Health conditions, healthcare use and wider determinants of health in Romani (Gypsy), Roma, and Irish, Scottish and Welsh Traveller communities in Brent

Evidence & Insight team, Public Health, Brent Council

July 2026

Brent

Aims and approach

This report describes the health status, levels of health care activity and wider determinants of health in Romani (Gypsy), Roma and Irish, Scottish and Welsh Traveller communities in Brent. It is part of a health needs assessment which aims to understand health and care needs in these communities using mixed methods.

The mixed methods approach included analysis of existing numerical data from two sources: the 2021 census and data collected as part of routine NHS care. It also included in-depth data collection to hear from people in these communities as well as reviews of national and local reports to set this in context.

Two organisations were commissioned to undertake research in Irish Traveller and Roma communities in Brent. Although originally intended to also include focused work with the Romani (Gypsy), Scottish and Welsh communities, it has not so far been possible to identify people in these communities to involve in the research. This commissioned work included in-depth interviews covering a range of health topics on women's health, men's health, and the health of children and young people. The work with Irish Travellers was led by the Traveller Movement and findings are summarised here. The work with Roma people is being led by the Roma Support Group and is currently in the field. Findings will be shared later in 2026.

This report focuses on findings based on data from the census and from general practices and hospitals as part of routine NHS care. The data is de-identified, meaning that individuals cannot be identified but averages and patterns can be seen.

Brent

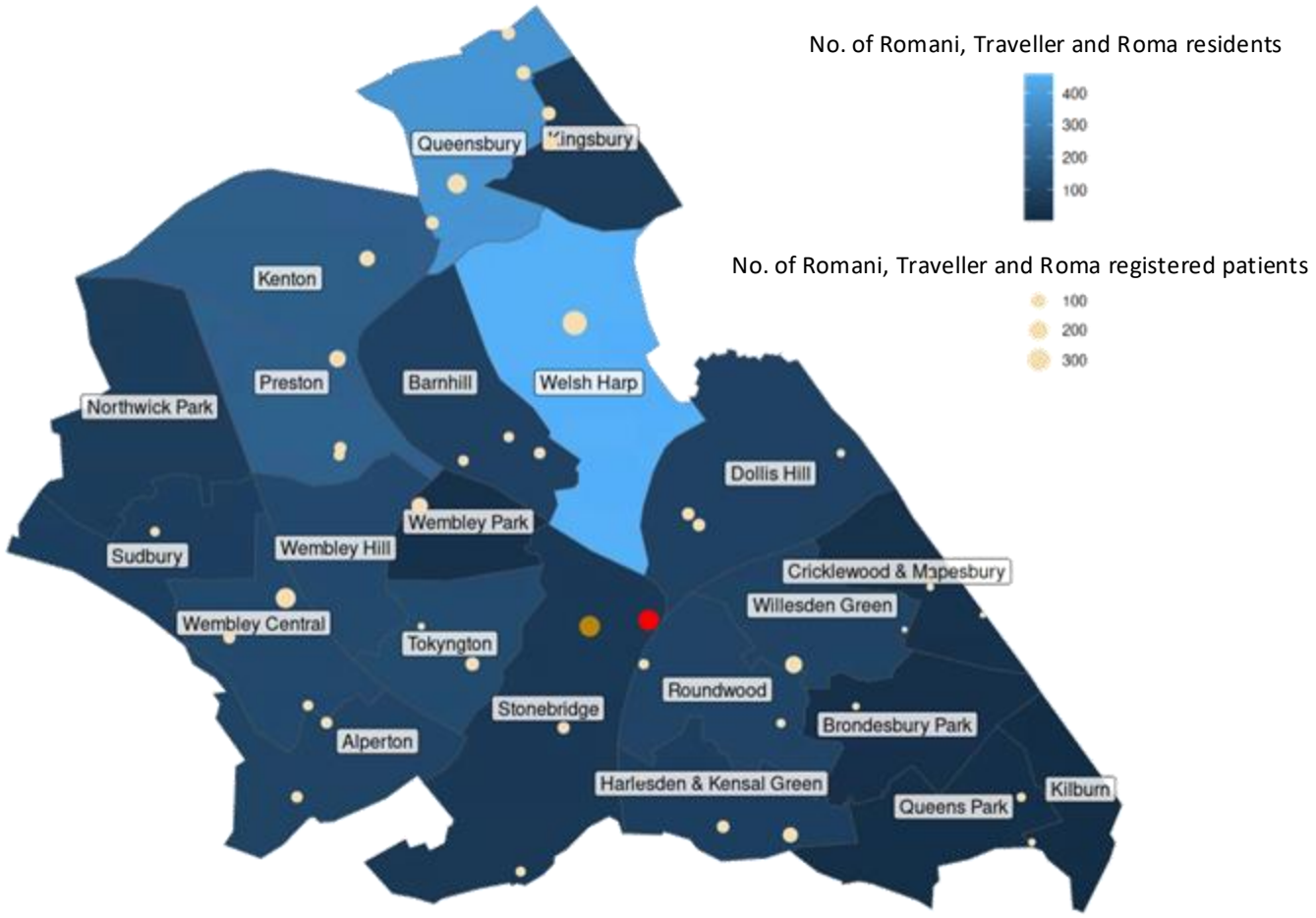
Summary of findings

- There are differences in health status and use of healthcare across people from the Irish Traveller community, other Traveller communities, Roma communities, and the rest of Brent.
- There are high levels of depression and anxiety in the Irish Traveller community. In contrast, the prevalence of physical long-term health conditions is lower in this community compared with the rest of Brent.
- The prevalence of both mental and physical long-term health conditions is lower in the wider Traveller and Roma communities compared with the rest of Brent.
- General practice encounters are similar in the Irish Traveller community but use of hospitals (including A&E attendances and admissions) is higher compared with the rest of Brent.
- Childhood immunisation uptake is lower in the wider Traveller and Roma communities compared with the rest of Brent. Uptake is higher in the Irish Traveller community in Lynton Close. This suggests that positive relationships between this community and the general practice serving it as well as culturally appropriate initiatives to support uptake could be having success. These could be considered as models for other parts of Brent where there is a concentration of Romani (Gypsy), Traveller or Roma communities.

Brent

Demographics

Figure 1. Numbers of Romani, Traveller and Roma residents and registered patients in Brent



Source: Discover-NOW (WSIC, extracted 2025)

This analysis includes people living in Brent and registered with a Brent general practice during the financial year 2024/2025. From GP records, we categorised:

- 284 Irish Traveller residents in Lynton Close
- 2,548 residents in Romani (Gypsy), Traveller or Roma communities (referred to as “wider Traveller and Roma communities” in this report. In this analysis, Lynton Close residents are not included in this group, to avoid double counting. This group is likely predominantly Roma but the recording is not always sufficiently detailed to be sure.

