

Gypsies and Travellers: Summary

- **Background:** Gypsies and Travellers are one of the oldest established ethnic communities in the UK (Commission for Racial Equality, 2006). They are an ethnic group defined by a culture of nomadic habits of which there are 4 distinct groups: English Gypsies, Welsh Gypsies, Scottish Gypsy Travellers and Irish Travellers.
- There are problems comparing the epidemiological data of Gypsies and Travellers to that of other ethnic groups or national figures, as separate data for this group usually does not exist. As a result Gypsies and Travellers can largely be neglected from policy decisions, further excluding an already socially excluded group.
- **Census data:** The 2011 national census included Gypsies and Travellers as a distinct ethnic group for the first time. This allows for a national comparison of numbers, educational levels and household data. This showed 430 people who identify as a Gypsy, Traveller or Irish Traveller living in Greenwich. This represents 0.17% of the Greenwich population, compared to 1% of London and England & Wales population identifying themselves as part of this ethnic group (ONS, 2011). Greenwich therefore can be considered to have a relatively small population from these groups.
- The 2011 census data shows significant inequalities between the Gypsy and Traveller community compared to the England and Wales national averages (ONS, 2014), for example:
 - The Gypsy and Traveller ethnic group had a low median age of 26, compared with the national average of 39. 39% of Gypsies and Travellers were under 20 years of age, compared with 24% of England and Wales.
 - 45% of Gypsy and Traveller households have dependent children, whereas only a third (29%) of national households have dependent children. 45% of Gypsy and Traveller households with dependent children are lone parent households; much higher than the national figure of 25%.
 - Less than half (47%) of the Gypsy and Traveller population are in employment or education, much lower than the 63% national figure
- **Local situation:** In Greenwich there are 2 sites in which Gypsies and Travellers mostly reside, these are Thistlebrook in Abbeywood and Horn Link Way in East Greenwich. Thistlebrook has 40 authorised pitches and Horn Link Way is a tolerated site with 7 large families with a total 24 children.
- **Health:** The Gypsy and Traveller community have the worst health according to the national census, in that only 70% of the population report that they have 'good' or 'very good' health, compared to 81% of England and Wales (ONS, 2014).

Source: Greenwich JSNA 2013/14 "Closing the Gap." Public Health & Well-Being, Royal Borough of Greenwich.

- A study conducted in Southeast England with 39 Gypsies and Travellers from conventional housing, council sites, private sites and the roadside showed a high prevalence of lung, bowel and breast cancers, heart disease, diabetes and kidney and liver failure. Some of these health risks were attributed to lifestyle issues such as working with toxic fumes, asbestos, manual labour and outside living.
- The incidence of measles is very high among the Gypsy and Traveller communities, with the estimated risk being 100 times higher than that of the rest of the UK population (Maduma-Butshe & McCarthy, 2013).
- A recent study by Healthwatch Greenwich with 13 travellers from the Thistlebrook community on their views of local health services showed disproportionate attendance at A&E services for basic and non-urgent medical matters, but with high satisfaction with those services. The study also revealed a perception of poorer access to healthcare services, in particular primary and community care, and a reluctance of people to seek medical help until the last minute (Mardner, 2013).
- **Housing:** Very few Gypsies and Travellers own a house or rent their home privately. The 2011 UK national census found that a quarter of the Gypsy and Traveller community live in caravans or temporary structures and 40% live in social housing. This compares to 0.3% of the national population living in caravans or temporary structures, and 16% in social housing (ONS, 2014).
- **Education and employment:** Well over half (60%) of the Gypsy and Travellers living in England and Wales do not have any qualifications, much higher than the 23% of the rest of the population with no qualifications (ONS, 2014). Less than half (47%) of the Gypsy and Traveller population are in employment or education, much lower than the figure of 63% for the England and Wales population.
- **Local services:** Gypsies and Travellers have access to the same local services as other ethnic groups in Greenwich, and according to the literature do not wish to receive special provisions (Parry et al, 2004). There are also a number of local statutory, voluntary and community services that work with Greenwich Gypsies and Travellers.
- **Planned improvements:** This chapter identifies a number of planned improvements, including work with one key local General Practice. The practice aims to offer members of the Traveller community double appointments where possible to address health needs and where possible a choice of GP. Members of the community will be invited to join the Practice's Patient Participation Group, and closer working relationships will be developed through work the practice is doing on smoking cessation.

