



## IRISH TRAVELLER COMMUNITY

The **wagon** was the traditional home of nomadic Irish Traveller families. Traditionally Travellers burned the wagon that the person died in. In modern times many may not wish to continue to live in the trailer, the home that some nomadic families now live in, if a person dies there.

# Summary of Essential Practice Points:

Please refer to the full text of the highlighted points related to the following summary points.

## **1** *General cultural features and social experience:*

Travellers tend to experience discrimination and racism in service provision. Members need to be treated with dignity, respect and non-discrimination in healthcare settings in line with current equality legislation.

## **2** *Beliefs about the treatment of illness and Traditional Medicine:*

Many Travellers have strong beliefs in the power of prayer, religious icons and holy water. In addition to their respect for Western medicine many tend to use traditional folk healing practices including oils, ointments and cures. These beliefs, including any folk healing remedies that the person carries and religious symbols, need to be treated with respect. It is advised to check if the person is using any traditional remedies in addition to medical prescriptions.

## **3** *Religious practices:*

Roman Catholic ceremonies, religious practices and rituals will usually apply for illness and death. The Roman Catholic chaplain can be called on to provide or source religious support as needed.

## **4** *Treatment needs:*

Many Travellers, particularly older community members, experience difficulties in relation to literacy. Any written treatment requirements, including prescriptions for medication, should also be explained verbally.

## **6** *Family and community visits:*

An ill or dying Traveller is likely to have a high volume of visitors. Ascertain who will represent the family and mediate in interactions with hospital staff.

## **7** *Death-related religious rituals:*

The Roman Catholic chaplain or, if preferred, the person's own priest should be called to administer religious services.

## **8** *Initiation ritual/infant baptism:*

Travellers are likely to want to have their child baptised if there is a threat to life. See *Roman Catholic* section for details of this practice.

## Profile of the Irish Traveller Community

---

Travellers are an indigenous minority who have been documented as being part of Irish society for centuries. The group has a long shared history, identity, language and value system, which makes them a distinct group.

While Irish Travellers are native to Ireland, they have much in common with European Travellers and Gypsies. Officially, the Irish Government recognise Travellers as a *cultural minority*, while the group continues to campaign for *ethnic minority* status in line with the Roma and other similar groups across Europe.

Traveller representative organisations indicate that there are approximately 30,000 Travellers living in the Irish Republic. It is estimated that there are 1,500 Irish Travellers living in Northern Ireland and 15,000 in England, Scotland and Wales.

## General Cultural Features and Social Experience

---

The Travellers are distinguished by a rich storytelling and musical heritage. Many Irish musicians, for example Christy Moore, openly acknowledge their debt to Traveller musicians who retained the musical heritage of the land.

The Travellers' experience is one of exclusion from rights and privileges enjoyed by their settled counterparts. For example, Travellers have a higher stillbirth rate, a higher infant mortality rate and a lower life expectancy than the settled population.

### Essential Practice Point

1

Travellers also experience discrimination and racism in service provision, largely as a result of inbuilt prejudices and stereotyping. Discriminatory and racist treatment of Travellers in healthcare provision is unlawful under the provisions of the Equal Status Act 2000 to 2004. Such experiences also have implications for how many Travellers will present themselves and interact with health services. For these reasons, dignity, respect and non-discrimination need to be part of the approach to Travellers in healthcare settings.

Some features of Traveller culture and social experience are given here for guidance. These need to be applied recognising that there is wide diversity and that each person is unique.

- *Religious devotion and cures:* The vast majority of Travellers are Roman Catholic and they tend to be devout in religious observance. The community retain beliefs about cures to be found in various natural phenomena, discussed below.
- *Extended family:* Extended family is of particular importance, with a strong sense of family loyalty and duty. This point is important for family visits in hospital.
- *Language and literacy:* While the group has a traditional distinct language, called Cant, Travellers use English as a main language in everyday life. However, many Travellers, particularly older group members, may have literacy difficulties. For example Travellers may not be able to read the letter-based reading tests due to literacy and not eyesight issues.
- *Nomadism:* Moving from one place to another is part of the lifestyle of many, though not all, Travellers. At times of the year the population

of Travellers increases overall as relatives return from England and the populations of particular towns increase as Travellers migrate.

- *Marriage age, birth rate and social position of women:* Travellers now marry older and have smaller families than was the traditional custom. Unmarried births among Travellers are unusual while there is now a small incidence of this pattern. Traveller women participate in social affairs on an equal footing with men and many have taken on leadership roles in the community.
- *Dress/jewellery:* Traveller dress sense is similar to that of the rest of Irish society. Family will wish to retain any jewellery on the body of a deceased relative.

## Care of the ill

---

### ***Beliefs about the treatment of illness and Traditional Medicine***

#### Essential Practice Point

2

- Many Travellers have strong beliefs about the power of prayer and many wear icons of religious figures and *relics* of various saints (See *Personal items* for more information).
- There is a rich heritage of traditional or folk healing practices among Travellers, some of which are similar to practices indicated in the section on *Traditional and Ancient Religions*. Travellers also hold strong beliefs in the healing power of water taken from holy wells as well as oils/ointments infused with particular herbal remedies prepared by traditional healers.

- Some community members have knowledge of *cures* for particular conditions, such as thrush, warts, etc. This is given by the healer as a service to others, usually without payment. The healers may be visited by community members who have these ailments. Community members in hospital may have 'cures' sourced from healers for a particular condition.
- Travellers tend to respect medical opinion in addition to retaining their belief in the power of traditional cures and religious practices (detailed below), prayer and relics. It is advised to check if the person is using any traditional remedies in addition to medical prescriptions.

