

# An Evaluation of the Traveller Key Worker Programme

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Prepared by  
National Traveller MABS

## Acknowledgements

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- Fingal Traveller Organisation – Suzie McCarthy, Winnie Lawrence, Winnie Mc Donagh, Lena Lawrence, Kathleen Mongan, Mary Mc Donnell and John Mc Donnell;
- Wicklow Primary Health Care – Liz O’Brien, Margaret Mary Moorehouse, Bridget A O’Brien, Anne Doonan, Gilly Moorehouse, Sally Connors, Nan O’Brien, Bridget O’Connor, Mary O’Brien, Christine Moorehouse and Bridget Connors;
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- Longford Primary Health Care – Frances Swaray, Bridget Power, Caroline Stokes, Winnie Stokes, Mary Stokes, Mary Nevin, Teresa McDonnell, Anne Marie Nevin;
- Westmeath Primary Health Care – Colette Tuohy, Mary Nevin, Teresa Nevin, Mary Myres, Christine Joyce and Marie Myers;
- Sligo Primary Health Care – Bernadette Maughan, Kathleen Stokes, Cliona Ward, Lisa McGinley, Dana Stokes.

Without the ongoing participation of the above, the Key Worker programme could not exist. Thanks also to the local Money Advice and Budgeting Services (MABS) and Citizens Information Services (CIS) that provide initial training and ongoing support to many of the Primary Health Care for Traveller Projects.

The importance of building local relationships is a key element of the Key Worker Programme. The Key Workers, MABS and CIS services locally are to be commended for developing such networks. The positive outcomes of such connections cannot be over-emphasised. This is evident from the following thoughts that were shared with us by some contributors to the Key Worker Programme:

*“ I think it (the project) helps a lot of the young people because... They don’t know how to pay bills or budget... young people get into debt”.*

(Kathleen Mongan- Traveller Community Health Care Worker/ Key Worker, Fingal Primary Health Care for Traveller Project).

*“ As a MABS Money Advisor, my experience is that I and Traveller Community Health Care Workers learned a lot from each other, which we can each pass on to colleagues and other Travellers for their benefit. A lot is built on mutual respect, understanding and sharing of knowledge and experience.”*

(Hugh Barriscale, Money Advisor, Cork MABS).

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**Over the past 10 years, National Traveller MABS has consistently shown a commitment to the Traveller Community by seeking to end financial exclusion through various projects and programmes, including working with the Traveller Community to promote money management.**

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# Foreword

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National Traveller MABS is a leading advocate for the financial inclusion of Travellers in Ireland. Over the past 10 years, National Traveller MABS has consistently shown a commitment to the Traveller Community by seeking to end financial exclusion through various projects and programmes, including working with the Traveller Community to promote money management and increase financial capability.

We pride ourselves on the positive working relationships that we have developed with other Traveller organisations both locally and nationally. Many of our projects are operated jointly with various Traveller groups and/or other related bodies.

The Key Worker Programme which operates in a number of areas nationally is one such example.

The National Traveller MABS led Key Worker Programme operates in 6 locations in Ireland<sup>1</sup>. It is comprised of a number of local Key Worker Projects. Each local Key Worker project is managed and run voluntarily by the local Primary Health Care for Traveller Project.

Traveller Community Health Care Workers, who are employed by the Primary Health Care for Traveller projects, have taken on the voluntary role of Key Workers and added this to their already heavy workloads. As Key Workers they provide information on services that can support Travellers in relation to rights and entitlements, finance and money management.

Key Workers in effect break down barriers that can exist for Travellers in accessing services such as MABS, the CIS, Credit unions and banks.

As each local Key Worker project is managed and run voluntarily by the local Primary Health Care for Traveller Project, they have each developed their own system of operation based on local needs and available resources and supports.

In the past year there have been requests from other Primary Health Care for Traveller Projects to establish similar Key Worker Projects in their localities. While we are aware of the many positives of the current programme, it is timely that before we expand further, we evaluate its strengths and weaknesses to ensure that future Key Worker Projects better serve the Community.

It is with this in mind that National Traveller MABS carried out this evaluation of the programme in 2015.

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1. Balbriggan, Sligo, Wicklow, Cork, Westmeath and Longford.



# Executive Summary

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A core aim of National Traveller MABS is to end the financial exclusion of Travellers in Ireland by effecting change in policy and practice which excludes Travellers and other marginalised groups from accessing financial services.

In pursuing this aim, National Traveller MABS has worked in partnership with a number of Primary Health Care for Traveller Projects to establish Key Worker Projects in different parts of the country.

This report details the work undertaken over the past four years in establishing and operating the Key Worker Programme. It examines the role of the Key Worker and how this can vary locally. It considers the impact of such local projects and reflects on the overall strengths and weaknesses of the Programme. From this evaluation, a number of recommendations have been formed which we hope will help shape the future development of the Programme.

The report evaluates the Key Worker Programme in 2 phases. Phase 1 sought feedback from Key Workers using a questionnaire. This was circulated to all 36 Key Workers. The response rate (83%) was high with 30 Traveller Community Health Care Workers/ Key Workers completing the questionnaire.

The majority of respondents felt that the Key Worker Programme was achieving its aim, that is, to increase knowledge and use by the Traveller Community of MABS, other support services such as the CIS, and appropriate financial services such as the Credit Union.

Additionally, the results show that the Key Workers are providing Travellers in their local area with support on a range of financial matters, especially in terms of accessing social welfare supports and entitlements.

The findings of this evaluation will enable National Traveller MABS to make changes where necessary to ensure the further development of the Key Worker Programme. We hope that such developments, and in particular the provision of guidance on a best practice operating structure together with appropriate training, supports and resources, will ensure that the Programme is operated to a consistently high standard.





# Recommendations

**Three key recommendations emerged from the findings in Phases 1 and 2, namely:**

## Recommendation 1

### **Explore the viability of placing the Key Worker Programme on a national footing**

That National Traveller MABS share the findings of this report with the Health Service Executive (HSE) and Citizens Information Board (CIB) and request their co-operation on a joint initiative to roll-out the Key Worker Programme on a national basis.

