaviour in the school situation. The behaviour was linked to name calling regarding their cultural background and the way in which the children reacted did not meet with the acceptable reaction expected by the settled community and the school community. A package has been developed to be used in schools with G/T children and also other children if appropriate to explore cultural influences and how this impacts on behaviour.

3.2.4.3. The Social Work Criminal Justice team contributed to the cost of the 'Altering Attitudes' course (see para. 6.2.3 below) developed by the Initiative to address the offending behaviour of 3 men convicted of assaulting Gypsy/Travellers in 2003.

The Initiative contributed to consultation on the new Community Reparation Orders in December 2004.

3.2.5 Planning Services

3.2.5.1. During the life of the Initiative, there was considerable press speculation about the possible relocation of the 'Travelling Peoples' site at Longman Inverness to make way for a supermarket. The Initiative liaised with Highland Council's Director of Planning to highlight the concern of the site residents and obtain assurances about consultation and timescales. All decisions about the future of the site are currently awaiting the outcome of the Local Plan Inquiry, but the Highland Council has made a commitment to consult with Gypsy/Travellers about the future of the site if relocation becomes an option. The form of that consultation will be influenced by advice given by the Initiative.

3.2.5.2. The Initiative worked with Planners to include Gypsy/Travellers in the Local plan consultation process for West Ross and for other local plans as they are developed. Agreement was also reached that all Local plans would include reference to provision of suitable locations for Gypsy/Traveller sites.

3.2.6 Crown Office and Procurator Fiscal Service (COPFS)

The COPFS was very supportive of the Initiative's work and the Area Manager attended many of the 'Working with Gypsy/Travellers' seminars to highlight the Service's mission of being inclusive and valuing the diversity of Scotland's society. The Initiative provided a critique of the COPFS Diversity Strategy prior to its publication in 2004.

3.2.7 Trading Standards

Gypsy/Travellers in Inverness expressed concern that their work opportunities were being adversely affected by newspaper articles about 'rogue/travelling traders'. The Initiative discussed this problem with the Director of Trading Standards of Highland Council who originated the press releases. Agreement was secured that the wording of press releases would be amended to avoid creating the impression that the public was being warned not to employ Gypsy/Travellers, or that their work was of poor quality.

3.2.8 Northern Constabulary

3.2.8.1. Throughout the life of the Initiative, Gypsy/Travellers made positive reports about policing in Highland, identifying the Northern Constabulary area as one in which Gypsy/Travellers were treated respectfully. The multi-agency Unauthorised Camping Procedure (2002) meant that the police had less need to undertake their traditional role being the agency responsible for moving Gypsy/Travellers on from their roadside camps. The Police also adopted a pro-active community policing role and provided excellent support to Gypsy/Travellers who were threatened by individuals from the settled community. This undoubtedly helped counteract longstanding antipathy towards the police from some members of the Gypsy/Traveller community.

3.2.8.2. The Initiative had regular and positive contact with officers and staff of Northern Constabulary and the Association of Chief Police Officers Scotland (ACPOS). Some police officers attended the first 2 of the 9 'Working with Gypsy/Travellers' seminars, but attendees and facilitators at later seminars commented on the absence of police. Initiative staff provided links between Police in Highland and Gypsy/Travellers in relation to the provision of police support to Gypsy/Travellers and to unauthorised camping. Discussions were also held with Northern Constabulary concerning complaints about police behaviour and opportunities for community policing.

3.2.8.3. The Initiative also -

Delivered an Awareness seminar for Northern Constabulary, Dingwall June 2004

Facilitated Focus Group session for CRE Independent Review of Policing and Race relations in Scotland: Jan 2005.

Provided comment on/critique of:

- o Northern Constabulary Diversity manual (October 2003)
- o ACPOS Diversity Strategy (April 2004)
- o ACPOS Unauthorised Camping Guidance (autumn 2004).

3.2.9 Scottish Executive

3.2.9.1. There is only a small number of organisations/individuals working directly with/for Gypsy/Travellers in Scotland and thus the Initiative became involved in a range of issues with a national perspective. Based on its experience of the operation of the Highland Unauthorised Camping Procedure, the Initiative provided comments on the national Unauthorised Camping Guidance during the consultation period, prior to publication in 2004.

3.2.9.2. In partnership with Save the Children and others, the Initiative sought to improve the content and presentation of the Twice-yearly Count of Gypsy/Travellers in Scotland, resulting in some positive changes. In 2005, the Initiative led a move to have the Count discontinued because of its poor methodology and on the grounds of possible racial discrimination: at the time of writing, a response is awaited from the Scottish Executive.

3.2.9.3. The Initiative co-ordinated multi-agency meetings in Skye and Ross & Cromarty to discuss the use of Trunk Road Lay-bys by Gypsy/Travellers as Roadside Camps. The legal position was explored and clarified and all parties were informed of the Gypsy/Traveller perspective, particularly their concerns about the decrease in places to stop in Highland and elsewhere in Scotland.

3.2.10 General Register of Scotland (GROS)

3.2.10.1. The 2001 Census and those preceding it, did not identify Gypsy/Travellers as a racial or cultural group and as a result, it was not possible to enumerate Gypsy/Travellers. The CRE Gypsy/Traveller strategy for England & Wales encourages Gypsy/Travellers to record their cultural/ethnic identity on the Census form so that the true size of the community can be determined. It is likely that the CRE Scottish Gypsy/Traveller Strategy will follow this lead when it is published later in 2005.

3.2.10.2. The Initiative has facilitated early discussions between Gypsy/Travellers and GROS about the 2006 Scottish Census Test and the 2011 Scottish Census and appropriate methods of engaging with the Gypsy/Traveller community. While this is a sensitive issue for the community, it is hoped that these discussions will lead to Gypsy/Travellers being enumerated effectively in 2011, which will help answer questions about the number of Gypsy/Travellers in Scotland, negate the necessity of

the Twice Yearly Count and potentially improve the allocation of resources to Gypsy/Travellers.

Learning points for Objective 2: *To facilitate the development of policy and practice within the statutory sector services (primarily, but not restricted to Health, Housing, Education and Social Work services) in relation to the provision of accessible, appropriate and acceptable services for Gypsy/Traveller individuals and families.*

Policy and practice either evolve slowly in the public sector, based on experience gained over many years, or are developed quickly in response to government initiatives. While some extant policies and procedures pre-date the community-involvement/customer focused model of service design and provision, the majority appear to have not moved sufficiently up the community development ladder from 'consultation' towards 'true community involvement, including capacity building'. The time-frame of a short-life initiative militates against effecting swift change in policies and procedures.

Faced with this context and an only slowly developing capacity in the Gypsy/Traveller community to argue for necessary change, the Initiative often found itself needing to act as an advocate for that change, questioning the orthodoxy of policy or procedure – a situation which was not always comfortable for either party in the process. However, it is clear from the daily experience of Gypsy/Travellers that the delivery of culturally competent services (flowing from policies and procedures developed with meaningful community consultation), is still some way off.

The learning points that derive from this experience are the ongoing need for capacity building to empower the Gypsy/Traveller community to 'fight its own corner' and, in the interim - which might be an extended period -, the need for independent advocacy for Gypsy/Travellers. There are now encouraging signs of developments in both these areas on a Scotland-wide basis, in the form of a CRE Scottish Strategy on Gypsy/Travellers and the recent (March 2005) formation of the Scottish Gypsy/Traveller Law Reform Coalition. In Highland, Lochaber Routes long-term development plans identify a wider geographic advocacy role for that organisation, but as yet unidentified financial support is required to achieve this.

4.0 OBJECTIVE 3 -

'To raise awareness within the service-providing agencies of the discrimination and stigma faced by Gypsy/Travellers and of the legislation and social policy framework within Scotland.'

4.1 CONTEXT

Official acknowledgement of the inequality of access to services and discrimination suffered by Gypsy/Travellers has been noted in earlier paragraphs. One of the challenges for the Initiative was to highlight the current reality of these issues for Gypsy/Travellers in Highland and counter any suggestion that the relatively small population of Gypsy/Travellers in the area meant that problems of discrimination were equally small.

4.2 ACTION

4.2.1 General

The Development Officer was proactive in promoting the interests of the Gypsy/Traveller community in a number of forums in Highland, always with the intention of enabling this role to be undertaken by Gypsy/Travellers. While the forums would welcome Gypsy/Traveller membership, more support was needed for individual Gypsy/Travellers to fulfil these roles, than could be supplied by the Initiative, particularly after the Outreach Worker posts ceased.

The Initiative was a member of the Highland Alliance for Racial Equality and contributed to the development of the Racial Incident Monitoring process, ensuring that Gypsy/Travellers were included as a community likely to suffer racially motivated verbal or physical assault.

The Initiative contributed to the development of the Highland Council Equalities Strategy, with particular reference to Gypsy/Travellers.

The Initiative was also a member of NHS Highland's Diversity & Equality Group, a useful forum for highlighting the importance of culturally appropriate health services for Gypsy/Travellers.

4.2.2 'Working with Gypsy/Travellers' seminars

Although the Seminars organised by the Initiative were generally very well attended and feedback was consistently excellent, attendance by Senior officers from all agencies was poor, leading to concern that although individuals working 'at the coal face' may be more aware of the need to provide culturally appropriate services, managers and budget holders will be less aware. However, there were indications during the later stages of the Initiative of greater awareness and willingness to provide services which are culturally appropriate.

'[I will] involve Gypsy/Travellers in policy/practice when making decisions about their way of life.'

'[I will] take Gypsy/Travellers views into account for future policy making'.

'Now I have more insight into Gypsy/Travellers lives and problems surrounding this. I hope that I will deal confidently with needs and approaches by having better understanding of culture'.

(Seminar evaluations – see appendix 4)

See also para 6.2.2. below.

4.2.3 Briefings - Councillors, Officers (NHS, Highland Council, HIE/LECs), Media

4.2.3.1. In April 2004 the Initiative partnered Gypsy/Travellers and Lochaber Routes to brief Highland Council elected Members on Gypsy/Traveller culture and lifestyle. Highland Council Housing Services used the opportunity to improve the Councillor's understanding of the Unauthorised Camping Procedure.

4.2.3.2. Individual Councillors and officers of the Highland Council, NHS Highland, HIE and the LECs, have been briefed on Gypsy/Traveller issues in response to particular circumstances or expressions of interest.

