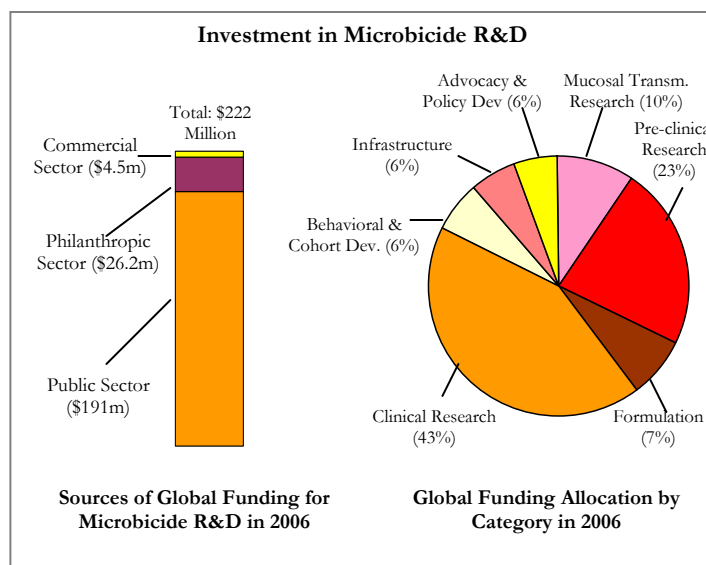
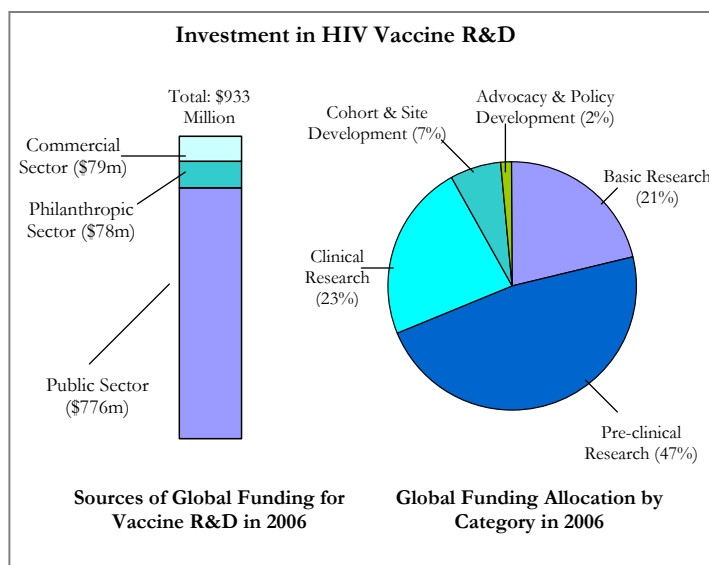


## BUILDING A COMPREHENSIVE RESPONSE

### FUNDING FOR HIV VACCINES, MICROBICIDES AND OTHER NEW PREVENTION OPTIONS: 2000-2006

Developing new HIV prevention technologies to complement existing prevention strategies will provide a range of options that may be used alone or in combination, and may have broad appeal to various cultural and socio-economic backgrounds.

The 2001 United Nations Declaration of Commitment on HIV/AIDS called for increased investment in sustainable HIV prevention technologies, such as vaccines and microbicides. The *HIV Vaccines and Microbicides Resource Tracking Working Group*<sup>1</sup> has developed and employed a comprehensive methodology to track annual research and development (R&D) investment trends in HIV vaccines and microbicides that can be compared from year-to-year and across funders. In 2006, the Working Group added other new HIV prevention options such as male circumcision to the annual tracking efforts.



