STAY HOME! STAY SAFE!

Minding Our Nucks!

PAVEE POINT
TRAVELLER AND ROMA CENTRE

TRAVELLERS' MENTAL HEALTH:

Reflections on the impact of COVID-19

❝ While we know that mental health inequalities was a longstanding and daily lived experience for Travellers before COVID-19, this research captures the impact of this pivotal moment in our history on Travellers **❞**

Mind Our Nucks!

Abbreviations

AIEB	All Ireland Endorsement Body for Community Work Education and Training
AITHS	All Ireland Traveller Health Study
BAME	Black, Asian and Minority Ethnic
CSO	Central Statistics Office
CWI	Community Work Ireland
EEM	Ethnic Equality Monitoring
EI	Ethnic Identifier
EU	European Union
FRA	EU Fundamental Rights Agency
GP	General Practitioner
HSE	Health Service Executive
HIQA	Health Information and Quality Authority
KPI	Key Performance Indicator
LGBTQI+	Lesbian, Gay, Bisexual, Transgender, Queer, Intersex +
MH	Mental Health
NSIO	National Social Inclusion Office, HSE
NTHAF	National Traveller Health Advisory Forum
NTHAP	National Traveller Health Action Plan
NTRIS	National Traveller and Roma Inclusion Strategy
PHCTP	Primary Health Care for Travellers Project
TCHWs	Traveller Community Health Workers
THU	Traveller Health Unit
WHO	World Health Organisation

List of Figures

Foreword

Pavee Point Traveller and Roma Centre ('Pavee Point') has long been advocating for targeted and mainstream responses to address Traveller mental health inequalities. Ensuring this was a key priority of the organisation, given findings of Mary Rose Walker (2008) on Traveller suicide and the All Ireland Traveller Health Study (AITHS, 2010). The AITHS was the first research to capture the magnitude of the Traveller mental health crisis and sparked ongoing extensive mental health advocacy efforts by Pavee Point, local Traveller organisations and Primary Health Care Projects around the country. While some gains have been hard won and slowly made, there is still much left as documented within this research.

While we know that mental health inequalities were longstanding and a daily lived experience for many Travellers before COVID-19, this research captures the impact of this pivotal moment in our history on Travellers nationally. It evidences the inevitable outcome of COVID-19 which is that many Travellers were simply not equipped to withstand the precarious nature of this time across all the social determinants of mental health. This ultimately relates to lack of policy implementation in relation to Travellers; poor investment in mainstream mental health services and inclusion of Travellers in mainstream mental health services; and little political will to seriously address these issues. There needs to be considerably greater emphasis on supporting the required response to mental health inequalities at government level.

However, as the report highlights, the pandemic demonstrated the value of strong Traveller health infrastructure underpinned by community development as Traveller organisations, Traveller Primary Health Care Projects and Traveller Health Units mobilised across the country, working collectively to ensure that Travellers, especially those who are most vulnerable, were protected, including supporting positive mental health and well-being measures at local level. It has also underscored the importance of a whole of government and interagency approach in responding to these challenges given the public health issue at hand. Reflecting on the crisis, we witnessed real goodwill, support, and collaboration from colleagues in the HSE and other government departments, in working with us to ensure that Traveller and Roma health concerns relating to COVID-19 were addressed in an accessible and culturally sensitive manner when both communities were fearful of the impact of the virus on their families and communities. Many Government departments, alongside the HSE, liaised directly, respectfully, and positively with Traveller organisations, during this time which must be commended. It is important that this learning and these relationships are harnessed and institutionalised going forward.

At this point in time, we have reached saturation level in documenting the issues that Travellers face in relation to mental health. Travellers have repeatedly shared their lived experiences of inequality, racism, discrimination, and poverty. Travellers and Traveller organisations have presented clear solutions and recommendations to the complexity of issues raised.

Mike Ryan states:

> *"We need to measure the mental health impact and understand truly what's happening but I think there's a point where it just becomes unethical to continue to call something out as an issue but not actually focus on solutions for people and communities"*

The solutions have been well set out in this report and now is the time for continued partnership, action, and implementation. We welcome this report and on behalf of Pavee Point and thank all involved with the research, particularly the participants who gave so generously of their time. We urge policymakers in this area to take on board the recommendations of this report and address Traveller mental health inequalities, without further delay.

Lynsey Kavanagh
Co-Director

Martin Collins
Co-Director

Executive Summary

This research aims to explore and capture the impact of COVID-19 on Travellers' mental health. The research was undertaken in 2023, three years after the pandemic was first declared by the World Health Organisation as a public health emergency. The research was carried out with a view towards understanding Travellers' mental health experiences during this time, taking account of key lessons learned and understanding what measures must be prioritised in preparation for future public health emergencies. The research engaged with 36 Travellers through focus groups and 4 HSE Mental Health Coordinator for Travellers who contributed to the research via written input.

We know that Travellers were already at risk for poor mental health with disproportionately higher rates of frequent mental distress and suicide connected to a legacy of deep-rooted systemic racism and discrimination, coupled with socioeconomic inequalities. Additionally, Traveller organisations and Traveller Primary Health Care Projects consistently highlighted the mental health impact of the pandemic on Travellers from its onset. As such the findings of this research were foreseen.

In terms of its contribution this research captures the extent, complexity and intertwined nature of the challenges of the pandemic for many Travellers. Travellers experienced an onslaught of stressors and were expected to be resilient and carry out mitigation measures in the face of these challenges whilst having limited access to protective factors such as good quality accommodation and digital literacy skills. The research shows that the pandemic indeed took a heavy toll on Travellers' mental health and continues to have an ongoing impact and weigh heavily on many Travellers. Key issues for Traveller mental health prior to, and as a consequence of COVID-19, are documented in the findings section and include psycho-social distress in relation to the pandemic stressors, the impact of movement restrictions, educational stressors, unemployment, racism and discrimination, and coping with high levels of bereavement during the pandemic. In particular, the considerable and continuous strain and distress that Traveller Community Health Workers for Travellers were under during this time is palpable.

Following on from these findings, priorities for consideration are set out in detail in the recommendations section and include:

- Implementation of the National Traveller Health Action Plan (NTHAP)
- Social determinants approach to Traveller mental health
- Implementation of ethnic equality monitoring, including use of a standardised ethnic identifier across all routine administrative systems in health services
- Investing in a sustainable Traveller health infrastructure
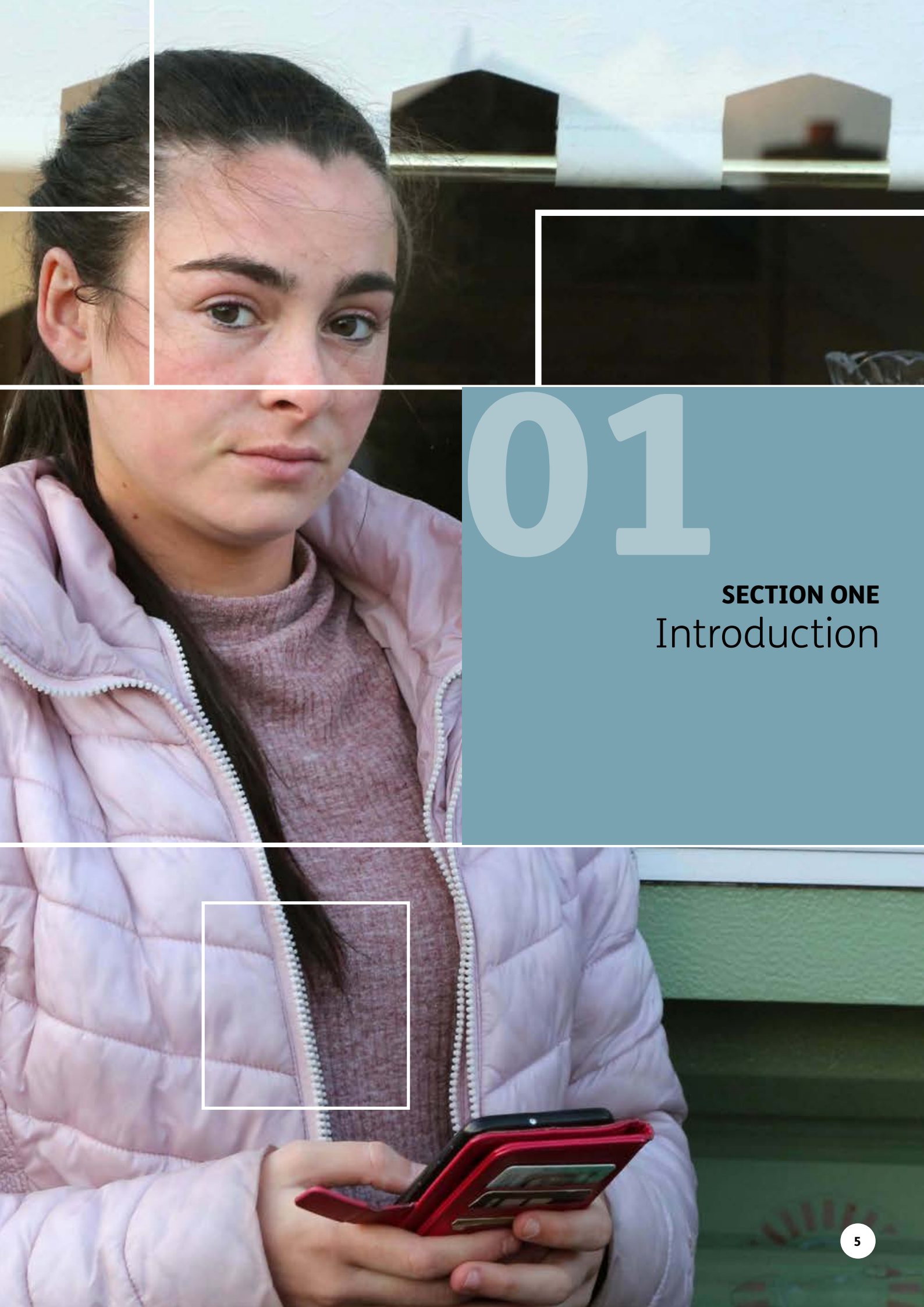
01

SECTION ONE
Introduction

"It's a very practical issue: if individuals and communities are not physically or mentally healthy, it is very difficult to absorb the strain and stress of an epidemic…When it comes to recovery plans…at how we're going to recover from this pandemic - mental health and psychosocial support to individuals and communities must be central to all recovery plans and must be costed into those plans"[1] Dr Mike Ryan (2021)

This report sets out findings from research commissioned by and undertaken in partnership with Pavee Point Traveller and Roma Centre ('Pavee Point'), exploring the mental health impact of the COVID-19 pandemic on the Traveller Community in Ireland. Declared by the World Health Organisation (WHO) as a public health emergency on the 11th March 2020, the COVID-19 pandemic brought a time of unprecedented challenges.

Nearly 9,000 people died of complications related to the illness in Ireland[2] and over 1,700,000[3] contracted the acute respiratory illness[4]. National restriction control policies and behaviour change expectations reformed how we live overnight. Policies and procedures developed included closure of schools and workplaces, handwashing and social distancing practices, masking, isolation measures and movement restrictions[5]. The associated containment policies and procedures had multiple intended and unintended consequences. Furthermore, we know that the pandemic had a disproportionate impact on marginalised and minority communities, including Travellers and Roma. A Pavee Point submission[6] to the Joint Oireachtas Sub-Committee on Mental Health refers to the Health Information and Quality Authority (HIQA) (2021) report[7] finding poor outcomes in relation to COVID-19 for Travellers. These are starkly laid out with the submission (2021: 2) noting, "Travellers (and Roma) who get COVID-19 have higher risks of hospitalisation, going to ICU and death compared to the general population".

Over three years on, it is important and timely to reflect on the impact of the pandemic and associated policies on the mental health of Travellers. This research was carried out to do so, with a view towards understanding Travellers' mental health experiences during this time, taking stock of the lessons learned, understanding what measures and approaches must be prioritised in preparation for what may come during future public health crises and furthermore how we can 'build back fairer'[8] to ensure Traveller mental health inequalities are not further entrenched.

---

1   World Health Organisation (2021) *COVID-19 Virtual Press Conference* [online] https://www.who.int/publications/m/item/covid-19-virtual-press-conference-transcript---5-march-2021 (accessed 2 April 2023)
2   Health Protection Surveillance Centre (2023) *Report on COVID-19 Deaths Reported in Ireland* [online] https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/surveillance/covid-19deathsreportedinireland/COVID-19_Death_Report_Website_v1.8_30052023.pdf
3   Health Protection Surveillance Centre (2021) *Epidemiology of COVID-19 in Ireland* [online] https://epi-covid-19-hpscireland.hub.arcgis.com (accessed 15 April 2023)
4   Health Protection Surveillance Centre (2021) *COVID-19 Interim Case Definition* [online] https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/casedefinitions/covid-19interimcasedefinitionforireland/ (accessed 14 April 2023).
5   European Union Agency for Fundamental Rights (2020) *Coronavirus COVID-19 outbreak in the EU Fundamental Rights Implications* [online] https://fra.europa.eu/sites/default/files/fra_uploads/ireland-report-covid-19-april-2020_en.pdf (accessed 30 March 2023).
6   Pavee Point Traveller and Roma Centre (Pavee Point) (2021) *Submission to the Oireachtas Sub-Committee on Mental Health* [online] OirSubCommitteeMentalHealth.pdf (paveepoint.ie) (accessed 14 April 2023).
7   Health Information and Quality Authority (2021) *Evidence synthesis for groups in vaccine allocation group nine – those aged 18 – 64 years living or working in crowded conditions* [online] Evidence-synthesis_Vaccine-allocation-group-9.pdf (hiqa.ie) (accessed 14 April 2023)
8   Marmot, M. et al., (2020). *Build Back Fairer: The COVID-19 Marmot Review. The Pandemic, Socioeconomic and Health Inequalities in England.* London: Institute of Health Equity.

With this in mind the following objectives were developed to frame the research:

- Explore Traveller Community and key stakeholder perceptions of COVID-19 responses on Traveller experiences of mental health;

- Explore the impact of responses to the COVID-19 pandemic in Ireland for Travellers in the context of the social determinants of mental health;

- Explore Traveller and Traveller organisation views on approaches to tackling and responding to Traveller mental health inequalities post COVID-19;

- Recommendations for policy and service provision and next steps.

Research Background

Experiences of the Traveller Community during the pandemic did not come as a surprise - Traveller organisations and Traveller Primary Health Care Projects stressed that Travellers would have limited capacity to carry out mitigation measures without pragmatic support tied to the social determinants of health. As such they acted quickly to advocate for priority actions to mitigate some of the foreseen impacts of the restrictions and the infectious disease. From the onset of the pandemic, it was evident from reports from Travellers and Traveller organisations nationally that the deep-rooted structural and socioeconomic inequalities already experienced by Travellers in Ireland were being further exacerbated by the increased stressors present during this time and taking a heavy toll on mental health in the Traveller Community[9].

The All-Ireland Traveller Health Study (AITHS)[10] carried out in 2010 is a national study looking at Traveller health status and health needs. Using culturally appropriate methodologies and working with Traveller peer researchers the study received an unprecedented 80% response rate from the Traveller Community. The study reported that Travellers are significantly at risk for poor mental health; with disproportionately higher rates of frequent mental distress and suicide. Difficulties caused by the pandemic, paired with intersectional issues related to the social determinants of health and particular to the Traveller Community (racism, living in overcrowded conditions with significant levels of hidden homelessness - particularly on sites, challenges with digital poverty and limited internet access and existing higher rates of underlying medical conditions) leading to Travellers being identified as a high-risk, vulnerable group during the pandemic, mean that the considerable challenges to mental health for Travellers during and post COVID-19 is distinct to that of the general population. Research carried out during and after the pandemic concluded that people with greater access to protective factors (e.g. good quality accommodation and access to resources) were more likely to withstand the precarious nature of this time and those with fewer resources were likely to be impacted the most[11].

9   Pavee Point Traveller and Roma Centre (Pavee Point) (2020) *COVID-19 and Irish Travellers: Interim Responses, Reflections and Recommendations* [online] https://www.paveepoint.ie/wp-content/uploads/2015/04/COVIDREPORTWEB.pdf (accessed 6 May 2023).
10   All Ireland Traveller Health Study Team (AITHS) (2010) *All Ireland Traveller Health Study, Our Geels.* Department of Health and Children, Dublin (accessed 12 April 2023).
11   O'Connor, K et al., (2021). Mental health impacts of COVID-19 in Ireland and the need for a secondary care mental health service response. *Irish Journal of Psychological Medicine, 38* (2), 99-107.

Early in 2020, the Centre for Mental Health cautioned that for groups such as minority ethnic groups who were already most at risk to poor mental health, exposure to experiences such as complicated bereavement and injustice may mean an increased vulnerability to ongoing mental health difficulties.

"Experiences of grief, trauma, injustice and abandonment all add to the psychological damage caused by COVID-19" (2020:1).

The United Nations similarly warned in May 2020 that long-term mental health effects of the pandemic were likely to come[12] and would be a consequence of the failure to invest in our mental health systems prior to the pandemic. Additional research publications commented that, based on findings of the outcomes of previous major emergencies, it was likely that the mental health ramifications of the pandemic would last longer than physical health ramifications[13, 14]. A submission from national mental health organisation, Mental Health Reform, (2020:2)[15] noted that the pandemic had,

"further exposed the fragility of the mental health sector and the deep fault lines that have existed for decades in the state's response to addressing the mental health needs of particular groups of individuals, such as…individuals from ethnic minority groups, including members of the Traveller community and many others".

A governmental report from May 2020 acknowledged that it was likely that the pandemic would have a particular impact on Travellers, and this had become apparent by May with the report stating:

"The existing vulnerabilities of members of the Traveller and Roma communities in health and accommodation put them at particular risk of contracting the virus. Maintaining social distancing and self-isolation is challenging in some living environments, as is access to appropriate community health services and resources that can meet their needs….Traveller and Roma children are more severely impacted by school closures as lack of access to broadband and technology make engagement with online teaching difficult"[16]

In the absence of ethnic equality monitoring being systematically embedded within health services, including mental health services, it is not possible to precisely quantify outcomes or access by Travellers to mental health services either before or during this time. However, data made available from the Eastern Region Traveller Health Unit (THU) Primary Health Care for Travellers Projects (PHCTPs)) Key Performance Indicators (KPIs) on mental health engagement by Traveller Community Health Workers during the time period of April 2020 - March 2021 provide strong insight into the intensified levels of mental health stress, with over 4,000 mental health specific engagements recorded. A Pavee Point brief from August 2020 notes that Traveller organisations were reporting "rising numbers of Travellers self-harming and sadly, Traveller suicides" (2020: 12).

