

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [anhydraddoldebau iechyd meddwl](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [mental health inequalities](#)

MHI 51

Ymateb gan: | Response from: Gypsies Travellers Wales



1. **Which groups of people are disproportionately affected by poor mental health in Wales? What factors contribute to worse mental health within these groups?**

We directly support clients from the Gypsy and Traveller communities across the Cardiff and Gwent areas. In our years of experience working with people we know that many of them struggle with mental health issues on a daily basis. A large proportion of our clients claim benefits relating to poor mental health and are unable to work due to these conditions. The most common ones we encounter are stress, depression, social anxiety, people not wanting to go out and mix with the wider community.

In these cases, the majority of people affected are women. It is often women that reach out to services for support with family matters. However, we know that men from Gypsy and Traveller communities are equally, if not more affected by mental health. The issue is that they generally do not talk about it and are reluctant to open up and seek support.

The factors that contribute to the poor mental health of our client group are numerous but can be attributed to the simple fact that it is because they *are* Gypsies and Travellers. This is a community who exists on the very margins of our society, one that has consistently been reviled and persecuted. The wider social determinants to poor mental health for these communities are;

- A) Continued and prolonged discrimination over generations that has left mental scars across the community. Anti Gypsyism is often called “the last acceptable form of racism” and as seen most recently in the poor ‘joke’ that Jimmy Carr made in his show, it is still apparently acceptable to laugh about ‘getting rid’ of

Gypsy, Roma and Traveller people in a way that no other ethnic minority is talked about now.

- B) Lack of permanent sites meaning that in the last 60 years there has been a huge lack of site provision. Very few sites have been built meaning that people either have nowhere to live or are squeezed onto pitches designed for one family (which is often unsafe). People do not have safe, comfortable accommodation.
- C) Lack of provision of temporary stopping places or transit sites across the whole of the UK means that homeless families are not even able to stay in one place to rest or visit family etc. Consequently, people have no option but to pull up on land that might cause inconvenience to the wider community. No facilities or provision for sanitation or refuse are given so when eviction happens, there is often a very vigorous backlash from the public (fuelled by local media) about what gets left behind. No one talks about how frail elderly relatives and children have been left to live in car parks or wasteland with no access to running water, power or toilets etc.
- D) These families are subjected to a constant cycle of eviction and moving on, often supervised by police and bailiffs applying a heavy handed presence on sites. The impact of this on young children and the trauma it causes is a major factor in the mental health issues suffered in later life.
- E) Lack of safe sites for people to live on. Many Gypsy and Traveller sites are built on marginal land where other people would not want to live. E.g., next to major roads or power/recycling plants. Poor facilities and upkeep of sites means people often live in substandard accommodation and have issues accessing electricity, gas and water. This affects their physical and mental health.
- F) Due to the factors listed above, education is often not an option for some families, and they are not able to access schools for their children to attend. However, in many cases we hear of, when children do manage to get into schools, they are subjected to bullying from other children, and poor reception from teachers and staff.
- G) Poor employment opportunities for our client group are often a factor. Lack of education/low literacy means chances of entering well paid, stable employment are almost impossible for many Gypsies and Travellers. Traditionally, young men from these communities might follow their fathers into business, but legislation surrounding scrap metal and self-employed tradespeople (such as Check-A-Trade and other local initiatives), as well as the move towards a cashless society, mean that running a self employed business is no longer as easy as it once was. This vastly limits the earning capability of men, the traditional 'breadwinners' of the families. This in turn is a major factor in poor mental health and in some tragic cases, has led to people taking their own lives.
- H) Lack of good, targeted mental health support services for Gypsies and Travellers means that the suicide rate for these communities is around 6 or 7 times higher than other communities. The distress and mental scars left behind for other family members when someone takes their own life is a factor in itself of the continuing poor mental health of people in these communities.

The compound effect of all these factors ultimately contributes to poor mental health, even in young children. The links between lack of safe homelife, lack of education,

lack of reasonable employment opportunities etc, all contribute to poor income. The stress and worry our clients face daily of making ends meet and keeping homes warm and children well fed are issues we are constantly asked to support people with.

2. How effectively can existing services meet their needs, and how could their experience of using mental health services be improved?

Gypsies and Travellers are very reluctant to take their mental health issues out into the wider community. We often hear comments from our clients such as “The settled folk hate us; they don’t care about us” and the general feeling in the community is that they don’t reach out for support from services as there are none for them. In many case, people are simply not aware such services exist as they have not come into contact with them. Successful projects have worked and should be replicated where good practice has proven results. Things that would help improve mental health services for the Gypsy and Traveller communities are;

- A) Funding assertive outreach projects run by dedicated workers to go into the communities and built trusting relationships.
- B) Outreach staff to be ideally members of Gypsy and Traveller communities themselves, so they have knowledge of the life, the issues and the barriers. People are more likely to open up to others from their own communities.
- C) Training to be given to staff around the culture, history and traditions of the Gypsy and Traveller communities. This helps to structure services and raises awareness of the barriers the communities face.
- D) More talking and less writing! Make access to services better for communities who have low literacy and put resources and publicity in places where Gypsies and Travellers would access.
- E) Use existing trusted services such as local hubs, foodbanks, churches, boxing gyms, beauty salons etc to start conversations about what Gypsies and Travellers need and how best to engage.