4.2.3.4. The Interrupted Learning Development Officer and the Museum service worked in partnership with a small group of Gypsy/Traveller children to produce an exhibition which was open to the general public. The display, portrayed through the eyes of the children, aimed to highlight the lifestyle of Gypsy/Traveller children and adults both in the past and the present and was successful in attracting a great deal of interest from local and national visitors and also the press and other professional bodies throughout Scotland. The initial piece of work is to be the starting point for a number of additional projects which will link to and support the Highland Year of Culture in 2007.

ESTÀ MOLT BÉ! (it's very good!)

So good to see young people being proud of their background.

The exhibition is brilliant + I've learned lots from it. I'd love it if you'd help us do a project about travelling people at the National Library of Scotland.

Very interesting: I wish I were a traveller! Well done for all the hard work. From a Granny.

I liked your exhibition very much. I didn't know the history of Travellers in Scotland and I learned a lot Thank you, Rosie (from Glasgow).

Continue to be:-

- proud
- different
- passionate

Life is a wonderful thing! Thank you for the display.

Excellent - Remain proud of your status.

Great work! You should keep this exhibition for a long time so everyone living in and passing through Inverness has a chance to learn about Travellers.

Well done – hope to see many more exhibitions like this – dispel the myths!

(comments from Visitor's Book)

Learning points for Objective 3: *To raise awareness within the service-providing agencies of the discrimination and stigma faced by Gypsy/Travellers and of the legislation and social policy framework within Scotland.*

The Initiative made substantive progress towards achieving this objective: a wide range of people from service-providing agencies heard first hand from Gypsy/Travellers about their way of life and the impact of inappropriate service provision, or lack of services, on their lives. Over 95% of those attending the seminars said they had a much clearer understanding of the issues and many of them identified changes they intended to make in their practice. This success needs to be built on and the skills of Gypsy/Travellers who facilitated and latterly managed the seminars, need to be acknowledged and further developed.

However, the absence of strategic/corporate decision-makers from the seminars was notable and although some Highland Councillors were briefed on Gypsy/Traveller issues, there is a need for budget holders and strategic planners to be much more aware of the discrimination suffered by Gypsy/Travellers and their health inequalities and socio-economic marginalisation.

5.0. OBJECTIVE 4 -

'To provide equal opportunities for Gypsy/Traveller children across the Highlands in the delivery of education services, in line with good practice as nationally agreed.'

5.1 CONTEXT

5.1.1 Para 3.1.6 noted the generally poor school attendance by Gypsy/Travellers and a report by the Scottish Traveller Education Programme (STEP) highlighted complex patterns of enrolment and attendance of Gypsy/Traveller school-aged pupils, particularly those based on sites and who attend local authority schools and low levels of testing and attainment of Gypsy/Traveller pupils in local and national tests in comparison to the attainment levels of school peers. The STEP Report also noted that

'feelings ranging from anxiety to fear appear frequently to govern relationships between 'settled' providers and 'mobile' users of educational services for Gypsy/Travellers and to shape Gypsy/Travellers' decisions about whether or not to self-identify as Gypsies or Travellers;

there is an overall lack of official knowledge and understanding of Gypsy/Travellers and the cultural and social realities of their day-to-day lives; educational provision across local authorities and schools is patchy and varies from good to very poor, with little or no developed connections in or between schools for providing a relevant and continuous school education responsive to Gypsy/Traveller school-aged children and young peoples' particular learning needs.'

[Padfield, P. and Jordan, E., 2004]

5.1.2 While this Report post-dates the first two years of the work of the Initiative, it provides research confirmation of the issues which had prompted the creation of a 'Gypsy/Traveller teacher' post as part of the successful partnership bid to the Scottish Executive Innovation Fund (para.1.1.1). This post of Development Officer/teaching post was established, initially for one year, subsequently increased to 23 months, commencing in December 2001. The post allowed for the review and subsequent development of education provision to support the learning of Gypsy/Traveller children within the 3 to 18 age group across Highland. At the end of the 23 months secondment, the post was mainstreamed as Interrupted Learning Development Officer (IDLO) and is now funded within the Highland Council Education, Culture and Sport budget. The post now includes other children who experience interrupted learning, but retains a primary focus on Gypsy/Traveller children and families. The work sits within the Social Inclusion agenda and seeks to promote the accessibility of educational experience for Gypsy/Traveller children in a variety of settings. There was close partnership working between the IDLO and the Initiative team which was of considerable mutual benefit. Outreach work was crucial to engaging families and making progress, with the underlying aim of empowering individual families to confidently access education services and engage with staff in education settings.

5.1.3 Recommendations 15-25 of the Scottish Parliament's Equal Opportunities Enquiry relate specifically to education (see also para. 2.1.1. and Appendix 11): the development of this education post was part of Highland Council's response to those recommendations.

5.1.4 The Additional Support Needs for Learning Act 2004 includes and recognises children from a Gypsy/Traveller background, noting that they may have require additional support needs due to interrupted learning.

5.2 ACTION

Under the heading of Inclusion and Equality a summary of action is detailed below -

Developing relationships and supporting families to access educational opportunities via mainstream or alternative provision

- Pre-school and nursery
- Primary and secondary
- Adult literacy and community learning
- Further education
- On-line learning
- Enabling Gypsy/Traveller families to engage with the service without support

Joint working with other agencies and authorities

- Consultation and supporting joint work
- Home/school packs to support health and education
- Development of guidance and training for Adult Literacy.
- Development of culturally sensitive health education programme of national resource
- Production of Traveller exhibition - staff and pupil awareness raising
- Developments at local and national level - Secondment to STEP and membership of the TENET Executive Group

Developing 'tracking' and transition documents

- Nursery transition pilot
- Curricular hand held record
- Cross-authority 'tracking' developments

Awareness raising and capacity building

- Interrupted Learners guidance (yet to be issued)
- Development of pupil awareness raising programme, within existing curriculum
- Capacity building with young Gypsy/Travellers and families and development of resources.

Learning points for Objective 4: *To provide equal opportunities for Gypsy/Traveller children across the Highlands in the delivery of education services, in line with good practice as nationally agreed.*

The challenges presented by infrequent or interrupted attendance at school by Gypsy/Traveller children in Highland were met with a broad range of actions, derived from direct responses to issues and situations presented by individual Gypsy/Traveller children and their families. Partnership working with other agencies in Highland, e.g. Health and a responsive, proactive approach proved very successful in improving primary school attendance and attainment. Systems developed, such as the Portable Education Record were also shared with other authorities in Scotland through national groups like STEP and this development work will continue.

Secondary school attendance by Gypsy/Traveller children remains poor and this is an area requiring more work, particularly providing support for those children now attending primary school to move on through the education system. More work is needed to develop alternative education opportunities for Gypsy/Traveller children currently aged 11-16 who are not attending school.

While the ILDO undertook some work with Gypsy/Travellers living in houses, this too requires ongoing resourcing.

In parallel with all this work to improve educational attainment, is the need to raise awareness of Gypsy/Traveller culture by the Education Service.

6.0 OBJECTIVE 5 -

'To build capacity within Gypsy/Traveller communities to challenge stigma and discrimination from whatever source.'

6.1 CONTEXT

This objective stemmed from a recognition that while public authorities have a duty under the Race Relations Amendment Act 2000 to -
eliminate unlawful racial discrimination, and
to promote equality of opportunity and good relations between persons of different racial groups.

(See Appendix 8 for legislative and policy background).

One of the most effective challenges to stigma and discrimination, is challenge by the affected individual or community, as evidenced by the evaluation of the Seminars noted below. However, among the effects of the high level of historic and current discrimination suffered by Gypsy/Travellers is that they feel reluctant and poorly equipped to challenge it. Poor literacy and numeracy skills often compound this reluctance and very infrequent engagement with decision-makers in public authorities limits learning opportunities.

6.2 ACTION

6.2.1 Outreach Work

The Outreach Workers support for Gypsy/Traveller clients had an underlying purpose of capacity-building with the intention of developing the confidence of individuals so that they could address issues themselves in the medium to long term. By building trust with Gypsy/Travellers, the Outreach Workers sought to extend that trust to the employing organisations with the aim of enabling more confident future interaction and more effective service provision. With this initial support, many Gypsy/Travellers have said they are more comfortable dealing with 'the authorities', although lower levels of literacy than the mainstream population, compounded by a nomadic way of life and inflexibility of services remain barriers to equal service access for many Gypsy/Travellers. Appendix 7 details one Gypsy/Traveller's experience of health services.

6.2.2 'Working with Gypsy/Travellers' seminars

6.2.2.1 The Initiative used its resources to enable Gypsy/Travellers, supported by Save the Children, to further develop their 'Working with Gypsy/Travellers' awareness-raising seminars. In particular, the Initiative supported training for Gypsy/Travellers to facilitate these events. One of the key results has been greatly increased confidence on the part of the Gypsy/Traveller facilitators from all over Scotland to develop and deliver such seminars.

6.2.2.2 The Initiative hosted and funded 9 whole-day seminars in Fort William, Broadford, Inverness (3), Dornoch, Forres (with Moray Council), Alness and Halkirk and one half day seminar in Kingussie. These were attended by over 200 people from a range of agencies and service providers in Highland (and Moray). In April 2004, Highland Council Elected Members were briefed using Seminar materials. The Seminars evaluated very positively. [See Appendix 5 Save the Children Evaluation Report].

6.2.3 'Altering Attitudes' course

6.2.3.1 At the request of Gypsy/Travellers who had been attacked at their Roadside Camp in Lochcarron in 2003, the Initiative resourced the development and delivery of a two-day 'Altering Attitudes' Course by Save the Children, the Scottish Human Services Trust and two Gypsy/Travellers. This course, for the 3 men found guilty of Breach of the Peace against the Gypsy/Travellers in Lochcarron, followed the principles of Restorative Justice by focusing on the wrong-doing as an opportunity for empowerment.

6.2.3.2 The Course was held on 3rd and 4th June 2004 and the 3 men - participated fully and positively in the two days. demonstrated enhanced understanding of

- o Racism, both in terms of legal definition and everyday impact, and
- o the life and culture of Gypsy/Travellers in Scotland.

were able to review their offences in the light of this enhanced understanding and appreciate the negative impact of their actions demonstrated a desire to apply what they had learned from the seminar to their future behaviour.

6.2.3.3 A report on the Course was submitted to the Sheriff and non-custodial sentences were imposed, in recognition of the positive outcomes of the Course on the participants.