12   United Nations (2020) *Policy Brief: COVID-19 and the need for Action on Mental Healt*h [online] https://unsdg.un.org/sites/default/files/2020-05/UN-Policy-Brief-COVID-19-and-mental-health.pdf (accessed 15 May 2023).

13   Gavin, B., Lyne, J., & McNicholas, F. (2020). Mental health and the COVID-19 pandemic. *Irish Journal of Psychological Medicine*, 37(3), 156-158. doi:10.1017/ipm.2020.72

14   O'Connor, K et al., (2021). Mental health impacts of COVID-19 in Ireland and the need for a secondary care mental health service response. *Irish Journal of Psychological Medicine*, 38(2), 99-107.

15   Mental Health Reform (2020) *Submission to the Special Committee on COVID-19 Response: The impact of COVID-19 on mental health in Ireland.* [online] https://www.mentalhealthreform.ie/wp-content/uploads/2020/08/Mental-Health-Reform-submission-to-the-Special-Committee-on-COVID-19-Response-July-2020.pdf (accessed 30 May 2023).

16   Department of An Taoiseach (2020), *'Report of the Social Implications of COVID-19 in Ireland. Preliminary Assessment'*, [online] https://assets.gov.ie/74373/5cc1bbfe59b447d3b841fa43cecfc79d.pdf (accessed 15 May 2023).

Data from the helpline 50808[17] reported an increase in usage by the general population following the pandemic and that Travellers were using their 'Text Pavee to 50808'[18] service at a higher rate during the lockdown stages. Data shared with Pavee Point's Mental Health Initiative in early 2022 regarding Travellers' using the service reveals that since the 'Pavee' keyword was launched in July 2020 approximately 500 conversations were held with people who self-identified as Travellers. On average, each texter had around two conversations with 50808 meaning that around 250 different young Travellers are likely to have used the texting service during this time period.

Unfortunately, we also know these findings were not unique to the Traveller Community with a number of studies documenting the relationship between inequality, mental health and minority ethnic groups. Multiple reports at national and international level highlighted that members of minority ethnic groups[19] were more likely to contract COVID-19, be hospitalised and be adversely impacted by the pandemic, linked to the social determinants of health – poverty, education, unemployment, racism, discrimination and inequality. Research available from the UK notes that minority ethnic groups experienced disproportionate mortality rates[20, 21]. Mental health focused research[22] noted that the disruption to health services exacerbated mental health illnesses and pre-existing mental health difficulties, resulting in members of minority ethnic groups experiencing "higher levels of distress, anxiety, stigma and racism during the pandemic, and levels of self-harm, abuse and thoughts of suicide and self-harm are higher"[23].

17   50808 is a free, anonymous messaging text service available 24/7 (https://text50808.ie)
18   Pavee Point Traveller and Roma Centre (2020) Pavee 50808 – a Mental health Support Text Line for Young Travellers [online] https://www.paveepoint.ie/pavee-50808/ (accessed 12 May 2023).
19   Nguyen LH, et al., (2022) The mental health burden of racial and ethnic minorities during the COVID-19 pandemic. *PLoS One* 17(8) e0271661 https://doi.org/10.1371/journal.pone.0271661
20   Nafilyan, Vahé et al., (2021) Ethnic differences in COVID-19 mortality during the first two waves of the Coronavirus Pandemic: a nationwide cohort study of 29 million adults in England." *European journal of epidemiology* vol. 36 (6) pp: 605-617.
21   NHS Race & Health Observatory (2022) *Build Back Fairer: Social determinants, ethnicity and health* [online] https://www.nhsrho.org/blog/build-back-fairer-social-determinants-ethnicity-and-health/ (accessed 12 March 2023).
22   Adhanom Ghebreyesus, T (2020) Addressing mental health needs: An integral part of COVID-19 response. *World Psychiatry* 19 (2) pp: 129-130.
23   Van Bortel, T et al., (2022) The mental health experiences of ethnic minorities in the UK during the Coronavirus pandemic: A qualitative exploration. *Frontiers in Public Health* 10: 875198.

Looking at the experiences of minority ethnic groups specifically, a study conducted across the UK and US concluded that people from minority ethnic backgrounds were more likely than white people to report symptoms of depression and anxiety[24]. Together these findings reinforce what we know about the prevailing link between inequality and poorer outcomes in mental health and why mental health effects of the pandemic manifested more acutely for minority ethnic groups.

Data drawn from the national Traveller and Roma monitoring template developed by Pavee Point found that between March and August of 2020, 175 Travellers tested positive for COVID-19 and 3 Travellers sadly died[25]. It is important to note that it is likely that the figures reported through this framework were an undercount given that, particularly early in the pandemic, stigma and shame around contracting COVID-19 was prevalent meaning many people, including Travellers, were reluctant or slow to disclose symptoms. Nonetheless, figures revealed that the

"reported positivity of COVID-19 among Travellers tested in the Eastern Region is 11.84% which is three times the national rate of 3.6% reported in the general population" (2020: 8).

Findings were further corroborated later by HIQA[26] and the NIAC[27] as follows,

"Travellers (all ages and those aged 18-64 years) were noted to be at an elevated risk of infection, and in those aged 18-64 years there was an increased risk of severe disease (in terms of hospitalisation when considered as a proportion of cases, and hospitalisation, ICU admission and death when considered as a proportion of the population). Notably, these results are considered to underestimate the true prevalence, given limitations with the use of ethnic identifiers and the hard-to-reach nature of this population" (2021:12).

"Members of the Traveller and Roma communities and people who are homeless are the only specific groups identified as being at significantly increased risk of hospitalisation ICU admission or death compared to the general population and should be prioritised for vaccination" (2021:1).

In relation to mental health the prevalence of COVID-19 had serious connotations given the fear associated with the unknowns of the virus at this time and the potential risk for Travellers given a higher rate of chronic health conditions amongst Travellers (AITHS, 2010[28]) which is addressed in the next section.

---

24   Sharma, S. (2022) *COVID has taken a greater toll on mental health among young people from ethnic minorities – sadly this is no surprise* [online] https://www.preventionweb.net/news/covid-has-taken-greater-toll-mental-health-among-people-ethnic-minorities-sadly-no-surprise (accessed 17 April 2023).
25   Pavee Point Traveller and Roma Centre (2020) *COVID-19 and Irish Travellers: Interim Responses, Reflections and Recommendations* [online] COVIDREPORTWEB.pdf (paveepoint.ie) (accessed 27 March 2023).
26   Health Information and Quality Authority (2021) *Evidence synthesis for groups in vaccine allocation group nine – those aged 18 – 64 years living or working in crowded conditions* [online] https://www.hiqa.ie/sites/default/files/2021-03/Evidence-synthesis_Vaccine-allocation-group-9.pdf (accessed 27 March 2023).
27   Royal College of Physicians of Ireland (2021) *National Immunisation Advisory Committee Updated Recommendations: Priority Groups for COVID-19 Vaccination* [online] NIAC-Recommendations-for-Vaccine-Prioritisation-29.03.2021.pdf (rcpi-live-cdn.s3.amazonaws.com) (accessed 12 April 2023).
28   All Ireland Traveller Health Study Team (AITHS) (2010) *All Ireland Traveller Health Study, Our Geels. Department of Health and Children, Dublin* (accessed 12 April 2023).

02

SECTION TWO
Research Context

Traveller Community in Ireland

Irish Travellers are a minority ethnic group, indigenous to Ireland who maintain a shared history, language, traditions, culture and way of life. Traveller ethnicity was formally acknowledged by the State in 2017[29]. Census 2022 found 32,949 Travellers live in the Republic of Ireland, an increase of 6% since Census 2016[30]. While positive, this is still likely to be an undercount as the AITHS in 2010[31] reported 36,200 Travellers. More recently, data collected by the Department of Housing, Local Government and Heritage (DHLGH) from the 2022 annual Traveller family count, recorded 12,183 Traveller families in Ireland[32] and given that the average Traveller family size is 4 (CSO Census 2022), this is equivalent to 48,732 Travellers or less than 1% of the overall population.

Social Determinants Approach to Health and Mental Health

This report draws on the social determinants framework to understand the inequalities that shape and impact mental health[33] and wellbeing in the Traveller Community. A social determinants approach considers the wider circumstances that bring about and reinforce the exclusion, marginalisation and inequalities that certain groups experience[34]. Taking this approach understands that 80 – 90% of our health is affected by non-medical factors and to meaningfully address health inequalities we must address the underlying 'causes of the causes'[35]. This means recognising the non-medical factors that affect our health and wellbeing from accommodation to poverty, education, employment, racism and discrimination amongst other factors, as detailed in the graph below – i.e the conditions in which we are born, live, grow and age[36].

The World Health Organisation (WHO) publication on Social Determinants of Mental Health (2014)[37] outlines that mental health does not exist in a vacuum and is impacted by the social determinants of health. Beyond this the WHO states

"certain population subgroups are at higher risk of mental disorders because of greater exposure to unfavourable social, economic, and environmental circumstances" (2014: 09).

29   Joint Committee on Justice and Equality (2017) *Report on the Recognition of Traveller Ethnicity* [online] Report on Recognition of Traveller Ethnicity: Motion – Dáil Éireann (32nd Dáil) – Thursday, 1 Jun 2017 – Houses of the Oireachtas (accessed 10 April 2023).
30   Central Statistics Office (2023) *Census of Population – Summary Results* [online] https://www.cso.ie/en/releasesandpublications/ep/p-cpsr/censusofpopulation2022-summaryresults/migrationanddiversity (accessed 1 June 2023).
31   All Ireland Traveller Health Study Team (AITHS) (2010) *All Ireland Traveller Health Study, Our Geels. Department of Health and Children, Dublin* (accessed 12 April 2023).
32   Department of Housing, Local Government and Heritage (2022) *Total number of Traveller families in all categories of accommodation* [online] Available at: https://www.gov.ie/pdf/?file=https://assets.gov.ie/276540/6a100adc-c592-4845-a247-7be27ce457b2.pdf - page=null (accessed 23 September 2023)
33   World Health Organisation and Calouste Gulbenkian Foundation (2014) *Social Determinants of Mental Health.* Geneva, World Health Organisation.
34   Dahlgren, G. and Whitehead, M. (1991) *Policies and Strategies to Promote Social Equity in Health.* Stockholm: Institute For Future Studies.
35   Marmot, M (2010) Fair Society, Healthy Lives: Strategic Review of Health Inequalities in England Post 2010. London: Marmot Review
36   Ibid.
37   World Health Organisation and Calouste Gulbenkian Foundation (2014) *Social Determinants of Mental Health.* Geneva, World Health Organisation.

Through this lens we can understand the importance of taking measures to address the determinants of health such as tackling poverty in all its forms (energy, food, digital etc), providing culturally appropriate and affordable housing and addressing racism and discrimination as suicide prevention and good mental health promotion measures.

As indicated earlier in the report, the AITHS[38] found that Travellers in Ireland have significantly worse health outcomes than the general population across a number of indicators. Life expectancy is shorter, mortality and infant mortality are disproportionately higher and chronic diseases are more common. AITHS also revealed that Travellers are four times more likely to have COPD, cardiovascular disease, diabetes and cancer[39]. These pre-existing chronic health conditions are known to be linked to higher risks of poorer outcomes for people with these conditions who contract COVID-19[40].

As such, COVID-19 presented a serious concern for Primary Health Care for Travellers Projects and for the Traveller Community and it was clear urgent proactive preventative measures needed to be put in place to ensure Travellers were recognised as a vulnerable group and protected on this basis. A report released by HIQA in 2021 validates these concerns stating that the risk of severe disease was indeed higher in the Traveller Community[41]. Traveller organisations and Primary Health Care for Travellers Projects worked diligently to identify COVID-19 mitigation strategies and in collaboration with the HSE, utilised the effective Traveller health infrastructure to deliver culturally appropriate health and mental health responses during this time. The graph below taken from the National Traveller Health Action Plan (2022 – 2027) contextualises the Traveller health infrastructure referred to here.
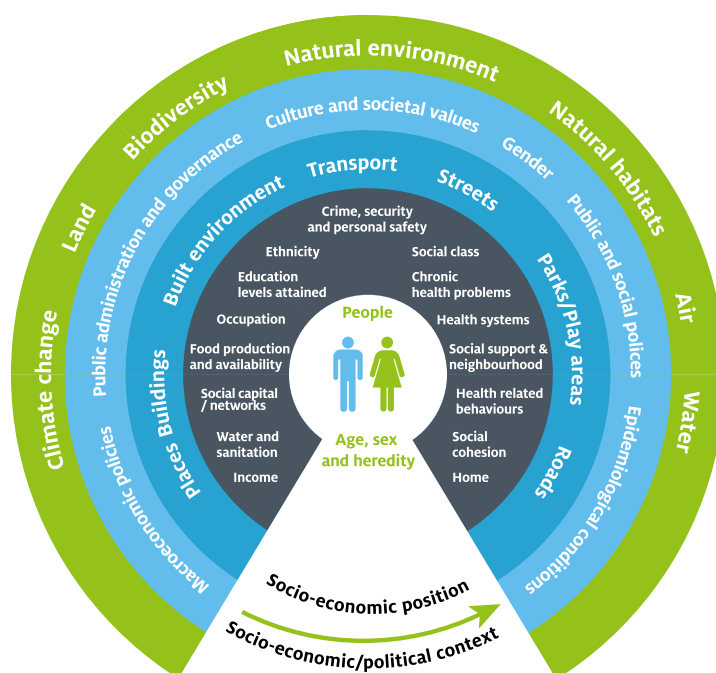

Figure 1: Determinants of Health

(Adapted from Dalghren and Whitehead, 1991 and Grant and Barton, 2006)

---

38   All Ireland Traveller Health Study Team (AITHS) (2010) *All Ireland Traveller Health Study, Our Geels.* Department of Health and Children, Dublin (accessed 12 April 2023).
39   NíAodha, Grainne (2023) *Traveller Community suffer more from health conditions than general population – study,* BreakingNews.ie 29 August 2023.
40   Health Information and Quality Authority (2020) *Categorisation of 'extremely medically vulnerable' groups who may be at risk of severe illness from COVID-19: evidence review* [online] https://www.hiqa.ie/sites/default/files/2020-12/Categorisation-of-extremely-medically-vulnerable-to-COVID-19_Evidence-review.pdf (accessed 10 April 2023).
41   Health Information and Quality Authority (2021) *HIQA finds Travellers are at increased risk of infection and severe disease from COVID-19* [online] https://www.hiqa.ie/hiqa-news-updates/hiqa-finds-travellers-are-increased-risk-infection-and-severe-disease-covid-19 (accessed 10 April 2023).
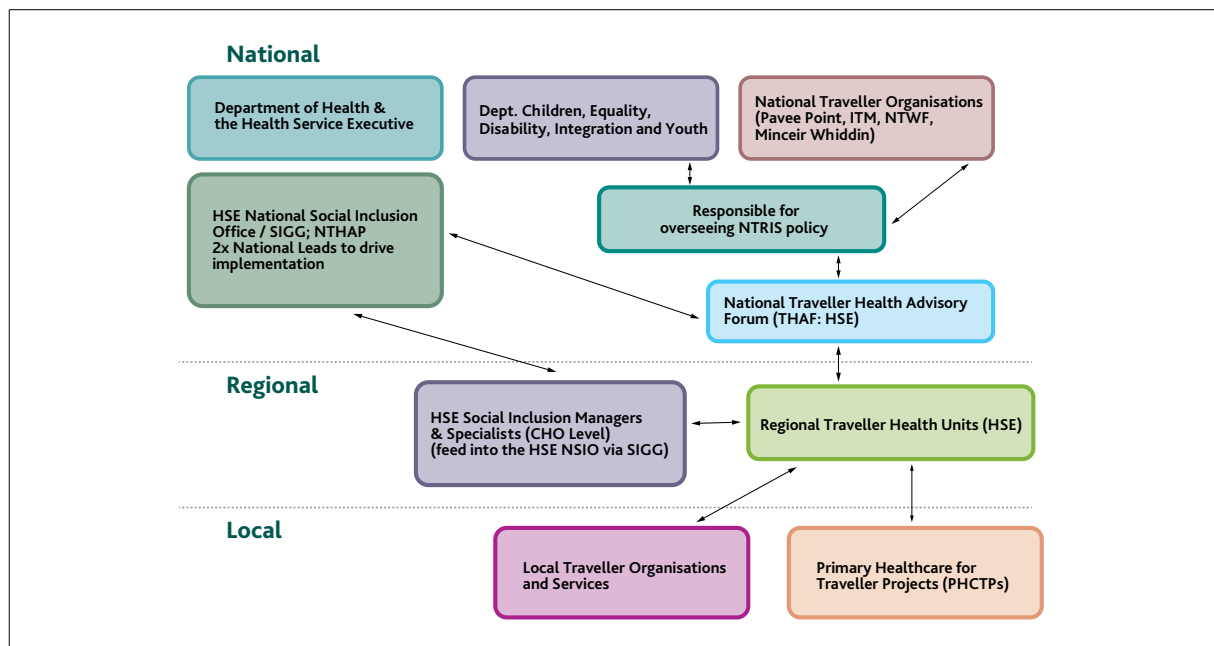
Figure 2: National, regional and local structures that support Traveller Health

The National Traveller Health Action Plan (2022: 55) outlines the PHCTPs as being a fundamental link between mainstream health services and the Traveller Community. PHCTPs are peer-led, Traveller health projects that train and employ over 300 Traveller community health workers across 27 PHCTPs nationally to engage with and provide health information to Travellers with the aim of bridging the gap between the Traveller Community and health services. The AITHS (2010) found that Traveller Community Health Workers are trusted members of the Traveller Community and over 83% of Travellers reported receiving health information from the PHCTPs and Traveller Community Health Workers. This was affirmed in the HSE National COVID-19 Traveller Service User Experience Survey with 86% of respondents reporting accessing health information from Traveller organisations during the pandemic[42].

Traveller Community and Mental Health in Ireland

Existing literature[43], reports[44], submissions[45] and briefing papers[46] developed by academia and policy and advocacy organisations reference and highlight the link between the wider determinants of health and mental health inequities experienced by Travellers before and during the pandemic. Whilst mental health was at the forefront of public attention during the pandemic, it was not an emerging issue for the Traveller Community who expressed concerns that the pandemic would exacerbate the existing Traveller mental health crisis.