Gypsies and Travellers

What do we know about Gypsies and Travellers?

Introduction

Gypsies and Travellers are one of the oldest established ethnic communities in the UK (Commission for Racial Equality, 2006). They are an ethnic group defined by a culture of nomadic habits of which there are 4 distinct groups: English Gypsies, Welsh Gypsies, Scottish Gypsy Travellers and Irish Travellers. These groups share the cultural identity of traditional Travellers or Romany people, yet differentiate in the language they use (Parry et al, 2004).

Although the Race Relations Act 1976 recognises Gypsies and Travellers as a minority ethnic group, for the purpose of health and social care data Gypsies and Travellers are classified under the 'other' ethnic group. This poses problems when comparing the epidemiological data of Gypsies and Travellers to that of other ethnic groups or national figures, as separate data for this group usually does not exist. As a result Gypsies and Travellers can largely be neglected from policy decisions, further excluding an already socially excluded group.

Positively, the latest national census conducted in 2011 included Gypsies and Travellers as a distinct ethnic group for the first time. This allows for a national comparison of numbers, educational levels and household data. Results of this census show that there are 430 people who identify themselves as a Gypsy, Traveller or Irish Traveller living in Greenwich, which is 0.17% of Greenwich's population. One percent of London and England and Wales's population identify themselves as part of this ethnic group (ONS, 2011).

In Greenwich there are 2 sites in which these Gypsies and Travellers mostly reside, these are Thistlebrook in Abbeywood and Horn Link Way in East Greenwich. Thistlebrook has 40 authorised pitches and Horn Link Way is a tolerated site with 7 large families with a total 24 children (a tolerated site is one where the local authority has decided not to seek removal of the encampment).

In addition to the national census, there are a number of smaller scale localised studies that have researched issues that can concern Gypsies and Travellers. These will be drawn upon for this chapter in order to examine the following: health, education, and housing needs of Gypsies and Travellers living in Greenwich.

National Strategies

Friends, Families and Travellers have produced a set of [good practice guidelines](#) for the production of a Joint Strategic Needs Assessment (Bruton, 2011). They recommend that a JSNA be based on:

1. Solid foundations through accurate data

Source: Greenwich JSNA 2013/14 "Closing the Gap." Public Health & Well-Being, Royal Borough of Greenwich.

2. A detailed analysis of need, which includes the diverse health and social care needs of the population
3. Clear direction for service design and commissioning

The London plan states that Londoners should have a genuine choice of affordable homes that meet their requirements in the highest quality environments. It also states that boroughs should work closely with Gypsies and Travellers and stakeholders to ascertain accommodation needs for both temporary and permanent sites and to develop fair and effective strategies to meet those needs. Sites identified should be economically, socially and environmentally sustainable.

Facts and Figures

There are a number of facts and figures that can be gleaned from the latest Office of National Statistics census data that show significant inequalities between the Gypsy and Traveller community compared to the England and Wales national averages (ONS, 2014), for example:

- The Gypsy and Traveller ethnic group had a low median age of 26, compared with the national average of 39. 39% of Gypsies and Travellers were under 20 years of age, compared with 24% of England and Wales.
- 45% of Gypsy and Traveller households have dependent children, whereas only a third (29%) of national households have dependent children. 45% of Gypsy and Traveller households with dependent children are lone parent households; much higher than the national figure of 25%.
- Less than half (47%) of the Gypsy and Traveller population are in employment or education, much lower than the 63% national figure

Health Inequalities

There are a number of inequalities that have been reported in some small scale research studies based in different locations within the UK. They discuss a variety of topics including health issues, the use of primary care and accident and emergency services, immunisations, housing and education and employment, these are summarised below.

Health issues

The Gypsy and Traveller community have the worst health according to the national census, in that only 70% of the population report that they have 'good' or 'very good' health, opposed to 81% of England and Wales (ONS, 2014).

In a qualitative study conducted in Southeast England, 39 Gypsies and Travellers from conventional housing, council sites, private sites and the roadside were interviewed about their health and the health of their community (Ruston & Smith, 2013). Responses showed a high prevalence of lung, bowel and breast cancers, heart disease, diabetes and kidney and

liver failure. Some of these health risks were attributed to lifestyle issues such as working with toxic fumes, asbestos, manual labour and outside living.

A quantitative study conducted in 2004 found when comparing 260 Gypsies and Travellers against white and other BME groups using a self-reported health status questionnaire, Gypsies and Travellers had significantly poorer health status than all other groups. In addition, chest pain, respiratory problems and arthritis were more prevalent than their comparators. Those who were housed in bricks and mortar were more likely to have long-term illness, poorer health state and anxiety. Factors that best predicted poor health were age, education and smoking, while women were twice as likely to be anxious than men. There is, reportedly, much secrecy around mental health issues, however it is expected that there are high levels of mental health issues for this community due to a combination of factors including high levels of bereavement, frequent evictions, unhealthy living conditions, discrimination and racism (Parry et al, 2004).

Peters et al (2009) found poor health outcomes and very high smoking rates (58% vs 25% or lower) compared with other ethnic groups.

A recent study by Healthwatch Greenwich (previously Greenwich Local Involvement Network) interviewed 13 self-selected travellers from the Thistlebrook community on their views of local health services; these were their key findings (Mardner, 2013):

- A self-reported disproportionate higher attendance at A&E services at the QE hospital for basic and non-urgent medical matters. Those interviewed reported high satisfaction with A&E services.
- A perception that the Gypsy and Traveller population have poorer access to the provision of high quality healthcare services compared to the general population in particular around primary and community care.
- Those interviewed reported high levels of satisfaction with some services e.g. pharmacy but not with others.
- Reluctance of members of this Gypsy Traveller community to seek medical help until the last minute.

The Horn Link Way site has 7 large families with 24 children in residence there. Because this site is unauthorised but tolerated there is no access to mains electricity, gas, water or sewerage, although portaloos have been made available by the council. The site is an aggregate site next to a quarry with a through road for trucks and lorries which pose traffic and pollution hazards. The children have no safe outside space to play in; however they do attend the local schools.

Primary care and use of A&E

Source: Greenwich JSNA 2013/14 “Closing the Gap.” Public Health & Well-Being, Royal Borough of Greenwich.

Qualitative research in England has consistently found a reluctant attitude towards, or difficulties experienced by Gypsies and Travellers when using healthcare systems. These include:

- Having limited access to proper healthcare due to itinerant lifestyles. For example, those with no fixed abode were not able to register with the GP¹, and did not receive consistent health care and palliative care when they moved as their health records did not move with them (Ruston & Smith, 2013; Jesper et al, 2008).
- Some of those who are registered with a GP will travel a significant number of miles to see that particular GP rather than register with a new local GP, which is particularly problematic in emergency situations and can be very costly (Duffy et al, 2008).
- Expectation of poor health, particularly in older age, and a fatalistic attitude to some illnesses, leading to avoidance of screening and seeking medical treatment (Parry et al, 2004; Van Cleemput et al, 2007)
- Communications difficulties, often due to literacy problems, leading to missing appointments (Ruston & Smith, 2013; Parry et al, 2004)
- Expecting and often experiencing racism, prejudice and hostility when encountering health professionals (Ruston & Smith, 2013; Jesper et al, 2008; Parry et al, 2004)
- The belief that health professionals have little power to improve health and that bad news from health professionals could also hinder any health resilience (Van Cleemput et al, 2007)
- A preference to treat their terminally ill at home where they can avoid possible conflicts with hospital staff and are able to have their large family network around them to help with care (Ruston & Smith, 2013; Jesper et al, 2008)
- Often Gypsies and Travellers discharge themselves from hospital care early, possibly due to feeling 'contained' in bricks and mortar (Jesper et al, 2008)

These issues with healthcare systems can lead to further inequalities in maternity care and preventative health.