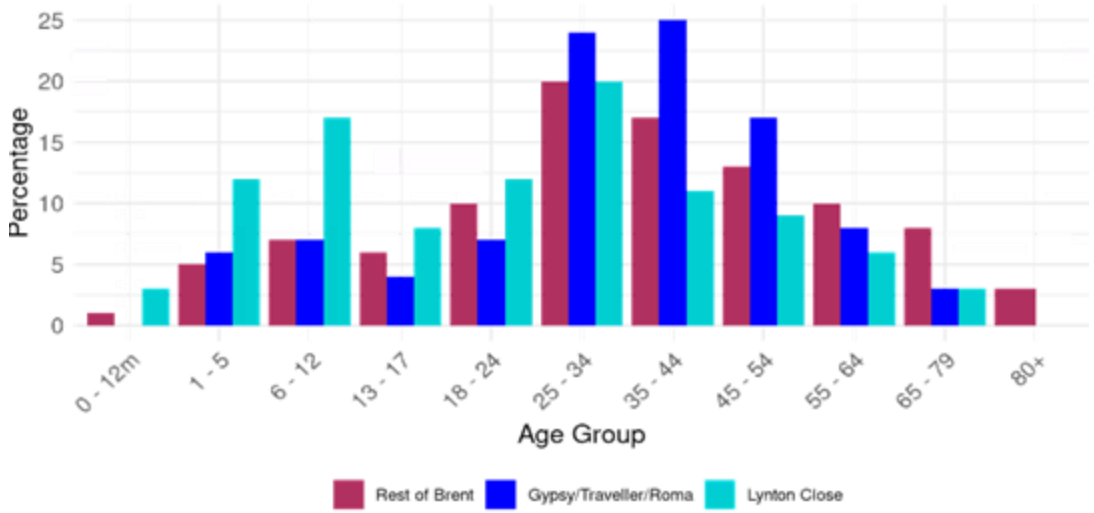
The wider Traveller and Roma communities reside in the North of Brent, with Welsh Harp having the largest number.

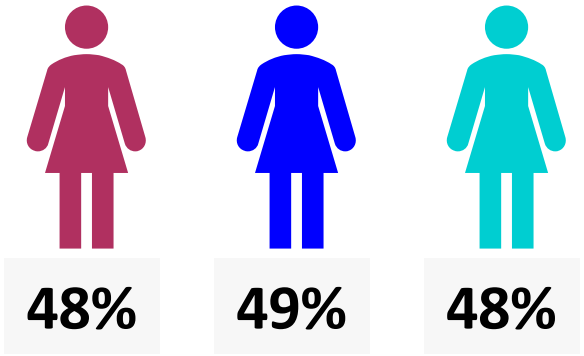
The map shows areas the communities live in and the location of general practices they are registered with.

- Lighter shades indicate a larger number of Romani (Gypsy), Traveller or Roma residents in that ward
- A larger size dot indicates a larger number of Romani (Gypsy), Traveller or Roma patients registered at that general practice
- The red dot indicates the location of Irish Travellers in Lynton Close

Age and gender profile

Figure 2. Age and gender profiles of Romani, Traveller and Roma registered patients in Brent





Source: Discover-NOW (WSIC, extracted 2025)

Romani (Gypsy), Traveller and Roma communities have a higher proportion of working age adults (25-54 years) compared with the rest of Brent.

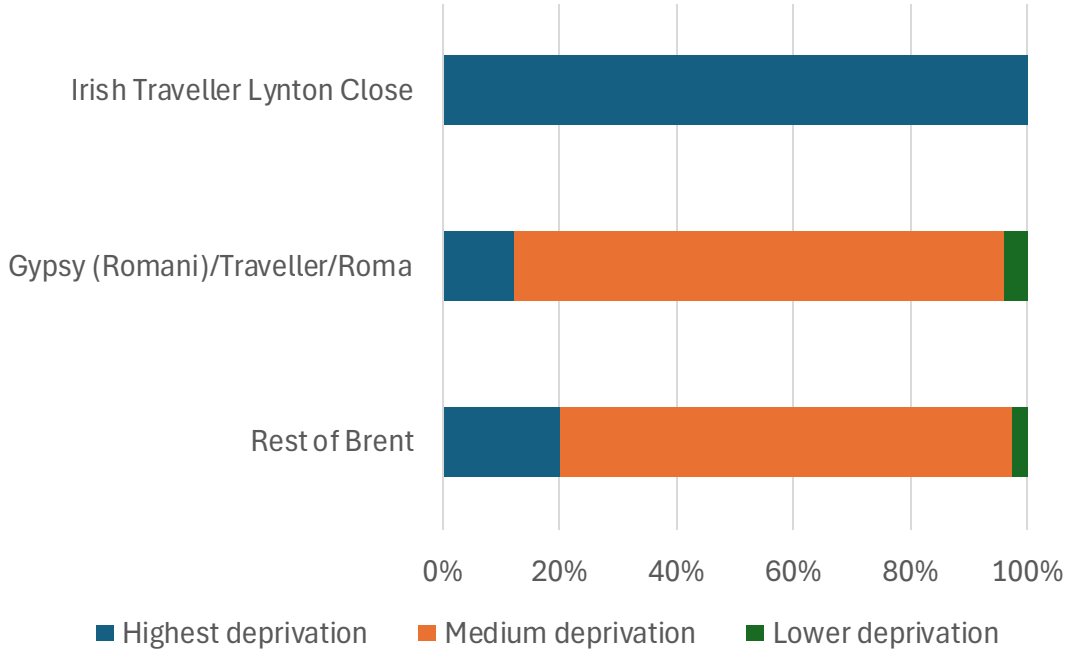
The Irish Traveller community in Lynton Close has a higher proportion of children (under 18 years). The median age in Lynton Close is 24 years, compared with 35 years in the rest of Brent.

Gender proportions across all ethnic groups are similar, with slightly more males.

These demographic profiles based on GP data are similar to the profiles based on data from the 2021 census. Both sources may underestimate the total number of residents from Romani (Gypsy), Traveller and Roma communities. Nevertheless, the census data shows that Brent's Roma population is the largest in England and Wales.

Deprivation profile

Figure 3. Deprivation profile of Romani, Traveller and Roma registered patients in Brent



Source: Discover-NOW (WSIC, extracted 2025)

Deprivation is based on the 2019 Index of Multiple Deprivation as this analysis was undertaken before the 2025 IMD data was released