42   HSE Social Inclusion (2020) N*ational COVID-19 Traveller Service User Experience Survey. The National Social Inclusion Office. Report of Findings.* [online] https://www.hse.ie/eng/about/who/primarycare/socialinclusion/travellers-and-roma/irish-travellers/traveller-service-user-experience-survey-final-1011201.pdf (accessed 12 April 2023).
43   All Ireland Traveller Health Study Team (AITHS) (2010) *All Ireland Traveller Health Study, Our Geels.* Department of Health and Children, Dublin (accessed 12 April 2023).
44   Pavee Point Traveller and Roma Centre (2015) *Young Pavees: Their Mental Health Needs, A Research Report.* [online] https://www.paveepoint.ie/wp-content/uploads/2016/01/Young-Pavees-Their-Mental-Health-Needs.pdf (accessed 27 March 2023
45   Pavee Point Traveller and Roma Centre 92021) *Submission to the Oireachtas Sub-Committee on Mental Health* [online] https://www.paveepoint.ie/wp-content/uploads/2015/04/OirSubCommitteeMentalHealth.pdf (accessed 28 April 2023).
46   Pavee Point Traveller and Roma Centre (2020) *COVID-19 and Irish Travellers: Interim Responses, Reflections and Recommendations* [online] COVIDREPORTWEB.pdf (paveepoint.ie) (accessed 27 March 2023).

Traveller organisations nationally campaigned for support to address Traveller mental health inequalities for over a decade following publication of unacceptable mental health statistics in the AITHS[47] as below:

- 62.7% of Traveller women and 59.4% of Traveller men reported their mental health was not good for one or more days in the last 30 days, compared to 19.9% of the non-Travellers

- 56% of Travellers said that poor physical and mental health restricted their normal daily activities, compared to 24% of the non-Travellers

- Overall Traveller rate suicide is 6 times higher than general population

- Suicide is 7 times higher for Traveller men and most common in young Traveller men aged 15-25

- Suicide is 5 times higher for Traveller women

- Suicide accounts for approx. 11% of all Traveller deaths

It is in this context that a number of initiatives and services exist locally, regionally and nationally, including the Traveller Counselling Service, Pavee Point Mental Health Initiative, the National Traveller Mental Health Network and others.

At national level and following concerted lobbying efforts there has been recognition of the need for targeted and mainstream actions to respond to Traveller mental health. Traveller specific policies with mental health specific actions and recommendations include the National Traveller Health Action Plan (2022-2027), the National Traveller and Roma Inclusion Strategy (2017 -2021) and the Final Report of the Joint Committee on Key Issues Affecting the Traveller Community. Some mainstream policies naming Travellers as a priotity group include Connecting for Life (2015 – 2024); Sharing the Vision, A Mental Health Policy for Everyone (2020-2030), the HSE Mental Health Promotion Plan (2022 – 2027) Stronger Together and Sláintecare Implementation Strategy and Action Plan (2021 – 2023). Relevant actions and recommendations from all policies are included in Appendix One.

Funding has been provided for the creation and staffing of nine HSE Mental Health Service Coordinator for Travellers posts nationally following a commitment in the National Travellers and Roma Inclusion Strategy 2017–2021 (NTRIS)[48] and once-off funding for seven Traveller led projects were funded by the HSE[49] under Dormant Accounts. In 2023, €300,000 in ringfenced funding was secured to support implementation of mental health actions contained in the NTHAP. While it is understood that this funding is recurring, Traveller organisations have highlighted the need for further investment and resourcing given the level of needs.

---

47   All Ireland Traveller Health Study Team (AITHS) (2010) *All Ireland Traveller Health Study, Our Geels.* Department of Health and Children, Dublin (accessed 12 April 2023).
48   Department of Justice and Equality (2017) *National Traveller and Roma Inclusion Strategy.* Dublin: The Stationery Office.
49   HSE National Social Inclusion Office (2023) *Traveller Mental Health Initiative* [online] Traveller Mental Health Initiative - HSE.ie (accessed 18 May 2023).

The 2021 Oireachtas Joint Committee on Key Issues Affecting the Traveller Community[50] report formally acknowledged that there is a mental health crisis impacting the Traveller Community. A substantial body of evidence drawn from newspaper articles, research reports and briefings developed before and following publication of the report reiterate submissions to and conclusions of the Joint Committee[51, 52, 53, 54]. As outlined in the report, submissions and inputs given at the Committee referred to the impact of the social determinants on Traveller mental health which include: discrimination, poor educational outcomes, lack of employment and substandard living conditions and the impact of bereavement and deaths by suicide on Travellers (2021: 26). Recent research by Villani and Barry[55] corroborates this, finding that Traveller participants stipulated an unambiguous link between poor mental health and material deprivation and low social status. The impact of bereavement and deaths by suicide on mental health is also acknowledged in the literature[56, 57,58]. Travellers are found to have a complex relationship with death and grief. Sudden and multiple close family deaths are frequent within the community because of lower levels of life expectancy, high infant mortality and high rates of suicide[59] and this impacts on mental health and wellbeing.

The AITHS[60, 61] also reported that Travellers experience a number of barriers as below, impeding access to mental health services and leading to poorer mental health outcomes:

- Lack of access to primary care
- Racism and discrimination on individual and institutional levels
- Lack of trust with healthcare providers
- Lack of culturally appropriate service provision
- Lack of engagement from service providers with Travellers and Traveller organisations
- Waiting lists
- Embarrassment
- Lack of information
- A third of Travellers said they had difficulty reading, while 50% reported difficulty reading instructions for medication which indicates poor functional literacy

Additionally trust, dignity and discrimination emerged as a key theme in the AITHS with the following findings demonstrating the scale of the issue:

- In the AITHS study the level of complete trust by Travellers in health professionals was only 41% this compares with a trust level of 82% by the general population in health professionals
- 53% of Travellers "worried about experiencing unfair treatment"
- Over 40% of Travellers had a concern that they were not always treated with respect and dignity
- Over 50% of Travellers had concerns of the quality of care they received when they engaged with service providers

50   Houses of the Oireachtas (2021) *Joint Committee on Key Issues Affecting the Traveller Community*. Dublin: The Stationery Office.
51   Editorial (2023) The Irish Times view on suicide in the Traveller Community. Irish Times, 23 February.
52   Capplis, Conor (2022) Government 'must act' on Traveller mental health crisis. Irish Examiner, 31 May.
53   McCurry Cate (2019) Traveller Community facing crisis over suicide rates, committee told. The Irish News, 29 September.
54   Holland, Kitty (2023) Traveller community: 'I know of three suicides in the last week – one a 14-year-old boy'. The Irish Times, 22 February.
55   Villani, J and Barry, M.M (2021) A qualitative study of the perceptions of mental health among the Traveller Community in Ireland, *Health Promotion International*, 36(5) pp 1450 – 1462.
56   All Ireland Traveller Health Study Team (AITHS) (2010) *All Ireland Traveller Health Study, Our Geels.* Department of Health and Children, Dublin (accessed 12 April 2023).
57   Tobin, M., Lambert, S and McCarthy, J (2020) Grief, Tragic Death and Multiple Loss in the Lives of Irish Traveller Community Health Workers, *National Library of Medicine*, 81(1) pp 130 – 154.
58   McGorrian C, Hamid NA, Fitzpatrick P, Daly L, Malone KM, Kelleher C. Frequent mental distress (FMD) in Irish Travellers: discrimination and bereavement negatively influence mental health in the All Ireland Traveller Health Study. *Transcult Psychiatry*. 2013 Aug; 50(4):559-78.
59   Ibid.
60   All Ireland Traveller Health Study Team (AITHS) (2010) *All Ireland Traveller Health Study, Our Geels.* Department of Health and Children, Dublin (accessed 12 April 2023).
61   Pavee Point Traveller and Roma Centre (2015) *Young Pavees: Their Mental Health Needs, A Research Report*. [online] https://www.paveepoint.ie/wp-content/uploads/2016/01/ Young-Pavees-Their-Mental-Health-Needs.pdf (accessed 27 March 2023).

03
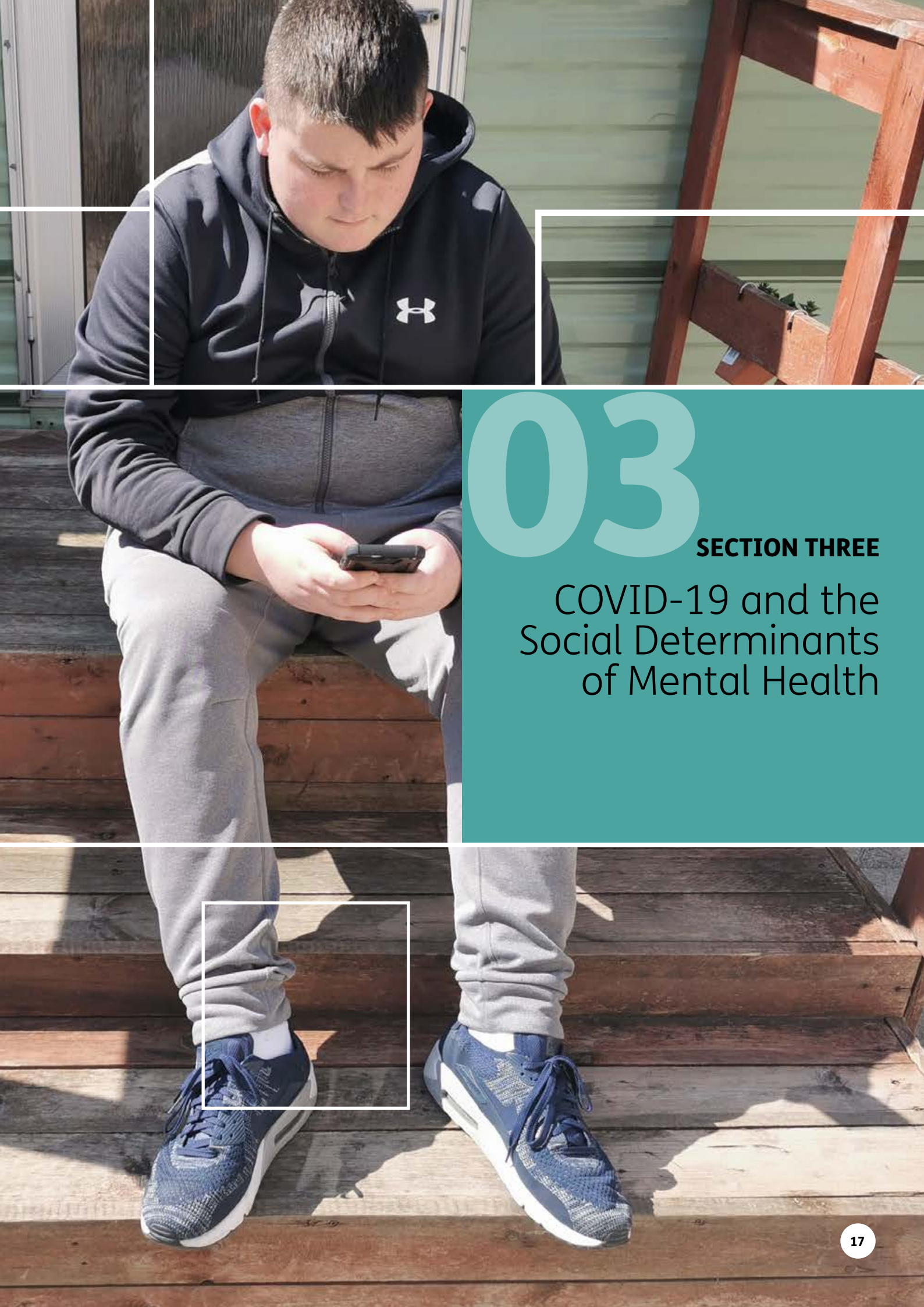
COVID-19 and the Social Determinants of Mental Health

Reviewing the literature in relation to COVID-19 and mental health, recent mental health research carried out in Donegal by Friel[62] explored the impact of COVID-19 on Traveller men and concluded that,

"the findings of this study suggest that the COVID-19 pandemic has exacerbated all determinants associated with the mental health challenges impacting Traveller men" (2022:60).

Friel specifically notes the impact of restrictions in terms of travelling, social engagement and loneliness and isolation for Traveller men. In terms of bereavement, attending funerals, wakes and grieving with bereaved family members is deeply important for members of the Traveller Community and restrictions in this regard during the pandemic also emerged as extremely difficult for affected Travellers[63]. A number of other themes emerge across the wider literature and are presented in more detail in the following sections. The themes presented in the chapter are longstanding issues experienced by Travellers as evidenced by the below statistics:

- Nearly 40% of Traveller households had more persons than rooms compared with less than 6% of non-Traveller households[64]
- Traveller overcrowding is 7 times the national rate[65]
- Over 90% of the majority population progress to secondary school and third level, in comparison to only 28% of Travellers[66]
- Less than 5% of Travellers go on to third level education[67]
- Only 17% of Traveller adults are employed[68]
- Travellers are 10 times more likely than White Irish to experience discrimination in seeking work[69]
- 39% of all Travellers meet the European Typology of Homelessness and Housing Exclusion (ETHOS) definition of homelessness[70]

COVID-19 and Accommodation

Marmot et al.,[71] looking at housing and rental market remarks that higher mortality rates for COVID-19 were related to overcrowding. In situations of overcrowding, we were more likely to see intergenerational transmission, as well as higher viral loads, because of people being unable to socially distance and follow infection control. People living in poor quality housing with exposure to damp and mould were more likely to have asthma and COPD and in turn experience more serious COVID-19 symptoms.

62   Friel, David (2022) *Our Lives, Our Voices, Our Future: Traveller Men.* [online] OUR-LIVES-OUR-VOICES-OUR-FUTURE-.pdf (donegaltravellersproject.ie) (accessed 08 April 2023).
63   Pavee Point Traveller and Roma Centre (2020) Funerals During COVID-19. [online] Funerals during COVID-19 Pavee Point (accessed 28 April 2023).
64   Central Statistics Office (2022) Census data.
65   Ibid
66   Ibid
67   Ibid
68   Ibid
69   McGinnity et al., (2017) *Who experiences discrimination in Ireland?* Dublin: Economic and Social Research Institute
70   Pavee Point Traveller and Roma Centre (2021) *The Traveller Community and Homelessness* [online] https://www.paveepoint.ie/wp-content/uploads/2015/04/Pavee-Point-Traveller-Homelessness-Advocacy-Paper-Oct2021.pdf (accessed 27 March 2023).
71   Marmot, M et al., (2020) *Build Back Fairer: The COVID-19 Marmot Review. The Pandemic, Socioeconomic and Health Inequalities in England.* London: Institute of Health Equity.

From a Traveller perspective, we know that these health inequalities, homelessness, significant overcrowding and poor-quality accommodation are long-standing issues which made it extremely challenging, if not impossible, for many Traveller families to engage in isolation and social distancing measures[72]. Many Travellers face considerable issues in relation to accommodation including damp, lack of running water and insufficient sanitation on official and unofficial halting sites. A report on the COVID-19 National Traveller Helpline notes:

"several female callers residing in women's refuges, and single mothers living in trailers with several children with no running water, toilets and electricity, described with frustration and concern their daily challenges during lockdown"[73] (2021: 6).

When combined, these factors put Travellers at greater risk of exposure to COVID-19. The EU Fundamental Rights Agency[74] notes that Traveller organisations in Ireland welcomed proactive action from the Department of Housing. The Department sent a circular to local authorities setting out the necessity of providing essential sanitation services on sites. However, organisations were at the same time concerned that once the crisis ended provision of such services would conclude. It was also noted that not all 31 local authorities had requested funding to implement sanitation measures. Organisations also welcomed Section 5 (7) of the Emergency Measures in the Public Interest (COVID-19) Act 2020 which set out that:

"all Travellers currently residing in any location should not be evicted from that location during the COVID-19 emergency, except where the movement 'is required to ameliorate hardship and provide protection' and subject to consultation with the Travellers concerned" (2020: 22).[75]

Ensuring that Traveller families would not be evicted during the pandemic was a central lobbying ask from Traveller organisations and was acknowledged as providing security and reassurance to Traveller families during this unprecedented time and

"indicative of a whole of Government approach to Traveller health issues during the pandemic[76] (2020: 4).

---

72   Armitage, R and Nellums, L.B. (2020) COVID-19 and the Gypsy, Roma and Traveller Population, *Journal of Public Health*, 185 (2020): 48.
73   Villani et al., (2021) A community-health partnership response to mitigate the impact of the COVID-19 pandemic on Travellers and Roma in Ireland, Global Health Promotion, 28 (2) pp 46 – 55
74   European Union Fundamental Rights Agency (2020) *Implications of COVID-19 pandemic on Roma and Travellers Communities* [online] https://fra.europa.eu/sites/default/files/fra_uploads/ie_report_-_covid-19_impact_on_roma_en.pdf (accessed 20 April 2023).
75   European Union Agency for Fundamental Rights (2020) *Coronavirus pandemic in the EU – Impact on Roma and Travellers.* Luxemburg: Publications Office of the European Union.
76   Pavee Point Traveller and Roma Centre (2020) *COVID-19 and Irish Travellers: Interim Responses, Reflections and Recommendations* [online] COVIDREPORTWEB.pdf (paveepoint.ie) (accessed 27 March 2023).

It was also significant in terms of addressing a major mental health stressor during this time. Coping with the stress of the factors set out above, while living in poor accommodation during the 'lockdown' periods of the pandemic, was found to be associated with greater levels of depression[77, 78]. During the lockdown periods of the pandemic people were confined to home for all the daily tasks of life; education, work, exercise, socialising, religious practice and so on. In the UK a survey by mental health charity MIND, found one in three Black, Asian & Minority Ethnic (BAME) survey participants responded that housing problems made their mental health worse during the pandemic, compared to almost one in four white people. An input from Pavee Point highlights how poor accommodation issues had a cumulative effect on mental health, noting the impact of lack of green spaces and recreational amenities in many sites and Traveller specific group housing schemes left Travellers without safe spaces to exercise and be outside during lockdowns[79].

COVID-19 and education

Distance learning was also consistently reported by Traveller organisations as placing considerable stress on young Travellers and their families during COVID-19, related both to available resources and capacity to provide the remote home-schooling support required. Remote schoolwork was difficult or next to impossible for families experiencing digital poverty - who did not have access to broadband and suitable IT devices[80]. Intergenerational educational disadvantage and low literacy rates also meant Traveller parents or family members frequently did not feel equipped to support children with schoolwork. A National Forum[81] exploring the implications of COVID-19 for education referred to DCYA (2020) figures[82] which reveal that Travellers make up 0.8% of the secondary school population and this number further drops following entry to the senior cycle. This has been linked to anxiety by young Travellers of navigating a new system, as well as low expectations that remaining in education would be rewarded through employment, given high rates of discrimination towards employing Travellers[83]. Reports from Traveller organisations and an Access Officers Roundtable[84] indicate that retention and return to school by young Travellers after remote learning measures were lifted remains a concern[85], unfortunately giving credence to early anxieties of Traveller organisations that COVID-19 would further perpetuate educational disadvantage among Travellers and dismantle hard fought for educational gains[86]. A publication from the same National Forum includes a section on 'Mental health, stress and isolation', and states that "mental health concerns are significant" (2020: 15) with students experiencing isolation, lack of confidence and feeling impacted by uncertainty. To address this the Forum set out the following mental health specific recommendations:

77   Amerio, A et al., (2020) COVID-19 Lockdown: Housing Built Environment's Effects on Mental Health, *International Journal of Environmental Research and Public Health,* 17 (16) 5973.

