

Equality Impact Assessment including Children's Rights and Wellbeing Impact Assessment (CRWIA)

Part 1: Background and Information

Title of proposal	Fife Alcohol & Drug Partnership Strategic Plan
Brief description of proposal (including intended outcomes & purpose)	The Fife Alcohol and Drug Partnership Committee are proposing to refresh the ADP strategy to focuses on the current issues and needs of the population whilst looking forward over the next 3 years to ensure that we consider the longevity and relevance of the strategy over its life cycle. It will focus on six main strategic themes: early intervention and prevention, protecting people, a system of care that is easily accessed and of good quality, support for people experiencing multiple disadvantage and support for families, children, young people affected by substance use. Within this there will be a focus on achieving full implementation of the Medication Assisted Treatment Standards and within this to ensure that people with protected characteristic or who are vulnerable, disenfranchised and/or excluded from their local communities experience an equity or service provision and support.
Lead Directorate /	Fife Health and Social Care Partnership
Service / Partnership	
EqIA Lead Person	Elizabeth Butters
EqIA Contributors	Stakeholders, service users, staff, service delivery partners, the wider HSCP, ADPs and HSCPs in other local authority areas in Scotland and relevant external organisations some commissioned nationally by the Scottish Government.
Date of EqIA	21.06.23 (first edition) 27.02.24 (last edition)

How does the proposal meet one or more of the general duties under the Equality Act 2010?

Please refer to the HSCP Equality Impact Assessment Guidance.

Consider proportionality and relevance (See Page 10 of Guidance).

General duties	Please Explain
Eliminating discrimination, harassment and victimisation	The strategy will have an underpinning goal of reducing stigma, educating the local area on inclusivity, and building a sense of all-inclusive community environments.
Advancing equality of opportunity	The ADP strategy will create opportunities tailored to supporting vulnerable individuals to have equal access to services and support despite the issues that they have or are currently experiencing.
Fostering good relations	There will also be alignment to other relevant strategies to ensure a whole system approach is used in conjunction with supporting vulnerable individuals, their friends and their families. The strategy will build upon strong relationship within the HSCP, contracted services and wider external organisations to ensure the best possible opportunities for positive outcomes based on the aims of the strategy and strategies that it affects.

If the decision is of a strategic nature, how does the proposal address socio-economic disadvantage or inequalities of outcome?

Fairer Scotland duty	Please Explain
Socio-economic disadvantage	Statistics around substance use show that they are prevalent in SIMD areas and locality planning of service provision with communities must feature strongly in the strategy. This can be generational cyclical and often families experiencing substance use continue to do so. Further associated issues, poverty, mental health etc further compound prevalence and opportunity to recover. The strategy details how building strategic and operational alliances with across partnerships will address meeting the multiple level of needs.
Inequalities of outcome	Most of the care group experience inequality generally but this is further experienced when multiple disadvantages and/or overlapping of needs mean access of support and treatment is too challenging. This often caused by a traditional, single issue/siloed approach of service design and failure to recognised tailored delivery required by those with protected characteristics. The strategy is to layout pathways for better outcomes for a service user group that traditionally, do not receive the same access to vital services due to the barriers that they face and institutional stigma.

Having considered the general duties above, if there is likely to be no impact on any of the equality groups, parts 2 and 3 of the

impact assessment may not need to be completed. Please provide an explanation (based on evidence) if this is the case.

An Equality Impact Assessment is required due to the impact that it may have on vulnerable individuals and families residing within Fife.

Part 2: Evidence and Impact Assessment

Explain what the positive and / or negative impact of the strategy is on any of the protected characteristics. If there is no impact, please explain why.

Protected characteristic	Positive impact (May benefit an equality group.)	Negative impact (Could disadvantage an equality group.)	Mitigations (Steps we will take to reduce the risk of disadvantage by an equality group.)	No Impact
Age (including older people aged 65+)	The strategy supports all vulnerable people including those above the age of 65. The aim is to ensure that all vulnerable groups are identified, considered and represented within the direction of the new ADP Strategy. The strategy will have a positive impact for those		Assertive service methodologies will be considered and embedded where appropriate. Lessons learned sessions will be used to improve service delivery. Statistical data will be used to review service delivery efficacy.	

