



**EQUALITY IMPACT ASSESSMENT
Final Report**

Proposals to Introduce Taser

November 2008

| Section | Page |
|----------------------------------|-------------|
| 1. EXECUTIVE SUMMARY | 3 |
| 2. BACKGROUND AND CONTEXT | 6 |
| 3. DATA AND CONSULTATION | 13 |
| 4. KEY FINDINGS | 23 |
| 5. CONCLUSIONS | 30 |

APPENDICES

| | |
|-------------------|---------------------------------------|
| Appendix 1 | Summary of Consultee Responses |
| Appendix 2 | Summary of Aims and Objectives |
| Appendix 3 | PSNI Taser Service Procedure |
| Appendix 4 | Glossary of Terms |
| Appendix 5 | List of Consultees |

1. EXECUTIVE SUMMARY

This document presents the results of an Equality Impact Assessment (EQIA) on PSNI proposals to introduce Taser as an option for use by Police Service of Northern Ireland (PSNI) specialised¹ and authorised² firearms officers.

1.1 Purpose of Equality Impact Assessment

The purpose of this EQIA is to determine whether there is likely to be any differential impacts arising from the policy between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation; men and women generally; persons with a disability and persons without; and persons with dependants and persons without.

Where differential impacts are identified, the EQIA also assesses whether that impact is adverse and considers mitigating measures or alternative policies to better achieve the promotion of equality of opportunity.

This EQIA has been conducted in line with the Equality Commission for Northern Ireland's "*Practical Guidance on Equality Impact Assessment*":

1.2 Background

The Taser is a single shot weapon designed to temporarily incapacitate a subject through the use of an electrical current. The normal reaction of a person exposed to the discharge of the Taser is the loss of some voluntary muscle control resulting in the subject falling to the ground or freezing on the spot. Drivers for PSNI considering the introduction of Taser include:

- Recommendations 69 and 70 of the Patten Report which recommended examination of alternative approaches to conflict management including identifying and selecting less lethal technologies;
- A 2005 HMIC report which recommended that PSNI examine the acquisition of Taser as a further less lethal option; and
- PSNI have also been influenced by Human Rights Considerations in considering the introduction of Taser as there is concern that officers

¹ See Glossary of Terms Appendix 4 for an explanation of this terminology

² See Glossary of Terms Appendix 4 for an explanation of this terminology

could be required to use lethal force in situations where Taser could be used as a less lethal option, if available.

The Section 75 Equality Screening conducted by PSNI on the proposals to introduce Taser identified a need to consider further the impact of the introduction of Taser. It was decided in August 2007 to conduct an EQIA of the proposals.

The overall aim of PSNI in introducing Taser would be to provide a less lethal firearms capability to specialist and authorised firearms officers, bring PSNI into line with National policy and practice and enhance the ability of PSNI to protect life; preserve order; and prevent the commission of offences.

1.3 Data Collection and Consultation

The PSNI draft EQIA considered a range of relevant evaluative, qualitative and quantitative data and this was used to inform assessment of the likely impact of the introduction of Taser on the nine equality groups. A pre-screening consultation exercise was conducted in March 2006 by the Northern Ireland Policing Board (NIPB) and a screening consultation by PSNI in September 2006. Pre-consultation meetings were held by PSNI in November 2007 to inform the draft EQIA and a Formal Consultation exercise was undertaken between January and April 2008. All of these have informed the EQIA and assessment of impacts.

1.4 Key Findings

The EQIA concludes that there are potentially adverse impacts on the following Section 75 groups: people from black and minority ethnic groups; children and young people; men; women; pregnant women; people with poor mental health; people with heart problems or who wear a pacemaker; people with epilepsy; and people with hearing loss.

1.5 Conclusions

The Chief Constable considered the findings of the draft EQIA and the consultation on the 13th October 2008. Consideration was given to the introduction of alternative policies and ways of mitigating potential adverse impact on Section 75 groups.

The Chief Constable took the decision to issue Taser on a permanent basis to officers from Specialist Operations Branch (SOB) and Armed Response Vehicle units (ARV's). His decision was taken only after he had given very careful consideration to the findings and recommendations arising from the PSNI Equality Impact Assessment (EQIA), which

included the decision of the Northern Ireland Policing Board to support in principle the permanent issue of Taser to officers from Specialist Operations Branch and Armed Response Vehicle units.

The Chief Constable's decision to introduce Taser included incorporating all of the mitigating actions detailed in Table 5A below into the Taser Service Procedure and in Taser training.

All of the proposed mitigation outlined in Table 5A has already been incorporated into the PSNI Service Procedure on the Use of Tasers (See Appendix 3) and Taser training documentation has also been amended to include these changes.

1.6 Publication of Results of EQIA

PSNI will be writing to all those who participated in the consultation to advise of this EQIA's publication and to offer a copy of the final EQIA in a format of their choice. Such formats include but are not limited to large print, Braille, PDF, audio cassette and minority languages.

2. BACKGROUND AND CONTEXT

This section seeks to summarise the background to and context for the PSNI proposals to introduce Taser and this EQIA.

2.1 Overall Aim

The overall aim of PSNI in introducing Taser is to: *“provide a less lethal firearms capability to specialist and authorised firearms officers, bring PSNI into line with National policy and practice and enhance the ability of PSNI to protect life; preserve order; and prevent the commission of offences”*

The other aims and objectives of the proposed policy are:

- to bring PSNI into line with National policy and practice;
- to enhance the ability of PSNI to protect life; preserve order; and prevent the commission of offences; and
- to avoid situations where live firearms are used in situations where Taser could be used.

PSNI want to ensure that in situations where consideration needs to be given to the use of firearms, that there is access to a full range of less lethal options to ensure that the minimum possible force is used to improve the capacity of PSNI officers to protect the right to life.

