This report was compiled through collaborative efforts of Bristol City Council’s Housing Solutions and Inclusion in Learning Teams as well as NHS’s North Bristol Trust which examines the communal needs of the Bristol’s Gypsy, Roma, Traveller communities (GRT). This report is broken into the following four sections when examining need: accommodation, health, education and legislation. This report aims to give relevant agencies working with GRT’s a better understanding of the communal needs, concerns and priorities in order to improve service design/outcomes as well as the engagement and quality of life for this (nomadic) minority ethnic group.
Tackling Inequalities for Gypsy, Roma, Traveller Communities

Legislation Relevant to Schools

Race Relations Act 1976 (Amended 2000) and Equality Act 2006

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Appendix 6A Social Value Guidance

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Section 1: Introduction

Gypsy and Traveller communities are an integral part of 21st century Britain (Buckley, 2010). Bristol City Council and NHS North Bristol Trust are committed to forging new ways of understanding, advocating and meeting the needs of these different communities whilst also preserving their rich cultural traditions and lifestyle. One of the ways we aim to do this is by working in partnership with Bristol’s local Gypsy, Roma, Traveller communities in exploring various themes (i.e. housing, health, education and legislation). Partnership work is essential to understanding the ‘bigger picture’ - what concerns, needs or services there are and how we can help. But it also enables us to minimise duplication and maximise opportunities and resources. This method of consultation and advocacy work also ensure that Bristol City Council, NHS and other relevant agencies more effectively support, engage and empower this minority ethnic group.

This study is comprised of five parts.

Sectional Summary:

1. The first section of this study focuses on housing. It reviews the cultural origins of Gypsy, Roma, Traveller housing practices, contemporary trends in accommodation as well as the different communal needs and concerns.

2. The second section examines how issues, such as housing amongst other variables, impact GRT health and life outcomes.

3. Section three explores the complex set of reasons that underlie GRT educational outcomes (e.g. admissions, identity and ascription in schools, attendance and attainment) and provides guidance to improve these standards.

4. The fourth section gives an overview of relevant legislation and the impact such laws have on GRT lifestyle, practices and socio-economic opportunities.

5. The final section of this report highlights the outcomes in addition to making future recommendation, particularly in relation to engagement/consultation work in order to improve service design and promote GRT culture and priorities.

Context: Overview of Terminology and GRT Culture:

Romany Gypsies (also known as English Gypsies) and Travellers of Irish Heritage are recognised minority ethnic groups under the Human Rights Act 1998 and Race Relations Act (Amendment) 2000. These Acts give public bodies, including schools and health services, a statutory duty to promote race equality. In practice, this means that services must represent, engage and support Gypsies, Roma and Travellers, just as they would any other minority ethnic group.

1 Although both Romany Gypsies and Irish Travellers have lived and travelled the British Isles for hundreds of years, it has only been relatively recently that they have been recognised under the Race Relations Act.
In Jake Bower’s (2013) publication *Gypsies and Travellers: Their Lifestyle, History and Culture* the following definition and distinction of ethnic and non-ethnic Gypsy and Traveller groups is made:

“The term *Traveller* refers to anyone who has a nomadic way of life. It describes someone’s lifestyle and, in the age when everyone from gap year students to business people are traveling more than ever before, it is an increasingly meaningless term. But it is a catch-all phrase that also applies to anybody living in vehicles such as caravans, buses or campervans. Travellers can be divided into two groups, those that are *ethnic Travellers*, such as Romany Gypsies and Irish Travellers, and [non-ethnic travellers] those who live on the road for purely economic reasons such as New Travellers and Showpeople. In reality, there isn’t one Traveller community but many, each with their own particular culture and history.

From the 16th century to the present day, no ethnic groups in Britain have aroused as much curiosity, romance, hatred and fear as Gypsies and Travellers. Often misunderstood, maligned and eroticised, most people’s perceptions of Britain’s Gypsies and Travellers are based on a mixture of romanticism, prejudice and ignorance.

To most people, *True Romanies* - the swarthy, freedom-loving strangers of the past - have very little in common with dirty modern *pikies* or *gyppos*. But ask most people what has actually happened to the carefree nomads once romanticised as *lords of the heath* by Victorian artists, anthropologists and aristocrats and few people would be able to say. The truth is that we have gone nowhere, we are still here, but living modern lives that are as sometimes as controversial as the ones our ancestors led. Yet 300,000 Gypsies and Travellers live in Britain today, and many of us want greater understanding within the wider community.

Ethnic Travellers are people who are born into traditionally nomadic cultures. Just like someone who is Black or Asian, their identity is defined by their race. The two groups recognized by British case law as ethnic groups are Romany Gypsies and Irish Travellers” (Bower, 2013).

To satisfy British-Case Law, *ethnic Travellers* must be able to prove, in landmark legal cases, that they met the following conditions, known as the *Mandla Criteria*:

- Long Shared History
- Cultural Tradition of Their Own
- Common Geographical Origin
- Common Language
- Common Tradition
- Common Religion
- Characteristics of being a minority and/or being oppressed by a dominant group within a larger community.

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2 Jake Bower is one of Britain’s few Romany journalists.
**Ethnic Travellers (Bower, 2013):**

Romany (English) Gypsies:

Romany Gypsies have been in Britain since at least 1515 after migrating from continental Europe. When Gypsies first arrived in Europe the settled population believed they were Egyptian (due to their dark complexion and different cultural dress). In reality, the Romany ethnic group ancestor’s migrated from North West India from the 10th century and then mixed with European and other groups. Linguistic analysis of the Romany language confirms their ethnic origins in India due to its strong roots in ancient Sanskrit.

Irish Travellers:

Irish Travellers are a nomadic group with a distinctive way of life and have been part of Irish society for centuries. Romany immigrants who reached Ireland found a strong group of travelling traders who used a Celtic language called *Shelta*. Their modern language, which consists of some Romany dialectal, is called *Gamon*, or more specifically to Irish Traveller heritage *Cant* language.

Roma:

Roma Gypsies often come to the UK from Eastern and central Europe. However, more generally people may still refer to this group as Gypsies. Roma Gypsies are the largest ethnic minority group in Europe and have been migrating to Britain from long-settled communities in Eastern Europe. There are estimates of ten million Roma with the majority residing in some of the poorest countries of Eastern Europe.

The Roma Gypsies also originated from northwest India around 1,000 years ago. Initially Roma were welcomed for their skills and earnings that could be made from them, however, when economic circumstances change they were retained by force, with some being imprisoned for over 400 years (Foster and Walker, 2009). As a result, Roma continue to be the subject of much prejudice and hostility throughout Europe.

Non-Ethnic Travellers:

There are other groups and individuals who call themselves Travellers. They may be individuals who have chosen or been forced into a life on the road. Or they may be part of larger cultural groups, who are not part of an ethnic minority but who do share a common culture. In Britain, the main groups are: New Traveller or New Age Travellers, Bargees and Showpeople or Fairground Travellers.

New Travellers or New Age Travellers:

The term *New Travellers* refers to people sometimes referred to as *New Age Travellers*. They are generally people who have taken to life on the road in their own lifetime, though some New Traveller families claim to have been on the road for three consecutive generations. The New Traveller culture grew out of the hippie movements and free-festival movements of the 1960’s and 1970’s. New Traveller caravans are generally more colourful and ‘handcrafted’ when compared to other ethnic Traveller groups.

Bargees:

Bargees are a type of travelling people that live in Barges, also referred to as “people who work the waterways.” There are certain cultural characteristics that accompany this aqua-nomadism (e.g. pursuing career and life on barges). The work of Bargees largely varied, though all were centred on work on barges. Some Bargees would managers or entry level crew members that performed manual labour whilst other would board to work on kitchen crews, boat maintenance and/or cleaning.

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3 A Barge is a large flat-bottomed boat used for hauling vast amounts of cargo.
Showpeople or Fairground Travellers:
Showpeople are a cultural minority that have owned and operated funfairs and circuses for many generations. Though culturally similar to Romany Gypsies, their identity is connected to their family businesses. They operate rides and attractions that can be seen throughout the summer months at fun fairs. They generally have winter quarters where the family settles to repair the machinery that they operate and prepare for the next traveling season.

Circus:
Like Showpeople, the Circus people have a long history, namely theirs is linked to the Ancient Roman Circus. In 1768 the modern circus started performing in London. The circus continued into the 20th century, although the popularity began to decline in 1970’s. Similar to the other Traveller groups Circus people have strong family and community ties and continue to live a nomadic lifestyle related to their cultural business of entertainment.

Other Travellers:
There are other groups of Travellers who may travel through Britain, such as Scottish Travellers (more specifically Scottish Lowland Romany Gypsies, The Ceardannan or Black Tinkers) Welsh Gypsies, and French Manush Gypsies, which have a similar origin and culture to Romany Gypsies.

Local Context: Population in Bristol
The history of Gypsy, Roma, Travellers (GRT) groups have been in Britain for over 500 years. Gypsies and Travellers have lived in and around Bristol for hundreds of years, on former commons and open areas such as: Emerson’s Green, Bradley Stoke, Patchway and Lawrence Weston.

This is reflected in street names such as “Gypsy Lane” and “Gipsy Patch Lane”. Currently there are many Gypsies and Travellers who were born in Bristol and spent their childhoods here, for example on sites in Speedwell, Redfield, Newtown and Brislington, and attended local schools. Small groups of New Travellers have frequented Bristol in the last three decades.

There is no reliable data on population sizes. Government estimates indicate that the indigenous UK Gypsy/Irish Traveller population is similar to that of the Bangladeshi community (according to the Office of National Statistic estimated figures are around 300,000 people in the UK since in 2006). Previously, Gypsies, Roma and Travellers have not been given a specific category in the National Census, however in 2011 were included in the Census. The Government’s GRT estimates are reached by combining direct count of caravans, examining school records as well as other recording systems.

Specific estimates of the European Roma population currently living in Bristol are that of 50 - 80 families. However, we know a lot of families are afraid to register as GRT for fear of harassment or discrimination they might face as a result.⁴

Bristol has a significant GRT community (consisting of Romany English Gypsies, Irish Travellers, Roma Gypsies, Showpeople and New Travellers). Some of the key priorities and concerns identified by evidence-based research and Bristol’s GRT community are:

- Poor access to accommodation services including welfare rights advice, tenancy support and Gypsy and Traveller site provision.
- Poor access to health services, high premature death ratios, married teenage pregnancies and little or no health contact prior to birth and low life expectancy.
- Significant poverty and hunger, particularly amongst the Roma community.

⁴ Romany Gypsies and Irish Travellers make up the majority of the Traveller population surveyed, with 36% and 34% respectively (ONS, 2011).
• Poor educational achievement resulting in poor school attendance and life opportunities. This can be compounded by a cultural resistance to secondary education.
• Public and media hostility towards GRT’s and Traveller sites (e.g. overt racism when reporting on new sites, GRT specific occupations or cultural events).
Section 2: Methodology

Accommodation Methods:

This report draws upon two methods of data collection and analysis. The section of the study is dedicated to Accommodation and employs methods of secondary analysis (i.e. using previous research in understanding the housing needs of GRT’s in Bristol). This report utilises information gleaned from the Opinion Research Services’ South Gloucestershire and Bristol’s Gypsy, Traveller and Travelling Showpeople Accommodation Assessment Report (2013).

The Accommodation Needs Assessment research methodology identifies the housing needs of Gypsies, Travellers and Travelling Showpeople and was largely based upon face to face interviews of GRT in Bristol and South Gloucestershire from May to June 2013. Interviews were sought with every known Gypsy, Traveller and Travelling Showpeople household present during this time period and 77 interviews were achieved in total on Gypsy and Traveller sites, with 70 of these in South Gloucestershire and seven in Bristol. Though only one member of each household was interviewed, the survey questions cover other members of the same household.

Education and Health Methods:

The second half of this study draws upon face to face and group interviews in collating data on the communal health and educational needs of ethnic Travellers (i.e. Romany English Gypsies, Roma Gypsies and Irish Travellers or GRT’s). GRT Specialist in Health, Education and Housing officers across Bristol worked in collaboration in drafting a culturally relevant list of interview questions. Research questions and interviews were conducted over a two-month period (October and November 2013).

Interview questions covered aspects of general health and wellbeing (particularly mental health and access to health services) but also measures communal concerns, priorities and experiences of education in Bristol. These research methods enabled us to highlight themes and trends in the different community responses to the questions. Research themes would then be shared with relevant services and partners in Bristol in order to improve service delivery and GRT engagement.

Although interviews were conducted with one family member per household the survey required general household information which enabled us to capture information relevant to the other family members. This survey consisted of seven Romany English Gypsies, six Irish Travellers and seven Roma Gypsies, with a total number of twenty research participants. The age and household profile of this sampling population is reflected as follows: Roma Gypsies with the largest family unit (with an average of nine children per family unit, this often includes extended family members)6 followed by Irish Travellers (with an average of three children)7 and then Romany Gypsy (with an average of three children per household).8 The age cohort of research participants ranged from 24 to 70 years old.

Prior to conducting our interviews we consulted the different communities (Gypsy, Roma and Irish Travellers) in gauging the relevance of each questions. This was done by contacting various community representatives to provide feedback about the questions, interview structure and

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5 This statistical disaggregation between Bristol and South Gloucester corresponds with the current site provision offered in the two different areas. There are further complexities underlying the clear South Gloucester and Bristol split. There are some instances where a single household may occupy numerous caravans/homes in both counties, often work related or to be closer to family. Alternatively there are families that choose to live in one country but attend schools and/or health centres in another. Therefore, it is important to widen our scope of analysis in order to truly understand GRT needs and concerns.

