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The mechanics of writing a policy brief

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According to [Nannini and Houde \(2010\)](#), reports addressing the interests and needs of policy makers are frequently referred to as *policy briefs*. These reports are intended to be short and easy to use, containing information that can be reviewed quickly by policy makers. The contents of these reports are based on systematic reviews of the literature addressing refereed, rigorously evaluated science to advance policy making based on the best evidence. In a very important way, policy briefs give policy makers context to the issues that are intended to be addressed in their roles. Policy brief writers typically used this genre of communicating ideas and opinions when they argue a specific solution to a problem while addressing the audience outside of their organization or common worldview. Today, policy briefs have become popular tools for corporations and professional organizations, especially on the Internet but also in other readily accessible written formats, in that they promote the mission and vision of organizations through public sharing of ideas based on compelling evidence ([Colby, Quinn, Williams, Bilhelmer, & Goodell, 2008](#)).

Typically, the purpose of a policy brief is to create a short document providing findings and recommendations to an audience who may not be experts in an area of interest. The brief serves as a vehicle for providing policy advice; it advocates for the desired solution to a particular problem or challenge. The audience for a policy brief can be the general public or particular entities of interest that seek solutions to problems or needs or who may require to be convinced of a different way of looking at an area of interest (i.e., exposure to a new paradigm). In order to persuade the targeted audience, the brief must focus on their needs. If the brief addresses problems that readers want to solve, they will read the policy brief looking for a new way to view a solution. Otherwise, the policy brief may not be read and may even be ignored. It is important to emphasize the readers' interests rather than those of the writer when composing this type of document while supplying credible evidence to support change in policy ([Pick, 2008](#)).

Students in policy courses, professional organizations, policy institutes (i.e., "think tanks"), and

legislators are among those who most often write policy briefs for the purpose of giving succinct evidence to support actions that ideally should be taken to address an issue. The main purpose of giving the evidence in a succinct form is to make a convincing argument to inform policy making while considering all the salient aspects of an issue from a position of expertise. Policy briefs are written to inform others of a specific viewpoint, to frame discussions, and to show credibility and expertise on a certain subject matter ([Chaffee, 2007](#)).

There are many examples of policy briefs. We focus on one policy brief that was produced by the American Academy of Nursing's expert panel addressing emerging and infectious diseases ([DeMarco, Bradley Springer, Gallagher, Jones, & Visk, 2012](#)) (Figure 1). Other examples are readily available outside of the American Academy of Nursing and can be accessed for comparison, such as a policy brief on the consolidation of school districts that was written by the National Education and Policy Center ([Howley, Johnson, & Petrie, 2011](#)) and a policy brief that was generated as the end product of a funded research project addressing rural considerations related to globalization ([DERREG, 2011](#)). Each of these policy briefs shows the structure of a typical brief with some key variations that will be addressed and explained. What is often lacking in the literature is guidance on how one creates effective policy briefs (i.e., the structure and mechanics of developing the brief itself) and how there may be differences in the physical presentation across business and professional groups as well as national versus international approaches. This article highlights the overall framework for crafting an effective policy brief by using the three briefs mentioned previously as examples.

Step 1: Considerations before Writing a Policy Brief

The informed writer of a policy brief gives attention to two major considerations before drafting the brief:

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EXECUTIVE SUMMARY

Despite advancements in prevention and treatment of HIV/AIDS, a defined and structured process of identifying the many individuals who are unaware that they are infected is not being consistently used.^{1,2} In the United States, an alarming proportion (24–27%) of individuals infected with HIV are unaware of their HIV serostatus.³ What is particularly disturbing is that those who are unaware of their HIV status account eventually for 54% of new infections annually.³ HIV screening of individuals who do not know their HIV status is one critical element to prevent disease transmission. Knowing one's HIV serostatus helps infected individuals adopt risk-reduction behaviors and access life-prolonging medical treatment while helping uninfected individuals maintain behaviors that reduce the risk of infection.^{4, 5, 6, 7, 8, 9}

BACKGROUND AND SIGNIFICANCE

The Centers for Disease Control and Prevention (CDC) in 2006 released revised recommendations for HIV testing calling for routine HIV testing to be offered to individuals ages 13–64 in all healthcare settings as a standard component of general health care.¹⁰ Important changes included in this recommendation include eliminating the endorsement of a separate written consent form before an HIV test can be performed. What is suggested is a process in which HIV testing is incorporated into the general consent forms for health care and elimination of mandated pretest counseling. Evidence that buttresses these recommendations includes an extensive and comprehensive review of the literature, expert consensus, and findings from various CDC-sponsored projects related to HIV screenings in various clinical settings.^{4, 5, 6, 8, 10, 11} More recently a first ever National HIV/AIDS Strategy (NHAS) was released from the Obama administration identifying among other significant goals the need to identify those living with HIV more successfully through effective screening and to focus on access to care for people living with HIV/AIDS, optimizing health outcomes, and reducing HIV-related health disparities.¹²

Despite the feasibility of the original CDC plan in 2006, target goals have not been realized, and, in fact, the scope of epidemic today remains essentially unchanged. In spite of numerous benefits conferred by routine testing and the many goals, initiatives, provisions, and resources from the CDC and NIH, routine HIV testing has not been implemented in many healthcare settings. Progress toward operationalizing the guidelines is slow, possibly related to perceived barriers at the patient, healthcare provider, and/or policy level.

Figure 1 – Excerpts from Executive Summary, Background and Significance, and Position Statement (DeMarco et al., 2012).

(1) the interests and expertise of the target audience and (2) the timing of delivery for the brief. Consideration must be given to the target audience for the brief so that the level of writing, explanations, and examples will be geared to the needs of that group. For example, a policy brief focusing on infectious disease transmission that is directed to a nonscientific group interested in volunteerism will require more explanation of terms than would be the case with a scientific research group. Do research to determine how knowledgeable the group is about the topic. This research is highly significant because if readers are highly knowledgeable, simplified concepts may be interpreted as patronizing. The writer must consider how much persuasion is needed in order to convince the reader of the policy brief to take the endorsed approach and/or action. The reader may be more open

to the message and the message viewed as more urgent during times of crisis (e.g., gun control when an episode of gun violence has made national news). At other times, the writer may need to provide more evidence and more carefully consider alternative perspectives.

This approach is highlighted in the examples presented in this article. In [Figure 1](#), the authors discuss HIV testing at a critical point wherein the Centers for Disease Control and Prevention had recently released information about transmission trends and related those trends to individuals who did not know their status and therefore might be transmitting infectious diseases unknowingly. Thus, there was a perceived immediate need to protect individuals from heightened vulnerability and to decrease the prospective health and personal costs related to chronic disease

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