



Response to the Police Service of Northern Ireland: Use of Spit & Bite Guards Equality Impact Assessment 2021

Children's Law Centre

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Introduction

The Children's Law Centre (CLC) is an independent charitable organisation established in September 1997 which works towards a society where all children can participate, are valued, have their rights respected and guaranteed without discrimination and every child can achieve their full potential.

Our organisation is founded on the principles enshrined in the United Nations Convention on the Rights of the Child (UNCRC), in particular:

- Children shall not be discriminated against and shall have equal access to protection.
- All decisions taken which affect children's lives should be taken in the child's best interests.
- Children have the right to have their voices heard in all matters concerning them.

We offer training and research on children's rights, we make submissions on law, policy and practice affecting children and young people and we run a legal advice/information/ representation service. We have a dedicated free phone legal advice line for children and young people called CHALKY and provide legal information through an online platform known as 'REE'. We also undertake strategic litigation to vindicate children's rights.

From its perspective as an organisation which works with and on behalf of children, both directly and indirectly, CLC is grateful for the opportunity to make this submission to the Police Service of Northern Ireland in respect of their Equality Impact Assessment vis-à-vis their use of Spit and Bite Guards.

Definition of a policy

It is well acknowledged that the intention of section 75 is to mainstream equality, making it central to policy decision making. In order for an equality perspective to be central to policy making, it needs to be incorporated in all policies at all levels and stages.

The Equality Commission Guidance states that:

"Whatever status or label is accorded to an amended or new policy, for example, 'draft', 'pilot', 'high level strategy' or 'sectoral initiative', the equality and good relations implications must be considered in terms of assessing the likely impact of a policy and the Commission recommends applying the screening procedure (Annex 1) and, if necessary, subjecting the policy to an equality impact assessment".¹

¹ Equality Commission for Northern Ireland (revised June 2004). Practical Guidance on Equality Impact Assessment

CLC are therefore firmly of the view that the use of Spit and Bite Guards by the PSNI is a policy for the purpose of Section 75.

Discharge of the duties under Section 75 of the Northern Ireland Act 1998 must be integral to the development of this policy from **the earliest possible stage i.e. when the policy is first being formulated**. Therefore, the Equality Impact Assessment should have been undertaken **before** the PSNI purchased and issued Spit and Bite Guards to their officers. In that context we note that the PSNI introduced Spit and Bite Guards in March 2020 without having first discharged their statutory equality duty. By not doing so, the PSNI have breached both their duties under section 75 of the Northern Ireland Act 1998 and their own Equality Scheme.

Furthermore, we note that equality duties continue during the Covid-19 pandemic period. The Equality Commission have emphasised the importance of discharging Section 75 duties in the context of the need to legislate and develop policy quickly. They also recognise that decisions made in the context of Covid-19 may actually exacerbate the disadvantage already suffered by some of the protected categories. This is restated in the [Advice Note](#) issued by the Equality Commission, for public authorities on the Section 75 duties when developing Covid-19 related policies.

The PSNI enjoy a Section 75 duty in respect of the use of Spit and Bite Guards; their use being a policy for the purpose of Section 75 compliance. Spit and Bite Guards were deployed to custody staff on 16th March 2020; Covid-19 response crews and officers deployed in cell vans on 31st March 2020; and Armed Response Unit on 22nd April 2020, with the Chief Constable extending the provision of Spit and Bite Guards to all frontline officers on 25th January 2021, yet this EQIA process was not launched until 1st March 2021. Further, the fact that this EQIA consultation on the use of Spit and Bite Guards has now been issued by the PSNI confirms that this is a policy decision on which the PSNI are also required to consult under their Equality Scheme.

The failure to undertake an EQIA and consult in respect of the EQIA a clear breach of Section 75 of the Northern Ireland Act 1998 and the PSNI's Equality Scheme. Discharge of the duties under Section 75 of the Northern Ireland Act 1998 must be integral to the development of the policy vis-à-vis the PSNI's use of Spit and Bite Guards from the earliest possible stage and therefore consultation on the Equality Screening and EQIA should have taken place **before** Spit and Bite Guards were purchased and issued to PSNI officers.

