# Pavee Point Travellers' Centre

# **Pre-budget submission**

for budget 2011

**Prepared September 2010** 



2011

#### **Pavee Point**

Pavee Point is a voluntary non-government organisation, committed to human rights for Irish Travellers. The group comprises Travellers and members of the majority population working together in partnership to address the needs of Travellers, who as a minority ethnic group experience exclusion and marginalisation.

The aim of Pavee Point is to contribute to improvement in the quality of life and living circumstances of Irish Travellers, through working for social justice, solidarity, socioeconomic development and human rights. The work of Pavee Point is based on two key premises:

- Real improvement in Travellers' living circumstances and social situation requires the active involvement of Travellers themselves.
- Non-Travellers have a responsibility to address the various processes which serve to exclude Travellers from participating as equals in society.

Pavee Point works with one of the most excluded and discriminated groups in Irish society. Our priorities for the next budget are the maintenance of high quality public services, a robust and appropriate community sector, the maintenance of an ethos of Community Development and, most importantly the protection of the incomes of the poorest individuals and families.

## **Our Key Priority Issues for 2011**

- Calling for multiannual ring fenced funding for education, training, youth, health, drugs and employment programmes with Travellers, as part of affirmative action to address the increasing and alarming inequalities experienced by Travellers as demonstrated by the AITHS 2010
- 2. Recommendation: Establish and resource a National Traveller Agency with responsibility for co-ordinating of all service planning and provision for Travellers.
- 3. Support Traveller CDP's to ensure strong Traveller infrastructure can be developed and maintained to facilitate effective engagement of Travellers with service providers and policy makers which will ensure value for money
- 4. Ethnic identifier and Traveller Proofing of public policies and services

## **Current financial situation**

Pavee Point wishes to endorse and be associated with the 'Four Steps to Recovery' proposal made by Community Platform.

Pavee Point echoes the views outlined in the National Economic and Social Council (NESC) *Ireland's Five Part Crisis: an Integrated National Response,* of the interdependence and complementarities between economic and social policy and the requirement to focus first and foremost on reducing the impact to the most vulnerable of the worst effects of the recession.

Since the time of the last Pre-Budget Submission, the economic crisis has deepened, and the first cuts have been introduced. Pavee Point is concerned that some of the cuts introduced have disproportionate impacts on the Traveller community.

Pavee Point understands that the financial crisis in Ireland requires new thinking and significant action, but asserts that actions to be undertaken to obviate the crisis must be taken with due regard to the need to reduce the impact on the most disadvantaged and vulnerable. The financial crisis was not caused by the poor, but by the failures of high finance; it would be a perverse outcome of the crisis if, as now seems likely, the already most disadvantaged were to experience increased hardship as a result of measures taken to alleviate the crisis.

The government has maintained its commitment to ending consistent poverty by 2016, to achieve this, progress made to date cannot be undermined by measures which would jeopardize long term social cohesion and economic recovery.

## **The Traveller Policy Context**

According to the All Ireland Traveller Health Study, (AITHS 2008) there are 36,222 Travellers in Ireland, representing around 1% of the nation's population. This is at variance with the CSO Census figure for 2006 (22,421), but in line with figures produced by the National Traveller Accommodation Consultative Committee.

As a community, the Traveller population has a low skills base, high rates of unemployment, poor outcomes from education and a history of discrimination, restricting the life choices and options for the community.

77% of Traveller children have no qualification beyond completion of Primary School, compared to a national rate of 18.9%. Less than 4.1% of Travellers finish secondary school, whilst 0.4% of the Traveller population have achieved a degree or higher, compared to 19.4% of the general population.

Traveller unemployment runs at some 74.9% in Ireland, compared to a 2006 national level of 8.4%; in the current context of the global economic crisis, these figures are likely to have further deteriorated in recent months. (CSO 2006)

Travellers are not a homogenous community; there are sections of the community that experience extreme hardship and exclusion. At least 750 families live at the side of the road, without access to water and adequate sanitary facilities. Of those 29.6% in temporary accommodation, 91% have no central heating, 26% have no piped water and 25.3% live without even sewerage. (DoE 2008)

Health outcomes for Travellers are closer to the health outcomes for the general population in the 1940s. Starkly, the gap in life expectancy between Travellers and the general population has significantly increased in the past 20 years. The All Ireland Traveller Health Study, published in September 2010, shows that Traveller women can now expect to live 11 years fewer than women in the general population, while Traveller men can now expect to live 15 years fewer than men in the general population. (AITHS 2010)

The infant mortality rate for Travellers is significantly higher than for the general population; 14 per 1,000 live births. The national figure is 4 per 1,000.