6 Roma children ages ranges from 0 – 15 years old.

7 Irish Traveller children ages range from 0 – 17 years old.

8 Romany Gypsies children age ranges from 0 – 16 years old.
timeframe. Slight amendments were made following these consultations which resulted in changes to the wording and length of each question.
**Section 3: Housing**

This section seeks to provide evidence which ensures the authorities (in Bristol and South Gloucester) comply with their requirements towards Gypsies, Travellers and Showpeople and acts in accordance with relevant legislation (i.e. the *Housing Act 2004*, *The National Planning Policy Framework 2012* and *Planning Policy for Traveller Sites 2012*). Also it aims to provide a current understanding of the accommodation needs of local Gypsies, Travellers and Showpeople.

**Accommodation Context in Bristol:**

We also have many Gypsies and Travellers living in housing in Bristol in council and private accommodation. It is estimated that there are 50 - 80 families, consisting of 300 - 400 Eastern European Roma origin living in Bristol residing in private housing often with 15 - 20 people in one house. Unlike Romany Gypsies and Irish Travellers most Roma will not have experienced living on a Traveller caravan site (Foster and Walker, 2009).

However, no exact data source exist in regards to the Irish Travellers and Romany Gypsy communities, as many are in private rented accommodation and do not want to identify themselves as Gypsies or Irish Travellers for fear of discrimination.

Applying a series of assumptions from health, education and caravan count data (specified in *West of England Gypsy and Traveller Accommodation Assessment, 2007*) it is calculated that the Gypsy and Traveller population of the study area is approximately 2,000 people or 500 household units of whom around a third are living in “conventional” forms of housing (i.e. *bricks and mortar*). The proportion of housed and site residing Gypsies and Travellers varies considerably between the surrounding local authorities.

It is also estimated that 25% of the Gypsy and Traveller population resides in Bristol City area (although only 5% reside in caravans) with the majority of the community living in conventional housing. In BANES and North East Somerset it is estimated to have approximately 5% of the Gypsy and Traveller population, with the remainder 16% residing in North Somerset and 55% living in South Gloucestershire (*West of England Gypsy and Traveller Accommodation Assessment, 2007*).

In the context of Bristol, there is only one permanent caravan site, located in Ashton Vale near Bedminster, which consist of twelve pitches. The permanent site has a mixture of English Gypsies and Irish Travellers which consists of twenty-three adults and up to fifteen to twenty children and is owned and operated by Bristol City Council. Some residents move away for the spring and summer for work purposes but return for the autumn and winter months. This site is for residency twelve months of a year.

The second site is for mobile GRT families (referred to as the *transit site*) situated in Laurence Weston and consists of twenty pitches. The transit site is used for Gypsies and Travellers moving to and from Bristol for work purposes only. They can stay for up to three months at a time only. This site saves on costs of evictions, illegal or unauthorised encampments and is a safe place to stay while looking for work. There can be as little as one family or as many as twenty families staying at any one time.

**Property Type and Tenure:**

By exploring the different property type and tenures service providers can gain a better understanding of local GRT living arrangements and how best to access and support the families. It is important to note that the figures produced in this section of the report exclude Roma Gypsies. However, we know that in Bristol most Eastern European Roma families live in privately rented accommodation. Often these households include extended family members (comprised of as many as three generations) that are often patrilineal in nature.
Today the majority of Romany Gypsies and Irish Travellers live in conventional housing. Ten of the respondents interviewed lived in semi-detached houses, four in terraced housing, and an additional four live in bungalows.

Seven of these bricks and mortar respondents are owner-occupiers. Sixteen research participants lived in rented accommodation; eight council houses; one from a housing association and seven from a private landlord.

However, evidence-based research highlights the negative impact bricks and mortar living arrangements have on Romany Gypsies and Irish Travellers (further information on the health impacts in Section 4). Nearly all of the participants interviewed expressed a strong desire to live on a Traveller site. Living in a caravan and near family was viewed as an essential part of Gypsy/Traveller culture and well-being.

**Connections with the Area:**

In addition to examining the property type and tenure is the relationship families have with areas of Britain. Respondents of the Romany Gypsy, Irish Traveller and Showpeople community noted a variety of different connections to their local areas with the main links identified as follows:

- “Always lived in the area,” with nearly 32% respondents
- “Family was from the area,” consisting of 26% of those interviewed
- “Lived in the area for a long time,” approximately 21% respondents

Familiarity with a region, familial heritage and/or business connections were associated with particular area of Britain which contributes to GRT travelling plans, living arrangements and overall satisfaction. Often connections with the area also influence the frequency and length of residence in a particular place.

**Length of Residence and Propensity to Travel:**

Twenty-four of the seventy people interviewed in the ORS study were identified as living in bricks and mortar (thirteen interviewed from Bristol and eleven from South Gloucestershire). Nearly 40% of bricks and mortar respondents (nine respondents) have been living at their current address for at least five years. A further five respondents have lived at their current address for at least twenty years (nearly 21%), six respondents residing in their home for less than a year and three respondents for six months or less.

These figures demonstrate that unlike previous generations of GRT modern-day communities are more likely to be static (i.e. not in mobile) and living in bricks and mortar. Services wishing to support GRT need to be aware of the new trends in their living arrangements in order to take the appropriate measure to engage them.

**When asked why their travelling habits had changed in the last year, respondents offered a variety of reasons which include:**

- Wanting a more settled lifestyle (seven respondents);
- In order for their children to receive an education (five respondents) and;
- Due to the increasing difficulty of roadside camping (three respondents).

Over half of the respondents interviewed in the ORS (60%) reported that they had not travelled at all during the last twelve months. However, many of these reported that they had travelled in the past.

Housing arrangements and propensity to travel was also influence by the social and cultural expectations to look after family. Ill-health, death or family issues can often warrant GRT families travelling long distances and/or relocating in providing support.
**Housing Needs:**

While seventeen respondents felt that their needs in terms of accommodation quality and space were met at their current accommodation, seven respondents did not. Of the respondents who felt that their needs were not met at their current accommodation, three felt that their accommodation was too small. However, other needs identified are: a disabled bathroom and bedroom in a downstairs living area; the accommodation was too expensive and; there was parking needed at the property.

Five of the respondents who said their needs were not met at their current accommodation said that they would like to move to another bricks and mortar property. One of the respondents said that their needs could be addressed at their property whilst another respondent felt that they would be better off moving to a Traveller site as opposed to living in conventional housing.

When asked if they felt it necessary to move to a permanent base within the next five to fifteen years, nine respondents said that they did.

**The main reasons given for wanting to move includes:**

- Needing a bigger place to accommodate the household;
- Needing more affordable accommodation;
- The need to move back to a caravan site

Five of the respondents ideally want to establish their new base in Bristol, with a minority wanting to be based in South Gloucester and Somerset (one respondent wanting their base to be South Gloucestershire and one Somerset). The majority of travelling families in the wider Avon areas prefer to live in Bristol; however, the lack site provision does not facilitate this arrangement.

**Recommendations Based on Needs (Future and Present):**

Prolonged consultation work with the Bristol’s GRT communities has highlighted the need for improved site provision for these families. Some of the key concerns identified were more official Traveller sites, support around navigating planning permission and land development. Evidence-based research emphasises the impact accommodation needs have on health and wellbeing as well as educational outcomes and access to mainstream services (with more targeted outreaching being achieved on Traveller sites). Therefore, addressing the accommodation needs of GRTs is one of the most effective ways in improving overall community life outcomes.
Section 4: Health

In order to access the health and wellbeing of Bristol’s Gypsy, Roma, Traveller (GRT) community we asked a series of questions. For the sake of this report the questions pertaining to health are broken up in to the following themes:

- Knowledge about how to register with a General Practitioner (GP)
- Accessibility of Health Visitors
- Frequency of GP Visits
- Attitudes about Overall Health
- Key Contacts for Mental Health Issues

GRT Health Overview:

Gypsy, Roma, Traveller people find it difficult to maintain good health, whether they practice a travelling lifestyle or a more settled lifestyle. A study in Sheffield found that people of a Gypsies and Travellers background have a significantly poorer health status and self-reported symptoms of ill health than any other minority ethnic and socio-economically disadvantaged groups in the UK.

The average life expectancy of GRTs is ten years less than the National average, with figures particularly worse for men in comparison to women. This can often be linked to a lack of access to health care services when they are on the move and the difficulties this presents in registering with a GP. GRT’s can sometimes face discrimination when they try to access health care services. There is also a culture of stoicism and only accessing medical treatment when they are seriously ill rather than as a preventative measure.

Studies consistently show differences in life expectancy of over 10% less than the general population, although a recent study stated that the general population were living up to 50% longer than GRTs. GRT health starts to deteriorate markedly when individuals are over 50 years of age (Communities and Local Government study, 2012).

Approximately 42% of Gypsy, Roma, Travellers nationally are affected by life-limiting and impairing long-term conditions as opposed to 18% of the General population (Parry et al., 2007). Other health issues such as high infant mortality rates, high maternal mortality rates, low child immunisations levels, mental health issues, substance misuse issues and diabetes, chronic bronchitis, arthritis, heart disease and asthma are also seen to be prevalent in the GRT communities.

Other contributing factors to the poor health outcomes and the difficulties in accessing services for members of this community are: Low levels of literacy, together with stigma (often associated with seeking medical attention); poor access to health information; widespread health-beliefs increase the likeliness that they will not seek treatment or will underestimate the seriousness of the condition (Van Cleemphut, 2009).

Evidence-based research highlights the negative impact housing problems have on GRT families. However, we know that in Bristol and in South Gloucester the main reported health-related difficulties for the GRT community are lack of suitable accommodation. Housing issues were identified as having the biggest impact on wellbeing, with the associated worry about future security and safety, stress and depression for GRT. Consequently, the health outcomes among Gypsies and Travellers living in brick and mortar are considerably worse than those of a nomadic lifestyle or living in caravans as it is countercultural to how they were raised and what they value as a community (Parry et al, 2004).

GRT experience a range of health needs, which are exacerbated by social factors, other than housing. Those with multiple and complex needs make chaotic and greater use of health care

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9 Gypsies and Travellers are reporting the highest levels of perinatal infant mortality of all ethnic minorities in Britain (FFT, 2010).
services than other groups and experience a range of barriers, in particular when accessing primary care services. GRT often lack trust in health professionals to provide appropriate care and to engage with their community on equitable terms. GRT can fear hostility and/or prejudice from healthcare providers (Communities and Local Government study, 2012).

**Registration with General Practitioners (GP):**

The health and well-being of Gypsy, Roma, Travellers is significantly lower than any other communities in England. Despite a greater health need, there is evidence that GRT’s access mainstream health services less than the general population. Traditionally these communities have often been deemed “hard to reach”; however, reports have shown that “considerable anecdotal evidence exists to support the notion that many GRT’s do not trust health professionals to provide appropriate care, or doubt their willingness to engage with community members on terms of equity” (EHRC 2009).

When asked if respondents, and their families, knew how to register with a GP the majority of GRT families felt it was difficult due to the extensive paperwork and requirement to produces original forms of identification (I.D.). This was further compacted by the following:

- The culture to travel;
- Limited storage space for filing within small caravans;
- Illiteracy and numeracy problems;
- The paperwork trail is unable to keep up with families in transit and those that frequently move as they have no fixed abode (family and travel plans are subject to change and can result in lost or misfiled paperwork);
- Difficulty of receiving essential health paperwork due to transit lifestyle and;
- Time and transportation problems (e.g. difficulty of getting families into GPs and limited access to vehicle).  

Romany Gypsies and Irish Travellers very often will travel back to previous family doctors (this could be as far as a across country journey for one doctors visit). This dedication to one family GP is due to the trust and long-established relationship with the doctor and/or health centre.

**Case Study: 1**

*One Irish Traveller family noted that it took up to six weeks to register due to the loss of data. The health centre’s reception had failed to record the information properly resulting in the family having to reproduce all forms of documentation before they could see a GP.*

**Case Study: 2**

*Another Irish Traveller registered as a ‘temporary resident’ and as a result, felt they did not receive the same service non-travelling families would receive. The family also felt penalised by the inability to form long-last and trusting relationships with their GP due to the temporary nature of their accommodation. As a result the family requested to see another GP (in the same health setting) in hopes for better treatment. However, the family was reluctant to file a formal complaint, about their dissatisfaction with the health service, for fear any negative feedback given would then follow them to other health centres when the family was travelling or when they returned to the same health setting.*

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10 Often families have one vehicle which during the day is used by the male, father figure, in the household in order to earn a living.
**Case Study: 3**

A Romany family experienced difficulty in filling out registration forms due to illiteracy problems and the inability to recall previous GP surgeries and doctors names. Furthermore, the family lacked adequate paperwork/ID required to officially register. The family found the whole experience extremely frustrating and exasperating.

**Accessibility of Health Visitors:**

When evaluating the GRT confidence and knowledge in accessing a health visitor service there was a mixture of responses.

**Positive:** 25% of families felt positive about their knowledge in accessing their health visitor (one Romany Gypsy living in a house, two Irish Traveller with one in a permanent house and another on a site and two Roma Gypsy families living in a house).

**Unsure:** 75% of the families were not certain if they knew how to contact their health visitor. This response consisted of six Romany Gypsy families living in Bristol, four Irish Traveller families (one living in a house and another in a caravan) and five Roma families (all living in privately rented accommodation).

