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“What’s your story?”
Exploring the acceptability
of a digital storytelling
intervention to promote
mental health and wellbeing
among Traveller men
affected by suicide

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Connecting for Life

PROJECT TITLE

“What’s your story?” Exploring the acceptability of a digital storytelling intervention to promote mental health and wellbeing among Traveller men affected by suicide

KEY MESSAGES

The intersection of structural inequalities, internalized racism, Traveller masculinities, and strong historical associations between stigma and mental health/suicide within the Traveller community, lies at the heart of the heavy burden of suicide carried by Traveller men and poses significant barriers to Traveller men accessing support during times of psychological distress. Building on the strong tradition of story-telling within the Traveller community, Digital Story Telling represents an acceptable intervention to promote positive mental health among Traveller men.

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CONTEXT AND BACKGROUND

Rates of suicide are seven times higher amongst Traveller men in Ireland compared to the general male population. Several factors are implicated including racism, social exclusion, discrimination, inadequate accommodation, unemployment, and lower educational attainment. Moreover, traditional masculine ideologies are particularly entrenched among the Traveller community which inhibit Traveller men from discussing mental health issues and/or seeking support. Adopting action-orientated, strengths-based and participant-led approaches in non-clinical environments have shown promise in reaching and engaging men who are reticent to participate in mental health interventions. Feedback from participants on previous mental health initiatives indicates that projects which are Traveller-led, culturally informed and delivered in a non-judgmental space have been found to have the strongest impact in terms of engagement, awareness, and realising the project objectives.

Digital story-telling (DST) is one such participant-led, action-orientated and community-based intervention that represents an engaging medium through which to challenge mental health stigma and discuss suicide among marginalised group. This project recognises and contextualises the strong oral tradition that is particular to Traveller culture and the significant role of storytelling, song, and recitation as expressive ways for remembering/celebrating/ grieving within the Travelling community. Despite DST aligning with the cultural tradition of storytelling in Traveller culture and it's potential to challenge stigma and support mental health, the impact and acceptability of such an intervention among Traveller men remains underexplored.

AIM/OBJECTIVE(S)

The aim of this study is to explore the acceptability of digital storytelling (DST) as a useful therapeutic intervention for Traveller men affected by suicide.

The objectives are;

- To explore the lived mental health experiences of Traveller men affected by suicide.
- To culturally adapt a six-week DST intervention and deliver to Traveller men affected by suicide
- To explore the acceptability of digital storytelling (DST) intervention that is culturally adapted and tailored to the lived mental health experiences of Traveller men affected by suicide.
- To explore any potential benefits of DST in promoting mental health and challenging stigma among Traveller men affected by suicide
- To develop a training resource that can be utilised as part of wider suicide prevention efforts within the Traveller community.

METHODOLOGY

Phase 1

Semi-structured interviews (n=13) were used to explore the **lived experiences** of Traveller men affected by suicide.

Criteria for inclusion in the project were (i) male members of the Traveller community, (ii) aged >18 years, (iii) who had in the past reported suicidal thoughts, attempted suicide or having been bereaved by suicide (excluding within the preceding three months). Participants were recruited using purposive and snowball sampling techniques. Before informed consent was obtained, they were informed about the scope of the study, the potential risks of participation, and their right to withdraw from the study at any time.

Data collection comprised face-to-face individual interviews with thirteen Traveller men. We aimed to recruit a diverse sample in terms of age, employment status, housing status, educational level, and marital status. A summary of the key demographics of the group is presented in **Table 1**.

Semi-structured interviews were conducted in June/July 2021 by members of the research team (KM & SOD) in community halls familiar to participants. These venues were selected by the Traveller Health Workers who were in an adjoining room to offer follow-up support and signposting to appropriate services should the interview trigger any potential distress for participants. Participants were also provided with contact details for support services and encouraged to access them if needed. The topic guide was developed based on the relevant literature and in consultation with Traveller health workers and the Advisory Group. Open-ended questions explored conceptualizations of mental health and wellbeing, sources of psychological distress, and support-seeking behaviors. In keeping with previous research by the lead author for this study (NR), the meaning of the