2.2 Background to PSNI Proposals to Introduce Taser

There are a number of factors which have influenced the PSNI proposal to introduce Taser. Such considerations include:

- Recommendations 69 and 70 of the Report of the Independent Commission on Policing in Northern Ireland (Patten Report) recommended examination of alternative approaches to conflict management including identifying and selecting less lethal technologies;

- Her Majesty's Inspector of Constabulary (HMIC) in its 2005 report entitled : HMIC Review of PSNI compliance and its statement of intent on the police use of firearms and less lethal weapons recommended that PSNI examine the acquisition of Taser as a further less lethal option for deployment at incidents which merit the deployment of firearms by officers;
- In September 2004 the Home Secretary agreed to allow Chief Officers of all police forces in England and Wales to make Taser available to all authorised firearms officers for use in situations where a firearms authority has been granted; and
- PSNI have also been influenced by Human Rights Considerations in considering the introduction of Taser as there is concern that officers could be required to use lethal force in situations where Taser could be used as a less lethal option, if available.

2.3 Specifics of Proposal

The PSNI proposal would see the introduction of Taser for use by specialist and authorised firearms officers, in situations where an officer honestly and reasonably believes that it is necessary in order to prevent a risk of death or serious injury. In practice, this means that Taser will be issued to fewer than 3% of PSNI officers and will **not** be on routine issue to operational police officers.

It should be noted that this EQIA is limited to consideration of the impact of the introduction of Taser to specialist and authorised firearms officers as an alternative to more lethal options. If PSNI proposed at any stage in the future to extend the issue of Taser to anyone other than specialist or authorised firearm officers then a separate EQIA process would be undertaken.

Taser will not be used as a compliance tool or in public order situations.

2.4 Summary of Taser

The Taser is designed to temporarily incapacitate a subject through the use of an electrical current, which temporarily interferes with the body's neuromuscular system. It is laser-sighted and uses cartridges attached to the end of the cartridge bay. Tasers' propel two barbs at an individual and these barbs are intended to attach to the skin or clothing on the torso and/or lower limbs. The maximum range of the Taser device is 21 feet, as this is the length of the wires that carry the current and attach the barbs to the weapon. A sequence of very short duration high voltage current pulses passes through wires connecting the device to the barbs. The

current flows into the body and results in a loss of muscular control and pain.

Some models also enable direct contact of the Taser to the surface of an individual and two electrodes pass the current pulses into the subject. This manner of application is usually classed as use in *stun* or *probe* mode.

The normal reaction of a person exposed to Taser discharge is the loss of some voluntary muscle control resulting in the subject falling to the ground or freezing on the spot. The effect is not intended or likely to render the subject into a state of unconsciousness.

Taser includes a number of in-built accountability mechanisms, including downloads of data on all uses, and a physical identification system in the form of paper identification discs, which are discharged from the weapon. Accountability for use of Taser will also be made through the PSNI Code of Ethics³ and the Police Ombudsman for Northern Ireland.

2.5 PSNI Aims

The four key policing areas as set out in the Police (Northern Ireland) Act 2000 are:

- to protect life and property;
- to preserve order;
- to prevent the commission of offences, and
- where an offence has been committed, to take measures to bring the offender to justice.

In carrying out their functions police officers are required to have regard to the code of ethics and as far as practicable, carry out their functions in co-operation with, and with the aim of securing the support of the local community.

The protection of life and property and preventing the commission of offences are particularly important considerations for PSNI in considering the introduction of Taser.

³ www.psni.police.uk/code_of_ethics_2008.pdf

2.6 PSNI Diversity Strategy (Policing a Shared Future)

The PSNI Policing a Shared Future Strategy sets out a plan for PSNI to ensure that all of the work of the service is underpinned by fairness and respect. It is intended that this will be achieved through:

- ensuring equality;
- promoting diversity;
- developing an understanding of the different perspectives of our past; and
- contributing to bettering relations between different groups in our society.

The commitments to ensuring equality and promoting diversity are particularly important in the context of the PSNI responsibilities under Section 75 of the Northern Ireland Act and this EQIA.

2.7 PSNI Equality Scheme

The PSNI Equality Scheme⁴ details how PSNI propose to meet its statutory responsibilities under Section 75 of the Northern Ireland Act. This Equality Scheme has been approved by the Equality Commission for Northern Ireland.

Section 4 of the Scheme details the arrangements for screening and prioritising policies for EQIA to identify policies, which are likely to have a significant impact on equality of opportunity. The Equality Scheme notes that policies will be prioritised for EQIA, taking into account the following factors:

- relevance to social need;
- effect on people's daily lives;
- effect on Human Rights responsibilities of Police Service;
- effect on economic and social rights; and
- the scale of expenditure incurred by the policy.

The decision to conduct an EQIA on proposals to introduce Taser was taken following Equality Screening, after feedback from consultees regarding the potential impact of the proposed policy on Section 75 groups, and following representation from the Equality Commission.

⁴ http://www.psni.police.uk/equality_scheme_nov_2005.pdf

2.8 Section 75 Screening

From September 2006 – May 2007, PSNI carried out an Equality Screening exercise in respect of the proposals to introduce Taser. Consideration was given to the following criteria:

- Is there evidence of higher or lower participation or uptake by different groups?
- Is there evidence that different groups have different needs, experiences, issues and priorities in relation to the particular policies, functions or duties?
- Is there an opportunity to better promote equality of opportunity or good relations, by altering policy or practice, or working with others in Government or the larger community? and
- Have consultations with relevant representative organisations or individuals within groups indicated that particular policies, functions or duties create problems that are specific to them?

The screening process identified a need to consider further the impact of the introduction of Taser in respect of the following Section 75 groups: age (children and young people); gender; racial group; and persons with a disability.