78   MIND (2020) *Existing Inequalities have made mental health of BAME groups worse during pandemic,* says MIND. [online] https://www. mind.org.uk/news-campaigns/news/existing-inequalities-have-made-mental-health-of-bame-groups-worse-during-pandemic-says-mind/ (accessed 17 April 2023).

79   Pavee Point Traveller and Roma Centre (2021) *Submission to the Oireachtas Sub-Committee on Mental Health* [online] https://www. paveepoint.ie/wp-content/uploads/2015/04/OirSubCommitteeMentalHealth.pdf (accessed 28 April 2023).

80   Higher Education Authority (2021) *Summary report on Sharing Good Practice in Higher Education Access and Participation During COVID-19.* [online] Available at: Report-on-Second-Sharing-Good-Practice-Event-November-2021-1.pdf (paveepoint.ie) (accessed 10 November 2023).

81   Travellers and Roma Third Level Education Forum (2020) *The Implications of COVID-19 for Traveller and Roma Transfer to and progression within Higher Education* [online] https://mcusercontent.com/ec6adb4654614b5b60b768f5c/files/4ec9e9bd-8128-4cdb-a65a-165840b3bf6a/COVID_Traveller_Higher_Education_v2_RESIZE.pdf (accessed 28 April 2023).

82   Department of Children and Youth Affairs (2020) *Statistical Spotlight, Young Travellers in Ireland* [online] https://assets.gov. ie/72732/824dc1d2acaf4e5a93d88e640ae1ef0f.pdf (accessed 28 April 2023).

83   Watson, D, Kenny, O and McGinnity, F (2021) *A social portrait of Travellers in Ireland.* The Economic and Social Research Institute, Dublin.

84   Pavee Point Traveller and Roma Centre (2020) *Report on Access Officers' Round Table Discussion on Implications of COVID-19 for Traveller and Roma Transfer to and Progression within Higher Education* [online] Access-Officers-Roundtable-Discussion-Report-10.5.21.docx.pdf (paveepoint.ie) (accessed 10 November 2023).

85   Delaney, M and Hennessy, M (2021) Many teenage Travellers not returning to school following pandemic closure challenges. *The Journal,* 21st September.

86   Pavee Point Traveller and Roma Centre (2020) COVID-19 and *Irish Travellers: Interim Responses, Reflections and Recommendations* [online] COVIDREPORTWEB.pdf (paveepoint.ie) (accessed 27 March 2023).

• Develop a specific programme of mental health support for Traveller and Roma students in second and third level education specifically targeting new entrants to third level.

• Encourage Traveller and Roma student engagement with well-being initiatives.

• Ensure that mental health concerns are addressed through all the student support services for Traveller and Roma.

COVID-19 and Unemployment

Only 17% of Traveller adults are employed. Travellers are almost 10 times more likely than non-Travellers to experience discrimination when looking for work[87]. As such many Travellers are engaged in casual, precarious areas of employment such as construction and service occupations[88]. This means that Traveller families are more likely to be vulnerable to higher levels of income poverty and deprivation than the general population and are

"known to experience relatively and persistently high levels of poverty, deprivation…and these inequalities are particularly acute for some, such as a minority living in mobile homes and caravans including on unofficial sites or on the roadside" (2020: 11)[89].

Reports from Traveller organisations found that Traveller men were experiencing increased unemployment[90] during the pandemic and this was having an impact on mental health and wellbeing. Reiterating this Villiani et al.,[91] refer to data gathered from calls to the national Traveller COVID-19 helpline in 2020 with financial problems and difficulties managing a weekly budget emerging as a key stressor for several callers, which served to amplify the mental health impact of the pandemic. Traveller men participating in research by Hodgins and Fox[92] expressed that not being able to provide for their family and ensuring the financial wellbeing of the family is a significant source of stress. An additional named consequence of unemployment and financial insecurity was an increased use of substances, alcohol and drugs, as coping tools which was also linked with greater mental health stress during this time both for individual users and for family members. Travellers in recovery also experienced particular mental health difficulties relating to addiction one-to-one supports being withdrawn at this time[93].

87   Watson, D, Kenny, O and McGinnity, F (2017) *A social portrait of Travellers in Ireland*. The Economic and Social Research Institute, Dublin.
88   Pavee Point Traveller and Roma Centre (2018) T*raveller Employment, Pavee Point Factsheet* [online] https://www.paveepoint.ie/wp-content/uploads/2015/04/Factsheets-Pavee-Point-EMPLOYMENT-1.pdf (accessed 26 March 2023).
89   National Traveller MABS (2020) *Building the Box: A review of services, facilities, and schemes with potential to improve financial inclusion from a Traveller perspective* [online] https://www.ntmabs.org/publications/development/2020/ntmabs-building-the-box-equality-report-final.pdf (accessed 26 March 2023).
90   COVID-19 NGO Group (2020) *Marginalised groups, promoting equality, inclusion and human rights in the COVID-19 crisis. A Joint Submission.* [online] https://www.cwi.ie/wp-content/uploads/2020/04/covid-19-ngo-group-joint-submission.pdf (accessed 26 March 2023).
91   Villani et al., (2021) A community-health partnership response to mitigate the impact of the COVID-19 pandemic on Travellers and Roma in Ireland, *Global Health Promotion,* 28 (2) pp 46 – 55.
92   Hodgins, M, and Fergal, F. "'Causes of causes': ethnicity and social position as determinants of health inequality in Irish Traveller men." *Health Promotion International,* 29 (2) pp 223-34.
93   Pavee Point Traveller and Roma Centre (2020) *COVID-19 and Irish Travellers: Interim Responses, Reflections and Recommendations* [online] COVIDREPORTWEB.pdf (paveepoint.ie) (accessed 27 March 2023).

Intersectional Experiences of COVID-19

Travellers are not a homogenous group and have differential experiences in relation to identity markers which in turn impact on mental health and wellbeing. In reviewing the available literature, age and gender emerged as themes discussed during COVID-19, with limited information available in relation to disability and sexuality. This is not to say that there were no issues for LGBTQIA Travellers or Travellers with a disability during COVID-19 but that there is a dearth of literature to draw on for the purposes of this report.

Age

A UN (2020:5) mental health briefing references the need to invest in and mind the mental health of our young people, noting that around half of all mental health conditions start by the age of 14. Traveller organisations consistently expressed concern for young Travellers' mental health during the pandemic and urged the development of proactive responses following research indicating that young Travellers are at risk of experiencing poor mental health[94]. One key issue affecting young Travellers during COVID-19 were pressures to continue educational progression without access to necessary supports and tools (e.g. in person support from Home School Liaison Officers, broadband etc). In response, Pavee Point and other Traveller organisations developed resources with youth friendly mental health promotion materials and disseminated these through local Traveller Community Health Workers and social media[95]. Older Travellers were also acknowledged as needing support while cocooning as they could not engage in day to day activities such as attending mass, socialising, visiting family and friends or going to places of significance such as pilgrimages and holy wells.

Gender

Submissions to the Joint Committee on Key Issues Affecting Travellers[96] note intersectional experiences of discrimination and oppression that Traveller women face. The National Traveller Women's Forum, along with the Galway Traveller Movement, highlight that Traveller women are traditionally the primary caregivers of the family, which is often made more difficult by the impact of the social determinants for e.g. raising a family where there are no safe places for children to play. Traveller women contributing to research perceive themselves as experiencing considerable and consistent stress and worry (identified as frequent mental distress in AITHS[97]) with stress overwhelmingly being caused by poor accommodation and discrimination[98].

Women's Aid service, a domestic abuse agency, reported a 43% increase in contacts in 2020[99]. This was similarly noted by other national domestic abuse agencies and reflects what has been termed a 'shadow pandemic' for survivors of domestic abuse[100].

94   Pavee Point Traveller and Roma Centre (2015) *Young Pavees: Their Mental Health Needs, A Research Report.* [online] https://www.paveepoint.ie/wp-content/uploads/2016/01/Young-Pavees-Their-Mental-Health-Needs.pdf (accessed 27 March 2023).
95   Pavee Point Traveller and Roma Centre (2020) *Minding Your Mental Health During COVID-19.* [online] https://www.paveepoint.ie/minding-your-mental-health-during-coronavirus-crisis-advice-and-tips/ (accessed 19 April 2023).
96   Joint Committee on Key Issues Affecting the Traveller Community (2021). *Final Report of the Joint Committee on Key Issues Affecting the Traveller Community.* Dublin: The Stationery Office.
97   All Ireland Traveller Health Study Team (AITHS) (2010) *All Ireland Traveller Health Study, Our Geels.* Department of Health and Children, Dublin (accessed 12 April 2023).
98   Hodgins, M. M.; Millar, M; Barry, M., (2006) "...it's all the same no matter how much fruit or vegetables or fresh air we get": Traveller women's perceptions of illness causation and health inequalities, *Social Science and Medicine,* 62 (8) pp: 1978 – 80.
99   Women's Aid (2020) *Annual Impact Report.* [online] https://www.womensaid.ie/app/uploads/2023/05/womens_aid_annual_impact_report_2020.pdf (accessed 19 April 2023).
100   Gleeson, C (2021): 'COVID-19 restrictions have led to 'shadow pandemic' of abuse. Domestic abuse groups have outlined the defencies in support services to Oireachtas'. *The Irish Times,* 3rd November.

Regarding COVID-19, gender and mental health, Traveller organisations also urgently advocated for support for Traveller women experiencing domestic violence stating that there had been a noticeable rise in cases among Traveller women too during the pandemic - echoing reports from national domestic abuse agencies. Organisations cautioned that restrictions would have particular implications for Traveller women, which was corroborated by data from the COVID-19 National Traveller helpline stating that Traveller women were

"excessively affected by the pandemic"[101] (2021: 6).

COVID-19, Racism and Discrimination

The National Action Plan Against Racism (2023 – 2027) understands racism as "structurally embedded" and reproduced through power dynamics between structures and institutions, a phenomenon referred to as 'systemic racism' (2023: 8). This results in groups and individuals being prevented from having full access to their rights and includes "racism that impacts on Travellers"[102].

The plan acknowledges that racism and discrimination are felt in many ways. Racism and discrimination are also found to be key causes of health inequalities, which Mike Ryan of the World Health Organisation (WHO) stresses, has "a direct psychological consequence" on individuals.

"Ultimately there is a health consequence to racism; a direct psychological consequence, a denial of service consequence, a marginalisation consequence, a poverty consequence, an education consequence and all of those leads to ill health"[103].

---

101 Villani et al., (2021) *A community-health partnership response to mitigate the impact of the COVID-19 pandemic on Travellers and Roma in Ireland, Global Health Promotion,* 28 (2) pp 46 – 55
102 *Department of Children, Equality, Disability, Integration and Youth (2023) National Action Plan Against Racism (2023-2027).* Dublin: The Stationery Office .
103   Hennessy, M (2021) Dr Mike Ryan: We're underestimating the tsunami of mental health issues emerging, *The Journal,* 14 August.

Racism and discrimination have adverse impacts on health and mental health in multiple ways, from unhealthy coping mechanisms, lacking access to education, employment, accommodation and psychological impacts. A meta-analysis carried out by Paradies et al., (2015:24)[104] found a stronger association between racism and mental health than physical health, stating that the "correlation with poor mental health remained twice as large as the correlation for poor physical health". This signifies the very real, long lasting and severe impacts of racism and discrimination.

Research exploring mental health and suicide in Travellers details racism and discrimination as a key determinant affecting poor mental health outcomes for Travellers prior to COVID-19[105]. The AITHS (2010) found that over 40% of Travellers experienced discrimination in accessing health services and the majority of service providers responding to the AITHS (66.7%) agreed that discrimination against Travellers occurs in the health services. Burke (2020) also distinctly identifies racism and discrimination at individual and institutional level as a root cause of poor mental health and suicide in the Traveller Community[106]. Traveller participants responding to research by Villiani and Barry[107] echo this referring to trauma, stress and worry linked to prejudice, discrimination and bullying as having

"a significant detrimental effect on their mental health status, as well as their sense of identity" (2021:1456).

Examining literature from 2020 onwards, a 2020 EU Fundamental Rights Agency (FRA) report documents anti-Traveller racism in media reporting and online comments[108] with this also being noted by Traveller organisations[109] [110] and being linked to additional anxiety and stress for Travellers during this time. A 2021 input to the Oireachtas Sub-Committee on Mental Health by Pavee Point[111] references online hate speech targeted at Travellers during the pandemic resulting in Travellers feeling like second class citizens. Villani et al.,[112] also comment that the capacity of Travellers' to follow public health messaging around COVID-19 was limited and this was

"compounded by widespread discrimination and the lack of culturally-sensitive communication on COVID-19" (2021:2).

This overview of the literature indicates the complexity and the disproportionate depth of challenges experienced and navigated by the Traveller Community during the pandemic. It sets out the harrowing context this research takes place in and signifies the importance of addressing the social determinants of health for Travellers, which frames the following section looking at the research findings.

104   Paradies, Y et al., (2015) Racism as a determinant of health: a systematic review and meta-analysis. PLoS One 10 (9).

105   S3 Solutions (2021) *South Dublin Travellers Report. Nature, extent, and impact of suicide among the Traveller Community in South Dublin County and Ballyfermot* [online] https://www.ctdg.ie/wp-content/uploads/2023/02/South-Dublin-Traveller-Report.pdf (accessed 19 April 2023).

106   HSE Traveller Health Unit Cork/Kerry (2020) *Responding to Suicide, A shared approach for Traveller organisations and health services.* [online] https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/strategy-implementation/local-action-plans/travellers-responding-to-suicide-plan.pdf (accessed 20 April 2023).

107   Villani, J and Barry, M.M (2021) *A qualitative study of the perceptions of mental health among the Traveller Community in Ireland, Health Promotion International,* 36(5) pp 1450 – 1462.

108   European Union Fundamental Rights Agency (2020) *Implications of COVID-19 pandemic on Roma and Travellers Communities* [online] https://fra.europa.eu/sites/default/files/fra_uploads/ie_report_-_covid-19_impact_on_roma_en.pdf (accessed 20 April 2023).

109   Joyce, B (2020) Conditions for Travellers have been difficult in the COVID-19 shutdown. *The Journal,* 6 June.

110   Pavee Point Traveller and Roma Centre (2021) *Urgent Action on Traveller Health Plan Needed As COVID-19 adds to Traveller mental health crisis* [online] https://www.paveepoint.ie/urgent-action-on-traveller-health-plan-needed-as-covid-19-adds-to-traveller-mental-health-crisis/ (accessed 20 April 2023).

111   Joint Sub-Committee on Mental Health (2021) *Impact of COVID-19 on Mental Health of Travellers, Pavee Point* [online] Joint Sub-Committee on Mental Health debate - Tuesday, 13 Jul 2021 (oireachtas.ie) (accessed 18 March 2023).

112   Villani, J and Barry, M.M (2021) A qualitative study of the perceptions of mental health among the Traveller Community in Ireland, *Health Promotion International,* 36(5) pp 1450 – 1462.
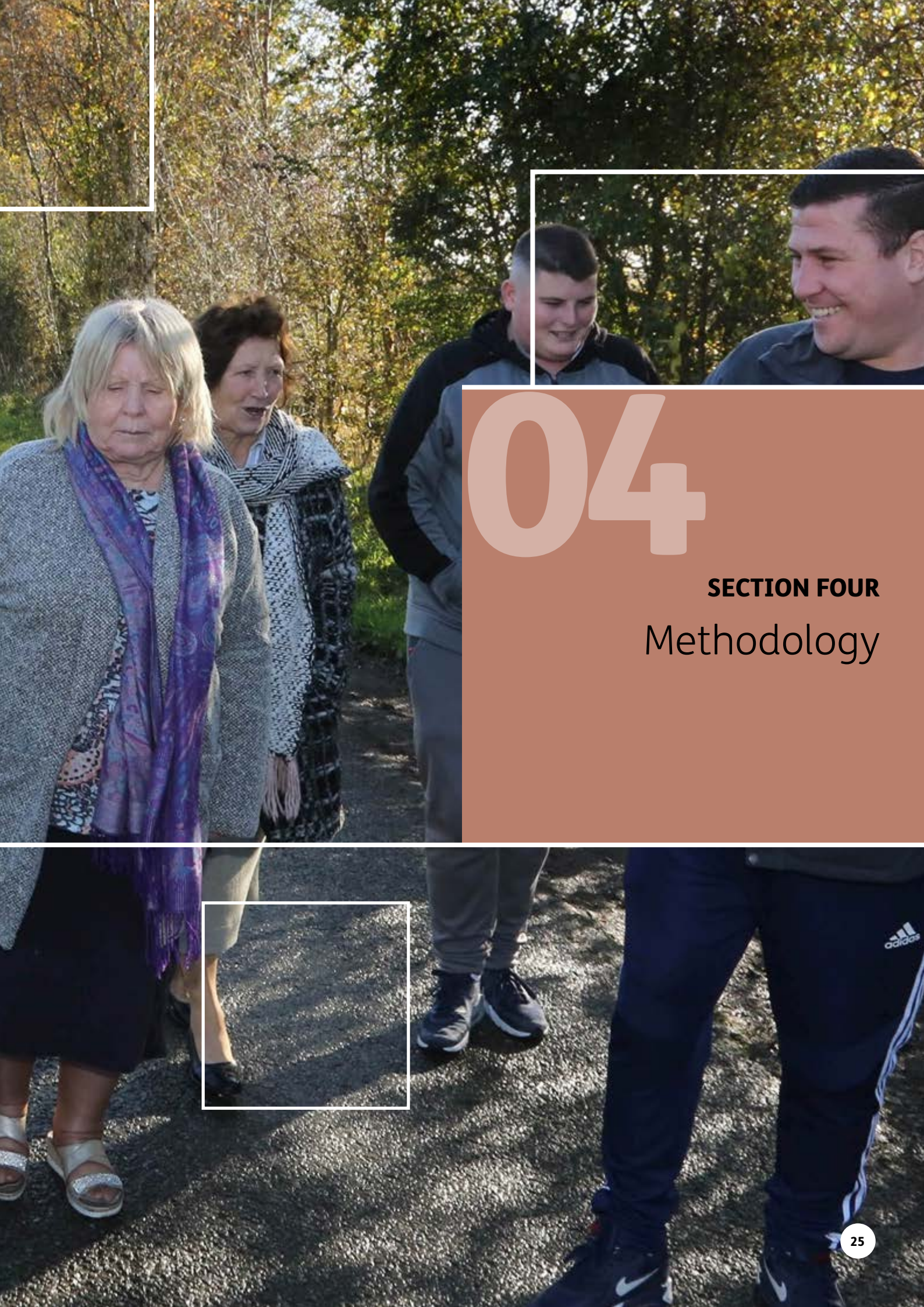
04

Methodology

Research Design

Travellers' mental health experiences take place within a complex web of systemic discrimination and racism that have implications across multiple social determinants of mental health. These experiences were shaped in particular ways throughout COVID-19 and have yet to be fully explored and understood. Therefore this research embedded a participatory qualitative design to explore participants' perspectives on the impact of COVID-19 on the Traveller Community. A qualitative design is useful for generating rich, in-depth and contextualised accounts of lived experiences and supporting participants to express their own experiences, in their own ways and their own words. It is particularly important in the absence of an ethnic identifier in mainstream mental health services and COVID-19 data that mental health experiences of Travellers are captured, made visible and heard so we can generate clear understandings and recommendations going forward.

