

Institution: Buckinghamshire New University		
Unit of Assessment: UoA 20 Social Work and Social Policy		
Title of case study: Gypsy, Roma and Traveller Health and Wellbeing – leveraging good practice and policy engagement to enhance social inclusion		
Period when the underpinning research was undertaken: 2012- 2020		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Professor Margaret Greenfields	Professor of Social Policy and Community Engagement	2004-present
Dr Carol Rogers	Senior Lecturer Early Years Education	2009-present
Period when the claimed impact occurred: 2014-ongoing		
Is this case study continued from a case study submitted in 2014? NO		
<p>1. Summary of the impact (indicative maximum 100 words)</p> <p>Impacts fall into the following categories: Greenfield's and Rogers' work underpins and supports development of policy and practice at Government, local and health authority levels as well as influencing professional best practice guidance on service user engagement. Their research is regularly cited in Government publications and policy briefings and formed the basis of a Parliamentary debate on the impacts of poor quality site provision on physical and mental health with particular impacts on women. Recent work on mental health, suicide and hate crime has led to a series of meetings with officials from Ministry Housing, Communities and Local Government, Department of Health and Social Care and the Minister with responsibility for suicide to consider how these findings can be utilised to underpin and support policy development and/or practice guidance.</p> <p>Greenfields' work on health, wellbeing, accommodation, engagement with social care and Roma migration experiences underpinned her submission to the Women and Equalities Committee Inquiry call for evidence on Inequalities impacting Gypsies and Travellers leading to provision of expert evidence at the Inquiry's first oral hearing and themes from her oral evidence being included in the Select Committee report. International activities include convening a Council of Europe funded health and social care seminar on Roma/Migrant Health bringing together high level policy specialists from the World Health Organization (WHO) and other Government level public health representatives with civil society stakeholders, and provision of expertise to the WHO in devising Europe-wide policy and protocol to support "Healthy Ageing for Roma"</p>		
<p>2. Underpinning research (max 500 words)</p> <p>This case study is based on research into three closely interlinked areas: explanations for, and the development of policy and practice recommendations to mitigate health exclusion and poverty; the processes and impact of reduced wellbeing outcomes which are frequently associated with barriers to access to services; and good practice recommendations to enhance equality amongst Gypsy, Traveller and Roma (GTR) communities in the UK and Europe.</p> <p>Greenfield's research has been commissioned and funded by a range of administrative, governmental and statutory authorities: Department of Health and Social Care (DHSC) (3.1); Ministry of Communities, Housing and Local Government (MCHLG) (3.2); the Council of Europe DG Justice (3.4) and Public Health bodies working in partnership with a local authority (3.5) to understand the drivers of health and social exclusion experienced by GTR and itinerant Boater populations and to devise evidence based recommendations and solutions, as well as feeding into World Health Organisation policy developments on Roma and ageing (5.1.8).</p>		

Rogers' and Greenfields research into the impacts of repeated (often traumatic) bereavements on Gypsy and Traveller children (3.3), is unique in focusing on gaps in understanding and lack of accessibility in both public sector and non-governmental organisation (NGO) bereavement and wellbeing support agencies, as well as the long-term mental health impacts on both children and adults of adopting a culturally congruent 'stoic' acceptance of multiple (often premature or preventable) deaths in their families. The cycle of loss is typically re-enacted intergenerationally across the communities. Repeated bereavement and complicated grief, particularly when coupled with experiences of racism and social exclusion, has been found to be associated with substantially higher levels of poor mental health, and over-representation in suicide statistics amongst the GTR populations when compared to surrounding populations; with statistical analysis complicated by lack of routine data gathering on these populations (3.2).

The co-commissioned (local authority and public health department) health study (3.5), was a triangulated, multi-level health assessment, involving co-production of research with health professionals, Gypsy, Traveller, Showmen and nomadic Boater populations in the West of England. The study was the first in the UK to identify the health needs of Boater populations. It found they experienced considerable social exclusion, unmet physical and mental health needs and barriers to health access. Health professionals' were found to have a lack of understanding of the populations, along with a fear of delivering services on sites or moorings.

The suite of policy focused research, operationalised by working with specialist NGOs, policy professionals, practice leads and politicians, are underpinned by research into migrant Roma populations (3.6). These projects encompass experiences and knowledge of accessing welfare benefits and benefits agencies, and demonstrates the interplay of poverty, linguistic barriers; poor quality access to services (3.4), Brexit uncertainties and contacts with social work departments for destitute families.