The screening process also included a consultation letter drafted to obtain views of interested groups, which was forwarded by post to 56 organisations. Replies were received from eight organisations and these responses as well as the NIPB consultation (referenced in Section 4.3 below) were included in the qualitative data used to support the screening process.

Taking into account the findings of the EQIA screening, the requirements of Section 75 of the Northern Ireland Act and feedback from consultees and key stakeholders, PSNI decided to conduct an EQIA on the proposals to introduce Taser.

2.9 Taser Pilot

In August 2007 it was also decided that a pilot of Taser should be implemented in Specialist Operations Branch (SOB). A proposed pilot introduction of Taser would include the following steps:

- drafting of operational procedures and guidance for the pilot, in line with National standards and ACPO guidance, and in line with the

Human Rights advice provided to the Northern Ireland Policing Board by their Advisers;

- procurement of Taser units;
- training for officers; and
- implementation and evaluation of Pilot.

PSNI procured 12 operational and 6 training Taser X26 units for the purposes of the pilot which commenced in January 2008. On conclusion of the pilot a post implementation review will be conducted to evaluate the Taser pilot scheme.

2.10 Taser Training

Before a specialist or authorised firearms officer is issued with a Taser he/she must undergo and pass an initial two-day Taser training course and attend Taser refresher training once a year. The Human Rights Advisor to the Northern Ireland Policing Board has observed both the initial and refresher Taser training which was delivered to SOB⁵ officers and she has indicated that she is content with the PSNI Taser training.⁶

2.11 PSNI Taser Service Procedure

A comprehensive Equality Screening process was carried out prior to the Taser Service Procedure for the pilot of Taser being drafted. This original Taser Service Procedure has already been re-visited and amended as a result of the findings of this EQIA and can be found at Appendix 3. Training on the use of Taser has also been amended to include the changes outlined in the service procedure.

2.12 Capability Gap

The introduction of Taser is based on PSNI's legislative obligations and identified need. The overarching legal obligation placed on the PSNI as a whole and individually on all police officers is the requirement under Article 2 of the European Convention on Human Rights to protect life. This requirement is a positive obligation that protects the right to life of police officers, the subject of use of force by police and the right to life of the wider community. The PSNI also has a statutory obligation under Section 32(1)(a) of the Police Northern Ireland Act 2000 to protect life. Taser technology provides police with a less lethal option for deployment

⁵ See Glossary of Terms Appendix 4 for an explanation of this terminology

⁶ Northern Ireland Policing Board Human Rights Report 2008 Page 144

at firearms incidents that would enhance the ability to protect life. If an incident where a fatality involving police using conventional weapons occurred and Taser may have been a viable alternative to the use of conventional firearms in the circumstances, then PSNI and the individual police officer could have breached Article 2 (Right to Life) of the person who died. As such there would be a capability gap in the PSNI response to firearms incidents if Taser were not available as a less lethal tactical option.

2.13 Other Less lethal options

Recommendations 69 and 70 of the Report of the Independent Commission on Policing in Northern Ireland (Patten Report) recommended examination of alternative approaches to conflict management including identifying and selecting less lethal technologies. The UK Steering Group was established to take forward these recommendations. Membership of this group includes representatives from accountability bodies, senior police officers, practitioners and others who possess an extensive range of scientific, operational and technical experience in conflict management issues. The PSNI has membership of this group. The Steering Group has provided a vehicle for identifying and selecting less than lethal technologies for police use in the United Kingdom. The fifth report of the steering group can be found at:

http://www.nio.gov.uk/less_lethal_weaponry_steering_group_phase_5_report.pdf

Earlier Steering Group reports have set out the range of options now available to Police Services across the UK including the research, development and introduction of Incapacitant sprays such as CS spray and conducted energy devices such as Taser and Attenuating Energy Projectile (AEP).

3. DATA AND CONSULTATION

This section of the report outlines how data were collected for the EQIA, and details the consultation carried out.

3.1 Data and Research

The Equality Commission’s “*Practical Guidance on Equality Impact Assessment*” notes that public authorities will need to consider how they will collect the information which will enable them to make a judgment of the extent of impact on the nine equality categories. The draft EQIA considered a range of evaluative, qualitative and quantitative data on Taser. Table 3A below details the key sources used to inform the draft EQIA.

Table 3A

Sources of Data Used to Inform the EQIA

| Source | Data |
|---|--|
| NISRA | NI Census Data (2001) |
| PSNI | Review of 515 violent and security-related incidents for the months October 2005 and May 2006. |
| PSNI | Responses to PSNI September 2006 pre-consultation (detailed in Section 4); |
| PSNI | November 2007 Pre –consultation meetings (detailed in Section 4) |
| NI Policing Board Consultation March 2006 | Responses to NIPB March 2006 Taser consultation (detailed in Section 4); |
| Police Scientific Development Branch | Evaluation of Taser (2002) |
| Police Scientific Development Branch | Further Evaluation of Taser devices publication 19/05 |
| Home Office Scientific Development Branch | Supplement to Evaluation of Taser publication 64/06 |
| Association of Chief Police Officers: | Independent Evaluation of the Operational Trial of Taser Final Report, May 2004 |
| DOMILL | Statements on medical implications of (M26 Advanced Taser Dec 02 and July 2004 and July 2005 |
| Northern Ireland Office | Reports of Less Lethal Steering Group (Reports 1 – 5) |
| Home Office | 2006 Review of Baton Rounds |

Source: PSNI

3.2 Northern Ireland Policing Board Consultation (March 2006)

In March 2006, the Northern Ireland Policing Board undertook a consultation exercise on the Chief Constable's proposal for limited introduction of Tasers to PSNI Officers. NIPB shared the Consultation Responses with PSNI. Further detail of the responses to the consultation can be found in the draft EQIA at www.psni.police.uk

In addition to a range of issues raised about the short time frame for consultation, concern was expressed about the impact of Taser on children and young people, pregnant women, young males, people with mental health disabilities and people with existing heart conditions. There were also concerns raised that while initial deployment may be restricted to certain situations and officers, it would be extended over time without further consultation. Concern was expressed about "*mission creep*" and Taser being used as a compliance tool.