Families were also unclear about the thresholds for these services (e.g. the eligibility to receive a health visitor and for how long). However, the vast majority of those interviewed had overwhelming positive things to say about their previous experience of health visitor services.

**Frequency of GP Visits:**

When measuring the frequency of GRT visits to the GP there was a mixed response within the community (N.B. this was during the winter months).

Please note that some of the responses given may have been influenced by what the different members of the Gypsy, Roma, and Traveller communities felt was the ‘right’ or ‘appropriate’ response to those interviewing them (i.e. official health and Bristol City Council employee).

**Romany Gypsy:**

**Frequent Visits:** 10% of Romany Gypsy families of GRT families interviewed attend the GP regularly. One family attended the GP approximately twice weekly (mostly related to the children’s health not adult health matters). Another Romany Gypsy attended the GP on a monthly basis for blood pressure check-ups.

**Rarely Visits:** 25% of the Romany Gypsies interviewed said that they rarely attend their GP. The Romany Gypsy community felt overall healthy and therefore little or no need for visiting the doctors. However, both Gypsy communities frequented the doctors for children health concerns rather than adults.

**Roma Gypsy:**

**Frequent Visits:** 30% of the overall GRTs interviewed noted attending regularly due to frequent and reoccurring health concerns. 15% noted that the frequent health visits were due children’s health concerns and needs therefore, rarely for parental health issues.

**Annual Visits:** 5% of the Roma Gypsy families interviewed specified visiting the doctors twice a year.

The evidence highlighted above demonstrates that Roma Gypsy families are more likely to attend their GP on a regular basis whilst Romany Gypsies are least likely to visit the doctors.
Irish Travellers:

**Frequent Visits:** Two Irish Traveller families said that they attend the GP on a weekly basis (10% of the 20 overall GRT families interviewed). In total 15% overall GRTs interviewed of an Irish Traveller background attend the GP frequently.

**Annual Visits:** Another family (of a similar ethnic background) said they were more likely to attend six monthly or when someone in the family is serious ill. 5% overall GRTs interviewed attend their GP on an annual basis.

**Rarely Visits:** Two families of an Irish Travelling background (10% overall GRTs interviewed) said they very rarely attended GPs. 10% Irish Traveller families (out of the overall 20 GRTs interviewed) noted as rarely attend the doctors.

*Attitudes about Overall Health:*

**Romany Gypsy:**
Five (or 25%) Romany Gypsies felt that their health was overall good. 10% felt their overall health was poor at the time of the interview but felt their overall health was average. Therefore, 35% Romany Gypsies noted having average to good overall health.

**Roma Gypsy:**
One (or 10%) Roma Family noted having excellent health, five (or 25%) Roma Gypsy families felt they had good health and one (10%) overall health.

**Irish Travellers:**
Four (or 20%) of families from a Irish Traveller background felt they had good to average health, with only 10% noting poor overall health (mainly related to chronic asthma, bone and joint problems).

*Key Contacts for Mental Health Issues:*

Members of the different Gypsy, Roma, and Traveller communities were asked who they would contact when suffering from stress, depression and/or ‘bad nerves’ (i.e. mental health problems).

**Handle Mental Health Issues Themselves:**
Only a minority, 5% of research participants (consisting of one Romany Gypsy family) said they would try to manage mental health problems on their own. However, the same group of people felt that they might turn to a GP if health concerns got progressively worse.

**Handle Mental Health Issues within the Community or Family:**
75% overall of the GRTs interviewed said that they would go to a family member to deal with mental health issues privately within their own community (mainly stress and/or depression). Of this 75% the responses broke up accordingly. Three (or 15%) Irish Travellers noted turning to family members for relevant support and visiting their GP if health matters escalated. However, another six members of the Irish Travelling community said that they would not turn to their GP for additional help regardless of how serious the problem became (as this was regarded a private matter). Six of the Roma Gypsies interviewed (30%) also turn to family and/or community members in seeking help to mental health issues however would not turn to their GP for additional help.

**Handle Mental Health Issues by going to the GP:**
Five (or 25%) of those interviewed said they would turn to their GP for support around mental health. These figures consisted of three Romany Gypsies, one Roma family and one Irish Traveller (though this family would be reluctant to tell anyone other than the GP, especially family or community members).
**Health Summary:**

Based on the findings of this study we can see that most Gypsies, Roma, Travellers in Bristol have **difficulty in accessing a GP**. Some of the factors which contribute to their difficulty in registering are: communication barriers, illiteracy, culture differences in time keeping, transportation issues, negative experiences (e.g. health practitioner's lack of cultural awareness, preconceived ideas about the travelling culture, and understanding the difficulties Gypsy and Travellers endure especially when in transit).

Likewise, GRT expressed there was a lack of information in understanding how to **access their local health visitor** either when stationary or in transit. Recommendations would be to disseminate more information to the different communities about whom their dedicated health visitors are, the health visitors work remit or threshold (e.g. family in transit, age of children and family vulnerability in order to warrant a dedicated health visitor) as well as a key contact in the wider Bristol area in signposting families to relevant health practitioners and visitors.

One of the key ways in which Bristol has tried to address the lack of information around relevant contact details for travelling families is by creating the **GRT Multi-Agency Directory**. The Directory is an exhaustive list of key contacts for travelling families in order to signpost them to relevant agencies they might need during their stay in Bristol. Furthermore, a directory was created to support Bristol’s Lawrence Weston Transit Traveller Site occupants (these can be obtained by phone any members of the GRT team listed in Section 7 or by speaking with the site manager).

The overall **attitude of GRT towards their health** was optimistic, especially given the series of health problems listed previously in this section. Given this outlook in addition to cultural traditions of natural remedies and the preference of privacy in regards to health matters GRT are less likely to **visit the GP** for minor health problems, mental health issues and/or adult health concerns.

On the whole GRT are more likely to turn to a family member or trusted member within their own community, particularly when dealing with **mental health problems** such as stress, anxiety and/or depression (e.g. ‘bad nerves’).

**Recommendations to Improve GRT Health Outcomes:**

Based on the consultation work with Bristol GRT in compiling this document there are several recommendations we would make in order to improve health outcomes of these communities.

One would be to allocate a designated GRT health professional that would work with GRT families enabling the establishment of trust and cultural understanding. GRT families are more likely to engage with health professionals they know well and trust. In the context of mental health, the same recommendations apply. However, there needs to be improvements in accessibility of health resources to GRT families to improve their knowledge around health and wellbeing, their ability to articulate their health needs as well as engage in mainstream health services.

Health outreach, such as mobile units and clinics, should be established in Bristol with the aim to establish relationships with the different travelling communities and improve uptake of health services. Health outreach exercises would also help GRT overcome cultural boundaries in accessing mainstream services.

There is also a need for cultural awareness training within the health services. Cultural specific knowledge about the health issues affecting GRTs will enable health practitioners to target key communal needs. There is also a need for information and resource sharing across health services in order to provide more effective and sustainable health outcomes for GRTs.

Peer education is another valuable method of engaging, enabling and empowering members of the GRT community. Training members of the GRT community is the best way to reach out to the wider group and gradually change health beliefs and behaviours.
Improved engagement and consultation work with the GRT communities (and their representatives) is needed when evaluating, monitoring and designing health services. However, it is also important to note that the GRT communities are particularly reluctant to provide free consultation work as it is something often asked of the community. Bristol’s GRT communities have expressed feeling undervalued for their previous engagement and commitment to health consultation work as it is expected of them to do it free of cost. In future, clear incentives and benefits to engagement work needs to be highlighted to the GRT communities so that their participation feels equally valued.
Section 5: Education

Another aspect of the Gypsy Roma Traveller Needs Assessment was to evaluate the communities’ attitudes towards education. Furthermore, the report examined the impact health and housing issues had on educational outcomes.

Cultural Context of GRT Education Outcomes:

In 2010, there were estimates of around 33 children and young people of Irish Traveller heritage and 64 of Gypsy, (both Roma and Romany heritage) in Bristol schools (i.e. nursery to year 11). These small figures highlight the issues of ineffective ethnic monitoring and families’ reluctance/unwillingness to disclose such pertinent information (these problems impact national, local and education statistics).

GRT often have a lack of educational skills, with a sizable minority being illiterate. This causes problems in obtaining mainstream employment, engagement with wider (non-GRT) community and accessing local/national government services. Difficulty in accessing services is particularly acute at the early year’s stage and historically there has been a very low take up of these services amongst GRT communities.

However due to the Education Act of 1981 Local Education Authorities (LEA) are legally bound to provide education for all school age children residing in their area, either permanently or temporarily. The Act states that it is the duty of the LEA to provide full-time education for pupils who:

“[…] are temporarily living in the area for long enough to be practical to attend school (e.g. the child of a Traveller)”.

Another barrier facing Gypsy, Roma and Traveller children, particularly those wishing to attend school or early years, include a lack of awareness and understanding about their culture. Lack of cultural understanding of the service providers and schools can result in further disengagement, unchallenged stereotypes and misconceptions. Furthermore, lack of cultural awareness can lead to ineffective educational outcomes and support services for GRTs.

Pressure and Challenges Impacting on GRT Education:

At present Gypsy, Roma, Travellers are the lowest achieving group at every Key Stage in education (DfE, 2012). For Example, GRT’s surpassed all other ethnic groups, ‘free school meals eligible’ pupils and even ‘looked after children’ in levels of drop-outs, absence, exclusions as well as Special Education Needs (SEN) and attendance rates.

Based on previous research carried out by Brain Foster and Peter Norton (2012) there are several push and pull factors which influence GRT educational outcomes (specifically those of primary and secondary age).

Pull Factors:

- English as an Additional Language (EAL) issues;
- Expectation of early financial independence, marriage and parenthood;

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11 In Bristol the different communities are geographically situated as follows: Romany Gypsy families located mostly in South of City, Roma Gypsy in East Central and Irish Travellers predominately in the North.

12 However, this statistic varies, as individual GRT pupils can and do achieve well.
Community concerns that cultural values are being undermined by formal aspects of education (e.g. sexual education) or informal education (e.g. dating or drug culture outside the GRT community);\textsuperscript{13}

Importance of family-based learning and self-employment;

Perceived irrelevance of secondary curriculum and formal qualifications and/or lack of role models;

Often parents, as with any parent of a small child, are worried about leaving their young children with someone else for the first time, especially those outside their own family and community. Their initial reluctance is compounded by a concern that their child will be singled out or treated differently because of their ethnic identity;

The group perception that allowing children to remain at secondary school are ‘disloyal’ to their community and/or culture.

**Push Factors:**

- Early exposure to racism or bullying could push GRTs away from formal education settings;
- Social and cultural exclusion of the GRT community and/or housing arrangement (e.g. families in transit and having no fixed abode or living on a caravan site where it is often difficult to access mainstream community transportation);
- Previous conflict with teaching staff or peers;
- A perceived lack of culturally specific knowledge or support in accessing the curriculum;
- Low teacher expectations in relation to attendance and achievement;
- Disrupted educational experience;
- Transportation issues;
- Accommodation issues;
- Refugee and asylum seeker issues (particularly affecting the Roma Gypsy community)

There is a particularly strong link between deprivation and underachievement and in primary schools, nearly 45% of all registered pupils registered as either Gypsy, Roma or Irish Traveller are currently eligible for free school meals; this figure rises to 56% in the context of special schools (DfE, 2012).\textsuperscript{14} Often the factors, previous listed, contribute to the perpetual cycle of social deprivation and underachievement. Additionally, strong pull factors (such as familial ties and cultural expectation in maintaining traditions) impact GRT educational outcomes.

**Education Needs Assessment Findings:**

Similarly Bristol’s GRT Needs Assessment highlights similar factors which impact on the educational experiences of GRT community.

This section explores five themes in relation to education. The themes cover the following:

1. Identifying community priorities and concerns
2. Previous experiences or notions about school/education
3. What are your impressions of Bristol Schools
4. Do you think it is important for GRT children to receive an education
5. Any other relevant information

\textsuperscript{13} Parents can also be fearful that in sending their children into the Gauje environment, they will lose their sense of identity as a Traveller.

\textsuperscript{14} Those pupils who are eligible for free school meals will benefit directly from the Pupil Premium, which is providing an additional £430 per pupil from April 2011 to help raise their attainment. They may also benefit from the £125m Education Endowment Fund, which will fund bold and innovative approaches to raising the attainment of disadvantaged children in underperforming schools.
Community Priorities and Concerns: Key Cultural Practices and Values

When asking the community what their main priorities and concern were when it comes to their families similar views were held across the different Gypsy, Roma and Traveller communities. The majority (95%) of respondents wanted a chance to provide their children with a safe and healthy upbringing as well as a clear knowledge about their culture (e.g. cultural identity, lifestyle and paternal ancestors). There was also a strong emphasis on children being confident and independent children with strong religious beliefs and practices.\textsuperscript{15}

Additionally, we asked participants what were the key cultural practices and values of the GRT community. This open-ended question was designed to further gauge communal priorities in informing outreach educational services and school engagement policies (this insight could be used to invest in and celebrate GRT culture in schools whenever possible). The responses given were as follows:

The majority of Romany Gypsies interviewed felt that having one’s health and family was essential to living a successful and happy life. Valuing one’s family and nurturing close family ties enables Romany Gypsies to “be strong”, to pass down knowledge and skills and “keep [their] culture and traditions alive”.