Table 1: Participant Demographics

Age	≤ 20	3
	21-30	4
	30-40	4
	> 40	2
Marital Status	Single	2
	Married / Living with Partner	9
	Separated / Divorced	1
	Widowed	1
Employment Status	Employed	4
	Unemployed	8
	Student	1
Educational Level	Primary	1
	Secondary	8
	Third Level	3
Housing Status	Private	1
	Halting Site	8
	Unknown	2
	Emergency Accommodation	2

term 'psychological distress' was grounded in participants' personal experiences and incorporated a broad range of distress, including the potential for discussions around past suicidal behaviour. Close attention was paid to how masculinity, age, and various other socio-demographic characteristics played a role in these mental health experiences. Data collection ceased once no new information was observed during data collection. Field notes and a reflective journal were used to record observations and to contextualize these verbal accounts during transcription and data analysis.

Phase 2

Cultural adaption of an existing 6-week DST therapeutic intervention manual aimed at men “at risk” of suicide.

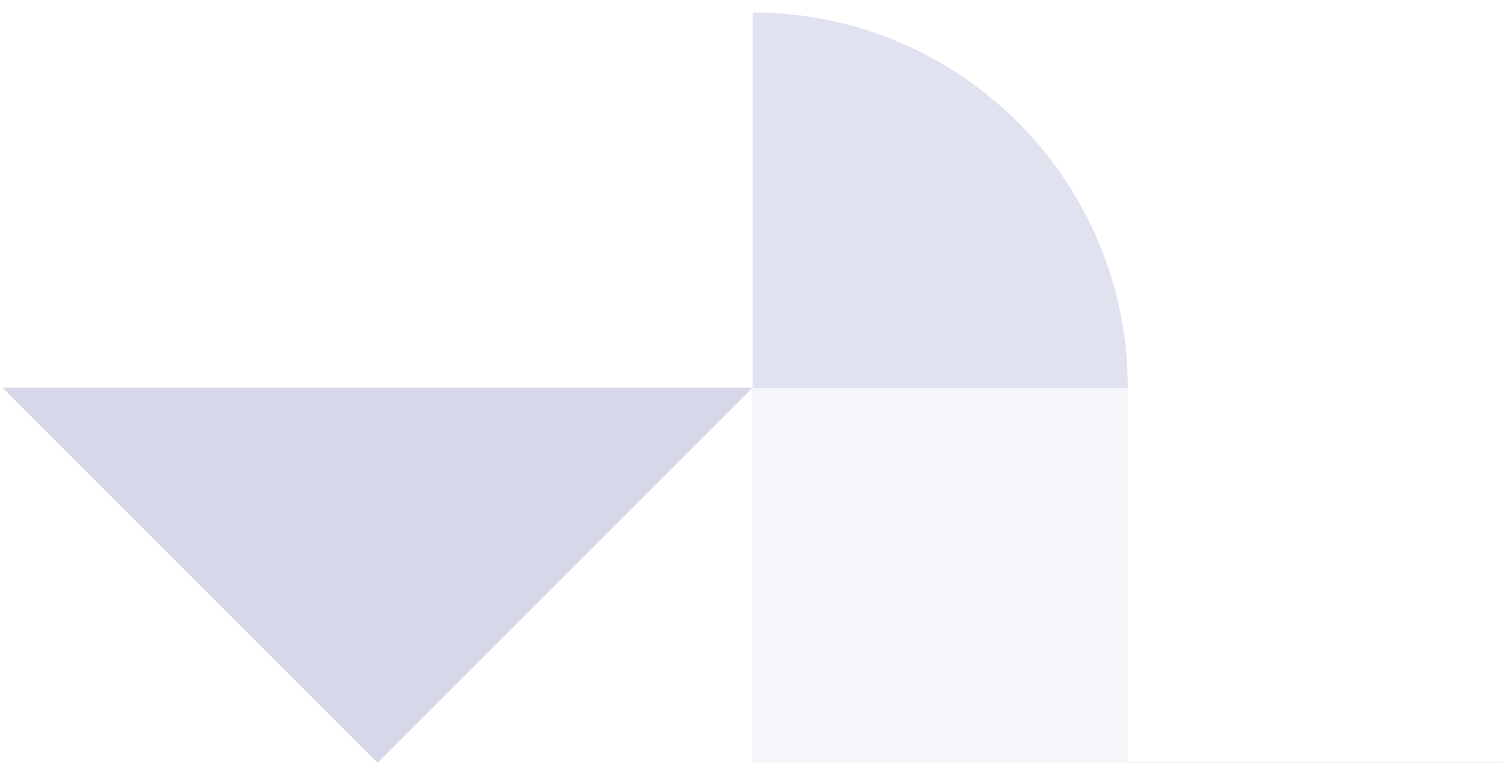
DST is a participant-led, action-orientated and community-based intervention that represents an engaging medium through which to challenge mental health stigma and discuss suicide among marginalised groups. It is an arts-based facilitated group process where participants create a short video about a personal story that conveys meaning and thought-provoking messages. DST can benefit mental health through improved social connectedness, social support, meaning-making, emotional acceptance, sense of achievement, hopefulness and self-efficacy. The 6-week programme progresses from idea generation and script development, to gathering images and storyboarding, to editing.