- Situations may arise where traditional healers wish to use hands-on healing and this may conflict with medical requirements that necessitate that a wounded area is not touched. Should this arise, discussion will be needed so that a mutual solution can be found that satisfies a family.

### ***Religious practices***

#### Essential Practice Point 3

3

Travellers are likely to welcome the support of the Roman Catholic Chaplain who will also administer all necessary religious ceremonies, practices and rituals related to illness and death. Others may also wish to see a priest that they have developed a relationship with over the years.

## **Treatment needs**

### Essential Practice Point

4

Due to the literacy issues highlighted above, plain English is necessary in any communication about healthcare issues. Written instructions such as prescriptions need to be explained verbally.

## **Blood Transfusion and Organ Transplantation**

- There are unlikely to be objections to these procedures.
- Consideration needs to be given to literacy issues if documentation is to be signed or consent sought for any of these procedures.

## **Care of the Dying**

---

### **Family and community visits**

### Essential Practice Point

5

- A critically ill or dying Traveller is likely to have a number of visitors. Traveller representatives have indicated that it is important to ascertain who will represent the family in interactions with hospital staff. This will help in mediating between the needs of the healthcare setting and family visitation needs.
- Some families may wish to bring the deceased home for a traditional wake (ritual surrounding the community viewing of the body in the home).

## **Death-related religious rituals**

### Essential Practice Point

6

The Catholic chaplain or, if preferred, the person's own priest should be called to administer the customary rituals preceding death.

### **Cleaning and touching the body**

The body may be washed by mortuary staff and dressed in clothes provided by the family.

### **Postmortem requirements**

There are unlikely to be culturally specific objections to a postmortem.

### **Interment ritual**

Travellers usually bury their loved ones and many prefer to be buried in the areas that families lived in and have an affinity with.

## **Religious Icons and Symbols**

---

### **Personal and religious items**

- Many Travellers are likely to have a number of religious and personal items with them. These may include images of Mary the Mother of Jesus Christ, images of saints, medals, holy water, oils and ointments. Due to the rich religious and folk healing heritage in the community these items need to be treated with respect, as do the beliefs surrounding these items. It is best to check with family before removing any item from a body.
- Any personal jewellery should be given to family following a death.

## ***Use of religious symbols***

As most Travellers are Roman Catholic, icons such as the crucifix, cross, images of saints and candles are appropriate in the mortuary area.

## **Additional Notes on Maternity and Paediatric Care**

---

### ***Birth rituals***

Traditionally, pregnant Traveller women had no contact with dead bodies and this may still be the case among many.

### ***Initiation ritual/infant baptism***

#### **Essential Practice Point**

**7**

Travellers are likely to want to have their child baptised if there is a threat to life. See *Roman Catholic* section for details of this practice.

### ***Foetal, infant and child death***

- Miscarried fetuses and stillbirths are treated according to Roman Catholic teaching. Children usually receive a full funeral.
- Parents may need time and space to mourn with the child and this needs to be accommodated.
- Due to the literacy levels among some Travellers, issues of organ retention need to be carefully explained so there is proper consent.

## **Developing a Local Contact for the Traveller Community**

---

The HSE in partnership with Traveller representative organisations has established a number of projects that work specifically on Traveller Health issues, part of which involve Primary Health Care Projects for Travellers. The key contacts for each are given below.

### **HSE Traveller Health Project Staff (for Traveller Health and Culture):**

**Counties:** Carlow, Kilkenny, South Tipperary, Waterford and Wexford

**Contact:** Liam Keane

**Tel:** 056 7703401

**Email:** liam.keane@hse.ie

**Counties:** Cavan and Monaghan

**Contact:** Enda Galligan (for name of local Traveller Health staff)

**Tel:** 047 30400

**Email:** enda.galligan@hse.ie

**Counties:** Clare, Limerick and North Tipperary

**Contact:** Mary Kennedy

**Tel:** 061 493916

**Email:** maryg.kennedy@hse.ie

**Counties:** Cork and Kerry

**Contact:** Deirdre O' Reilly

**Tel:** 022 31809

**Email:** deirdremary.oreilly@hse.ie

**Counties:** Donegal

**Contact:** Maire O' Leary

**Tel:** 074 9123757, 087 2229510

**Email:** maireb.oleary@pavee.iol.ie

**Counties:** Dublin, Kildare and Wicklow

**Contact:** Ronnie Fay, Pavee Point

**Tel:** 01 8780255

**Email:** ronnie@pavee.iol.ie

**Counties:** Galway, Mayo and Roscommon

**Contact:** Mary Syron

**Tel:** 094 9044234

**Email:** mary.syron@hse.ie

**County:** Laois, Longford, Offaly and Westmeath

**Contact:** Fergal Fox

**Tel:** 057 9357035

**Email:** fergal.fox@hse.ie

**County:** Louth

**Contact:** Denis Cahalane (for name of local Traveller Health staff)

**Tel:** 0429394001

**Email:** denis.cahalane@hse.ie

**County:** Meath

**Contact:** Eileen Gilsenan

**Tel:** 046 9071679

**Email:** eileen.gilsenan@hse.ie

**Counties:** Sligo and Leitrim

**Contact:** Cara O'Neill, A/General Manager  
(for name of local Traveller Health staff)

**Tel:** 071 9155175

**Email:** cara.oneill@hse.ie

## Contributors

---

Ms Maria Daly, Joint Coordinator of Primary Health Care for Travellers Programme, Pavee Point Travellers Centre, facilitated us to conduct a consultation with a Traveller Women's Group based at Pavee Point. Some of these women are Primary Care Workers and/or leaders in their local communities. Ms Daly and her colleague Ms Fran Keyes reviewed and approved the finalised material.