

Evaluation of the Atelier Roma Men's Training, Diversion and Health Literacy Programme

**Health Service Executive Community Healthcare Organisation Area 5
Social Inclusion**

SEPTEMBER 2016

HSE Social Inclusion Community Healthcare Organisation (CHO) Area 5 in the South East covers five counties: Carlow, Kilkenny, South Tipperary, Waterford and Wexford.

CHO Area 5's Social Inclusion Team supports the development and implementation of appropriate health initiatives that enhance healthcare delivery to ensure equality of health outcomes for minority and vulnerable communities in the South East.

All intercultural health work undertaken in CHO Area 5 is informed and guided by:

- The values of the HSE: Care, Compassion, Trust and Learning (as set out in the Corporate Plan 2015–2017)
- The National Intercultural Health Strategy 2007–2012
- The Health Information and Quality Authority (HIQA) National Standards for Safer Better Healthcare (June 2012)
- The Equality and Human Rights Statement of the Social Inclusion Team in CHO 5 (developed in May 2016)

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Foreword and Executive Summary

I am delighted to welcome the evaluation of the Atelier Roma Men's Training, Diversion and Health Literacy Programme. The word *atelier* meaning 'workshop' in Romanian was chosen by the Roma men to represent their keen interest to work and to contribute to society, and also to provide for their families and in particular their children.

The programme was initiated by the Health Service Executive (HSE) Social Inclusion Team in Community Healthcare Organisation (CHO) Area 5 (hereafter referred to as 'Social Inclusion') and supported by U-Casadh; An Garda Síochána; the Department of Justice and Equality; the Department of Social Protection; the Wexford Waterford Education Training Board; and local development companies: Kilkenny LEADER Partnership and Wexford Local Development. This programme was also supported by the Waterford Roma Health Advocate employed by the Integration and Support Unit (ISU), a humanitarian non-governmental organisation in Waterford, and the Wexford Roma Health Advocate employed by the Ferns Diocesan Youth Service (FDYS). Both of the Roma Health Advocate posts are funded by Social Inclusion.

The programme was designed in response to the needs of Roma communities in Waterford and Wexford as identified through Social Inclusion-supported work, which involved in-depth consultations with Roma communities in both counties Wexford and Waterford and with agencies supporting Roma work in CHO 5. It was clear from these consultations that men within the Roma community wanted to be able to get up in the morning and go to work, to earn money with which they could support their children and families. The blocks to accessing the jobs market were many and real.

The Atelier Roma Men's Programme was designed to enable Roma men to gain some experience in traditional stonework and woodwork/woodcraft, which would hopefully open up opportunities for them to enter more mainstream training programmes and/or directly enter the jobs market. The overall aim of the Atelier Roma Men's Programme was to engage men from the Roma community who were not currently in employment/training in an introductory training programme to develop their skills, including English language and awareness of health issues and vocational skills, to prepare them in the first step of preparing for work.

The 20-week programme (engagement of one day a week) consisted of traditional stonework, woodwork/woodcraft, and a health awareness and health literacy programme, as well as an English language course delivered off-site as part of the programme.

Funding for the programme was secured via Social Inclusion, the Department of Justice and Equality, the Department of Social Protection, Wexford Local Development and Kilkenny LEADER Partnership.

A real and effective partnership was formed with the Garda Síochána Chief Superintendent which greatly facilitated both the development of the programme and development of relationships between An Garda Síochána and Waterford Roma men. Strong relationships with the Department of Social Protection were also built and a senior staff member attended the interagency meetings.

I would like to take this opportunity to acknowledge the outstanding work and commitment from U-Casadh who delivered this multi-faceted programme in a culturally competent way.

In line with the Health Information and Quality Authority's National Safer Better Healthcare Standards, and in particular Standard 1: Person Centred Care and Support, the planning and delivery of services were very much informed by service users' identified needs and preferences. U-Casadh delivered the modules of the traditional stonework, woodwork/woodcraft, and health literacy programme, amending the delivery of these modules based on structured feedback from Roma men and taking very different levels of education into account. A home-cooked hot dinner was also provided by U-Casadh. Every effort was made to ensure that the Roma male participants were centrally involved in decisions in relation to this programme.

Alex Petrovics, the Wexford Roma Health Advocate, played a key role in supporting the men's ongoing participation in the programme and in supporting the delivery of the programme, providing cultural expertise and facilitating the men to stay engaged. He was exceptional in his professional support and approach to both the participants and those delivering the programme. The Waterford Roma Health Advocate also supported recruitment to and participation in the programme. As mentioned earlier, both Roma Health Advocate posts in the South East are funded by Social Inclusion. The Roma Health Advocate posts are part of a model of intercultural health work in CHO 5 which employs peer health workers to work with their own communities in order to support access to and uptake of health services. Supporting such access is one of the recommendations of the National Intercultural Health Strategy 2007–2012, which underpins all intercultural health work undertaken in the South East.

We commissioned this external evaluation of the 20-week programme in order to assess whether the programme met its intended outcomes, to highlight the learning from the programme and to identify how similar projects might be improved and delivered in the future. The external evaluation found that the Atelier Roma Men's Programme was extremely successful in meeting many of its intended outcomes including: engagement, inclusion, integration, development of relationships, enhanced skills and personal development (including improved vocational skills, enhanced ability to work with others and as part of a team, increased knowledge of health and safety at work, increased confidence and sense of self worth and increased awareness of health and support services).

The benefits to the Roma men and their families are clear from the report. This was the first time Roma men in Waterford had engaged in a supported programme of any kind. This programme was designed in partnership with the Roma communities in both Wexford and Waterford. The delivery of this programme was supported by many agencies and government departments. It was a true partnership in every sense of the word.

I would like to thank Geraldine Scullion for her evaluation. She was methodical in her approach showing great attention to detail, particularly in relation to the development and analysis of baseline data from which her findings were made. Geraldine was professional and efficient throughout the process and a pleasure to work with.

Last but not least, I would like to thank Suzanne Nolan, a true leader in equality and human rights who lives by the public sector duty and encourages all public servants and indeed all people to do likewise; without Suzanne's vision and steady determination to see this programme develop and be delivered, it would never have come to be. The work and support that she has provided to the Roma community in Community Health Organisation 5 (South East) has been outstanding and lasting.

The Atelier Roma Men's Programme has made a start on the long-term goal of improving the ability of Roma men to sustain their families financially. The recommendations from this external evaluation are to continue to provide work-related training programmes with a focus on employability skills, progression to employment/further training and English language development. In conclusion, this evaluation found that the programme was an '*innovative, forward looking response*' to meeting the needs of excluded Roma men and that it has '*enormous potential*' to improve the lives of the Roma communities.

Further initiatives to support Roma inclusion are very much needed within this region and I welcome the development of increased interagency work with the Roma community to see such initiatives continue to grow and to strengthen the contribution that the Roma community can make in our region.

Dr Derval Howley
General Manager HSE Social Inclusion
Community Healthcare Organisation Area 5

September 2016

1 The Evaluation

This is an evaluation of the Atelier (Romanian for 'workshop') Roma Men's Training, Diversion and Health Literacy Programme, a 20-week programme developed in partnership by Social Inclusion¹, U-Casadh², the Integration and Support Unit Waterford³, the Ferns Diocesan Youth Service (FDYS)⁴, the Department of Justice and Equality, and the Department of Social Protection, as well as a number of local development companies.