Irish Travellers, on the other hand, felt that cultural customs that promote community security and safety was paramount. These values could be achieved through respecting one another and ensuring loved ones always have “warmth” and “a roof over their heads.” The uncertainty of having secure accommodation is a major source of anxiety expressed by the Traveller community and continues to have an impact on GRT communities’ health and well-being (Foster and Walker, 2009). Research highlights the poor conditions (e.g. location and/or management) of Traveller sites (these areas are often seen as “no go areas” or ghettos) yet Traveller families still prefer to live on sites as it contributes to their “sense of community” of living amongst “their people”. Furthermore, the tensions between the “settled” and other GRT communities contribute to the difficulties GRT families face.

Roma Gypsies greatly value their religion and rich sense of family culture. Interviewees noted that faith and family adds meaning to life, are a source of happiness and overall well-being. One Roma community member noted that having both their family and religion is “just as important as eating well” or “having a nice house with lots of money”.

There are overlapping similarities between the different communities in regards to their cultural values in family life and promoting and sustaining a strong “sense of belonging” and community for their children. It is important for the community to feel valued and “able to contribute” to mainstream services and society. Often members of the GRT communities feel socially excluded and/or marginalised. Designing services that enable members of the GRT community to make a contribution and “feel a sense of belonging” will improve community engagement and outcomes.

In an educational context, outreach provision and schools need to ensure that GRT pupils and families feel equally included and understand and access schools and classroom activities. Families also need to feel welcome and that education/schools are part of their extended community and family support.

Previous Experiences of Education:

GRT community members were asked about their previous experiences or notions about school/education.

\textsuperscript{15}Of those interviewed Roma Gypsies felt more strongly that religious beliefs and values were a key cultural priority when compared to Romany Gypsy and Irish Travellers.
Whilst Romany Gypsies note that having an education is very important (especially for their children when compared to previous generations) attendance and attainment continues to be a problem for most families. Most of those interviewed from the Romany community expressed a strong desire for their children to be literate and numerate. However, one man noted he never was given the opportunity to go to school and therefore never sought these opportunities for his children. This particularly family were self-taught and learned everything they need to know (including how to read and write) from working in the community.

One Romany Gypsy man told us how neither he nor his children ever received a formal education, however, were still able to learn from each other how to read and write. Previously, education had meant “learning about life outdoors” and “how to survive (siting examples of rabbiting, hunting, fishing, how to make a fire, catapulting, learn about wildlife, nuts, trees and different types of woods, how to cook outdoors, how to fix a vehicles, etc.)” However, the respondent also could see how valuing more formalised forms of learning, ones that teach young people “how to read, write and do maths” would improve their life chances in getting a job and “being respected in this world”. The respondent also added that his grandchildren are the family’s first generation to receive an education, albeit methods of home tutoring.

An Irish Traveller respondent’s views towards education were that:

“Schools are a positive thing. Everyone needs an education to be able to read and write and to be offered the same opportunities as everyone else”.

Similarly, an Irish Traveller mother said that she was not afforded the same opportunities as children today but can see how education helps “get people ahead in life”. Furthermore:

“I didn’t learn much because my family was always travelling. [...] I can read and write a bit but only enough to get by. [...] Although, I liked it when I attended school I always wished I’d got a better education and will definitely make sure my children learn more than I did”.

Another Irish Traveller woman wanted her children to attend a Catholic school because she felt it was important “they learn their holy traditions”.

“I want my children to learn their religion because that is what it is going to take to learn how to become an independent adult”.

The mother feared that secular schooling might introduce her children to things that conflict or challenge their cultural (Traveller and Catholic) values and norms.

Another Traveller family viewed early years and primary educational settings as the most important and informative form of education. The family attributed less value to secondary and further education due to the cultural expectation of young people to support their families and learn the family trade or business.

“The first school (primary) was important because it is where the children learned to read and write. Secondary school is not as important because their culture and way of life (as an Irish Traveller) will teach teenagers everything they will need to know about life. [...] It’s acceptable for teenaged boys to leave school early to learn their trade with the fathers and for girls to stay at home. [...] But I know if my children wanted to go to school longer I would encourage them to do so”.

One Roma family shared their positive experiences about the educational opportunities they have received in Bristol.

“I feel proud to take my children to school every day because this is something that I was not allowed in my home country. [...] I can see how much they are learning in schools because when they come home I can see they are improving their English language”.

Another Roma Gypsy family expressed their happiness in receiving an education.
“I am happy for our children to go to school and to be supported by the teachers. I can see my children’s English language has made a lot of progress in such a short time. The teachers have been very nice to us and they get on well with the children. [...] I am so happy the children will continue to be supported in their education when they are older. This means that there will be more support for the family financially because they will be able to get good jobs”.

**Impressions of Bristol Schools:**

When asking GRTs views on what Bristol schools were like one Roma Gypsy family said that they had positive experiences for their children. The family noted that they could tell the schools have worked very hard to make them feel welcome and to help our children learning English.

When asked the same question an Irish Traveller family noted how they always found the schools in Bristol “helpful” and that “teachers get on with the children”.

“I enjoyed going to school in Bristol and that is why I want my children to go to school. Here, I don’t know how this will work out because my children are still too young. I want my child to go to a Catholic school but for now they can enjoy going to the children centre and play group”.

Whilst the Romany Gypsy and Irish Traveller community remained positive about Bristol schools there were several incidences of bullying and discrimination which complicated school take-up and attendance. Elected Home Education (EHE) was often the preferred method of educating children from ages 10 – 16 years old.

The feedback from the Roma community regarding Bristol schools was overwhelming positive. Many of the parents commented on how education was not an opportunity readily available to them in Eastern Europe therefore, something they valued tremendously about raising children in the UK.

**Communal Attitudes towards Formalised Forms of Learning:**

GRT families were also asked whether they felt it was important that their children received a formal education. 95% of the Romany Gypsies interviewed said that education was important. Similarly the same proportion of families felt that their children should learn how to read, write and pursue new opportunities such as getting a college degree and “proper qualifications for a career”.

“Children need to learn more than just how to read and write. They need to go to college and learn a trade, practical skills, but also the qualifications they need to get a proper career and support a family. Gypsies have the right to an education just like any other race. Children should be educated to learn a trade and have a good career”.

However, only 5% of the Romany Gypsy community only valued primary education. One family noted that primary school was the only “essential education” they felt her children needed.

“It is important the children go to school and learn to read and write but we don’t encourage our children to go to secondary school due to our cultural beliefs and values. [...] Our children left school a long time ago. My sons went to work with their father and my daughters have stayed at home and helped with all the domestic work. It has been really important to us that the boys learn to earn a living and to be self-employed. This is because we have to move around a lot and when there aren’t any places to stop we have to be able to make do and find work”.

Of those interviewed in the Irish Traveller communities education and further education were highly valued. Several families discussed how having a further education and learning key skills would enable their children to get a head in life. However, the take up of education, particularly further
education, conflicts the communal attitudes captured in this report. We have found that often Irish Traveller families have particularly low levels of school enrolment, attendance and attainment ratings. However, one explanation for this could be due to the Irish Travelling community being more transient/mobile when compared to the other Romany/Roma Gypsy communities.

One Roma Gypsy family surmised:

“We have been offered a better opportunity in this country (UK), to have better health care and a good education for all our children. I want my children to have the best so they can grow up and be the best they can be. It is important to be educated because that way you can be equal and people will not look down on you because you have the same opportunities and knowledge that they do”.

All of the Roma Gypsy families interviewed in this study felt that education was essential for children to reach their full potential. Equally, members of the Roma community felt that education was the best way in confronting social inequalities and prejudices about their culture.

Relevance of Formalised Education:

The GRT communities are not the only BME group concerned about the informal aspects of learning that takes place in schools and how that might impact cultural customs and familial values. Standardised learning can be viewed as threatening when communities do not feel they were equally consulted. GRT are no exception, as many feel due to being labelled “hard to reach/engage” are often not consulted in regards to their children’s education. One Romany Gypsy mother noted:

“Education is very important. Children should be educated and have opportunities to learn a skill and a trade. [...] If we want to teach our children practical skills about their culture and how to get their living there needs to be ways that schools can respect this and let us do both. We value education but we also value our culture and our family. [...] There will be certain seasons which are important to our family which means they [children] will have to travel in order for us to make our living (e.g. seasons of fruit and veg picking, cold calling, etc.) But nowadays families are so afraid of getting in trouble when exercising our rights. [...] We shouldn’t feel like this [...] we are being forced to compromise everything [...] and to make decisions when we were not given choices in the first places”.

This family feels forced to sacrifice their cultural customs over choosing to educate their children in mainstream schools. The family’s desire to see their communal professions and cultural practices of travelling understood and represented in the school system was extremely important. Schools should ensure that families understand their GRT rights to travel (if the child has attended 200 sessions and if the travel relates to the family’s trade/business).

The same family also noted that:

“Education is important because if we do door to door knocking or travelling during school time we are bound to be in trouble. [...] If our children are educated they will know the law and to do leaflets, invoices and cooling off periods so they will not get in trouble and can keep working the family business. Also they can learn a qualified trade and hopefully won’t have to struggle as much as we have. They will learn how to improve things and make it better for their families”.

The expectation of this family is for their children to learn aspects of the law (e.g. relevant to their cultural practices) and how it applies to travelling professions. Equally, there is an expectation for children to learn about business, and other business related subjects, which could be used to enhance GRT professions.
Evidence-based research demonstrates that schools that emphasise the relevance an education has to particular cultural group succeeding (in this case to GRT trades/professions and culture) them more likely they are to engage and achieve. Schools need to ensure that GRT interests are represented and considered when developing curriculum and when compiling information to share with GRT families.

Another family noted that education is good for the Gypsy community because it means the children “know more than just a trade”. However, this Romany Gypsy family was equally concerned about the impact schools could have on the GRT culture and religious beliefs.

“The children will always have their culture, that is something they can get from home and no one can ever take that away from them. But when they go to school that can change everything. What their parent’s tell them, their culture and that is no longer that important. So you see, what they learn in school starts to influence the family morals, beliefs and traditions”.

However, by schools celebrating diversity, GRT history and culture and making it apart of the curriculum we can begin to challenge these beliefs and improve school uptake. A particularly good time for this would be during GRT History Month in June.

Some additional comments made by members of the Roma Gypsy community were:

“I’m very happy with the education we receive as a family. My children have made such good progress in their school since we came to this country two years ago. They are very happy in school”.

“The education service in this country is very good and I would like my children to be able to get a good job at the end of their schooling. I think there is something like that, which they can do here that will help them find work after school”.

Comments such as these are importance in highlighting the for GRT families to see the practical resources and benefits of education rather theoretical outcomes for pupils. Research demonstrates the strong correlation having a job and economic stability has on mental health. It is important for schools to make sure GRT families are aware of the existing services and resources available which support young people making the transition from school to work. Sharing this information could help improve communal attitudes towards education (particularly secondary and college education) as it would be seen as meeting a communal needs of gaining necessary credentials and securing employment.

Another family chose to highlight the importance accommodation had on life outcomes, particularly for their children.

“If me and my family weren’t settled on a permanent site, we would not have the services we have now. Living all in one place, we can be offered more choices and chances in life. That way we are able to have the same opportunities as everyone else. Accommodation and security can open the doors to more opportunities for the Traveller communities, more so than years ago”.

The majority of Irish Traveller and Romany Gypsy families interviewed felt living on a travelling site improved their health and way of life. Permanent Traveller sites enable extended family networks to thrive, opportunities for Gypsy and Travellers to educate their children about their culture and (as the previous statement highlights) the opportunity for more strategic outreach work - with mainstream services accessing sties for tailoring GRT engagement work.
**Recommendations to Improve GRT Educational Outcomes:**

There are several important issues highlighted in this report regarding the educational outcomes and values of the GRT communities. This section draws upon national research and evidence informed practice in order to meet GRT needs whilst improving school take-up, attendance and attainment.

**Cultural Awareness and Celebrating Diversity: GRT History Month (June)**

A greater cultural awareness and consideration, by everyone involved in the strategic planning and practical delivery of all educational services (both mainstream and outreach services), provides a better experience for existing users and encourages others to attend educational provisions. Bespoke training, therefore, has a key role to play in achieving genuine equality of opportunity for Gypsy, Roma and Traveller families in Bristol (BCC and NHS GRT Team offer free training, see contact details in Section 7).

The month of June is Britain’s Gypsy, Roma and Traveller history month (GRTHM). The GRTHM started in Brent in June 2001. It was organised by Rocky Deans Head of the Traveller Education Service and further support from the local Irish Traveller community. GRTHM celebrates GRT culture and history. One of the ways we do this is by tackling the negative stereotyping and prejudices that exist today. Furthermore, it aims to celebrate the diversity of the different GRT communities through music, poetry, dance and art.

There were a number of questions that were the drivers for the initial GRTHM. These were:

- What can we do that will have a lasting positive impact in schools and within the local community?
- What will improve relationships between the settled community and the Traveller and Gypsy community?
- How can we showcase local talent from the Traveller and Gypsy community?

Since 2004 there has been significant attention given to GRTHM and in October 2007 Lord Adonis Parliamentary under Secretary of State for Schools gave his approval in October 2007:

“I have endorsed a national Gypsy Roma and Traveller History in June – the first will be in 2008. This will offer us all the chance to raise awareness and explore the history, culture and language of these communities, which is not usually included in the curriculum for all pupils. We can challenge myths, tackle prejudice and be in a position to offer a balanced debate about the issues. We will be able to celebrate the richness that Gypsy, Roma and Travellers communities bring to our everyday lives through their many varied academic and artistic achievements.”