Consultees also noted that they were unclear about the division of responsibilities between NIPB and PSNI in respect of purchase of a new weapon, that a systematic and rigorous means of monitoring the use of all new weapons was required and that much more detailed analysis of the conditions specific to Northern Ireland should be undertaken before the introduction of Taser.

3.3 PSNI Pre-Screening Consultation (September 2006)

A letter was issued in September 2006 by Assistant Chief Constable Roy Toner to 56 organisations seeking comments in respect of the proposed introduction of Taser to PSNI, in compliance with the PSNI obligation to conduct Equality Screening under Section 75 of the Northern Ireland Act 1998.

Responses were received to the Consultation from a total of eight organisations. The main areas of concern raised in responses received to the consultation relate to concerns regarding the use of Taser on vulnerable groups such as children and young persons, young males, older people, pregnant women, people with disabilities including those who have heart conditions and those with mental illnesses. Concerns were also raised about people who are intoxicated due to the use of illicit drugs, alcohol and prescribed medication such as cardioactive therapeutic drugs.

Other issues raised included concerns about the screening process and concerns about the human rights implications of introducing Taser. Further details of the summary responses to the screening consultation can be found in the Equality Impact Assessment consultation document at www.psnipolice.uk.

3.4 PSNI Pre – Consultation Meetings (November 2007)

By way of pre-consultation to inform the EQIA, organisations that responded to previous consultations were invited to participate in one to one meetings in November 2007. The following organisations accepted the invitation to participate in the pre-consultation: Action Mental Health; NI Commissioner for Children and Young People; and Institute for Conflict Resolution.

The key issues raised through these pre-consultation meetings included:

- there is a need to ensure that training is provided on the specific needs of people with disabilities (particularly sensory disabilities);
- situations can be envisaged where Taser use would be beneficial for people with poor mental health especially if the alternative is the use of live firearms;
- there is concern about the impact of using Taser on children and young people as the medical impact might be disproportionate due to differences in respect of thinner skin tissue and organs being closer to skin surface;
- it was suggested that in situations where the alternative is the use of live firearms, that Taser use will likely be preferable;
- consultees requested clarity on the types of situation in which Taser would be used if it is introduced;
- the possibility of differential impact on women, children and young people, men, people from minority ethnic communities; people with disabilities (especially people with poor mental health) and pregnant women were raised by consultees;
- significant concern was expressed about “*scope creep*” and that Taser would be used in situations where negotiation or other forms of resolution would currently be used; and
- concern was expressed that Taser use could be expanded in future as it has been in England and Wales through extension to non-firearms officers.

3.5 Formal Consultation

As part of the EQIA, a 12 week written consultation was conducted from January to April 2008. Details of the consultation were sent to more than 400 individuals and organisations and advertisements were placed in the Newsletter, Irish News and Belfast Telegraph newspapers. The consultation document was available to download from the PSNI website and alternative formats available on request from PSNI.

Twenty six substantive consultation responses were received. Five were received from individuals and twenty one from organisations. The organisations that responded are detailed below:

| | |
|--|---|
| Amnesty International | Northern Ireland Human Rights Commission |
| Armagh City and District Council; | |
| Armagh District Policing Partnership; | Office of the First Minister and Deputy First Minister; |
| British Irish Rights Watch; | Police Ombudsman for Northern Ireland; |
| Committee on the Administration of Justice; | Rethink; |
| Children's Law Centre /Save the Children (joint response); | The Royal National Institute for Deaf People; |
| Disability Action; | Social Democratic and Labour Party; |
| Democratic Unionist Party; | Sinn Fein; |
| Down District Council; | University of Ulster; |
| Equality Commission for Northern Ireland; | Women's Support Network; and |
| Northern Ireland Commissioner for Children and Young people; | Youth Council for Northern Ireland. |

A summary of the main issues raised through the consultation follows below.

Human Rights

It was suggested that the use of Taser is not compliant with a range of domestic and international human rights standards including: Article 2 of the European Convention on Human Rights (ECHR) (right to life); Article 3 of the ECHR (freedom from torture and cruel, inhuman or degrading treatment); Human Rights Act 1998; United Nations (UN) Basic Principles on Use of Force and Firearms; Police (NI) Act 2000; Article 1 (meaning of torture), Article, 2 (measures to prevent torture and ill-treatment) and Article 16 (prevention of cruel, inhuman or degrading treatment) of The Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT); General Comment Number 2 of the Committee Against Torture on the implementation of Article 2, CAT.; Articles 3 (the 'best interests' principle), 6 (right to life), and Article 37 (a) (prohibition of torture and cruel, inhuman, or degrading treatment) of the Convention on the Rights of the Child.

It was further suggested that the two day training received by PSNI officers falls short of the four day minimum training recommended by Taser International; and that the proposals are not sufficient to ensure that Taser is used only as an alternative to more lethal force.

Taser Pilot

The following views were received from consultees relating to the Taser pilot and the timing of the EQIA:

- the EQIA has taken place after the decision to procure a number of Taser units has gone ahead and training in the use of the weapon has taken place;
- the fact that Taser is now in operation negates any consultation as the decision has clearly been made to introduce the weapon; and
- PSNI should have conducted an EQIA before deploying Taser.

Operational Guidance

It was suggested that details of the guidance within which officers will be permitted to use Tasers and of the training should have been included in the EQIA; and that PSNI Guidelines on the Operational Use of Taser are a policy for which the PSNI has a statutory obligation to consult relevant groups under Section 75 of the Northern Ireland Act and a comprehensive screening exercise and EQIA should be conducted.

