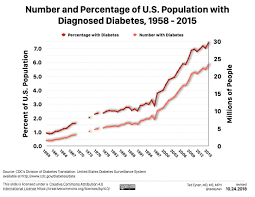
**The Importance of Evidence-Informed Guidelines and Policy Generation in Addressing Practice Bias: A Case Study of the National Institute on Alcohol Abuse and Alcoholism**



Addressing Practice Bias: In healthcare, policy generation and evidence-informed guidelines play a critical role in ensuring the delivery of high-quality care. By utilising the best available evidence, healthcare professionals can make informed decisions that promote optimal outcomes and patient safety. Moreover, policies based on evidence-based guidelines help to minimise bias and standardise practices. This essay aims to discover the significance of policy generation and evidence-informed approaches in addressing practice bias by analysing Alcoholism's (NIAAA) and National Institute on Alcohol Abuse strategic plan for 2017-2021.

https://youtu.be/h1xoRWgTekE

**Addressing Practice Bias: Statement of Need**

The practice issue promoting bias in the context of the NIAAA's strategic plan is the unequal distribution of resources and attention given to alcohol use disorder (AUD) compared to other substance use disorders (SUDs). Whereas AUD affects several individuals and poses significant social and health challenges, it has frequently been outshined by other SUDs, such as stimulant and opioid use disorders. This imbalance can lead to a lack of funding, resources, and research opportunities for AUD, hindering progress in the disorder's prevention, treatment, and management.

The NIAAA should employ policy generation and evidence-informed guidelines that prioritise the needs of individuals with AUD to remedy the bias. By following recognised procedures and generating policies based on sound evidence, the NIAAA can ensure that AUD receives the resources and attention it deserves. Such guidelines can address several features, including early identification, prevention strategies, ongoing support and evidence-based interventions for individuals with AUD and their families.

**Addressing Practice Bias: Guidelines to Remedy**

The NIAAA can exploit several evidence-informed policies to address practice bias effectively. These guidelines should incorporate a comprehensive method for understanding and managing AUD, considering the complex interplay of psychological, biological, and social factors. The following guidelines are anticipated to remedy the practice bias:

*Integrated Screening and Brief Intervention (ISBI) Guidelines:* ISBI guidelines provide a systematic approach for healthcare professionals to screen patients for alcohol use and provide brief interventions as appropriate. By implementing these guidelines, the NIAAA can ensure that individuals with AUD receive early identification and appropriate interventions, leading to improved outcomes and reduced harm.

*Treatment Guidelines:* Evidence-based treatment guidelines are essential for promoting unbiased and effective management of AUD. The NIAAA should adopt policies considering various treatment modalities, including pharmacotherapy, psychosocial interventions, and mutual support groups. These guidelines should emphasise the importance of individualised treatment plans and ongoing monitoring and support to address the diverse needs of individuals with AUD.

*Prevention Guidelines:* Prevention plays a crucial role in addressing AUD. The NIAAA should develop and implement evidence-informed prevention guidelines that target different populations, such as adolescents, college students, and high-risk groups. These guidelines should focus on strategies to reduce alcohol-related harm, promote responsible drinking behaviours, and create supportive environments.

**Addressing Practice Bias: Justification for Specific Guidelines and Policy Generation**

The guidelines above and policy generation are needed to address the practice bias and promote equitable care for individuals with AUD. Several justifications can be provided:

**Evidence-Based Approach:** Evidence-informed guidelines guarantee that decisions and interventions are based on the best available research. By relying on evidence, the NIAAA can establish effective practices and policies prioritising the needs of individuals with AUD. This approach lessens bias by depending on objective information and reduces the influence of personal beliefs or subjective opinions.

**Standardisation of Care:** Guidelines and policies promote standardisation in care delivery. They provide a framework for healthcare providers to follow, ensuring consistency and reducing variations in practice. By implementing standardised guidelines, the NIAAA can ensure that individuals with AUD receive equitable and evidence-based care, regardless of geographic location or provider bias.

**Resource Allocation:** Guidelines and policies help in the appropriate allocation of resources. By prioritising AUD in policies and guidelines, the NIAAA can advocate for increased funding, research opportunities, and workforce development specific to AUD. This equitable distribution of resources addresses the practice bias and facilitates advancements in prevention, treatment, and recovery support services for individuals with AUD. **Collaborative Decision-Making:** Guidelines and policies provide a platform for collective decision-making among healthcare providers, policymakers, researchers, and individuals with AUD. By involving multiple stakeholders, the NIAAA can ensure that guidelines and policies reflect diverse perspectives and address potential biases. This inclusive approach increases the likelihood of effective interventions and sustainable change.

**Conclusion**

Evidence-informed guidelines and policy generation are vital tools in addressing practice bias and promoting equitable care. In the case of the NIAAA, concentrating on the practice issue of bias towards AUD, employing specific guidelines such as ISBI, prevention guidelines and treatment can remedy the prevailing imbalance and improve outcomes for individuals with AUD. The NIAAA can advance AUD prevention, treatment, and management by adopting an evidence-based approach, standardising care, assigning resources suitably, and linking multiple stakeholders. Finally, evidence-informed guidelines and policy generation reduce bias, ensure optimal patient care, and support healthcare providers in managing patients and providers.

***References to Addressing Practice Bias***

1. National Institute of Health. (2021). National Institute on Alcohol Abuse and Alcoholism (NIAAA) – Strategic Plan 2017-2021. Retrieved from <https://www.niaaa.nih.gov/sites/default/files/StrategicPlan_NIAAA_optimized_2017-2020.pdf>
2. Substance Abuse and Mental Health Services Administration. (2018). Critical substance use and mental health indicators in the United States: Results from the 2017 National Survey on Drug Use and Health (HHS Publication No. SMA 18-5068, NSDUH Series H-53). Centre for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from <https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/NSDUHFFR2017/NSDUHFFR2017.pdf>
3. Office of Disease Prevention and Health Promotion. (2021). Social Determinants of Health. Retrieved from [https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-he](https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health)