

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Cabotegravir for preventing HIV-1

The impact on equality has been assessed during this appraisal according to the principles of the NICE equality scheme.

Consultation

1. Have the potential equality issues identified during the scoping process been addressed by the committee, and, if so, how?

During the scoping process, the following issues were identified:

- HIV disproportionately affects people of Black African family background. It was also noted that HIV is more prevalent in people of certain sexual orientations such as gay or bisexual men. Key populations most at risk of HIV acquisition may be reluctant to engage in healthcare systems or to access sexual health services because of cultural concerns.
- Lifestyle factors may affect people's ability to attend clinics or adhere to their medication. For example, people who are underserved (for example people who are homeless or who use drugs) may have difficulties adhering to daily oral medication because it needs to be taken at the same time each day, with food. Conversely, long-acting injections may not suit people who cannot easily access their clinic for appointments. Long-acting injections may also benefit young people who may struggle with adhering to oral therapies.
- Cabotegravir will need to be administered in a healthcare setting. This may make it more difficult for people with a disability to access cabotegravir as they may find it more challenging to visit a healthcare setting in person.

- People who are pregnant, planning to become pregnant or breastfeeding may not be able to receive cabotegravir as it has not been widely trialed in these populations.

At the committee meeting, it was noted that issues related to differences in prevalence or incidence of a disease cannot be addressed in this technology appraisal. It was also noted that the recommendation does not restrict access to treatment for some people over others.

2. Have any other potential equality issues been raised in the submissions, expert statements or academic report, and, if so, how has the committee addressed these?

The same equality issues identified during the scoping process were raised. The following additional issues were identified:

- Inequity of access to PrEP in the UK is identified and is significant increased for cis gender women, especially cis gender women of black family background, older age and those living outside London. Stakeholders considered that if recommended, cabotegravir should be implemented in a way that enables access to injectable PrEP across all regions in England.

3. Have any other potential equality issues been identified by the committee, and, if so, how has the committee addressed these?

None identified.

4. Do the preliminary recommendations make it more difficult in practice for a specific group to access the technology compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

No.

5. Is there potential for the preliminary recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

No.

6. Are there any recommendations or explanations that the committee could make to remove or alleviate barriers to, or difficulties with, access identified in questions 4 or 5, or otherwise fulfil NICE's obligations to promote equality?

Not applicable.

7. Have the committee's considerations of equality issues been described in the draft guidance, and, if so, where?

Yes – section 3.21

Approved by Associate Director (name): Ian Watson

Date: 18/09/2024