Drawing on community development principles of collectivity, empowerment, participation, social justice and human rights[113], the research was designed with input from and undertaken in collaboration with Pavee Point. This is crucial as research drawing from community work principles is politically motivated and concerned with the achievement of social change, social justice and equality. In order to realise this, it is critical that the research design is informed by and led in collaboration with Travellers to ensure that the research is participatory and that processes of oppression are not reproduced. As such this research is grounded in active partnership for research design and analysis and challenges traditional exclusion of marginalised voices from research.

The research was supported by carrying out desk research to inform the literature review, six focus groups with Travellers and organisations, one key informant interview with a HSE Mental Health Coordinator for Travellers and input from three HSE Mental Health Coordinator for Travellers via written responses to a short survey. We sought to build representative insight and strong analysis of the key issues affecting Travellers' mental health during COVID-19 and as such looked to meet with Traveller men and women who felt comfortable speaking to these issues. We engaged with Traveller Community Health Workers and HSE staff who were able to contextualise the work and approaches taken during this time. Through focus groups we spoke with 36 Travellers, including Traveller Community Health Workers who worked on the frontline during the pandemic in relation to mental health. Focus groups were held with groups in Dublin, Meath, Longford and Donegal to bring a national perspective to Travellers experiences.

The focus groups were facilitated and conducted by Pavee Point to ensure accessibility of the interview and comfort of research participants. Four focus groups were held in person and two were held online. Two focus groups were held with Traveller men only. Two focus groups were mixed and two were comprised of Traveller women only. Participant ages ranged from early 20s to early 70s. The semi-structured interview with the key informant was held online.

---

113   Community Work Ireland (2016) *All Ireland Standards for Community Work* [online] https://www.aieb.ie/Fwp-content/uploads/2021/10/All-Ireland-Standards-for-Community-Work.pdf (accessed 20 April 2023).

Privacy and confidentiality of all participants was assured, and consent was sought and secured from all participants. Participants were reassured of their ongoing right to withdraw from the focus groups, interviews or research at any stage without explanation. Following focus groups, a debrief was held with Pavee Point Mental Health Initiative staff to review and type up interview notes and initial comments. Findings from focus groups are set out in relation to the order the focus groups took place in e.g. FG1, FG2 rather than place names to preserve anonymity. Thematic analysis was used to analyse and extract patterns and themes emerging from the data. Pavee Point supported analysis and review of the write up.

The overall research aim is to explore and understand perspectives of members of the Traveller Community on the impact of COVID-19 on the mental health of Travellers. To realise this the following objectives were developed:

- Explore Traveller and key stakeholder perceptions of COVID-19 responses on Traveller experiences of mental health;

- Explore the impact of responses to the COVID-19 pandemic in Ireland for Travellers in the context of the social determinants of mental health;

- Explore Traveller and Traveller organisation views on approaches to tackling and responding to Traveller mental health inequalities post COVID-19;

- Recommendations for policy and service provision and next steps.

> **"** Drawing on community development principles of collectivity, empowerment, participation, social justice and human rights the research was designed with input from and undertaken in collaboration with Pavee Point Mental Health Initiative. This is crucial as research drawing from community work principles is politically motivated and concerned with the achievement of social change, social justice and equality. **"**

05

SECTION FIVE

Findings

Psycho-Social Distress

Upon opening focus groups, Traveller participants were asked to reflect upon their early memories of the pandemic. The majority of participants responded that in the very early stages they, like many other non-Travellers and Travellers, did not register that COVID-19 was to be taken seriously and "gave it no heed". COVID-19 seemed like something that was happening far away, but this quickly changed once cases began to be reported in Ireland. Upon realising the serious risk posed to health participants recalled feeling afraid, worried and panicked which evolved into loneliness, isolation, depression and stress over time. Participants felt this was compounded by negative multiple environmental and social stressors such as misinformation, quickly changing public health messaging shared through social media, overcrowding, financial strain and fear for their own and other family members health.

"There was a lot of mixed information, it kept changing and social media didn't help because everyday between the news and social media it was panicking people and stressing them out" FG 4

Participants also highlighted concerns in relation to being unable to implement advised measures such as isolation. It was evident to Travellers and organisations from the outset that Travellers were immediately at a disadvantage in their capacity to remain safe.

"How were you to isolate in trailers, only one or two bedrooms and one toilet – couldn't not touch anything, Travellers had that harder, and usually a lot of people in a house" FG 2

Many recounted the inability to isolate when living in an overcrowded house where two or even three families were sharing space and a bathroom. This was similarly echoed by participants living in a trailer[114] whereby, even when offered another facility by the local authority, they could not leave their partner to manage their family alone for a 14-day period without support and a mother could not isolate with four or five young children to care for. On top of this it was difficult to endure lockdown measures in overcrowded and, in many cases, poor quality, accommodation.

"The living conditions was highlighted all the time, if you look at the sites, the portaloos, the no running water, and in houses the amount of overcrowding, sharing with families – the amount of people living out the back of grandparents. It kinda highlighted what was going on and a lot of tensions developed on sites" FG 6

"The county council contacted me, I asked for a bigger trailer and they said they can give a one bedroom apartment but I couldn't leave my wife and kids and couldn't get a house but got six portaloo toilets in the site" FG 1

---

114   Trailer meaning caravan or mobile home

There was also considerable stigma held towards contracting COVID-19 in the early stages of the pandemic and participants discussed the shame and anxiety they had towards disclosing that they had COVID-19. To protect themselves from the stigma many were hesitant to engage in testing or to disclose that they had COVID-19 in the beginning to others. This changed as messaging by organisations and other Travellers normalised the disease.

"A friend got the covid and the HSE rang me four times and I had to go and get tested...I cried when I knew I had to go into the centre, I wouldn't want to get the covid in case people talked about me" FG 3

"You had to hide that you had covid at the start, thought it was terrible to have it – a lot of Travellers did hide it, living in a small community and you didn't want people to know". FG 3
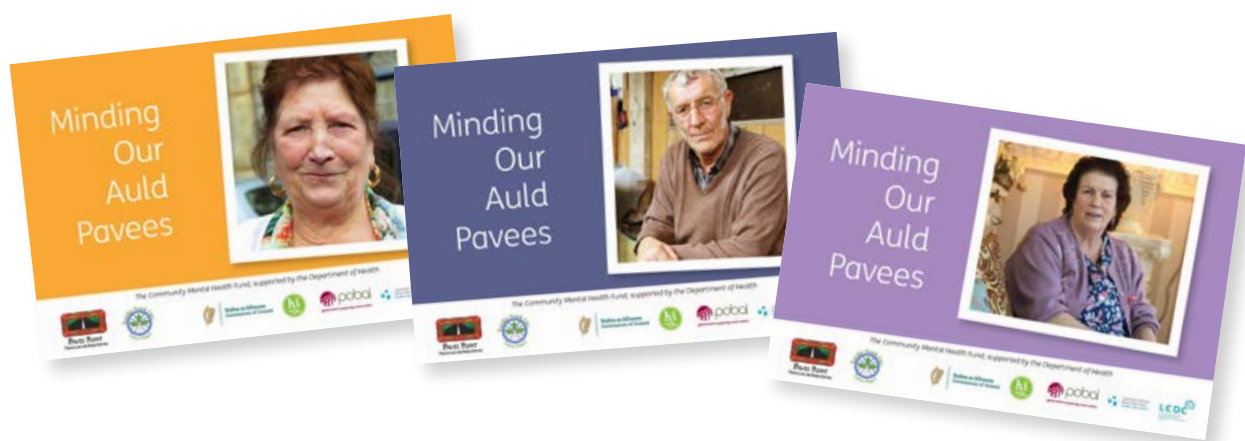
Movement Restrictions

Participants spoke about the impact of the movement restrictions, first reflecting on the value they place on being able to visit friends and family in different parts of the country or in England which is a meaningful part of being a tight-knit community. The inability to travel was very difficult, particularly at times of bereavement or ill health.

"It did affect people's mental health big time, being cooped away and our freedom being taken away". "The lack of amenities in the sites, no amenities on the sites, it was really stressful for the adults and children and there's absolutely nothing for the children to do – no children's facilities" FG 3

"I was weeks in the house and couldn't see the grandkids or anything – and that was lonely" FG 4

"It was hard not to visit the older Travellers cocooning, you had to chat them through the window and it's very important to Travellers to meet and visit so that was hard" FG 1

Restrictions in relation to bereavement, funerals and grief emerged across all focus groups as still having an impact post pandemic. Some participants spoke about the grief of saying goodbye to loved ones through phones and video calls and loved ones not receiving the funeral they felt was appropriate or deserved.

"Getting called on zoom or video calls to say goodbye, that was very hard and you couldn't grieve properly, that was really hard for people" FG 5

"My grandfather's brother died, he couldn't see his brother for the month he was sick, he didn't have a smartphone and he had to watch the funeral on his phone. It was really hard on them (older Travellers) – they were finding it really hard not to visit families, they want to do it in person, not over the phone" FG 1

While exploring this, participants stressed that many Travellers are still deeply affected by their experiences in relation to funerals and visiting people who were dying in hospitals. Participants highlighted that Travellers place a significant meaning in expression of family values. Going to wakes and funerals is a mark of respect and felt tantamount to disrespect not to attend. It was "not doing right" by both bereaved and departed. Because of this many perceived attending a funeral or burial as a risk worth taking and the morally right thing to do.
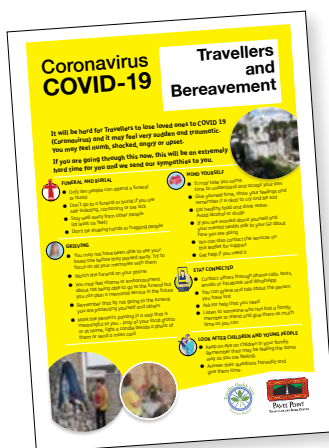
"Funerals were hard, the fact we couldn't say goodbye to people the way we should, you know what I mean and you weren't allowed to have people in your home...my granduncle passed and he didn't get the funeral that he should have, no flowers nothing, and he was very close to his grandchildren and they weren't allowed to go to the funeral. He was buried down very low and when he died in the hospital whatever sheets he was in, he was wrapped in and put in the coffin so there was no goodbye or anything like that" FG 5

"Even if you did go to the funeral you couldn't go in and you stood along the wall and you looked but we spread out along the walls in the graveyard to see someone being buried from a distance and you couldn't hear the priest saying the prayers or anything and if someone was dying only one person could go to the hospital so that was very, very hard on the family" FG 5

Related to this was the impact of relationships with the local Gardaí. All focus groups referred to Garda checkpoints being strategically placed outside sites or estates where a number of Traveller families lived. Participants felt that Travellers were particularly targeted during COVID-19 with Traveller men driving vans frequently stopped to account for movements.

"You came out of the site and then there was a checkpoint and I feel that was mainly for Travellers" FG 6

Reports of Gardaí coming onto sites during the pandemic to prevent/break up gatherings for funerals or other events was widely reported. The way that these events were described by participants as being managed also exacerbated the poor pre-existing relationships with the Community Guards. One focus group recalled being asked to manage behaviour of other Travellers on a site as Traveller Community Health Workers and having to explain that they were not there to do the job of the Guards.

"We can't, we're not here to do your job".

This was echoed in other focus groups with one noting that the relationship with Guards

"was never great anyway"

but it got worse during COVID-19. Another group referred to the Guards coming in heavy handed late at night and this being a poor way to enforce the movement and social distancing restrictions as it further led to a breakdown in trust and good relationships.

Education

Education consistently emerged as a key stressor for parents during the pandemic. Participants noted the multiple challenges presented to supporting children with remote learning from lack of access to laptops or tablets, lack of broadband facilities and lack of I.T skills. Participants analysis of this was that the shift to online services failed to take account of diversity of needs, literacy and digital poverty and that there were many people, including Travellers, who would not be able to succeed in this environment.

"A lot of children fell behind from the start...computers were sent home to parents in some cases who barely knew how to write their own name...so they weren't trying to be fair to everyone and accommodate everyone. And you know, you're twenty minutes trying to learn how to use a laptop alone so how can you do the homework?" FG 5

"You were expecting people to support their children who needed support themselves and this was overlooked" FG 6

Some parents were coping with environmental stressors of managing remote learning in the context of overcrowding and poor accommodation. Financial stress and family dysfunction exacerbated by pandemic stressors also disrupted capacity to support remote learning in some cases. Many parents had not completed the junior and senior cycle or gone into further education so did not feel equipped to complete homework with their children. One mother reflected on feeling overwhelmed and helpless. She found it difficult to communicate with the teacher through the app the school had established to disseminate and retrieve homework. The teachers were sending material, but many mothers felt overwhelmed and too stressed to cope with homeschooling. In the midst of so many other stressors it fell down the list of priorities.

Parents were in agreement that Traveller children had experienced a significant impact on their education as a result of COVID-19 and had not yet recovered from this.

"A lot of homeschooling wasn't getting done, a lot of parents were not able to read and write, a lot of children missed out on a year or two of quality education and children didn't want to go back afterwards – some were 14 when it started and 16 when it was over and wanted to finish up then". FG 6

"I have a daughter and she is doing the Leaving now and I think the damage it did to her education...she was finding it hard to learn over zoom...she says COVID did damage to her education and she went in today and said I don't think I will do good, I just said try your best you know" FG 5

Unemployment

Under the theme of employment all focus groups felt that unemployment linked to the pandemic had a substantial impact on Traveller men which is still ongoing. While this was predominantly characterised as stress related to loss of structure and routine, financial strain and the impact of remaining in place as a Traveller there were also references to identity and self-esteem for men being impacted by the removal of their role as a 'provider'.

"I think it affected Traveller men in a big way because they were all doing their own trade and the markets and that shut down. My husband couldn't cope at all to be honest and being locked down, the first couple of days it was okay but then we started getting stressed" FG 5

One young Traveller man stated,

"I remember the nerves, I think a lot of Travellers were used to going around the place, I felt like I was cracking up – a lot of Travellers move around, go about and like a lot of Travellers were doing nixers out in the country, we couldn't claim. I couldn't work out in the country or go and visit the wife's family, I struggled with all that" FG 1

Connected to unemployment, participants recounted the impact of financial and economic stressors on mental health during the pandemic. Money management and debt were noted by participants in three focus groups, particularly for younger men and women with young families. Participants referred to losing necessary informal and casual streams of work that supplemented the limited budget offered through social welfare in some cases, during COVID-19, which had an impact on the family budget. This led some families into borrowing money to cover expenses which are still being repaid.

"You were short of money, the social welfare payment was very small for everything the family needs so the men could bring in a bit extra through work and as everyone was home all day with nowhere to go, the money for groceries was higher, heating, electricity, etc and you couldn't afford it" FG 3

Gambling and greater substance misuse were also observed as becoming even more prevalent during COVID-19 in Ireland and this was also reported by Traveller organisations, particularly amongst Traveller men which could be linked to boredom and greater substance misuse in many cases. Some participants reported that Traveller men who previously had not gambled socially opened online accounts and are now still living with gambling addiction. In turn, the greater levels of drinking, substance misuse and gambling were identified as having a detrimental effect on already poor levels of mental health during this time - and this has a knock on effect for the entire family. It was difficult for Traveller men not to become involved in these activities when in group scenarios, and participants noted peer-pressure coupled with boredom as contributing factors.

"The gambling went with the drinking, and the betting online. It is a serious issue, we didn't do that before. People started making accounts…and so the money was spent in a week on drink and gambling and trying to figure out ways to stay busy" FG 6

"I think it definitely affected my mental health, you used to just do your own thing and now you're stuck with people 24/7 so then I started taking drugs as well and not just the drinking that's the truth of it" FG 6

Intersectional Experiences of Mental Health

In discussing the greater substance misuse and stress for families, participants also commented that they were aware that domestic violence increased as a result and there are ongoing mental health effects related to this for women and families. This was also impacted by perceptions of barriers in relation to accessing domestic violence services during COVID-19.

*"I remember people in domestic violence situations, people trying to control everything and couldn't go anywhere – I remember seeing women, they used to go off and get some space and things used to maybe happen once a week, it shouldn't happen at all, but it was happening five or six times a week then"*FG 6

"And the domestic violence and that was happening a lot – it was very bad and nobody could call to your door and before people could leave for a break and then there was nothing...and I also think that some women didn't get help for injuries and there will be long term effects from that" FG 2

In relation to gender, a few participants also discussed their experience of pregnancy and giving birth during COVID-19 with some wanting support from family members in hospital and feeling stressed and upset having to labour alone or attend appointments alone.

Age was referenced on a number of occasions with many participants recollecting that it was difficult for older Travellers who did not have the same access to the internet and social media so were more at risk of isolation and loneliness. Participants also commented that older Travellers were not afforded the supports that non-Travellers received from older persons organisations.

"That was very hard for the older Travellers, older people still sign an x for their signature you know what I mean and that was hard on them" FG 1

Finally, disability was named as a key issue such as Traveller families not receiving adequate support to support children with disabilities during the lockdowns. Disabled Travellers were also at much greater risk of isolation and poor access or no access to services in many cases at this time which had a consequential effect on mental health and wellbeing.

Traveller Organisations and Traveller Primary Health Care Projects

A number of participants are also employed as Traveller Community Health Workers and reflected on the stress that they encountered during the pandemic as frontline healthcare staff trying to support the specific needs of the Traveller Community. Many expressed how challenging it was to disseminate health information in the context of misinformation being rapidly shared on social media. They worked to use social media positively and develop and share Traveller specific information about restrictions, the vaccine and staying well during COVID-19.

It was overwhelmingly felt that Traveller organisations and Traveller Community Health Workers were effective in their work and in their absence health outcomes for Travellers would have been much poorer. Many participants noted that this should have been credited and recognised through Traveller Community Health Workers being entitled to the frontline pandemic payment given their work.