6.2.4 'Time Travellers' project

In 2005, the Initiative contributed to the Save the Children 'Time Travellers' project (majority funded by the Heritage Lottery Fund), which will enable young Gypsy/Travellers, including several from Highland, to build on the 'comelookatus' website, started in 2003. The Website focuses on the culture and heritage of Scottish Gypsy/Travellers, particularly those living in rural areas. (see also Appendix 10). Initiative funding will be spent on IT equipment and software, skills workshops, residential events and project running costs, enabling the young people to communicate with each other and build their skills.

6.2.5 Museum project

In late 2004, the Interrupted Learning Development Officer and the Museum Education Outreach Officer worked with young Highland Gypsy/Travellers to create an exhibition about their lives of in Highland today and in the past. The exhibition was staged at the Inverness Museum & Art Gallery in Spring 2005 and was very well received by the public and media. Work will continue with the young Gypsy/Travellers to develop resources for touring to Highland schools.

6.2.6 'Young Roots' project

In 2004, the Initiative partnered Save the Children in a bid for funds to develop the 'Young Roots' project. Young Gypsy/Travellers will look at further developing resources to raise awareness of their culture and lifestyle to be used with schools, youth groups and other interested parties. It is anticipated that as a result of the success of the museum exhibition noted in para 6.2.5 above, one of the focuses for developing these resources will be to pilot a 'programme' with the schools who took part in the exhibition workshops. This initial pilot will inform and be part of the racial equality developments in schools from late 2005. (see also Appendix 1)

Learning points for Objective 5: *To build capacity within Gypsy/Traveller communities to challenge stigma and discrimination from whatever source.*

Capacity building with individuals and communities is not a quick or easy process: it requires time and dedication from both parties in the process. While the Initiative assisted many people in the Gypsy/Traveller community to understand the complex processes involved in claiming benefits, improving their accommodation situations and asserting their rights, the long history of distrust in, and lack of confidence in dealing with, 'the authorities' indicates that capacity building work requires long term resourcing.

Given that Gypsy/Travellers often live in different locations for periods of time, such capacity building needs to be carefully co-ordinated to be effective: Save the Children has demonstrated working methods in its projects with young Gypsy/Travellers from all over Scotland and the opportunities presented by IT should also be grasped.

7.0 RECOMMENDATIONS

7.1 GENERAL

1. The inequalities in health suffered by Gypsy/Travellers in Highland, coupled with their socio-economic exclusion, demand ongoing resourcing from a range of agencies to ensure the **provision of culturally competent services**. Multi-agency working is an essential component of service design and delivery.

2. In parallel with the development of culturally competent services for Gypsy/Travellers, it is essential that resources are made available for **community capacity building** so that Gypsy/Travellers are empowered and enabled to access the services provided. The experience of the Health & Wellbeing Initiative shows that if support is provided in a culturally aware way, Gypsy/Travellers are keen to engage with agencies and **the foundations already laid should now be developed**. There is a strong argument for an **independent advocacy/support service to build a relationship of trust with Gypsy/Travellers, create a connection to services and enable two-way engagement with service providers**: the voluntary sector may be able to provide such a service, given specific resources.

3. The Initiative's experience, supported by evidence from the Scottish Parliament, Save the Children, Sheffield University and others, indicates that **outreach work should be a major component of service delivery**, to address the reluctance of Gypsy/Travellers to engage with service providers. This outreach work needs to be undertaken by individuals with well developed interpersonal skills, who have experience of interagency working, community development and community planning. **Creative, innovative, flexible and responsive approaches are required** to enable service access by Gypsy/Travellers.

4. The success of the 'Working with Gypsy/Travellers' seminars, particularly the empowerment of Gypsy/Traveller facilitators, should be built on. All public authorities have a duty to - "promote equality of opportunity and good relations between persons of different racial groups" [RRAA 2000]: resourcing and developing these seminars throughout Highland would help meet this duty for Highland's Gypsy/Travellers.

5. Given the Initiative's experience of under-claiming of state benefits by Gypsy/Travellers, there is also a role for an independent money advice service for the community.

6. The Scottish Parliament Equal Opportunities Committee is currently reviewing progress since its original Report of June 2001. Recommendations arising from this review should also inform future resourcing decisions.

7. Action in support of Gypsy/Travellers in Highland should link with and contribute to Scotland and UK wide activity in recognition of the broad nature of the challenge and the lack of relevance of geographical agency boundaries to a nomadic community.

7.2 HEALTH SERVICES

1. The health inequalities suffered by Gypsy/Travellers in Highland demand long-term action to address the very poor health outcomes of this community. This action should flow from, and be informed by, the Gypsy/Traveller community itself through the medium of community planning, to achieve the principle of 'equity of access and equity of outcome for more deprived communities', in line with the recommendations of the CHP Health Improvement Advice Note (SEHD 2005).

2. Existing strategic Health Service representation on the Highland Gypsy/Traveller Partnership Group should be strengthened by the inclusion of operational representation from Community Health Partnerships (CHPs), which should also be represented on the local Gypsy/Traveller Forums (currently Inverness and Lochaber).

3. The CHPs in Highland should take the lead in community planning with Gypsy/Travellers, using the output of Health Needs Assessment currently being undertaken by NRCEMH, the reports by Sheffield University, Watson and Williams and feedback from the use of the PRPH in Highland and Scotland to inform decision making.

4. Services should be delivered through outreach work by individuals who are able to establish a close rapport with the community and provide a broad range of direct health services.

7.3 HIGHLAND COUNCIL

GENERAL

The Gypsy/Traveller Action Plan (Draft at April 2005) provides the context for the Highland Council's resource allocation in the medium term. With its key aim of Consultation and Community Development, the Plan represents a major opportunity for the Council to engage with Highland Gypsy/Travellers to jointly target those issues within the Council's influence, that impact adversely on the Health & Wellbeing of this community. General recommendation 1 above notes the need for multi-agency working and it is recommended that during the first year of its implementation, the Gypsy/Traveller Action Plan is developed into a multi-agency Highland Gypsy/Traveller Strategy.

HOUSING SERVICES

Housing Services, as lead service for Gypsy/Travellers, has developed effective policies and procedures in response to particular management issues, linking with other agencies as necessary. Community Development, in the context of the Gypsy/Traveller Action Plan, provides a real opportunity for innovative, pro-active service development, particularly in terms of accommodation options: this opportunity needs to be seized and resourced. The proposed transfer of Highland Council housing to Housing Associations in Highland offers a route to improvement of management, upgrading and new provision of Gypsy/Traveller sites.

EDUCATION, CULTURE & SPORT SERVICES

General recommendation 3 above highlighted the importance of outreach work to the Gypsy/Traveller community: the role of the Interrupted Learning Development Officer in Highland is critical to the success of interventions to address low levels of literacy and poor school attendance by Gypsy/Travellers. Work at a local and national level in support of these aims must continue over an extended period to effect real change in the current school-age cohort of Gypsy/Travellers.

Detailed recommendations for Education are noted in Appendix 1.

SOCIAL WORK SERVICES

Para 3.2.4 noted the social exclusion of Gypsy/Travellers and the urgent need for service provision by Social Work Services. Services should be focused on family support and delivered in seamless partnership with health and education services to maximise benefit to the families and minimise duplication of effort. The major challenge to be addressed is that of the negative perception of 'Social services' by Gypsy/Travellers: dedicated workers who can build a relationship of trust over an extended period, is the only way that these deeply held suspicions can be overcome.

PLANNING

The allocation of land for Gypsy/Traveller accommodation is a critical component of the success of any Gypsy/Traveller Strategy. The inclusion of Gypsy/Travellers in Local Plan consultation processes will enable identification of land for new permanent and transit sites, as well as sites for individual or group housing, using similar criteria as for housing for settled population e.g. proximity to services, shops, etc, reflecting current Gypsy/Traveller health, education and other service inequalities.

7.4 POLICE

The maintenance and improvement of good relations between the Police and Gypsy/Travellers is dependent on the continuation of the pro-active, community-based approach taken by Northern Constabulary. Consideration should be given to the inclusion of a specific Gypsy/Traveller Liaison role in the responsibilities of a Northern Constabulary post to co-ordinate this active policing in Highland.

Detailed Education Recommendations

Highland Council Education, Culture & Sport Service

Should:

- undertake self evaluation using 'How Good Is Our School (HGIOS) - Gypsies and Travellers?' (March 2005) as part of Quality Assurance.
- Take account of 'Delivering for Scotland's Gypsies/Travellers', Recommendations 15-25 (2005)
- Identify to schools and Gypsy/Traveller families, in all areas of Highland, a named contact person (ILDO?)
- Identify/reserve nursery places for pre-school G/T children
- Be involved in developing an Information Sharing policy agreed by all agencies

Schools

Should:

- Take account of HGIOS - G/T? (2005), as above.
- Take account of 'Inclusive Educational Approaches for Gypsies and Travellers, within the context of Interrupted Learning (2003)'
- Identify a named contact person for families to liaise with. (Race Equality School Co-ordinator?)
- Strengthen on-site and school links with Gypsy/Travellers

Development Officer

Should:

- Continue to develop relationships and support families
- Make links with unauthorised (roadside) encampments
- Continue to support schools and other agencies
- Continue to develop literacy, numeracy, ICT, health and other resources, which will support schools and on-site working.
- Continue to develop alternative educational provision, as appropriate to needs of individual children and families
- Further develop home/school links to support families with homework and further learning opportunities
- Further develop links with mainstream nurseries, linking to on-site provision
- Develop nursery transition documents for schools and families
- Develop on-line learning opportunities for children who do not attend any other educational opportunity
- Further develop access to vocational and work-based learning opportunities
- Produce home/school packs with multi-agency input and focus
- Produce appropriate and culturally sensitive health resources to be accessed by children not attending mainstream education
- Develop raising awareness training, as part of Education Race Equality Policy (2004)
- Continue to be involved in developing multi-agency links on site with children and parents
- Further develop positive working relationships with services already in contact with G/T to allow for exchange of information and a system of referral to operate.
- Produce guidance for Adult Basic Education
- Continue involvement in developments at Scottish level with STEP, Traveller Education Network (TENET) and cross-authority working
- As appropriate, develop systems, linking with practice in other areas to support families.