## Recommendation 2

### **Develop a comprehensive operating structure for the Key Worker Programme.**

That such a structure should comprise:

- A clear pathway to establishing and operating a Key Worker Project locally.
    - This should include a commitment by National Traveller MABS and local service providers, such as MABS and the CIS, to supporting the local project. For example National Traveller MABS should commit to visiting projects regularly and provide biannual refresher courses.
    - The pathway should include a commitment by the local Primary Health Care for Traveller Project to working with National Traveller MABS to support Key Workers and build strong links with local service providers.
    - The pathway should also detail commitments in relation to training and data gathering.
  - The development of a comprehensive training programme.
    - Training should consist of initial and ongoing training, with National Traveller MABS overseeing biannual updates and annual refresher course for all participating Traveller Community Health Care Workers.
  - A standard template for collecting statistical data.
    - This template should encompass the suggestions by Key Workers on additional information that should be gathered.
    - Consideration should also be given to simplifying the format for data collection by linking into existing HSE data management systems used by Key Workers in their role as Traveller Community Health Care Workers.
  - A definition of the roles and responsibilities of the Key Worker.

The specific roles and responsibilities of the Key Worker should be clearly detailed.

To ensure clarity both in terms of roles and responsibilities, the following should be developed:

    - A clear description of the Key Worker role;
    - Guidelines around client confidentiality;
    - Details of the supports available to Key Workers in undertaking their roles and responsibilities;
    - Guidelines on boundaries to include both the remit of and contact details for local service providers.
- National Traveller MABS should endeavour to provide participating Primary Health Care for Traveller Projects with training and support from local service providers as far as possible.
  - Taken together, initial, ongoing and localised training will provide the Traveller Community Health Care Workers/ Key Workers with up to date information on social welfare entitlements, financial products and information on supporting families in financial difficulties in their area.
  - Consideration should also be given to having such training accredited.
  - Guidance should be given on how to make a client feel at ease when discussing matters of personal finance

- A Key Worker Charter for the Key Worker Programme.
  - A charter such as Volunteer Ireland’s ‘Charter for Effective Volunteering’ – (appendix i) should be developed.
  - The Charter should be signed by all Key Workers, National Traveller MABS and Primary Health Care for Traveller Project Coordinators.
  - The Charter should clearly identify the commitment that National Traveller MABS and related bodies will give to the Project.
  - Commitments by National Traveller MABS should include supporting the Key Worker, for example, by providing structured training and resources.
  - The Charter should also include a commitment to gather data to inform social policy work. Towards this end, the commitments from the Primary Health Care for Traveller Project Coordinator and the Traveller Community Health Care Worker should include both a commitment to build links with local service providers, and a commitment to collate data on work undertaken on a regular basis.

### Recommendation 3

**Additional Primary Health Care for Traveller Projects should be invited to participate in the Programme only once Recommendations 1 and 2 have been implemented.**

That a sub-committee with representation from stakeholders such as Primary Health Care for Traveller Projects, National Traveller MABS, local service providers, the HSE and the CIB be established in order to oversee the implementation of such recommendations.

**‘On a daily basis,  
there are people coming  
here in difficulty’**

*Quote from a Key Worker.*



# Background

## Travellers in Ireland today

Travellers in Ireland represent just over half of one percent of the total population according to the Central Statistics Office, with the 2011 Census citing an Irish Traveller population of approximately 30,000<sup>2</sup>. Although relatively small in comparison to the general population as a whole, the Census reveals the Traveller population to have a number of distinctive features relative to it. Taken together, these characteristics are indicative of a community experiencing considerable societal disadvantage and marginalisation. For example, as of 2011:

- Unemployment in the Irish Traveller Community was just over 84 per cent, more than four times that of the general population (19 per cent).
- Over half of Travellers who had completed their full time education did so before the age of 15 (55 per cent); this compares with a figure of only 11 per cent for the general population.
- Only 3.1 per cent of Travellers continued their education past the age of 18, compared with a figure of 41.2 per cent for the general population as a whole.
- The self-assessed health of Travellers was considerably lower than that of the general population and deteriorated more quickly with age. For example, for those aged between 30 and 49 years, around 24 per cent of Irish Travellers indicated fair, bad or very bad health compared with only 7.0 per cent of the general population.
- Around 1 in 10 Travellers aged 15 and over (9.5 per cent) were unable to work due to permanent sickness or disability, a rate more than double that of the general population (4.4 per cent).<sup>3</sup>

Data from the All-Ireland Traveller Health Study (AITHS)<sup>4</sup> conducted in 2008, provides further depth in relation to the comparative characteristics of Traveller health as compared to the population at large. Again, the picture that emerges is a disturbing one; for example according to the AITHS:

- Traveller mortality rates are far greater (3.5 times) than those of the majority settled population. The mortality rate is four times that of the general population for Traveller men and three times that of the general population for Traveller women.
- The life expectancy of Travellers is significantly lower than that of the general population, with average life expectancy at birth being 61.7 years for Traveller males, compared to 76.8 years for males in the population as a whole.
- The average life expectancy for Traveller females is 70.1 years, compared to 81.6 years for females in the population at large.
- As regards infant mortality, widely considered to be a good indicator of a population's level of health and development, Traveller infants are 3.6 times more likely to die than infants in the general population.
- Furthermore, Travellers have a greater burden of chronic disease than the general population.

Taken together, these findings suggest widespread poor health, low income and associated poverty within the Traveller community as a whole, with the latter cited in the All-Ireland Traveller Health Study as a key determinant in (and barrier to) Travellers accessing health supports.

2. Central Statistics Office (2012). See: <http://www.cso.ie/en/media/csoie/census/documents/census2011profile7/Profile7EducationEthnicityandIrishTravellerEntiredoc.pdf> (p27).  
3. Ibid, p27-35.

4. See: [https://www.ucd.ie/t4cms/AITHS\\_SUMMARY.pdf](https://www.ucd.ie/t4cms/AITHS_SUMMARY.pdf).

## Background to Primary Health Care Projects

The establishment by Pavee Point of a pilot Primary Health Care for Traveller Project in 1994<sup>5</sup>, was the first step in what is now one of the most successful Traveller-led projects nationally. Primary Health Care is defined by the World Health Association as follows:<sup>6</sup>

Essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community, through their full participation and at a cost that the community and the country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination.

Today there are over 40 Primary Health Care for Traveller Projects nationally. In 2008<sup>7</sup>, such projects employed approximately 400 Traveller Community Health Care Workers<sup>8</sup>. This figure may be slightly lower today due to funding cuts over the past number of years. It is through these Projects that National Traveller MABS has been able to identify Travellers in need of financial support. The Traveller Community Health Care Workers are essential in the operation of the Key Worker Project.