Protected characteristic	Positive impact (May benefit an equality group.)	Negative impact (Could disadvantage an equality group.)	Mitigations (Steps we will take to reduce the risk of disadvantage by an equality group.)	No Impact
	experiencing any issues relating to drugs and/or alcohol.			
Disability (Mental, Physical, Sensory, and Carers of Disabled People)	The strategy is designed to encompass all groups including minority and protected groups. The aim is to ensure that all vulnerable groups are identified, considered and represented within the direction of the new ADP Strategy. The strategy will have a positive impact for those experiencing any issues relating to drugs and/or alcohol.	If the information is not targeted well enough and presented in the appropriate language, then it may miss the opportunity to engage a vulnerable person.	There will be a greater focus on education and ensuring information on drugs and alcohol is easily accessed and targeted in a way that they are understandable. A link to the mental health strategy will be built upon to create a joined-up approach. Support groups held in facilities with full access	
Gender Reassignment	As above.	Generic service delivery may be off-putting to those struggling with stigma and lack of	Services are asked to consider how they will address any potential negative impact and	

Protected characteristic	Positive impact (May benefit an equality group.)	Negative impact (Could disadvantage an equality group.)	Mitigations (Steps we will take to reduce the risk of disadvantage by an equality group.)	No Impact
		understanding around gender reassignment. Lack of education within services could be damaging.	inclusivity. Services will require training and the knowledge to provide tailored services that are considerate to complex cases.	
Marital Status (Marriage and Civil Partnerships)	As above.		An increase in dedicated services and prevention and early intervention may ensure that drug/alcohol issues cause less relationship breakdowns.	
			A focus on a whole family approach may also reduce numbers for relationship breakdowns within this area of concern.	
Pregnancy and Maternity	As above.		Ensure services are advertised to and made available to all.	

Protected characteristic	Positive impact (May benefit an equality group.)	Negative impact (Could disadvantage an equality group.)	Mitigations (Steps we will take to reduce the risk of disadvantage by an equality group.)	No Impact
			Engagement with public and private health services for signposting and advice. Links to HSCP and Public Health stratagem.	
Race (All Racial Groups including Gypsy/Travellers)	As above.	If services do not recruit with a focus on diversity and ensure staff work with cultural sensitivity, then vulnerable individuals may become alienated by the services that they crucially need.	Ensure services are advertised to and made available to all. Support commissioned services to attend training, employ ethnic diversity and build skills and knowledge around the needs of different race groups and cultures including gypsy/travellers. Request service user demographics as part of quarterly contracts monitoring to ensure the services have full reach.	

Protected characteristic	Positive impact (May benefit an equality group.)	Negative impact (Could disadvantage an equality group.)	Mitigations (Steps we will take to reduce the risk of disadvantage by an equality group.)	No Impact
Religion, Belief, and Non-Belief	As above.	Generic services may be off-putting to those struggling with stigma and lack of understanding around complex religious beliefs and alcohol/drug use. If services are not discrete the service users will likely not engage in fear of their issues becoming public knowledge.	Ensure services are advertised to and made available to all. Create safe, psychologically informed services (within MAT 10) to address the service user's issues whilst respecting their religious beliefs and position within their families	
Sex (Women and Men)	As above.	Women can find attending mixed gender services intimidating especially when they are predominantly accessed and attended by men.	Ensure services are advertised to and made available to all. A review of services equality and diversity procedures should be undertaken especially given that the Fife area is above the national average for alcohol related deaths in women.	

Protected characteristic	Positive impact (May benefit an equality group.)	Negative impact (Could disadvantage an equality group.)	Mitigations (Steps we will take to reduce the risk of disadvantage by an equality group.)	No Impact
			The one stop shop service in Levenmouth is working with women to establish a dedicated space and group to meet their needs.	
Sexual Orientation (Heterosexual, Gay, Lesbian and Bisexual)	As above.	Generic service delivery may be off- putting to those struggling with stigma and lack of understanding around gender reassignment. Lack of education within services could be damaging	Ensure services are advertised to and made available to all.	