CLC are firmly of the view that given the 'controversial and contentious' nature of the purchase of Spit and Bite Guards, it is for the NI Policing Board to authorise their purchase. Notwithstanding that the decision vis-à-vis authorisation of the purchase of Spit and Bite Guards rests with the Board, the PSNI's policy in respect of and deployment of Spit and Bite Guards also constitutes a policy for the purposes of S75 duties and therefore the PSNI are still required to comply with their scheme and fully discharge their statutory duty in this instance.

Consideration of available data and research

The Equality Impact Assessment states that:

“During March 2020, the risks from this new coronavirus were largely unknown and the Chief Constable took a measured and considered approach to the mitigation of the European Convention on Human Rights (ECHR) Article 2 (Right to Life) and Article 3 (Torture, Inhuman or Degrading Treatment) risks faced by officers and staff. Coronavirus (Covid-19) is a new virus, and its effect, including transmission leading to infection, is still being researched, and is not fully understood, leading to uncertainty. There is a high degree of uncertainty with this particular virus hence all measures to protect individuals from possible spread from all such means are important.”²

However, in June 2020 in response to a request by Amnesty International NI to provide any evidence that the hoods actually prevented or inhibited the spread of Coronavirus, the PSNI acknowledged to Amnesty that the manufacturers explicitly declare that spit hoods provide no protection against COVID-19 spread, stating:

“The product will not prevent aerosols from coughing or sneezing and is therefore not an effective means to prevent Covid-19.”³

Noting that the PSNI acknowledge that the manufacturers are clear Spit and Bite Hoods provide no protection from COVID-19, CLC assert that the basis and rationale for the introduction of spit hoods by the PSNI is and was wholly incorrect. It is clear that there is and never was any evidence for the PSNI’s assertion vis-à-vis necessity. Notwithstanding the ECNI’s advice regarding the imperative of public authorities discharging their equality duty during COVID-19, in the absence of evidence regarding their effectiveness in the prevention of transmission of COVID-19, there was clearly no urgency which would require their purchase and deployment in advance of proper discharge of the PSNI’s equality duty.

The Equality Impact Assessment further states that:

“Article 3 of the United Nations Convention on the Rights of the Child (UNCRC) requires that we consider the best interests of children to be a primary consideration in all actions concerning children.... In respect of Spit and Bite Guard use on vulnerable people and children the following paragraph is quoted in the policy:

“If you are aware that the subject has mental health or another debilitating condition, which the use of a Spit and Bite Guard could exacerbate, the presumption will be that a Spit and Bite Guard should not be used. Where officers or staff are aware that a member of the public is under 18, the presumption will be that a Spit and Bite Guard should not be used.”

² Page 18 Equality Impact Assessment 2021: The Use of Spit and Bite Guards by the Police Service of Northern Ireland consultation document

³ <https://www.amnesty.org.uk/blogs/belfast-and-beyond/case-against-use-spit-hoods-response-covid-19>

In relation to the requirement that the best interests of children should be the primary consideration, the Committee on the Rights of the Child are extremely clear:

*“The Committee emphasizes that the reaction to an offence should always be proportionate not only to the circumstances and the gravity of the offence, but also to the personal circumstances (age, lesser culpability, circumstances and needs, including, if appropriate, the mental health needs of the child), as well as to the various and particularly long-term needs of the society. A strictly punitive approach is not in accordance with the principles of child justice spelled out in article 40 (1) of the Convention. Where serious offences are committed by children, measures proportionate to the circumstances of the offender and to the gravity of the offence may be considered, including considerations of the need for public safety and sanctions. **Weight should be given to the child’s best interests as a primary consideration** as well as to the need to promote the child’s reintegration into society.”⁴*
(Our emphasis).

Furthermore, given the immediacy of the situation in which it is asserted Spit and Bite hoods will be used CLC is challenged as to how a PSNI officer will be able to ascertain if an individual ‘has mental health or another debilitating condition, which the use of a Spit and Bite Guard could exacerbate’ or of if the person is under 18. Nor is it clear what is meant by staff being ‘aware’. Does this require them to take steps to ascertain this information, what would constitute reasonable steps, how do they become aware? This clearly does not constitute mitigation in respect of the adverse impact of the use of Spit and Bite Hoods.

Further given that between 16th March 2020 and 17th February 2021 that Spit and Bite Guards have been used by the PSNI 8 times on children and in 68 out of 84 uses of Spit and Bite Guards the subject reported a disability, or police noted a disability, these measures are clearly not mitigating the potential for differential adverse impact in respect of s75 categories. It also evidences significant failures in training in the use of these weapons.

Therefore, given the overuse on those with a disability, the significant use on children and the fact that the rationale for introducing spit hoods never existed, the PSNI should cease the use of spit hoods with immediate effect.

CLC note in the ‘medical considerations’ of the consultation document⁵, there are two examples of police officers who died following being spat at. CLC acknowledge and support reasonable and proportionate measures to ensure officer safety, however to ensure informed decision making and a robust and honest consultation, the Equality Impact Assessment should also acknowledge the concerns about officer safety in relation to fitting Spit and Bite Guards:

⁴ General Comment 24: Children’s Rights in the Child Justice System CRC/CGC/24

⁵ Page 22 of the consultation document

“Amnesty’s policing experts warn that the process of fitting the hood, and the likely ensuing struggle would result in a ‘cloud of virus particles’ as the struggle is likely to be a ‘significant aerosol generating event’. Once placed over someone’s head, the spit hoods themselves would do nothing to prevent the further spread of the virus via coughing, sneezing or exhalation. The use of spit hoods may therefore not only fail to offer the promised protection, but could in fact place police staff in greater peril.”⁶

It is therefore the case that not only do spit hoods not protect officers they in fact do the reverse in that they generate a significant aerosol generating event thereby putting officers at more risk.

Furthermore, in a briefing authored by the Children’s Rights Alliance England⁷ it states that:

“Risk assessments by the police have highlighted the dangers of breathing restriction and asphyxia and the Independent Office of Police Conduct (IOPC) has investigated the deaths of several adults following the use of spit-hoods. Deaths have been attributed to spit-hoods both in the UK and US, including Jonathan Pluck in Cambridgeshire when in 2009 he was restrained in a cell, strip-searched and left face down on a mattress, and Terry Smith in 2013.

Another concern is the requirement for a person to be handcuffed before the spit-hood is employed. This means a person would be unable to remove it quickly in an emergency and can only draw attention to difficulties if they are able to speak and are listened to.

Given these concerns, it is extremely worrying that there has been no assessment of how safe they are to use on under-18s and there is no national guidance for spit-hoods use on children.”

Given the lethal nature of these spit hoods and the absence of independent medical evidence, research and data on how safe they are to use on children, including children with disabilities, the PSNI should cease use of spit hoods on under 18s immediately. Such disaggregated data and independent information are an absolute pre-requisite to the PSNI being able to discharge their section 75 duty and central to the PSNI’s ability to carry out a screening exercise particularly given the potential gravity of the using spit hoods in Northern Ireland.

The Equality Commission are clear on this point, stating in their guidance for public authorities that:

⁶ <https://www.amnesty.org.uk/blogs/belfast-and-beyond/case-against-use-spit-hoods-response-covid-19>

⁷ https://yjlc.uk/wp-content/uploads/2020/04/CRAE_POLICING-SPITHOODS_PRINT.pdf

“Assessing the adverse impact of public policy across all nine categories cannot be effectively undertaken unless qualitative and quantitative data relevant to all the Section 75 categories are available and accessible.”

The Equality Commission further state that:

The information used by the public authority in assessing the impact of the policy must be made available on request to those consulted. This will include any quantitative and qualitative data and other documentation such as consultants' reports. In making information available it will not be sufficient or appropriate for a public authority to state that no data are available and therefore no impact/adverse impact has been concluded.”⁸

In relation to the study carried out by Dr Aw-Yong⁹ that concluded that the use of the Spit and Bite Guard did not cause a clinically significant impact on oxygen saturations of healthy individuals during physical activity, given that this test is undertaken on healthy adults, that are not panicked or stressed as they are anticipating the Spit and Bite Guard being fitted, it is not possible to extrapolate from this study on healthy adults to the potential impact on vulnerable and disabled children including those with mental ill health or children who may be under the influence of drugs and /or alcohol. Medical evidence should be independent and robust including across the profile of individuals who are likely to come into contact with the PSNI.