"But we were used too – we weren't entitled to the frontline payment – we were frontline staff and not respected and we were going beyond the call of duty. You had a call at six pm from someone very upset…"I think I have covid what do I do"… the work we did, we all became COVID-19 workers overnight and it was just as valuable as anyone else and we should be credited for that" FG 4

It was difficult and stressful work for Traveller Community Health Workers who were coping with the same stressors as other Travellers and trying to ensure that Travellers on the ground and in sites stayed well and were protected at this time. It was critical that a community development approach was taken to supporting Travellers and this was key to the successes of the work. In addition, there was a sense of disappointment expressed that provisions were made during COVID-19 that had been denied previously. It was difficult for participants to not voice anger about this as it clearly demonstrated what can be done when the necessary will and partnership is present.

"The testing and the vaccines, we were organising all that and making the relationships. Without us there would have been very little Travellers taking up the vaccine so there was a lot of reliance on us…we were going beyond the call of duty, I remember a woman she couldn't read or write and I had to go and show her from a distance how to do a test and people didn't know how to do bookings and we had to do that. We took calls on Saturday evening, early on Sunday and worked hard on behalf of Travellers" FG 5

"I really think without organisations we would never have been named as a priority group or gotten the eviction ban, people pushing for all that for Travellers, we wouldn't have got it and I don't think people know the amount of work that went into all that" FG 3

GP waiting and hospital waiting lists were nationally described as problematic with participants also referencing experiencing negative attitudes by the GP staff which echoes findings in previous research[115] concerned with Traveller experiences of healthcare. Traveller Community Health Workers described Travellers repeatedly using precious phone credit to unsuccessfully get a response from the GP. This increased stress and worry in families where parents felt worried about their own or their children's health and like they were not receiving satisfactory care at this time.

"Some receptionists are just not nice or polite in any shape or form and even to get the prescription refill is difficult too" FG 5

---

115   All Ireland Traveller Health Study Team (2010). *Our Geels: Summary of Findings*. Department of Health and Children: Dublin (https://assets. gov.ie/18859/d5237d611916463 189ecc1f9ea83279d.pdf).

Traveller Community Health Workers, along with other Traveller organisation staff, aimed to develop positive initiatives on the ground to support mental health and wellbeing which were well received. Traveller men took up playing handball and horseshoe throwing. Traveller women engaged in rounders and bingo, with children supported through activity packs in some cases. Food banks were a significant resource for many families as a humanitarian measure, along with deliveries of sanitiser and masks. These activities are not the traditional community development work that Traveller organisations and Primary Health Care for Travellers Projects (PHCTPs) are engaged in but given the unprecented nature of the pandemic, once-off targeted approaches for the most vulnerable families were considered helpful and important for supporting community solidarity and cohesion at the time. This took place alongside linking in with mainstream services and supports which remained the overarching goal of Traveller organisations.

Social Determinants of Health

Four HSE Mental Health Coordinator for Travellers in post during the pandemic shared reflections on work at this time. Reflections echoed contributions by Travellers' to this research in terms of the severe impact of the social determinants of health. All Coordinators worked on a National Traveller COVID-19 Helpline established by Offaly Traveller Movement and the Midlands Traveller Health Unit, Traveller organisations and the Traveller Mental Health service in response to the need for accurate information and reassurance for the Traveller community during the COVID-19 crisis. Additional responses were developed across the CHO areas by Traveller Health Units and generally also included supporting the development of online spaces and information and hygiene packs which were distributed by the Traveller Community Health Workers (TCHWs). It was noted in particular that the Primary Health Care for Travellers Projects (PHCTPs) were critical to the supports delivered at this time.

"As a worker, you felt powerless, Travellers were ringing up with not just one crisis, but several intermingled and interconnected problems...calls and cases came in with people looking for help and linking them with projects and the Projects Primary Health Care for Travellers Projects worked to a certain degree but it really did highlight the lack of investment in services..."
Traveller Mental Health Coordinator

Racism and Discrimination

Racism and discrimination remains a daily lived experience which has a significant impact on mental health for Travellers. This was not exclusive to COVID-19. In relation to the specific experience of racism, discrimination, mental health and COVID-19 a number of issues were highlighted, from perceiving that Travellers were profiled and targeted by Gardaí; poor responses by some local county councils; inadequate facilities to manage mitigation strategies set out by the government and online media commentary targeting Travellers.

"I definitely did not feel that Travellers and all were in this together, certain things maybe but Travellers…we feel like aliens sometimes – we were blamed for spreading this and doing that but no talk about other communities" FG 4

"I think there was a lot of anger there and people were looking to blame someone and saying we would never break a law ourselves but the Travellers will do it" FG 5

Participants reflected on the differential treatment and language towards Travellers online with attendance at Traveller funerals highlighted along with use of marquees. It was felt that these issues were not unique to the Traveller community and media focused on Travellers as a target for clickbait. Additionally, there appeared to be a lack of focus or criticism of those who profited from renting marquees.

"Traveller marquees were always talked about but say country people[116] were out drinking in the estates and getting marquees too and no Gardaí were going over there – the experience wasn't the same for the Travellers, we noticed that" FG 3

"The comments section online, the internet is a dangerous place don't go into the comments section, you will always see the 'k' word – if there is an article about Travellers you will always get the comments and if you engage you'll do more harm to yourself than good and it's hard to manage" FG 1

---

116   Country people – term used in reference to non-Travellers by Travellers.

COVID-19 and Mental Health Outcomes

Mental health was generally acknowledged as something that is very difficult for many Travellers to talk openly about. Similar to the general population, a considerable stigma towards mental health exists amongst Travellers, although this is shifting. Participants noted fears that other Travellers may be unsupportive and engage in stigmatising attitudes. Additionally, some feared services, such as social workers, could potentially use it against their family and they may be shamed and judged online and in person.

"No one would say back off my mental health isn't good. It is more acceptable to say you're a drug misuser than it is to say it about mental health" FG 2

Using online services during this time to respond to mental health difficulties was discussed with many commenting that they felt it was and will still be difficult for many older Travellers to use online services with few over the age of 30 possessing the necessary technical and literacy skills required. It was possible for younger Travellers to engage and acknowledged it would suit some younger Travellers well. However, there were also difficulties for some with lack of privacy, no space in a trailer/overcrowded house to engage and not always having a reliable wifi connection. It offers some positives, like privacy, but must be designed in a way that Travellers can afford to access it. Generally, participants felt that information about accessing services and availability of services is not adequate and a key issue to address.

Focus groups also reflected on the impact of bereavements and suicide at this time which many felt had increased during COVID-19. Some participants highlighted the need to understand the ongoing and constant stress on different fronts for Travellers - coping with pandemic stressors in general - which was underpinned by the impact of unemployment, finance worries, educational stressors and poor accommodation and additional family stressors in some cases, such as substance misuse or poor mental health amongst family members.

"The suicides have an effect...it impacts on us too, worrying about people, they live beside us. It all comes back to access to education, access to accommodation, its all suicide prevention...worrying all the time about the future and your family, we're surrounded by stress and its not good for your health" FG 2

However, it was noted that there has been some improvements gained in that there is a small increase in numbers of Travellers being more willing to discuss mental health and this has been supported by other Travellers, Traveller mental health workers, men's health workers and Traveller Primary Health Care Projects and local Traveller organisations. It has also been supported by Traveller organisations sharing messages that it is not shameful to discuss mental health and creating the space and conditions for conversations to take place alongside working with mainstream services to build an intercultural and supportive approach towards the Traveller Community.

"We had a number of people contact us with barriers to services...interesting for me because it was more uncommon, before COVID-19 Travellers were not as open so this is at crisis point" FG 4

"There is a stigma around men's mental health – it seems to be worse but I think some Traveller men are starting to come out and talk especially when you see the likes of Tyson Fury coming out and talking so that's role modelling" FG 4

However, there is still a long way to go, particularly post COVID-19, to support Travellers' recovery. Participants felt that isolation is still ongoing which is critical to address.

"I think people are still isolated from covid – they got comfortable with being on their own...before you could easily have 20 or 30 at football and now you're lucky to have 10 so that's the truth and I think that's all the mental health, it is worse for younger people. They struggle to come back out and around each other" FG 5

"To me it was bad before covid but during covid it was worse...there is still a stigma with mental health and I think it's gone worser" FG 4

"Travellers' mental health after covid is ten times worser, the fear is still there... and a lot of damage was done, a family member had a breakdown building up during covid and there was no support there" FG 1
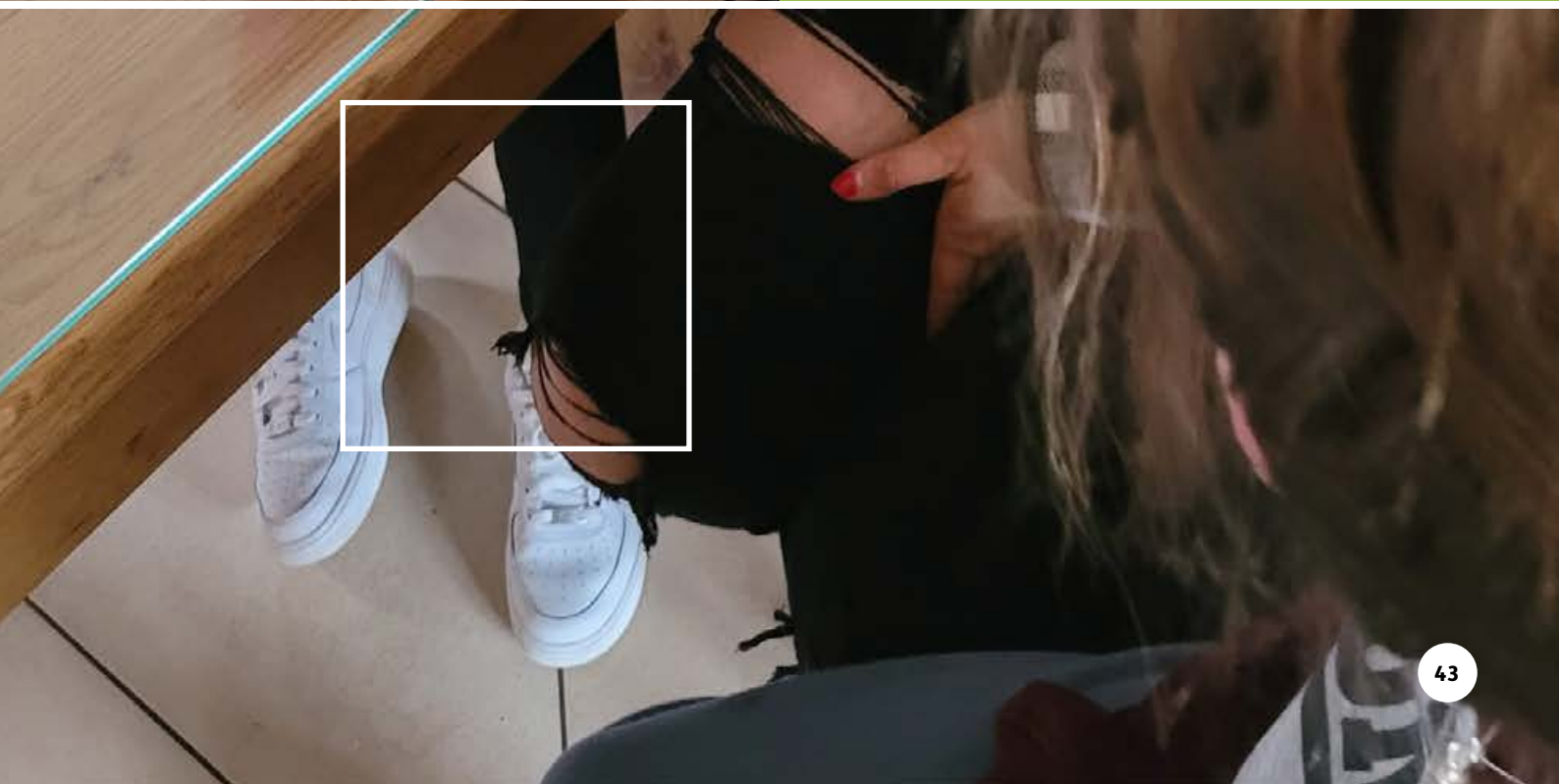
" ...the Traveller Community Health Workers for Travellers were critical to the supports delivered at this time. It was felt that the COVID-19 Helpline was a strong support for Travellers and received good uptake... "

06

Discussion

The data suggests substantial psycho-social or frequent mental distress and considerable increase in vulnerability to risk factors for mental ill-health and suicide that many Travellers and Traveller families had to navigate during COVID-19. They also illustrate the direct and indirect mental health effects and ongoing impact that this has had. This research has contributed little new information in relation to understandings of Travellers everyday realities, nor experiences of mental health and simply adds to the body of work setting out the interrelated and complex nature of factors and pressures leading to poor mental health and suicide in the Traveller Community in this sense.

These factors are explored and set out to draw attention to the fact of pre-existing structural inequalities and to contextualise the specific experiences of the Traveller Community during COVID-19. McKey et al[117]., find that themes in qualitative research exploring Traveller mental health appear to have become saturated which this research concurs with. In terms of what is new, the research explores Travellers experiences nationally and presents an overview of mental health as affected by COVID-19 specifically and captures perceptions of Travellers on their experiences during this unprecedented and pivotal period in our history.

As several research participants pointed out, there were no surprises for members of the Traveller Community in their experiences of COVID-19 and the message of 'we're all in this together' was not one that resonated with Travellers. The EU FRA report[118] corroborates this finding, noting:

"Commentary on the COVID-19 outbreak often describes the virus as a great equaliser, given that it does not discriminate based on class, race or other grounds. But a closer look makes clear that the virus has ravaged some communities more than others" (2020: 5).

This research finds that there was a strong acknowledgement that the cumulative effect of the determinants of mental health, poverty, accommodation, education, employment, racism and discrimination played a key role in Travellers' experience of mental health during COVID-19. This was a direct result of failure to invest in and support the development of adequate mental health support, Traveller specific accommodation provision and address poverty prior to the pandemic and served to reinforce the ways in which COVID-19 had a particular and disproportionate impact on many Traveller individuals and families. As set out by Mullen and Crowley (2022)[119], it also relates to policy ambiguity and gaps in the implementation of national Traveller-focused policy and lack of priority given in policy making processes towards taking account of cultural differences and addressing racism.

117 McKey, S et al., (2020) A rapid review of Irish Traveller mental health and suicide: a psychosocial and anthropological perspective, *Irish Journal of Psychological Medicine,* 39 (2) 223 – 233.
118 European Union Fundamental Rights Agency (2020) *Implications of COVID-19 pandemic on Roma and Travellers Communities* [online] https://fra.europa.eu/sites/default/files/fra_uploads/ie_report_-_covid-19_impact_on_roma_en.pdf (accessed 20 April 2023).
119 Mullen, R and Crowley, N (2022) Implementation of Traveller Policy: Terrain for Imagination and Challenge [online] Traveller-Policy-2022-AF-LR-FINAL.pdf (paveepoint.ie) (accessed 20 April 2023).

Research participants elaborated on the multiple ways in which COVID-19 restrictions affected Travellers' mental health and the ways in which this impact has endured. It was overwhelmingly evident in all the focus groups that the cumulative mental health impact of the pandemic stressors exacerbated the existing lived experience of frequent mental distress for many Travellers. McKey et al., (2020:223)[120] cite McGorrian et al., (2013) and AITHS (2010) which evidence that

"frequent mental distress (FMD) has shown to be associated with key life events including experiences of discrimination and bereavement".

FMD is defined as 14 or more days of poor mental health in the preceding month[121]. The amplified nature of the stressors at play during the pandemic, reinforced by lack of support, services and the constant pervasive nature of the stressors without any break, as discussed in the findings section, meant that there were few Travellers whose mental health was not in some way affected by the pandemic.
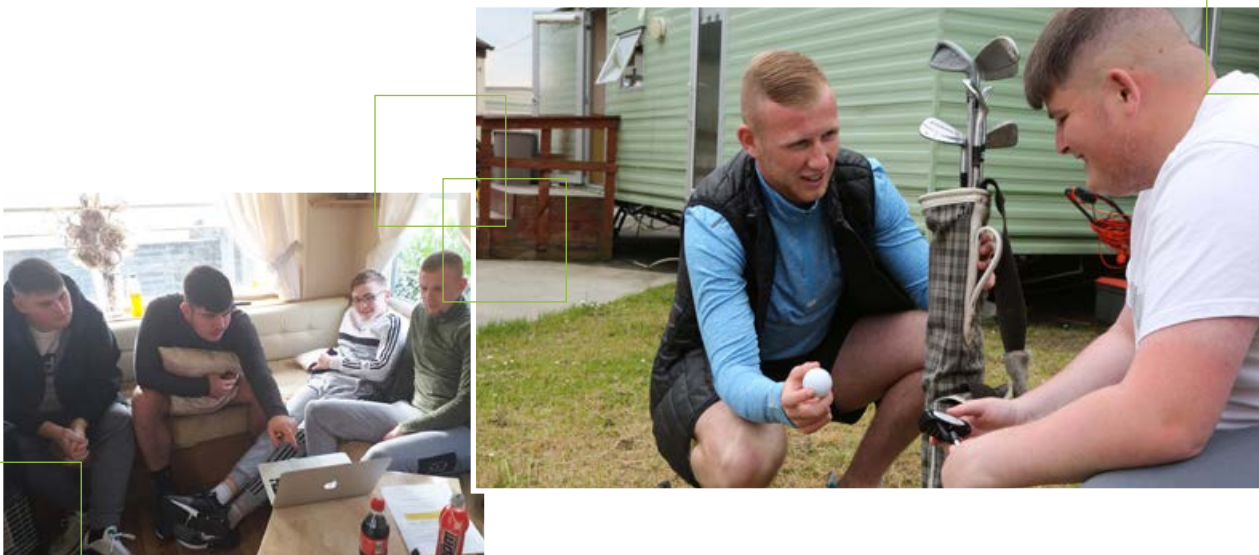
It was acknowledged on several occasions that the way in which Traveller sites are designed and invested in is critical for supporting health and wellbeing for the whole family – age friendly spaces should be developed for older Travellers to exercise and socialise; for young children and teenagers to play and interact safely and for others to walk, exercise in and be active and healthy. FRA (2020)[122] also finds the lockdown movement restriction measures affected Travellers disproportionately related to inadequate living conditions. Restrictions on movement affected the cultural expression of and engagement in family ties and drawing on the extended support structure. Thus, from this perspective, the pandemic was a difficult experience on a cultural and emotional level also. This was further exacerbated during times of family ill-health, losses and grief.