For a community living with discrimination, poverty, poor levels of educational attainment and unemployment, cuts to community and social services will hit Travellers disproportionately harder than any other identifiable group in Ireland.

## Responding to social exclusion

Current government policy acknowledges that certain minority groups, such as Travellers, face particular problems in terms of social inclusion. It is further recognised that these groups require affirmative action to address this situation. The recently launched (Sept, 2010) report on the findings of All Ireland Traveller Health Study provides clear validated statistical information on the extreme levels of social exclusion experienced by Travellers and the negative outcomes in relation to accommodation, education, health and employment.

## Key Findings as follows:

- Labour force participation for Travellers is low with 74.8% of Travellers in the labour force unemployed compared with 8.5% unemployed amongst the national population. (Census 2006)
- The age structure of the Traveller population is skewed towards young dependents, with 42% of Travellers under the age of 15, compared with 21% for the general population
- Educational outcomes are poor with only 3.4% of the Traveller population over the age of 15 years having attained upper secondary education(CSO); 38.5% of 30-44 year old Travellers have experience of only Primary education (AITHS) 50% of Travellers had difficulty reading the instruction for medication. (AITHS 2010)
- Less than 1.5% have an experience of higher (non-degree, degree and higher degree) education compared with 48.2% for national population. (CSO)
- Accommodation for Travellers is of a very low standard with 83.5% of Traveller households having no central heating, 24% of Traveller households having no piped water and 23% of Traveller households having no sewerage facility

#### Travellers' Health

The health status of Travellers is not only a matter for the Department of Health and the Health Service Executive Health outcomes for Travellers are now clearer than ever, since publication of the **All Ireland Traveller Health Study** in September 2010.

During the study, Travellers and Health Service providers agreed that social determinants such as accommodation, education, income, discrimination, lifestyle and access to services are all significant contributors to Traveller ill-health.

- Travellers aged 65 years and older now account for just 3% of the entire Traveller population, down from 3.3% in the 2002 Census. The same age cohort in the national population comprises 11% of the population.
- Traveller men have four times the mortality rate of the general population, and
  Traveller women have three times the mortality rate
- If Travellers had the same health status as the general population, the number of deaths expected in the year would be 54. The actual number of deaths was 188.
- Suicide in the Traveller community accounts for 11% of all Traveller deaths- it's six times higher than the rate for the general population

#### **Recommendations:**

## 1. An integrated Approach

Recommendation: Establish and resource a National Traveller Agency with responsibility for co-ordinating of all service planning and provision for Travellers.

Rationale: A vast range of policies in areas that include health, education, accommodation, social inclusion, equality and labour market participation guides the planned provision of services for Travellers. Many policies have yet to be implemented and service providers are often not aware of official guidance relevant to their interaction with Travellers. A National Traveller Agency would provide for greater coordination and integration of procedures across Government at national and local levels, as well as between these levels and insure implementation of agreed policies. This co-ordinated strategy for social inclusion is in keeping with principles that have been articulated within the National Action Plan for Social Inclusion 2007 - 2016.

## 2. Securing Adequate Income

Pavee Point wishes to endorse and be associated with the 'Four Steps to Recovery' proposal made by Community Platform.

Cuts to social welfare income made in Budget 2010 must be reversed and no other cuts of this type, which reduce the real income of the poorest, which category includes most Travellers, should be introduced.

- With unemployment greater than 75% within the Traveller Community, Pavee Point recognises the need to maintain and protect incentives to work. To this end, Pavee Point calls for:
  - Reforming the interaction of social welfare payments and supplementary benefits with minimum wage and taxation in such a way as to protect the transition from welfare to work.
  - Maintaining the provision of payments to support Training for the long term unemployed
  - Reversal of the decision to cut the entitlement to access FÁS training funding for Travellers assessed adult dependent on their spouses

Recommendation: Pavee Point calls for a significant increase in the income limit allowed before secondary benefits are affected. There should be consistency across schemes with regard to eligibility and the potential impact of participation on secondary benefits. Where changes are introduced to address inconsistencies the changes should be upwards.

In addition, the decision to cut the entitlement to access FÁS training funding for Travellers assessed adult dependent on their spouses will disproportionately impact on Traveller women, many of whom access training through FÁS accredited training as their first and only educational access since dropping out of Primary School.