However, there are several questions school should consider in order to understand the true value and significance of GRTHM (Source: GRT History Month London: [http://www.grthmlondon.org.uk/](http://www.grthmlondon.org.uk/)):

**What is the importance of GRTHM for both GRTs and non-GRT communities?**

The aims of the GRTHM are:

- Promote knowledge of the Gypsy, Roma and Traveller History, Cultural and Heritage
- Disseminate information on positive Gypsy, Roma and Traveller contributions to British Society
- Heighten the confidence and awareness of Gypsy, Roma and Traveller people to their cultural heritage.
- Celebrate Gypsy, Roma and Traveller culture and heritage

**How will GRTHM contribute to the ongoing fight for GRT anti-discrimination and equality?**
Through activities and information in schools, museums, libraries and the media we will be able to challenge stereotypes, contribute to community cohesion and understand the contributions that the GRT community has made to British society. Families that feel respected and “a part of their community” will be more likely to engage and contribute to mainstream services such as education.

**Importance of Identity and Ascription in Schools:**

A central theme to the GRT Education Needs Assessment was the desire to be culturally recognised and appreciated by schools. In doing school GRT families want to feel they are able to contribute toward their child’s education.

In order to be effective in improving GRT engagement and educational outcomes we need to begin to understand the nature and scope of the barriers these communities face when trying to access education. One major barrier to our understanding and addressing GRT educational outcomes is under or misreporting in school in regards to ethnic monitoring.

There are two ethnic categories that identify GRT children – Gypsy/Roma (WROM) and Traveller of Irish Heritage (WIRT). However, many families choose the equally accurate, but less contentious WBRI (White British), WIRI (White Irish), WEEU (White Eastern European), WEUR (White European) or WOTW (White Other). Underreporting and misidentification is a recognised national issue with fewer pupils ascribed to the two categories than GRT pupils known to support services for the GRT community (Foster and Norton, 2012).

The benefits of accurate identification lay in general improvements to the education system; the direct benefits to individuals (and their families) may be outweighed by the disadvantages they fear of facing as being identified as targets for racism or discrimination.

Families are entitled to choose whatever category they feel appropriate, but it is important that schools make parents aware of the choice available to them. Schools also need to be able to explain the purpose of the ethnic monitoring so to ensure that all children receive their full educational entitlement.

The schools guidance can be particularly important where families are unfamiliar with the UK education system; have limited English or struggle with literacy.

**A Key Question for Schools:**

Does the *welcoming process* in schools encourage openness of identity and is there provision for families changing their ascription as their relationship with the school develops?

**Information for Schools in Regards to GRT and Attendance:**

Parents should define whether they are of a Gypsy or Traveller background during school registration (parents should be asked to provide their ethnic code). Again identity and ascription in schools is key as a school cannot give a family *Traveller status* unless the parent has identified themselves as such. Whilst most Travellers today are likely to have fixed abodes (permanent homes) authorised absences need to demonstrate that it is related to the “family’s trade or business”.

When a family is travelling in connection with their trade or business the child is marked as “T” (authorised absence) in the school register. This means that the parent will need to advise the school of the exact reason for absence and the expected duration. They should be encouraged to access education whilst they are travelling and, if they attend educational provision through registration at
another school or specialist provision, they can be marked as “present at approved educational activity” (see dual registration and approved educational activity available on the EWS website).

If the parent indicates they are travelling (e.g. to see family, for a holiday or a family wedding) this does not meet the criteria for the “T” as it should be used (authorised or unauthorised holiday).

Children from traveller families are subjected to the same rules as other children in terms of being required to attend school. However, there is a defence available to traveller families if prosecuted for non-attendance provided that the child has attended a school for at least 200 sessions in the 12 months ending when legal proceedings are started. The use of “T” code for more than 180 sessions could indicate that the pupil has failed to meet this requirement and they should be referred to Education Welfare Service (EWS).

General Attendance Information:

1. **Pupils who are able to attend and choose not to**: are truants. They need to be followed up as a matter of urgency by the school attendance officers or the LA attendance service to ensure that a pattern of non-attendance does not become entrenched.

2. **Pupils who have dropped out of school**: should be referred to the Children Missing in Education Panel, which would consider strategies for re-integration or alternative placement.

3. **Pupils who have permanently moved away from the area**: the school are not truanting but may have to stay on roll until they appear on the roll of another school; this could take time due to family circumstances, how organised and proactive their access to Traveller Education Support, Home Tutor and/or the availability of suitable school places in the area to which they have moved.

4. **Pupils who have temporarily moved away from the area**: Their parents may enrol their children in another school, but want their original place to be kept open; in such a case dual registration is possible and attendances at one school can be counted by the other.

5. **Pupils whose home circumstances make it difficult or impossible to attend regularly**: require sensitive, multi-agency support to establish the circumstances to re-establish a positive attendance pattern. This group might include children who are caring for or supporting their parents in a culturally sanctioned and selfless way. This could be Integrated Family Services’ Troubled Families Project and Key Workers, Early Help, Young Carers Group, etc.

6. **Genuinely Nomadic**: pupils whose absences can be recorded with a ‘T’. Their parents may defend themselves against prosecution if their children have attended 200 sessions in the previous twelve months. Families should be encouraged to use Distance Learning Materials or register with e–lamp (<http://www.natt.org.uk/elamp-initiatives>) (additional information regarding distance learning resources below).


17 Please note that there are two sessions one school day – denoted by the morning and afternoon attendance taken twice daily.
**Best Practice: Improving GRT Attendance**

Another area of concern regarding GRT’s is attendance. This is primarily linked to the communities’ nomadic lifestyle and occupations. The Department for Education surveyed headteachers and governors from around the county in identifying effective strategies employed to improve the attendance of GRT pupils. One of the most commonly used strategies, at both primary and secondary level, (89% of primary headteachers and 80% secondary headteachers) was the provision of “dedicated support for attendance, in particular from Education Welfare Officers (EWO), Traveller Education Support Services (TESS) or through school attendance staff members” (DoE, 2010).

The second most common strategy (77% of primary headteachers surveyed) was to have contact with the parents/families, including procedures for contact on the first day of absence and site visits and/or meetings to explain and encourage attendance.

In secondary settings headteachers noted that curriculum support (e.g. individualised or flexible curriculum and the provision of distance learning packs) was useful.

**Other Strategies Mentioned were School Organisation/Ethos which Include or Allow:**

- Data Monitoring
- Permitting Late Arrivals
- Encouragement/Rewards
- Flexible/Reduced Timetables
- Transport support (as often families only have one car which is used for the family business 5 – 6 days a week)
- Flexible approach to homework (and homework clubs with additional support)
- Support with Uniforms
- Out-of-School Hours Support for Attendance (e.g. breakfast/after school clubs, walking buses and/or support from local youth organisations in establishing healthy boundaries and routines at home).
- Improve home-school relationship and parental engagement (i.e. improving accessibility and parents to actively engaging in their child’s education).

**Benefits of Distance Learning for GRT Children: Parent Held Education Records**

In approving the issue of GRT attendance there is Parent Held Education Record. The record is designed for pupils who travel between schools on a regular basis. It helps facilitate continuity of education by giving a teacher a quick and easy guide for beginning to address the pupil’s needs by saving time of unnecessary assessment. By filling in the records everyday it helps give, teacher and pupil, a sense of achievement.\(^\text{18}\)

Distance learning programmes have been in place nationally for Circus children and families for some time now and much has been learned about how to manage this way of working successfully.

Distance Learning as practiced by most GRT support services and operate on the assumption that children are both mobile and have regular school base that they will return to each year. The programme carries on in the travelling months and follows on the heels of learning that takes place in the winter. When children return to school in the winter they should feel that they have not missed too much work while they were away. This should reduce the amount of work teaching staff should have to put in to catch-up the child. When these programmes are successfully managed, it is possible for school attendance to be maintained by awarding marks for “education off site”.

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\(^{18}\) Printed copies of this book are available on National Association of Travelling Teachers (NATT) or by contracting Bristol City Council’s Gypsy, Roma, Traveller Education Liaison.
Where children are moving from one site to another and are not mobile, it is better to consider ‘dual registration’ with the child enrolled in two schools who communicate with each other and share the teaching at different times of the year. Where children do not have a regular school base, this virtuous cycle is impossible to maintain because no individual has the oversight of the child’s learning and progress. The child needs feedback about performance and the ability of work and the learning programme needs to be carefully structured. National Association of Teachers of Travellers (NATT) has recently introduced E-lamp programme, a B strand to provide for the needs of disaffected children who have a regular home base but who are not enrolled in school (the programme provides pupils with a laptop and access to online course for young people in years 10 and 11).


Additional Support Regarding Bristol GRT Educational Needs Whether:

- Around developing curriculum which celebrates GRT communal strengths and diversity
- Enrolling GRT Representatives enroll in Amnesty International Speakers in Schools Project [http://www.amnesty.org.uk/invite-amnesty-speaker-your-school#.UvJThkJ_v8s](http://www.amnesty.org.uk/invite-amnesty-speaker-your-school#.UvJThkJ_v8s)
- Or regarding any training request,¹⁹ proposed methods of engagement or tailored GRT Educational Programmes.

Please contact Bristol City Council’s GRT Education Liaison, Heather Mundy (contact details included the end of the GRT Needs Assessment Report).

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¹⁹ Training opportunities range from cultural awareness raising, general and mental health needs of GRTs (ideal for newly qualified teachers, teaching assistance, EMA coordinators) or around key communal issues such as domestic violence and human trafficking.
Section 6: Legislation

Decision-making for policy concerning Gypsies, Travellers and Travelling Showpeople sits within a complex legislative and national policy framework and this study must be viewed in the context of this legislation and guidance. For example, the following pieces of legislation and guidance are relevant when constructing policies relating to Gypsies, Roma, Travellers (this includes travelling Showpeople):

- Planning Policy for Traveller Sites 2012
- National Planning Policy Framework 2012
- Gypsy and Traveller Accommodation Needs Assessments Guidance 2014
- Environmental Protection Act 1990, for statutory nuisance provisions
- The Human Rights Act 1998, when making decisions and welfare assessments
- The Town and Country Planning Act 1990
- Homelessness Legislation and Allocation Policies
- Criminal Justice and Public Order Act 1994 (Sections 61, 62)
- Anti-Social Behaviour Act 2003 (both as victims and perpetrators of anti-social behaviour)
- Planning and Compulsory Purchase Act 2004
- Human Rights and Community Cohesion Act
- Race Equality and Equality Act 2006
- The Children Act 2004
- Education Act 1944 (amended 1996)
- The Education and Inspection Act 2006

Housing Act (2004) which requires local housing authorities to assess the accommodation needs of Gypsies, Roma, Travellers and Showpeople as part of their housing needs assessments. This section complies with this element of government guidance.

Housing Act 1996 in Respect of Homelessness:

To focus on Gypsies, Roma, Travellers the Criminal Justice and Public Order Act 1994 (Sections 77, 78) is particularly important with regard to the issue of planning for Gypsy and Traveller site provision. This repealed the duty of local authorities to provide appropriate accommodation for Gypsies and Travellers. However, Circular 1/94 did support maintaining existing sites and stated that appropriate future site provision should be considered.

For site provision, the previous Labour Government guidance focused on increasing site provision for Gypsies and Travellers and Travelling Showpeople and encouraging local authorities to have a more inclusive approach to GRT within their Housing Needs Assessment. The Housing Act 2004 required local authorities to identify the need for Gypsy and Traveller sites, alongside the need for other types of housing, when conducting Housing Needs Surveys. Therefore, all local authorities are required to undertake accommodation assessments for Gypsies, Travellers and Travelling Showpeople either as a separate study such as this one, or as part of their main Housing Needs Assessment.

Local authorities were encouraged rather than compelled to provide new Gypsy and Traveller sites by central government. Circular 1/06 ‘Planning for Gypsy and Traveller Caravan Sites’, released by the Communities and Local Government (CLG) in January 2006, replaced Circular 1/94 and suggested that the provision of authorised sites should be encouraged in hopes of reducing unauthorised sites and encampments.

The Coalition Government repealed the previous government’s guidance contained in Planning for Gypsy and Traveller Caravan Sites (Circular 01/06), along with the Regional Spatial Strategies (RSS) which were used to allocate pitch provision to local authorities. The CLG published ‘Planning Policy for Traveller Sites’ in March 2012 which set out the Government’s planning policy for Traveller sites. It should be read in conjunction with the National Planning Policy Framework.
In April 2012 the Coalition Government issued a further document relating to Gypsies and Travellers in the form of ‘Progress report by the Ministerial Working Group on tackling inequalities experienced by Gypsies and Travellers’ (CLG April 2012).

The aforementioned report contains 28 commitments to help improve the circumstances and outcomes for Gypsies and Travellers across a range of areas including:

- Identifying ways of raising educational aspirations and attainment of Gypsy, Roma and Traveller children;
- Identifying ways to improve health outcomes for Gypsies and Travellers within the proposed new structures of the NHS;
- Encouraging appropriate site provision; building on £60m Traveller Pitch Funding and New Homes Bonus incentives;
- Tackling hate crime against Gypsies and Travellers and improving their interaction with the criminal justice system;
- Improving knowledge of how Gypsies and Travellers engage with services. Provide a gateway to work opportunities and working with the financial services industry to improve access to financial products and services;
- Sharing good practice in engagement between Gypsies and Travellers and public service providers.