## Background to the Traveller Key Worker Project

In 2011, National Traveller MABS published the report *Issues of Personal Finance within the Traveller Community*<sup>9</sup>. The report was a result of the Local Area Development work undertaken by National Traveller MABS during the years 2007 - 2011. Local Area Development aimed to promote the development of a collaborative working relationship between local MABS, Travellers and other relevant local organisations.

5. Pavee Point was home to the first Primary Health Care Project in 1994. The Project aimed to identify health needs of Travellers in the locality.

6. See: [http://www.who.int/social\\_determinants/tools/multimedia/alma\\_ata/en/](http://www.who.int/social_determinants/tools/multimedia/alma_ata/en/).

7. See: All-Ireland Traveller Health Study, 2008. [https://www.ucd.ie/t4cms/AITHS\\_SUMMARY.pdf](https://www.ucd.ie/t4cms/AITHS_SUMMARY.pdf).

8. Traveller Community Health Care Workers are also referred to as Primary Health Care Workers or Community Health Care Workers

9. See <http://www.ntmabs.org/publications/development/2012/travellers-and-personal-finance.pdf>

*Issues of Personal Finance within the Traveller Community* contains feedback from 37 Local Area Development meetings and four Traveller-specific focus groups held in different parts of Ireland. The majority of the participants at meetings were Travellers and Traveller community workers, MABS staff and other local service providers. At each meeting, participants discussed the financial and social issues Travellers face, and made suggestions as to how, at a local level, Travellers, MABS and other support services<sup>10</sup> could work better together.

The report confirmed the experience of National Traveller MABS, namely that lack of trust and sometimes fear of unfamiliar (mainstream) institutions and organisations, exists within the Traveller Community. The importance of word of mouth was frequently cited as a powerful means of communication among Travellers, and was thereby identified as a vital means for any organisation in gaining the trust of the Community. In the focus groups, the importance of 'hearing about' something from another member of the Community came up repeatedly.

In addressing this issue, the report made a number of recommendations. One such recommendation was that National Traveller MABS explore **the viability of a Traveller Key Worker Programme to support both the local MABS and the Traveller Community in addressing issues of financial exclusion**, defined by the European Commission as an inability to access or use mainstream financial services.<sup>11</sup>

Further, in 2012, National Traveller MABS published the report- *Debt and Dying- Understanding and Addressing the Impact of Funeral Costs for Travellers in Ireland*<sup>12</sup>. One recommendation contained within this report proposed developing **the information and advocacy skills of those working with members of the Traveller Community**. The importance of Travellers disseminating information locally was recognised as having the potential to ensure the appropriate provision of information in relation to this issue.

10. Such as Citizens Information Services and Credit Unions.

11. European Commission, 2008. See: <http://www.bristol.ac.uk/media-library/sites/geography/migrated/documents/pfrc0807.pdf>.

12. See: <http://www.ntmabs.org/publications/policy/2013/debt-and-dying-report.pdf>.



Drawing on the findings of both reports, National Traveller MABS began working with a number of Primary Health Care for Traveller Projects with a view to developing the role of a local Key Worker. Key Workers it was suggested would be members of the Traveller Community. Their remit would be to raise awareness of MABS and other support services such as the CIS, and encourage Travellers to avail of such services if needed. Additionally, Key Workers would provide information on how to access financial services such as banks and credit unions.

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# Development and Operation of the Key Worker Programme

## Aim of the Key Worker Programme

The Key Worker Programme aims to increase Traveller knowledge and use of MABS, other advice services such as the CIS, and financial services such as credit unions.

## Objectives of the Key Worker Programme

These are as follows:

1. To develop knowledge and skills within the Community (through the Traveller Key Worker) in order to promote access to and use of MABS, CIS and financial services by the Traveller Community.
2. To provide relevant information in order to support the Traveller Community in accessing local services.
3. To develop a good local relationship between Travellers, MABS, CIS, and local financial service providers.
4. To record data on issues arising within the Community, details of the advice and information provided, and referrals made to services providers such as MABS and the CIS.

## Establishment of the Key Worker Programme

Due to the absence of funding, it was acknowledged that the Key Worker role would need to be undertaken on a voluntary basis. All training and support for the Key Worker would be managed by National Traveller MABS from existing budgets.

With such constraints in mind, and following consultation with the National Traveller MABS Consultative Forum<sup>13</sup> and a number of Primary Health Care for Traveller Projects, it was agreed that Traveller Community Health Care Workers<sup>14</sup> would be the most appropriate people to undertake the role of Key Worker.

Traveller Community Health Care Workers are members of the Traveller Community and work within the Community providing health advice and information. They are respected and trusted within the Community, are highly trained, and deliver a valued service in the provision of health-related information to the Traveller Community. It was suggested that in addition to the information they already provide to the Community, the Traveller Community Health Care Workers could add information on financial services and supports such as MABS, the CIS and the credit union. In doing so, they would effectively take on an additional role as Key Workers.

## Location

National Traveller MABS were aware of the commitment that Traveller Community Health Care Workers were making in adding the role of Key Worker to their already heavy workloads. On account of such extra commitment, it was decided to limit the pilot project to four areas- Balbriggan, Sligo, Wicklow and Cork. While geographically the areas were widespread, all were situated in urban areas. However, two additional groups came on board in 2014 – Westmeath and Longford. These two groups are included in this evaluation.

13. The Consultative Forum is a voluntary forum established by National Traveller MABS. It is comprised of a number of established Traveller groups nationwide. The Forum advises National Traveller MABS on issues concerning the Traveller Community.

14. Traveller Community Health Care Workers work under the local Primary Health Care for Traveller Projects (PHCTP). There are over 40 PHCTP's nationwide. Traveller Community Health Care Workers are also often referred to as Primary Health Care Workers or Health Care Workers.

## Training of Key Workers

Training for the role of a Key Worker was facilitated by National Traveller MABS and, where possible, the local MABS and the local CIS. Local participation was crucial in fostering a good relationship and establishing a clear process whereby the Key Worker would feel confident contacting local services, such as MABS and the CIS.

Training was undertaken over a number of weeks. Resources used included money management manuals already developed by National Traveller MABS and MABSndI, namely “*A Way of Life-Community Education Training*” and “*Overcoming Illegal Debt*”.