120 McKey, S et al., (2020) A rapid review of Irish Traveller mental health and suicide: a psychosocial and anthropological perspective, *Irish Journal of Psychological Medicine,* 39 (2) 223 – 233.
121 McGorrian C. et al., (2013) Frequent mental distress (FMD) in Irish Travellers: Discrimination and bereavement negatively influence mental health in the All Ireland Traveller Health Study. *Transcultural Psychiatry,* 50 (4) 559-578
122 European Union Fundamental Rights Agency (2020) *Implications of COVID-19 pandemic on Roma and Travellers Communities* [online] https://fra.europa.eu/sites/default/files/fra_uploads/ie_report_-_covid-19_impact_on_roma_en.pdf (accessed 20 April 2023).

During COVID-19 there was a shift by service providers to e-mental health and a strong promotion of digital tools to support mental health and wellbeing. Traveller organisations were in the midst of trialling these new ways of working with Traveller families through developing low threshold, accessible and culturally appropriate materials and quickly started to build an analysis of barriers to implementing this as a way of working and thus noted their concerns with this approach in relation to mental health. Mental health issues are sensitive for many people with people sharing information with professionals that they may not necessarily want family members to know which is difficult to avoid in situations of overcrowding on sites and in houses. Additionally, we know that literacy remains an issue for many Travellers with the AITHS indicating that over half of Travellers have poor functional literacy. This has implications for navigating and using technology. Other barriers noted were digital poverty with lack of access to connection, phones, laptops and so on. As such it is important that any digital measures undertake a health equity assessment and be culturally adapted in line with guidance from Traveller organisations.

Racism and discrimination came to the fore in this research as another factor having a significant impact on Travellers during COVID-19. It was strikingly visible that Travellers were not the exception in breaking some social distancing rules in lockdown, other communities engaged in similar behaviour during the pandemic. However, participants reiterated their perception that Travellers were represented as the sole community doing so, via the media and in social media comments. In addition, behaviours of some Travellers were generalised across the Traveller Community. These representations reinforced participants' feelings of marginalisation, exclusion, inequality of treatment and injustice, which have continued. The insights shared in relation to the impact of online commentary add weight to the need for Ireland's proposed hate speech laws, the Criminal Justice (Incitement to Violence or Hatred and Hate Offences). Moreover, experiences of racism and discrimination, alongside their cumulative effects tied to the social determinants of mental health, were identified as directly and indirectly leading to the avoidable losses of Traveller lives to mental ill-health and suicide during COVID-19.

07

Conclusion and Recommendations

It is clear that Travellers were at risk of poorer mental health outcomes from the outset of the pandemic given the lack of pre-existing protective factors and "greater exposure to pandemic related stressors" also indicated by studies finding that "the negative consequences of the pandemic have been most pronounced for racial/ethnic minoritized people"[123]. It is also starkly evident that Traveller Community Health Workers were exposed to considerable responsibility, stress, anxiety and fear during this time contending with the impact of multiple interconnected issues on Travellers physical and mental health. Traveller Community Health Workers were acutely aware of the potential outcomes for Travellers - family members and friends - at this time and bore significant responsibility for supporting their needs[124].

Poor mental health is inextricably bound up in structural inequalities, experiences of poverty, unemployment, poor accommodation, lack of education and racism and discrimination. Poor mental health has an impact on the individual, family, community and wider society. Mental health is an asset that must be valued and resources that foster good mental health should be prioritised. Good mental health is integral to functioning and thriving and what contributes to maintaining good mental health must also be valued.

Lack of implementation of Traveller specific policy, coupled with lack of Traveller inclusion in mainstream mental health policy and service planning has resulted in widening mental health inequalities for Travellers. This is also in the context of poor investment in mainstream mental health services and failure to make the required Traveller budgets available to support implementation of Traveller mental health specific actions. Policies have failed the Traveller Community through embedding structural racism and without interventions alongside investment in mainstream services mental health disparities for Travellers will continue to widen.

As such, in order to undo what has happened an approach of universal proportionalism and working harder where the need is greater (Marmot et al, 2020) is required, along with investment in the resources and systems that support mental health and wellbeing in order for meaningful and transformative change to take place. However, this cannot take place in isolation, and we also need proactive analysis of all policies to ensure that an anti-racist and health-in-all-policies approach is built in and a whole-of-government approach is taken to address the mental health needs of the Traveller Community.

123   Thomeer, M.B., Moody, M.D. & Yahirun, J (2023) Racial and Ethnic Disparities in Mental Health and Mental Health Care During The COVID-19 Pandemic. *J. Racial and Ethnic Health Disparities* 10, 961–976.

124   Pavee Point Traveller and Roma Centre (2021) *Taoiseach takes time out to thank Travellers* [online] Taoiseach Takes Time Out to Thank Travellers Pavee Point (accessed 3 April 2023).

As we progress into living with COVID-19 and into new phases of mental health care provision through increasing digitisation of services we must invest in tackling systemic issues in line with the vision of Sláintecare[125] of providing equal access to healthcare services based on need. The National Traveller Health Action Plan contains six targeted actions targeting mental health. €1.3 million has been provided to support implementation, including €300,000 allocated to support implementation of mental health actions. Given the scale and depth of mental health issues experienced by the Traveller Community, particularly post COVID-19 as evidenced in this report, it is clear that even greater investment and provision of cross-divisional sources of funding is required to bring about the breadth of systemic change that is urgently needed. As stated by Mike Ryan to Galway Traveller Movement (2021) it is not solely about resources. Commitment to a long term process of implementation and dealing with all the underlying factors that drive mental health problems is required if we are to seriously address Traveller health and mental health inequalities once and for all.

"There is no point giving people coping skills when in fact they're coping with unacceptable situations so we have to change both, we have to change the situations that people find themselves in and the stresses that they're under constantly and then we also have to give people more capacity to cope"[126]

125   Department of Health (2018) *Sláintecare Implementation Strategy and Action Plan 2021 – 2023.* Dublin: The Stationery Office.
126   Galway Traveller Movement (2021) *Dr Mike Ryan, Build Homes, Health, Hope 4.* August 9th 2021. Available at: https://www.youtube.com/watch?v=uoYXIgHVMV4 (accessed 28 March 2023).

Recommendations

1. Implementation of the National Traveller Health Action Plan (NTHAP)

The National Traveller Health Action Plan was published in 2022, with an associated recurring budget of €1.3 million and a National Traveller Health Implementation Group was established in 2023 to support implementation. However, ongoing significant investment and resources is required to ensure implementation and if Traveller health inequalities are to be seriously addressed once and for all. This includes recurring cross-divisional sources of funding, including mental health, to support Traveller organisations to provide community development and peer-led approaches to address Traveller mental health inequalities. It is also important that structures on local levels are supported and resourced to ensure implementation of local NTHAPs. This includes buy-in and representation from Heads of Service, including mental health and public health on local/regional NTHAP Implementation Groups.

2. Social Determinants Approach to Traveller Mental Health

Ensure proactive and holistic approaches to Traveller mental health through the urgent delivery of Traveller and Roma inclusion policy commitments, including those contained in the Programme for Government. Ensure a strong outcome focussed approach, robust implementation and monitoring plans with clear targets, indicators, timeframes and budget lines with actions being resourced and implemented by all relevant statutory agencies.

- Finalisation and publication of the National Traveller and Roma Inclusion Strategy (NTRIS).
- Publication and Implementation of a Traveller and Roma Education Strategy (TRES).
- Development and publication of a Traveller and Roma Mental Health Strategy.
- Implement all recommendations issued by the independent Expert Group on Traveller accommodation with a timelined implementation plan, tangible targets, corresponding accountability measures and budget.

3. Ethnic Data Essential

Implementation of ethnic equality monitoring, including use of a standardised ethnic identifier (consistent with national census) across all routine data administrative systems in health services, to monitor equality of access, participation, and outcomes in health in line with Sláintecare supporting a population-based approach to health.

4. Investing in a Sustainable Traveller Health Infrastructure

The value of our strong Traveller Health Infrastructure and in particular, the work of Traveller Primary Health Care Projects around the country, in responding to the pandemic and ensuring Travellers were protected during the crisis cannot be understated, including supporting mental health and well-being. In the absence of such an infrastructure, COVID-19 had the potential to have had a much worse impact on the community. Currently retention, progression and recruitment of Traveller Community Health Workers are significant threats to the viability of these projects and there is an urgent need to address this through pay parity, development of new progression routes and a broadening of the career paths within health services and broader public sector.

5. Award Pandemic Special Recognition Payment to Traveller Health Workers

Award the Pandemic Special Recognition Payment to Traveller Health Workers, employed by Section 39s, given their status and vital work as frontline health workers during the pandemic.

6. Traveller Proofing Required

Any new health developments need to be Traveller proofed to ensure that they do not further widen Traveller mental health inequalities. While tele/digital may offer new opportunities for engagement with services, it also has the potential to further exacerbate these inequalities if the specific needs and capacities of Travellers are not considered. Investment is required in developing the digital skills of Travellers and in providing access to computers and other technologies, including access to broadband in Traveller specific accommodation. Equality assessment and proofing of digital mental health service provision for Travellers is also required to ensure they do not exacerbate ongoing inequalities.

7. Mainstreaming Traveller Mental Health

Prioritise and mainstream Traveller mental health within the Department of Health and across the HSE into existing and forthcoming health policy and service developments, including the new model of care in relation to dual diagnosis.

8. Keep Travellers Well

A strategic focus on and investment required in mainstream and targeted initiatives to keep Travellers well. This includes scaling up and further strengthening existing Traveller mental health promotion initiatives within the existing Traveller health infrastructure in line with Stronger Together: The HSE Mental Health Promotion Plan, 2022-2027.

9. Training and Capacity Building for Health Service Providers

Prioritise ongoing in-service, anti-racism and discrimination training for all staff working within mental health and health services as per commitments in NTHAP and line with Public Sector Equality and Human Rights Duty (Section 42, IHREC Act 2014). Training should be reinforced through the development and implementation of anti-racism protocols and good practice guidelines and policies.

"Poor mental health is inextricably bound up in structural inequalities, experiences of poverty, unemployment, poor accommodation, lack of education and racism and discrimination."

Bibliography
& Appendices

Bibliography

Adhanom Ghebreyesus, T (2020) Addressing mental health needs: An integral part of COVID-19 response. *World Psychiatry* 19 (2) pp: 129 – 130.

All Ireland Traveller Health Study Team (AITHS) (2010) All Ireland Traveller Health Study, Our Geels. Department of Health and Children, Dublin (accessed 12 April 2023)

Amerio, A et al., (2020) COVID-19 Lockdown: Housing Built Environment's Effects on Mental Health, *International Journal of Environmental Research and Public Health,* 17 (16) 5973.

Armitage, R and Nellums, L.B. (2020) COVID-19 and the Gypsy, Roma and Traveller Population, *Journal of Public Health,* 185 (2020): 48

Capplis, Conor (2022) Government 'must act' on Traveller mental health crisis. *Irish Examiner,* 31 May.

Central Statistics Office (2016) Profile 8 Irish Travellers, Ethnicity and Religion [online] Irish Travellers - Socio-economic Aspects and Housing - CSO - Central Statistics Office (accessed 26 March 2023).

Central Statistics Office (2023) *Census of Population – Summary Results* [online] https://www.cso.ie/en/releasesandpublications/ep/p-cpsr/censusofpopulation2022-summaryresults/migrationanddiversity/- (accessed 1 June 2023).

Community Work Ireland (2016) All Ireland Standards for Community Work [online] https://www.aieb.ie/Fwp-content/uploads/2021/10/All-Ireland-Standards-for-Community-Work.pdf (accessed 20 April 2023).

COVID-19 NGO Group (2020) *Marginalised groups, promoting equality, inclusion and human rights in the COVID-19 crisis. A Joint Submission.* [online] https://www.cwi.ie/wp-content/uploads/2020/04/covid-19-ngo-group-joint-submission.pdf (accessed 26 March 2023).

Dahlgren, G. and Whitehead, M. (1991) Policies and Strategies to Promote Social Equity in Health. Stockholm: Institute For Future Studies.

Delaney, M and Hennessy, M (2021) Many teenage Travellers not returning to school following pandemic closure challenges. *The Journal,* 21st September.

Department of Children and Youth Affairs (2020) *Statistical Spotlight, Young Travellers in Ireland* [online] https://assets.gov.ie/72732/824dc1d2acaf4e5a93d88e640ae1ef0f.pdf (accessed 28 April 2023).

Department of Children, Equality, Disability, Integration and Youth (2023) National Action Plan Against Racism (2023-2027). Dublin: The Stationery Office.

Department of Health (2018) *Sláintecare Implementation Strategy and Action Plan 2021 – 2023.* Dublin: The Stationery Office.

Department of Housing, Local Government and Heritage (2022) *Total number of Traveller families in all categories of accommodation* [online] Available at: https://www.gov.ie/pdf/?file=https://assets.gov.ie/276540/6a100adc-c592-4845-a247-7be27ce457b2.pdf - page=null (accessed 23 September 2023)

Department of Justice and Equality (2017) National Traveller and Roma Inclusion Strategy. Dublin: The Stationery Office.

Department of An Taoiseach (2020), *'Report of the Social Implications of COVID-19 in Ireland. Preliminary Assessment',* available at: https://assets.gov.ie/74373/5cc1bbfe59b447d3b841fa43cecfc79d.pdf

Editorial (2023) The Irish Times view on suicide in the Traveller Community. *Irish Times,* 23 February.

European Union Fundamental Rights Agency (2020) *Implications of COVID-19 pandemic on Roma and Travellers Communities* [online] https://fra.europa.eu/sites/default/files/fra_uploads/ie_report_-_covid-19_impact_on_roma_en.pdf (accessed 20 April 2023).

European Union Agency for Fundamental Rights (2020) *Coronavirus pandemic in the EU – Impact on Roma and Travellers.* Luxemburg: Publications Office of the European Union.

Friel, D (2022) *Our Lives, Our Voices, Our Future: Traveller Men.* [online] OUR-LIVES-OUR-VOICES-OUR-FUTURE-.pdf (donegaltravellersproject.ie) (accessed 08 April 2023).

Gavin, B., Lyne, J., & McNicholas, F. (2020). Mental health and the COVID-19 pandemic. *Irish Journal of Psychological Medicine,* 37(3), 156-158. doi:10.1017/ipm.2020.72

Health Protection Surveillance Centre (2023) *Report on COVID-19 Deaths Reported in Ireland* [online] https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/surveillance/covid-19deathsreportedinireland/COVID-19_Death_Report_Website_v1.8_30052023.pdf (accessed 10 June 2023).

Health Information and Quality Authority (2021) *HIQA finds Travellers are at increased risk of infection and severe disease from COVID-19* [online] https://www.hiqa.ie/hiqa-news-updates/hiqa-finds-travellers-are-increased-risk-infection-and-severe-disease-covid-19

Health Protection Surveillance Centre (2021) *Epidemiology of COVID-19 in Ireland* [online] https://epi-covid-19-hpscireland.hub.arcgis.com (accessed 15 April 2023).

Health Protection Surveillance Centre (2021) *COVID-19 Interim Case Definition* [online] https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/casedefinitions/covid-19interimcasedefinitionforireland/ (accessed 14 April 2023).

Health Information and Quality Authority (2021) *Evidence synthesis for groups in vaccine allocation group nine – those aged 18 – 64 years living or working in crowded conditions* [online] https://www.hiqa.ie/sites/default/files/2021-03/Evidence-synthesis_Vaccine-allocation-group-9.pdf

Health Information and Quality Authority (2020) *Categorisation of 'extremely medically vulnerable' groups who may be at risk of severe illness from COVID-19: evidence review* [online] https://www.hiqa.ie/sites/default/files/2020-12/Categorisation-of-extremely-medically-vulnerable-to-COVID-19_Evidence-review.pdf (accessed 10 April 2023).

Hennessy, M (2021) Dr Mike Ryan: We're underestimating the tsunami of mental health issues emerging, *The Journal,* 14 August.

Higher Education Authority (2021) *Summary report on Sharing Good Practice in Higher Education Access and Participation During COVID-19.* [online] Available at: Report-on-Second-Sharing-Good-Practice-Event-November-2021-1.pdf (paveepoint.ie) (accessed 10 November 2023).

HSE National Social Inclusion Office (2020) *National COVID-19 Traveller Service User Experience Survey. Report of Findings.* [online] https://www.hse.ie/eng/about/who/primarycare/socialinclusion/travellers-and-roma/irish-travellers/traveller-service-user-experience-survey-final-1011201.pdf (accessed 12 April 2023).

Hodgins, M, and Fergal, F. (2014) "'Causes of causes': ethnicity and social position as determinants of health inequality in Irish Traveller men." *Health promotion international,* 29 (2) pp 223-34.

Hodgins, M. M.; Millar, M; Barry, M., (2006) "…it's all the same no matter how much fruit or vegetables or fresh air we get": Traveller women's perceptions of illness causation and health inequalities, *Social Science and Medicine,* 62 (8) pp: 1978 – 80.

Holland, K (2023) Traveller community: 'I know of three suicides in the last week – one a 14-year-old boy'. *The Irish Times,* 22 February.

Houses of the Oireachtas (2021) *Joint Committee on Key Issues Affecting the Traveller Community.* Dublin: The Stationery Office.

HSE National Social Inclusion Office (2023) *Traveller Mental Health Initiative* [online] Traveller Mental Health Initiative - HSE.ie (accessed 18 May 2023).

HSE Traveller Health Unit Cork/Kerry (2020) *Responding to Suicide, A shared approach for Traveller organisations and health services.* [online] https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/strategy-implementation/local-action-plans/travellers-responding-to-suicide-plan.pdf (accessed 20 April 2023).

Joint Sub-Committee on Mental Health (2021) *Impact of COVID-19 on Mental Health of Travellers, Pavee Point* [online] Joint Sub-Committee on Mental Health debate - Tuesday, 13 Jul 2021 (oireachtas.ie) (accessed 18 March 2023).

Joint Committee on Key Issues Affecting the Traveller Community (2021). *Final Report of the Joint Committee on Key Issues Affecting the Traveller Community.* Dublin: The Stationery Office.

Joint Committee on Justice and Equality (2017) Report on the Recognition of Traveller Ethnicity [online] Report on Recognition of Traveller Ethnicity: Motion – Dáil Éireann (32nd Dáil) – Thursday, 1 Jun 2017 – Houses of the Oireachtas (accessed 10 April 2023).

Joyce, B (2020) Conditions for Travellers have been difficult in the COVID-19 shutdown. *The Journal,* 6 June.

Marmot, M. et al., (2020). *Build Back Fairer: The COVID-19 Marmot Review. The Pandemic, Socioeconomic and Health Inequalities in England.* London: Institute of Health Equity.