Recommendations from A Reflective Account on the Health Professional Role given to Gypsy/Travellers in Inverness LHCC, January 2003-July 2003

1. NHS Highland must nominate a high level 'champion' to promote the development of primary and acute services to meet Gypsy/Traveller needs and identify this as a priority within the Inequalities Agenda.
2. A Nurse Practitioner should be identified in each CHP to meet the health care needs of Gypsy/Travellers, enabling the provision of a flexible and effective service with improved communication and integrated working across Highland.
3. The development of an Information Sharing Policy between agencies in Highland is an important component of delivering an effective service.
4. Resources must be identified to address the service provision deficiencies highlighted below: all action should be sensitive to and respectful of individual personal and social needs, as well as the Gypsy/Traveller culture.

Primary Care Dental Services: the most effective service is likely to be a mobile service delivered to where Gypsy/Travellers are living. An alternative, but less favoured service would be to facilitate access to a NHS dentist whose treatment and service has been developed to meet the challenges faced by this very mobile Gypsy/Traveller group.

Men's Health: sessional male health professional support is required to raise the profile of men's health - linkage with the Healthy Highland Men project may address this issue in 2005 onwards

Maternal and child welfare support, including teenage boys and girls health issues: increased culturally appropriate services are required.

Smoking: opportunities should be taken to support Gypsy/Travellers to stop smoking by holding smoking cessation clinics and through alternative health promoting activities. Partnership with ASH and NRCEMH smoking reduction/cessation initiatives may be possible in 2005/6

Parenting support: opportunities exist to work collaboratively with Education Services and NCH to develop alternative parent support initiatives programmes in line with national recommendations, which should also include the older siblings where appropriate. Such programmes would need to be sensitive to the Gypsy/Traveller culture to be accepted by this group of parents.

Immunisation: an audit of the immunisation status of Gypsy/Travellers should be undertaken and the results used to develop an immunisation strategy to improve uptake.

Highland Gypsy/Traveller Health & Wellbeing Initiative

The Highland Gypsy/Traveller Health & Wellbeing Initiative was a Highland-wide partnership of the Scottish Executive, NHS Highland, Highland Council, Save the Children Fund and Highland Gypsy/Travellers.

Funding of £123,500 for the 3 year Initiative (to 31/3/05) was provided by the Scottish Executive Innovation Fund for Children's Services, with Highland Health Board contributing a further £131,500 to the £257,000 total: the Initiative was hosted by Highland Council in offices at Clachnaharry, Inverness.

The Initiative was managed by a multi-agency Steering Group comprising:-

A Gypsy/Traveller

Head of Community and Health Improvement Planning, NHS Highland

Support for Learning Manager, Highland Council

Development Worker, Save the Children

Director of Housing, Highland Council

Area Children's Services Manager, Highland Council

Women & Children's Services Manager, NHS Highland

The Initiative employed 3 staff - a Development Officer, Jim Holden and 2 temporary Outreach Workers - John Duff and Sara Sims.

An Interrupted Learning Development Officer, Karen MacMaster was employed by Highland Council and worked closely with the Initiative team.

The Initiative faced a number of challenges from the outset: it required 3 advertisements to recruit a Development Officer and as a result, project work started at least 12 months later than originally planned, when the Development Officer took up post in April 2002. To initiate action, Initiative funding was used to pay for the secondment by Highland Council of an Education Development Officer (Karen MacMaster) to work with Gypsy/Travellers at the Longman Inverness Gypsy/Traveller site from December 2001.

The original intention was that fieldwork in year one by Outreach Workers would inform the Policy and procedure work of the Development Officer in years 2 and 3. The Outreach Workers started in post on 10/12/02 and 6/1/03, so fieldwork was considerably behind the original schedule. This impacted on the sustainability objectives of the Initiative, in that the production of the Final Report was out of step with the resourcing processes of the funding agencies (April 2005, rather than August 2004).

An external Evaluation of the Initiative by Research:Communities, was completed in April 2005: copies are available from NHS Highland or the Highland Council. The Evaluation Recommendations and conclusions are attached at Appendix 4.

Research:Communities Evaluation of the Initiative: Recommendations and Conclusions

The main recommendations to emerge from the evaluation started from the premise of a need for greater integration with service structures and greater integration across services and agencies. Other recommendations follow on from this.

In order to extend the reach and influence of actions aimed at greater inclusion for Gypsy/Travellers, better services and, ultimately, a significant shift in major indices of health and wellbeing, a senior post at decision-making level in each of the core services and agencies (including those responsible for economic developments such as HIE) should be designated as having a specific responsibility for Gypsy/Travellers, perhaps under the broad umbrella of equal opportunities, equality or ethnic minority issues.

Until such time as equal opportunities in access and provision for Gypsy/Travellers becomes more predictable and more widespread, the need for the outreach worker role at some level within the system is likely to continue. It was thought that their effectiveness could be strengthened (1) were they to be more closely linked than now to a core service and (2) were there to be more of them. Such outreach workers could influence the services and the services in turn could enhance their reach and impact.

Policy-to-practice efficiency could be enhanced were it possible to link the outreach worker operational posts with the senior posts suggested above in each of the key services or agencies. This could be on a service-specific basis, or within an integrated service structure or through staff with a cross-service role. A number of such operational responsibilities within each service would enhance the added value likely to be associated with multi-agency team working through ongoing opportunities for sharing ideas and information, professional support and access to different levels of advice and expertise.

A cross-service structure would be required were service integration to be addressed. This would also facilitate regular meetings between the teams with dedicated responsibilities. This could be built on forums already in place and be tasked with addressing such aspects as:

- Sharing good practice across services and agencies;
- Pushing forward the rolling programme of long-term planning and strategic thinking;
- Monitoring outcomes systematically to identify where attention needs to be sustained, where resources should be moved to other areas and where new priorities need to be identified;
- Working to ensure Gypsy/Traveller representation for such meetings and continuing to enhance good working relationships with the Gypsy/Traveller Community.
- Establishing a system to support broad-based recruitment of Gypsy/Traveller representatives to serve on committees and attend meetings, to enhance the

consultation process and also with a view to specifically addressing ongoing capacity building.

A cross-service structure could also accommodate the following:

- Systematic opportunities within and across services for policy development, strategic planning and practice guidelines to be addressed in a coordinated, integrated and cohesive manner;
- A move away from a reliance on short-term funding to a situation within which there is the potential for ongoing development while still having access to any short-term funding programmes designed for supporting specific policy themes and interventions;
- A greater emphasis on cross-service and inter-agency planning and coordination;
- A smooth transition into the post-Initiative phase which builds on what has been achieved.

Developments of this kind could in turn lead to:

- A more sustainable and integrated structural framework for planning and delivering services to Gypsy/Traveller families;
- A stronger platform for pushing for informed dialogue at national and local levels and for negotiated access to existing integrated service structures such as School Liaison Groups (SLGs);
- A service-embedded support system for those posts which have some designated responsibilities for working with Gypsy/Travellers;
- The establishment of enhanced inclusion for Gypsy/Travellers on the agenda of all of the services;
- The potential for service development keeping pace with rising expectations of the Gypsy/Travellers.

This could also provide a base for the following practice-based activities:

- Utilising the experience and the expertise gained across a team of professionals;
- Speeding up the process of converting raised awareness into practice within and across the services and agencies;
- Helping to reduce the trial-and-error basis of much previous development;
- Providing a basis for developing appropriate multi-agency training.

There remains the issue of how to raise awareness within local Highland communities. Addressing this is a major long-term commitment and is likely to involve many pathways:

- Through the professionals with a designated brief;

- Through the schools, particularly Personal and Social Education (PSE) programmes and the whole school ethos-building which is central to the New Community Schools Approach (NCSA)/ Integrated Community Schools (ICS);
- The cumulative impact of legislation and mass-media campaigns;
- The Gypsy/Travellers themselves.

This Initiative added significantly to the ongoing debates on eradicating discrimination and stigma, facilitating access to services and ensuring equality of opportunity for Gypsy/Travellers. Expectations have been set in place. There is enough evidence from the evaluation to suggest that the signs of increased empowerment in some quarters (a little but enough to give heart) has reinforced levels of confidence in the commitment within Highland to persist with the developments which have now been initiated and build upon them. There are at least some key practitioners among each of the main stakeholders ready to take this further - including some Gypsy/Travellers.

The conditions associated with effective future engagement emerged clearly and fit easily with best practice in service delivery:

- Respect for the culturally influenced choices of the Gypsy/Travellers;
- An awareness of the kinds of outcomes associated with such choices;
- An acceptance of the slow pace of social change;
- An acceptance of the anxieties associated with social changes (for example where greater social inclusion could be seen to raise the likelihood of young people moving away);
- Taking on board that equality in relation to rights and entitlements is dependent on having access to the relevant information on which informed decision-making can be made with confidence.

The Initiative has provided some indications of potential and has also highlighted what needs to be addressed at a fundamental level before the Gypsy/Traveller Community as a whole can begin to experience equity in access and quality of provision. The Gypsy/Travellers who contributed to the evaluation were ready to take on the roles and responsibilities involved in working jointly for the outcomes sought for their communities. The service providers already engaged in promoting greater Gypsy/Traveller use of services were thoughtful, informed and in a position to influence the thinking and working practices of their colleagues. Policy development on equity and service provision is at least appearing on some agendas and moves are in place to move this forward at a political level. What is needed now is more of what has become established and expected - including more planning - on the following key issues:

- Addressing continuity, particularly in terms of the interregnum between the end of the Initiative and the next steps;
- Understanding the implications of how and where and to what extent expectations are in place in the Gypsy/Traveller Community for a better deal in service access, provision and delivery;

- Addressing the training needs on an ongoing continuing professional development basis;
- Respecting and accepting the nature of the Gypsy/Traveller culture;
- Taking on board the civic responsibilities involved in consulting with different minority groups such as the Gypsy/Travellers in order to understand their diverse needs and the associated factors which hold an importance place in their culture;
- Accepting the need for innovation and piloting in order to work towards delivering equity in the quality of service experienced by all.

Building on the Initiative experience, The Highland Council can make a difference - particularly if early bridging structures are set in place to capitalise on the outcomes already achieved. Strong indications have emerged from the Initiative indicating potential ways forward and The Highland Council is in a good position to move onto the next developmental stage.

Working with Gypsy/Travellers

Seminar Evaluation summary report 2003/4/5

Introduction

One of the Gypsy/Traveller Health and Well-Being Initiative's key objectives is to *"reduce racial harassment and discrimination faced by Gypsy/Travellers"* (Development Plan Objective 2). In pursuit of this aim, 10 awareness-raising seminars were held in 2003, 2004 and 2005, providing opportunities for a broad cross section of agency staff and Gypsy/Travellers to meet, and consider in detail issues affecting, Gypsy/Travellers living in the Highlands. Each seminar was facilitated by Gypsy/Travellers and Save the Children and aimed to

- increase understanding of the situation of Gypsies and Travellers in Scotland.