The 20-week (one day per week) programme took place in U-Casadh, Ferrybank, Waterford in two phases: the first phase was an introductory 10-week pilot programme which took place between 15 January and 8 April 2016; this was followed by a second 10-week programme which ran between 8 April and 17 June 2016.

The overall aim of the training and diversion programme was to engage men from the Roma community who were not currently in employment/training in an introductory training programme to develop their skills, including English language, awareness of health issues, and vocational skills to support them in the first step of preparing for work. The programme included the development of practical skills in traditional stonework, woodwork/woodcraft and health and safety at work, plus a health awareness and literacy programme.

2 Purpose of the Evaluation

The aim of the evaluation is to:

- assess whether the 20-week programme (the pilot and second phase) met its intended outcomes, including any unintended outcomes (particularly 'soft' outcomes)
- identify outcomes from the health literacy programme
- identify the benefits (including additional supports and interventions) to the participants and their families
- highlight the learning from the programme and make recommendations for future work with Roma communities

¹ The HSE Social Inclusion Unit in the South East covers five counties: Carlow, Kilkenny, Waterford, Wexford and South Tipperary (Community Healthcare Organisation Area 5). Its overarching aim is to improve health outcomes in the South East for minority and vulnerable communities. Social Inclusion funds a Roma Health Advocate post in Co Waterford and Co Wexford.

² U-Casadh is a social inclusion project and registered charity based on the border of Waterford and Kilkenny. Its mission is to be a catalyst for change in attitudes to crime, social exclusion, rehabilitation and justice.

³ The Integration and Support Unit is a humanitarian NGO based in Waterford city.

⁴ FDYS is a countywide youth organisation that works with young people and adults in Co Wexford to support them in realising their full potential and to encourage them to take control over their own lives.

Relying on information provided by the staff (tutors, organisers, funders, etc.) and by the participants, the evaluation attempts to capture and record what happened, including the use of a community development/rights-based participatory approach to the planning and delivery of the programme. It is intended that the evaluation report will provide background information on the programme's partner organisations and the process by which it was developed and implemented.

A report of the evaluation of the 10-week pilot programme was drafted and delivered on 24 May 2016. This final overall report is an evaluation of the 20-week programme, building on the information and evidence provided for the pilot and the information provided for the second 10-week phase of the programme.

3 Evaluation Methodology

3.1 Document review

The evaluator was provided with a range of documents by the Regional Community Participation Officer with Social Inclusion which informed her of the background to, and ongoing progress with, the programme. These documents included:

- funding applications (both preliminary and continuation applications)
- draft and final outline programmes (including the 20-week health literacy programme)
- notes of meetings, including:
 - the meeting at U-Casadh on the first day of the programme (15 January 2016)
 - notes of the midway review (26 February 2016)
 - minutes of interagency meetings (25 January, 22 April and 21 June 2016), plus a copy of the PowerPoint presentation
 - notes of planning and progression meetings (15 April 2016)
- delivery notes of each of the health literacy sessions

Photographs of the participants displaying their work, photographs of the December 2015 open day and of the participants on the final days of phases 1 and 2 days were provided to the evaluator.

3.2 Baseline profile assessment report

The programme had capacity to provide training and facilities for 12–14 individuals.

The evaluator designed an individual profile assessment for the participants to establish their personal profile and their expectations of the programme. It also sought to establish a baseline assessment of their skills and knowledge in traditional stonework, woodwork/ woodcraft, health and safety, and their awareness of health literacy and other matters, in line with those objectives which the programme sought to develop. See Appendix 1 for a copy of this assessment document.

At the commencement of the pilot programme in January 2016 nine participants completed the assessment form with the help of the Wexford Roma Health Advocate. The aim was for participants to use the form to assess and record their skills at the start of the programme in January. The evaluator reviewed this document with each of the participants she met on 1 April 2016 asking them to assess their skills and knowledge noting any change since their assessment at the start of the programme.

In the second phase of the programme, nine of the pilot participants returned to continue their training; five participants were new to the programme. Six of these nine original participants were assisted at the end of the programme by the Wexford Roma Health Advocate to use the assessment form to further measure their progress at June 2016. Copies of these forms were given to the evaluator in July 2016.

3.3 Meetings and interviews on 1 April 2016 in preparation for the interim 10-week pilot evaluation

The evaluator interviewed key staff and supporters, and nine participants at this meeting. The former included: Jim Bruton, U-Casadh's Roma Men's Programme Coordinator; Jim Dempsey, U-Casadh Woodwork/Woodcraft Tutor; Alex Petrovics, Wexford Roma Health Advocate; Suzanne Nolan, Regional Community Participation Officer, Social Inclusion; Stephen Plunkett, U-Casadh Manager; John Williams, U-Casadh Health Literacy/Promotion Tutor; Brefini Dunphy, U-Casadh Health Literacy/Promotion Tutor; Pat Murphy, Garda Chief Superintendent; and Anne Nolan, Manager of the Waterford Integration and Support Unit.

Prior to these meetings, the evaluator developed a list of evaluation questions which was circulated in advance to the key agencies.

On the morning of 1 April 2016 she met all the Roma participants, introduced herself and the task to them. She facilitated a general discussion, eliciting information from the men on their overall impression of the programme, what they found useful, and whether they would recommend it to other members of the Roma communities.

With the support of the Wexford Roma Health Advocate, the evaluator met and interviewed nine participants. Organising the men in pairs, she spent approximately 10–12 minutes with each pair, going through their baseline profile, asking them to assess their progress against the baseline, and inviting their comments on all aspects of the programme.

A schedule of the 1 April 2016 meetings is attached at Appendix 2. Following these meetings, an interim evaluation report of the 10-week pilot programme was drafted, reviewed and then finalised on 24 May 2016. A number of interim recommendations were made.

3.4 Telephone conversations

The evaluator had a number of telephone conversations with Suzanne Nolan, Regional Community Participation Officer, during the 20 weeks of the programme, including an in-depth conversation on 1 September 2016 to review the second phase. She also conducted telephone conversations with Martin Rafter, Assistant CEO and Social Inclusion Manager with the Kilkenny LEADER Partnership on 10 April 2016.

3.5 Final overall evaluation

This final evaluation report was prepared on the basis of information provided by the Regional Community Participation Officer, a review of the June assessment reports from six participants, and in-depth telephone interviews via Skype on 14 September 2016. Questions for these interviews were circulated in advance. The interviews were conducted in turn with the Regional Community Participation Officer, U-Casadh's Roma Men's Programme Manager and the Wexford Roma Health Advocate. In addition, the evaluator was provided with documentation relating to plans for future development of the programme.

4 The Atelier Programme

4.1 Background

The Atelier Roma Men's Programme was designed and developed by Social Inclusion working in partnership with U-Casadh, Ferns Diocesan Youth Service and the Integration and Support Unit. Based on its regional understanding of the needs of Roma communities, Social Inclusion took the lead on this initiative; it built on a previous partnership with the Integration and Support Unit and formed a new working partnership with U-Casadh. Funding was secured from the Department of Equality and Justice, and An Garda Síochána, and also from within Social Inclusion; in addition, the Integration and Support Unit Manager secured funding from the Department of Social Protection.

The programme was co-managed by Jim Bruton (U-Casadh's Roma Men's Programme Coordinator) and Suzanne Nolan (Regional Community Participation Officer Social Inclusion). Jim Bruton coordinated programme delivery with support from Stephen Plunkett, the U-Casadh Manager. Suzanne Nolan coordinated the input of the Wexford and Waterford Roma Health Advocates throughout the whole programme, from consultation to the end of the pilot. As these posts were HSE funded, she supported both Roma advocates providing direction and guidance as required.