### FUNDING FOR HIV VACCINE R&D

- In 2006, total global investment in preventive HIV-vaccine R&D was an estimated US\$933 million, a 23% increase over 2005 funding levels. This increase in funding can primarily be attributed to new research initiatives funded through the US National Institutes of Health (NIH), Canada, the European Commission (EC) and the Bill & Melinda Gates Foundation (Gates Foundation).
- In 2006, public-sector funders provided approximately 83% (US\$776 million) of the funds allocated to preventive HIV-vaccine R&D. The philanthropic sector provided 8% (US\$78 million) and the commercial sector accounted for the remaining 8% (US\$79 million).
- European funders increased their commitment to preventive HIV-vaccine R&D in 2006 to US\$82 million, up from \$23 million in 2000. Strong investments from non-US and non-European countries such as Brazil, India, South Africa and Thailand totaled almost US\$18 million, while Canada contributed another \$19 million.
- A breakdown of global funding allocations by type of activity or product development stage was estimated from a subset of investments. Funds predominantly supported basic and pre-clinical research, which together accounted for approximately 69% of the funds spent. Investment in pre-clinical vaccine research climbed from 38% in 2005 to 47% in 2006, most likely reflecting an increased emphasis on product development. Support for clinical trials accounted for 23%, cohort and site development for 7% and advocacy and policy development for 2%.

## FUNDING FOR MICROBICIDE R&D

- In 2006, total global investment in microbicide R&D was approximately US\$222 million, a 35% increase over 2005 funding levels. This increase is due to increased commitments from the NIH, the US Agency for International Development and European funders.
- In 2006, the public-sector provided 86% (US\$191 million) of the funds allocated to microbicide R&D. The philanthropic sector provided 12% (US\$26.2 million) and the commercial sector accounted for 2% (US\$4.5 million).
- During the last seven years, European funders increased their commitment to microbicide R&D from US\$0.7 million to almost US\$56.3 million. In 2006, R&D activities outside of the US and Europe decreased to about US\$4 million from \$10 million in 2005, but still significantly exceeded investment for each year prior to 2005.
- A breakdown of global funding allocations by type of activity or product development stage was estimated from a subset of investments on microbicide R&D. Of this, 10% was devoted to basic mechanisms of mucosal transmission; 23% to pre-clinical research; 7% to product formulation; 43% to clinical research; 6% to behavioral and cohort development; 6% to infrastructure; and 6% to advocacy and policy development.

## R&D FUNDING FOR OTHER NEW PREVENTION OPTIONS

- The four additional experimental HIV-prevention options that the Working Group initially chose to monitor are **adult male circumcision, herpes simplex virus type 2 (HSV-2) suppression, cervical barriers and pre-exposure prophylaxis using antiretroviral drugs (PrEP)**. Investment has resulted in confirming at least one new prevention option – adult male circumcision – in the past year.
- Tracking R&D resources in these areas is significantly different from that for vaccines and microbicides. Each of these interventions was created for another purpose, but is being tested for prevention of HIV infection. The spectrum of funders for these trials is smaller, and the research and development activities are most typically clinical trials.
- Between 2000 and 2006, four public-sector funders and the Gates Foundation supported approximately US\$181 million in research and development activities directed towards one or more of these four HIV-prevention interventions.

## A COMPREHENSIVE RESPONSE & THE NEED FOR CONTINUED INVESTMENT

- While the current levels of funding are significant, there is a critical need to sustain, and even increase, R&D investments for preventive vaccines, microbicides and other new options to optimally accelerate the development of and ensure eventual access to these HIV prevention tools.
- Financing needs are likely to remain substantial in the coming years, as funding is needed to explore new approaches to vaccine and microbicide design; bring novel candidates into the pipeline; support clinical trials to test the safety, immunogenicity and efficacy of new products; and translate research results, such as those for adult male circumcision, into policies and programs.

Please visit [www.hivresourcetracking.org](http://www.hivresourcetracking.org) for further details on the Working Group's publications, including the upcoming report, *Building a Comprehensive Response: Funding for HIV Vaccines, Microbicides and Other New Prevention Options (2000-2006)*

<sup>i</sup> The *HIV Resource Tracking Working Group* is composed of the AIDS Vaccine Advocacy Coalition (AVAC), Alliance for Microbicide Development (AMD), International AIDS Vaccine Initiative (IAVI), and the Joint United Nations Programme on HIV/AIDS (UNAIDS).