Locally, members of the largest Gypsy and Traveller community (Thistlebrook) are mostly registered to a single local GP Practice. Very little is known however about the health needs of this population. A local mapping of demographic profile, disease burden and needs of the Gypsy and Traveller population is currently being commissioned and will inform future JSNA chapter updates.

Immunisations

The incidence of measles is very high among the Gypsy and Traveller communities, with the estimated risk is 100 times higher than that of the rest of the UK population (Maduma-

¹ Please note that since April 2014, there are no restrictions to registration, and any person is entitled to register with a GP irrespective of having an address.

Butshe & McCarthy, 2013). Measles is a highly communicable disease, preventable through childhood vaccinations. One of the biggest outbreaks in recent years was in 2007 where there were 173 cases, 156 of whom were Irish Travellers (Muscat, 2011). A study of measles outbreaks in Thames Valley found that of the 142 recorded cases, 63% were from the Gypsy Traveller communities (Maduma-Butshe & McCarthy, 2013).

Housing and health

Very few Gypsies and Travellers own a house or rent their home privately. The most recent national census found that in the UK, a quarter of the Gypsy and Traveller community live in caravans or temporary structures and 40% live in social housing. This compares to 0.3% of the national population living in caravans or temporary structures, and 16% in social housing (ONS, 2014).

The London Gypsy and Traveller Unit noted that there is a shortage of pitches available for Gypsies and Travellers in London. This is a concern as the need is growing and there have been over 85 London pitch closures in the last two decades (LGTU, 2009). Qualitative research findings place living arrangements and housing conditions to blame for some of the physical health problems Gypsies and Travellers experience (Ruston & Smith, 2013). For example:

- They are often living in hazardous living conditions, including damp, with lack of access to fresh water, healthcare, and toilet facilities.
- Smoking, poor diet, drinking alcohol in excess and drug-taking that were commonplace in among parts of the community, and were blamed on containment.
- They were often leading a sedentary lifestyle due to being housed in council houses away from outside manual work.

In addition mental health problems were associated with living conditions (Ruston & Smith, 2013):

- Living in dangerous places, for example, by the roadside, next to sewerage or overcrowded facilities or where 'placed' in sub-standard housing alongside drug users and criminals often leads to stress and depression
- Those who felt they were forced into housing or were evicted or moved on from pitches or the roadside discussed experiencing high levels of stress, felt there was a threat to their way of life, a loss of sense of freedom and inability to work close to nature and eat healthy food.
- Segregation from family and support networks leading to depression and drug addiction, particularly for those living in bricks and mortar.

Education and employment

According to the Office of National Statistics more than half (60%) of the Gypsy and Travellers living in England and Wales do not have any qualifications, much higher than the

Source: Greenwich JSNA 2013/14 "Closing the Gap." Public Health & Well-Being, Royal Borough of Greenwich.

23% of the England and Wales population with no qualifications (ONS, 2014). There are many reasons suggested for this including high school absence rates due to negative experiences of school (only half of teenage Gypsies and Travellers are still attending school at year 11), negative experiences of school and interrupted education (Wilkin et al, 2010).

In an exploration of parents' views of children's education and schooling it was found that Gypsies and Travellers did value what the educational system could bring and in some cases there was a desire to see children educated to a high degree (Bhopal, 2004).

Less than half (47%) of the Gypsy and Traveller population are in employment or education, much lower than the 63% of the national population. The most common types of employment among Gypsy and Travellers were elementary occupations, that is, occupations that require simple and routine tasks, such as cleaning, bar or farm work (ONS, 2014).

What works?

