

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Drug misuse prevention: targeted interventions

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?

(Please specify if the issue has been highlighted by a stakeholder)

1. The scope focuses on populations who are most likely to start using drugs, who are already experimenting with drugs, or who use drugs occasionally. The guideline will replace PH4 on interventions to reduce substance misuse among vulnerable young people
2. The groups specifically covered are children, young people and adults who are most likely to start using drugs, who are already experimenting with drugs, or who use drugs occasionally and this includes:
 - People who frequently go to nightclubs or festivals
 - Men who have sex with men
 - Those who are more vulnerable like:
 - a) people with mental health problems
 - b) people involved in commercial sex work or who are being sexually exploited
 - c) children and young people who are not in education or training, including school excludes and truants
 - d) children and young people whose parents use drugs

e) children and young people who are looked after

3. It will not cover:

- People who already dependent on drugs or who use drugs regularly and excessively
- People who are in prison or young offender institutions
- People who are part of on-going drug treatment and recovery

4. A focus on those ‘who are more vulnerable’ potentially means that those who are less vulnerable may not be considered fully in the guidance. This potentially raises a number of equality issues in groups considered less vulnerable across the protected characteristics. The focus of the guidance is on settings and communities and thus does not set out to ‘discriminate’ on the basis of the protected characteristics and the scope is not suggesting that the risk of drug misuse is not present in these less vulnerable communities/populations. The scope has focused on those who are more vulnerable based on the evidences reported by other publications like for example “Drug Misuse: Finding from the 2012 to 2013 Crime Survey for England and Wales (CSEW, 2014)” and “New psychoactive substances in England: a review of the evidence (Home Office, 2014)”

5. Excluding “People who are in prison or young offender institutions” can potentially raise a number of equality issues among inmate population. Nevertheless is give a priori that prisoners in the United Kingdom are already in a prevention/rehab scheme or system.

6. The key activities outlined in the scope include increasing awareness. Within population categorised as more vulnerable there may be potential equality issues regarding the way in which this is done. Consideration needs to be given to the format of information delivery for example those with visual impairments or those for whom English is not their first language. This should be considered in the guideline development process

7. There is also a potential equality issue regarding access to interventions for transient communities such as homeless people and Gypsy, Roma and Traveller communities. The scope and subsequent guideline development process should be aware of this and make provision to consider this in the guidance development process

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?

The committee will need to consider the above issues particularly in terms of the evidence base and thinking about settings for the delivery of interventions to reflect some protected characteristics.

The focus of the scope on who are more vulnerable in the populations is justified.

The exclusion of “people who already dependent on drugs or who use drugs regularly and excessively” and of “people who are part of on-going drug treatment and recovery” is justified by the fact that this guideline focus on the prevention phase only and consequently it excluded anyone who already use drugs.

The exclusion of prisoners is justified given the existing prevention programmes currently universally offered to inmates in England.

Completed by Intern – Emanuele Mortara

Date – 2th February 2015

Approved by NICE

Date

2.0 Scope: after consultation (To be completed by the developer and submitted with the final scope)

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

Stakeholders identified several groups who they thought should be specifically mentioned within the scope, including

- Young people in contact with youth justice
- Roma
- Trans people

- BME groups
- People who are subject to or perpetrate domestic violence.

It was also felt that the exclusion of prisoners and people already in drug treatment in the draft scope was unreasonable.

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

As a result of stakeholder consultation, the exclusion of people already in structured treatment programmes has been removed. The lists of exemplars have not been changed to incorporate the other groups mentioned, partly due to a lack of reliable data, but also because the examples within the scope are clearly marked as examples. None of the groups mentioned are actually excluded, they are simply not specifically referred to in the examples. Prisons as a setting continue to be excluded since they will be covered in the NICE guideline '[Mental health of adults in contact with the criminal justice system](#)'.

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' document 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 who are deaf from birth;
- 'Easy read' versions for people with learning disabilities or cognitive impairment.

The primary focus of the guideline is not a population with a specific disability-related communication need.

Updated by Developer

Chris Carmona

Date

22 April 2015

Approved by NICE quality assurance lead

Simon Ellis

Date