- highlight the discrimination faced by Gypsies and Travellers.

- increase knowledge of the legislative and policy framework in Scotland.

The 10 seminars were held in Fort William (20/5/03), Broadford (11/6/03), Inverness (28/10/03, 30/11/04, 10/12/04), Dornoch (27/11/03), Forres (1/12/04), Alness (9/12/04) Halkirk (9/2/05) and Kingussie (18/3/05).

The Seminars were attended by over 200 people from a wide range of agencies including Highland Council and Moray Council (Environmental Health, Housing, Education, Elected Members, Social Work, Countryside Rangers, Legal Services, Library Services), CAB, Scottish Human Services Trust, Aberdeen Traveller Education & information Project, New Futures, Advocacy Highland, Homestart, Careers Scotland, Job Centre, Crown Office & Procurator Fiscal Service, SACRO, Health, Police and others.

This report summarises the feedback collated from the evaluation forms completed by participants.

Methodology

During each seminar day, a variety of methods were used to raise awareness and encourage the exchange of ideas and good practice, including:

- Quiz** - to dispel some myths and challenge assumptions

- Video** - allowing other Gypsy/Travellers, particularly young people, to present their varied views

- Workshops** - in small groups looking at imagery, poetry and case studies in detail

- Inclusive practice** - consideration of national policy developments and examples of good practice from other areas

- Open forum** - an opportunity to ask questions and think about what next?

Evaluation

In total 175 participants completed an evaluation form. Feedback was extremely positive and the seminars were thought to have been both informative and useful. By far the most important element of the seminars for the majority of participants was the active involvement of Gypsy/Travellers, who were praised for their openness and integrity. Many participants were visibly shocked and appalled by some of the 'real life' examples they heard.

What immediate steps can you take to improve your own practice?

Greater awareness - Many participants mentioned that they now felt more aware of the day-to-day issues and needs of Gypsy/Travellers. *'Now I have more insight into Gypsy/Travellers lives and problems surrounding this. I hope that I*

will deal confidently with needs and approaches by having better understanding of culture'. 'I feel that I have gained a little more awareness of the Gypsy/Travellers problems they face etc - will endeavour to build my own awareness and pass this on to others who may have stereotypical views of Travelling people'.

Be more proactive - A range of agency staff said they would now take specific steps to include and ensure services are accessible. *'Give more information verbally and ask if they have any specific needs' . 'Make contact rather than avoiding situations'.*

Reflect - Several participants mentioned the need for self reflection *'Be more open - less judgemental'. 'Examine what assumptions I make about people/situations and check these out'. 'Reflect on my approach and be more aware of alternative approaches which may be more suitable than ones I may have chosen to support Gypsy/Travellers'.*

Disseminate - one important step mentioned was the intention to disseminate information to other colleagues. *'Cascade information to other staff'. 'Will discuss seminar with colleagues - also find out more about local facilities/policy'. 'Share info with rest of my team'.*

Reading - Several people intended to read the resources/recommendations given and make contacts with others working in their field. *'Read up and increase knowledge gained today'. 'Read HC policies on Travellers'. 'Read more about Travellers - book list very helpful'.*

Other - *'Spend more time on diversity issues generally'. 'Use heightened awareness whilst dealing with casework and promotion of what I gained to others dealing with their casework'. 'Focus on the positive in media responses'. 'Will use some of what I have used in my own training delivery'.*

For the longer term, what steps could be taken to improve your agency's practice/policy?

More training - Many asked for more training days for themselves and others. *'More training for staff (jointly with Health/Education/Police/Social Work/Housing etc)'. 'Allowing more people to take part in seminars such as today's'. 'Awareness sessions for all staff would be ideal'. 'Look at training for staff team - have information available for reference'.*

Information sharing - Again, in the long term, there was a desire to share learning from the seminars with others. *'Inform/talk to colleagues. 'Transfer awareness from this session to all staff'.*

Improve practice - Many mentioned the need to consider and develop different ways of giving information - tapes (video and audio), etc. Others noted practical ways they could improve service delivery. *'Make sites available rather than moving people on continually'. 'Provision of refuse collection facilities at road sites'. 'Recruit more people to provide basic services (not I realise, an issue restricted to this client group!)'. 'More direct dialogue work (especially young) Travellers. Letting them know how and where to use our service'. 'Development work on school ethos and on curriculum for the benefit of all the children'.*

Strategic input - At a strategic level the need to include Gypsy/Travellers was acknowledged. *'Keep issues around Travellers to the forefront of discussions within my service, i.e. mental health promotion within schools'. 'Devise strategies for relevant engagement'. 'To involve Gypsy/Travellers in policy/practice when making decisions about their way of life. 'To take Gypsy/Travellers views into account for future policy making'.*

Other - *'Show a public tolerance to Travelling people'. 'Work hours more flexible, work agenda, back up and understanding from line managers and higher up in how to work with Gypsy/Travellers'. 'I currently work freelance so will be examining my own attitude in the context of this meeting'. 'Reinforcement*

*wider knowledge of the Council's Gypsy/Traveller policy prepared by Housing'.
'Keep up to date with Gypsy/Travellers issues'.*

Additional Comments

The vast majority of comments were positive and complimentary, particularly of the Gypsy/Traveller presenters

I found that having Gypsy/Travellers involved helped in that we were not being "talked to" by a trainer, etc. We could ask questions to those directly involved. Very many thanks to all involved and most especially to Sylvia, Lizzie, Clementine, Georgia and Shannon for sharing their experiences openly for benefit of others.

It was invaluable having Gypsy/Travellers facilitating the sessions.

This programme should be nationwide, ongoing and include more people.

Session was well balanced but too brief.

Great seminar, well delivered.

Good informal, comfortable atmosphere - interesting mix of people. Good mixture of styles of presentation, very enjoyable and informative.

Excellent seminar. Enjoyed meeting/talking to Travellers.

Most participants identified specific steps they could take to improve their practice in the short and long-term. In addition, and perhaps of most importance, many people commented on their previous lack of awareness and the need for self-reflection. For example:

"Excellent day, opened my eyes to many issues that I was unaware of"

"Thanks, keep up the message this must be the way forward"

"One of the best events I have ever attended, informative and stimulating"

"The seminar certainly opened my eyes to becoming more aware"

"A very informative seminar, I learned a lot"

"Excellent session, came in feeling very uninformed but left with a greater understanding"

"I feel sorry I can't be more effective in changing attitudes, but will work on it now I am more aware"

"This was stimulating and enlightening, challenged some of my own views",

"the ideal way to meet those involved and increase understanding",

Michelle Lloyd [edited by Jim Holden], April 2005

Gypsy/Traveller Education: Summary of developments December '01 - January '05

General

Developing and maintaining positive relationships, and consistency of person, crucial to all work with the G/T community.

Resources developed for use on site and schools. Cultural resource lending system available to schools.

Travel Records being used successfully by particular schools - positive comments from schools and families.

Draft guidance written for schools re G/T within the context of Interrupted Learning.

Cultural Resource pack available to all schools, within the draft guidance on Interrupted Learning.

Cultural Resource/Raising Awareness information package to be included on Learning and Teaching Website in conjunction with Moray Inclusion work

Joint working with Adult Literacy Team to develop strategies and produce information for staff who work with and support G/T.

Attend TENET (inter-authority teachers group) - allows for dissemination of good practice.

Attend Steering Group, Local Fora and Highland Partnership Group meetings to report on Education.

Inform annual HSW report

Inform Council Action Plan

Respond to documents

Part of Community Education Inspection with Driving Theory and joint work with Youth Worker highlighted as good practice.

Involved in Initiative Evaluation. TASC agency work, STEP evaluation, SIPS evaluation (linking with Community Learning and Leisure) and Adult Literacy Action Plan work.

Involved in Awareness Raising Sessions for all services and other agencies (Skye, Dornoch, Inverness, Elgin, Halkirk, Councillors)

Presentations

- ✓ Study Support Conference, Perth on Driving Theory project
- ✓ IASCF seminar on 'Working with Gypsy/Traveller children and families'
- ✓ Youth Action Team on 'Education and Gypsy/Travellers, and Raising Awareness'
- ✓ Nursery Network - Inverness area
- ✓ Lochaber Forum
- ✓ Partnership Group
- ✓ Adult Literacy Partnership
- ✓ Educational Psychologists
- ✓ Adult Literacy Conference - Driving Theory
- ✓ Play Seminar

Attend STEP conferences

Attended ECS Spring Forum - Child Protection focus

Stand alone computers accessed through Fujitsu Refresher Programme for use with G/T children.

Visited other council areas in Scotland to look at Good Practice.

Visited Fife Council to see children using particular computer package and to discuss good practice

Confirmation of successful bid to Home Reading Initiative to develop home link packs with health and education focus (Education, Health and NCH) (to develop)

Liaise with Moray, Aberdeen and other council areas re G/T who also stay in Highland.

Continue links with Save the Children.

In consultation with Early Year's Team developing appropriate transfer documents for Gypsy/Traveller children, aged 0-5.

School

- ✓ Families starting to access school, without intervention
- ✓ One family requested attending school, because contact person and provisions were in place to support
- ✓ One family made contact to request support whilst in area for short time
- ✓ Families starting to inform schools they will be moving

On Race Equality Working Group

- ✓ To be involved in staff development next session

Seconded to STEP, Edinburgh University, for 20 days

Inverness

Children, families and school in Beauly area supported, as required. Informal visits made to continue links with this group.

Additional support time allocated to Beauly Primary immediately G/T arrive in school - deployed on needs basis, as required.

Successful inclusion in Play Inclusive Action Research Project linked to work with G/T in Beauly Primary.

STEP produced 'Case Study of Good Practice in working with G/T', based on inclusive practices in Beauly Primary.

'Piloting' Nursery Transition Document with Beauly Nursery. (under review)

Support available to children, families and schools accessing schools from settled accommodation.

Involved in highlighting need for improved facilities on Longman Site - new portacabin, facilitating and supporting other services in making links with G/T

Teaching sessions on Longman Site, Inverness for children of all ages, acting as bridging system into school where appropriate.

Play and nursery sessions twice weekly for children aged 0-5, on Longman Site. Coordinating work with NCH for 1 of the sessions - children and family members involved.

- ✓ planning and recording documents in pilot stage.