Community

An England-wide mapping survey found that local voluntary organisations are particularly effective at improving access for Gypsy and Travellers to health services. The survey identified the importance of development of cultural awareness amongst healthcare workers, and the provision of health promotion (Dar et al, 2013). O'Neill (2008) and Jesper et al (2008) offer some points to consider when working with the travelling community to address health inequalities, including:

- Health trainers from the community in which they will work are best placed to understand and break through healthcare and cultural barriers
- Although considered hard to reach, these communities are easy to reach for those who know them
- Cultural awareness of health and social care staff is important
- When using leaflets, ensuring they are pictorial or easyread for those who have poor literacy
- Text message reminders are good for improving appointment attendance
- Appointment letters on headed paper ensure they are recognised as official thus allowing the recipient to arrange for them to be read to them if required
- It is important to keep communities informed of projects that may involve them.

Policy

The Royal College of General Practitioners have released a set of commissioning considerations for working with Gypsies and Travellers (Gill et al, 2013). They are:

- Information sharing between relevant agencies will improve access to this group
- Community engagement is key to building a trusted relationship with Gypsies and Travellers so that the community's expressed needs are addressed and there is a community sense of ownership in any service design

- Services should not 'single out' the Gypsy and Traveller community, rather these communities should be included into mainstream services
- Partnership working between public and voluntary services will enable a coordinated response to address poor living conditions and environmental factors

What do we know about local services?

Gypsies and Travellers have access to the same local services as other ethnic groups in Greenwich, and according to the literature do not wish to receive special provisions (Parry et al, 2004).

There are many local statutory, voluntary and community services that work with Greenwich residents, and these are described in various other JSNA chapters, for example, Health Assets and Deprivation, Poverty and Growth.

There are a number of local and national services that provide support for Gypsies and Travellers:

- [Travellers Aid Trust](#) provides small grants to travellers in need.
- The [London Gypsy and Traveller Unit](#) is a charity for Gypsies and Travellers living in London. Their services include: accommodation advocacy and advice, community development, youth work, campaigning, media work, research, strategy and policy development and advice and information.
- [Friends Families and Travellers](#) is a charity working towards ending racism and discrimination against Gypsies and Travellers, and protect their right to pursue a nomadic way of life. This charity also provides support to the community and outside agencies, advocacy, training, campaign and policy work.
- [The Community Law Partnership Travellers Advice Team](#) – provides legal assistance and representation to Gypsies and Travellers in England and Wales.
- [The Irish Traveller Movement](#) – works on influencing policy and progressing research and campaigns. It also offers training for community members and awareness training for professionals.
- [Advisory council for the education of Romany and other Travellers \(ACERT\)](#) - campaigns for equal access and opportunities in education, health and other community services, safe and secure accommodation, and good community relations for all Gypsy, Roma and Traveller families

Potential Improvements

Our local understanding of these communities (in particular the gaps in knowledge) and a research literature review have produced some recommendations for addressing the needs of Gypsies and Travellers, these include:

Source: Greenwich JSNA 2013/14 “Closing the Gap.” Public Health & Well-Being, Royal Borough of Greenwich.

- The local housing needs assessment should include a health needs assessment element to ascertain if the inequalities that have been discussed in the literature are experienced by the communities in Greenwich.
- Any interventions that are designed to address the needs of this population as identified in this report should be designed and managed by, or in cooperation with, community members (Ruston & Smith, 2013; Parry et al, 2004).
- Gypsies and Travellers should be routinely invited to participate in BME forums (Parry et al, 2004). This is already happening in Greenwich although regular attendance has yet to be achieved. However, Gypsies and Travellers are engaged with the BME mental health steering group through targeted work.
- Primary care services provide more time for Gypsies and Travellers to address the long waiting times these community members can experience.
- Provide health promotion and liaison services through use of local and voluntary services or a community-based health trainer. This may include NHS Health Checks on Thistlebrook and Horn Link Way sites for those who are eligible.
- Mediation between the local primary care services, emergency ambulance service and the Gypsy and Traveller communities to address issues raised in the Healthwatch study (Mardner, 2013).
- Equality and anti-discrimination training to be mandatory for all services who will potentially be working with these communities.