**Tackling Inequalities for Gypsy, Roma, Traveller Communities:**

The Human Rights Act 1998 came fully into force in October 2000. The Act builds upon the European Convention on Human Rights in UK law (the rights one has in everyday life and to respect the rights of others and an expectation that the rights of all will be respected).

For example, GRT’s continue to be the focus of social tension with accommodation issues at the core. People living near unauthorised sites often object to developments without planning permission or where the environment is being damaged. Such concerns receive widespread coverage in local and national media.

Nobody benefits from such confrontations; least of all the Gypsies, Roma, Travellers themselves. As previously mentioned (in Section 1) Romany Gypsies and Irish Travellers are legally recognised as ethnic groups, and protected from discrimination by the Race Relations Act (1976, amended 2000) and the Human Rights Act (1998).

Previous studies, such as *Common Ground*, a major report published by the Commission for Racial Equality (2006), have demonstrated how a lack of authorised sites for GRT perpetuates many of these problems. The Government has required all local authorities in England “to increase significantly the number of Gypsy and Traveller sites in appropriate locations with planning permission in order to address under-provision” by 2011.

Bristol’s GRT Support Team was formed in 2007 to protect and promote equality and human rights, to work towards the elimination of discrimination and harassment and to promote good relations within and between groups. As part of this remit, we have reviewed the progress made since 2006. In striving to achieve greater equality and improvement of services and outcomes for GRTs Bristol City Council and partners are asking the following key questions:

- Have things improved since the GRT Team was formed in 2007?
- In what ways?
- How are we meeting the Government targets in improving equalities and outcomes of GRTs?

January 1st 2007 Bulgaria and Romania joined the European Union. In response to this the UK Government imposed transitional restrictions that limited their access to the British labour market and services. Labour migrates from these countries had to receive permission from the UK Home
Office before they were able to take up employment. There were no restrictions on migrants wanting to be self-employed. However, as of January 1st 2014 Bulgarian and Romanian new regulations were introduced whereby nationals would have access to the British labour market (thus permission from the Home Office will no longer be required). The requirement to provide proof to a prospective employer that an individual has the right to live and work in the UK will still apply as it does to all prospective employees. New regulations will affect all individuals within the European Economic Area (EEA), which includes Bulgarian and Romanian nationals, whereby they will be unable to claim Job Seekers Allowance (JSA), income-based, and Housing Benefits for the first three months of their stay in the UK. However, after this period will be required to satisfy the habitual residency test in order to qualify for these benefits.

Bulgarian and Romanian nationals will be in the same position as other EEA nationals with respects to support from LA under social care legislation as of January 1st 2014. EEA nationals’ entitlement may depend on a number of factors such as: underlying entitlement to welfare benefits, whether an individuals is exercising their treaty rights, they are habitually resident and whether children are involved. The national WRPF network provides detailed guidance to LA on the assessment and support options for EEA nationals who may be restricted from accessing public funds.

In addition, any EEA national who has been in receipt of the Job Seekers allowance by virtue of being a job seeker or who became involuntarily unemployed will lose their right to reside in the UK after six months if the Department of Work and Pension (DWP) assesses that they have a genuine possibility of obtaining work (thus no longer able to claim JSA).

Whilst previously Bulgarian and Romanian national were usually unable to obtain housing assistance from a local authority until they have lived and worked in the UK for more than one year now their position will be the same as EEA nationals with respects to LA homelessness and housing duties. Entitlement to LA assistance will be dependent on individual circumstances, including their status as a worker, self-employed, a student, a formerly self-sufficient person or job seeker and the length of time they have been in the UK.

Bulgarians and Romanians are entitled to access NHS services under the reciprocal arrangements laid out in the EU Social Security Regulations. Bulgarian and Romanian nationals should also hold, or be entitled to, a valid European Health Insurance Card (EHIC) or a provisional replacement card. The UK government is able to recover the cost of the treatment provided to EEA nationals under this scheme from their government.

Legislation Relevant to Schools:

The Human Rights Act of 1998 is the most frequently used by the GRT community when submitting planning applications to develop sites into living accommodation where a number of rights, including the Right to an Education. However, since September 2007 schools are legally required to promote community cohesion (an agenda proposed by the Commission for Equality and Human Rights formed based on the Equality Act 2006). This legislation is monitored according to the following:

- Sex Discrimination Act 1975
- Race Relations Act 1976 (amended 2000)
- Human Rights Act 1998
- Equality Act (Sexual Orientation) Regulations
- Equality Act (Gender Realignment) Regulations
- Special Needs and Disability Act 2001

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20 A number of routes, including the Seasonal Agricultural Workers Scheme and the Sector Based Scheme were open to the Bulgarians and Romanian Nationals.
Employment Equality (Religion or Belief) Regulation 2003

In the context of education, schools are monitored according to the Education and Inspection Act 2006.

**Race Relations Act 1976 (Amended 2000) and Equality Act 2006:**

This Race Relation Act 1976 requires local authorities to promote race equality through a general duty by:

- Eliminating unlawful racial discrimination;
- Promote equal opportunities;
- And promote good relations between people from different racial groups.

The amendments made to this Act in 2000 places specific responsibilities on schools to enable them to comply with above mentioned criteria, in promoting race equality. In additional schools must:

- Have a written race equality policy and arrangements for assessing and monitoring the schools effectiveness;
- Schools are required to monitor the operation of their polices on pupils, parents and staff, in particular those of minority ethnic background (including GRT’s).

The requirement of schools to review and implement race equality policy will have an impact on attainment levels of pupils. Schools are also required to take practical measures to ensure that these monitoring results are accessible.

The Equality Act 2006 was also introduced as a precursor to a promised Single Equality Act. The Equality Bill (which came into force in June 2010) combines all of the UK equality enactments and provides comparable protections across all equality strands. Those explicitly mentioned by the Equality Act include: age; disability; gender; proposed, commenced or completed gender reassignment; race; religion or belief and sexual orientation.

**Local Authority Duty Relating to Education:**

The Education and Inspection Act 2006 is between the LA and Schools which requires the LA to appoint School Improvement Partners to support and challenge headteachers and school governors, helping them to focus on priorities and targets for school improvements. It also creates a new strategic role for LA in the establishment, closure or alteration of schools and the development of Trust schools.

Furthermore, it sets out changes to the following:

- The Admissions Framework to ensure fair access to schools
- The Entitlement of 14 – 19 Year Olds to 14 New Diploma Course
- School Transports
- School Behaviour Policies
- Ofsted Inspections

The Education and Inspection Act 2006 (The Duty to Promote Community Cohesion) requires schools to have policies to promote and ensure equality, which can take the form of either a “singe equality policy” or a number of different policies that cover each of the areas of Human Rights, Race, Gender, Sexual Orientation, Disability, Religion and Belief and Employment. Schools are also required to monitor the operation of such policies on pupils, parents and staff, particularly in regards to minority ethnic pupils (which includes those from GRT backgrounds).

**Rights of the Child 1989:**

The Act requires local authorities to provide a range of services to children in need, in particular to safeguard and promote the welfare of children. Additionally, there is a particular requirement to
work in partnership with parents in achieving these objectives. The UN Convention on the Rights of the Child recognises that children need special care and protection and that the family is the main form of protection for children. Therefore, there is a need for legal protection before and after birth and the importance of respecting the cultural values of the child’s community.

**Attendance:**

**Education Act 1944 (amended in 1996):** states:

“If a child of compulsory school age who is registered pupil at a school fails to attend regularly at the school, the parent of the child is guilty of an offense”.

Therefore, there is a statutory duty of both the local authority and parents/carers to ensure that education is available for all school age children in their area, appropriate to their age, aptitude and any special educational needs they might have.

In the context of Gypsy, Roma Travellers, Circular 1/81 emphasise this duty extends to all children residing in their area, whether permanently or temporarily thus embracing GRT children and young people. However, the Section goes on to identify circumstances in which families have “no fixed abode” is protected from this conviction for the non-attendance of their child at school where it can be demonstrated:

- When the child is travelling in connection with the family trade or business the child is marked as “T” (authorised absence) in the school register;
- The pupil has attended at a school (as a registered pupil) for as long as the nature of the family trade or business permits;
- Children over the age of six years old have attended at least 200 sessions during the period of twelve months ending with the date on which the proceedings were instituted.

The Act is designed to protect Gypsy and Traveller parents from unreasonable prosecution for their child’s non-attendance. It does not, however, mean that part-time education is promoted or (legally) acceptable for GRT children (as 200 sessions would be the minimum).

In an education context, both ethnic and occupational (non-ethnic) Travellers can identify themselves as “Travellers” and be marked as “T” (authorised absence) in the school register (if the criteria outlined above is met).

**Also see Section 5, Information for Schools in Regards to GRT and Attendance, for further information.**
Section 7: Research Summary and Best Practice Guidance

Outcomes:

This study highlights some of the barriers and cultural constraints Gypsy, Roma, Traveller communities’ face, particularly when accessing mainstream services. Whilst this report acknowledges the cultural idiosyncrasies and differences of Gypsy, Roma, Traveller communities it also highlights some of the shared communal priorities and concerns. One of these shared objectives was accommodation. These concerns were largely based around the following:

- Needing a bigger place to accommodate the household;
- Needing more affordable accommodation;
- The need to move back to a caravan site and to live among family and their communities.

The study’s findings also suggests that housing matters, and the ability to live out their culture (i.e. living in caravans alongside extended family and with people of a shared heritage and customs) affects the health outcomes of Gypsy, Roma, Travellers. Difficulty in accessing GPs, local health visitors and mental health services are other major health concerns expressed by these communities. The difficulty of registering, illiteracy, time constraints, transportation issues as well as previous (negative) experiences of health services were often cited as barriers in accessing health care.

Since conducting this report, Bristol City Council, a national Traveller charity (Friends Family Travellers) and Healthwatch have been working to improve access to health and social care services for GRT communities. One outcome of this partnership work has been to provide families with I NEED EXTRA HELP CARDS. The cards outline the cultural needs of the Gypsy, Roma, Traveller communities as depicted below.

<table>
<thead>
<tr>
<th>Bristol City Council's</th>
<th>I NEED SOME EXTRA HELP WITH...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gypsy, Roma, Traveller Team:</td>
<td>Filling in forms</td>
</tr>
<tr>
<td></td>
<td>Reading and understanding</td>
</tr>
<tr>
<td></td>
<td>I would like a staff member who is the same gender as me</td>
</tr>
<tr>
<td>I NEED SOME EXTRA HELP, PLEASE.</td>
<td>I would like to speak to someone confidentially.</td>
</tr>
<tr>
<td>Healthwatch Bristol</td>
<td>117 2690400</td>
</tr>
</tbody>
</table>

Professionals working with GRT communities distribute these cards and encourage families to use them when accessing service and provide feedback to Healthwatch. Feedback (whether positive and negative) is used in improving services, understanding the communities’ needs and in identifying areas of the City which are doing particularly well or might need additional support and/or attention.

Additional concerns associated with the lack of site provision and highly mobile communities are the difficulties encountered in accessing full-time education. Lack of support networks and service /
geographical familiarity means it is often difficult for these families to access education on their own without outside support.

This report highlighted a shared concern regarding the lack of cultural relevance regarding education. Parents and carer givers felt that schools were unable to provide flexible teaching methods, school timetables and school admissions which would accommodate Gypsy, Roma, Traveller culture. Communal concerns also include the lack of awareness and consideration given to additional dedicated support for Gypsy, Roma and Traveller pupils and families in schools. Whereas if culturally relevant and accessible support was offered families felt this might improve educational outcomes such as attendance, achievement and social isolation.

Another shared objective was of service providers (such as schools and key professionals) in increasing their efforts in promoting Gypsy, Roma, Traveller culture and identity. Examples given were in relation to providing for more community inclusion and cohesion work in addressing issues such as bullying, racism and discrimination which often negatively impacts experiences of services, particularly education.

**Recommendations for Improved Outcomes:**

An aspiration to secure unhindered access to mainstream services is used to measure successful outcomes for GRT’s (e.g. able to access service on their own accord and unhindered by racism or discrimination). However, in achieving this there needs to be a more coordinated move towards mainstreaming and integrated working; one that offers opportunities to move towards greater flexibility and sensitivity in provision.

Therefore, there is a need to ensure inclusion and recognition of all groups in society, including Gypsies, Roma, Travellers. This report provides the culturally relevant knowledge in supporting and understanding GRT communities, through encouraging services to adopt an integrated and inter-agency working approach to provision. As part of our work, we have highlighted key health, housing and educational statistics, priorities as well as relevant pieces of legislation. Poor life expectancy, depression, mental illness, maternal and infant mortality rates and widespread homelessness are just some of the practical barriers GRT face. We have also learned that in terms of health and education, they are one of the most deprived groups in the Britain.

The relationship between Gypsies, Roma, Travellers and service providers is too often characterised by suspicion, indifference and occasionally, hostility. We believe the underlying cause of the nature of this relationship is due to fear (on both sides), misunderstandings, mistrust or previous failures in establishing rapport.

Service providers tasked with trying to improve GRT outcomes and engagement should consider the importance family, community and culture play in yielding positive, effective, and sustainable change.

Whilst GRT have often experienced difficulties in accessing and using mainstream services another explanation for the low uptake of services is lack of interest or relevance it has for this minority group. Service providers that adopt innovative measures in addressing the shortfalls in the support provided to GRT (e.g. ensuring services provide a read-easy versions or culturally relevant interpretations of resources, offer specialised services and/or consultation work) are more likely to understand the nature and scope GRT issues and the support needed.