Notwithstanding that Spit and Bite hoods are not fit for the purpose for which they were allegedly introduced, independent medical evidence is central to the proposal to use spit hoods in Northern Ireland and should have been considered in advance of any introduction of Spit and Bite Hoods. It is absolutely vital that this evidence is collected in a controlled and safe scientific environment with the necessary level of expertise to ensure adequate rigorous testing which will determine the impact that spit hoods will have on individuals, in particular children and young people, children and young people with a disability or mental health conditions. Such evidence does not currently exist.

Engagement

The PSNI's Equality Scheme¹⁰ states that:

“PSNI want to ensure that the services it delivers are accessible and fair to all. We will publish information in formats that are accessible by all including those whose first

⁸ Section 75 of the Northern Ireland Act 1998 Practical Guidance on Equality Impact Assessment, Equality Commission for NI

[https://www.equalityni.org/ECNI/media/ECNI/Publications/Employers%20and%20Service%20Providers/Public%20Authorities/EQIA-PracticalGuidance\(2005\).pdf](https://www.equalityni.org/ECNI/media/ECNI/Publications/Employers%20and%20Service%20Providers/Public%20Authorities/EQIA-PracticalGuidance(2005).pdf)

⁹ Page 25 of the consultation document

¹⁰ <https://www.psnipolice.uk/globalassets/inside-the-psni/our-policies-and-procedures/equality-diversity--good-relations/section-75-equality-scheme-booklet/equality-diversity--good-relations-strategy-2017---2022.pdf>

language is not English and those who have difficulty communicating in written form.

This will include making use of interpreting services which enable access to information and services. We will increasingly use new technology to engage different audiences and ensure that we continue to improve our services in light of what you tell us. We recognise the importance of consultation in all aspects of the implementation of our statutory equality duties and we are committed to continuing to carry out consultation in accordance with the general consultation recommendations contained in the Equality Commission guidance, “Section 75 of the Northern Ireland Act 1998 – A Guide for Public Authorities” published in April 2010.

In particular PSNI will:

- *allow sufficient notice for consultation (12 weeks) except in exceptional circumstances when we will guarantee a minimum of 8 weeks;...*
- *produce any consultation document in accessible formats;...*
- *use a variety of formats to consult e.g.:*
 - *face to face meetings*
 - *Email*
 - *online media such as Facebook, Twitter*
 - *telephone*
 - *written documents in various languages;*
- *having initially notified all consultees, target consultation exercises towards those affected by the policy in question;*
 - *use specific techniques to engage:*
 - *young people and children*
 - *people with learning disabilities*
 - *minority ethnic communities*
 - *disadvantaged communities.*

We would therefore be grateful if you would provide us with details by return of how you have or intend to consult directly with children and young people as one of the groups most impacted upon in relation to the use of Spit and Bite Guards by the PSNI.

Such a consultation is essential not only in ensuring compliance with section 75, but also in ensuring the PSNI's compliance with Article 12 of the UNCRC, one of the principles of the UNCRC – respect for the views of the child. In examining the government's compliance with Article 12, the UN Committee on the Rights of the Child recommended that the government:

“Establish structures for the active and meaningful participation of children and give due weight to their views in designing laws, policies, programmes and services at the local and national levels, including in relation to discrimination, violence, sexual exploitation and abuse, harmful practices, alternative care, sexual and reproductive

education, leisure and play. Particular attention should be paid to involving younger children and children in vulnerable situations, such as children with disabilities.”¹¹

The UN Committee on the Rights of the Child is clear that children and young people as rights holders, with their own views and concerns, should be actively engaged and involved in the policy development process.

The Equality Commission’s Guidance for Public Authorities on implementing section 75 of the Northern Ireland Act 1998 states that in conducting consultations, the accessibility of language and the format of information should be considered to ensure that there are no barriers to the consultation process, with information being made available on request in accessible formats. Systems should be put in place so that information can be made available in accessible formats in a timely fashion. In addition, the Commission’s Guidance recommends that specific consideration is given to how best to communicate information to children and young people, people with learning disabilities and minority ethnic communities.¹² The Equality Commission’s Guidance for Consulting with Children and Young People, “Let’s Talk, Let’s Listen”¹³ reminds public authorities that children and young people have particular needs concerning information and that actions should be taken by duty bearers to facilitate young people to take part in consultation and decision making processes, especially on issues that affect them. It emphasises the particular importance of considering which methods are most appropriate for consulting children and young people. Public authorities should also make sure to provide information which is clear, easy to understand and in an appropriate format, to ensure there are no problems preventing effective consultation with children and young people.¹⁴

We would be grateful if the PSNI would forward copies of their child accessible versions of the Equality Impact Assessment in relation to the use of Spit and Bite Guards by the PSNI by return. We would also request by return, details of the system which will be used to analyse responses to the EQIA, including the weight which will be attributed to both individual and organisational responses. This is a vital element in drawing conclusions from responses. For this reason, we would appreciate information both on the system itself and on its operation for the purposes of analysis.