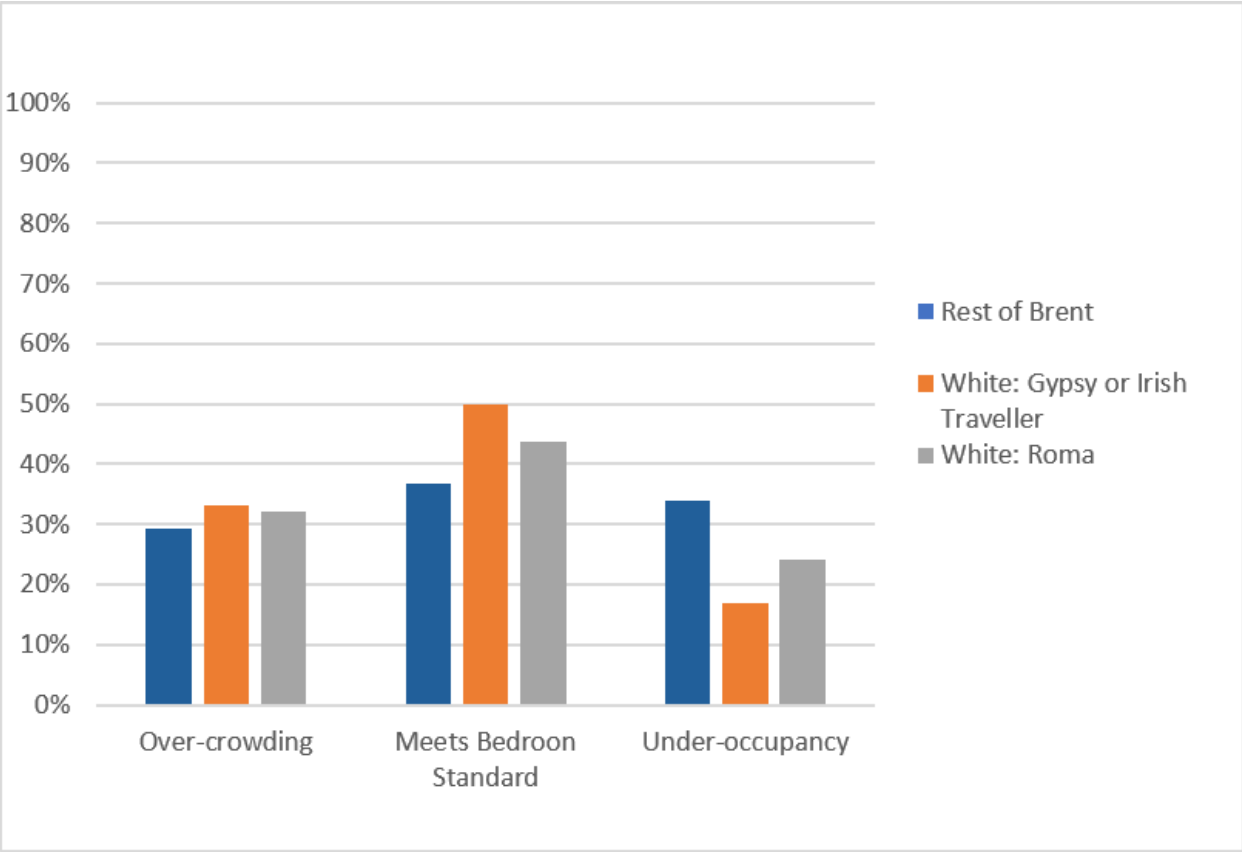
Lynton Close is in an area with a very high level of deprivation. According to the 2025 Index of Multiple Deprivation scores, the area is in the top 1% of most deprived LSOAs in England. It is the most deprived of all 4,994 LSOAs in London. An LSOA is an administrative boundary covering a population of approximately 1500 people on average.

Most people in the wider Traveller and Roma communities and the rest of Brent live in areas of medium deprivation (in the top 30% to 70% most deprived in England).

Less than 5% of people live in areas of low deprivation (in the 20% least deprived in England).

Brent

Overcrowding



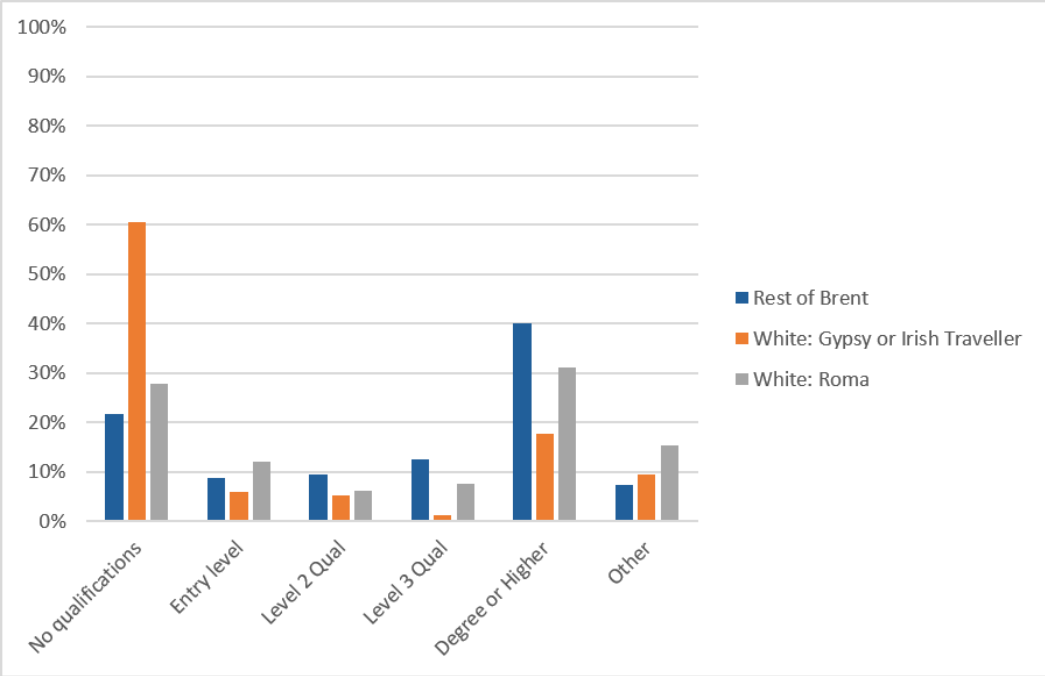
The England census captured Roma ethnicity separately from Gypsy and Irish Traveller ethnicities for the first time in 2021 but, unlike the local NHS data, did not capture Irish Traveller ethnicity separately.

Around 30% of the Gypsy/Irish Traveller and Roma groups experience overcrowding and are less likely to experience under-occupancy (based on number of rooms per person) compared with the rest of Brent.

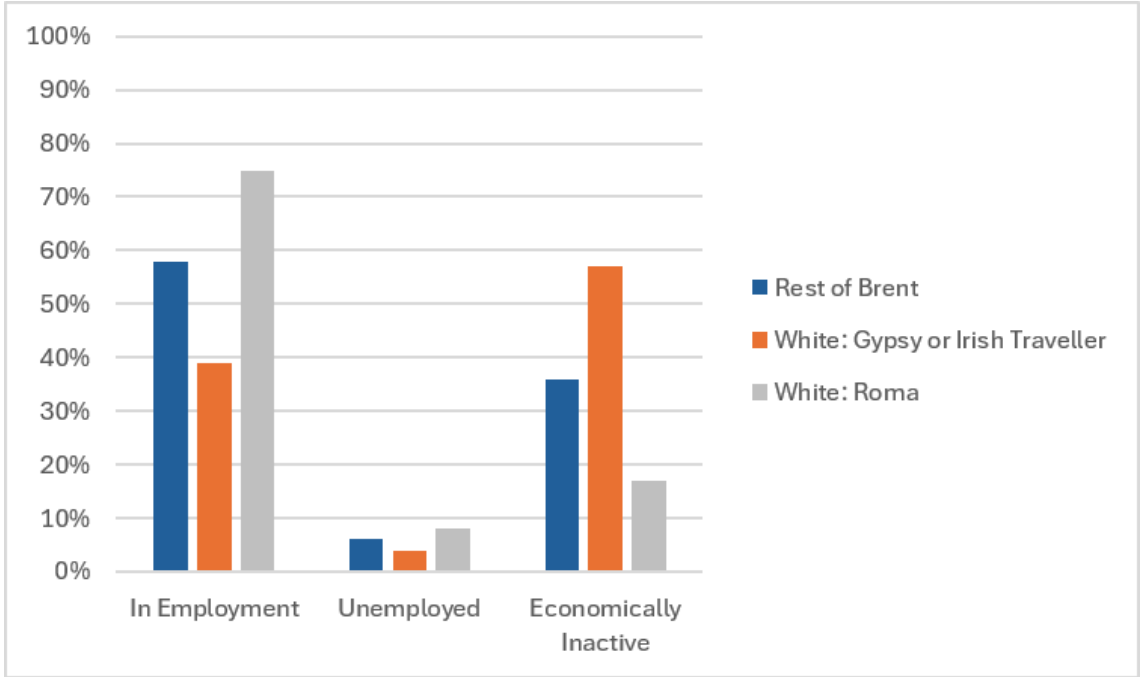
Brent

Source: 2021 census
Over-crowding is defined as having too few bedrooms for the number of people in the household
Under-occupancy is defined as having more bedrooms than the standard requirement

Education and economic activity



The majority (61%) of Gypsy/Irish Traveller residents have no qualifications, a higher proportion than the rest of Brent. Other qualifications (e.g. apprenticeships) are more common among the Gypsy/Irish Traveller (9%) and Roma (15%) communities compared with the rest of Brent (7%).