**Key Questions to Consider:**

- Commissioners should ask themselves if the services being provided are equally accessible to GRTs and if so what impact has engagement had on GRT life outcomes?
- And what could your service do more in building the capacity of GRT children, young people and families?
- If you could what is standing in your way (identify barriers)?
We can see from this report that engagement and outcomes can be strongly influenced by health, housing and/or educational issues. Working across different agencies and closely with the communities we aim to serve is important. GRT families need to be informed (in a culturally sensitive manner) about the available support services as well as those that their children might be offered at school or in their youth settings. Professionals need to adopt an integrated approach to partnership working in sharing information, expertise and resources in order to promote GRT community strengths and improving outcomes. Additionally, interventions need to be well planned, culturally sensitive (primarily those that promote prevention and early intervention whenever possible) and implemented by agencies that are already working closely with this minority group so that they do not continue to be further marginalised and/or disadvantaged.

There are several benefits to improving GRT engagement, consultation and participation work. The key points, outline below, are taken from “The Right Choice” Action for Children Report (2009) which highlight effective outreach work with marginalised groups, children, young people and their families.

Benefits to Engagement work with GRT Children, Young People and Families:

- **Recognition and Respect**: That their ideas are valued and can facilitate change and influence the service(s) they receive.
- **Experience and Skills**: That they have opportunities for learning and development that will equip them for the future and better life outcomes.
- **Ownership and Responsibility**: their involvement will help to build an understanding of the world around them and encourage their active participation and citizenship in other areas of their lives.

It is important for relevant (GRT) services to continually developing a needs-led approach in engaging, supporting and empowering families. GRT involvement provides the community with a greater understanding of their own needs, communal priorities as well as the skills and opportunity to express them. Effective partnership work and feedback also builds trust and relationships with (service provider) staff, and improves confidence, self-esteem and access to mainstream services.

Benefits to the GRT Team (and Other Relevant Services):

- **Skills Development**: New situations require staff to think creatively about the work they do and how they engage the children, young people and the families they support.
- **Relationship Building**: Enables staff to focus the quality and effectiveness of the work with individual families or community (i.e. just Roma Gypsies, etc.) rather than the immediate or overarching GRT community needs.
- **Insight into GRT Views and Concerns**: Staff develop a wider understanding of children, young people, their family’s priorities, feelings and concerns through exploring new subjects together, for example the qualities and/or support they would like in services.

Each of the above points contributes to building better relationships with the GRT communities and a greater insight into each individual’s unique situation. This assists professionals in the planning and provision of services that meet the needs of the children and young people in their care, and clearly has a direct impact on the safety of the children and young people they support.
For an outline of good commissioning principles and governance responsibility in supporting, engaging and empowering Gypsy, Roma, Travellers (which complies with Bristol City Council’s Safeguarding Children Board Threshold Guidance and Outcomes Framework 2014) please see additional resource outlined in the Appendix, Section 8.

**Partnership Working:**

Bristol has a wide range of services that work together in supporting, engaging and empowering Gypsy, Roma, Travellers. Bristol City Council’s Housing Solutions, Inclusion in Learning and Community Cohesion Teams work alongside partners in Public Health to enhance our understanding of one of Bristol’s longest established minority groups. We believe it is important to take a City wide approach when addressing the needs, priorities and life outcomes of the GRT community. Below are some of the leading professionals working in partnership in supporting Bristol’s GRT communities as well as list of the GRT Drop-in Centres:

**Steven Hearsey:** Gypsy, Roma, Traveller Site Manager and Community Liaison Officer for both Bristol’s permanent and transit Traveller sites, unauthorised encampments and in providing advice and support around accommodation needs.

☎ 0117 9224272
✉ steven.hearsey@bristol.gov.uk

**Heather Mundy:** Gypsy, Roma, Traveller Education Liaison Officer works with families, communities and schools to ensure the following:

- Schools are culturally equipped to understand GRT needs, concerns and priorities;
- Multi-agency partnership work in developing targeted GRT support;
- Families with school registration;
- Use of distance learning / learning agreements as an educational continuity strategy;
- Promote and improve parental engagement;
- Prevent barriers to education (i.e. bullying, discrimination, literacy issues, cultural issues, etc.)

☎ 0117 9224770
✉ heather.mundy@bristol.gov.uk

**Linda Vousden:** Gypsy, Roma, Traveller Specialist Health visitor works with families with children under five years old. Linda visits families at home and can give advice on their children’s development and health. She is able to give information about local health services, housing and benefits. Linda works Tues, Wed and Thursdays

☎ 0117 3408145

**Community Midwife Services:**

Expectant GRT mothers can see the Community Midwife Service which provides care and advice in pregnancy and on the health of the unborn baby. Contact midwives if you are travelling and need to be transferred to your nearest or relevant health visiting service.

GRT mothers who are suffering from postnatal depression (a.k.a. ‘Baby Blues’) can also contact the Community Midwifery Office for additional support and advice. Families living in Bristol, South Gloucester and North Somerset call The Community Midwifery Office to locate the nearest service:

☎ 0117 342 5241 or 0117 342 5758
**GRT Drop-in Centres:** GRT Team / Drop-in Centres is a multi-agency team including partners from key local children’s centres, health centre, Bristol City Council’s Housing and Education Department, the police and various other key members from the community and voluntary sector. This better coordinated approach means that significantly more GRT children and families will receive the right help, in the right place, at the right time.

The Drop-ins are really important aspect of improving GRT outcomes, support offered and the safeguarding of children and young people.

**The drop-ins Aim to Provide:**

- Free and new service for GRTs
- Information about services / sign-posting
- Tenancy advice and support
- School placements and Home education advice
- Family support and learning
- Benefits support
- Postal support (form filling)
- Support for families affected by parental imprisonment
- Health and well-being advice and support
- Advice about City-wide activities for children, young people & families
- Support for young carers

If you are working with and/or are concerned about a GRT child, young person or family or think they may need some support please encourage the families to attend the relevant drop-in centre (see below for further details).

<table>
<thead>
<tr>
<th>Area of Bristol</th>
<th>Support for…</th>
<th>Venue</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>North Gypsies &amp; Travellers (Transit Site)</td>
<td>5-Ways Bungalow</td>
<td>1st Wednesday of the month</td>
<td>11.00am – 1.00 pm</td>
</tr>
<tr>
<td>North Gypsies &amp; Travellers</td>
<td>Upper Horfield Children’s Centre</td>
<td>Every Wednesday</td>
<td>11.00am – 1.00 pm</td>
</tr>
<tr>
<td>East Central Gypsies &amp; Travellers</td>
<td>The Limes Children’s Centre</td>
<td>Every Wednesday</td>
<td>9.30 - 11.30am</td>
</tr>
<tr>
<td>East Central Roma Easter European</td>
<td>Wellsprings Healthy Living Centre</td>
<td>Every Tuesdays</td>
<td>1:30 - 3:30pm</td>
</tr>
<tr>
<td>South Gypsies &amp; Travellers</td>
<td>Compass Point Children’s Centre</td>
<td>2nd Monday of every month</td>
<td>12:30 – 2:30pm</td>
</tr>
</tbody>
</table>

The GRT Drop-in Centres will also provide families with access to Healthwatch, a service designed to help families identify the relevant voluntary and community sector support they need. Additionally, Healthwatch will provide GRT families with an anonymous way to have their say about local health and social care, leading to improved health and social care service for GRT people.
Section 8: Appendix – Resource for Service Providers

With the new landscape of People services delivery for public sector bodies, it is increasingly important to achieve consistency across services. In achieving this goal Bristol City Council has taken a long-term view, drawing upon relevant partners and research in predicting the future needs of the Gypsy, Roma and Traveller communities. Partnership work is essential to understanding the “bigger picture” - what concerns, needs or services there are and how we can help. But it also enables us to minimise duplication and maximise opportunities and resources. In line with this goal Bristol City Council is currently, rolling out a project called: “The Way We Do Things” which examines and ensures that our organisational goals, “The Way We Do Things” (practices) and “The Way We Do Things” (language) are equally accessible to people of all backgrounds, different ages or learning styles.

Bristol City Council People Directorate (which includes Children and Young People Services) wants to improve the outcomes of Gypsy, Roma Travellers as well as the services offered to these different communities. This appendix was compiled to provide additional support and resource in relation to the principles and best practice outlined in Section 7. Likewise, it aims to outline good commissioning principles and governance responsibility in supporting, engaging and empowering Gypsy, Roma, Travellers (this guidance complies with Bristol City Council’s Safeguarding Children Board Threshold Guidance and Outcomes Framework 2014). Service providers can reference this document when developing or monitoring their own service outcomes and ability to effectively support GRT children, young people and their families.
Appendix 1: Triangle of Need

Level 4:
A very small group of C/YP who need intensive specialist help (e.g. children in care, in need of protection or have severe health needs or disability).

Level 3:
The group of C/YP and are ‘in need’ because they are unlikely to achieve or maintain a reasonable standard of health or development without the provision of services or they are disabled. Needs will be significant and long-term, a plan is likely to be highly personalised and a process of regular reviews will be required.

Level 2:
Vulnerable C/YP, or those with ‘additional needs’. Approximately 30% of C/YP who while needs some additional support or intervention for them and maybe their families. This level of needs covers a wide range of risk factors and behaviours and may require 1:1 or group support.

Level 1:
The majority of C/YP (two-thirds) are able to grow up through childhood and the teenage years with the support of their families and access high-quality, inclusive services that are provided for all children (e.g. schools, primary health services and leisure services).
## Appendix 2: Equalities Policy Checklist

<table>
<thead>
<tr>
<th>Content</th>
<th>Evidence</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legislation</td>
<td>Accurate reference to the Equality Act 2010 and all protected characteristics</td>
<td>Demonstration of an up to date understanding of equalities legislation and its implementation</td>
</tr>
<tr>
<td>Covers all Areas</td>
<td>Evidence that the policy relates to: Staff, clients and volunteers</td>
<td>Commitment to applying equalities considerations to staff, clients and volunteers, in the way services are provided</td>
</tr>
<tr>
<td>Discrimination etc.</td>
<td>Makes reference to tackling: Discrimination, harassment, duty to make reasonable adjustments</td>
<td>Demonstrates a commitment to eliminating direct and indirect discrimination; to dealing with harassment of staff, clients and volunteers; to ensuring that disabled people are not disadvantaged as a result of their impairment and in ensuring buildings and facilities are accessible</td>
</tr>
<tr>
<td>Complaints</td>
<td>How complaints under the equalities policy will be dealt with.</td>
<td>Evidence that complaints of discrimination and harassment under the Equalities policy are dealt with effectively.</td>
</tr>
<tr>
<td>Recruitment</td>
<td>Arrangements for recruitment and selection (and promotion)</td>
<td>Evidence that equality considerations are applied to recruitment and selection and promotion</td>
</tr>
<tr>
<td>Advertising</td>
<td>A commitment to advertise widely and recruit from a wide pool of applicants</td>
<td>Demonstrates a commitment to achieving a representative workforce</td>
</tr>
<tr>
<td>Monitoring</td>
<td>Monitor the profile of employees, volunteers, clients etc.</td>
<td>Evidence of monitoring to understand make up of current clients and staff with a view to taking action to redress under-representation</td>
</tr>
<tr>
<td>Training</td>
<td>Arrangements for equality training, including a commitment to providing access to training for all employees</td>
<td>Staff are up to date, understand how equalities considerations impact on service delivery and staffing issues; how to meet the needs of clients from equalities groups,</td>
</tr>
<tr>
<td>Communication, Responsibility and Review</td>
<td>How the policy is communicated; where responsibility for the policy lies; the date when the policy was adopted and details of review.</td>
<td>On-going commitment to ensuring policy is communicated to all staff, is reviewed regularly to ensure it is kept up to date and who is responsible for this in the organisation.</td>
</tr>
</tbody>
</table>
Appendix 3: Equalities and Safeguarding Guidance

Appendix 3A Equalities Guidance

Please detail how your service is actively working to promote equal opportunities in all aspects of the operation of the service including management, employment practices with both paid and unpaid workers.

Look for Examples of:

- **On-going commitment to ensuring policy is communicated to all staff, is reviewed regularly to ensure it is kept up to date and who is responsible for this in the organisation.**

- **Staffs is up to date, understand how equalities considerations impact on service delivery and staffing issues; how to meet the needs of clients from equalities groups.**

- **Demonstrates a commitment to achieving a representative workforce.**

- **Evidence that equality considerations are applied to recruitment and selection and promotion.**

- **Demonstrates a commitment to eliminating direct and indirect discrimination; to dealing with harassment of staff and volunteers; to ensure that disabled people are not disadvantaged as a result of their impairment and in ensuring buildings and facilities are accessible.**
The Safe Network has identified four core Safeguarding Standards in March 2012 which are designed to help Service Providers keep children and young people safe. The standards aim to ensure that works undertaken by groups/organisations are: As safe as possible; Enjoyable and rewarding to all those involved and Compliant with legislation.

The Safe Network Standards with the CYPS commissioning services framework covers the following four core safeguarding principles. By registering on the Safe Network website your service will be able to access an interactive self-assessment tool (this will cover all the elements of each standard and help your service determine your organisational strengths and areas in need of improvement in terms of safeguarding CYP).