At present all primary aged children, on Longman Site, accessing full-time mainstream education at Merkinch Primary.

Taxi provided for children from site to Merkinch Primary.

Liaise with Merkinch staff and ALSTL to assess situation on regular basis.

Piloted project for small group of secondary aged children at The Bridge

- ✓ Facility available for uptake if required

Liaise with Inverness College - 3 applications unsuccessful in Sep. '03.

- ✓ Continue links as required.

Placement at Floral Hall organised for 2 teenage G/T.

ABE provide tutor support for young adults in basic literacy and numeracy skills.

Partnership working with ABE and Community Learning and Leisure on Driving Theory for aged 16+.

- ✓ Two successful bids, Dec. '02, and Oct '03, to Adult Literacies Funding allowed for development and delivery of Driving Theory course, based on need and request from community.
- ✓ Crèche facilities were highlighted as additional need in second bid.

Driving Theory course mainstreamed as part of ABE programme -G/T attending and passing the Theory Test.

Involvement with Driving Theory in M-Learning project.

Supported Children's Service Worker in Dalneigh Primary with settled G/T children.

✓ Package developed for use by Children's Service Workers in partnership with Education, to explore cultural identity and raising cultural awareness Partnership working with Health to develop a health education programme, based on need and request.

✓ Developing health programme for G/T children not attending school Linking with Library Staff to support the service in developing links with the Longman Site to enable suitable reading materials, for children and adults to be made available.

Joint work with museum education and outreach officer with group of children

- ✓ examining and promoting positive attitude towards the community
- ✓ to create Traveller exhibition
- ✓ to develop a Teacher Support Package to accompany exhibition (short term) and Traveller Awareness Raising 'Box' (long term)

'Supported' Occupational Traveller child.

Supported CHASE project in developing website for young G/T.

STEP newsletter included input from young Inverness G/T.

Liaise with ALSTL and AEM

Positive working relationships developed with Housing, Health and Well-Being Initiative and the agencies noted above have been instrumental and crucial to the developments, which have taken place, in the Inverness area.

Lochaber

Occasional meetings with ALSTL and AEM.

Supporting Duror, Ballachulish and Upper Achintore Primaries as required.

Supporting children and families into mainstream education - children accessing schools on part and full-time basis, depending on need.

Maintaining contact with families where children are not attending school to encourage participation in education.

Jointly with Pre-School Teacher, supporting family in accessing mainstream nursery provision.

Involved in developing a joint-working approach in Lochaber, which will allow services to exchange information and move forward with referrals.

Successful bid to Adult Literacies Funding, Oct '03, in partnership with ABE to support the delivery of the Driving Theory course, in 2 separate areas.

Driving Theory now being run by ABE as part of mainstream programme.

Spean Bridge portacabin received computer via Fujitsu Refresher Programme.

Involvement in Healthy Eating initiative, alongside Health and Well-Being Support Worker

- ✓ Two activity packages developed
- ✓ Inverness based young adult G/T organised to assist with children's sessions

Transport arranged for child accessing Fort William school from Spean Bridge site

Ross-shire

Supported 3 schools with settled G/T families who required support with issues relating to cultural background.

*Developed links with transient family and provided education packs to support engagement (see Skye and Lochalsh).

Liaise with ALSTL and AEM.

Caithness & Sutherland

Support available to Helmsdale Primary for 2 G/T when requested.
Two children attend Wick South Primary when the family are in the area.
Additional support to be allocated to the school, immediately the children return.
One child attends Wick High when the family are in the area. Support when necessary.
Liaise with ALSTL and AEM.

Nairn, Badenoch & Strathspey

Support Aviemore Primary when requested. (Same families who attend Beaully Primary.)
Seasonal site in Newtonmore has not produced any contacts.
Liaise with ALSTL and AEM.

Skye & Lochalsh

Supporting family in accessing school system, in consultation with Health and Well-Being Support Worker, Social Work and Psychological Services.
*Supported enrolment and attendance at Portree Primary
*Supporting secondary aged child in accessing pupil support service
No real links with roadside encampments - many short stays.
Liaise with ALSTL and AEM.

Driving Theory to be supported by ABE for 2 young adults, who has requested this facility (funding to be accessed via Inverness Adult Literacy Funding bid).

The Health Experience of a Gypsy/Traveller in Highland.

The following report by Sara Sims, Outreach Worker West for Initiative, highlights some of the daily difficulties experienced by Gypsy/Travellers which can have a direct impact on their health and can affect their access to healthcare.

My first contact with family A started in April 2003 when they stayed on a roadside encampment in a rural area of Highlands. Family A are a large extended family and on my first visit I met Mrs A, who had her own trailer. Mrs A is the Grandma of family A, and is very much the head of the family.

Mrs A told me that she was registered with the local medical practice which was very close to their encampment; she admitted that the men didn't tend to seek medical treatment but she thought they should. Mrs A told me that she liked the GP there and was happy to go to him.

I visited the medical practice and met with the staff there to explain my role in supporting the family and to raise awareness of Gypsy/Traveller culture and issues.

When the family were forced to move on because of violence from some members of the local settled community, Mrs A started to experience health problems. She was now staying some distance from a medical practice and also felt that she couldn't face going to a different doctor.

After considerable discussion with Mrs A, I drove her to see the GP with whom she was registered and tests were undertaken to find out what the problem was.

The receptionist at the surgery insisted on several occasions that Mrs A should be using a new surgery closer to where she is staying. I was asked by Mrs A to explain to the receptionist how difficult it can be to build trust in different Doctors each time you are moved on.

Mrs A's GP made her an appointment to see the specialist at Raigmore Hospital in Inverness.

As the family were staying on roadside encampments and had no address, they could not receive mail. Their encampment had no mobile phone reception and their options were very limited for alternative stopping places.

During this time letters about appointments and telephone messages were being copied to me so that I could pass on information during my visits. We eventually managed to set up a way of the family receiving mail at the Royal Mail sorting office in the nearest town. The manager at the sorting office was very friendly, but told me many sorting offices wouldn't do this.

The other difficulty was that even when Mrs A received a letter, she was not always able to understand it due to low literacy. She also didn't feel confident to ask other people to help her with reading, or responding to letters, so she would tend to wait for me to help her. This often caused delays and at times meant that she missed appointments.

Mrs A had been asked on several occasions to go and collect urine sample kits from the practice, despite practice staff knowing the distance involved (c100 miles round

trip) and her difficulty with transport. Each time I had to suggest that the kit should be posted to her. When the samples did get through to her, she could not always understand what she was required to do and the information accompanying them was confusing. This all created a delay in her seeing the specialist.

When a hospital appointment at the outpatients was offered, Mrs A was very anxious about going to the hospital and also about leaving her family. She asked if I would be able to go along with her for support: she felt it was a very different environment and she worried she might not understand things that the Consultant would say.

Mrs A had no means of transport as their van had broken down and the hospital was a 200 mile round trip. I made contact with the GP to ask about hospital transport as this service had not been offered. After a number of calls, transport was authorised to take Mrs A to the hospital.

The GP told Mrs A that she was to take a strong laxative the day before her hospital visit. This situation was less than ideal for Mrs A as she had limited access to toilet facilities at her roadside camp. This situation was discouraging Mrs A from taking the appointment so again I had to get involved, and with Mrs A's agreement, I arranged an overnight stay in the hospital the night before.

I was concerned that the support of the GP was limited and there seemed to be little concern or regard for her living situation.

The hospital stay went well: I went along to see her and ensure that she felt supported, since she was initially very nervous and unsure about the situation. She also pointed out to me that cleanliness (out of her home environment) was concerning her - for example, she wouldn't take a drink because she didn't have her own mug. I went and bought her a mug of her own so nobody else could use it. She also thought the staff didn't wash their hands enough when going from one patient to another. [*This is a common concern of Gypsy/Travellers - cleanliness traditions are often a strong part of Gypsy/Travellers cultural heritage*].

Discussing her hospital stay later, Mrs A thought the staff were very friendly and on the whole she felt comfortable and not too daunted by the experience.

Some time after her hospital visit in Inverness, Mrs A discovered that she had a tumour around the pancreas area. This was of course very worrying for Mrs A and the family. Mrs A felt sure it was cancer and the whole family rallied around her. Although Mrs A had very strong fears around cancer, she was determined that she wanted the tumour to be removed. [*This fear of cancer and hence late presentation and high mortality from cancer, has been noted in two recent studies of the health of Gypsy/Travellers*].

When Mrs A received a hospital appointment to have an operation, it was at Aberdeen Royal Infirmary. By this time the family were living in an even more rural location and I had to make representations about transportation for Mrs A to Aberdeen. While her GP didn't think they would take her that far, I eventually managed to arrange transport. There were even greater fears this time from the family as it was too far to visit, coupled with very great fear of it being cancer.

Again Mrs A asked me if I would be there while she was having the operation and this was agreed with my Line Manager.

Unfortunately when Mrs A got to the hospital her operation date was postponed due to her having a chest infection, so she had to stay at the hospital and wait for another week until this had cleared up.

Mrs A found the hygiene particularly poor at Aberdeen and she had spoken to some of the nurses about it. She was concerned about a lack of hand washing (despite there being sinks and soap near the patient's beds) and she thought the sheets were not very clean and the ward generally dirty. This time Mrs A had remembered to take her mug!

The operation went well and I was with there to support Mrs A and to see the Consultant before she went to theatre. With Mrs A's agreement, I had also previously talked to some of the ward nurses to highlight some of the cultural issues.

When Mrs A was beginning to recover from her operation, the hospital staff and I tried to sort out Mrs A's transport home. We were told that she would have to wait for another week before transport would be available. Mrs A had already been at the hospital away from her family for 2 weeks in a very different environment from which she was used to, and the prospect of an extended stay was very upsetting for her. We managed to arrange that I would take her to the small local hospital near her home the following day, where she would have the time to recover properly with her family around her. [*Close family support during illness/family crisis is another strong Gypsy/Traveller cultural tradition*]

Mrs A was later informed that the tumour which had been removed was not cancerous and her health improved very rapidly.

Mrs A and the family were very grateful for the support I gave to them and they confirmed that Mrs A wouldn't have taken medical help so soon without that level of support and would otherwise have been deterred by the difficulties involved.

Key Issues:

Problems caused by rurality in terms of access to GPs and Specialist Health Services.

NHS/GP dependence on written communication about health issues, with inherent assumption of permanent address and literacy.

Gypsy/Travellers' fear of Cancer

Need for awareness of, and sensitivity to, cultural traditions when working with Gypsy/Travellers

The critical importance of advocacy in this context.