3. To what extent does Welsh Government policy recognise and address the mental health needs of these groups? Where are the policy gaps?

The latest mental health delivery plan (post COVID-19) mentions BAME communities but there is not one mention of the Gypsy and Traveller community in the entire document. Gypsies and Travellers are often omitted from any provision for BAME communities as many people do not recognise or are not aware that Romany Gypsies and Irish Travellers are defined by law as a separate ethnic community. They are often referred to as the ‘hidden ethnic group’, and because they do not have different coloured skin they are often overlooked. Therefore, services run by many BAME organisations do not have the knowledge or understanding to include Gypsies and Travellers in their work. This must be addressed.

In addition to this, it must be recognised that these communities suffered greatly during the COVID-19 pandemic and are struggling to get back even to where they were in

terms of income, education attendance, support from services, improvements to living conditions etc. All of which adds to the poor mental health of Gypsies and Travellers. Many health and social services have stopped visiting sites/roadside encampments due to COVID and have still not resumed their visits. This means that maternity care and other vital services may not be getting to many Gypsies and Travellers.

4. What further action is needed, by whom/where, to improve mental health and outcomes for the groups of people identified and reduce mental health inequalities in Wales?

A service review and implementation of the points raised in question 2 of this submission would be a positive course of action. There are places across the UK where good practice exists and these cases should be looked at and possibly replicated. However, this must be carried out sensitively, and in conjunction with specialist organisations and the local community, as projects that are successful in one location may not work or be appropriate for another. The local situation must be considered when trying to replicate good practice.

Specifically, in the areas of Wales we cover there are major issues that need to be addressed that would have considerable positive impact on the mental health of the community.

- A) The site at Roverway has been neglected by the local authority and it has failed to meet its duty in providing a new site. Because of this the living conditions on the site are currently in a poor state of repair and very overcrowded, causing safety concerns in addition to poor mental and physical health outcomes for residents. Children on the site have nowhere to play; there are no green areas or play areas. In order to develop good mental and physical health, children need to be able to access safe places to play.
- B) Access onto the site on Roverway is very dangerous. Once inside the site, it is so overcrowded cars often struggle to pass. This makes it very difficult for external service workers to access. There are no site staff from the local authority based on this site, so there is nowhere for residents to directly access help or support on site. They must call the site office or visit the site at Shirenewton. This is one reason why the site is neglected and it makes it difficult for residents to improve conditions or raise issues. People continue to live with things that have gone wrong and this causes extra stress and upset.
- C) On Roverway and Shirenewton the police seem to be unable or unwilling to keep residents safe and there are constant attacks on already vulnerable and fragile people on the site. Ambulances will also not go onto the site and instead they wait for a police escort being responding to calls. This is unacceptable. Emergency services must act as they do for all other communities.
- D) During the COVID-19 pandemic, the local Gypsy and Traveller community was treated differently from the generally population. For example, when there was an outbreak the entire site at Shirenewton was locked down. They were effectively left to get through themselves. The equivalent in the wider

community would be to lock down an entire street or neighbourhood, with tougher measures to its surrounding environs.

In conclusion, although the points raised in Question 4 are based on our local situation, it is very likely this picture is replicated in other areas across Wales. These are common issues faced by Gypsies and Travellers. The mental health of these communities has continued to worsen as more of their freedoms to exist are eroded. The Police, Crime, Sentencing and Courts Bill currently going through the UK Parliament will only make the situation worse for these already marginalised communities. The Welsh Senedd voted recently not to consent to Part 4 of the Bill (the part that is specifically aimed at Gypsies and Travellers and will criminalise trespass). However, the UK Parliament soon responded with a statement to say that they would not take this vote into account and that the new law will be enforced in Wales. The briefing notes for the new Act also specifically mention that human rights will not be taken into account when evicting Gypsies and Travellers, and presumably in practice this will mean no welfare checks will be carried out when so called unauthorised encampments spring up.

With this about to happen and being a blatant attack on the Gypsy and Traveller communities to effectively wipe out an entire culture and heritage, it is small wonder the mental health of people from these communities is so poor. The Committee might consider recommending that the Welsh Government look at starting a specific Task Group in the near future in order to better support and provide for the Gypsy and Traveller communities. This is a timebomb situation that needs to be addressed.