The core topics covered within the training programme were as follows:

1. The role of MABS including the MABS Helpline (wherever possible, the local MABS were involved in this aspect of the training);
2. The role of the CIS – (again wherever possible, involving the local CIS);
3. The role of other local services such as the Credit Union;
4. Managing Money;
5. Control & Budgeting, including basic budgeting tips & techniques;
6. Income Maximisation;
7. Saving & Banking, including awareness of paperwork such as the ML10 (customer identification) form, and application forms for Credit Union membership and Household Budget Scheme participation;
8. Borrowing;
9. Client confidentiality;
10. Addressing illegal moneylending.

## Support materials

On completion of their training, Key Workers were provided with information packs by National Traveller MABS to support them in their role.

The packs contained the following items:

1. Local MABS contact information cards;
2. Contact details for all local CIS;
3. Contact details for all local credit unions;
4. Basic Social Welfare information;
5. Household Budget Scheme forms;
6. Budgeting sheets/ guides;
7. ‘Keep Safe and Warm’ booklets with free thermometer;
8. ‘Surviving Christmas’ leaflets;
9. ‘Budgeting for Communion and Confirmation’ leaflets;
10. ‘Addressing Illegal Moneylending’ leaflet;
11. Spending diaries.

## Operation of the Key Worker Programme

The Key Worker Programme currently operates in six locations in different parts of the country. While National Traveller MABS supported the establishment of all six Key Worker Projects, each project is managed and run locally by the Primary Health Care for Traveller Projects on a voluntary basis. Therefore there is no single operating structure to which all projects adhere.

Each project has evolved differently with some projects being more pro-active than others. Projects have developed individual systems of operation based on local needs, available resources and supports. This Review examines these operational differences and makes recommendations in relation to a more standardised structure.

The main functions of the Key Worker are:

- (i) to direct a client in need of financial advice to the appropriate supports available; and
- (ii) to make referrals as necessary.

## Data collection

Collecting data is an essential element of the role of the Key Worker. Such data can be used both to identify the number and characteristics of people seeking access to services locally, and the types of queries and issues with which they require assistance. Such data can also assist in identifying recurring financial issues within the Community, and thereby be useful to National Traveller MABS in seeking solutions to such issues. National Traveller MABS provides a template to each participating Primary Health Care for Traveller Project for the purpose of enabling Key Workers to record such data.

National Traveller MABS recommends that a copy of the template be kept on an easily accessible notice board where it can be filled in regularly by all Key Workers. Alternatively, a copy can be given to each Key Worker to fill in weekly. National Traveller MABS collects this data by agreement on a monthly basis.

**‘For me the issues... is that it’s gone back so far with austerity that you have people living on very little income and they’re expected to do a lot on it’**

*Quote from a Key Worker.*





# Methodology

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## The Evaluation Process

‘Put simply, evaluation by members of a project or organisation will help people to learn from their day-to-day work’ (Taylor *et al.*, 2005).<sup>15</sup> Projects that work locally with groups benefit greatly from conducting either one off or continuous evaluations which can help highlight what does and does not work within a specific project.

With this in mind, National Traveller MABS decided to use a mixed methodology comprising both quantitative and qualitative methods to evaluate the Key Worker Programme.

In phase one, all 36 Key Workers were asked to complete a questionnaire (appendix ii). A total of 30 Key Workers (83%) completed the questionnaire and returned it to National Traveller MABS for analysis. From the completed questionnaires, quantitative data were collated and analysed. In addition to the closed questions posed in this questionnaire, there was also a section seeking ‘any other comments’. This gave respondents an opportunity to share their experiences and highlight any thoughts they had on the Programme.

## Evaluating data

Phase two, involved a focus group meeting to discuss the findings of Phase 1. The focus group consisted of 12 Key Workers, each of whom had participated in Phase 1. The main objective of the focus group was to examine responses by all participants in Phase 1 and use these responses to draw up recommendations to inform the future direction of the Programme. National Traveller MABS would then work on prioritising such recommendations taking into consideration limitations on stakeholders such as funding and work commitments.

Deliberations by the focus group added a qualitative element to the quantitative data already gathered through the questionnaires.

## Limitations

- Due to funding limitations, the evaluation was carried out by National Traveller MABS and not by an external evaluator.
- Again due to funding limitations, Phase 1 of the evaluation was carried out by written questionnaire. This may have limited feedback from those with literacy difficulties.
- There was a delay in receiving completed questionnaires for Phase 1, which delayed the process of collating and analysing the quantitative data.
- The research was carried out against the backdrop that Key Workers work on a voluntary basis and have already heavy workloads. Therefore, the time that could be dedicated to the evaluation by Key Workers at local level was sometimes limited; further, written records of work undertaken were not always available.

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<sup>15</sup>. See: <http://www.jrf.org.uk/system/files/1859354157.pdf> (Evaluating Community Projects- Marilyn Taylor, Derrick Purdue, Mandy Wilson and Pete Wilde)

# Findings

In this section of the report, we present the key findings of both Phases 1 and 2 of the evaluation process.

## Phase 1

National Traveller MABS initially notified all six Primary Health Care for Traveller Projects of the planned review of the Programme. A questionnaire was subsequently sent to each Key Worker employed in the six Primary Health Care for Traveller Projects.

There was a high response rate, with 30 out of 36 (83%) of Key Workers completing the questionnaire. Respondents were located in 5 different counties.

## Questionnaire Responses

The questionnaire consisted of 6 sections and the responses to each section are now presented below.

### Section 1 (Questions 1-7)

Section 1 consisted of 7 questions and sought to gather basic information from Key Workers to help frame the findings of the report.

**Question 1** sought to establish the number of Traveller families to whom Key Workers might potentially have access. In total, **845** families were identified as currently residing within the catchment areas of participating Key Workers.

According to the most recent Census (2011), the average number of persons in Irish Traveller households is 4.2 compared with 2.7 for households generally. Using this figure, we estimate that the relevant Key Workers have potential access to approximately **3,500 Travellers** or around 12% of the Traveller population nationally.

**Question 2** sought information from Key Workers on the accommodation status of their clients. The results here indicate that no one type of accommodation predominated, with privately rented accommodation, local authority housing and official halting sites being the most frequently reported categories, albeit by a minority of respondents (around one in five) in each instance.