4.2. Context

Social Inclusion estimates that there are around 380 Roma people in Co Wexford (mostly based in Enniscorthy), 60 Roma people in Waterford city and around 60 Roma people in Carlow. The families mainly come from Romania.

In Waterford in 2014 the HSE identified the needs of the Roma families as including:

- Income poverty and a lack of sufficient food
- Malnutrition and poor health/wellbeing among the children
- Inadequate housing
- A lack of access to social welfare supports
- Lack of access to health and education services
- Social exclusion and language difficulties
- Isolation increased by poor English skills

In Wexford in 2014 the HSE identified the challenges facing the Roma families as including:

- Discrimination, especially in relation to housing and employment
- Income poverty
- Inadequate accommodation
- Lack of access to services including health
- Lack of access to GPs and medical cards

In 2014 anti-Roma sentiment had been expressed in Waterford city culminating in an incident when it was reported that 200 people had gathered outside Roma family homes, chanted anti-Roma slogans and attacked the properties. Following the attack and the volatile situation that ensued, and the displacement of two of the families out of Waterford, funding for a part-time Waterford Roma Advocate post was secured from Social Inclusion. The advocate commenced work in February 2015 with the Integration and Support Unit. The purpose of this post is to work with Roma individuals, families and groups, identifying needs and supporting clients to access a range of supports and services, especially health services.

Social Inclusion also funds a Roma Health Advocate Project in County Wexford and the overall aim of these Roma Health Advocate posts is to facilitate the development of health initiatives in response to health needs, and to support access to health and other social services.

The need for Roma men to have the opportunity to engage in constructive activities and to develop skills, including the ability to speak English, so as to increase their chances of finding work in any form and ensuring an income for themselves and their families, was identified through the work of the Roma Health Advocates and Social Inclusion staff in 2015.

4.3. Development of the programme

The Atelier Roma Men's Programme was designed following extensive consultation in 2015 with Roma families in Wexford and Waterford, together with the agencies⁵ supporting the families. A particular target for the programme was Roma men in Waterford city who were without any access to work or state benefits and whose families lived in overcrowded, substandard accommodation and, as a result of income poverty, had engaged with Child Protection Social Workers.

The programme was designed to engage this very excluded group of Roma men drawn from a location where criminal activity was a problem, by offering them a skills-based training and diversion programme; the programme aimed to develop their English language ability, their awareness of health issues and health literacy, and their vocational skills to support them in the first step of preparing for work.

⁵ In Waterford these agencies were the Waterford Roma Interagency Group, which included the Integration and Support Unit of the Edmund Rice Centre; St Brigid's Community & Family Centre; Waterford Traveller Group; Waterford Institute of Technology; Waterford Area Partnership; Waterford City & County Council; Tusla Child & Family Agency; the Area Public Health Nurse Department; An Garda Síochána; and HSE Social Inclusion. In Wexford the agencies included Tusla Child & Family Agency, including the Child and Family Network Coordinator; Social Work Department; Area Public Health Nurse Department; An Garda Síochána; HSE Primary Care Team Lead; Ferns Diocesan Youth Service; Disability Services; Wexford General Hospital; Community Welfare Officers; Citizen's Information Centre; Wexford Local Development; Barnardos; and the Department of Social Protection. Note: individual consultation with agencies in Wexford was undertaken as there was no formal Roma interagency structure in Wexford.

An additional aim was to enable their interaction with other Roma men who are not involved in crime and who could act as peer role models. The programme was also designed to upskill Roma men (largely living in Enniscorthy, Co Wexford) who are seeking employment but who required additional skills, an improved level of English, as well as health and safety knowledge and training.

A project proposal was developed to run a pilot 10-week introductory programme with plans for a further 10-week programme based on a review of the pilot programme. Following contact between Martin Rafter, the Assistant CEO and Social Inclusion Manager with Kilkenny LEADER Partnership, and Suzanne Nolan the Regional Community Participation Officer with Social Inclusion, the former made a commitment to supporting the programme.

The health literacy programme was devised in consultation with the Roma Health Advocates and was facilitated by John Williams and Brefini Dunphy, U-Casadh Health Promotion/Literacy Tutors with the support of the Wexford Roma Health Advocate. The overall theme of the programme was 'Fit to work'.

5 Programme Management And Delivery

5.1 Community development approach

The programme adopted a community development approach in order to ensure that it met the needs of the participants as defined by them. Using this approach, the organisers prioritised consultation with the Roma families in Wexford and Waterford, which was conducted in 2015.

Suzanne Nolan, the Regional Community Participation Officer, who was working with Alex Petrovics, the Wexford Roma Health Advocate, facilitating a weekly Roma drop-in service in Enniscorthy, agreed to consult with the community about the potential of the programme. Following a Fab Lab⁶ demonstration in U-Casadh in August 2015, Alex Petrovics canvassed views about potential boat building and traditional stonework courses among the Wexford Roma community. In autumn 2015 Suzanne Nolan attended a community meeting in Enniscorthy and showed a short YouTube video on traditional stonework. Fourteen men expressed an interest in the programme as a result; however, there were only six places for Roma men coming from Co Wexford. Six men were subsequently selected by and from among the independently constituted Roma community forum in Enniscorthy.

Supported by Suzanne Nolan, the Waterford Roma Health Advocate Mirela Vlasceanu engaged in a more individual approach to consulting with the Waterford Roma community. She gave details of the programme to the families with whom she was in contact and they decided who would participate.

As interest was clear, an open morning was held in U-Casadh on 4 December 2015 for Roma men from Waterford city and Enniscorthy. This meeting led to an agreement on the aims of the programme; a start date was agreed and the men christened the programme Atelier (Romanian for 'workshop').

Throughout the delivery of the programme, the community development ethos was evident. Recognising the barriers of language and power between the staff and participants, the tutors made particular efforts to encourage the men to give them feedback on how they found the programme and the activities. In this regard, the February review meeting had a positive impact on the men; at this meeting they expressed their opinion on a number of issues, such as the pace of the teaching. They asked that the tutors go more slowly, and clarify the learning as the task progressed. As a result the tutors adjusted the pace and concentrated on the learning rather than the outcome.

⁶ Fab Lab is a digital fabrication laboratory; conceived by Professor Neil Gershenfeld, Massachusetts Institute of Technology, its aim is to inspire people and entrepreneurs to turn their ideas into new products and prototypes by giving them access to a range of advanced digital manufacturing technology.

The Wexford Roma Health Advocate confirmed to the evaluator that being listened to and having their views respected made a positive impression on the participants. They said that with more explanation they enjoyed the programme better and were impressed that the tutors had adjusted their teaching methods to meet the group's need. He mentioned the U-Casadh Roma Men's Programme Coordinator's informal approach during the break when he would ask the men how they found the morning and would listen to their replies. He said that as the men's confidence in themselves and the tutors grew, they became more willing to talk and ask for what they needed. He commented that they felt they had been listened to for the first time ever and as a result, the programme had been adjusted and improved. He said it was an unusual experience for Roma men to talk in this way and express their needs.

The approach of treating the participants with respect and engaging with them as equals appeared to assist with the building of trust between staff and participants and contributed to the positive outcomes of the programme.