### Four Core Safeguarding Principles:

#### Safer Staff and Volunteers – Induction and Supervision

- **Standard:** Safe practices are used to recruit and introduce staff to their role and to help them carry out their duties safely. Good recruitment process will help your organisation select the best person for the job – people less likely to harm children, intentionally or accidentally. Good recruitment, induction and supervision processes help to show staff, volunteers and those interested in working in your organisation how much you value children’s safety and well-being.

**Essential Starting Points: Application, Interviews and References**

- A written recruitment and induction policy; an application form covering essential information, completed by everyone who applies for a post; face-to-face interviews with all prospective staff members, involving more than one person and using a transparent scoring system; A rule that applicants must provide two references, two pieces of identification and original copies of necessary qualifications before appointment.

**Checking, Training and On-going Support**

- CRB checks and any additional necessary vetting procedures are carried out for each member of staff/volunteer working with CYP, in line with CRB and any other official guidelines; All staff/volunteers are made aware, during their induction period, of how to keep CYP safe in your organisation; A trial period for all staff/volunteers, with a review before they are confirmed in post; and Regular supervisions and support for all staff/volunteers.

**Additional Procedures:**

- Clear person specifications and role descriptions for all post; Advertisements for all posts; An application pack for people interested in each post; A process for short-listing candidates for interview, involving more than one person; three month induction for all new staff/volunteer members.

#### Child Protection

- **Standard:** Protect CYP known to the organisation as being at possible risk to abuse or neglect.

**Written Statements and Procedures for Dealing with Abuse:**

- Clear written statements of your organisation’s: Commitment to protecting CYP from harm (e.g. a child protection policy); Procedures for dealing with situations where a child says that she/he is being abused/neglected, is showing signs of suffering harm; and Procedures for dealing with where allegations of abuse are made against someone (either an adult or a CYP) in your organisation.
### Named Contacts

- A named person in your organisation who has special responsibility for dealing with child protection and who can be easily contacted, plus arrangements for cover if the named person is not available; A written code of behaviour for everyone involved in the service, both CYP and adults; A “whistle-blowing” procedure for anyone who feels that the code of behaviour has been broken; Staff, volunteers and CYP and families have easy access to information about child protection and about the organisation’s policy, procedures, named person and code of behaviour.

### Ensuring your Procedures being Followed:

- A system for auditing whether the arrangements you have in put in place are being used correctly and effectively; On-going support and/or training to make sure that your staff/volunteers who work with children are able to recognise signs of possible harm to children and are aware that some children, including disabled children, are particularly vulnerable to abuse.

### Involving Children, Young People and Families in Developing and Achieving this Standard!

#### Prevention and Responding to Bullying

- Standard: To minimise the risk of bullying and to put a stop to it when it occurs.

#### Written Statements and Procedures for Preventing Bullying:

- A clear anti-bullying policy and statement within your Code of Behaviour that set out the dos and don’ts

#### Open Discussion and Review Session:

- Regular discussion/input about bullying issues with the clients; a complaints policy and procedure; Staff, volunteer, CYP and families have easy access to clear information about your anti-bullying policy and procedures and code of behaviour.

### Responding to Bullying

- A written anti-bullying procedure for managing and responding to incidents of bullying

### Avoiding Accidents and Running Safe Activities and Events

- Standards: Ensure that physical risks associated with the activities undertaken by the CYP in the organisation are identified and managed.

#### Risk Evaluation:

- Current risk assessments of the venue, specific activities/outings/events involving CYP.

#### Equipment Safety Checks

#### Information and Consent:

- Clear policies on parental consent to activities; Information about each child’s medical and dietary needs, allergies, specific development requirements; Availability of parent’s/carer’s contact details; and Access to a phone during group meetings/activities.

#### In Case of an Incident:

- First aid boxes available, checked and maintained; A simple procedure for reporting incidents and “near misses”; Availability of contact details of local doctors and health facilities where CYP are meeting; and Adequate insurance for all the CYPS, clearly displayed.
Appendix 3C: Additional Safeguarding Guidance

Please detail how your service is actively working to address the factors that directly or indirectly exclude children and young people from achieving outcomes. This can include any activities which seek to reduce obstacles to access and pro-active work to engage with members of equalities groups. You may wish to make reference to the demographic information you are submitting.

Look for Examples of:

- Demonstration of an up to date understanding of equalities legislation and its implementation.

- Commitment to applying equalities considerations clients in the way services are provided.

- Demonstrates a commitment to eliminating direct and indirect discrimination; to dealing with harassment of clients; to ensure that disabled people are not disadvantaged as a result of their impairment and in ensuring buildings and facilities are accessible.

- Evidence that complaints of discrimination and harassment under the Equalities policy are dealt with effectively.

- Evidence of monitoring to understand make up of current clients and staff with a view to taking action to redress under-representation.
Appendix 4: Participation Monitoring Guidance

Please detail the ways in which you have involved children, young people and their families in the design, delivery and review of services. Please provide examples of changes or decisions that have been made within your service as a result of their participation.

Look for Examples of:

- The participation of children and young people is a central commitment of the organisation.
- Feedback/evaluative work are key to assessing the needs and interests of children and young people as well as measuring the success of the service provided.
- There is a partnership between leaders, staff, parents/carers and children and young people.
- Managers and leaders have clearly identified responsibilities for participation.
- Resources and expertise are mapped for building the participation of children and young people.
- Children and young people contribute to the recruitment, selection and induction of key staff.
- Children and young people have access to information to allow them to participate fully in issues of importance to them.
- There is support for children and young people to develop skills and knowledge to make change happen.
- The organisation adopts and promotes the U.N. Convention on the Rights of the Child, recognising Article 12’s central role.
- A range of approaches are in place that encourage and enable the participation of children and young people on their own terms and in ways they feel comfortable with.
- Recording and evaluation systems are in place to identify and share learning and evidence of change arising from children and young people’s participation.
- There is support and training for staff to gain skills for the safe, sound and effective participation of children and young people.
- Evidence that the provider has let children and young people know what has become of their input.
### Partnership Working:

Partnership working encourages continuous learning, improvement and developments across all of those who provide children and young people services. It is important for all partners to have a clear knowledge of where the most effective delivery occurs, identify relevant resources and support services. Ideally, this outcome-based culture of organisational learning and partnership working would sit at the heart of all children and young people services and would engage fully with those terms and local leaders in health, schools or youth services.

### Pooling Resources:

The focus of joint commissioning will be on maximising efficiency and supporting the joint ownership of outcomes. Where identified (e.g. in Performance Agreement, through Participation Work and/or through Needs Assessment), pooled resources could be an important factor in securing improved outcomes. Pooled resources can provide a lever for the integration of services as the mechanism by which partners can bring together a range of resources (budget, staff, resources, information and knowledge) from which to achieve outcomes.

In order to encourage continuous learning and improvement, commissioners are measuring Service Provider’s Partnership Working in sharing and learning from other sectors, agencies and/or teams. The aim is to develop a more transparent, effective and outcomes-focused culture which will set at the heart of the work of those who provide children and young people’s services.

These shared and understood core standards of practice promote higher level of commitment and collaboration amongst Service Providers for children, young people and their families. Together these standards for partnership are reflected in the way the JCT reviews their services and outcomes.
Appendix 5B Monitoring Guidance

Organisational Learning and Partnership Working Monitoring Guidance

Features of Good Practice - Look for Examples of:

- **Different ways of supporting children and young people:** The main focus here is on variety of roles individuals have in support CYP.

- **Parents as Partners:** Actively seeking to engage parents with the service.

- **Planning for Better Partnership Working:** Partnership working sits within the wider local context and contributes to meeting local strategic objectives. Strategic planning needs to support effective partnership working as well as planning between allied services, relevant organisations and individuals. Joint working through the sharing experiences, knowledge and resources.

- **Planning and Working Together to Support Young People:** Planning to meet the needs of individual children and young people. This starts with putting into practice a joint working model with the aim of supporting, engaging and empowering clients (CYP and their families) as well as the wider community.

- **Joint Continuing Professional Development and Self-Evaluation:** This is the most effective way of improving services and partnership working. Explore how allied services, intelligence and resources can further your services, devise ways of jointly evaluating partnership working and agree on ways to improve organisational learning and partnership working.

- **Leadership:** Leadership in the context of partnership working is demonstrated through the ability to work effectively and responsibly in overcoming the challenges children and young people face by taking personal responsibility for continuing to focus on the purpose and outcomes of partnership working in improving the outcomes for CYP.
Appendix 6: Social Value Guidance and Measurements

Appendix 6A Social Value Guidance

The Public Service (Social Value) Act 2012:

The Social Value Act was introduced in 2012 and took effect from January 2013 with the aim to develop ways to factor and measure the social value of a service during the procurement and commissioning stage of a service. The Act applies to public service contacts and those public services contracts with only an element of goods or works over the EU threshold (which currently stands at £173,934 for other public bodies). This includes all public service markets from health and housing to transport and waste.

The Act is part of the Department for Communities and Local Government’s statutory guidance on the Best Value Duty which requires best value authorise to make “arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.”

The Act stipulates that:

“[… ] authorities should consider overall value, including economic, environmental and social value, when reviewing service provision. As a concept, social value is about seeking to maximise the additional benefits that can be created by procuring or commissioning goods and services, above and beyond the benefits of merely the goods and services themselves.”

Procurement practice must also comply with the Public Sector Equality Duty (PSED) which was introduced within the Equality Act 2010 and took effect from April 2011. The aim of the Equality Duty is to embed equality considerations into the daily work of public authorities (and the services), so they can tackle discrimination and inequality and contribute to making society fairer (the Duty also requires equality issues to be taken into account in the specification of a contract, including what services are to be supplied and how, and the outcomes that are sought).

“A local authority wants to contract with a private company: It will be able to take into account the ethical make-up of the workforce of the company, the behaviour of that company during an industrial dispute, and any other issues which is defined as non-commercial, when deciding to award the contract, but only if it considers it is necessary to do so in order to meet the requirements of the public sector equality duty.”


### Appendix 6B Social Value Measurement

<table>
<thead>
<tr>
<th>Social Value Benefit Type</th>
<th>Social Value Indicator</th>
<th>Estimation Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Social Benefits of Service:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to Service</td>
<td>Frequency of use, Best Observation Survey, Value Performance Indicator</td>
<td>Observation Survey, Methodology, User Interview Survey</td>
</tr>
<tr>
<td>Mobility and Transport</td>
<td>Access, Modes of Transportation to Service, Frequency of Use</td>
<td>Observation Survey, User Interview Survey</td>
</tr>
<tr>
<td>Social Inclusion</td>
<td>Proximity, Access and Participation for Vulnerable Groups</td>
<td>User Participation, Distribution of Provision and Spend According to Community Characteristics</td>
</tr>
<tr>
<td>Health Living</td>
<td>Participation in Informal Exercise on the Effectiveness of the Service, Evidence of Reducing Crime, Illness or any Other Risk to Health and/or Incidence Where Service Improves the Health of Local Community.</td>
<td>Qualitative Methodologies, Measure Quality and Quantity of Responses and/or Relationship with Local Community</td>
</tr>
<tr>
<td>Social Well-Being</td>
<td>Provision of ‘Safe’ or ‘Green’ Spaces, Monetary Expenditure on Space, Satisfaction Indicators on Community.</td>
<td>Monitoring Provision and Spends, Satisfaction Survey</td>
</tr>
<tr>
<td>Social Cost:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tipping, Dumping, Litter, Vandalism</td>
<td>Incidence of Litter, Dumping and/or Vandalism</td>
<td>Cost of Clean Up and Maintenance</td>
</tr>
<tr>
<td>Economic Benefits:</td>
<td>Monetary Value Clients Spend, Number of Users, Development of Service and/or Sector</td>
<td>Clients Counts, Expenditure Surveys and Multiplier Effects</td>
</tr>
<tr>
<td>Contribution to Local Economy, Business Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Avoided Cost</td>
<td>Savings in Health and Social Care, Cost and Lost Earnings in the Area</td>
<td>Estimates of Health Impacts and Related Cost Savings</td>
</tr>
<tr>
<td>Non-Use Value of Service Existence</td>
<td>Monetary Value</td>
<td>Contingent Valuation Method, Social Preference Assessment</td>
</tr>
<tr>
<td>Sustainable Transport</td>
<td>Number of Cyclist Users/ Pedestrians verses Motorists and Public Transport Users (Number of Reduced Carbon Emissions)</td>
<td>Observation and User Surveys, Focus Groups, Feedback Forms, Stakeholder Consultations</td>
</tr>
<tr>
<td>Substitute Replacement Good</td>
<td>Equivalent Provision of Service</td>
<td>Cost of Alternative Provision (e.g. Organised Events, Hiring Costs, etc.).</td>
</tr>
<tr>
<td>Economic Cost:</td>
<td>Property Values, Cost of Replacement/Modification</td>
<td>Hedonic Pricing(^{22}), Cost and Accounting</td>
</tr>
<tr>
<td>Negative Impact on Property Values, Barriers to Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital, Operating and Maintenance Costs</td>
<td>Budgets</td>
<td>Budgets and Accounts</td>
</tr>
</tbody>
</table>


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\(^{22}\) The hedonic pricing method references to the estimation of economic values for the ecosystem or environmental services.
Appendix 7: Governing Bodies for Children and Young People Services

- Children’s Act 1998 and 2004
- Children’s Trust Boards
- Children and Young People’s Board
- Education Act 1944-2011
- Equalities Act 2010
- Childcare Act 2006
- Ofsted
- Bristol’s Children Outcomes Board
- Bristol Children and Young People’s Partnership
- Bristol’s Safeguarding Children Board