Rationale: As with the loss of the Medical Card, the prospect of losing secondary benefits is an enormous disincentive to seeking entry in to the active labour force. The cut could have a major impact on the real income for Traveller families.

We are very aware of the real vulnerability of migrants, including Roma. We have particular concerns around the social welfare Habitual Residence Condition (HRC) and the provision to limit social insurance eligibility for newly unemployed migrants on work permits. To begin to address these issues, Pavee Point recommends:

- Increasing the direct provision allowance.
- Amend the Habitual Residency Condition to ensure that it does not push more people, particularly those whose culture and customs leads them to lead a nomadic lifestyle into poverty.
- Reverse the decision to limit social insurance eligibility for newly unemployed migrants.

#### 3. Education and Youth

Recommendation: Where the phased integration of Traveller specific preschools take place, ring-fence relevant budgets in a transparent manner to support intercultural responses in ECCE for Traveller Children.

Rationale: Traveller children have specific issues in relation to education and additional measures are required. This means ensuring that investment in ring-fencing of funding currently provided to segregated service provision will provide funding raising the possibility of a exchequer neutral programme in the area to support intercultural responses.

Recommendation: Retain School Transport system as part of an 'Affirmative action measure'

Rationale: Current proposals see the phasing out of school transport schemes for Travellers some time in 2011, after a reprieve for 2010. Whilst Pavee Point is committed to reducing a culture of dependency within the Traveller community, it is clear that the withdrawal of a school transport scheme would have a negative impact on Traveller school retention; this could endanger the excellent progress made by the Department of Education in more than doubling retention to second level.

Recommendation: Cost Benefit analysis of the annual Traveller Education budget.

Rationale: The current annual Traveller Education budget is in excess of €50 million, yet as is demonstrated from both the quantitative and qualitative results of AITHS (AITHS 2010) there is still a clear lack of equality of access, participation and outcomes from education for Travellers. A review of the budget would ensure value for money in terms of outcomes.

#### Youth

#### Recommendation

To increase the funding to Traveller youth initiatives to reflect the importance of investing in this very young marginalised and vulnerable population.

Rationale: According to the AITHS 42% of Travellers are aged under 15 years of age in comparison with 21% of the general population, and 63% of Travellers are under 25 years of age in comparison with 35% of the general population.

Young Traveller men have 7 times the rate of suicide of the general population.

#### 4. Accommodation

Recommendation: Cease application of a Habitual Residence Condition on Travellers as it applies to social welfare payments and accommodation.

Rationale: Some Travellers, as a nomadic people, travel across the border with Northern Ireland. Traveller families are spread around the island, and do live across the border from time to time. The numbers affected are extremely small, and the impact on expenditures is likely exceptionally light. The Habitual Residence Condition's one impact on Travellers is to render some families without incomes to which they would, if they were settled people, normally have access.

Recommendation: Ring fence the budget for the full implementation of the Traveller accommodation strategy to ensure the delivery of Traveller accommodation.

Rationale: In 2009, some 499 Traveller families lived in shared or 'doubled up' accommodation (more than one family occupying a unit designed for one family). There is no reason to suspect that this condition has been significantly ameliorated.

Current 2010 projected targets for Traveller accommodation provision, as in 2009 are deficient of the total projected need by around 15%. Cuts to this provision would certainly increase the number of Travellers in overcrowded accommodation or living at the side of the road.

Recommendation: In the past a loan and grant scheme was operated to support Travellers to secure good quality caravans: in the wake of All Ireland Traveller Health Study result highlighting accommodation quality as a determinant of Traveller ill-health, Pavee Point is calling for the re-development of this scheme with a more consistent and effective rollout across the country.

Rationale: Progress on addressing Travellers accommodation issues has been slow. Again, 2016 has made a commitment to "embrace special housing needs (the homeless, Travellers, older people and people with disabilities)." The development of a caravan loan scheme would be a cost effective means to meeting this commitment.

### 5. Developing Employment Opportunities

It is well understood that Travellers were effectively excluded from society and the economy during the Celtic Tiger era — it is further understood that those who have experienced severe exclusion and are most distant from the labour market.

The government and its agencies should not forget these individuals and their families in the rush to assist the 'newly' unemployed. Previously targeted programmes that both employ and provide services to the most vulnerable people and communities, must be protected and enhanced. Such approaches must be cognisant of the need to build capacity amongst those most distant from the labour market to facilitate active participation in such schemes and programmes.