Please also consider the impact of the policy/strategy/process change in relation to:

	Positive impact	Negative impact	Mitigations	No Impact
Armed Forces	As above.	Individuals currently serving in	Fife ADP Services	
Community		the armed forces, veterans,	are Fife wide and	
_		and their family members, may	changes within the	

		be disadvantaged by changes to service provision resulting in delayed or limited access to health and social care, housing or educational services. The Armed Forces Covenant places specific requirements on the Integration Joint Board/Health and Social Care Partnership which should be considered prior to any proposed changes.	locality are manageable to ensure continuity of care. ADPs are funded nationally and adhere to national Scottish Government evidenced based policy and strategy and as such service provision is broadly similar if people move from HSCP to HSCP. Service must ensure they ask about armed forces status in order to sign post people to additional veteran support provided in the area	
Carers	As above.	Carers may be disadvantaged by changes to services provided to those they care for. Often these impacts can be significant, such as affecting their ability to combine caring with employment, a breakdown in the caring role, economic hardship, or a negative impact on the carer's own health and	The strategy addresses the needs of family members in a caring or non-caring role and support is provided directly to them via their own dedicated service. They may also	

		wellbeing.	benefit from advocacy service commissioned by the ADP. There are developments in terms of pathways and WFD to assist people presenting at Fife Carers Centre.	
Looked After Children and Care Leavers	The analysis of targeted groups for the strategy have identified that this group needs more focus from the strategic aims.		Engagement with education, social work and young people's services will be vital in ensuring that information and actions are tailored and appropriate for the group. ADP commissions a young person service which works with all children from 12 to 26 affected by their own or someone else's substance use	
Privacy (including information security, data protection, and human rights)	As above.			There should be no significant impact due to aligning to GDPR regulations,

				data protection and utilising a human rights-based approach.
Economy	As above.	Funding will continue to put pressure on the partnership with re-commissioning and gap analysis required to ensure that funds are utilised fully and reach those in greatest need. Organisations will find the process uncomfortable as re- commissioning services has not been done for some time. Relationships may be affected.	Fair and transparent commissioning processes will be followed. Good communication will be needed to ensure existing funded organisations feel included and that their views and opinions are listened to. This strategy was developed in partnership with commissioned services both third sector and statutory	

- Please record the evidence used to support the impact assessment. This could include officer knowledge and experience, research, customer surveys, service user engagement.
- Any evidence gaps can also be highlighted below.

Evidence used	Source of evidence
Participation and Engagement:	Direct feedback from public, service users and professionals as directed

 Surveys Consultation meetings ADP events with ELT and wider stakeholders Lived Experience Panel involvement and consultation with family members' groups Stakeholder event group feedback and individual 	by HSCP Participation & Engagement Officer in development of vision, mission statements, strategic themes and values.
input via Jam Boards.	Users.
Fife ADP attendance at Lived Experience Panel and SFAD groups	Direct discussion with service users engaging in the groups.
Direct feedback and input from commissioned services via project board group.	Direct discussion in reviewing the previous strategy and development of vision, mission statements, strategic themes and values inputting into a draft copy of the new strategy document.
Evidence gaps	Planned action to address evidence gaps
Education & Prevention	Evidence base is evolving and close links with education will establish a joined-up approach to the needs of young people and children in schools as indicate in Education Health and Wellbeing Survey.
Women	Rising substance use related harm with women which is disproportionate to usage and prevalence
Prison service	Work is already underway to engage with SPS and ensure that the needs of those leaving police custody are supported within the ADP provision within the new strategy.
Older populations linked to harm alcohol use	Providing services and support to people at risk of alcohol specific harm and death who are older adults.
Mental Health and Substance Use	People with dual diagnosis as well as people experiencing emotional wellbeing support and substance use (dependent and non-dependent) require an aligned and integrated approach to their care. Work is already underway as part of MAT 9 implementation.

If this proposal will impact on children/young people's rights either directly or indirectly, please complete Part 3. If this proposal will have no impact on children/young people's rights, provide an explanation below and continue to Part 5.

A Children's Rights and Wellbeing Impact Assessment (CRWIA) is not required because they are not our primary target group at this point. However, further strategies may look toward education and prevention methods in schools.