3. References to the research (indicative maximum of six references)

- 3.1. Greenfields, M & Brindley M (2016) *The impact of poor quality housing on Gypsies and Travellers Wellbeing. Policy advice for the Health Inclusion Board*. London: DH/CLG
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/490846/NIHB - Gypsy and Traveller health accs.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/490846/NIHB_-_Gypsy_and_Traveller_health_accs.pdf)
- 3.2. Greenfields, M & Rogers, C. (2020) *Hate: "As regular as rain" A pilot research project into the psychological effects of hate crime on Gypsy, Traveller and Roma (GTR) communities*. Ware: GateHerts/BNU/MHCLG <https://bucks.repository.guildhe.ac.uk/id/eprint/18142/>
- 3.3. Rogers, C & Greenfields M. (2017). *Hidden losses and 'forgotten' suffering: the bereavement experiences of British Romany Gypsies and Travellers*. *Bereavement Care* 36(3)
<https://bucks.repository.guildhe.ac.uk/id/eprint/17264/>
- 3.4. Greenfields, M, Cemlyn S with Berlin, J (2015) *Gypsies, Travellers and Roma: Health and Social Care, report and policy guidance on behalf of the Council of Europe/European Academic Network for Romani Studies*. HW: BNU/IDRICS
http://bucks.collections.crest.ac.uk/16222/1/16222_Greenfields_M.pdf
- 3.5. Greenfields, M. with Lowe, L (2013) *Bath and North East Somerset, Gypsy, Traveller, Showmen and Boater Health Needs Assessment*. High Wycombe: IDRICS/BNU)
https://www.bathnes.gov.uk/sites/default/files/bnes_health_study_report_final_full_report_inc_appendices.pdf
- 3.6 Greenfields, M & Dagilyte, E. (2018) 'I would never have come if we'd know it might be like this': On the (un)intended consequences of welfare governance of EU Roma migrants in Britain' *Intersections. East European Journal of Society and Politics* 4(3)
<https://bucks.repository.guildhe.ac.uk/id/eprint/17520/>

4. Details of the impact (indicative maximum 750 words)

As a result of Greenfields' and Rogers' research activities, Local Government and devolved administrations regularly request support in shaping policy and practice developments which engage with GRT communities as well as in identifying potential intervention opportunities (5.1; 5.2; 5.3). Research is regularly cited in Government publications and policy briefings (5.1), including internationally (5.1.8), and has formed the basis of a Parliamentary debate on the impacts of poor quality site provision on physical and mental health with particular impacts on women (5.4).

The Welsh Government GRT policy lead requested support from Greenfields in ensuring that relevant public health advice and “appropriate guidance is shared with both professionals and the community... [we are] particularly concerned that there is more we should be doing to help communities protect themselves from the virus” (5.2) as did the East of England Local government Association MHCLG funded Roma Parallel Lives project (2017–2019), which focused on the development of policy, engagement strategies and improving knowledge of managers and multidisciplinary frontline workers in “*understanding of Roma communities, their needs and more effective engagement strategies*”. The project lead noted that: “*the information, advice and guidance...was invaluable.. It helped professionals recognise the gaps in their understanding of Roma history and culture, and identified the issues involved in building trust with Roma people... Margaret was integral in helping the project team establish multi-agency region networks, which share best practice and develop realistic and sustainable engagement practices to help encourage Roma integration into local communities*” (5.3.1).

The Traveller and Diversity lead for Fenland District Council and surrounding rural communities commented on the team’s “*invaluable contribution to the work of Local Authorities, Community and Voluntary Services and the Faith communities regarding social policy and community engagement*”, adding that “*Professor Greenfields’ knowledge of the Gypsy Traveller community and faiths ... has enabled a number of health issues to be addressed in the Gypsy Traveller communities, provide additional and culturally appropriate accommodation. Without this, many ... would not have been able to access work, health care and have a poorer quality of life... [She] has expanded this work to look at the integration of Central and Eastern Europeans into this Country identifying and sharing best practice nationally. This has certainly been of benefit ... and has highlighted areas of exploitation including Modern Day Slavery. These findings ... have been shared widely and have assisted in stopping some illegal practices and introducing appropriate pastoral support to victims. She is also extremely knowledgeable about the Jewish faith and this and other work has filled in gaps in people’s knowledge, helping to put in place measures to encourage victims of hate crime to report this, as many victims are very reluctant to do so for a variety of reasons*” (5.3.2).

