NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Social and emotional well-being in primary and secondary education of guideline

The impact on equality has been assessed during guidance development according to the principles of the NICE equality policy.

1.0 Checking for updates and scope: before scope consultation (to be completed by the Developer and submitted with the draft scope for consultation)

1.1 Is the proposed primary focus of the guideline a population with a specific communication or engagement need, related to disability, age, or other equality consideration? If so, what is it and what action might be taken by NICE or the developer to meet this need? (For example, adjustments to committee processes, additional forms of consultation.)
None

1.2 Have any potential equality issues been identified during the check for an update or during development of the draft scope, and, if so, what are they?
During the development of the draft scope the following potential equality issues were identified. • Age No issues identified.

- Disability

In terms of the most effective ways to deliver interventions to promote social and emotional wellbeing in children and young people consideration will need to be given to those with special educational needs due to:

Higher rates of absence and exclusion: In 2016/17 pupils with special educational needs and disabilities (SEND) (for example, those with a statement of special education needs (SEN) or Education, Health and Care (EHC) plan) had the highest level of absence from school (8.2% of morning or afternoon school sessions missed) compared and 4.3% for pupils without SEND. Also, pupils with SEND (with or without EHC plan) accounted for just over half of all permanent exclusions and fixed period exclusions from school in 2015/16 (Special educational needs in England: January 2018 : Special educational needs: analysis and summary of data sources). These make it more likely that children with SEND will experience poorer outcomes, compared to their peers, as they will miss out on education on social emotional and wellbeing due to increased absence.

- Gender reassignment

According to the Dept for Education (2014) it is relatively rare for pupils – particularly very young pupils – to want to undergo gender reassignment, but when a pupil does so a number of issues will arise which will need to be sensitively handled. Interventions to improve social and emotional wellbeing may need to give consideration to the specific needs of this group.

- Pregnancy and maternity

No issues identified.

- Race

In 2016/17 Black Caribbean pupils had a permanent school exclusion rate nearly three times higher (0.28%) than the school population as a whole (0.10%) (Permanent and fixed-period exclusions in England: 2016 to 2017). This makes it more likely that Black Caribbean children and young people will experience poorer outcomes, compared to their peers, as they will miss out on education on social emotional and wellbeing due to increased absence.

- Religion or belief

No issues identified.

- Sex

The overall rates of mental health problems are similar between the sexes however the type of mental health problem experienced differs between the sexes. This may

have implications for how vulnerable children and young people are identified.

Boys are also more likely to be excluded than girls and will experience poorer outcomes, compared to their peers, as they will miss out on education on social emotional and wellbeing due to increased absence.

- Sexual orientation

Children and young people who identify as lesbian, gay, bisexual or transgender (LGBT) may experience specific challenges such as stigma, discrimination, bullying and mental health difficulties. Young people who do not identify as heterosexual are more likely to have a mental disorder (34.9%) compared to those identified as heterosexual ([Mental Health of Children and Young People in England, 2017](#)). This puts children and young people who identify as LGBT at risk of poorer social and emotional wellbeing.

- Socio-economic factors

Children living in lower income households have higher rates of adverse childhood experiences and tend to be more likely to have a mental disorder (including emotional disorders) ([Hughes 2017](#)). The rates were higher in children whose parents receive low income benefits. This puts children and young people living in low income households at risk of poorer social and emotional wellbeing.

- Other definable characteristics:

  o refugees / asylum seekers

There are known barriers to accessing education for unaccompanied asylum-seeking children including lengthy waiting periods for school places to become available or being unable to access education during periods in temporary accommodation. Young refuges and asylum seekers may also have specific psychological needs based on their experiences, Interventions to improve social and emotional wellbeing may need to give consideration to the specific needs of this group.

  o migrant workers

Children of migrants may face challenges related to language or culture, particularly if their or their parents/carers' do not speak English as a first language or do not speak English. There may also be interruptions in school placement if the work is temporary or seasonal, These make it more likely that children and young people in these families will experience poorer outcomes, compared to their peers, as they will miss out on education on social emotional and wellbeing due to increased absence.

  o looked-after children

In 2018, 39% of children who had been looked after for at least 12 months were demonstrating causes for concern in their emotional and behavioural health (based on Strengths and difficulties questionnaire) ([Children looked after in England including adoption: 2017 to 2018](#)). Interventions to improve social and emotional

wellbeing may need to give consideration to the specific needs of this group.

- o people who are homeless

Children and young people living in temporary accommodation face a number of practical considerations including: transport to and from school, moving from one school to another, and not having suitable space or equipment in which to do their homework and self-care. Interventions to improve social and emotional wellbeing may need to give consideration to the specific needs of this group.

- o prisoners and young offenders

Around 18% of 13–18 year olds in custody have depression, 10% have anxiety, 9% have post-traumatic stress disorder and 5% have psychotic symptoms (Chief Medical Officer annual report 2012: children and young people's health). This puts children and young people in custody at risk of poorer social and emotional wellbeing.

- o Children and young people from gypsy or traveller backgrounds

Children from gypsy and traveller communities who travel with their families can be dual-registered at schools or home-educated. This might lead to inconsistencies in the education received. Interventions to improve social and emotional wellbeing may need to give consideration to the specific needs of this group.

- o Children or young people who are carers

Children and young people who care for other are more likely to miss school Hidden from View (The Children's Society,2013). This makes it more likely that children and young people who are carers will experience poorer outcomes, compared to their peers, as they will miss out on education on social emotional and wellbeing due to increased absence

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1.3 What is the preliminary view on the extent to which these potential equality issues need addressing by the Committee?

Positive outcomes are known to be more difficult to achieve in these population groups and therefore specific recommendations in these groups may need to be made to address this. The committee will be able to use subgroups or sensitivity analyses to identify any need for specific recommendations for these groups.

None of these groups have been excluded from the guideline.

Completed by Developer: Fiona Glen, Programme Director

Date: 12/04/2019

Approved by NICE quality assurance lead: Simon Ellis, Guideline Lead

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