Part 3 – Children's Rights & Wellbeing Impact Assessment

Which UNCRC Articles are relevant to the policy/procedure/strategy/practice (Please check Guidance for information)	Articles: 3, 5, 6, 12, 17, 18, 19, 24, 33, 34, 39 and 41.
What impact will the policy/procedure/ strategy/practice have on children's rights?	 □ Negative ⊠ Positive □ Neutral
Will there be different impacts on different groups of children and young people?	Yes. Children, young people and their families affected by substance use will receive additional service provision and support
What options have you considered to modify the policy/procedure/strategy/practice or mitigate any negative impact?	The strategy should have a more far-reaching positive impact on children and young people than the previous strategy.
How will the policy/procedure/strategy/practice contribute to the wellbeing of children and young people?	Encouraging harm reduction approaches, supporting education around the harms of alcohol and drugs, media campaign targeted at young people.
How will the policy/procedure/strategy/practice promote the Rights of the Child?	By providing them with the opportunity to make decisions based on the facts.
Have you engaged with children & young people in the development of this policy/procedure/ strategy/practice?	 Yes – Please complete Part 4 A third sector youth forum has been consulted on the strategy and this has been added to the final version. A youth friendly version of the strategy will be developed with their support.
	\Box No – please explain why

• Please record the evidence used to support the children's rights and wellbeing impact assessment. This could include demographic information, academic research, service monitoring/inspection reports, user surveys etc. Look at what existing evidence tells you about children and young people's views and experiences. Identify any gaps in the evidence base and advise how you will address these.

ategy
endly version

Part 4 – Children's Rights & Wellbeing – Engagement and Participation of Children and Young People

Engagement and participation with children and young people should incorporate the 7 golden rules of participation. Please tell us how you made sure these were followed during participation and engagement

1.	Understand my rights	How did you ensure that the child/children or young people had an understanding about their rights?
	This was completed by a third sector organisation who meet weekly with the young people in the youth forum. They hav been supported in their role of volunteering and have a good understanding of their rights.	
2.	A chance to be involved	Did children and young people understand the project, and what is being asked of them How did you ensure that all communication was accessible?

		How did you meet the needs of all children and young people taking part?		
	to explain sections of th	brum were able to ensure that the communication was accessible and found alternative approaches the strategy. The staff know the young people in the forum very well and are capable of meeting associated with understanding and processing information.		
3.	Remember it's my choice	How did you make sure you gave children and young people choices?		
	people. For example th	cessary changes to the strategy based on the advice and guidance provided to us from the young ey pointed out that drug and alcohol education provided to young people needs to not just be commodate those not currently able to attend school. This has been amended in the strategy		
4.	Value Me	How did you make sure that children and young people know their views have been taken seriously and have made an impact?		
	return the strategy to th	strategy and made reference to the group's contribution in the main body of the report. We will em once it has been approved by the HSCP's Integrated Joint Board. We have also agreed to work uth friendly version of the strategy.		
5.	Support Me	How did you identify and overcome any barriers to participation?		
	We identified a team w	no knew the young people well and could plan effectively for full participation of the group.		
6.	Work Together	How well did working together achieve aims of participation?		
	By asking a service to act as an independent intermediary with also existing relationships with young people this encouraged all participants to contribute fully.			
7.	Keep in Touch	What have you planned to ensure that children & young people are informed of the outcome/decision?		

The strategy will be shared again with the youth forum and their contributions will be reflected. They have asked to lead on production of a youth friendly version of the strategy to help other young people and this will be actively supported by the ADP.

What impact has the engagement/participation made?

It has changed some of the delivery plan and it has changed how the strategy will be presented to children and young people by producing a youth friendly version with the third sector youth forum.

Part 5: Recommendations and Sign Off

(Recommendations should be based on evidence available at the time and aim to mitigate negative impacts or enhance positive impacts on any or all of the protected characteristics).

Recommendation	Lead Person(s)	Timescale
 Consider review of this EQIA quarterly within the Joint Commissioning Group of the ADP 	ADP Coordinator	Quarterly

By signing off the EqIA including CRWIA, you are agreeing that the EqIA including CRWIA represents a thorough and proportionate analysis of the policy based on evidence listed above and there is no indication of unlawful practice, and the recommendations are proportionate.

Date completed: 15 th March 2024	Date sent to Compliance Team: 27 th February 2024
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Senior Officer Name: Fiona McKay	Designation: Head of Strategic Planning, Performance and Commissioning

FOR COMPLIANCE TEAM ONLY

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