Phase 3

Delivery of 6-week digital storytelling intervention to a group of Traveller men affected by suicide followed by (i) a focus group with programme participants (Traveller men, n=8), (ii) short interviews with project partners (Traveller health workers, n=3) to explore the acceptability of the overall DST intervention.

The focus group explored (i) the **acceptability** of the overall DST intervention; and (ii) any **potential benefits** of DST in improving mental health and/or challenging mental health stigma.

The resulting training resource comprises a synthesis of overall study findings.



RESULTS / FINDINGS

Phase 1 - Lived experience

Thematic content analysis of the interview data, yielded three broad themes.

- Theme 1 '**Determinants of Traveller men's mental health**', which describes the impact on Traveller men of issues relating to housing/homelessness, education and unemployment, as well as frequent exposure to prejudice, discrimination and racism.
- Theme 2 '**Contemporary Traveller masculinities**' which considers how Traveller masculinities were shaped by a patrilineal tradition and by historical and ongoing tensions related to their ethnicity.
- Theme 3 '**Navigating support seeking and coping with distress**' which encapsulates both resistant and proactive approaches to seeking support during times of psychological distress and the coping strategies used to manage their mental health.

Phase 2 - Cultural adaption

Phase 2 comprised a consultation process with partners to review the DST workshop framework and make initial changes to the workshop protocol. Each session was rewritten, taking into account the demographic, as well as incorporating ice-breakers and activities deemed more suitable for Traveller men. This prompted the inclusion of FotaChat, the use of objects to encourage stories and conversation, a longer lead-in period to introducing technology and more focus and attention paid to bonding the group and establishing trust. During the workshops, particular attention was paid to group dynamics and the success of activities in stimulating storytelling. The participants were encouraged to provide feedback at the end of each session with recommendations for inclusions, improvements or adaptations. Each workshop was then rewritten including participant recommendations.

In addition, facilitators kept a series of reflections on the process of working in partnership and delivering the Digital Storytelling programme. This phase recognized the formation of a new interdisciplinary working partnership in this project and sought to learn from the process to strengthen the relationship and inform further partnerships.

Phase 3

Phase 3 (ongoing) involves the collation of reflections on the workshop delivery process and the rewritten Digital Storytelling workshop sessions. These will be synthesised to produce a training manual for further delivery of Digital Storytelling workshops as a therapeutic intervention for this demographic. This resource is expected to be available in the near future.

