

Strategic Plan Continuation for FY2016 - 2018

Mission

The California HIV/AIDS Research Program (CHRP) fosters outstanding and innovative research that responds to the needs of all people of California, especially those who are often under served, by accelerating progress in prevention, education, care, treatment, and a cure for HIV/AIDS.

Vision

The California HIV/AIDS Research Program (CHRP) envisions a California a decade from now where systems of research, prevention, and care for people with HIV position California as a national leader, and which yield significant progress in reducing HIV transmission, improving HIV-related treatment and care, and enacting evidence-based public policy in California which positively impacts state, national, and global efforts to end the pandemic.

Stakeholder Input and Critical Priority Areas

We define our stakeholders as any individual or group with an interest in the success of CHRP in delivering intended results and maintaining the viability of the organization's research products, including scientists, public health officials, legislators, community-based organizations, consumers, affected community members, advocates, and others. During 2011, a process of stakeholder input identified key priorities that provided the basis for framing new strategies seen as essential to the program's ability to achieve this vision. They include the need to strategically target research dollars to the following critical priority areas for CHRP funding:

- Development and evaluation of biomedical approaches to prevent new HIV infections;
- Development and evaluation of strategies for testing, linkage to care, and treatment for persons with HIV (TLC+);
- Development and evaluation of new models of care for persons with HIV/AIDS and other strategies related to Health Care Reform;
- Development and evaluation of interventions to address disparities in access and utilization of HIV/AIDS services for various populations in California;
- