

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## EQUALITY IMPACT ASSESSMENT

### **Myalgic encephalomyelitis (or encephalopathy)/chronic fatigue syndrome: diagnosis and management**

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

#### **4.0 Final guideline (to be completed by the Developer before GE consideration of final guideline)**

4.1 Have any additional potential equality issues been raised during the consultation, and, if so, how has the Committee addressed them?

Equality issues raised during consultation were mainly consistent with those already detailed in the equalities impact assessment, and considered by the committee in their consideration of the evidence and development of recommendations.

The committee agree these factors need to be considered when delivering care and have added a general recommendation to, 'be sensitive to the person's socioeconomic, cultural and ethnic background, beliefs and values, and their gender identity and sexual orientation, and think about how these might influence their experience, understanding and choice of management' to recommendation 1.1.3.

To raise awareness of the gap in the evidence for pregnant women, women in the post-natal period, and black, Asian and ethnic minority populations these populations have been specified in the research recommendations for the self-management strategies, sleep management strategies, and dietary strategies. In addition a section on pregnancy, childbirth and postnatal care has been added to the committee's discussion in Evidence reviews A-Information for people with ME/CFS, B-Information for health and social care professionals and C- Access to care.

Some stakeholders raised that considerations are needed according to gender. The committee discussed that there is evidence reporting that ME/CFS is more prevalent in women, however they are also aware that this could be due to it being under reported and underdiagnosed in men. They agreed that separate recommendations

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were not needed according to gender, and there is no evidence to suggest that effectiveness of interventions would differ.

4.2 If the recommendations have changed after consultation, are there any recommendations that 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

4.3 If the recommendations have changed after consultation, is there potential for the recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

No

4.4 If the recommendations have changed after consultation, 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 4.1, 4.2 and 4.3, or otherwise fulfil NICE's obligations to advance equality?

No

4.5 Have the Committee's considerations of equality issues been described in the final guideline, and, if so, where?

Consideration of equalities issues has been detailed in the committee's discussion of the evidence in Evidence reviews A-Information for people with ME/CFS, B-Information for health and social care professionals and C- Access to care.

Updated by Developer: Kate Kelley

Date: 07/06/2021

Approved by NICE quality assurance lead: Christine Carson

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