**Questions 3 to 7** elicited information on the types of referrals Key Workers make when working with families.

All Key Workers had referred people to the Citizens Information Service (CIS), with the vast majority (9 out of 10) having also referred clients to MABS, the Society of St Vincent de Paul and the local Credit Union.

### Accommodation Type (n=167\*)



- Local Authority Housing 18%
- Private Rented Accommodation 18%
- Official halting site 16%
- Trailer parked at relatives 13%
- Group Housing Scheme 13%
- Owner occupier 9%
- Unofficial halting site 8%
- Homeless Accommodation (hostel, etc) 5%

\*A number of Key Workers gave more than one response to this question as their clients live in differing types of accommodation.

A minority of Key Workers (around one in five) had referred people to the Public Health Nurse, whilst around one in ten had made referrals to the Social Welfare / Community Welfare Service, Health Service and hospitals respectively.

## Section 2 (Questions 8-10)

This section aimed to assess the effectiveness of the Key Worker programme.

**Question 8** asked the following - ‘*Has the Key Worker project in your area achieved its aim, that is – to increase Traveller knowledge and use of MABS, other advice services such as the CIS, and basic financial services such as the credit union?*’

The vast majority of Key Workers (29 out of 30) who participated in the survey answered this question and all such respondents felt that the project had achieved its aim in their area.

**Question 9** asked respondents to highlight the most common financial concerns that people discuss with them. Responses to this question reflect the wide-ranging nature of the issues that clients discuss with their Key Worker.

A large proportion of the Key Workers cited accommodation and related costs, as well as financial planning and access to credit as the most common issues that were discussed. Table One highlight these issues in more detail.

**Question 10** was a more qualitative question which enquired further into the nature of the supports that Key Workers give to clients. In this question, Key Workers were asked to cite examples of situations where they had been able to help a person or family.

The examples given here centre mainly around managing money and accessing services such as MABS and the credit union.

“We brought a family to the [local MABS] building because they did not have a car...”

“I helped someone to budget their money, help her put some money aside for emergencies...”

“I told the family to join the credit union rather than borrowing and paying back too much... she joined the credit union as a result...”

“I helped an elderly lady receive supplementary welfare towards the cost of her husband’s funeral”.

What are the most common financial concerns that people discuss with Key Workers	Sub headings	Number of Key Workers identifying these issues	Total number of Key Workers identifying these issues
Accommodation and related costs	Utilities/ ESB bills / Phone	12	
	Rent	8	
	Access to accommodation	7	27
Financial planning and access to credit	Communion confirmation costs	5	
	Wedding costs	1	
	Funeral costs	2	
	Christmas	1	
	Budgeting	1	
	Emergencies	1	
	Poor credit to get loan	1	12
Education and youth	Back to school costs	5	
	Access to schools	2	
	Young people	1	8
Maximising Income	Social welfare	5	5
Issues not identified	Trust yet to be established by Key Worker. No financial issues discussed	6	6

### Section 3 (Questions 11-15)

Section 3 of the questionnaire focused on the training that the Traveller Community Health Care Workers had undertaken prior to commencing their role as Key Workers.

As stated above, Traveller Community Health Care Workers were required to complete a money management programme – organised by National Traveller MABS – which covered a broad range of topics, broken down into ten specific subject areas. The training programme was completed over a number of weeks.

In **Question 11**, respondents were asked to reflect on each of the 10 sections of their training and consider in each case whether the training they had received was sufficient in preparing them for their role as a Key Worker. In each instance bar one, all respondents considered the training to have been sufficient for their needs; hence other than incorporating updates (and some potential additional topics- see below), the training programme would appear to need little amendment prior to any roll-out of the Key Worker initiative.

**Questions 12 and 13** asked Key Workers if they had any suggestions on how current training could be improved. They were also asked to suggest additional topics for inclusion in future training.

In relation to improvements to current training, around a third (n=7) of respondents to this question felt that the training was very good. A similar number considered that training would need to be provided annually to ensure that Key Workers remain up to date with current policies and practices in relation to welfare, accommodation, and access to financial services in particular. A minority of respondents felt that more information on social welfare entitlements and additional training on the role of credit unions is needed.

Social welfare issues also arose in the focus group carried out for Phase 2 of the review, during which 12 Key Workers discussed the findings from the questionnaires in more detail. When probed as to the reasons more training might be needed in the area of social welfare, the focus group cited the high welfare dependency of Travellers, together with changes in policy and procedure which continue to cause considerable confusion and difficulty for many Travellers. Such changes can result in Key Workers spending a lot of time

supporting families, for example in filling out various social welfare forms. One Key Worker noted that *‘.We wouldn’t be coming across just the one problem, they (the clients) all have different problems...’*

Around one in five Key Workers recommended that ‘accommodation’ be included as a specific topic in the initial training programme, while a small minority of respondents suggested that more information on back to school costs, and credit unions, should also be included. There were some recommendations that “refresher” training should be undertaken every 6 months, and further suggestions that participants should be encouraged to ask more questions during the training sessions i.e. that the training should be more interactive.

**Question 14** asked Key Workers specifically if they felt there was a need for regular/ongoing training or support to be provided by National Traveller MABS. If answering “Yes”, respondents were then asked to identify the format they thought such training or support should take, and the following options were given:

1. Annual Refresher course;
2. Case study sessions with other Key Workers (this would give Key Workers an opportunity to ‘peer support’ one another);
3. Workshops with local service providers such as the local MABS, CIS, Society of St Vincent de Paul, or Credit Union;
4. Other (please detail).

As referred to above, many respondents had already (unprompted) identified regular/ongoing training as a possible way of improving the programme. This was reiterated when all respondents to **question 14** (n=23) answered “Yes”.

When probed about the form such training should take, just over a third (n= 8) of respondents to this question felt that an annual refresher course would be beneficial to them in their role of Key Worker. This view was reinforced by the focus group in Phase 2 of the evaluation.

Additionally, a majority of respondents to this question (n=17) felt that ongoing workshops with local services would provide them with further knowledge and support when working with families.



Services specifically mentioned here were MABS, the CIS, the Society of St Vincent De Paul and the credit unions. As discussed above, input from related services such as MABS and the CIS has been a key element of the initial training of Key Workers to date; however, credit unions and the local St Vincent de Paul Society have not to date been included in initial training. National Traveller MABS intends, therefore, to approach both organisations for local inputs when planning future training. Around half of respondents to this question (n=10) considered case study sessions with other Key Workers to be a worthwhile method of providing regular support and training.

