

**Final Recommendations of the NIAAA Extramural Advisory Board**  
**‘Division of Epidemiology and Prevention Research Strategic Plan’**  
**Aug 16-17, 2006**

1. Encourage systematic efforts to improve and standardize measures of patterns of alcohol exposure (acute, recent, or current history, and across the lifespan) and encourage their application across different grants, institutes, countries, and the medical system.
2. Encourage research to improve measures of patterns of alcohol exposure (acute, recent, chronic) across the lifespan and their effects on morbidity and mortality.
3. Improve estimation of alcohol attributable fractions (AAF) for morbidity and mortality, especially for injury, by better characterizing the relationship between patterns of drinking (e.g. binge drinking) and a variety of outcomes, and encourage the collection of relevant indicators of drinking (e.g. medical examiner data).
4. Replicate and generalize evidence based environmental strategies developed in successful community trials and undertake pilot studies to develop new community strategies to address health and social outcomes.
5. Encourage culturally and developmentally appropriate screening, assessment, and interventions, especially brief interventions, and use creative technologies to maximize their reach, impact, and efficiency.
6. Use sub-studies or supplemental studies to a) enhance the fullest use of data and interdisciplinary research, b) encourage the collection of biological and genetic samples from single-site or collaborative epidemiological, treatment, or human laboratory studies to develop new knowledge and c) promote the careers and training of emerging investigators.
7. Study promising strategies for preventing the early initiation of high risk behaviors including alcohol use through partnering with other agencies, institutes, and organizations.
8. Undertake outcome studies of key alcohol and other relevant public policies (e.g. weapon, tobacco, drug, traffic etc.) to determine if they reduce excessive alcohol consumption, related harms, or both.