

Gypsy Traveller Health Engagement Worker project: Executive summary

The 2011 Census data highlight that 4000 Gypsy/Travellers live in Scotland (0.1% of the population). In Aberdeen, approximately 0.1% of the population recorded 'Gypsy Traveller' as their ethnic grouping which equates to approximately 223 individuals¹. It is thought to be an underestimation given the transient nature of the population, an unwillingness of identifying as a Gypsy Traveller and the low levels of literacy which may have an impact on the number of people completing the census questionnaire

There is currently one official Aberdeen City Council site located at Clinterty, near the border with Aberdeenshire providing 21 pitches (100% occupancy since April 2013). In addition, there is a Gypsy Traveller developed private site at Pitmedden Road near Dyce. There are 15 plots on the site, which are sold to each occupant who is responsible for their own pitch.¹ As there is a national shortage of official pitches, many Gypsy Travellers are on the roadside because there is nowhere else for them to go. Between 2012-2015 there have been approximately 95 encampments on an annual basis across Aberdeen.

Since April 2012 Aberdeen CHP Health Improvement Fund has provided £54,731-00 to fund a Gypsy Traveller Health Engagement Worker (GTHEW) in conjunction with Grampian Regional Equality Council (GREC). The focus of the project was to identify the healthcare needs, establish engagement between community, primary care and various partners, improve on procedures relating access to health and facilitate outreach engagement events.

It has been noted GP registrations tend to concentrate around the 3 main practices; Links, Bucksburn and Whinhill. In a recent study carried out by Health Scotland² which echoes a local survey with the 3 practices report that barriers to GP registration principally relate to service design being at odds with the cultural characteristics and lifestyle needs of the community. This can range from registration form completion presenting difficulties for those with literacy problems, a desire or need for immediate appointments, continuity of care to lack of understanding of how the system works.

Among the travelling community there is also a belief that poor health and pain must be tolerated and an ability to deal with it themselves. Opportunistic health interventions were organised through the Gypsy Traveller Health Engagement Worker (GTHEW) such as Keep Well health checks and Child smile interventions has enhanced discussions in relation to need and support for self care /management. Building over last 3 years of activities:

It is recommended future work should focus on mainstreaming an inclusive and equalities-driven approach to Gypsy Traveller health. To take forward such a project the following are recommended:

- Build a relationship of trust and confidence particularly those living at encampments.
- The cultural awareness raising resource be delivered to health and social care professionals; students in training.
- The Primary Care survey work undertaken is rolled out to all GP surgeries.
- Health and Social Care Partnership is engaged both at a strategic and operational level with key Service Leads to build in an action plan for Gypsy Traveller health.
- Enhance a proactive approach to continuity of care and the handheld record for Gypsy Travellers is well-promoted and coherent with the approach at a national level.

¹ Figure 3: White ethnic groups by council area, Scotland, 2011. www.scotlandscensus.gov.uk

² Insight into the use of the Hand Held Record and other methods of NHS engagement with Gypsy/Travellers in Scotland – Recommendations. Health Scotland, 2013.