**Question 15** asked for suggestions on how training and support could be improved, and around four in ten respondents (n=12) made such suggestions.

The most frequently made suggestions were that National Traveller MABS should visit halting sites (n=3) and schools (n=3) to talk with Travellers.

Additionally, it was suggested that National Traveller MABS provide more training to Key Workers in the form of yearly updates (n=3) and additional training days (n=2). Finally it was suggested that National Traveller MABS keep Key Workers up to date on rights and entitlements (n=1).

## Section 4

In addition to evaluating the training and support provided by National Traveller MABS, the evaluation also sought feedback from Key Workers in relation to materials provided to them to support them in their role. The materials were provided by National Traveller MABS as part of a *Key Worker Information Pack*.

**Question 16** asked respondents if the Pack was sufficient in enabling them carry out their role; each of the 26 Key Workers who responded to this question answered that it was.

**Question 17** asked respondents whether the different materials provided had proved beneficial to the Key Workers in their work with clients. There was unanimity among respondents in answering “Yes” in relation to the following materials:

[Weekly Spending Diary;](#)

[Guide to Using MABS;](#)

[MABS Guide to Money and our Children;](#)

[Social Welfare Appeals Guide;](#)

[MABS Guide to Budgeting;](#)

[Guide to Social Welfare entitlements;](#)

[Local MABS and Credit Union contact details.](#)



The vast majority of respondents had also found the following materials to be useful to them in their work; Household Budget Application Forms, Traveller Counselling Service contact details, the 'Overcoming Illegal Debt' Manual, and the MABS service agreement. The Guide to Confirmation and Communion was, however, reported as being less useful by a significant minority (n=6) of the 26 respondents.

The results indicate strongly that overall, respondents had found the materials provided to be beneficial in allowing them to support their target group appropriately. Further work will be undertaken by National Traveller MABS to identify why the *Guide to Confirmation and Communion* was found not to be as useful as the other materials contained in the Pack.

**Question 18** gave Key Workers the opportunity to identify any additional information that they would like to see included in the Information Pack. Around a quarter of respondents (n=8) provided suggestions which included:

- Additional information relating to accommodation and how to access various types of accommodation;
- More information on funeral costs and planning;
- Specific information on the supports available to those with disabilities;
- Guidance on how to make a client feel at ease when discussing matters of personal finance.

## Section 5

### Recording data

Part of the remit of Key Workers is to compile data both on the number of clients they assist and the services to which clients are referred. A template was provided to Key Workers by National Traveller MABS to facilitate recording of these data (appendix iii).

The purpose of data gathering as described earlier is to allow National Traveller MABS to identify, and thereafter highlight, policy issues affecting Travellers such as gaps in service provision.

Data are gathered by National Traveller MABS on a quarterly basis via email and are treated confidentially. Quarterly analysis is designed to allow time for themes and trends to emerge and be identifiable. However, in some instances, data are either not returned at all, or forwarded intermittently, and it has become clear that the main reason for this is time constraints and work pressures on Key Workers.

Nonetheless, in response to **Question 19** as to whether the template provided by National Traveller MABS is easy to use, the vast majority of Key Workers (n=26) responded that it is.

**Question 20** asked if the template allowed for the recording of all relevant work undertaken by the Key Worker. A majority of those who responded to this question (20 out of 26) responded "Yes", while the remainder (n= 6), stated that it did not.

Among the minority who felt that additional information should be recorded by Key Workers (**Question 21**), such categories might include:

- Details of support around funeral and headstone costs;
- Difficulty accessing local services;
- Assistance with social welfare applications/forms;
- Budgeting sessions facilitated.

**Question 22** asked if there is any alternative way that National Traveller MABS could collect data which would make recording easier for Key Workers, while at the same time ensuring that the necessary information is recorded. Again, only a minority of respondents answered this question, but among those who did, some (n=6) were happy with the current system, others (n=2) suggested developing their own form, using the HSE format of gathering information (n=1), or that National Traveller MABS should visit the project to gather statistics (n =1).

## Section 6

The final part of the questionnaire provided an opportunity for respondents to add any further comments or suggestions as to how the Key Worker Programme in general could be improved.

A number of respondents (n=20) made comments, observations or suggestions here. Around a fifth of those who responded to this question felt that the Programme overall was working well. It was pointed out for example that it was very worthwhile meeting local money advisors as part of the training.

Suggestions on how National Traveller MABS could better support Key Workers, and/or improve the training provided, include:

- Regular meetings between National Traveller MABS and Key Workers;
- Biannual refresher courses to be provided by National Traveller MABS to Key Workers;
- Periodic updates to be provided by National Traveller MABS as and when significant changes in policy and practice take place (e.g. regarding welfare rights and entitlements);
- Consideration should also be given to having training accredited.

## Phase 2

Phase 2 (a focus group of 12 Key Workers) enabled both the findings of the questionnaire to be discussed and analysed in greater depth, and recommendations to be agreed regarding the future development of the Key Worker Programme.

**‘We wouldn’t be coming across all the one problems.... they (families) all have different problems’**

*Quote from a Key Worker.*





# Recommendations

Three key recommendations emerged from the findings in Phases 1 and 2, namely:

## Recommendation 1

### Explore the viability of placing the Key Worker Programme on a national footing

That National Traveller MABS share the findings of this report with the Health Service Executive (HSE) and Citizens Information Board (CIB) and request their co-operation on a joint initiative to roll-out the Key Worker Programme on a national basis.

## Recommendation 2

### Develop a comprehensive operating structure for the Key Worker Programme.

That such a structure should comprise:

- A clear pathway to establishing and operating a Key Worker Project locally.
  - This should include a commitment by National Traveller MABS and local service providers, such as MABS and the CIS, to supporting the local project. For example National Traveller MABS should commit to visiting projects regularly and provide biannual refresher courses.
  - The pathway should include a commitment by the local Primary Health Care for Traveller Project to working with National Traveller MABS to support Key Workers and build strong links with local service providers.
  - The pathway should also detail commitments in relation to training and data gathering.
- The development of a comprehensive training programme.
  - Training should consist of initial and ongoing training, with National Traveller MABS overseeing biannual updates and annual refresher course for all participating Traveller Community Health Care Workers.
  - National Traveller MABS should endeavour to provide participating Primary Health Care for Traveller Projects with training and support from local service providers as far as possible.
  - Taken together, initial, ongoing and localised training will provide the Traveller Community Health Care Workers/ Key Workers with up to date information on social welfare entitlements, financial products and information on supporting families in financial difficulties in their area.
  - Consideration should also be given to having such training accredited.
  - Guidance should be given on how to make a client feel at ease when discussing matters of personal finance
- A standard template for collecting statistical data.
  - This template should encompass the suggestions by Key Workers on additional information that should be gathered.
  - Consideration should also be given to simplifying the format for data collection by linking into existing HSE data management systems used by Key Workers in their role as Traveller Community Health Care Workers.
- A definition of the roles and responsibilities of the Key Worker.

