Funding in 2015
Investment priorities in an evolving global health and development landscape

Global HIV Prevention R&D Investments by Technology, 2000–2015 (US$ millions)

In 2015, global funding for HIV prevention R&D declined slightly, from US$1.25 billion in 2014 to US$1.20 billion in 2015. This continues a decade of roughly flat funding. The US public sector remained the largest global contributor at US$850 million, and together with the Bill & Melinda Gates Foundation, the largest philanthropic funder, constituted 81 percent of all funding.

Trial Participants by Prevention Research Area, 2015

Trial participants receive a standard package of HIV prevention services and care as part of their trial participation. Furthermore, if the product studied in the trial is proven safe and effective, ethical considerations demand that trial populations, and other populations at high risk in the community, are prioritized for access to the new intervention. Given the higher rates of acquisition seen across so-called key populations—members of highly burdened and underserved groups—it is critical to provide access to the research process such that they can participate and reap more immediate benefit of scientific progress. Greater efforts must be made to include key populations in this crucial process for the HIV prevention response to be truly impactful.

Key Population Representation in Clinical Trials, 2015

- 1% HIV vaccines
- 1% Microbicides
- 6% Pre-exposure prophylaxis
- 66% Treatment as prevention
- 4% Medical male circumcision
- 22% Prevention of vertical transmission

4% Gay men, men who have sex with men and transgender women
7% People who inject drugs
1% Sex workers
1% Women
87% Non-KP specific