

## 1.0.7 DOC EIA

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## NICE guidelines

### Equality impact assessment

### Harmful Sexual Behaviour

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

#### **1.0 Scope: before consultation (to be completed by the Developer and submitted with the draft scope for consultation)**

1.1 Have any potential equality issues been identified during the development of the draft scope, before consultation, and, if so, what are they?

Potential equality issues identified in the scope include the extent and nature of harmful sexual behaviour and how it is poorly understood and may vary according to characteristics protected by the Equality Act 2010: age, disability, sexual orientation, race, religion and belief, looked after children and socio-economic status. The effectiveness of interventions may also vary with these characteristics.

**Age:** The scope covers children and young people aged under 18 and young people up to the age of 25 with special educational needs and disabilities. There is little evidence to determine how many children and young people are engaged in harmful sexual behaviour and how this varies with age. This is due in part to difficulties defining harmful sexual behaviour and what constitutes normal sexual development.

**Disability:** There is some evidence to indicate that children with learning disabilities are overrepresented in the justice system. This may be due to the nature of their behaviours.

No evidence relating to other characteristics (gender reassignment, pregnancy and maternity, race, religion and belief and sex/sexual orientation) was identified in the scoping phase.

Although no evidence was identified, there is potential for equality issues to be important with respect to particular groups, such as refugees and asylum seekers, migrants, looked-after children and homeless people.

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1.2 What is the preliminary view on the extent to which these potential equality issues need addressing by the Committee? For example, if population groups, treatments or settings are excluded from the scope, are these exclusions justified – that is, are the reasons legitimate and the exclusion proportionate?

Appendix B of the scope outlines the issues the Committee need to consider and the above issues will be brought to the attention for their consideration.

Completed by Developer \_\_\_Una Canning\_\_\_\_\_

Date\_\_\_11<sup>th</sup> Jan 2016\_\_\_\_\_

Approved by NICE quality assurance lead \_\_\_\_\_

Date\_\_\_\_\_

### **2.0 Scope: after consultation (to be completed by the Developer and submitted with the revised scope)**

2.1 Have any potential equality issues been identified during consultation, and, if so, what are they?

None were identified.

2.2 Have any changes to the scope been made as a result of consultation to highlight potential equality issues?

None.

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2.3 Is the primary focus of the guideline a population with a specific disability-related communication need?

If so, is an alternative version of the 'information for the public' recommended?

If so, which alternative version is recommended?

The alternative versions available are:

- large font or audio versions for a population with sight loss
- British Sign Language videos for a population deaf from birth
- 'Easy read' versions for people with learning disabilities or cognitive impairment.

No the guideline focus is children and young people under 18 with an age extension of 25 for those with special educational needs and disabilities.

Updated by Developer \_\_\_Una Canning\_\_\_\_\_

Date \_\_\_11<sup>th</sup> Jan 2016\_\_\_\_\_

Approved by NICE quality assurance lead \_\_\_\_\_

Date \_\_\_\_\_

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### 3.0 Guideline development: before consultation (to be completed by the Developer before consultation on the draft guideline)

3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?

The committee have made recommendations to address equality issues in relation to age, developmental status, disabilities and looked after children.

3.2 Have any **other** potential equality issues (in addition to those identified during the scoping process) been identified, and, if so, how has the Committee addressed them?

An issue of gender inequality was raised regarding the treatment of adolescent boys with harmful sexual behaviour compared to girls. It was noted that girls with the behaviour are more likely to remain in mainstream school and continue with their education but not boys. A lack of education opportunities is regarded as having a detrimental impact on this group of young people's life chances. The committee agreed that assessments of adolescent boys should be holistic and take all factors into consideration.

3.3 Have the Committee's considerations of equality issues been described in the guideline for consultation, and, if so, where?

In the committee discussion section.

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

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

No.

3.5 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.

3.6 Are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to, or difficulties with, access to services identified in questions 3.1, 3.2 or 3.3, or otherwise fulfil NICE's obligation to advance equality?

The committee discussion has highlighted the need for better awareness and training around the issue of HSB as it is an area that health and social care professionals find difficult to deal with. Failure to deal with the issue can have a detrimental impact on the life chances of those displaying the behaviour.

Completed by Developer \_\_\_\_Una Canning\_\_\_\_\_

Date \_\_\_\_\_ 11<sup>th</sup> Jan 2016 \_\_\_\_\_

Approved by NICE quality assurance lead \_\_\_\_\_

Date \_\_\_\_\_