5.2 The programme

The programme was delivered every Friday from 10 a.m. to 3 p.m. at U-Casadh's premises in Ferrybank, Waterford. It was co-managed by Suzanne Nolan, Regional Community Participation Officer, and Jim Bruton, U-Casadh's Roma Men's Programme Coordinator, with support from Stephen Plunkett, the U-Casadh Manager. Alex Petrovics, the Wexford Roma Health Advocate, provided practical support to, and language interpretation, for the participants. The emphasis of the project was on informal learning using, where possible, visual and oral communication.

The 20-week programme consisted of the following:

- Traditional stonework skills programme in U-Casadh
- Woodwork/woodcraft skills programme in U-Casadh
- Health awareness and health literacy programme delivered in U-Casadh
- English language course delivered off-site (The Wexford men participated in a Department of Social Protection-funded English language course delivered by Waterford and Wexford Education and Training Board in Enniscorthy.)

The U-Casadh campus was selected because U-Casadh has a proven track record of working with members of disadvantaged communities; it also offered all the necessary equipment, workshops and outdoor space for the activities. The men from Wexford were provided with transport to the campus; a bus picked them up at 9 a.m. in Enniscorthy and returned them after the programme. The men from Waterford were also assisted with transport (being collected by the bus at the bridge in Waterford city and brought to the U-Casadh campus).

There were two aspects to the vocational skills work; woodwork/woodcraft skills were taught by Jim Dempsey, U-Casadh Woodwork/Woodcraft Tutor and traditional stonework by Declan McNamara, a Kilkenny LEADER Partnership Traditional Stonework Tutor. The aim was to enable the men to learn the skills involved in working as a 'building operative' on construction sites. This involved becoming familiar with the tools used on a building site, learning their English names, the ability to take measurements, mix concrete, build partitions,

set up scaffolding, etc. Other learning aspects of the programme were the ability to take and follow instructions, habituating the participants with attending and participating in work activities, and team working.

The health literacy⁷ aspect of the programme was delivered by John Williams and Brefini Dunphy, U-Casadh Health Promotion/Literacy Tutors with the support of the Wexford Roma Health Advocate and the HSE. The general aim of the health literacy programme was to empower participants to increase their control over their own health, to seek out information, put it into practice and take responsibility for their own wellbeing.

The health literacy programme was run after the traditional stonework skills-based module and lunch break. The methodology took into account the participants' language, educational and literacy abilities. The topics for the first 10 weeks included: overview; numeracy for work; measuring liquids; Fit for Work (increasing participants' awareness of the importance of physical and mental health to working life); health and safety at work; fire safety in the home; and smoking and health. In the second 10 weeks these topics were reviewed and further topics included: introduction to heart health; healthy eating; and 'Ready for work – Exploring attitudes to and perceptions of work'.

5.3 English language skills provision

An English course was running in Enniscorthy from September 2015 to May 2016 (funded by the Department of Social Protection and run by the Waterford and Wexford Education and Training Board) and some of the Wexford men participated in these classes as well as the Atelier Roma Men's Programme. The plan was to have English classes provided to the Waterford men via the Integration and Support Unit but they didn't take up these classes. In the second phase of the Atelier Roma Men's Programme an English language course was delivered separately in Waterford by the Integration and Support Unit. Three men signed up to classes, which were funded by the Department of Social Protection under the Atelier Roma Men's Programme.

5.4. The Friday timetable

The timetable included traditional Romanian breakfast and tea/coffee on arrival at 10 a.m. The activities were weather dependent: if dry, the men did the traditional stonework (they worked on the stone walls around the U-Casadh campus learning to sort, cut and lay stone, both with traditional lime and using dry stone techniques, and learning repair techniques). If it was raining, the men did woodwork/woodcraft (woodturning, small craft work, furniture making, etc.). A morning break and a hot home-cooked nutritious dinner were provided. After lunch, the tutors delivered the health literacy programme using a flexible and fluid approach.

The session was reviewed, the workshops tidied and the programme finished around 3 p.m. The men were given a food parcel to take home.

⁷ Health literacy can be defined as: '*the ability to make sound health decisions in the context of everyday life – at home, in the community, at the workplace, in the healthcare system, the market place and the political arena.*' (Kickbusch, 2005)

6 Intended Outcomes

The programme had 10 detailed intended outcomes. The headings for each of the outcomes were:

- engagement
- inclusion
- integration
- development of relationships
- crime prevention/diversion
- restorative justice
- enhanced skills and personal development
- increased awareness of health
- increased awareness of support services
- progression

The detailed intended outcomes are set out below in green italic. They are examined and assessed in turn.

6.1 Engagement

The aim of the programme was to engage excluded Roma men in positive activities and a skills development programme.

This outcome was achieved; the programme successfully engaged excluded Roma men.

During the pilot 10-week phase, there were 12 places available for Roma men (6 from Waterford and 6 from Enniscorthy, Co Wexford) plus 2 additional places for English-speaking men. Following the consultation, the Roma communities selected the participants.

In the second phase, there were 14 places allocated to Roma men: 9 of these men had completed the pilot 10-week phase and continued on to the second phase; 5 men were new to the programme.

6.1.1 Attendance

During the **pilot 10-week phase**, 15 Roma men took part in the programme. Of these, the attendance rate was 100 per cent for six men. One man missed one day.

Of the remainder, one man attended for two days only, and three men attended for one day only; they left because they had found work.

Two men started in week five and attended for two and three days respectively; two men started in week nine.

During the **second 10-week phase** of the programme which commenced in April, 14 Roma men participated. Two men attended 10 days (100 per cent of the programme); two men missed one day; two men missed two days (one of whom had started in week two); three

men missed three days; and three men missed four days (one of whom started in week two and another in week three). The reasons for non-attendance were given to the tutors and included: taking up opportunities for seasonal fruit-picking work, and minding children to allow wives/partners to attend medical or probation appointments.

Two men started in week eight and attended for the last three weeks.

6.2 Inclusion

The aim of the programme was to engage a group of Roma men experiencing disadvantage and poverty in an inclusive culturally appropriate developmental programme.

This outcome was achieved. The programme targeted excluded Roma men experiencing disadvantage and poverty.

Many of the Waterford-based Roma have failed the habitual residence condition⁸ and thus had no access to services such as Department of Social Protection payments, and local authority housing supports including emergency accommodation.

The traditional stonework programme was offered, as it was considered to be a good fit with skills traditionally practised by Roma men. The woodwork/woodcraft was offered in order to give the men a practical work-related skill; it also gave them the opportunity to work with their hands and enabled them to create small practical items for use in their homes.

The feedback from the participants at the midway review (February 2016) and at the general discussion on 1 April 2016 was extremely positive. They said they enjoyed the programme, had learned new skills, and would recommend it to others; one man said it would be good for the family. One participant said he had a poor situation at home and hoped the course would give him a better financial situation. One commented that everyone at U-Casadh was very open and others agreed with this point. The men expressed their thanks to the organisers several times for giving them the opportunity to participate.

Following the second phase, the Roma Health Advocate confirmed to the evaluator that the participants enjoyed the programme and were frequently asking him when it would recommence, as they were very keen to continue with the activities.

Jim Bruton commented on the demeanour of the men on the final day of the second phase on 17 June 2016. He recorded that some of the Roma men appeared disinclined to engage in the woodwork/woodcraft class; they appeared downcast. The Roma Health Advocate explained that the men were sad that the programme was ending. They asked if the programme was starting again, and on being told this was planned to happen in September, subject to funding, their mood improved. They engaged well in the health literacy programme after lunch and thanked the tutors, John and Brefini, for their time and said that they had enjoyed and benefited from the Health Literacy class.

