



**PAVEE POINT**  
TRAVELLER AND ROMA CENTRE

## **Submission to the Oireachtas Sub-Committee on Mental Health July 2021**

### **Pavee Point Traveller and Roma Centre**

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Pavee Point Traveller and Roma Centre ('Pavee Point') have been working to challenge racism and promote Traveller and Roma inclusion in Ireland since 1985. The organisation works from a community development perspective and promotes the realisation of human rights and equality for Travellers and Roma in Ireland. The organisation is comprised of Travellers, Roma and members of the majority population, who work together in partnership to address the needs of Travellers and Roma as minority ethnic groups experiencing exclusion, marginalisation and racism. Working for social justice, solidarity and human rights, the central aim of Pavee Point is to contribute to improvement in the quality of life and living circumstances of Irish Travellers and Roma, this includes working towards addressing Traveller mental health inequalities.

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## Introduction

My name is Geraldine McDonnell and on behalf of Pavee Point we warmly welcome the opportunity to present to the Committee this afternoon. We want to commend you for giving visibility to the key issues affecting Travellers during this challenging time. Given the limited time we have, and the complexities of the issues we wish to highlight, we are going to focus explicitly on key issues and strategic recommendations as related to Travellers.

From the outset it is important to acknowledge that while COVID-19 has had a huge impact on people globally, it has disproportionately impacted on marginalised and minority communities, including Travellers and Roma. We know that Travellers (and Roma) who get COVID-19 have higher risks of hospitalisation, going to ICU and death compared to the general population<sup>1</sup>. This shouldn't come as a surprise to anyone given Traveller's well-documented health inequalities, severe overcrowding and lack of access to the most basic facilities on Traveller sites. We were all told how important it was to keep our distance and wash our hands to stop the spread of the virus. How can you expect Travellers do this when we're living on top of one another and many of us don't even have access to running water?

We also know that the past year has been incredibly difficult for everyone's mental health-we rightly hear about this on the media. However for my community, the Traveller community, the pandemic came at a time when our mental health was already at crisis point.<sup>2</sup> The shocking data on Traveller mental health is well established. As a community, we have been identified as 'high-risk' group in relation to suicide and poor mental health (including frequent mental distress). We know that Travellers experience a 6 times higher suicide rate, accounting for approximately 11% of all Traveller deaths. That means 1 in every 10 Travellers die by suicide. This is unacceptable.

As mental health workers in Pavee Point we have seen how COVID-19 has impacted our community and the stress it has caused. Could you imagine the stress of living on a site without any water? Toilets? Worrying about trying to socially distance yourself and not spreading the virus to your family? Or spreading it to our grandparents or older Traveller neighbours- most of whom are already medically vulnerable? Added to this is the additional burden of trying to make sure our children continue with their education while often not having a formal education ourselves-lacking computer, literacy and digital skills yourself. Most sites don't have wifi or the necessary internet connection. It's hard to get space for our children to do their school work and work quietly in a crowded trailer or house.

During the lock downs it was particularly hard for us. Most sites or group housing schemes no longer have green spaces or any recreational amenities. We're increasingly forced to live in large ghettos on the outskirts of towns and near motorways. Where can our children safely play or where can we go for a walk when often there's no public lighting or safe paths to walk on during the depths of winter? This, all adds to our mental stress. During the pandemic we have seen a lot of hate speech and anti-Traveller racism published on social media platforms. Imagine how all this makes us feel? You're made feel you're not welcome in Ireland; that you're a second class citizen and the country would be better off without us. This affects our health and especially our mental health.

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<sup>1</sup> [https://www.hiqa.ie/sites/default/files/2021-03/Evidence-synthesis\\_Vaccine-allocation-group-9.pdf](https://www.hiqa.ie/sites/default/files/2021-03/Evidence-synthesis_Vaccine-allocation-group-9.pdf)

<sup>2</sup>According to the All Ireland Traveller Health Study (2010), suicide for Traveller women is 5 times higher than the general population; with 6 out of 10 (62.7%) Traveller women disclosing that their mental health was not good enough for one or more days in the last 30 days; this was compared to 1 in 5 (19.9%) women in the general population.

We've seen that in order to deal with this stress, some Travellers (similar to the general population) have turned to risky behaviours including drugs and alcohol which has made the situation worse. We have witnessed the alarming numbers of Travellers self-harming and unfortunately, Traveller suicides during this time. We personally know of 2 Traveller suicide in the past week alone.