Elim Housing Association (in partnership with the Local Authority) provided a new-build Traveller site with an additional 24 permanent pitches. This site has been named Greenfields Way ‘*after you and the great work you have done in North Somerset and the West of England and for the Gypsy and Traveller community in general*’ (3.5; 5.3.3). A member of the local Traveller/Inclusion Education Team writes: “*It is a very successful site and has allowed many GRT families to access a wide range of services and support to improve their quality of life. Many residents speak really highly about the difference that has taken place in their lives since moving on. Your research both inspired people to persist in pushing the project forward and informed their practice once the site was established... Many of these families had not had a permanent plot before and there were many unmet needs.*” (5.3.4)

Greenfields and Rogers are frequently asked by Local and Health Authorities, CCGs and social care providers to develop policy and practice through exploring best practice engagement with their local GTR communities. The Civica ‘White Paper’ (5.5) on addressing health inequalities in patient experience contained an extensive interview with Greenfields (in the role of an expert on working inclusively with communities), which outlined policy and practice recommendations for commissioners and practitioners working with marginalised populations. The NGO FFT writes (5.6.1) “*We have frequently drawn upon Professor Margaret Greenfield’s research and expertise to engage policymakers, commissioners and providers and to make a case for the development of programs and initiatives that can make a difference in the lives of GRT. ... Margaret’s 2016 report (3.1) evidenced the significant link between site provision and accommodation, and the health status of Gypsy and Traveller communities. We drew upon this research for our own practical guidance, commissioned by NHS England and NHS Improvement, which has been disseminated with regional PHE leads and health and care commissioners and providers nationally. We have been carrying out research on the topic of suicide prevention in Gypsy and Traveller communities, which dovetailed with research being conducted by Margaret and Carol (3.2).*”

Greenfield's work on health exclusion experienced by Gypsies, Travellers and Boaters in the West of England (3.5) has led to the commissioning and (by 2021) six years of funding by Clinical Commissioning Groups and Local Authorities of a specialist health service across two counties, which has also led to training and employment for community members (5.6.2) *"Professor Greenfields' 2013 specialist health study (3.5) paved the way for the Julian House Outreach Service to be commissioned in 2015.... [and] the Julian House Travelling Community Support Service... commissioned by Bath and North East Somerset (BaNES) Clinical Commissioning Group (now Virgin Care). What started as a signposting and engagement pilot has developed into a service which is nationally recognised as an example of best practice, improving the health and wellbeing outcomes for communities facing some of the largest health inequalities in the UK... The BaNES pilot was a resounding success and it attracted praise from neighbouring local authorities. As a result, in 2019 Wiltshire Public Health commissioned a 2-year inequalities pilot following the health needs assessment of GTB communities. This created a Wiltshire Boater Outreach & Engagement Worker role and a Gypsy, Roma, Traveller Engagement Worker role. The latter has developed into a role with a policy focus; utilising national research and applying it practically at a local level through effective engagement, education and relationship building. In the short term, the role has had a significant impact and influence in terms of Covid-19 response and recovery; Wiltshire Council are in the final stage of discussions to adopt a Covid-19 emergency 'negotiated stopping place' pathway. The medium-long term objective is to work with 15 service providers to reduce the inequalities gap and ensure services are inclusive"*.

The GRT health inclusion team in Surrey emphasised the core importance of Greenfield's research and policy guidance to the model used in their training for health practitioners, and approach to policy and delivery. The Clinical Service Manager stated (5.6.3) *"I have depended on the many research, briefings and reports that Professor Greenfields has produced to support my application for funds to support this work. [Her work] shine[s] a light on the impact of a range of intersecting factors that disproportionately create barriers and cause disadvantage and shorten the lives of GRT peoples in the UK. ...I am very grateful to Professor Greenfields for her advice and support, without which our GRT project could not have flourished. Our project funds have now been extended for another year, beyond the original two-year limit, with a plan to commission this work as a permanent service offer, so her input and evidence has supported our sustainability"*. Similarly, a major legal charity, Law for Life (5.6.4) funded and devised a project to support migrant Roma families in contact with child protection services as a direct result of a series of research projects undertaken with specialist NGO partners that demonstrated reductions in children coming into care as a result of lack of cultural understanding or linguistic barriers to parental engagement. *"In 2018-2020, Law for Life delivered a Multimedia project for Roma parents involved in child protection process. The project was delivered in partnership with three Roma organisations in England (Roma Support Group, Roma Community Care and Clifton Learning Partnership). In the process of fundraising I used Professor Greenfields' research and academic publications related to Roma communities and social care, which was directly quoted in the fundraising proposal... We secured further funding to deliver on the main findings from the evaluation, including helping Roma organisations address discrimination and disadvantage that Roma parents sometimes experience when going through the child protection process or care proceedings. Professor Greenfields is involved in a policy steering group which involves key organisations working with Roma communities which will help us develop a strategy to influence policy and improve practice in child protection and care proceedings... This is pioneering work and its importance is in recognising shortcomings in Children's Services' engagement with Roma families and in developing cultural competence in social work practice"*.

