

## **Office of AIDS Research Advisory Council**

### **Charge from the NIH Director: Priority setting for NIH's AIDS research portfolio**

**November 14, 2013**

AIDS Research is a critical component of NIH's portfolio. Current opportunities, from basic science to clinical trials, are rapidly evolving, and the possibility of an AIDS-free generation has emerged. Yet resources at NIH are significantly constrained – making it more important than ever for the NIH to establish and implement AIDS research priorities to maximize the chances of progress.

The Office of AIDS Research (OAR) carries the responsibility of overseeing the allocation of funds for this program. For that mandate to be optimally implemented at a time of such rapid progress in AIDS research, it is timely to develop a top level enumeration of research priorities that can be utilized to guide the optimum investment of the roughly 10% of the NIH budget allocated to AIDS research.

Accordingly, the Office of AIDS Research Advisory Council (OARAC) is charged with developing a blueprint that identifies AIDS research priorities over the next 3 – 5 years. This should be bold but achievable; specific enough to guide decision making but avoiding over-granularity; comprehensive in its consideration of the broad sweep of AIDS research but courageous in identifying major priorities and recognizing that a laundry list of every conceivable AIDS-related program will not be very useful.

While the OARAC may choose to produce a background white paper that summarizes current research opportunities, the most critical part of the document should be an Executive Summary of no more than four pages. This should outline the highest priority AIDS research in three areas:

- Prevention – including vaccines, microbicides, ARV-based prevention, behavioral research focused on risk reduction, stigma, and adherence
- Treatment – including advances in therapeutic interventions and research toward a cure
- Co-morbidities – neurologic, cardiovascular, oncologic, accelerated aging

The document should also identify high priority research in three areas that cut across these themes – basic science, training (including capacity building), and information dissemination.

The OARAC may use whatever means necessary to obtain expert input to guide their conclusions. The OAR will provide staff support for this effort. A draft document should be generated by spring of 2014, and should then be made broadly available for public comment. Based on those comments, a revised version should be compiled and presented to the Advisory Committee to the Director (ACD) at their June 2014 meeting.

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Director, NIH