Consideration of Available Data and Research

Concern was expressed about the lack of independent data / detailed analysis contained in the draft EQIA and it was suggested that independent medical evidence to determine what the likely impact of discharging a Taser will be on vulnerable groups such as children and young people children and young people of different ages, young males, children and young people of different racial and community background and children and young people with disabilities and/or mental health conditions should have been considered.

Consultees suggested that there are a number of other sources of relevant data which are not cited in the EQIA.

Assessment of Impacts

Consultees noted that it is clear that there is potential for a differential adverse impact across a number of equality groups and suggested that the proposals to introduce Taser are likely to have an adverse impact on the following:

- children and young people; young people of different racial and community background, young people with disabilities and/or mental health conditions, young males;
- women and pregnant women;
- people with disabilities including those with certain neurological conditions; those with mental health problems; severe mental illness, including schizophrenia and personality disorder; persons with a hearing loss (as they will not hear any verbal warnings); persons with heart problems or who wear pacemakers; people who may suffer from epilepsy; and
- people who appear to be under the influence of drugs or alcohol.

It was noted that it will not be possible for an officer to tell if someone has a disability or whether a woman is pregnant.

Formal Consultation

Some consultees suggested that consultation with children and young people should have been conducted on the proposal to introduce Tasers in Northern Ireland and that no information has been provided regarding whether specific consideration has been given to how best to communicate this information to young people and those with learning disabilities.

Mitigation

The following views were received from consultees on the mitigation of impacts:

- Tasers should never be used on children and young people;
- stricter controls and training on the use of force and firearms, and in dealing with the mentally disturbed should be considered to reduce any unnecessary deaths and injuries from any type of force;
- training and guidance should make specific reference to women as a group;
- would have been helpful to consultees to indicate whether options other than the non-introduction of Taser had been considered when the decision to choose Taser was made and whether such options are still open to consideration;
- all officers using tasers should be given specific training on needs of people with mental health disorders;
- officers should be trained on issues for deaf people; and
- consideration should be given to sending people who have a medical condition which might increase the risk from Taser to hospital if Taser is used.

Monitoring

It was suggested that PSNI should institute a system of information gathering across all nine equality categories, and if necessary commission new data (quantitative or qualitative) to redress identified information gaps. The results of such monitoring must be reviewed on an annual basis, published and included in the PSNI annual review on progress to the Commission; and equality data on Taser use should be published on the PSNI website regularly.

3.6 PSNI response to the consultation

All of the issues raised in the consultation have been considered and Appendix 1 details the PSNI response to each issue. However a summary of the PSNI response is as follows:

- **Human Rights**

It is the aim of the Police Service of Northern Ireland to uphold and protect the human dignity and human rights of all persons as enshrined in the European Convention of Human Rights and other relevant international instruments. The Operational Procedure and Guidance which was drafted for the pilot of Taser to Special Operations Branch has been confirmed by the Human Rights Advisors to the Northern Ireland Policing Board as being in compliance with the Human Rights Act 1998 and in compliance with their advice to the Northern Ireland Policing Board of May 2007. Further to this, it is considered that rather than breaching Human Rights, the availability of Taser enhances the ability of PSNI and individual officers to protect the right to life as required under Article 2 of the European Convention on Human Rights and enshrined in Section 6 of the Human Rights Act 1998. It is not accepted that Taser is in contravention of Article 3 of the European Convention on Human Rights as it is only the inappropriate use of Taser that could result in a breach of Article 3. The strict training, operational procedure and guidance for the use of Taser and accountability mechanisms are all in place to minimise the possibility of a breach of Article 3 occurring. The Operational Procedure and Guidance also reflects National ACPO Guidelines and takes cognisance of the provisions of the Human Rights Act 1998, the UN Code of Conduct for Law Enforcement Officials and the UN Convention on the Rights of the Child.

- **Taser Pilot**

The Taser Pilot was conducted in tandem with the running of the EQIA process. This in no way negates any consultation which has taken place. The decision made by PSNI was only to conduct a pilot of Taser and no decision was taken on the future permanent deployment of Taser prior to the EQIA process.

- **Operational Guidance**

A comprehensive Equality Screening process was carried out prior to the operational procedure and guidance for the pilot of Taser being drafted. The Operational Procedure and Guidance has already been re-visited and amended as a result of the findings of the EQIA. Training on the use of Taser has also been amended to include these changes. A copy of the Taser service procedure can be found at Appendix 3.

- **Consideration of Available Data and Research**

The view of the PSNI is that

- (a) The medical evidence provided by the Defence Advisory Counsel on the Medical Implications of Less Lethal options (DOMILL) is independent medical evidence that is provided nationally.
- (b) There has already been considerable consultation and provision of a considerable amount of data in both the Section 75 Screening Process carried out by PSNI and for this EQIA process. It is not considered that the research into and analysis of further data would add any value to the process. This is particularly the case when taking into account the length of time that Taser has been on issue to Police Services in GB (since April 2003) and the fact that no deaths have been attributed to the use of Taser there.
- (c) PSNI has a statutory obligation under the Human Rights Act 1998 to protect the right to life. This is a statutory obligation, which places an onerous responsibility on the PSNI to take steps to protect life. Taser as a less lethal option would enhance the availability of PSNI to protect life and therefore it would not be appropriate to further delay the introduction of Taser to allow for the collation of further research data.
- (d) In respect of the concerns raised about the use of Taser in the United States and Canada, it is not accepted that this is an appropriate comparison. Taser has been used in GB since April 2003 with no fatalities attributed to its use since it was introduced. The threshold test for use of Taser by PSNI officers which is: “The use of Taser will be justified where the officer honestly and reasonably believes that it is necessary in order to prevent a risk of death or serious injury.” should ensure that its use is strictly controlled. The strict safeguards in place in UK policing, including the Human Rights based approach, training, operational procedure and guidance, deployment, accountability and post incident management are not replicated in North America. Therefore the comparison with United States and Canada is not accepted.