The specific roles and responsibilities of the Key Worker should be clearly detailed.

To ensure clarity both in terms of roles and responsibilities, the following should be developed:

  - A clear description of the Key Worker role;
  - Guidelines around client confidentiality;
  - Details of the supports available to Key Workers in undertaking their roles and responsibilities;
  - Guidelines on boundaries to include both the remit of and contact details for local service providers.



- A Key Worker Charter for the Key Worker Programme.
  - A charter such as Volunteer Ireland’s ‘Charter for Effective Volunteering’ – (appendix i) should be developed.
  - The Charter should be signed by all Key Workers, National Traveller MABS and Primary Health Care for Traveller Project Coordinators.
  - The Charter should clearly identify the commitment that National Traveller MABS and related bodies will give to the Project.
  - Commitments by National Traveller MABS should include supporting the Key Worker, for example, by providing structured training and resources.
  - The Charter should also include a commitment to gather data to inform social policy work. Towards this end, the commitments from the Primary Health Care for Traveller Project Coordinator and the Traveller Community Health Care Worker should include both a commitment to build links with local service providers, and a commitment to collate data on work undertaken on a regular basis.

### Recommendation 3

**Additional Primary Health Care for Traveller Projects should be invited to participate in the Programme only once Recommendations 1 and 2 have been implemented.**

That a sub-committee with representation from stakeholders such as Primary Health Care for Traveller Projects, National Traveller MABS, local service providers, the HSE and the CIB be established in order to oversee the implementation of such recommendations.



# Conclusion

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The feedback from both Phases 1 and 2 of the evaluation process described above shows that the Key Worker Programme is working well.

The Programme has now entered its fourth year and is currently operating in six localities.

The evaluation found evidence that the Programme has evolved differently in different localities with some projects being more pro-active than others. This would appear to be due to:

- The voluntary aspect of each project and the limitations this imposes;
- Local factors such as resource differences, varying Primary Health Care work demands and the numbers of Traveller Community Health Care Workers volunteering as Key Workers;
- The time involved in building relationships between the Traveller Community Health Care Workers and clients. For example Key Workers in one relatively new project felt that they had yet to build trust between themselves and their target group in relation to discussing financial matters.

The variation in operating structures of local Key Worker projects enabled National Traveller MABS to examine the strengths and weaknesses of different structures.

A clear majority of respondents felt that the project was working well in its current form. Where weaknesses were identified, these were generally supported by suggestions for improvement.

It is clear from the results of this evaluation that the Traveller Community Health Care Workers/Key Workers are dealing with a range of financial issues. While the overall remit for the Primary Health Care for Traveller Projects is one of health information provision, the nature of their outreach work brings them into contact with many people who have financial difficulties.<sup>16</sup> It is widely accepted that pressure associated with financial worries can have a negative impact on both a person's physical and mental health; furthermore, that ill-health can cause or exacerbate financial difficulties. It is therefore important that Key Workers are provided with adequate support, resources and time to deal effectively with these issues.

A key component of the role of the Key Worker is to compile data on the number of people seeking information on financial matters, the nature of enquiries being made, and the type(s) of information or support being provided in response. The purpose of such data gathering is to allow National Traveller MABS to identify both local and national issues affecting Travellers, including gaps in service provision, and highlight –and hopefully contribute to – change at policy level. The findings of this evaluation indicate that this is perhaps the aspect of the Programme that requires more attention and development than others, and National Traveller MABS intends to focus initially on improving this area of the Programme as a matter of priority.

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<sup>16</sup>. See for example: [http://ec.europa.eu/consumers/financial\\_services/reference\\_studies\\_documents/docs/part\\_1\\_synthesis\\_of\\_findings\\_en.pdf](http://ec.europa.eu/consumers/financial_services/reference_studies_documents/docs/part_1_synthesis_of_findings_en.pdf) - p180-182.

# Appendices

## Appendix I

### Charter for Effective Volunteering

**Volunteering is a two-way relationship, one that should benefit both the volunteer and the organisation. As in any relationship both parties will have expectations of the other. By being aware of these expectations both volunteers and organisations are more likely to have a successful partnership.**

#### **Volunteers can expect to:**

- Know if, and how, they are selected
- Be giving meaningful work to do
- Know what is expected from them
- Be offered appropriate training
- Be thanked and to have their voluntary contribution recognised
- Receive supervision and support
- Get something out of the work for themselves
- Be reimbursed for out-of-pocket expenses incurred when volunteering
- Make mistakes and learn from them
- Be made aware of complaint and grievance procedures
- Be made aware of how issues or difficulties will be dealt with
- Be treated fairly and not to experience discrimination
- Have safe working conditions, including insurance cover
- Be informed about, and given the opportunity to play an active part in the organisation as a whole
- Be able to say 'no' and leave without feeling guilty

#### **Volunteers are asked to:**

- Respect the values and aims of the organisation
- Be committed
- Be reliable and give the organisation sufficient warning if unable to turn up
- Be punctual
- Attend essential training and support sessions
- Undertake the work to a high standard
- Be honest if issues or difficulties arise

#### **Organisations are asked to:**

- Ensure the volunteering experience is a rewarding one
- Ensure equal access and not to discriminate
- Define clear, meaningful roles for volunteers
- Have policies and procedures for volunteers
- Provide all necessary information to volunteers
- Be available for volunteers
- Provide training where necessary
- Thank and value volunteers
- Provide insurance cover
- Inform volunteers of any legal liabilities
- Supervise and to provide support
- Reimburse out-of-pocket expenses
- Provide a safe working environment
- Have procedures in place for dealing with complaints and grievances
- Have procedures in place for dealing with issues of difficulties that may arise

#### **Organisations can ask:**

- For certain qualities and skills in volunteers
- For volunteers to understand and buy into the organisation ethos
- Volunteers to sign a volunteer agreement or 'contract'
- For tasks to be done in a particular way, to a certain standard and within certain timeframes
- For volunteers to see through their time commitment
- For reliability
- For punctuality
- To ask volunteers to leave if their involvement hinders the organisation achieving its goals

**“Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it’s the only thing that ever has.” – Margaret Mead**

For more information contact your local Volunteer Centre or go to [www.volunteer.ie](http://www.volunteer.ie)

## Appendix II

### Key Worker Questionnaire

The National Traveller MABS Key Worker Programme was established in 2012. National Traveller MABS will evaluate the programme in 2015. This will allow National Traveller MABS to build on the strengths of the programme and develop areas that need improvement.