The CEO of GATEHerts (commissioner of the suicide and hate crime project (5.6.5) referred to the high level of delicacy involved in the study (3.2) noting *"Margaret and Carol went about their research with skill and sensitivity, treating the participants with dignity and respect while they were sharing personal, and often intimate aspects of their lives. The findings highlight the widespread experience of the racism and discrimination against Gypsy Traveller (GT) people. It*

has given significant insight into the barriers still faced by GT when attempting to access victim support, and/or mental health services. The report has enabled us to present evidence to policy makers dealing with this particular issue and to highlight the need for intervention and inclusion, ensuring that this important issue doesn't get lost or shoved under the table. As a result of this study we have had a series of follow-up meetings with the Department of Health and Social Care and MHCLG to see how recommendations can be adopted and attempts made to create interventions to reduce suicide and enhance professional practice to support GT people”.

5. Sources to corroborate the impact (indicative maximum of 10 references)

5.1 Women and Select Committee Inquiry report

5.1.1 Submission of written evidence by Greenfields (published 8th March 2017)

<http://data.parliament.uk/writtenevidence/committeeevidence.svc/evidencedocument/women-and-equalities-committee/tackling-inequalities-faced-by-the-gypsy-roma-and-traveller-communities/written/46237.html>

5.1.2 Oral evidence from Greenfields: HC 360 Wednesday 21 February 2018

<http://data.parliament.uk/writtenevidence/committeeevidence.svc/evidencedocument/women-and-equalities-committee/tackling-inequalities-faced-by-the-gypsy-roma-and-traveller-communities/oral/78675.html>

5.1.3 Tackling Inequalities Faced by Gypsy, Roma and Traveller Communities (2019)

<https://publications.parliament.uk/pa/cm201719/cmselect/cmwomeq/360/full-report.html#heading-7> (Para 31, citation 38; Para 108 citation 149 and Para 121, citation 166).

5.1.4 Government Publications, EHRC citations

5.1.5 *House of Commons Briefing Paper Number 08083, Gypsies and Travellers* London:

HMSO <https://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-8083#fullreport>

5.1.6 Equalities and Human Rights Commission Report (2016) *Is Britain Fairer report 2016 spotlight on GRT communities* Manchester: EHRC.

<https://www.equalityhumanrights.com/sites/default/files/is-england-fairer-2016-most-disadvantaged-groups-gypsies-travellers-roma.pdf>

5.1.7 Screenshots of diarised meetings with Government departments/invitation emails to meetings

5.1.8 World Health Organization/Roma Health network protocol statement (Greenfields as expert member)

http://www.euro.who.int/data/assets/pdf_file/0008/262457/Pecs-declaration-final-EDITED_CLEARED_061114_KZ-1.pdf?ua=1

5.2 Email from Senior Manager – Race, Faith, Gypsy, Roma & Traveller Policy, Welsh Government

5.3

5.3.1 Testimonial of impact from the Project Officer, East of England Local Government Association (Roma project) (PDF)

5.3.2 Email Statement of Impact/Supporting Testimonial David Bailey Traveller and Inclusion Lead, Fenland Council

5.3.3 Emails from Elim Housing Association

5.3.4 Email from Equality/Traveller Education teacher (North Somerset)

5.4 Hansard Debate

<https://hansard.parliament.uk/Lords/2018-03-08/debates/400D11D1-3052-4B1A-9A0B-A3112C6D158E/GypsyTravellerAndRomaCommunities?highlight=gypsies%20health%20greenfields#contribution-7EB71C3A-AFC6-4757-9417-64A613A00612>

5.5. Civica (2019) *Harnessing the Power of Patient Experience*: London MES/Civica,

<https://www.civica.com/globalassets/7.document-downloads/2.uk-docs/white-papers/engagement-solutions/harnessing-the-power-of-patient-experience.pdf>

5.6

5.6.1 Letter from Health Policy lead, Friends, Families and Travellers (PDF)

5.6.2 Statement from Health Inclusion lead for GRT and Boater Project (Julian House) (PDF)

5.6.3 Email from Clinical Service Manager, Gypsy, Roma Traveller & Inclusion Health Children and Family Health Surrey

5.6.4 Letter from Law For Life (PDF)

5.6.5 Letter from GateHerts CEO (PDF)