- **Assessment of Impacts**

It is accepted that there is potential for the use of Taser to have an adverse or differential impact on the groups outlined in Section 3.5, based on concerns raised in the consultation process and also from the previous Section 75 Screening Process carried out by PSNI. Table 5A of this document outlines the proposed mitigation in respect of any potential adverse or differential impacts on the groups which have been identified.

- **Formal Consultation.**

In respect of formal consultation it is accepted that direct consultation with children and young people was not carried out in this case. However, the PSNI have conducted extensive consultation with organisations representing children and young people and publicly advertised the consultation in local media and on the PSNI website. In respect of any future consultation process, PSNI will give consideration to direct consultation with children and young persons.

- **Mitigation**

The proposed mitigation outlined in Table 5A has already been incorporated into the PSNI Service Procedure on the Use of Tasers and Taser training documentation has also been amended to include these changes.

- **Monitoring**

PSNI are committed to meeting their Section 75 obligations in respect of monitoring as detailed in Section 5.5.

4. KEY FINDINGS

This section highlights results that have emerged from the EQIA.

4.1 Religion

On the basis of the available data and the extensive consultation conducted, it has been concluded that differential / adverse impacts on people of different religions are unlikely to arise from the proposed introduction of Taser.

4.2 Political Opinion

On the basis of the available data and the extensive consultation conducted, differential / adverse impacts on people of different political opinion from the proposed introduction of Taser are not anticipated.

4.3 Racial Group

Data from England and Wales indicates that from 22nd April 2004 to 10th October 2007, there were 923 incidents of Taser Usage. Table 4A overleaf indicates the breakdown of subjects by self-classified racial group.

Table 4A
Apr 04 - Oct 07 Taser Usage by Racial Group of Subject

| Racial Group | Number | Percentage | Population Baseline |
|-----------------------------------|---------------|-------------------|----------------------------|
| White | 682 | 74 | 92.1 |
| Mixed | 16 | 2 | 1.2 |
| Asian / Asian British | 26 | 3 | 4 |
| Black / Black British | 113 | 12 | 2 |
| Other Ethnic Group (incl Chinese) | 7 | 1 | 0.8 |
| Not stated / not applicable | 79 | 8 | - |
| Total | 923 | 100 | 100 |

Source: Home Office

The data in Table 4A above shows that people whose racial group is white are less likely to be subject to Taser use than their proportion in the population and that people whose racial group is Black / Black British are significantly more likely to be subject to Taser use than their proportion in the population (12 per cent of subjects and 2 per cent of the population).

On the basis of this data and the extensive consultation feedback, it is concluded that the proposed introduction of Taser could impact differentially / adversely on people from black and minority ethnic racial groups as they may be more likely to be subject to the use of Taser than people whose racial group is white.

4.4 Age

Home Office Data on the use of Taser from April 2003 shows the age of persons subject to the use of Taser in England and Wales. This is detailed in Table 4B below.

Table 4B
Taser Usage by Age of Subject

| Age | Number | Percentage |
|--------------|------------|------------------------------|
| 14 | 3 | 1 |
| 15 | 3 | 1 |
| 16 | 4 | 1 |
| 17 | 7 | 2 |
| 18 + | 382 | 96 |
| Total | 399 | 101 (due to rounding) |

Source: Home Office

Of 399 uses, 17 of these (4 per cent) were on persons below the age of 18 with the remaining 96 per cent on those above the age of 18. The qualitative and evaluative data on the use of Taser further notes concern about the relative vulnerability of children to Tasers compared with other age groups.

The consultation feedback reinforces the view that there is particular concern about the impacts of Taser use on children and young people and the EQIA concludes that there is a potential differential / adverse impact arising from the proposed introduction of Taser on children and young people as the impact of Taser use on them may be greater than on other age groups.

4.5 Marital Status

On the basis of the available data and the extensive consultation conducted, it has been concluded that differential / adverse impacts on people of different marital status from the proposed introduction of Taser are not anticipated.

4.6 Sexual Orientation

On the basis of the available data and the extensive consultation conducted, differential / adverse impacts on people of different sexual orientation from the proposed introduction of Taser are not anticipated.

4.7 Gender

Data from the PSNI Central Statistics Unit and Analysis Centre recorded the gender of 498 people involved in these offences (by gender) as detailed in Table 4C below:

Table 4C
Oct 05 and May 06 Violent Incidents by Gender

| Gender | Number | Percentage |
|---------------|---------------|-------------------|
| Male | 374 | 75 |
| Female | 118 | 25 |
| Total | 498 | 100 |

Source: PSNI

Table 4C shows that men were three times more likely to be involved in violent and security offences during Oct 2005 and May 2006 than women.

Data from England and Wales indicates that from 22nd April 2004 to 10th October 2007, there were 923 incidents of Taser Usage. Table 4D below indicates the breakdown of subjects by gender.

Table 4D
Apr 04 - Oct 07 England and Wales Taser Usage by Gender

| Gender | Number | Percentage |
|-------------------------|---------------|-------------------|
| Male | 809 | 88 |
| Female | 62 | 7 |
| Not applicable (canine) | 12 | 1 |
| Not stated | 40 | 4 |
| Total | 923 | 100 |

Source: Home Office

Table 4D shows that in England and Wales, 7 per cent of subjects in which Taser was used were female compared with 88 per cent male.

There is concern about the effects of electrical current on foetuses in the womb and both the Home Office Scientific Development Branch and

Defence Science Technology Laboratory recommend that further research is required to understand the potential impact.