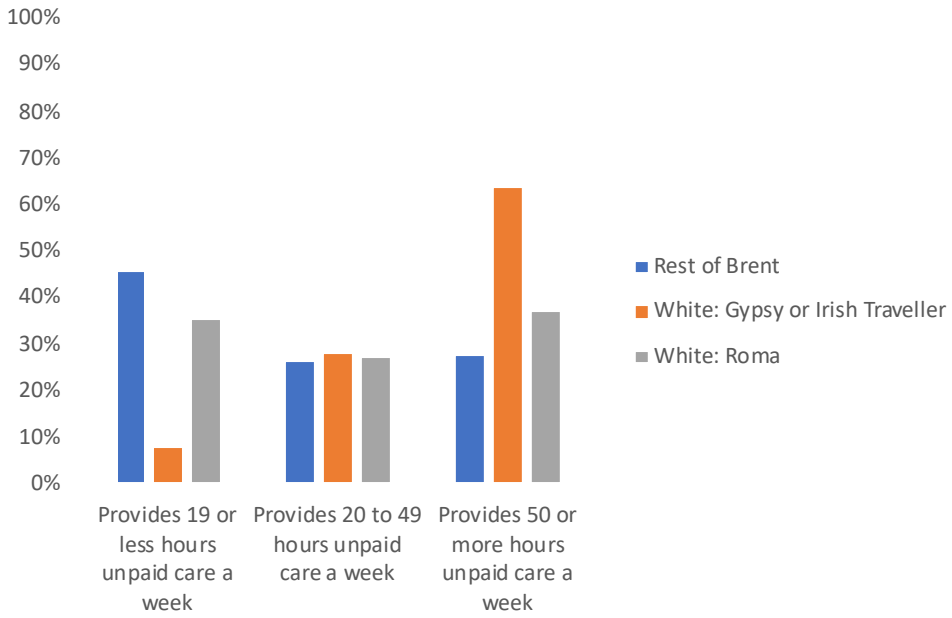
In 2021, 57% of the Gypsy/Irish Traveller population were economically inactive compared to 36% in the rest of Brent.

In contrast, 75% of Roma residents were classified as being in employment, higher than the rest of Brent (58%) and Gypsy/Irish Traveller groups (39%).

Brent

Source: 2021 census

Unpaid Caregiving



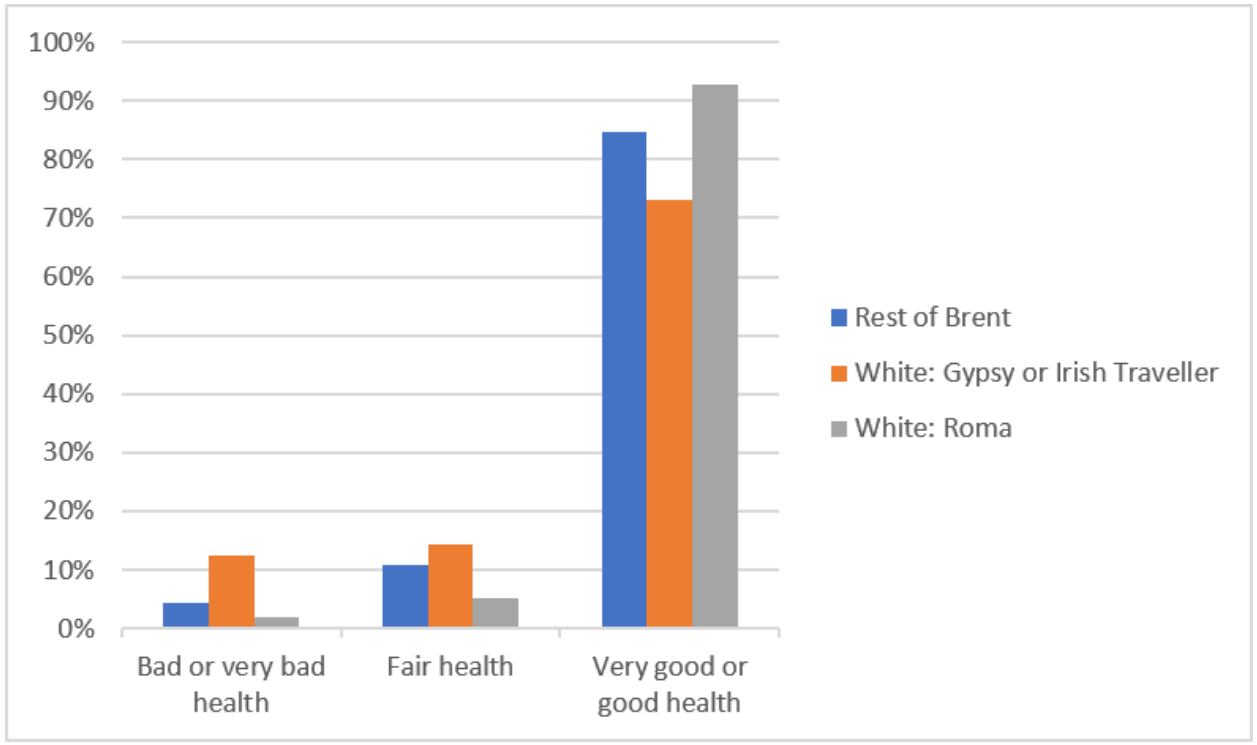
Across Brent, the majority of people are not providing unpaid care for someone who has a long-term physical or mental health condition or problems related to older age (89% Gypsy/Irish Traveller, 97% Roma and 92% rest of Brent).

Among people who are unpaid carers, people in Gypsy/Irish Traveller communities are providing the highest levels of care. Over 60% of carers are providing more than 50 hours a week compared with fewer than 30% providing this intensity of care in the rest of Brent.

Source: 2021 census

Brent

General health



Residents reported on their self-assessed general health in the 2021 census. Good or very good general health was most prevalent for Roma residents (93%) and least prevalent for Gypsy/Irish Traveller residents (73%). Over 10% of Gypsy/Irish Traveller residents have bad or very bad health compared to 2% from the rest of Brent.

Source: 2021 census

Brent

Prevalence of poor mental health

Long-term health conditions are flagged in GP records when people present at the practice with symptoms or have test results. Some people will not be aware of their symptoms or will not talk to the GP about them, for various reasons. This leads to some under-recording of health conditions when GP data is used. Differences in healthcare seeking across communities can lead to differences in prevalence estimates from GP data.