Gypsy/Travellers in Scotland: a brief summary of the legislative and policy framework.

1. Gypsy/Travellers in Scotland

How many Scottish Gypsy/Travellers are there?

There is no accurate figure and a wide discrepancy between 'official' and unofficial figures.

The Gypsy/Traveller community estimates its numbers at more than 15,000.

The Scottish Executive carries out formal Counts of Gypsy/Travellers each January and July: these biannual counts suggest a much lower figure, but this does not include Gypsy/Travellers living in houses for all or part of the year.

The July 2004 Count [See www.scotland.gov.uk/socialresearch, then search for 'gypsy traveller 6'.] recorded:

- 259 Households on Council Sites
- 146 households (1 caravan = 1 household) on Privately Owned Sites
- 178 households (1 Caravan = 1 household) on Roadside Camps
- Total Scottish Gypsy/Traveller population (excluding housed Gypsy/Travellers) estimated at 583 Households x 3.4 people per household = 1965 people.

2. Accommodation Needs

Scottish Gypsy/Travellers live in trailers (caravans) and in houses for all, or part of the year.

In trailers, on-

- Council sites
- Private sites
- Roadside Camps

In Houses

- Council/HA Rented
- Private Rented
- Ownership

Historical position on provision of sites by Local Authorities -

No Statutory Duty

Centralised Funding from Scottish Office which issued site design and management criteria

Current Position

No Central Funding

Gypsy/Travellers have identified a need for Transit Sites as traditional stopping places become unavailable

Communities Scotland has a 'quality inspection' role

Communities Scotland's role is based on published Performance Standards, which came into effect April 2002. The Standard relating to Local Authorities and Gypsy/Travellers states that:-

“We plan and provide or arrange good quality serviced stopping places for Gypsy/Travellers. We let pitches in a way that ensures fair and open access for all. We take Gypsy/Travellers views into account in delivering our services, and we are responsive to their needs.”

Communities Scotland’s pilot study in 2002 of Local Authority performance against this Standard found:-

- some good progress in relation to service provision
- no council performing well across all key assessment areas
- strategic planning (poor)
- need for better consultation
- poor locations of Gypsy/Traveller sites
- high rents
- Scottish Executive Twice Yearly Count figures not used in planning of services

3. Legislation and Policy

Race Relations Act 1976

Race Relations (Amendment) Act 2000

Children (Scotland) Act 1995

Human Rights Act 1998

Scottish Parliament, Equal Opportunities Committee Report, June 2001

Race Relations Act 1976

Discrimination can be direct or indirect.

The RRA covers employment, housing, education, provision of goods and services.

The CRE in Scotland recognise Gypsy/Travellers as an ethnic group (in terms of RRA), but to date there has been no test case in a Scottish court.

In England, the case heard by Lord Fraser (Mandla v. Lee and Others 1983 IRLR209), established that an ethnic group had two essential characteristics:

- A long shared history
- A cultural tradition of its own

While many of the five other characteristics are considered relevant:

- a common geographical origin or descent
- a common language
- a common literature
- a common religion
- being a minority.

Race Relations (Amendment) Act 2000

This Act extends provisions of 1976 Race Relations Act. Of particular relevance is the requirement to address Institutional Racism, which can be defined as -

“The collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture or ethnic origin. It can be seen or detected in processes, attitudes and behaviour which amount to discrimination through unwitting prejudice, ignorance, thoughtlessness and racist stereotyping which disadvantage minority ethnic people.”

The Act sets out a General Duty (section 71 (1)) which states that public authorities must have ‘due regard to the need’:

- “to eliminate unlawful racial discrimination”, and
- “to promote equality of opportunity and good relations between persons of different racial groups”

The Act identifies Specific Duties, including the requirement for all public authorities to publish by 30th November 2002:

A Racial Equality Scheme which sets out:
- those functions or (proposed) policies which have relevance to race equality
and

their arrangements for:

- assessing and consulting on the impact of policy on race equality
- monitoring policies for adverse impact
- publishing the results of assessments, monitoring and consultations
- ensuring public access to information and services
- training staff in the new duty

Children (Scotland) Act 1995

This Act placed a legal duty on local authorities to *“have regard to children’s religious persuasion, racial origin and cultural and linguistic background”* when reaching decisions about them.

The Scottish Executive Guidance booklet *“Valuing Diversity,”* includes minority ethnic and Gypsy/Traveller children.

Human Rights Act 1998

This Act requires legislation to be compatible with the European Convention on Human Rights which sets minimum standards of rights and creates a definite legal framework in which a balance has to be struck between the rights of the individual and the public interest. Of particular relevance to Gypsy/Travellers are -

Article 2: the right to live.

Article 6: the right to a fair trial.

Article 8: the right to respect for an individual’s private family life and home.

Article 14: enjoy that right without discrimination (this article applies to all the preceding Articles).

United Nations Convention on the Rights of the Child 1990

The Convention establishes the basic rights of children in 54 Articles. Two of the most important for Gypsy/Traveller children are:

Article 2

'1. States Parties shall respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.

Article 30

'In those States in which ethnic, religious or linguistic minorities or persons of indigenous origin exist, a child belonging to such a minority or who is indigenous shall not be denied the right, in community with other members of his or her group, to enjoy his or her own culture, to profess and practise his or her own religion, or to use his or her own language.'

Scottish Parliament, Equal Opportunities Committee Report, June 2001

The first Inquiry of the Scottish Parliament EO Committee was into Gypsy/Travellers and Public Services and the Committee's report made 37 Recommendations for action. The Scottish Executive published an updated response to the Committee in June 2004 - 'Delivering for Scotland's Gypsy/Travellers' [www.scotland.gov.uk/library5/justice/dfsqt-00.asp], noting some progress, but identifying a requirement for substantial additional work.

The EO Committee recently announced that it will re-visit this issue early in 2005, taking fresh evidence from interested parties.

LOCHABER ROUTES

Lochaber Routes is a Community Development/Support project for Gypsy/Travellers living within Lochaber, whether on council sites, roadside encampments or in housing.

The project has been operating with 3 Support Workers and a Development Worker since April 2003.

Prior to this, the Development Worker offered outreach support to the Gypsy/Traveller community, as part of a national organisation, the Scottish Gypsy Traveller Association (SGTA). We continue to work 'cross country', with other gypsy/Traveller projects throughout Scotland.

Lochaber Routes is based at An Drochaid Community Centre, Fort William and

- provides advice and support on all areas, from welfare rights, managing tenancies, health and education, through to coping with life on the road.

- works to increase awareness by encouraging dialogue, and hopefully learning, within the settled community, of the discrimination that Gypsy/Travellers face within Lochaber.

- actively encourages community participation in the project and in the newly formed Scottish Traveller Law Reform Coalition.

Through community development, a user-led steering group from the Gypsy/Traveller community has been established to direct the service.

In 2004 Lochaber Routes ran a heritage project which celebrated the positive input that Lochaber Gypsy/Travellers have made in the past as well as the present. The heritage project is a local/national resource owned by the Gypsy/Traveller community, which will be used as a tool for challenging racism within the wider settled community.

Contact: 01397 701313 or lochaberroutes@hotmail.com

Time Travellers: Funding Application

A core group of seven young Gypsy/Travellers, 3 of whom currently live in Highland (Inverness, Skye, Wick), will work with a web-designer to create new web pages about their culture and heritage. The web pages will provide a much-needed resource about the history and cultural traditions of a minority ethnic group who have been discriminated against for centuries. Each core group member will then work with at least five other young Gypsy/Travellers each to pass on knowledge and skills. The grant will be spent on IT equipment and software, skills workshops, residential events and project running costs so that the group can communicate with each other.

Young people will be actively engaged in the management, development and implementation of this project. They will decide what areas of research and the format and contents of all the web pages produced. Appropriate support and supervision will be an integral part of this process, however essentially the project will reflect those aspects of Gypsy/Traveller history and culture that are important to the young people involved and their materials will be presented in a manner with which they are comfortable. Working as a team, each member will identify a role for themselves (i.e. residential organiser, graphic designer, web-master, communications, etc).

Over the last year some of the core group have been working together to create their own website (www.comelookatus.org). This website is very basic and the group now wish to develop new pages for the website which fully represent their cultural heritage and traditions. New young people have joined the group, each with their own perspective on their heritage. The young people are very proud of their heritage, even though they have often had to conceal their identity to avoid prejudice. The young people now feel more confident in using new technologies to record their heritage as a way of promoting understanding of Gypsy/Traveller culture and lifestyle.

The project will concentrate on the culture and heritage of Scottish Gypsy/Travellers (particularly those living in rural Scotland). For centuries Gypsy/Travellers have been discriminated against and many are wary of sharing information and photographs about their past lives. This project is led by young members of the community who are in a unique and privileged position. New web-pages would include: Our Ancestors, Our Homes, Our Pastimes. Each page is likely to include old photographs (collected from relatives or via museums) and, for example, interview with older relatives about their memories.

Michelle Lloyd, SCF 26/9/03

The Scottish Parliament Equal Opportunities Committee Inquiry Into 'Gypsy Travellers And Public Sector Policies', 2001.

Recommendations

1 Capitalisation of the term Gypsy Traveller, or Gypsy and Traveller where used separately, should be adopted in all official minutes and reports by the Scottish Parliament, the Scottish Executive, local authorities and other public bodies.

2 All legislation and policies should be framed on the understanding that Gypsy Travellers have distinct ethnic characteristics and should therefore be regarded as an ethnic group, until such time as a court decision is made on recognition as a racial group under the Race Relations Act 1976.

3 Gypsy Travellers should be clearly identified as a specific community of interest in the implementation of the Equality Strategy, following which, it is recommended that:

- there must be consultation with and participation in decision making by Gypsy Travellers, through their representation on working groups within the local authority area on public service provision and policy and their inclusion as service users in the monitoring and evaluation of policy and practice, and this must be monitored;
- to support consultation and partnership working, Gypsy Travellers and their representative organisations should be included in the provision of funding and other resources for community development and capacity building;
- the employment of Gypsy Travellers in public services should be promoted and encouraged through education, training and recruitment strategies.

