

voluntary agencies. Our project is a partnership project between Pavee Point and the Eastern Health Board, this is innovative in that it brings together different strengths and resources of Travellers, Traveller culture and a community development approach on one side with Health skills, health services and health knowledge on the other.

Traveller Health Statistics

The intolerable circumstances of Travellers continue to persist and the disparity in their health status and survival is clearly illustrated by the extracts below from the Travellers Health Status Study:

- Travellers have more than double the national rate of stillbirths.
- Infant mortality rates are three times higher than the national rate.
- Traveller men live on average 10 years less than settled men.
- Travellers are only now reaching the life expectancy that settled Irish people reached in the 1940's.
- Travellers of all ages have very high mortality rates compared to the Irish population.
- Traveller women live on average 12 years less than their settled peers.
- Travellers have higher death rates for all causes but their rates are significantly higher for:
 - accidents
 - metabolic disorders in the 0-14 age group.
 - respiratory ailments
 - congenital problems

The Health Research Board: The Traveller's Health Status Study; Vital Statistics of Travelling People 1987.

Quotes

"The Traveller culture lies in the values, meanings and identity that the Traveller community shares. It is clear that the Traveller community's culture is distinct and different. 'Settled' people generally recognise the difference but fail to understand it as cultural difference. This is a phenomenon, characteristic of many societies, where the majority culture sees itself as holding a universal validity or norm in relation to values, meanings and identity".

"Peer led services such as that piloted in the Eastern Health Board should be expanded"

"Traveller support groups have an important contribution to make in the targeting and in the appropriate delivery of health services to the Traveller community"

-Task Force on the Travelling Community, July 1995.

"From birth to old age those at the bottom of the social scale have much poorer health and quality of life than those at the top. Gender, area of residence and ethnic origin also have a deep impact".

Townsend & Davidson (eds) Inequalities in Health, The Black Report, 1980.

"This is the first time Travellers have got this type of training and job. We understand our own people and believe that given the proper support and resources we can begin to improve the health of our community. It is no longer acceptable that Travellers die so young"

Missie Collins, Community Health Worker, at the presentation of certificates to the Community Health Workers by the Minister of Health Mr. Brian Cowen in Pavee Point on the 8th May 1998.

"I think it is safe to say this project has been a resounding success...I realise the excellent work done, so far, in this area is only a start and much more needs to be done. However, the success of the project to date, points the way forward and provides a model for action throughout the country"

Mr. Brian Cowen, Minister of Health, on presentation of certificates to the Community Health Workers in Pavee Point on 8th May 1998.



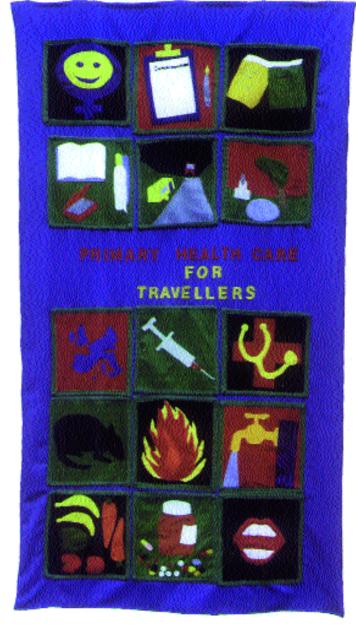
Where to find us

For further information contact: Primary Health Care for Travellers Project Pavee Point 46 North Great Charles Street, Dublin 1, Ireland

Tel: 353 1 8780255/57
Fax: 353 1 8742626
e-mail: pavee@iol.ie
Website: www.paveepoint.ic







Primary Health Care for Travellers Project

This initiative is being developed by Pavec Point with the Eastern Health Board



Rationale

Travellers require special consideration in health care because:

- They are a distinct cultural group with different perceptions of health, disease and care needs.
- The Health Status Study 1987 has shown that Travellers have different health and disease problems to settled people. Infectious disease control, accident prevention, ante-natal care and child spacing, genetic counselling, health behaviour and health service utilisation are all priorities that must be addressed.
- These distinct characteristics imply that innovative approaches to service organisation, content and delivery are required if health conditions are to improve.

Background

Pavee Point is a non-governmental organisation committed to the attainment of human rights for Travellers. Pavee Point has been involved in direct work with Travellers since 1985. Innovation has been a key feature of the work done, based on a community development approach, on an intercultural model and on a Traveller/settled partnership. The group seeks to combine local action with national resourcing, and direct work with research and policy formulation. Since 1992 Pavee Point has developed a targeted approach to addressing the many health issues which Travellers face. We have been involved in developing a primary health care project for Travellers in partnership with the Eastern Health Board since 1994.



Primary Health Care for Travellers Project

In October 1994 the Primary Health Care for Travellers project began in the Finglas/Dunsink areas of Community Care Area 6. The Project is a partnership between Pavee Point and the EHB, with technical assistance being provided by the Department of Community Health and General Practice, Trinity College, Dublin.

The overall aim of the project is

To improve the health status and quality of life of the Traveller community in Community Care Area 6.

The project objectives are to

- Establish a model of Traveller participation in the promotion of health
- Develop the skills of Traveller women in providing community based health services
- Liaise and assist in creating dialogue between Travellers and health service providers
- Highlight gaps in health service delivery to Travellers and work towards reducing inequalities that exist in established services.

Areas of work

- Carrying out a baseline survey on Travellers perceptions of health issues
- Presenting survey findings to the Traveller community and a range of health professionals and identifying priorities;
- Planning and implementing interventions in:
 - -Public health nursing
 - -Oral health
 - -Nutrition
 - -Environmental health



- Designing and publishing health education posters; eg. Breast-feeding; immunisations; burns; oral health and nutrition.
- Organising well woman clinics
- Research on Traveller women's reproductive health and production of video and accompanying workbook
- Networking with Roma/Traveller organisations at European, National and local levels.
- Providing in-service training for health professionals on anti-racism, Traveller culture and Traveller health needs and responses
- · Organising health education sessions on-site
- Policy development and advocacy work
- Representation on National Travellers' Health Advisory Committee and Traveller Health Unit in EHB.
- Media work
- Providing support and resources to Traveller organisations
- Organising seminars and conferences





Primary Health Care

Primary Health Care is a model where the health status of Travellers could be improved over time and where there is the space for real Traveller participation and potential employment.

Primary Health Care is a statement of health philosophy, it is not a package, or a complete defined methodology. It is a flexible system which can be adapted to the health problems, the culture, the way of life and the stage of development reached by the community.

Primary Health Care in communities means enabling individuals and organisations to improve health through informed health care, self help and mutual aid. It means encouraging and supporting local initiatives for health. Key requisites for Primary Health Care are community participation and intersectoral collaboration.

Community Participation

In the context of our project we view community participation as a process through which Travellers will gain greater control over the social, political, economic and environmental factors that determine their health.

The Traveller community must participate in every stage of the project from initial assessment of the situation; defining the main health problems; setting priorities for the project; implementing the activities and monitoring and evaluating the results.

Intersectoral Collaboration

For Primary Health Care to be effective, there must be close collaboration between the Traveller community, health workers, the health sector, the local authorities and a range of other statutory and