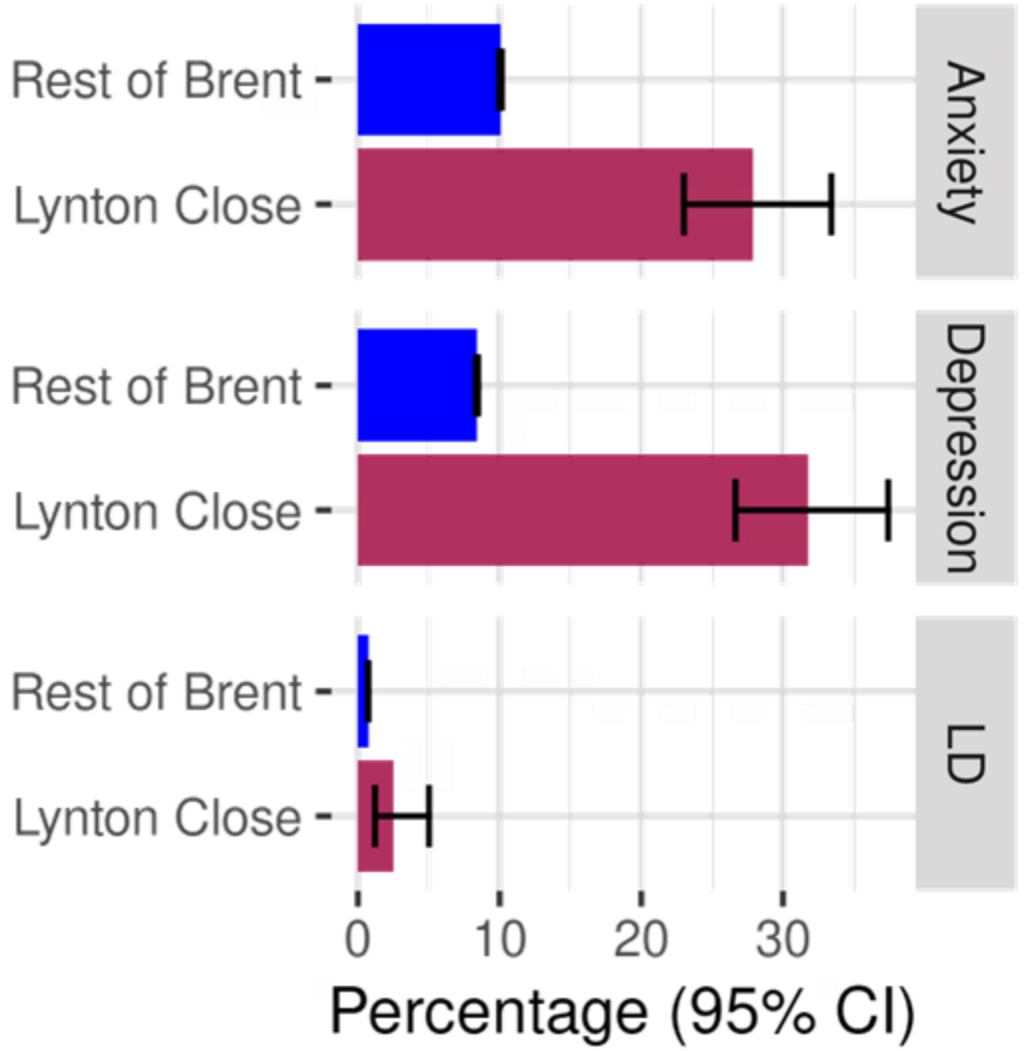
Despite this potential limitation, the local data clearly show a high prevalence of depression (32%) and anxiety (28%) in Irish Travellers in Lynton Close.

This is **three times** the prevalence for the rest of Brent (which is around 10%).

Learning disability prevalence is also higher among Irish Travellers in Lynton Close, although numbers are small.

This is consistent with a previous mental health needs assessment at Lynton Close. It is also consistent with national data showing that Irish/Scottish/Welsh Traveller, Romani (Gypsy) and Roma people are three times as likely to experience anxiety and twice as likely to experience depression compared with the England average.

Figure 9. Mental health conditions among Irish Travellers registered in Brent



Source: Discover-NOW (WSIC, extracted 2025)

Brent

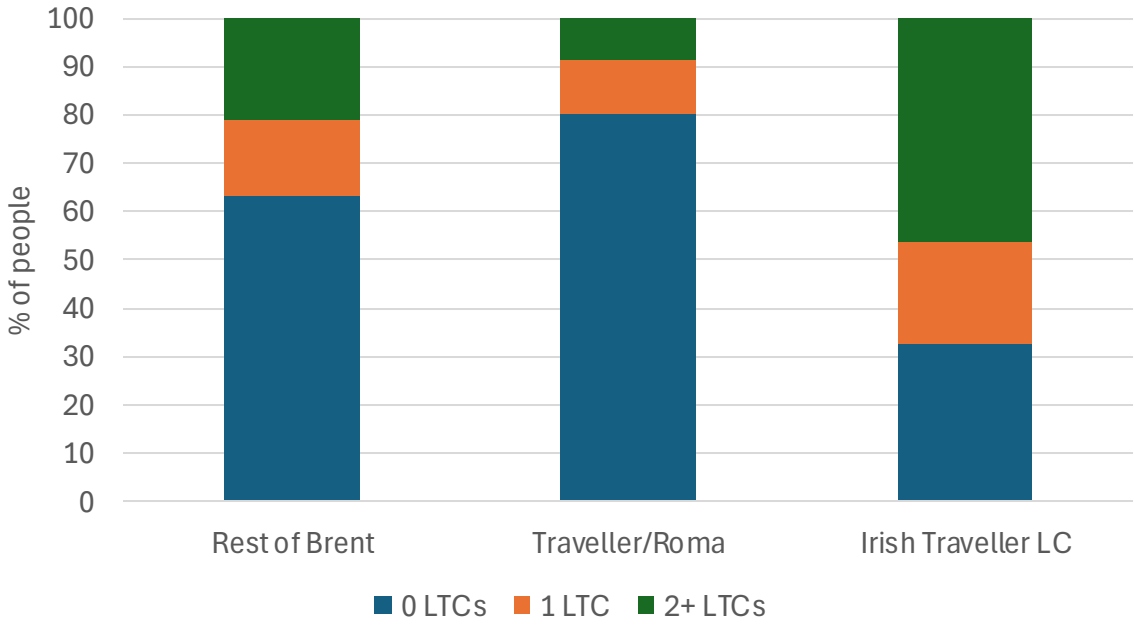
Prevalence of Long-Term Conditions (LTCs)

The numbers of people in the Irish Traveller community in Lynton close with other specific health conditions are too small to show here.

However, when the total number of long-term conditions is added up, it is clear that the Irish Traveller community in Lynton Close has poor health. 57% of adults (age 18 and over) have no LTCs compared with 69% in the rest of Brent.

The wider Traveller and Roma communities have a lower prevalence of long-term conditions compared with the rest of Brent.