⁸ The habitual residence condition is an eligibility condition that applicants for most means-tested social welfare payments (and child benefit) in Ireland must satisfy. It came into effect from 1 May 2004 following the enlargement of the European Union.

6.3 Integration

The programme aimed to improve relations between Waterford Roma men and the local population through joint participation in the programme. It was intended that there would be a reduction in anti-Roma sentiment – an improved ability to speak English was deemed as a necessary prerequisite to integration.

This outcome was achieved. The programme appeared to have an impact on reducing anti-Roma sentiment. At the 21 June 2016 interagency meeting, An Garda Síochána Chief Superintendent Pat Murphy told the partners that *'there was no issue'* with anti-Roma sentiment in Waterford. He considered that the U-Casadh programme had dealt with the 'root cause' of the problem.

The opportunity for interaction and the improvement of relations between Waterford Roma men and the local population was limited. However, the men had the opportunity to interact with the Irish staff and the Wexford men and there was evidence of team working and trust between them. Good relations between staff and participants were observed at the evaluation meeting.

Initially, two Irish men (one of whom was an Irish Traveller) were included on the programme with the aim of introducing each to the other national/ethnic groups. Staff confirmed that one of these men participated for the pilot 10-week programme, doing traditional stonework with the Roma participants before progressing to another U-Casadh project. This participant provided the men with a lift from Waterford city to the U-Casadh site on a number of occasions. The evaluator was informed that this participant interacted well with the men during the work and throughout the project.

At the start of the pilot 10-week programme, of the nine men who completed the baseline profile, two assessed their English language skills at point 1 of the scale (none); four men assessed their skills at point 2 (a little knowledge); two men assessed their skills at point 3 (basic knowledge); and one man assessed his skills at point 4 (more than basic knowledge). At 1 April 2016, four of the men felt their skills had increased to point 2 and above, with two men indicating point 5+ (good knowledge). The remainder indicated no progress.

At the end of the programme in June, of the six men who had completed the baseline profile and the full 20-week programme, all six reported an improvement in their English language skills: four assessed their skills at point 3 (basic knowledge) and two assessed their skills at point 4 (more than basic knowledge). One of these men noted an improvement in his communication with his doctor.

6.4 Development of relationships

The programme aimed to develop relationships and trust between Roma and key agencies including An Garda Síochána through links with community gardaí via the programme and informal visits to U-Casadh. It also aimed to influence state agencies' interactions with the Roma community based on respect and effective communication (as recommended in The Logan Report).

This outcome was partly achieved. The programme successfully developed relationships and trust between the Roma programme staff and key agencies, which indirectly impacted on relationships between the Roma participants and agencies. This development of positive and supportive relationships between the project staff and the key agencies was an important outcome from the project.

For example, through their engagement in the programme, many of the men were signposted by staff for advice and support in relation to housing or welfare matters. This led to increased access to services because of advice/information, particularly on where to go and how to go about applying/presenting information. In addition, the programme led to employment opportunities for some participants which had a direct effect on their eligibility for Department of Social Protection payments.

During the pilot 10-week phase, the programme did not set up visits by An Garda Síochána to meet the participants as was originally envisaged; this was because the staff did not deem it to be appropriate within the limited period of the programme when the focus was on building relationships between staff and participants. Suzanne Nolan continued to liaise with the Garda Sergeant participating in the Waterford Roma Interagency Group throughout the programme. However, during the subsequent 10-week programme (on 22 April 2016) a visit by the Garda Sergeant from the Interagency Group was arranged and this provided an opportunity for the men and the Sergeant to meet in U-Casadh as part of the programme.

The programme did engage the full support of An Garda Síochána Chief Superintendent Pat Murphy. In an email to Jack Nolan, Assistant Commissioner South East Region dated 6 July 2016, he confirmed that he supported a funding proposal *'to continue this excellent diversion and development programme ... The initial pilot programme which commenced last year was a true success, delivering on its objectives and making very significant contributions to the Roma families involved, and by extension to the wider Communities in Waterford city area and the public objectives of An Garda Síochána. Additionally, it delivered excellent value for public investment ...'*

The agencies which supported the project received positive information about the participants, including how keen they were to find work. At the interagency meeting on 21 June 2016, a number of agency representatives commented on how positive the programme had been and how they had enjoyed watching it develop. They indicated that they had benefited from the programme in that they felt that they better understood the Roma community and the men's genuine desire to work, adding that the programme had positively impacted on their perception of the Roma community and its needs.

6.5 Crime prevention/diversion

The programme aimed to impact on crime prevention in the longer term by offering opportunities and support to the identified group to take a step towards employment of some type as a source of income. It also hoped to improve the likelihood of participants being diverted from crime as a result of engaging in the programme and, in particular, from their interaction with other Roma men who are not involved in crime and who may act as positive peer role models.

This outcome was achieved.

In the light of the deterioration in 2014 of relationships between local people and the Roma families in Waterford, An Garda Síochána Chief Superintendent Murphy was keen to support the project which visibly engaged the Roma men in a productive programme with the aim of helping them earn a living. At a meeting with the evaluator on 1 April 2016, he expressed his opinion that there had been an improvement in relationships and a reduction in crime since 2015 and that the programme was a contributory factor in this. He considered that the programme was helping to build trust between people in Waterford; it acted as a bridge for the Roma families into relationships with key agencies, and was helping to build mutual understanding and respect between the Roma families, An Garda Síochána and local people. He highlighted the importance of U-Casadh's ethos in the success in engaging the Roma men on the project.

At the interagency meeting on 21 June 2016, Chief Superintendent Murphy acknowledged that although statistical data were unavailable, drawing on his knowledge of operations at ground level in Waterford, in his opinion '*Roma crime had been obliterated in Waterford*', adding '*there is no issue with Roma crime in Waterford*'. As mentioned above, Chief Superintendent Murphy considered that the programme had '*dealt with the root cause of the problem*'.

6.6 Restorative justice

The programme aimed to link up with the Restorative Practice Network in Waterford.

This outcome was not achieved. This did not happen within the limited time span of the programme. Following the pilot phase, it was decided to omit this as an objective in phase two.

6.7 Enhanced skills and personal development

This involves a number of sub-headings (see below). Progress in the development of skills and personal development was self-assessed by the nine participants in the pilot phase and by the six participants in the second phase who had completed the baseline profile.

These outcomes were achieved.

6.7.1. Increased skills in areas of traditional stonework and woodwork/woodcraft

In the pilot 10-week programme, all the men increased their skills in traditional stonework and woodwork/woodcraft.

At the start, six men assessed their traditional stonework skills at point 1 of the scale (none); two men assessed their skills at point 2 (a little knowledge); and one man assessed his skills at point 3 (basic knowledge). At 1 April 2016, all of the men felt their skills had increased to point 3 and above, with one man indicating point 5 (good knowledge).

In relation to woodwork/woodcraft, eight of the men assessed their skills at point 1 of the scale (none); one man assessed this at point 2. At 1 April 2016, all of the men felt their skills had increased to point 3/4 and 4 (more than basic knowledge), with three men indicating point 5 (good knowledge).

During the one-to-one sessions in April, one man volunteered that he had learned new things such as woodturning, and preparing and measuring a site in order to build a wall; he said he was very happy with the programme.