We also know that similar to the general population, many Travellers did not have access to mental health services during this time. Instead, tele-mental health services were deployed to bridge the gap. We understand that this approach will be mainstreamed in line with Sláintecare moving into the future. However, this approach is not suitable for the majority of Travellers given our well-documented levels of low literacy which is really needed to navigate technology; lack of access to suitable technology and lack of privacy when living in overcrowded accommodation.

Since the beginning of the pandemic Traveller organisations and Traveller Primary Health Care Projects have mobilised across the country to protect Travellers health, including mental health. We have seen really goodwill, support and collaboration from colleagues in the HSE and other government departments, in working with us to ensure that Traveller health concerns relating to COVID-19 are addressed in an accessible and culturally sensitive manner at this challenging time when Travellers have been very fearful of the impact of the virus on our families and wider community. We are hopeful that this will become a legacy of COVID-19 as we move into the future. However, what the pandemic has taught us is that we need government leadership and a long-term plan- one that is focused, strategic and resourced if we are serious about having better outcomes and protecting Travellers health.

**It is in this context we recommend:**

- 1. Urgent publication and implementation of the National Traveller Health Action Plan with no further delay.** We warmly welcome the commitment in the Programme for Government<sup>3</sup> to implement the long-awaited National Traveller Health Action Plan. We understand this Plan is finally currently being reviewed by the Department of Health. Travellers and Traveller organisations participated in consultations in 2018 and three years on we're waiting for the publication and implementation of the Plan. We welcomed the commitment in the Programme for Government<sup>4</sup> to implement of the National Traveller Health Action Plan but would like to ask the Department of Health, respectfully, why are you dragging your feet? We call on the Minister for Health to prioritise Traveller health within the Department and immediately publish and implement of the National Traveller Health Action Plan, including establishing a clear consultative structure to drive its implementation and monitoring; and ensure all actions in the Plan have clear targets, indicators, outcomes, timeframes and budget lines and that Traveller organisations are involved in these processes. We also need to make sure that Travellers are included in all wider health policies and services being developed.
- 2. Resources allocated to Traveller mental health must be spent on Traveller mental health work.** With the exception of the appointment of nine HSE Mental Health Service Coordinator's for Travellers and Dormant Accounts funding, there is no dedicated budget for

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<sup>3</sup> <https://www.gov.ie/en/publication/7e05d-programme-for-government-our-shared-future/>

Traveller mental health. Since the coordinator posts were funded in 2015<sup>5</sup> (recruited in 2017/18), one CHO post has never been filled at an approximate loss of €250,000- €300,000, along with the loss of resources and support for Traveller mental health. We believe this is unacceptable, particularly given the current Traveller mental health crisis, disproportionate rates of suicide and poor mental health amongst Travellers and the absence of a dedicated budget to address this. Further, while we acknowledge the Dormant Accounts Funding from the Department of Health, it is imperative that this is mainstreamed and that ongoing Traveller mental health work receives sustainable and ringfenced funding to respond to Traveller mental health inequalities particularly in the post COVID-19 context. Pavee Point, alongside other Traveller organisations are ready, willing and equipped to undertake this work in partnership with the HSE and Department of Health.

3. **Ensure Traveller mental health is prioritised within the Department of Health and HSE.** Traveller health structures, at both national and regional levels often lack high-level representation from the Department of Health or the HSE and as result, Traveller mental health remains marginalised. We recommend representation of HSE Mental Health Heads of Service on national and regional Traveller health structures given the documented mental health crisis our community is living with. Traveller organisation representation on mental health implementation and monitoring structures at national and local levels (e.g.) Sharing the Vision, Local CFLs, etc. must also be prioritised. Following our presentation to the Oireachtas Committee on the Future of Mental Health Care in 2018 the Committee recommended the development of a Traveller and Roma Mental Health Action Plan and we welcome this commitment in the Programme for Government
4. **Implementation of ethnic equality monitoring across all health data collection systems, including mental health.** Travellers, Roma and other minority ethnic groups are invisible in mental health policy and service provision because we aren't being counted in official data as the State is not capturing information on ethnicity, despite being government policy. We recommend the implementation of ethnic equality monitoring, including use a standardised ethnic identifier (consistent with national census and inclusive of Roma) across all routine data administrative systems in mental health services, including the National Self-Harm Registry Ireland to monitor equality of access, participation and outcomes to suicide prevention and mental health services for Travellers, Roma and other priority groups. It is essential that the application of an ethnic identifier take place within a human rights framework.

Finally, we would like to thank the Committee again for your time this afternoon and welcome any questions.

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<sup>5</sup> <https://www.hse.ie/eng/services/publications/serviceplans/service-plan-2017/operational-plans-2017/mental-health-operation-plans-2017.pdf>