Figure 10. Long-term health conditions among Romani, Traveller and Roma registered patients in Brent



Source: Discover-NOW (WSIC, extracted 2025)
LTCs counted = anxiety, asthma, COPD, Bronchiectasis, atrial fibrillation, cancer, CHD, chronic kidney disease, depression, diabetes, epilepsy , heart failure, hypertension, serious mental illness, learning disability, peripheral arterial disease, palliative care, stroke/TIA

Brent

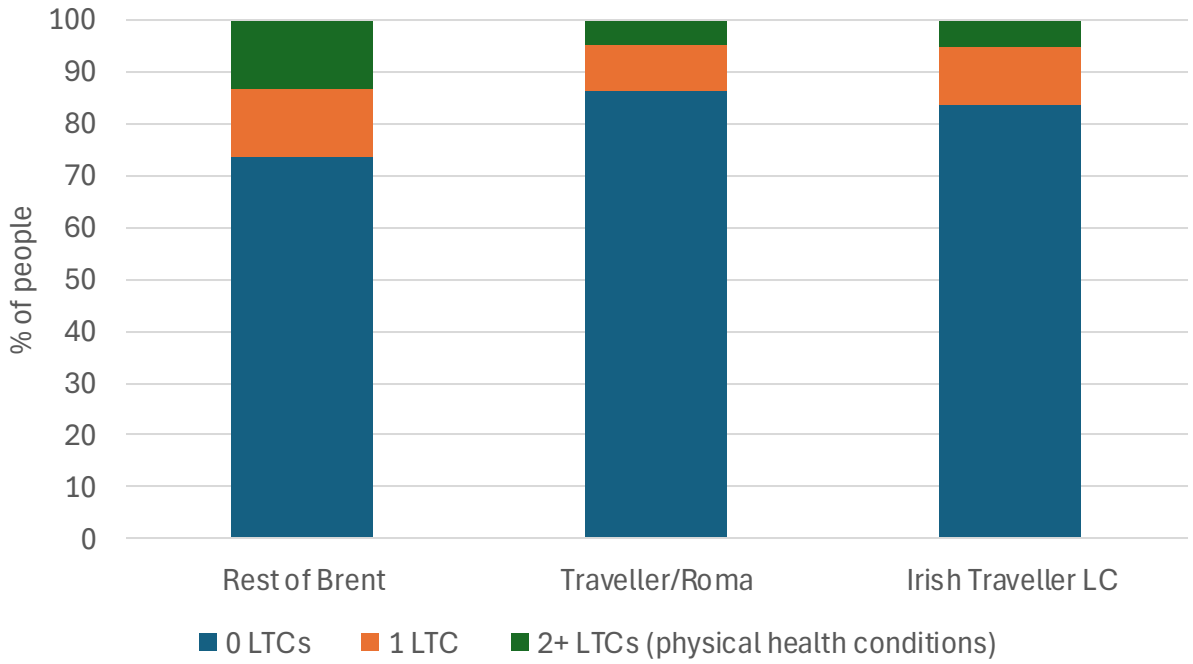
Prevalence of physical Long-Term Conditions (LTCs)

When mental health conditions are removed from the count of LTCs, a different pattern emerges. Almost 90% of adults from the Irish Traveller community in Lynton Close have no diagnosed physical LTCs compared with 78% in the rest of Brent. This finding holds when looking at middle/older age adults only (age 50 and over).

The wider Traveller and Roma communities also have lower prevalence of physical LTCs compared with the rest of Brent.

Detailed analysis revealed that the prevalence of diagnosed hypertension is lower in the Irish Traveller community in Lynton Close compared with the rest of Brent (5% vs 13% respectively). It should be noted that undiagnosed hypertension is common so hypertension screening outreach may be warranted.

Figure 11. Physical long-term health conditions among Romani, Traveller and Roma registered patients in Brent



Source: Discover-NOW (WSIC, extracted 2025)
Physical LTCs counted = asthma, COPD, Bronchiectasis, atrial fibrillation, cancer, CHD, chronic kidney disease, diabetes, epilepsy , heart failure, hypertension, peripheral arterial disease, palliative care, stroke/TIA

Brent

Prevalence of smoking

The prevalence of smoking is higher among adults in the wider Traveller/Roma communities and, to a lesser extent, among the Irish Traveller community in Lynton Close.

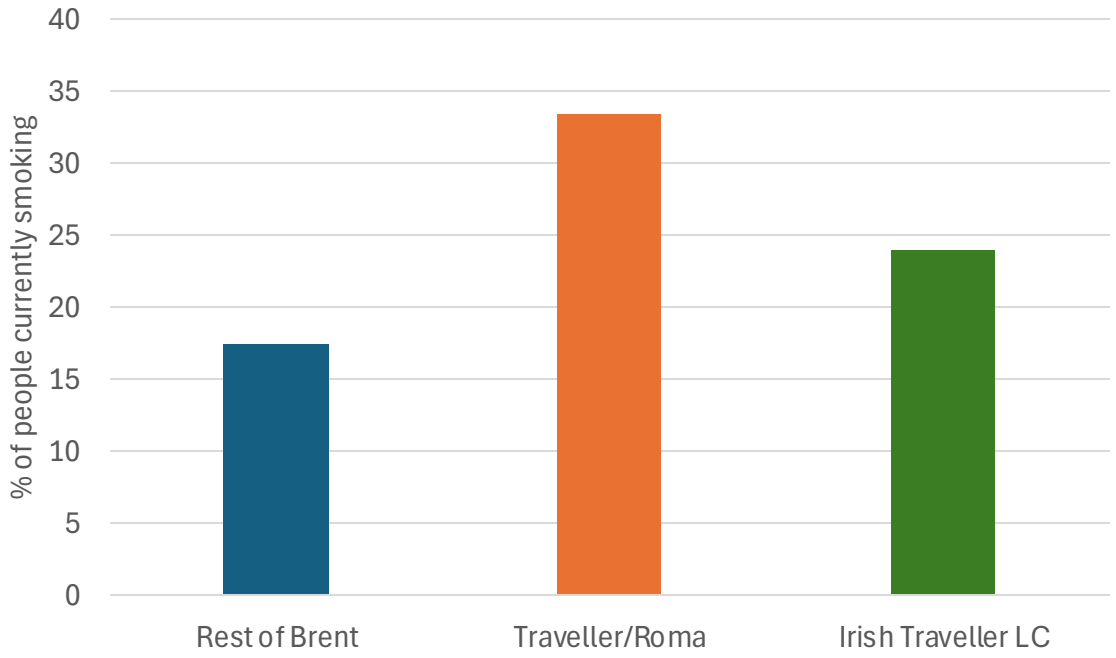
National data from 2013-2025 shows higher a higher prevalence of smoking among Gypsy and Travellers (33%) compared with other white ethnic groups (19%).[1] The General Practice Patient Survey also finds higher levels of smoking among Gypsy and Irish Travellers and a similar prevalence to that found here (25%).[1] Internationally, Roma communities have also been found to have high smoking prevalence, due to social and environmental stressors.

Smoking may be used as a coping mechanism to manage stress and anxiety. Experiences of discrimination, such as those faced regularly by Romani, Traveller and Roma communities, can trigger these negative emotions. Low use of smoking cessation services may also contribute to higher smoking prevalence.