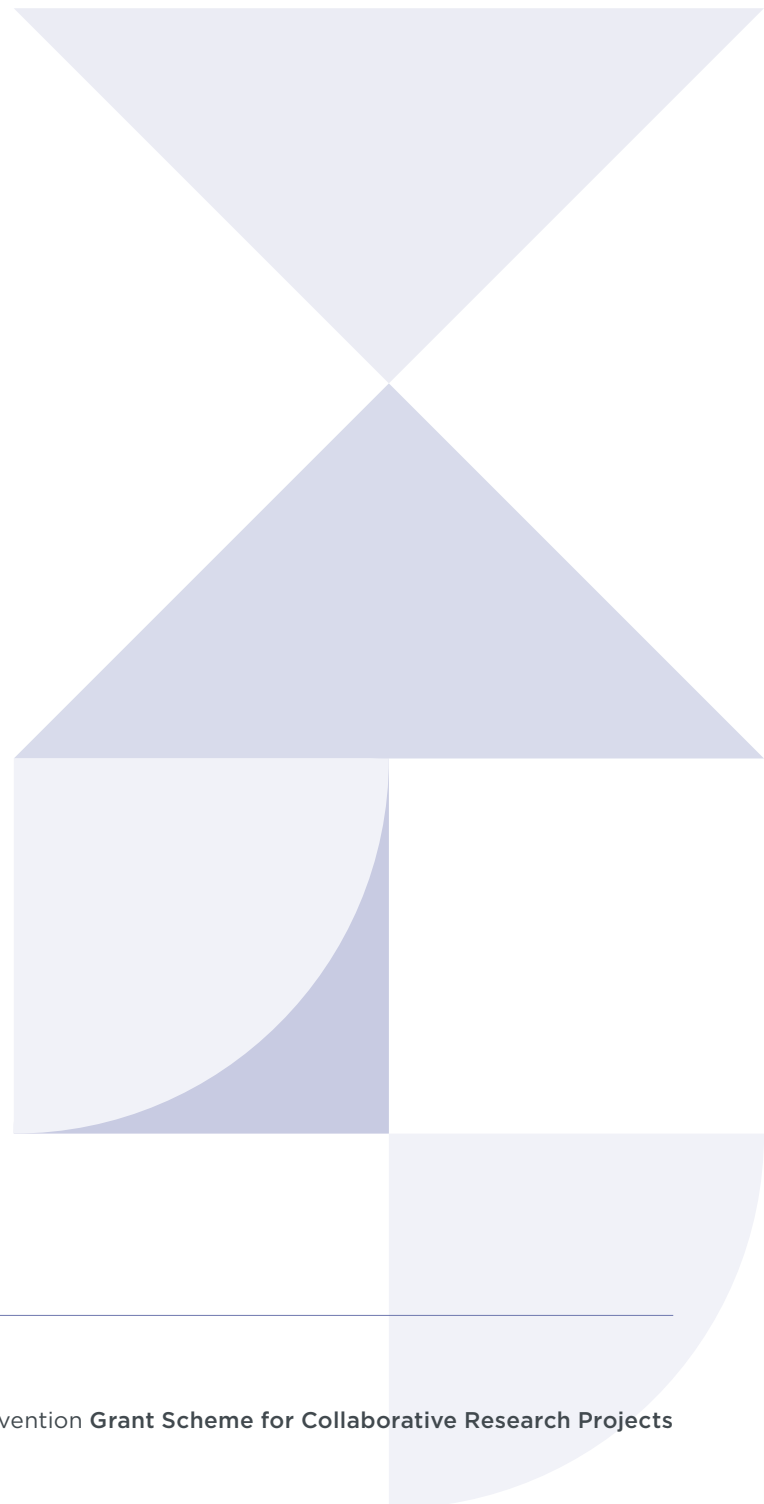
RECOMMENDATIONS

Overall Recommendations

- Suicide prevention strategies aimed at Traveller men need to be framed within the wider context of how suicide risk within the Traveller community is shaped by intersecting structural factors and social identities, that result in Traveller men being exposed to multiple and intersecting layers of disadvantage, marginalisation and discrimination.
- There is a need for more gender- and culturally-appropriate suicide prevention interventions aimed at Traveller men. Strategies to engage Traveller men in their mental health should include the prioritisation of more informal supports and settings over professional services, using action-orientated activities (e.g. football or boxing) to initiate and strengthen conversations around mental health, as well as adopting a flexible approach with a focus on peer support.
- There is a need to mainstream cultural sensitivity training across services and programmes, for more Traveller-led and Traveller-specific programmes, and for bridging statutory services through Traveller specific organisations.
- There is a need for more Traveller-specific counselling services.
- Building on the strong tradition of story-telling within the Traveller community, Digital Story Telling represents an acceptable intervention to promote positive mental health among Traveller men.