For Community Employment (CE) to be a meaningful pathway to permanent employment, for those most distant from the labour market, the Community Platform recommends:

- Increased investment in education and training for CE participants who will find it more difficult to progress into employment, given rising unemployment levels.
- Maintain targeting of all CE places at vulnerable groups such as the long term unemployed, lone parents, Travellers and people with disabilities.
- Schemes such as CE and JI should be adequately resourced and supported and Travellers employment within the Community Sector should be recognised and supported also. Recruitment to JI should recommence.
- The 2011 budget must bring clarity on the future of FÁS. The state training and employment agency is a lifeline for the Traveller community and provides training opportunities instrumental to the goal of supporting the Traveller community to lift itself out of poverty through employment. Current instability in the sector, or the innuendo of instability in the sector, is beginning to cause a bottleneck in the development and approval of new training programmes, and causing the closure of valuable programmes.

*Recommendation:* Recommence the Department of Finance initiative exploring accessing to civil service employment

Rationale: Towards 2016 commits all social partners to "give concentrated attention to achieving progress" in the area of employment for groups that have experienced long-term difficulties in labour market participation, including providing opportunities for Travellers to participate in employment and measures to promote positive communication between Travellers and the wider community. The review of the civil service initiative showed positive outcomes, but highlighted the need for more supports to ensure progression beyond the 6 months trial period.

Active Labour Market Programmes have and still do provide second chance training and education opportunities to Travellers and for many Travellers are the only chance of employment.

## 6. Support for Community Development

*Recommendation*: Ensure that the Local Community Development Programme's particular significance in the support of Travellers is understood and resourced, and that Pavee Point continues to operate as a specialist support to that programme and the Family Resource Centre programme.

Rationale: CDPs in themselves present work and progression opportunities for Travellers, an important route into paid employment and a professional career. At the end of 2008, there were some 181 projects participation in the Community Development Programme supported by the Department of Community, Equality and Gaeltacht Affairs. This fell significantly in 2010, as some were considered non-viable following a review by the

department. Today there are 19 projects within the CDP programme which target Travellers as their main community or interest.

#### 7. Health

Recommendation: The development of an urgent Action Plan on Travellers' health with clear objectives, targets, and timeframes to be monitored by the cabinet sub-committee on social exclusion.

Rationale: Given the shocking results that now exist in the All Ireland Traveller health study (AITHS 2010) to demonstrate that the gap in the health status of Travellers and the settled population has widened in the last twenty year. We need to develop clear actions to ensure that projects developed and funding allocated (with a least a retention of the Traveller health base budget) is used to create positive outcomes for Travellers.

Recommendation: Role out of the ethnic identifier on all health data sets (this was successful piloted by the THU in the Eastern Region in 2003)

Rationale: The AITHS results now paint a picture and highlight some of the challenges with access and utilization of services, with the introduction of the ethnic identifier changes in access, participation and outcome to health services for Travellers could be monitored and existing resources could be targeted appropriately.

Recommendation: Travellers should be allocated with medical cards more readily, and should retain the medical card for longer after they have entered the labour market either as an employee or self- employed, as per the Report of the Special Initiative to Expand Employment Prospects for Travellers.

Rationale: Travellers' marginal socio-economic status is very evident in their poor health status, as confirmed in the All Ireland Traveller Health Study. In this context the importance of the medical card cannot be overestimated. This is an enormous barrier to Travellers who wish to progress on from training and employment schemes to the mainstream labour market.

#### **Drugs**

Recommendation: Ring fence funding to Traveller organisations receiving funding from the HSE Addiction Services and Drug Task Forces to ensure continuity of work with the Traveller community across all pillars is prioritised

Rationale: Members of the Traveller community have been identified as being most at risk of substance miss-use, under the National Drugs Strategy, due to the inequalities experienced across all areas of their lives. The numbers of Travellers accessing drug treatment has increased from 162 in 2007 to 269 (66% increase) in 2009<sup>1</sup> but anecdotal evidence would suggest that these figures understate the actual number requiring some form of treatment as the NDTRS first point

10

<sup>&</sup>lt;sup>1</sup> NDTRS Figures – 2007 – 162 Travellers were assessed or treated 2008 – 249 Travellers were assessed or treated

of entry system fails to capture the true number. Pavee Point Drugs Programme/Pavee Point Travellers Centre urges the Government to consider the real consequences to Travellers at risk of substance mis-use or currently engaging in harmful behavior when examining options to cut expenditure to the community and voluntary sector. Those with a proven track record of providing direct support to those most at risk need to be offered the highest level of protection from cuts in Budget 2010 with expenditure targeting these groups first and foremost.