1. Smoking and drinking among the Gypsy and Traveller communities: A population study in England – PubMed

2. Roma Socioeconomic Status Has a Higher Impact on Smoking Behaviour than Genetic Susceptibility - PMC

Figure 12. Smoking prevalence among Romani, Traveller and Roma registered patients in Brent



Source: Discover-NOW (WSIC, extracted 2025)

Brent

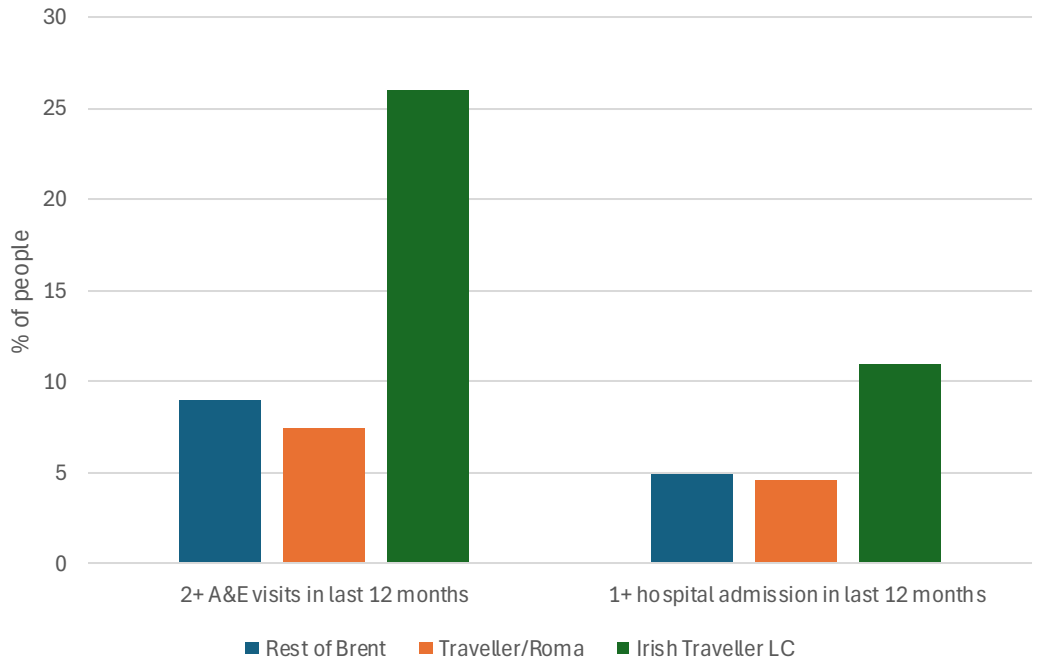
Use of healthcare: hospitals

Over the financial year 2024/25, a higher percentage of people from the Irish Traveller community in Lynton Close had multiple visits to A&E (the Emergency Department) and a higher percentage had a hospital admission, compared with the rest of Brent.

Age, social factors including socioeconomic circumstances, and chronic health conditions are associated with needing and using more health care. After controlling for these factors using statistical models, people from the Irish Traveller community in Lynton Close continued to have higher use of A&E. However, their likelihood of being admitted to hospital was not statistically different from other ethnic groups once these factors were controlled for. Reasons for higher use of A&E should be explored with the Irish Traveller community.

The wider Traveller/Roma communities had a level of hospital activity similar to the rest of Brent.

Figure 13. Hospital care among Romani, Traveller and Roma registered patients in Brent

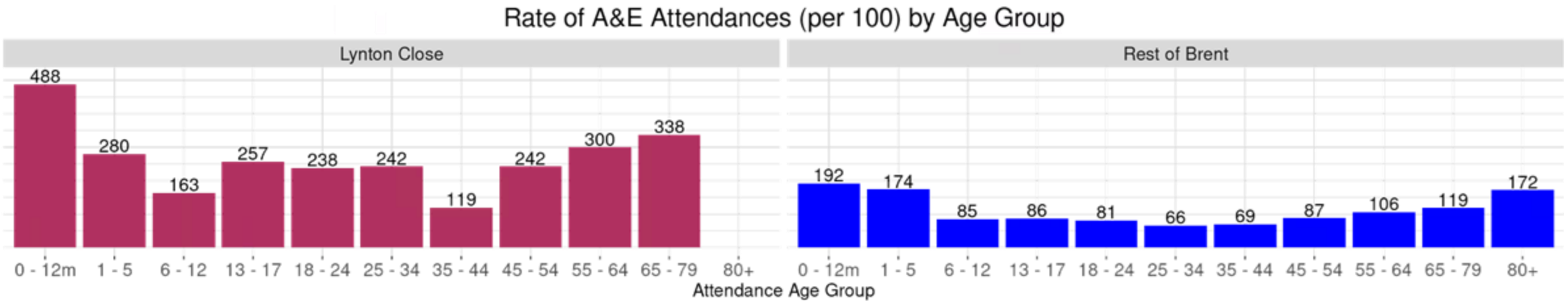


Source: Discover-NOW (WSIC, extracted 2025)
A&E visits between 1st April 2024 and 31st March 2025

Brent

A&E Attendances by age

Figure 14. A&E attendance by age among Irish Traveller patients in Brent



Source: Discover-NOW (WSIC, extracted 2025)
A&E visits between 1st April 2022 and 31st March 2025

At every age group, the Irish Traveller community in Lynton Close has a higher rate of A&E visits compared to the rest of Brent.

The most common chief complaints, treatments, and diagnoses were similar across ethnic groups.

Brent

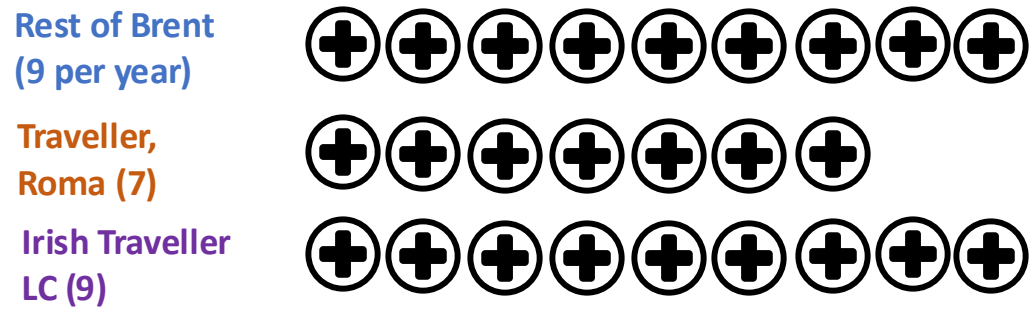
Use of healthcare: general practice

The number of general practice (GP) encounters was similar for people from the Irish Traveller community in Lynton Close and the rest of Brent.

People from the wider Traveller/Roma communities had a lower number of GP encounters compared with the rest of Brent.

GP encounters include face to face visits, telephone calls and online consultations with GPs, nurses, and other general practice staff.

Due to the way GP data is recorded in the system, the numbers presented here may be an overestimate of the true number of GP encounters. Some may be administrative edits to the GP record (for example, uploading test results). This applies to all ethnic groups so does not explain differences between groups.