Additionally there are some potential health issues that are not very well addressed in research such as infant mortality, maternity health, mental health, domestic abuse, suicide and prisoner health. Local research is needed to determine to what extent these issues affect the local Gypsy and Traveller communities.

Planned improvements

- The 2004 Housing Act requires Local Housing Authorities to assess the needs of Gypsies and Travellers as part of their wider assessment of housing needs. It is intended that, subject to approval, the next housing needs assessment will include a health needs assessment of the gypsy and traveller population.
- A steering group that includes the CCG, Oxleas, Healthwatch and Public Health has been formed to discuss issues raised by the Healthwatch study (Mardner, 2013), which raises concerns regarding access to health services for the traveller community. Actions from this steering group will be monitored by Healthwatch.
- Meetings with the local General Practice have been held to discuss issues raised by the Healthwatch study (Mardner, 2013). The following changes have been agreed for the Traveller community:

- Members of the Traveller community will be offered double appointments where possible to address health needs
- They will be offered a choice of GP where possible when making an appointment
- 5 members from the Travellers community will be invited to join the Patient Participation Group
- Closer working relationships will be developed with Gypsies and Travellers through the work the practice is doing on smoking cessation
- Citizens UK are carrying out targeted pilot work with the Abbey Wood community, which will include engaging with the local Traveller group (rather than trying to work solely with the Traveller community). The approach will be underpinned by building on existing community links to set up a community network, which will include representation from local Travellers. The aims of the work are as follows:
 - improve local peoples knowledge of health issues
 - help people to improve their own health and wellbeing
 - build community resilience
 - assess local healthcare needs
 - improve communication between the community and organisations that commission and provide services

References

Bhopal, 2004	Bhopal, K. (2004). Gypsy Travellers and education: changing needs and changing perceptions. <i>British Journal of Educational Studies</i> . Vol. 52 (1), pp. 47-64.
Bruton, 2011	Bruton, L. (2011). Joint Strategic Needs Assessments: Friends, Families and Travellers Policy Statement. Friends, Families and Travellers. http://www.gypsy-traveller.org/wp-content/uploads/2010/08/FFT-Policy-Statement-on-the-Joint-Strategic-Needs-Assessment.pdf
Cemlyn et al, 2009	Cemlyn, S., Greenfields, M., Burnett, S., Matthews, Z., Whitwell, C. (2009). Inequalities experienced by gypsy and traveller communities: a review. Equality and Human Rights Commission.
Communities and Local Government, 2007	Communities and Local Government (2007). Gypsy and Traveller Accommodation Needs Assessments: Guidance. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/7838/accommneedsassessments.pdf
Commission for Racial Equality, 2006	Commission for Racial Equality (2006). Common Ground Equality, good race relations and sites for Gypsies and Irish Travellers – report of CRE Inquiry in England and Wales.
Dar et al, 2013	Dar, O., Gobin, M., Hogarth, S., Lane, C., Ramsay, M. (2013). Mapping the Gypsy Traveller community in England: what we know about their health service provision and childhood immunisation uptake. <i>Journal of Public Health</i> . Vol. 35 (3), pp. 404-412.
Duffy et al, 2008	Duffy, R., Harlington, G., McCreedy, M., Page, B., Spencer, S. (2008). "I know when it's raining": Report of the Community - Led Research Project Focussing on the Emotional Health and Well-being Needs of Romany Gypsies and Irish Travellers. Derbyshire Gypsy Liaison Group. http://www.better-health.org.uk/sites/default/files/consultations/responses/i_know_when_its_raining.pdf
Greater London Authority, 2013	Greater London Authority (2013). The London Plan: Spatial development strategy for greater London. Revised early minor alterations, consistency with the national planning policy framework. https://www.london.gov.uk/sites/default/files/REMA%2011%20October%202013_0.pdf
Greenfields, 2008	Greenfields, M. (2008). A Good Job for a Traveller? Exploring Gypsy and Travellers' perceptions of health and social care careers: barriers and solutions to recruitment, training and retention of social care students. Aim higher South East, Guildford.
Gill et al, 2013	Gill, P., MacLeod, U., Lester, H., Hegenbarth, A. (2013). Improving access to health care for Gypsies and Travellers, homeless people and sex workers. An evidence-based commissioning guide for Clinical Commissioning Groups and Health & Wellbeing Boards. RCGP Clinical Innovation and Research Centre (CIRC). Royal College of General Practitioners.