At the end of the programme in June, of the six men who had completed the baseline profile and the full 20-week programme, all six reported an improvement in their skills. In relation to traditional stonework, one man assessed his skills at point 3 (basic knowledge); four men had moved from point 1 (none) to point 4 (more than basic knowledge) and one had moved from point 1 (none) to point 5 (good knowledge).

In relation to woodwork/woodcraft, two men had moved from point 1 (none) to point 5 (good knowledge); three men had moved from point 1 (none) to point 4 (more than basic knowledge); and one had moved from point 2 (a little knowledge) to point 5 (good knowledge).

6.7.2. Enhanced ability to work with others and as part of a team

This outcome was achieved.

When asked in the group discussion, the participants expressed their enjoyment of the project, mentioning their pleasure in coming to the project, having the opportunity to learn something, and of being part of the group. The staff noted that the men worked very well together; they were well behaved and polite, and they deferred quickly to Roma individuals in the group who acted as leaders.

An issue arose in the course of the programme in relation to a difference in inputs by the Wexford and Waterford Roma Health Advocates. This issue was aired at a meeting with everyone and the reason for the difference was explained. The reasons were fully accepted by the group. There was a follow-up meeting with the men in Waterford facilitated by Suzanne Nolan and Anne Nolan and the issue was satisfactorily resolved.

During the second phase of the programme the U-Casadh's Roma Men's Programme Coordinator noted that the teamwork had improved; the men worked better together, they were more comfortable with each other, and responded well to instructions and challenges. The Wexford Roma Health Advocate confirmed that the men shared their knowledge with each other, for example giving advice on how to approach a traditional stonework/woodwork/woodcraft task or improve a way of working, displaying a confidence and pride in their knowledge.

6.7.3 Increased knowledge of health and safety at work

This outcome was achieved. All the men increased their knowledge of health and safety at work during the programme.

At the start of the pilot 10-week programme, seven men assessed their knowledge of health and safety at work at point 1 of the scale (none); and two men assessed their skills at point 2 (a little knowledge). At 1 April 2016, four of the men who had scored 1 indicated that their knowledge had increased to point 5 (good knowledge). The remainder had increased their scores.

At the end of the programme in June, of the six men who had completed the baseline profile and the full 20-week programme, all six reported an improvement in their health and safety at work knowledge. Three men had moved from point 1 (none) to point 5 (good knowledge); one had moved from point 1 (none) to point 4 (more than basic); and two had moved from point 2 (a little knowledge) to point 4.

6.7.4 Improved chances of securing paid work/entering self-employment; improved ability to sustain their families financially.

This outcome was partly achieved. This is a long-term goal and is dependent on factors outside the programme. However, it is important to record the steps taken towards it by the programme.

Two men on the programme were supported to find part-time paid work during the pilot phase; in addition to their wages, they are able to access Department of Social Protection payments thus making a real difference to their lives and their families' lives. For these two men, this was their first paid work in Ireland. At the end of their short-term contract, the employer informed U-Casadh staff that he was 'happy with the men' as workers. One of these men demonstrated his pride in his employment experience explaining in detail his work tasks to the Wexford Roma Health Advocate.

Following the second phase, one participant has begun a 'Youth Train', a year-long four-days-per-week training programme which will assess and meet his training needs, give him work experience and help find him a job at the end of the programme. A training allowance is also paid.

In the longer term, the practical skills and familiarity with the language and terminology used on construction sites learned on the programme should provide the participants with an improved chance of securing paid construction work.

The goal of entering self-employment was an ambitious one. The traditional stonework aspect of the programme was an introduction to the practical skills used on construction sites.

While woodturning could, in time, allow the production of saleable woodwork/woodcraft products, entry into the unionised woodworking profession is controlled via college-based training and registered apprenticeships. The men in the programme expressed some frustration to the tutor that the woodturning work was not work-related. At the same time, several men reported with pride on their woodwork/woodcraft achievements in making shelves for their homes, tables and chairs for their children, etc.

6.7.5 Increased confidence and sense of self worth

This outcome was achieved.

The U-Casadh staff reported that the opportunity given to the participants to use their hands to make something in which they took pride had an impact on the men's outwardly displayed sense of self-esteem. The photos taken of individuals displaying their work confirmed this sense of pride.

Anne Nolan, Integration and Support Unit Manager, commented that she had observed a massive change in the men's demeanour. At the beginning of the project, the men were reluctant to engage with the female staff; towards the end of the 10 weeks, she found them to be open and friendly.

Martin Rafter, Assistant CEO of Kilkenny LEADER Partnership, confirmed that the two men who had found part-time work had to find their way to the work place location themselves. On the first occasion they got off the train at the wrong stop, but thereafter they arrived on time and equipped to complete the day's work. The employer confirmed that he was satisfied with their progress.

During the afternoon health literacy programme, the health literacy staff observed subtle changes in the men's manner of entering the room, taking their place and participating in the health sessions and the ensuing discussions, which indicated an improved sense of confidence and self-esteem.

As the programme developed tutors observed a big change in the men during their interaction at the sessions. These sessions involved the men in discussing topics not normally considered to be within their traditional role. At the beginning they were unsettled, but over the weeks, they engaged in good discussions, became less separate/formal and instead were more vocal and engaged with the topic. The U-Casadh's Roma Men's Programme Coordinator commented that in the second phase of the programme, the hour-long health sessions lasted longer as the men participated more fully in the discussions.

6.7.6 Increased desire to break the cycle of disadvantage, improve their own circumstances and want better life outcomes

This outcome was achieved.

The baseline profile asked participants about their expectations of the programme. One hundred per cent of the participants responded positively saying they wanted: '*to learn and find a job*', '*to find work*', '*to learn new skills*', '*better employment*', '*new information/skills*', and '*better living*'.

In answer to the baseline profile question: 'What would you like to do after the programme?' the nine participants who completed the questionnaire replied: '*Work*'. The baseline profile completed by the six participants who completed the entire 20 weeks repeated this desire to work, with one man specifying that he would like to work full-time, and another expressing the wish to work as a painter or barber.

The baseline profile also asked participants about what they would like to achieve for themselves and their family in the future. One hundred per cent of the participants responded positively saying they wanted to achieve 'a better life', or a 'better life in Ireland', with one man adding 'with no discrimination'.

The project staff reported that the men engaged in the training tasks wholeheartedly. They were eager to work and were assessed as good workers by the U-Casadh tutors.

6.8 Increased awareness of health

The programme aimed to: increase awareness of health services and information and how to access same; increase understanding of diet and nutrition; improve access to health services; improve health outcomes for the Roma participants especially across key health areas identified and addressed; and improve ability to make good health decisions.

This outcome was achieved. There was evidence of increased awareness among participants of health matters following the programme.

The baseline profile at the start of the programme asked participants about their awareness of health services and information and how to access these; they were asked to measure these by listing health services they knew about or had used. All of the respondents indicated GP services, while four also added 'hospital'. One man was additionally aware of the 'health centre'. Eight of the nine respondents were registered with a GP; of those eight, three had good communication with their doctor and were aware of the free translation service. The remaining five were not aware of the free translation service and had bad communication with their doctor.

It should be noted that the Roma Health Advocates have a particular role in supporting the Roma families to register with GPs, apply for medical cards and access health services.