Recommendations for policy makers

- Study participants articulated their interest in programmes of education that are trade-based, suggesting that, in addition to apprenticeship training options, the design of more gender- and culturally-appropriate higher level training programmes ought to be considered to encourage more Traveller men to engage in upskilling, thereby improving their employability.



Recommendations for services

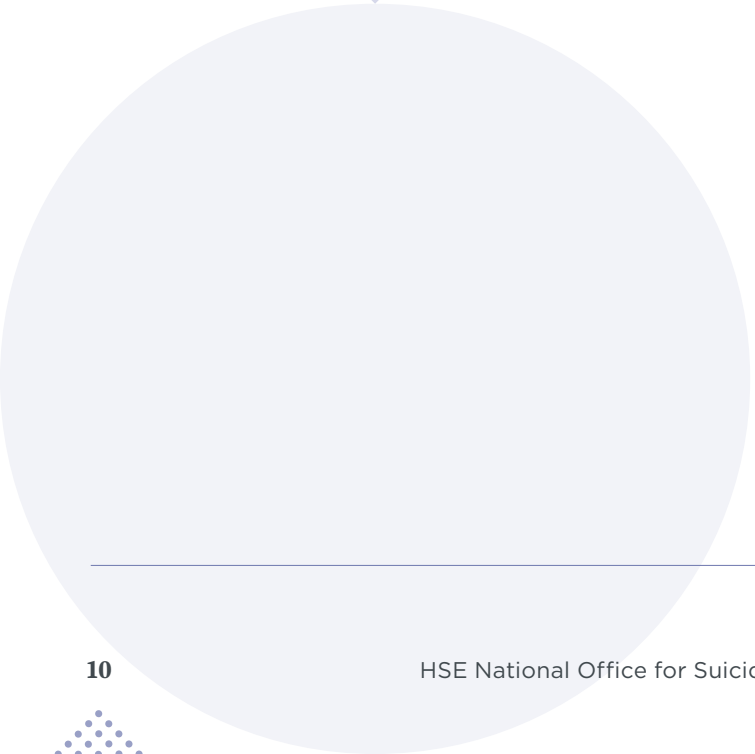
- The key characteristics of a gender- and culturally- appropriate adapted digital story telling programme, designed to engage Traveller men around their mental health, include the following:
 - (i) accommodating the learning preferences of Traveller men (in person rather than online, flexible rather than rigid scheduling);
 - (ii) allowing for an extended period at programme outset to create safety and trust within the group and to enable voluntary and sustained engagement;
 - (iii) fostering peer support that encourages Traveller men to feel comfortable and confident about sharing personal experiences in a safe and supportive environment;
 - (iv) practicing active listening skills;
 - (v) maintaining a focus on Traveller men's lives, thereby acting as a catalyst for initiating and normalizing conversations about mental health;
 - (vi) acting as an informal therapeutic intervention and relationship strengthening intervention;
 - (vii) being a conduit for referral or signposting to other programmes, services or supports;
 - (viii) acting as a springboard for more sustained and long-term engagement with Traveller men.

Recommendations for Frontline Practitioners

- Invest sufficient time in the preparatory process by developing a robust partnership with Traveller organisations that sets out clear roles and responsibilities for the respective partners, and a clear timeframe for programme implementation. Relationship building and leveraging the strengths of individuals within the partnership helps the partnership to flourish.
- Plan small and realistically. Ensure that the planning process accounts for the many barriers that can prevent Traveller men from engaging in services and programmes and for the real-life events that can interrupt programme participation. Allow sufficient time for culturally adapting resource materials and for training/upskilling of facilitators. Allow for sufficient time to enable Traveller men to work at their own pace and to build confidence incrementally.
- Building on the strong tradition of story-telling within the Traveller community, Digital Story Telling represents an acceptable intervention to promote positive mental health among Traveller men. It offers a medium for Traveller men to find their voice, feel heard and be listened to. It facilitates opportunities for active listening, reflection and ongoing relationship building over a 6-8 week period. It allows opportunities for Traveller men to flag any areas of concern, and for facilitators to signpost other ancillary supports (training, education, counselling, employment supports).
- Based on this pilot programme, there are justifiable grounds to proceed to Stage 2 by testing the efficacy of the programme among a larger cohort.

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