Jesper et al, 2008	Jesper, E., Griffiths, F., Smith, L. (2008). A qualitative study of the health experience of Gypsy Travellers in the UK with a focus on terminal illness. University of Warwickshire. http://wrap.warwick.ac.uk/267/1/WRAP_Griffiths_Primary_Healthcare_Research_and_Development_Paper_Jesper_et_al_for_archive.pdf
LGTU, 2009	London Gypsy and Traveller Unit (2009). Gypsy and Traveller accommodation in London: a strategic view.
Maduma-Butshe, 2013	Maduma-Butshe, A., McCarthy, N. (2013). The burden and impact of measles among Gypsy-Traveller communities, Thames Valley, 2006-09. Journal of Public Health, Vol. 35 (1), pp. 27-31.
Mardner, 2013	Mardner, C. (2013). Gypsy and Traveller Outreach Project. Obtaining the views and experience of the Travellers on the local health services. Greenwich Local Involvement Network.
Muscat, 2011	Muscat, M. (2011). Who Gets Measles in Europe? Journal of Infectious Diseases. Vol. 204 (suppl. 1) s353-s365.
O'Neill, 2008	O'Neill, R. (6 th October, 2008). Health Inequalities, Travelling communities. Health Service Journal.
ONS, 2011	Office of National Statistics (2011) Table KS201UK: 2011 Census: Ethnic group, local authorities in the United Kingdom.
ONS, 2011	Office of National Statistics (2011a). Estimates of subjective well-being from the first annual population survey: Subjective wellbeing dataset: by Ethnic Group; April 2011 to March 2012.
ONS, 2014	Office of National Statistics (2014). Gypsy or Irish Travellers smallest ethnic minority at 58,000. http://www.ons.gov.uk/ons/rel/census/2011-census-analysis/what-does-the-2011-census-tell-us-about-the-characteristics-of-gypsy-or-irish-travellers-in-england-and-wales/-sty-gypsy-or-irish-travellers.html
Parry et al, 2004	Parry, G., Van Cleemput, P., Peters, J., Moore, J., Walters, S., Thomas, K., Cooper, C. (2004). The health status of Gypsies & Travellers in England. Summary of a report to the Department of Health 2004. University of Sheffield. http://www.sheffield.ac.uk/polopoly_fs/1.43713!/file/GT-report-summary.pdf
Peters et al, 2009	Peters, J., Parry, G. D., Van Cleemput, P. (2009). Health and the use of health services: a comparison between Gypsies and Travellers and other ethnic groups. Ethnicity and Health. Vol. 14 (4), pp. 359-377.
Ruston & Smith, 2013	Ruston, A., Smith, D. (2012). Gypsies/Travellers and health: risk categorisation verses being 'at risk'.
Smith & Greenfields, 2012	Smith, D., Greenfields, M. (2012). Housed Gypsies and Travellers in the UK: work, exclusion and adaptation. Race & Class. Vol. 53 (3), pp. 48-64.
Van Cleemput et al, 2007	Van Cleemput, P., Parry, G., Thomas, K., Peters, J. and Cooper, C. (2007) Health-related beliefs and experiences of Gypsies and Travellers: a qualitative study. Journal of Epidemiology and Community Health. Vol 61, pp. 205-210.
Wilkin et al, 2010	Wilkin, A., Derrington, C., White, R., Martin, K., Foster, B., Kinder, K., Rutt, S. (2010). Improving the outcomes for Gypsy, Roma and Traveller pupils: final report. Department for Education. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/181669/DFE-RR043.pdf

Source: Greenwich JSNA 2013/14 "Closing the Gap." Public Health & Well-Being, Royal Borough of Greenwich.