The baseline profile asked participants about their awareness of health literacy (in relation to administering medicine, following instructions, connections between health and diet). The answers indicated a pre-existing confidence and knowledge on these issues from most of the participants. Three men who indicated that they were only a little confident about following instructions on how much medicine to take or give, scored point 5 (very confident) on 1 April 2016.

At the one-to-one sessions in April, one man volunteered that following the health literacy sessions he had starting running two kilometres every night and was planning to join a gym. A second man volunteered that he had enjoyed the training on health, and on diet in particular, and found it useful information. A third man said that he had learned not to mix medicines. The Wexford Roma Health Advocate reported that another participant had quit smoking after one of the sessions.

At the end of the programme in June, of the six men who completed the baseline profile and the full 20-week programme, four of the participants reported an improvement in their confidence in administrating medicine and their health literacy; two reported no change.

6.9 Increased awareness of support services

The programme aimed to increase self determination, decision-making and empowerment of individuals around their own health; to increase levels of personal responsibility for wellbeing, with participants being supported to take control over their health (notwithstanding the social determinants of health); and to increase likelihood of accessing and benefiting from such supports.

This outcome was partly achieved.

The baseline profile asked participants about their knowledge of supports and services asking: 'Can you list any supports and services available to you and your family in Waterford/Wexford?' With one exception, the answers indicated a low level of awareness of where to find support. The participants' answers varied considerably: initially, they mainly listed one or two sources; their answers included: 'family'; 'ask around'; 'hospital'; and 'FDYS' (Ferns Diocesan Youth Service). At the one-to-one meetings on 1 April 2016, the range of answers had developed slightly and included: 'hospital emergency service'; 'pharmacy'; 'GP'; and 'the ambulance service'. One man did volunteer that advice on medicines was available at the pharmacy.

6.10 Progression

The programme aimed to increase the likelihood of progression to further training/education or employment.

This outcome was achieved. The programme increased the likelihood of progression towards further training, education and employment. Two participants had undertaken a short-term employment contract as a result of engagement with the programme; one man had obtained a place on a Youth Train programme leading to employment.

The participants demonstrated the desire to find work to sustain their families. The practical skills and knowledge gained on the programme would clearly help them to work on construction sites; they had additionally gained in confidence, and had experience of regular attendance and working in a team, all of which would recommend them to employers. Although their English language skills had improved, more would be needed in order to allow them to have any chance of competing for vacancies.

Following the pilot phase, the programme staff consulted with the participants about their further training needs and interests.

By June 2016, the staff had developed a number of possible progression routes to assist in achieving the goal; these included:

- Funding applications to the Department of Justice and Equality for a 10-month programme in 2017; possible modules to include traditional stonework and woodwork/woodcraft; and accredited courses in manual handling, forklift/dumper truck driving; and English language
- Exploring with Wexford Local Development a plan to run the same programme in a site in Co Wexford
- Obtaining support, in principle and subject to funding, from the HSE to employ the Wexford men to spend a week building a wall in a wellbeing garden in a mental health facility on a HSE site in Enniscorthy and using the opening of the garden as a showcase of the skills learned on the programme and to attract other contracts.

7 Challenges and Learning

7.1 Hard to engage group

Engaging with the Waterford Roma community was difficult at the start. The Roma families living in Waterford do not (with the exception of a very few individuals) have access to social welfare; some families had no medical cards, or entitlement to housing support; many had no access to financial support from the State to support their families. Only one man from Waterford came to the open day.

To enable their participation, the programme organisers decided to find the funds to pay a volunteer support payment (1 × €25 local supermarket voucher per week) to each participant who had no other form of income. To ensure that this allowance did not cause difficulties among the Wexford men who did not receive it, the Waterford men were asked to carry out an extra task.

The Waterford men engaged gradually in the programme: one man came in week one (the same who had attended the open day); a second man came in week two; two other men came in week three; and thereafter, these four men attended one hundred per cent of the programme. A further three Waterford men attended the programme, one in week six and two in week nine. Allowing the participants time to develop the confidence to attend and join the programme seemed to work successfully.

7.2 Poverty barriers

As mentioned above, the Waterford Roma families had no income support from the state and without employment they led a precarious existence.

During week eight of the project, two of the Waterford men faced eviction. One eviction had been ordered by the court in 2015 but had been delayed. Without access to emergency accommodation, this posed a huge threat to them and their families. The project staff negotiated further delay of the eviction and, through their contacts with the Kilkenny LEADER Partnership, the two men were found employment in a garden nursery for two days a week for four months; these men continued to attend the training programme. As well as assisting the men to earn a living, employment ensured their access to housing supports and other services, thus making a real improvement in the quality of their lives.

7.3 Language barriers

Given the low level of English language skills among the participants, the use of a Romanes interpreter was critical to developing the programme, attracting the participants and ensuring its viability. The participants' lack of literacy skills in any language was overcome by reliance on oral communication. The fact that the interpreter was also a Roma man with knowledge of the Roma community, its culture and the issues it faced locally brought an additional benefit to the project.

7.4 Low expectations

The project staff observed that the men came to the programme with very low expectations. However, they were eager to work and worked hard on the tasks given.

7.5 U-Casadh learning

The U-Casadh team found working via an interpreter challenging, as this was a first for some members of the team. One individual expressed it as a '*huge learning curve from a standing start*'. Allowing time for the tasks, and organising small groups to work on different machines in the workshop at the same time, while supported by one interpreter was a challenge. The woodwork/woodcraft tutor resolved some of the logistical problems by encouraging a participant to show a small group of others how to do the task in question, giving the leading individual a sense of achievement.

The method of delivery of the health literacy sessions was adapted to rely on visual aids without much reliance on written language.

The participants expressed their enjoyment of the project on several occasions, so it seemed to the evaluator that the practical, adaptive approach taken ensured the smooth running of the project.

7.6 Completing the baseline profile assessment form

The requirement for participants to use their name on this form caused a difficulty for one individual. Given the lack of trust in authority among many Roma communities, to avoid this problem, any future written records shared with the external evaluator should review whether the name of the individual is necessary or whether another signifier to identify and track the progress made by each participant is sufficient.

8 Recommendations

8.1 Suggestions from the Roma participants

- Continue to provide work-related training programmes.
- Ensure that the timing of any future programmes enables them to find part-time work and still attend the training.
- The training needs to be related to work and employability skills. (At the midway review, one man expressed anxiety about future work possibilities, as he was aware that men who did the chainsaw course in Enniscorthy did not find work as a result. During the programme, some men indicated an impatience with the woodturning activities; they had understood the programme was to be work-related and this was an important reason for their attendance.)

8.2 Other recommendations

8.2.1 Review objectives for future programmes

The project organisers set 10+ extremely ambitious intended outcomes from the programme. The project was very successful in meeting its engagement, inclusion, enhanced skills and personal development, and increased awareness of health outcomes; it was clear from the baseline profiles and the feedback that the organisers and tutors had enabled a very excluded group of men to engage successfully with the staff and the skills development, and had built their confidence and self-esteem.

The project had begun a process of connecting individuals to state supports and regularising the relationships of marginalised Roma families with the State. It made an impact on relationship building and, in combination with other factors, made a contribution to crime prevention/diversion.

The goal of English language development and increased awareness of support services was less successful.

The programme made important steps towards progression in finding work, self-employment and further training. There was (short-term) progress for two individuals and progress for the man who joined the Youth Train scheme as a result of the programme. For the remainder, these were the intended outcomes which were least successful.