The input of Key Workers in the evaluation process is essential. National Traveller MABS recognise the expertise of the Key Workers in this area. We hope you, as a Key Worker will take the time to complete the questionnaire.

We appreciate the time you take in this task. We look forward to your honesty, and receiving your valued input on how we can improve the Key worker programme for the future.

### Section 1

**In section 1, National Traveller MABS hope to gather some basic information from Key Workers to help frame our findings**

1) How many families do you currently work with?

2) Do these families live in: (please tick as many as is appropriate)

Private Rental Accommodation

Owner Occupied

Local Authority Housing

Group Housing Schemes

Official halting site

Unofficial halting site

Trailer parked at relatives

Other - please detail

3) Do you refer clients to the local MABS Office?  Yes  No

4) Do you refer clients to the local Citizens Information Service?  Yes  No

5) Do you refer clients to the Society of Saint Vincent de Paul  Yes  No

6) Do you encourage people to join their local credit union?  Yes  No

7) Do you refer clients to other service providers and supports?  Yes  No

Please state \_\_\_\_\_

## Section 2 – Assessing the overall success of the Key Worker Programme

In this section we would like your views on the overall success of the Key Worker Programme

8) Has the key worker project in your area achieved its aim, that is- To increase Traveller knowledge and use of -MABS, other advice services such as the CIS, and basic financial services such as the credit union?

Yes       No

9) What are the most common financial concerns people discuss with you as a Key Worker?

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10) Can you give an example below of a situation where you as a Key Worker were able to help a person/ family?

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## Section 3 – Key Worker Training

National Traveller MABS provided training to all Key Workers prior to you undertaking your role. We would be grateful if you could answer the following questions so we can assess how we can improve the support and training we provide in the future

11) Do you feel the training you received from NTMABS in the areas listed below, was sufficient in preparing you for your role as a Key Worker?

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| 1. The role of MABS including the MABS helpline   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. The role of the CIS  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. The role of other local services such as the Credit Union etc.   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Managing Money   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Control & Budgeting - including basic budgeting – tips & tricks  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Income Maximisation  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Saving & Banking including awareness of paperwork (e.g. ML10 form, Credit Union application forms, and Household budget forms. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Borrowing  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. Client confidentiality   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

12) Can you explain briefly how training in these areas could be improved?

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13) Is there any other areas that you feel should be covered during the initial training given to Key Workers (please detail below) \_\_\_\_\_

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14) Do you feel that there is a need for regular/ongoing training and support to be provided by NTMABS?  Yes  No

If yes, what format do you think this should take? (tick as many as applicable)

1.  Annual Refresher course
2.  Case study days with other Key worker (this would allow Key workers to support each other)
3.  Workshops with local service providers such as the local MABS, CIS, VDP, Credit Union
4.  Other (please detail below)

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15) If you have any other suggestions on how training/support can be improved please can you detail it here?

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#### Section 4 – Support materials

Support Materials – National Traveller MABS provided all Key Workers with an information pack to support them when giving advice to clients (The information pack contained -Weekly Sending Diary, MABS Service Agreement, Guide to Using MABS, Money and Our Children, Guide to Confirmation and Communion, Household Budget Application form, Social Welfare Appeals, MABS Guide to Budgeting, Overcoming Illegal Debt Manual. Guide to Social Welfare entitlements, Local MABS and Credit Union contact details, Traveller Counselling service contact details). We would welcome feedback from all Key Workers on the contents of the pack

16) Was the information pack you received from NTMABS sufficient for you to carry out your role?  Yes  No

17) Please tick YES if you found that the following was useful and NO if you found that it was not useful when giving advice to clients

- Weekly Sending Diary  Yes  No
- MABS Service Agreement  Yes  No
- Guide to Using MABS, Money and Our Children  Yes  No
- Guide to Confirmation and Communion  Yes  No
- Household Budget Application form  Yes  No
- Social Welfare Appeals  Yes  No
- MABS Guide to Budgeting  Yes  No
- Overcoming Illegal Debt Manual  Yes  No
- Guide to Social Welfare entitlements  Yes  No
- Local MABS and Credit Union contact details  Yes  No
- Traveller Counselling service contact details  Yes  No



18) Can you suggest any additional local or national information of importance that could be included in the pack? If yes please outline below  Yes  No

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### Section 5 – Keeping Records

Knowing how many people Key Workers support, and being aware of the issues arising is really important to National Traveller MABS. Having such information helps National Traveller MABS to:

- Detect the main issues affecting Travellers
- Identify gaps in services
- Quantify such issues and gaps and move to effect change at policy level

Data collection is really important to National Traveller MABS and we appreciate your efforts in recording the work you do on a monthly basis on the template that National Traveller MABS provides (see attached). However the following questions we hope will help us to improve our data collection methods to make it easier for you in the future.

19) Is the attached template we provide easy for you to use?  Yes  No

20) Is it allowing you to record all the valuable work you do as a Key Worker?  Yes  No

21) Is there additional information we should be gathering? (please detail below)  Yes  No

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22) Is there a way for National Traveller MABS to collect information/ data from you, which would be easier for you, and allow us to gather this important information?

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### Section 6 – Summary

23) We would be delighted for you to complete the box below with any further comments you may have on the operation of the Key worker programme- on how it can be improved and how we can better help you to carry out your work.

**National Traveller MABS would like to thank you once more for undertaking the role of Key Worker and for taking the time to complete this questionnaire.**

**We look forward to sharing our findings with you in a final report.**

## Appendix III

### Key Worker Data Recording Template -2015

Referred to

MABS	CIS (Information officer)	Other CIS services (Advocacy, Disability)	Recurring policy issues (ie access to rent supp, access to credit etc)	Other











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