



Key Recommendations

AIDS VACCINE FIELD

Focus the preponderance of new product development resources on innovative candidates including live replicating vectors and those that might induce neutralizing antibodies (page 18).

Continue work to broaden the array of stakeholders who understand partial efficacy and potential qualities of current candidates (page 20).

Explore mechanisms for an advanced clinical trial commitment to strengthen and sustain industry involvement (page 24).

RESEARCHERS

Build funding for community wide results dissemination into all trial budgets (page 34).

Dramatically expand awareness campaigns about vaccine-induced seropositivity along with plans for long-term strategies to address the issue (page 37).

Pilot the draft Good Participatory Practice (GPP) guidance document and provide feedback on its use in the field to help guide long-term implementation (page 43).

FUNDERS

US Division of AIDS (DAIDS): Closely monitor the on-the-ground effects of its new approach to funding prevention networks and sites as it is put into action, and consider alternatives if problems persist (page 39).

DAIDS, Gates Foundation, European and Developing Countries Clinical Trials Partnership, and other funders: Consider community outreach and education fund that would provide additional resources to sites for maintaining and expanding innovative work, and to support independent community oversight mechanisms (page 43).

All: Define and follow clear pathways for moving from efficacy results to implementation (page 51).

GLOBAL HIV VACCINE ENTERPRISE

Revisit the business strategy for the Enterprise (page 25).

Publish a revised scientific strategic plan that analyzes gaps in light of current, ongoing work (page 25).

Convene focused meetings on under-discussed fieldwide issues in clinical trial capacity, manufacturing and regulatory arenas, and other topics (page 25).

Once hired, the Executive Director should develop and publish a workplan with a set of milestones to achieve over the next two years (page 25).

AVAC

Advocate that the broad field of HIV-prevention research finally moves beyond an ad hoc approach to defining levels of HIV care and treatment in trials—and arrives at genuine, global consensus (page 41).

Work with partners to develop clear, realistic, and consistent messages about when new products might become available and what they will look like (page 51).

Work with partners to build a strong and collaborative global movement on prevention research and implementation (page 55).

CIVIL SOCIETY

Work in coalition to advocate for adequate, annual increases in funding to NIH (page 16).

Work to ensure that the broad field of HIV-prevention research finally moves beyond an ad hoc approach to defining levels of HIV care and treatment in trials—and arrives at genuine, global consensus (page 41).

Pilot the draft GPP guidance document and provide feedback on its use in the field that can help guide long-term implementation (page 43).

Support—and demand—developing-country leadership on prevention (page 51).