4 New provision or site improvement programmes should be developed in consultation with Gypsy Travellers and representative organisations, on issues of location, design, facilities and services:

- the design of amenity chalets should conform to both the Below Tolerable Standards and Standard Amenity for housing, such as space standards, heating, energy, insulation, kitchen and W.C. facilities;
- the provision of community services and facilities on sites, such as community meeting places, play facilities, barrier-free and adapted amenity chalets, should be included;
- that once the Housing (Scotland) Act has passed onto the statute books the Scottish Ministers should further explore (for the purpose of future amendments to housing legislation) the issues of accrual of discount for settled housing, consultation with relevant associations and tenants rights to succession etc.

5 Scottish Homes as the new Executive Agency will have responsibility for the regulation of local authority services for Gypsy Travellers. This role should include:

- local needs assessment for Gypsy Traveller accommodation, including residential and short stay sites, as a component of the local housing strategy;

the provision of development funding for improvements to current sites and new site provision, where needs are identified;

guidance on improving site management standards, policy and procedures which are appropriate to Gypsy Travellers' lifestyles and needs, to include consideration of socially affordable rents, equitable fuel costs and reasonable pitch retainer fees.

6 The definition of "home" for the purposes of future amendments to housing legislation should be reconsidered to include sites, which are homes to Gypsy Travellers. Such recognition and redefinition would facilitate:

a review of alternative management and ownership arrangements for local authority sites, which should include options for community ownership, tenant management co-operatives and registered social landlords (RSLs);

the development of a model tenancy agreement for Gypsy Traveller sites managed by local authorities and RSLs.

7 A review should be undertaken by local authorities and the Executive Agency of the key role of site managers in providing support and information services for site residents, including job description, person specification, recruitment and training.

8 Appointment by local authorities of a designated Gypsy Traveller Liaison Officer (GTLO) (a role separate from but requiring close working with site managers) is recommended. The role of the GTLO would be develop information and support services for Gypsy Travellers in the local area and appropriate mechanisms for consultation.

9 Private sites should be subject to the regulations and standards applicable to local authority sites. The monitoring and enforcement of these standards by local authorities should include consultation with and participation by site users.

10 Local planning authorities should be required to identify the need for Gypsy Traveller site provision and land for sites in statutory plans, using Community Planning frameworks, which include Gypsy Travellers.

11 National good practice guidance for local authorities and police forces on the management of unauthorised camping should be developed, based on a clearly articulated national policy taking into account the Scottish legislative context and in consultation with all stakeholders. Guidance should include:

the provision of facilities by local authorities, such as water, toilets, skips and rubbish collection, where requested by the Gypsy Travellers using the camp;

the need for strategic planning by the local authority, including local protocols and agreements with other agencies and Gypsy Travellers to develop consistent approaches to the management of unauthorised camping.

12 Gypsy Travellers should be as an identified as an ethnic group in policies on racial harassment and be included in related training and awareness raising for all those involved in the provision of housing.

13 The impact of allocation policies on the needs and lifestyle of Gypsy Travellers applying for social housing should be reviewed. Specific issues relating to Gypsies and Travellers should be included in local homelessness strategies

14 The aims and objectives of the single regulatory framework for Scottish Homes, as the new Executive Agency, should include working with:

the local authority to assess the needs of Gypsy Travellers, including those who wish to travel, for accommodation (sites and housing) for the local housing strategy;

social housing providers to develop innovative models of housing provision (such as group or extended family housing).

This should be undertaken in consultation with Gypsy Travellers, with reference to innovative developments elsewhere in the UK and Europe.

15 Existing funding arrangements should be reviewed to support school and pre-school by providing additional resources where Gypsy Travellers access school education, such as:

education support for teachers;

additional grant when Gypsy Traveller children enter the school part-the way through the school year;

provision of transport between sites and schools through the use of school buses and schemes such as voluntary drivers;

assistance with school uniforms.

16 Whilst access to the core curriculum and the development of literacy and numeracy skills remains essential at the secondary level, more flexible provision in relation to vocational and work based learning should be considered for older children and young people, in consultation with Gypsy Travellers.

17 Alternative approaches to school education should be explored, where needs are identified in consultation with Gypsy Travellers, including:

the development of innovative projects in delivering education services, such as distance learning and the use of computers in conjunction with outreach support, and dissemination of good practice;

encouraging education authorities to support families providing home education;

community rooms or portakabins provided on sites to facilitate education provision, outreach support and to build links between schools and Gypsy Traveller families;

pre-school provision should be promoted and on site alternatives to school based services provided;

the development of special education services, which are relevant and sensitive to the lifestyle and cultural values of Gypsy Travellers;

research should be undertaken on how schools engage with parents and welcome them into schools (for example through direct teacher contact, through Parent Teacher Associations and Governing Boards) and how the confidence of Gypsy Travellers in their use of education services could be developed through targeted projects.

18 Research and good practice guidance on how schools engage with parents and welcome them into schools, for example through teacher contact, PTAs and Governing Boards.

19 The role of the education system in promoting good relations between the Gypsy Traveller and settled communities should be acknowledged and supported by

education authorities by the Scottish Executive Education Department. Guidelines on initial teacher training and Continuing Professional Development should clearly identify Gypsy Travellers as an ethnic group in relation to training on equality, social justice and anti-discriminatory practice.

20 Monitoring of anti-bullying strategies, use of the anti-bullying network and Childline, should include Gypsy Travellers as a separate ethnic group. Practical guidance on good practice and training to support schools and teachers should include specific reference to issues relating to Gypsy Traveller children.

21 Evaluation of pilot projects and examples of good practice relating to adult learning, access to vocational qualifications through community and further education should be disseminated and further developed in consultation with Gypsy Travellers.

22 Gypsy Travellers should be included as a separate ethnic group in all systematic ethnic monitoring of education services to measure progress in meeting targets, for the educational inclusion of Gypsy Traveller children and improvements in their educational attainment. Performance indicators for school inspections should include specific reference to Gypsy Travellers. The recent HM Inspectorate of Education (HMIE) report "on *Alternatives to School Exclusion*" could have provided an opportunity to identify such an approach.

23 Further work is required on developing the information base on Gypsy Traveller children throughout the education system, clearly identified as an ethnic group, so that their needs can be included in strategic planning and policy development.

24 Consideration should be given by local authorities to ring-fencing or top-slicing resources for specific initiatives and interventions for education provision for Gypsy Travellers, for alternatives to school education and to encourage and support school attendance.

25 Gypsy Travellers should be included in the strategic planning of education services and the impact of their participation monitored to ensure that their views are considered and listened to.

26 Research should be commissioned by the Scottish Executive to establish the health and health needs of Gypsy Travellers in Scotland, including specific research on health issues arising from environmental factors relating to accommodation.

27 Guidelines on initial training and Continuing Professional Development of NHS staff, including GPs and hospital doctors, should clearly identify Gypsy Travellers as an ethnic group in relation to training on equality, social justice and anti-discriminatory practice and promote awareness of and sensitivity to the needs of Gypsy Travellers in relation to health care.

28 New services and improvements to existing services should be developed in consultation and monitored, to establish whether targets are being met and that the services meet Gypsy Traveller needs

29 Funding systems should be reviewed, clearly explained and transparent, to ensure that there are no disincentives for GP practices in registering Gypsy Travellers. Resources for the maintenance or mainstreaming of pilot projects that develop good practice in the provision of health care for Gypsy Travellers should be made available to Health Boards.

30 Resources for the maintenance or mainstreaming of pilot projects that develop good practice in the provision of health care for Gypsy Travellers should be

made available to Health Boards, with particular reference to the use of patient hand-held records.

31 Gypsy Travellers should be targeted for specific health promotion campaigns, such as immunisation, accident prevention, child development, and women's health issues, including screening.

32 Where a Gypsy Traveller Liaison Officer is appointed their specific responsibilities should include consultation with Gypsy Travellers, promoting appropriate service provision, providing information and support to Gypsy Travellers in accessing public services.

33 Gypsy Travellers should be included in the strategic planning of personal social services, including community care, and the impact of their participation monitored to ensure that their views are considered and listened to:

- locally based initiatives and services should be reviewed to ensure that criteria do not disadvantage mobile groups such as Gypsy Travellers;
- consideration should be given to developing the confidence of Gypsy Travellers in their use of social services through targeted projects.

34 Racial diversity strategies and training materials for the police and other relevant bodies in the criminal justice system should include reference to Gypsy Travellers as a separate ethnic group.

35 Schemes should be developed to promote the confidence of Gypsy Travellers in the police, whether contact relates to experiences as victims of crime, racial harassment or as suspected offenders:

one of the recommendations of the final report for consultation of the Promoting Social Inclusion (PSI) Working Group on the Needs of Travellers in Northern Ireland (2001) was a pilot scheme for a legal rights worker to be appointed. The role would be to liaise with police, support workers and Travellers, raise awareness of legal rights and advocate on behalf of Travellers. A key feature of the proposed scheme was that a trainee position should be funded for a Traveller to gain appropriate skills and knowledge by shadowing the legal rights worker. A similar project should be considered for Scotland.

36 Policing practices and arrangements should continue to be reviewed and specific monitoring of relations between Police and Gypsy Travellers relations established. Guidance should be provided for use by the Police in working with Gypsy Travellers, as:

- victims of crime, including racist incidents and harassment;
- when evicting Gypsy Travellers from unauthorised camps;
- to ensure that Gypsy Traveller communities are not over-policed.

37 To support the recognition of Gypsy Travellers as a distinct ethnic group and commitment by public services to develop policy and service provision based on such an approach:

to encourage local authorities and other public bodies to use the opportunity of the Race Relations (Amendment) Act 2000 to promote equality of opportunity for Gypsy Travellers in Scotland;

in consultation with Gypsy Travellers, to develop school based campaigns to raise awareness and resources for use by schools, community and youth groups;

to include Gypsy Travellers in any anti-racism campaigns aimed at challenging racial discrimination and promoting good relations in Scotland, as a specific ethnic group and to include them at an early stage in consultations on the campaign.

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USEFUL WEBSITES

Young Travellers Website: www.comelookatus.org

Traveller Law Reform Coalition: www.travellerslaw.org.uk

Pavee Point Irish Gypsy/Traveller Information: www.paveepoint.ie

Exchange House Irish Gypsy/Traveller Information: www.exchangehouse.ie

Irish Traveller Movement: www.itmtrav.com

Friends, Families and Travellers: www.Gypsy-Traveller.org

Scottish Executive: www.scotland.gov.uk

Scottish Parliament: www.scottish.parliament.uk

Scottish Travellers Education Project (STEP): www.scottishtravellered.net

Save the Children: www.savethechildren.org.uk

NHS Health Scotland: www.hebs.scot.nhs.uk