Marmot, M (2010) Fair Society, Healthy Lives: Strategic Review of Health Inequalities in England Post 2010. London: Marmot Review.

McGorrian C. et al., (2013) Frequent mental distress (FMD) in Irish Travellers: Discrimination and bereavement negatively influence mental health in the All Ireland Traveller Health Study. *Transcultural Psychiatry*, 50(4) 559-578

Mental Health Reform (2020) *Submission to the Special Committee on COVID-19 Response: The impact of COVID-19 on mental health in Ireland.* [online] https://www.mentalhealthreform.ie/wp-content/uploads/2020/08/Mental-Health-Reform-submission-to-the-Special-Committee-on-COVID-19-Response-July-2020.pdf (accessed 30 May 2023).

MIND (2020) *Existing Inequalities have made mental health of BAME groups worse during pandemic, says MIND.* [online] https://www.mind.org.uk/news-campaigns/news/existing-inequalities-have-made-mental-health-of-bame-groups-worse-during-pandemic-says-mind/(accessed 17 April 2023).

McGinnity et al., (2017) *Who experiences discrimination in Ireland?* Dublin: Economic and Social Research Institute

McCurry, C (2019) Traveller Community facing crisis over suicide rates, committee told. *The Irish News*, 29 September.

McKey, S et al., (2020) A rapid review of Irish Traveller mental health and suicide: a psychosocial and anthropological perspective, *Irish Journal of Psychological Medicine,* 39 (2) 223 – 233.

Mullen, R and Crowley, N (2022) *Implementation of Traveller Policy: Terrain for Imagination and Challenge* [online] Traveller-Policy-2022-AF-LR-FINAL.pdf (paveepoint.ie) (accessed 20 April 2023).

Nafilyan, Vahé et al., (2021) Ethnic differences in COVID-19 mortality during the first two waves of the Coronavirus Pandemic: a nationwide cohort study of 29 million adults in England." *European journal of epidemiology* vol. 36 (6) pp: 605-617.

National Traveller MABS (2020) *Building the Box: A review of services, facilities, and schemes with potential to improve financial inclusion from a Traveller perspective* [online] https://www.ntmabs.org/publications/development/2020/ntmabs-building-the-box-equality-report-final.pdf (accessed 26 March 2023).

NHS Race & Health Observatory (2022) *Build Back Fairer: Social determinants, ethnicity and health* [online] https://www.nhsrho.org/blog/build-back-fairer-social-determinants-ethnicity-and-health/ (accessed 12 March 2023).

Nguyen LH, et al., (2022) The mental health burden of racial and ethnic minorities during the COVID-19 pandemic. *PLoS One* 17(8) e0271661 https://doi.org/10.1371/journal.pone.0271661

O'Connor, K et al., (2021). Mental health impacts of COVID-19 in Ireland and the need for a secondary care mental health service response. *Irish Journal of Psychological Medicine*, 38 (2), 99-107.

Paradies, Y et al., (2015) Racism as a determinant of health: a systematic review and meta-analysis. *PLoS One* 10 (9).

Pavee Point Traveller and Roma Centre (2023) *Mental Health Initiative* [online]https://www.paveepoint.ie/project/mental-health-initiative/ (accessed 18 May 2023).

Pavee Point Traveller and Roma Centre (Pavee Point) (2021) *Submission to the Oireachtas Sub-Committee on Mental Health* [online] https://www.paveepoint.ie/wp-content/uploads/2015/04/OirSubCommitteeMentalHealth.pdf (accessed 15 April 2023)

Pavee Point Traveller and Roma Centre (2021) *Taoiseach takes time out to thank Travellers* [online] Taoiseach Takes Time Out to Thank Travellers Pavee Point (accessed 3 April 2023).

Pavee Point Traveller and Roma Centre (2021) *Urgent Action on Traveller Health Plan Needed As COVID-19 adds to Traveller mental health crisis* [online] https://www.paveepoint.ie/urgent-action-on-traveller-health-plan-needed-as-covid-19-adds-to-traveller-mental-health-crisis/ (accessed 20 April 2023).

Pavee Point Traveller and Roma Centre (2020) *COVID-19 and Irish Travellers: Interim Responses, Reflections and Recommendations* [online] COVIDREPORTWEB.pdf (paveepoint.ie) (accessed 27 March 2023).

Pavee Point Traveller and Roma Centre (2020) *Report on Access Officers' Round Table Discussion on Implications of COVID-19 for Traveller and Roma Transfer to and Progression within Higher Education* [online] Access-Officers-Roundtable-Discussion-Report-10.5.21.docx.pdf (paveepoint.ie) (accessed 10 November 2023).

Pavee Point Traveller and Roma Centre (2020) *Funerals During COVID-19.* [online] Funerals during COVID-19 Pavee Point (accessed 28 April 2023).

Pavee Point Traveller and Roma Centre (2020) *Minding Your Mental Health During COVID-19.* [online] https://www.paveepoint.ie/minding-your-mental-health-during-coronavirus-crisis-advice-and-tips/ (accessed 19 April 2023).

Pavee Point Traveller and Roma Centre (2018) *Traveller Employment, Pavee Point Factsheet* [online] https://www.paveepoint.ie/wp-content/uploads/2015/04/Factsheets-Pavee-Point-EMPLOYMENT-1.pdf (accessed 26 March 2023).

Pavee Point Traveller and Roma Centre (2015) *Young Pavees: Their Mental Health Needs, A Research Report.* [online] https://www.paveepoint.ie/wp-content/uploads/2016/01/Young-Pavees-Their-Mental-Health-Needs.pdf (accessed 27 March 2023).

Quirke B, Heinen M, Fitzpatrick P, McKey S, Malone KM, Kelleher C. Experience of discrimination and engagement with mental health and other services by Travellers in Ireland: findings from the All Ireland Traveller Health Study (AITHS). *Irish Journal of Psychological Medicine.* 2022;39(2):185-195.

Royal College of Physicians of Ireland (2021) *National Immunisation Advisory Committee Updatd Recommendations: Priority Groups for COVID-19 Vaccination* [online] NIAC-Recommendations-for-Vaccine-Prioritisation-29.03.2021.pdf (rcpi-live-cdn.s3.amazonaws.com) (accessed 12 April 2023).

Sharma, S (2022) *COVID has taken a greater toll on mental health among young people from ethnic minorities – sadly this is no surprise* [online] https://www.preventionweb.net/news/covid-has-taken-greater-toll-mental-health-among-people-ethnic-minorities-sadly-no-surprise (accessed 17 April 2023).

S3 Solutions (2021) *South Dublin Travellers Report. Nature, extent, and impact of suicide among the Traveller Community in South Dublin County and Ballyfermot* [online] https://www.ctdg.ie/wp-content/uploads/2023/02/South-Dublin-Traveller-Report.pdf (accessed 19 April 2023).

Thomeer, M.B., Moody, M.D. & Yahirun, J (2023) Racial and Ethnic Disparities in Mental Health and Mental Health Care During The COVID-19 Pandemic. *J. Racial and Ethnic Health Disparities* 10, 961–976.

Tobin, M., Lambert, S and McCarthy, J (2020) Grief, Tragic Death and Multiple Loss in the Lives of Irish Traveller Community Health Workers, *National Library of Medicine,* 81(1) pp 130 – 154.

Travellers and Roma Third Level Education Forum (2020) *The Implications of COVID-19 for Traveller and Roma Transfer to and progression within Higher Education* [online] https://mcusercontent.com/ec6adb4654614b5b60b768f5c/files/4ec9e9bd-8128-4cdb-a65a-165840b3bf6a/COVID_Traveller_Higher_Education_v2_RESIZE.pdf (accessed 28 April 2023).

Traveller Counselling Service (2023) *National Traveller Mental Health Service* [online] https://travellercounselling.ie/useful-links/national-traveller-mental-health-network/ (accessed 18 May 2023).

United Nations (2020) *Policy Brief: COVID-19 and the need for Action on Mental Health* [online] https://unsdg.un.org/sites/default/files/2020-05/UN-Policy-Brief-COVID-19-and-mental-health.pdf (accessed 15 May 2023).

Van Bortel, T et al., (2022) The mental health experiences of ethnic minorities in the UK during the Coronavirus pandemic: A qualitative exploration. *Frontiers in Public Health* 10: 875198.

Villani, J and Barry, M.M (2021) A qualitative study of the perceptions of mental health among the Traveller Community in Ireland, *Health Promotion International,* 36(5) pp 1450 – 1462.

Villani et al., (2021) A community-health partnership response to mitigate the impact of the COVID-19 pandemic on Travellers and Roma in Ireland, *Global Health Promotion,* 28 (2) pp 46 – 55.

Watson, D, Kenny, O and McGinnity, F (2021) *A social portrait of Travellers in Ireland.* The Economic and Social Research Institute, Dublin.

World Health Organisation and Calouste Gulbenkian Foundation (2014) *Social Determinants of Mental Health.* Geneva, World Health Organisation.

Appendix 1: Policy

Policy/Strategy	No.	Actions / recommendations
National Traveller Health Action Plan 2022 - 2027 (NTHAP)	25	Ensure the local Connecting for Life Implementation Plans include Traveller-specific actions as relevant to the local area and promote Traveller representation on groups as appropriate.
	26	Support and resource peer-led initiatives focused on Traveller men's health to improve mental health and wellbeing.
	27	Support and further develop culturally safe services to respond to the mental health needs of Travellers in consultation with Travellers and organisations.
	28	Work with the HSE to develop programmes to address mental health issues for young Travellers.
	29	Ensure implementation of the outstanding mental health actions in NTRIS to maximise the delivery of diverse culturally competent mental health supports throughout the services.
	30	Prioritise the implementation of actions relating to Travellers in Sharing the Vision and Connecting for Life.
National Traveller and Roma Inclusion Strategy 2017 - 2021 (NTRIS)	42	The Department of Health, in conjunction with the Health Service Executive, will develop programmes to address mental health issues among children and youths in the Traveller and Roma communities.
	51	The Health Service Executive will support the youth sector to develop targeted culturally appropriate programmes for Travellers and Roma which support mental wellbeing and resilience in youth work settings.
	63	The Health Service Executive will ensure that the new Mental Health Clinical Programme to tackle dual diagnosis will take account of the needs of Travellers and Roma with co-morbid mental health and substance abuse problems.
	66	The Health Service Executive, in consultation with Traveller organisations, will continue to address the prevalence, range and treatment of chronic health conditions amongst travellers e.g. diabetes, asthma, cardiovascular and circulatory conditions, poor mental health and suicidal ideation.
	87	The Health Service Executive will support and further develop culturally appropriate services to respond to the mental health needs of Travellers and Roma in consultation with Traveller and Roma organisations.
	88	The Health Service Executive will develop targeted interventions and educational materials to support good mental health, suicide prevention and promote self-esteem and self-acceptance for young Travellers.
	89	The Health Service Executive (National Office for Suicide Prevention) will develop communication campaigns to reduce stigmatising attitudes to mental health and suicidal behaviour at population level and within priority populations including the Traveller and Roma communities.
	90	A review by the National Office for Suicide Prevention of its funding of Traveller projects will assess the effectiveness of existing programmes and provide guidance in relation to future initiatives.
	91	The Health Service Executive (National Office for Suicide Prevention), in consultation with Traveller organisations, will conduct research on suicide and self-harm in the Traveller community, as part of the implementation of Connecting for Life, Ireland's National Strategy to Reduce Suicide 2015-2020.

Policy/Strategy	No.	Actions / recommendations
	92	In collaboration with Traveller organisations and other relevant stakeholders, the Health Service Executive (National Office for Suicide Prevention) will provide training and guidance to improve recognition of, and response to, suicide risk and suicidal behaviour among Travellers through programmes such as Assist and SafeTALK. The National Office for Suicide Prevention will link with the Health Service Executive's Social Inclusion Unit to ensure effective approaches are taken.
	95	The Health Service Executive will review the access and barriers to primary and secondary mental health services for Travellers and Roma, in the context of the implementation of the ethnic identifier, and in partnership with Traveller and Roma service users, carers and families in order to develop and implement appropriate steps to ensure greater inclusion and continued used of these services by Travellers and Roma.
	96	The Health Service Executive will recruit nine Mental Health Service Co-ordinator posts to support access to, and delivery of, mental health services for Travellers, in each Community Health area, as outlined in the Mental Health Division's strategic priorities in its Operational Plan for 2017.
Final Report of the Joint Committee on Key Issues Affecting the Traveller Community		Increased funding should be provided for the delivery of peer-led Traveller specific mental health supports through Traveller Primary Health Care Projects in local areas to provide timely interventions in relation to poor mental health, to provide appropriate interventions in the event of an attempted suicide, and to provide supports to family members bereaved following a suicide.
	4	Prioritise funding to examine the distinct needs of young members of the Traveller community who are vulnerable to suicide and develop an initiative to train peer support outreach workers within the community.
	5	Traveller organisations should be resourced to develop new and effective community mental health programmes targeting specific groups (e.g., children, young people, older people, women, men, LGBTQI community members), building community resilience and empowerment. Support should be given to local Traveller projects to identify and research local needs and causes of mental health difficulties. Funding should be provided to local groups to enable the development and support of specific local mental health initiatives, addressing local needs including the need for increasing access to services.
	11	There should be a ring-fenced budget for a National Traveller Mental Health Strategy. A National Traveller Mental Health Steering Group should be established in partnership with all key stake holders including the Traveller community to oversee the development and implementation of the strategy.
	13	A National Traveller Mental Health Strategy, as promised in the Programme for Government, should be implemented, with a ring-fenced budget. A National Steering Group made up of all key stakeholders, including the Final Report of the Joint Committee on Key Issues affecting the Traveller Community Page 23 of 98 Final Report of the Joint Committee on Key Issues affecting the Traveller Community Page 23 of 98 Traveller community should be formed to oversee the development and implementation of the strategy.
	14	A Traveller Counselling Service should be properly resourced in order to provide a national counselling service to Travellers.

Policy/Strategy	No.	Actions / recommendations
	15	A mental health advocacy service should be created for Traveller mental health.
	16	A Traveller Specific Mental Health Awareness Campaign should be developed and delivered in partnership with the Traveller community, in particular with local groups.
	19	There should be a Cross Sectional approach to addressing the root causes of the mental health crisis in the Traveller community. National efforts to support Travellers' mental health should not occur in isolation, not just in relation to Traveller health but inclusive of all social determinants and, taking into account the different layers of systemic oppression over decades and the interplay between the multiple stressors that affect the mental health of Travellers.
	20	The 2006 Expert Group on Mental Health Policy report 'A Vision for Change' acknowledged the need for the provision of inclusive and respectful mental health services and recommended that mental health services should be provided in a culturally sensitive manner. This recommendation should be further affirmed, established and realised within the delivery of services.
	21	There should be an immediate report prepared in relation to the effects of the COVID-19 pandemic on the Traveller community, and appropriate actions should be taken to address all concerns raised in this report.
Connecting for Life – Ireland's National Strategy to Reduce Suicide 2015–2020	1.2.2	Deliver targeted campaigns to improve awareness of appropriate support services to priority groups.
	1.3.1	Deliver campaigns that reduce stigma to those with mental health difficulties and suicidal behaviour in the whole population and self-stigma among priority groups.
	2.3.2	Deliver training and awareness programmes in line with the National Training Plan prioritising professionals and volunteers across community-based organisations, particularly those who come into regular contact with people who are vulnerable to suicide.
	2.3.3	Deliver a range of mental health promoting programmes in community, health and education settings aimed at improving the mental health of the whole population and priority groups.
	3.1.3	Develop and deliver targeted initiatives and services at Primary Care level for priority groups.
	3.1.4	Evaluate as appropriate targeted initiatives and/ or services for priority groups.
	3.1.5	Provide and sustain training to health and social care professionals, including frontline mental health service staff and primary care health providers. This training will improve recognition of, and response to, suicide risk and suicidal behaviour among people vulnerable to suicide.
	3.1.6	Continue the development of mental health promotion programmes with and for priority groups, including the youth sector.
	5.4.2	Deliver training in suicide prevention to staff in government departments and agencies who are likely to come into contact with people who are vulnerable to/at risk of suicidal behaviour.

Policy/Strategy	No.	Actions / recommendations
	7.4.4	Evaluate innovative approaches to suicide prevention including online service provision and targeted approaches for appropriate priority groups.
Sharing the Vision, A Mental Health Policy for Everyone, 2020-2030	6	The proposed National Mental Health Promotion Plan and the existing work of Connecting for Life should incorporate targeted mental health promotion and prevention actions that recognise the distinct needs of priority groups.
	61	The HSE should maximise the delivery of diverse and culturally competent mental health supports throughout all services.
Sláintecare Implementation Strategy 2018	p. 32	Population health needs assessment: The first step in understanding the needs of the population is to assess health need and the distribution of that need in a population, followed by population risk stratification with identification of particularly vulnerable population groups. This must include an understanding of the wider determinants of health.
Stronger Together The HSE Mental Health Promotion Plan 2022-2027	18	Facilitate access to mainstream mental health promotion programmes for socially excluded groups.
	19	Support and co-design mental health literacy initiatives for priority groups through dedicated communications campaigns and resources.
	20	Develop and implement mental health promotion training for those working with priority groups.
	21	Further strengthen the provision of co-produced mental health promotion programmes for people with mental health difficulties in line with the principles of the National Framework for Recovery in Mental Health.
	22	Scale up and further strengthen existing Traveller mental health promotion initiatives within the existing Traveller health infrastructure.

Appendix 2: Traveller Community COVID-19 Mental Health Resources

- Pavee Point Traveller and Roma Centre (2020) *Keeping Travellers Well – Minding Our Nucks* [online] Available at: https://www.paveepoint.ie/wp-content/uploads/2015/04/KeepingTravellersWell-1.pdf

- Pavee Point Traveller and Roma Centre (2020) *A Pavees Guide to Cocooning* [online] Available at: https://www.paveepoint.ie/wp-content/uploads/2015/04/Cocooning-COVID-19-A4-FINAL.pdf

- Pavee Point Traveller and Roma Centre (2020) *Travellers and Bereavement* [online] Available at: https://www.paveepoint.ie/wp-content/uploads/2015/04/Cocooning-COVID-19-A4-FINAL.pdf

- Pavee Point Traveller and Roma Centre (2020) *Minding our Young Pavees* [online] Available at: https://www.paveepoint.ie/wp-content/uploads/2015/04/Minding-Young-Pavees-COVID19-FINAL-1-1.pdf

- Pavee Point Traveller and Roma Centre (2020) *Minding your Nuck. Pavee Pathways to Mental Health Services* [online] Available at: https://www.paveepoint.ie/wp-content/uploads/2015/04/Minding-Young-Pavees-COVID19-FINAL-1-1.pdf

Minding Our Nucks!

PAVEE POINT
TRAVELLER AND ROMA CENTRE