On the basis of the available data and the extensive consultation conducted, it has been concluded that differential / adverse impacts on people between men and women may arise from the proposed introduction of Taser. In particular;

- there may be an adverse impact arising from the proposed introduction of Taser on pregnant women;
- as women are generally of smaller stature than men, women may be more affected by the use of Taser than men; and
- the evidence suggests that men are more likely to be subject to Taser use than women.

4.8 People with Dependants and those without dependants

On the basis of the available data and the extensive consultation conducted, differential / adverse impacts between people with dependants and those without are not anticipated from the proposed introduction of Taser.

4.9 People with a disability and those without

The data suggests that people with mental health problems are more likely to be subject to Taser use than people with good mental health.

The evidence suggests that people with disabilities may be more affected by the use of Taser than people without disabilities. Such conditions include:

- people who wear pacemakers or have heart problems; and
- people with epilepsy.

Furthermore, it is noted that people with hearing loss may not hear instructions issued by a police officer in a situation where Taser may be used.

The EQIA concludes that potential differential / adverse impacts may arise on people with disabilities as a result of the introduction of Taser. These include people with poor mental health, people who wear pacemakers or have heart problems; people with epilepsy and people with hearing loss.

4.10 Summary of Impacts

The purpose of an EQIA is to identify adverse impact, which is defined as an indication that a differential effect of a policy on a Section 75 groups is less favorable (i.e. negative).

It can be argued that any group which is (i) more likely to be subject to the use of Taser if introduced or (ii) which may be more likely to be negatively affected by Taser if they are subjected to its use could be adversely impacted by the proposed introduction of Taser. Alternatively, it has been suggested that if Taser is used in those situations in which more lethal options (such as live weapons) would be considered, the impact on the groups detailed above could be largely positive.

The EQIA therefore concludes that there are potentially adverse impact(s) on the identified Section 75 groups. These are:

- people from black and minority ethnic groups;
- children and young people;
- men;
- women;
- pregnant women;
- people with poor mental health;
- people with heart problems or who wear a pacemaker;
- people with epilepsy; and
- people with hearing loss.

4.11 Impact on Good Relations

Section 75 (2) places a statutory duty on public bodies to pro-actively address good relations between persons of different religious belief, political opinion or racial group. The Equality Commission's Publication "*Promoting Good Relations – A Summary Guide for Public Authorities*" notes that this means a public authority must "*consider how the policies it makes and implements, affect relationships between people of different religions, political opinions and racial groups*".

As identified in Section 4.10 above, the EQIA concludes that there may be a potential adverse impact on people from black and minority ethnic groups. PSNI have given consideration to the need to promote good

relations as well as the need to promote equality of opportunity. As noted above, the proposal to introduce Taser is as an alternative to use of more lethal technologies and it is not therefore thought that the policy will have a negative impact on good relations.

5. CONCLUSIONS

This Section details the conclusions of this EQIA and outlines the decision-making process which was adopted. The systems which will be put in place to monitor for adverse impact in the future are also detailed.

5.1 Decision Making Process

The final policy decision included the following stages:

- consideration of the findings of the draft EQIA;
- consideration of the consultation findings; and
- consideration of alternative policies or ways of mitigating such impact ensuring that considerable weight is accorded to equality considerations.

5.2 Conclusions of EQIA

The EQIA has concluded that a potential adverse impact will arise from the introduction of the introduction of Taser on the following groups:

- people from black and minority ethnic groups;
- children and young people;
- men;
- women;
- pregnant women;
- people with poor mental health;
- people with heart problems or who wear a pacemaker;
- people with epilepsy; and
- people with hearing loss.

5.3 Alternative Policies and Mitigation

The potential courses of action considered by PSNI were:

- to delay the decision on whether or not to introduce Taser and allow additional consultation and further data and research to be considered;
- not to introduce Taser and / or consider the introduction of an alternative policy; or
- to introduce Taser with actions to mitigate the potential impact(s) on Section 75 groups as detailed in Table 5A overleaf.

Table 5A
Actions to Mitigate Impact of Taser in the event of its introduction

| Group | Proposed Mitigation |
|--|--|
| People from black and minority ethnic groups | Officers should receive training specifically on the impact of Taser on persons who may have different needs and/or expectations due to their ethnicity. (This should include young persons from minority ethnic groups); AND if it is identified that a subject cannot or would not be able to understand instructions from police due to a language barrier, then where possible the services of an interpreter via radio or mobile telephone should be considered. |
| Children and young people | The Bronze Firearms Commander ⁷ will make a dynamic risk assessment ⁸ at the scene on the use of Taser if the subject appears to be a child, and will ensure that the reason for the use of Taser involving a child is clearly documented |
| Men | Officers will receive training which will include information on the DOMILL ⁹ statement DSTL/BSC/27/01/07 on the implications of the use of Taser on persons of smaller stature; |
| Women | The Bronze Firearms Commander will make a dynamic risk assessment at the scene on the use of Taser if the subject appears to be a woman, and will ensure that the reason for the use of Taser involving a woman is clearly documented. |
| Pregnant women | The Bronze Firearms Commander should dynamically risk assess the requirement to use Taser on a woman whom they know or have reasonable cause to believe is pregnant, taking into account the unique circumstances of each incident. |
| People with poor mental health | Officers will be trained in dealing with persons who have mental health problems or neurological conditions, including where possible provision of training from an independent outside organisation |
| People with heart problems or who wear a pacemaker | Firearms teams who are deployed with availability of Taser should have at least one officer who is trained to an appropriately high level in dealing with persons with such a medical condition and appropriate medical equipment should be available to that officer commensurate with the high level of training. Training is to be directed by the Chief Medical Adviser of Occupational Health and Welfare in consultation with Association of Chief Police Officers (ACPO).Note: Police |