8.2.2 Focus on English language development

While a number of the men assessed their English language skills to have improved on the programme, this was less evident for others. In order to have a realistic chance to join the workforce, English language is a priority. Future programmes should consider how to focus on building language and fluency, particularly in the language of the workplace.

8.2.3 Focus on work-related skills

One hundred per cent of the participants expressed their wish to find work and several explicitly mentioned their work-related skills development. Future training should continue to focus on building skills which are useful in finding, participating in and keeping work.

8.2.4 Strategy for progression to next steps

Following the pilot project, the project staff have invested time into building relationships with agencies and funders in an effort to ensure that the participants find routes into employment. The agencies attending the June 2016 interagency meeting expressed a willingness to be engaged in finding work or supporting future programmes.

Suggestions for developing the strategy for progress include:

- Continue to engage with the Waterford Area Partnership and Wexford Local Development: lobbying local members to inform them of the work of the project; raising awareness of the success of the project; building on successful interventions; and, where there has been a lack of support, holding the relevant bodies to account for omitting to engage adequately with the Roma community and meet their needs and overcome the barriers which stop them from fully participating in society
- Developing and improving links with employers and employment agencies
- Building on the success of the two individuals who found work with a local major employer, invite that employer, and other employers, to visit the project, and participate in it by sponsoring further placements or filling job vacancies
- Allocating resources to developing skills on finding work: where to find information on vacancies; how to apply for jobs; how to present oneself at interview or on the telephone
- Advertising the success of the programme through open days and media coverage of successes, focusing on the potential of Roma workers (a community with an ethos of hard work, adaptability, and international experience and contacts)
- Holding an open day to celebrate the project's success, inviting the Roma families and children as well as local community groups in Waterford and Wexford to advertise the project's successes
- Consider offering driving instruction, given that access to transport is critical to finding work
- Explore Tús and Community Employment Placement schemes as an option for building work experience; consider building English language development programmes into any such placements

8.2.5 Ensure continued involvement of a Roma Health Advocate

It appeared to the evaluator that the Roma Health Advocate had played a valuable role in the success of the participants' engagement by acting as a trusted Roma representative. He acted as a bridge between the participants and the project in ensuring not just good communication and interpretation but also in resolving problems, encouraging attendance and full participation. He also played a valuable role in facilitating registration with GPs. The engagement of a Roma facilitator was an important part of the project's success and that role should be built into future programmes.

8.2.6 Build links with other Roma projects in Ireland, UK and Europe

There are learning opportunities from other Roma work/development projects in Ireland and the UK. Suggestions include: Pavee Point, Irish Traveller Movement, Traveller Movement (London) and the European Roma Rights Centre, all of which could be a source of useful information with contacts and resources relevant to the project. It would be worthwhile considering sending a report of the project/this evaluation to the Open Society Foundations in order to engage their interest and, potentially, financial support.

9 Conclusion

This project was an innovative, forward-looking response to meeting the needs of local Roma men who are excluded from the labour market by lack of employability skills, work experience and language. It was extremely successful in meeting many of its intended outcomes including:

- engagement, inclusion, integration, development of relationships
- enhanced skills and personal development (including improved vocational skills, enhanced ability to work with others and as part of a team, increased knowledge of health and safety at work, increased confidence and sense of self worth)
- increased awareness of health and support services

The participants expressed their enjoyment of the programme and they used the opportunities it gave them to develop their skills, confidence and self-esteem. Based on community development principles, the organisers consulted and worked with the participants, and adapted the programme as it developed. Both the organisers and the participants learned from the experience.

The project has enormous potential to improve the lives of the Roma communities, to improve local relationships and to allow the Roma communities to contribute to the economic and social wealth of Waterford and Wexford.

Appendices

Appendix 1 Participants' Baseline Assessment Profile (completed by each of the participants)

1. Profile of each participant (at beginning and at end)

Name

Employment status

Nationality

Age

Marital status

Dependents? How many?

What level of education?

How long have you lived in Ireland?

Do you have any work experience in Ireland/in Romania?

What work skills or qualifications do/did you have?

2 Participant's expectations of programme

- a) Why did you join the programme?
- b) What do you expect from the programme?
- c) What do you want to achieve from taking part in the programme? During the programme and in the future?

3 Participant's skills and knowledge

- a) What are your skills in the following areas: 1–5 scale (*1 none, 2 a little knowledge, 3 basic knowledge, 4 more than basic knowledge, 5 good knowledge*)?
 - traditional stonework
 - woodwork/woodcraft
 - health and safety at work
- b) How would you measure your ability to work with others and as part of a team: 1–5 scale (*1 none, 2 limited, 3 OK, 4 good, 5 excellent*)?
- c) How good is your level of English language skills: 1–5 scale (*1 none, 2 a few words, 3 more than a few words/can communicate basic info, 4 can communicate more than basic info, 5 good*)?

4 Participant's awareness of health issues:

- a) Would you say you are in good health? Do you have any problems with your health?
- b) Have you ever been sick; what was the problem?

5 Increased awareness of health services and information and how to access same

- a) Can you list any health services you know about?
- b) Can you list any health services you have used?
- c) Are you registered with a doctor?
- d) How do you communicate with your doctor?
- e) Are you aware that there is a free translation service?
- f) Do you have to pay to visit the doctor?
- g) Do you have to pay for medicines?
- h) What problems does this create for you and your family?
- i) Did you go to the doctor when you were sick?
- j) Have you attended the hospital; if so why?; if so for what reason; what was the problem?

6 Awareness of health literacy

- a) Have you experience in administering medicine to yourself or others?
- b) Are you confident you can follow instructions on how much to take/give? If yes, how confident?
5 scale (1 not at all, 2 a little, 3 more than a little confident, 4 confident, 5 very confident)
- c) Do you think good health is connected with what you eat? If yes, how important?
5 scale (1 not at all, 2 a little, 3 more than a little, 4 important, 5 very important)
- d) Do you think good health is connected with what you drink? If yes, how important?
5 scale (1 not at all, 2 a little, 3 more than a little, 4 important, 5 very important)

7 Participant's measurement of confidence and self worth, etc.

- a) What would you like to do after the programme?

8 Participant's desire to break the cycle of disadvantage, improve their own circumstances and want better life outcomes

- a) What would you like to achieve for yourself and your family in the future?

9 Participant's measurement of knowledge of supports and service, etc.

- a) Can you list any supports and services available to you and your family in Waterford/Wexford?

Appendix 2 Atelier Roma Men's Programme evaluation meetings

U-Casadh project, SOLAS Building, Belmont Park, Ferrybank, Co Waterford

<i>1 April 2016</i>	<i>Who</i>
9.00 – 10.15	Jim Bruton, U-Casadh, Roma Men's Programme Coordinator Jim Dempsey, Woodwork/Woodcraft Tutor Stephen Plunkett, U-Casadh Manager
10.15 – 11.00	Suzanne Nolan, Regional Community Participation Officer, HSE Social Inclusion Community Healthcare Organisation (CHO) Area 5
11.00 – 13.00	Participants
13.00 – 13.30	Alex Petrovics, Wexford Roma Advocate
13.30 – 14.00	Anne Nolan, Integration and Support Unit Manager
14.00 – 14.30	John Williams and Brefini Dunphy, Health Literacy/Promotion Tutors
14.30 – 15.30	An Garda Síochána Chief Superintendent Pat Murphy
15.30 – 16.45	Wind-up with Suzanne Nolan and Alex Petrovics