Source: Discover-NOW (WSIC, extracted 2025)
GP encounters between 1st April 2024 and 31st March 2025

Figure 15. GP encounters among Romani, Traveller and Roma registered patients in Brent

Brent

Use of healthcare: detailed data

Characteristic	Rest of Brent N = 386,477[1]	Traveller/Roma N = 2,548[1]	Lynton Close N = 284[1]
GP Encounters	9 (4, 20)	7 (3, 14)	9 (4, 20)
Hospital Adm.			
0	367,524 (95%)	2,432 (95%)	252 (89%)
1+	18,953 (4.9%)	116 (4.6%)	32 (11%)
A&E Attn.			
0	301,931 (78%)	2,033 (80%)	165 (58%)
1	49,614 (13%)	327 (13%)	45 (16%)
2+	34,932 (9.0%)	188 (7.4%)	74 (26%)
Avoidable A&E Attn.[2]			
0	46,015 (54%)	279 (54%)	64 (54%)
1+	38,531 (46%)	236 (46%)	55 (46%)

[1] Median (Q1, Q3); n (%)

[2] Denominated by number who had 1 or more A&E department attendances.

Table 2. Detailed data on GP encounters among Romani, Traveller and Roma registered patients in Brent

Source: Discover-NOW (WSIC, extracted 2025)

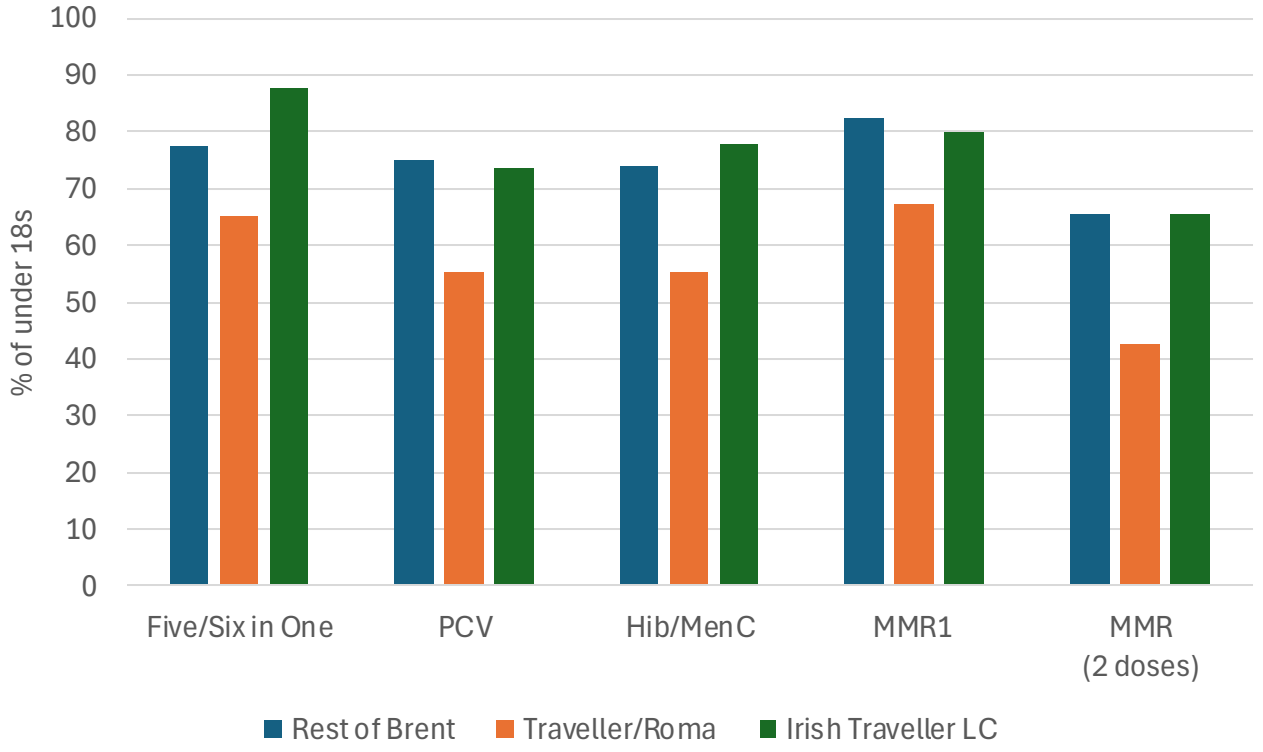
GP attendances between 1st April 2024 and 31st March 2025

Due to the way GP data is recorded in the system, the numbers presented here may be an overestimate of the true number of GP encounters. Some may be administrative edits to the GP record (for example, uploading test results). This applies to all ethnic groups so does not explain differences between groups.

Brent

Childhood immunisation uptake

Figure 16. Childhood immunisations among Romani, Traveller and Roma registered patients in Brent



Immunisation uptake level varies across vaccine and ethnicity but there is a consistent pattern of lower uptake in children from the wider Traveller and Roma communities.

Uptake is higher in the Irish Traveller community in Lynton Close and is at a similar level to the rest of Brent.

The local data contrasts with recent evidence from Scotland on immunisation uptake.[1] In Grampian, immunisation uptake was lower in the Gypsy/Traveller community compared with the white Scottish community and the lowest of all ethnic groups in that area. Levels of uptake in Brent are higher than levels found in Grampian.

There are reportedly strong and positive relations between the Lynton Close community and the general practice serving it and this may contribute to higher childhood immunisation uptake.

Source: Discover-NOW (WSIC, extracted 2025)

5-in-1/ 6-in-1: percentage of population age 1-17 years that have had three doses of the vaccine that protects against diphtheria, tetanus, whooping cough, polio, Hib and hepatitis B
PCV: percentage of population age 1-17 years that have had two doses of the pneumococcal vaccine
Hib/MenC: percentage of population age 1-17 years that have had the Hib/MenC vaccine. This analysis does not account for the withdrawal of this vaccine and changes to administration of vaccines for meningococcal ACWY and haemophilus influenza type b
MMR any: percentage of population age 1-17 years that have had one or more doses of the measles, mumps and rubella vaccine
MMR 2 doses: percentage of population age 1-17 years that have had two doses of the measles, mumps and rubella vaccine

1. Summary of health needs assessment Gypsy, Roma and Traveller Health in Grampian.

Using NHS data

Concerns over the completeness and quality of Romani (Gypsy), Traveller and Roma ethnicity data in NHS data have been widely discussed.[1,2] It is likely that some of these limitations apply to NHS data in Brent. Nevertheless, our analysis of SNOMED CT codes recorded during consultations as well as ethnicity captured at GP registration or hospital visits has allowed us to categorise patients from these communities. The numbers and demographics are similar to those seen in the 2021 census, which provides some reassurance about the data quality. This indicates that the NHS data may be used to identify health needs and monitor progress towards health improvement through local interventions.

This work uses data provided by patients and collected by the NHS as part of their care and support. Using patient data is vital to improve health and care for everyone. There is huge potential to make better use of information from people's patient records, to understand more about disease, develop new treatments, monitor safety, and plan NHS services. Patient data should be kept safe and secure, to protect everyone's privacy, and it's important that there are safeguards to make sure that it is stored and used responsibly. Everyone should be able to find out about how patient data is used.[3]

The individual data cannot be shared but the codes and methods we used are available on request.

1. Equitable data collection for Gypsy, Roma and Traveller communities in health services | Understanding patient data
2. Quality of ethnicity data in health-related administrative data sources, England - Office for National Statistics
3. UPD data citation If you use patient data, acknowledge it | Understanding patient data

Brent