Assessment of Impact

It is noted that following representations made on the use of Spit and Bite Guards on children, that the PSNI updated its policy to include the instruction:

¹¹ CRC/C/GBR/CO/para 31 (a)

¹² Page 38

¹³ ‘Let’s Talk, Let’s Listen: Guidance for public authorities for consulting and involving children and young people’, Equality Commission for Northern Ireland, May 2008

¹⁴ Ibid, para 2.26

“Where officers or staff are aware that a member of the public is under 18, the presumption will be that a Spit and Bite Guard should not be used.”

However, the consultation document goes on to say:

“If a Spit and Bite Guard was placed over a child’s head and this causes a flashback to a traumatic event, a referral can be made to an organisation such as Start 360 who specialise in helping young people between the ages of 11 and 24.”

This goes against the presumption that Spit and Bite Guards should not be used on a child or on those with ‘*mental health or another debilitating condition*’. CLC would request details of engagement between the PSNI and Start 360 in relation to referrals being made for trauma counselling. It is CLC’s understanding that Start360 run a number of programmes relating to employability and drug and alcohol misuse rather than trauma counselling for issues such as child abuse.

Furthermore, in a briefing by the Children’s Rights Alliance England on Spit and Bite Guards¹⁵ it has been found that:

“Recent developments in neuroscience have also identified that the brain development and specifically the frontal lobes (the area of the brain that helps regulate decision-making and the control of impulses that underpin behaviour) are still developing into a human’s 20s. This will affect a child’s ability to cope in a stressful situation with the police. Using a spit-hood risks not only heightening their fight or flight mood but also risks subsequent psychological damage. This is compounded by the fact that children who come into contact with the police are some of the most vulnerable in society – many have experienced abuse or violence, are victims of criminal exploitation, and have Special Educational Needs (SEN) or serious mental health conditions.”

Therefore, the use of Spit and Bite Guards on children may not only cause a flashback to a traumatic event, it is likely to be a traumatic event. It is clear that Article 3 of the UNCRC, the best interests’ principle, requires a complete prohibition on the use of Spit and Bite Hoods on children. Referring a traumatised child on to services to deal with their trauma is not satisfactory or acceptable, when the PSNI have it within their gift to avoid the trauma in the first place.

In relation to the assessment of impact within this Equality Impact Assessment, CLC note that in relation to religion, the PSNI have concluded that differential/ adverse impacts on people of different religions are unlikely to arise from the introduction of Spit and Bite Guards. CLC are challenged to understand how the PSNI have arrived at this conclusion, given that out of the 84 individuals on whom a Spit and Bite Guard was deployed between 16th March 2020 and 31st December 2020, their use against Catholics was more than double their use against Protestants. The use of Spit and Bite Guards is clearly differentially impacting on Catholics.

¹⁵ https://yjlc.uk/wp-content/uploads/2020/04/CRAE_POLICING-SPITHOODS_PRINT.pdf

Additionally, the PSNI have concluded that differential/ adverse impacts on people of different political opinion, different racial groups, marital status, sexual orientation, people with dependents and those without dependents from the introduction of Spit and Bite Guards are not anticipated. Given that no data has been provided within the Equality Impact Assessment for any of these protected section 75, CLC are challenged to understand how the PSNI can conclude there will be no adverse or differential impacts in the absence of data. We also note the interface between religious belief and political opinion which begs the question how the PSNI can in the light of the documented differential/adverse impact on Catholics, with confidence assert that differential/adverse impact is not anticipated in respect of political opinion. It is not possible to conclude that the policy impact for section 75 categories without data. It is insufficient to make an equality screening decision without using data including independent disaggregated data to provide evidence for the decision. To fulfill its statutory duties under section 75 and before this policy is progressed CLC would assert that the PSNI should gather relevant disaggregated data. Failure to do so constitutes a breach of the PSNI's Equality Scheme.