⁷ See Appendix 4 Glossary for an explanation of this terminology

⁸ See Appendix 4 Glossary for an explanation of this terminology

⁹ See Appendix 4 Glossary

| | |
|--------------------------|---|
| | officers who will be issued with Taser will carry a defibrillator in their vehicle and will be trained in its use and in Cardiopulmonary Resuscitation (CPR). |
| People with epilepsy | Firearms teams who are deployed with availability of Taser should have at least one officer who is trained to an appropriately high level in dealing with persons with such a medical condition and appropriate medical equipment should be available to that officer commensurate with the high level of training. Training is to be directed by the Chief Medical Adviser of Occupational Health and Welfare in consultation with ACPO. |
| People with hearing loss | Officers will be trained in dealing with persons who have hearing loss including where possible provision of training from an independent outside organisation. |

Source: PSNI

In addition to the above, for all groups consideration was given to monitoring and reviewing the use of Taser regularly; ensuring that all persons subjected to Taser discharge should be examined by a medical practitioner at the earliest practical opportunity and referral to the Office of the Police Ombudsman for Northern Ireland of all Taser discharges.

5.4 Policy Decision

The Chief Constable considered the findings of the draft EQIA and the findings of the consultation on the 13th October 2008. Consideration was given to the introduction of alternative policies and ways of mitigating potential adverse impact on Section 75 groups.

The Chief Constable took the decision to issue Taser on a permanent basis to officers from Specialist Operations Branch (SOB) and Armed Response Vehicle units (ARV's). His decision was taken only after he had given very careful consideration to the findings and recommendations arising from the PSNI Equality Impact Assessment (EQIA), which included the decision of the Northern Ireland Policing Board to support in principle the permanent issue of Taser to officers from Specialist Operations Branch and Armed Response Vehicle units.

The Chief Constable's decision to introduce Taser included incorporating all of the mitigating actions detailed in Table 5A above into the Taser Service Procedure and in Taser training.

All of the proposed mitigation outlined in Table 5A has already been incorporated into the PSNI Service Procedure on the Use of Tasers (See

Appendix 3) and Taser training documentation has also been amended to include these changes.

This EQIA is limited to consideration of the use of Taser by specialist and authorised firearms officers. Any proposed extension to the situations in which Taser is used or the personnel that have access to Taser Units will be subject to Equality Screening and if necessary an EQIA to assess whether there are potential adverse impacts arising in respect of any Section 75 groups.

5.5 Monitoring

PSNI are committed to monitoring to meet their Section 75 obligations. In the event that Taser is discharged, follow up will include collection of the following monitoring information in respect of the subject so far as is possible;

- gender;
- age;
- racial group;
- people with dependants and those without;
- religious group;
- whether or not they have a disability; and
- marital status.

PSNI have given careful consideration to the issue of monitoring and have decided at this point not to seek to gather monitoring information from individuals in respect of their political opinion or sexual orientation due to the sensitivity of this information. Other ways of seeking to monitor the impact of the policy on these groups, such as consultation will be adopted.

All monitoring and review evidence will be considered on at least an annual basis and be published by PSNI to inform an assessment of the actual impact of the policy across the above listed Section 75 groups

PSNI will further ensure that relevant guidance and research relating to the impact of Taser use particularly on persons of small stature; pregnant women; and persons with a disability, including a learning disability, is monitored and reviewed on a regular basis and annually at a minimum. Such monitoring will be published on the PSNI website.

An evaluation form will be completed for every operation where Taser is used and forwarded to the ACPO Police Use of Firearms Secretariat.

The PSNI Taser Liaison Officer will receive all PSNI Taser Deployment forms and will review them prior to them being submitted centrally for evaluation. This individual will then be the conduit between the PSNI and the representative from the relevant ACPO Police Secretariat in terms of clarifying any information on the form.

The Taser Liaison officer role is currently performed by the Chief Inspector in charge of Conflict Management Development Unit (CMDU), which is part of Operational Support Department and based at Police Headquarters. This officer is responsible for the policy in relation to all Use of Force and therefore the owner of the Taser Service Procedure. The Chief Inspector CMDU is required to keep abreast of the national issues in relation to Taser and liaise with the ACPO Use of Firearms secretariat and the Home Office re any Taser developments. This officer is also responsible for disseminating any important information/issues on Taser to the relevant PSNI officers.

It should be emphasised that every use of Taser is reviewed by the Bronze, Silver and Gold¹⁰ commander involved in the incident. Where there are lesson points to note or proposed changes to procedure or training arising from the review of each use of Taser, this is encapsulated into the service procedure and Taser training documentation. All Taser uses will be subject to thorough review and additional mitigating actions for all groups will be applied if identified. This process will ensure that emerging issues are properly reflected in training and operational guidance.

All Taser discharges will automatically be referred to the Police Ombudsman for Northern Ireland (PONI) for investigation.

¹⁰ See Appendix 4 Glossary for an explanation of this terminology

5.6 Policy Timetable

Table 5B details the PSNI policy timetable.

Table 5B
Policy Timetable

| Action | Timescale |
|---------------------------------------|-----------------------------|
| Policy Decision | 13/10/08 |
| Policy Implementation | November 2008 |
| Monitoring and Publication of Results | Annually From November 2008 |
| Review of Data / Research | November 2009 |

PSNI

5.7 Publication of Results of EQIA

PSNI will write to all those who participated in the consultation to advise of the EQIA's publication on the PSNI website and to offer a copy of the final EQIA in a format of their choice.

PSNI will make available publicly the outcome of this EQIA and any monitoring of adverse impact of policies on the promotion of equality of opportunity. This material will be accessible on PSNI's website at <http://www.psni.police.uk>. It will also be available in large print, Braille, PDF, audio cassette and minority languages on request from PSNI.