We note that the PSNI have concluded that differential/ adverse impacts on people of different ages, different gender and people with a disability are likely to arise from the introduction of Spit and Bite Guards. The Summary of Impacts¹⁶ goes on to identify children, men, younger men and individuals with poor mental health as groups which may be adversely impacted. CLC would request that members of the Catholic community and persons with a disability (not just those with a mental health need) are also included in this section, particularly given the appalling statistic that 68 out of 84 uses of Spit and Bite Guards in 2020 involved a person with a disability.

Use of the Spit and Bite Guard on Children

The consultation document outlines that the PSNI have used Spit and Bite Guards on 8 occasions with the subjects being at the *"upper end of the definition of a child"*.¹⁷ The UNCRC is extremely clear in their definition of a child:

*"For the purposes of the present Convention, a child means every human being below the age of 18 years....".*¹⁸

There is no upper end or sliding scale. Therefore, the use of Spit and Bite Guards cannot be justified on the basis that they are used on older children. They should not be used on any child under the age of 18 in any circumstance.

¹⁶ Pages 35 and 36 of the consultation document

¹⁷ Page 40 of the consultation document

¹⁸ UNCRC Article 1

Mitigating adverse impact

CLC disagree with the PSNI's view that the continued use of Spit and Bite Guards is the best course of action going forward in dealing with risk and injuries to officers in both a Covid and non-Covid environment.

We believe that the mitigations put in place to date such as strengthening the message around Spit and Bite Guards being a last resort, the training provided and a change in terminology in relation to the use of the guard on children are inadequate in addressing the adverse differential impact on the range of section 75 groups outlined above; they do not constitute mitigation.

Introducing spit and bite guards without carrying out an equality impact assessment properly, including a properly considering and putting forward mitigations to address the clear adverse impact and consideration of alternative policies to better promote equality of opportunity – constitutes a very significant threat to the lives of our most vulnerable children and young people in Northern Ireland and is entirely in breach of the PSNI's section 75 obligations, the ECHR Art 2 Right to Life, ECHR Art 3 Torture Inhuman and Degrading Treatment and the UNCRC and the UNCRPD.

Thematic Review of the Policing Response to COVID-19

CLC are surprised to note that there is no mention of the Thematic Review of the Policing Response to COVID-19 and the associated recommendations relating to Spit and Bite Guards within the Equality Impact Assessment not least because the authority to purchase this 'controversial and contentious' equipment rests with the NI Policing Board.

The Human Rights Advisor to the NI Policing Board has stated within the thematic review that:

*"In the light of the fact that the deployment of spit and bite guards was triggered by the COVID-19 emergency, spit and bite guards should now be phased out as soon as possible and officers who have been provided with spit and bite guards should, instead, be provided with the necessary Personal Protection Equipment (PPE) or other alternative. The PPE provided should be of sufficient quality to protect these officers from contamination from spitting, aerosol droplets and other bodily fluids reducing the risk of transmission of COVID-19 and other diseases. The use of spit and bite guards should, regardless, cease by 31st December 2020."*¹⁹

CLC would assert that in line with the PSNI's Equality Scheme, noting the differential adverse impacts identified on religious, age, gender and disability grounds and the insufficient mitigation measures which do not properly address the differential adverse impacts, that the PSNI should cease the use of spit and bite guards with immediate effect and implement an alternative policy, i.e. that officers are provided with the

¹⁹ <https://www.nipolicingboard.org.uk/sites/nipb/files/publications/report-on-the-thematic-review-of-the-policing-responser-to-covid-19.PDF>

necessary PPE as recommended by the Human Rights Advisor in his Thematic Report. Further given the engagement of ECHR Art 2 and Art 3, and noting evidence of fatalities in the USA and UK, it is clear that there can be no mitigation for the use of Spit and Bite Guards, especially on children and young people, consequently the imperative for the PSNI to desist using them is unquestionable.

Conclusion

The Children's Law Centre is grateful for the opportunity to make this submission and comment on the PSNI's Equality Impact Assessment on the use of spit and bite guards.

We hope that our comments have been constructive and useful and are more than happy to meet to discuss anything raised in this response. We wish to be kept informed of the PSNI's response to this consultation exercise. **We also look forward to receiving by return the information requested in this response.**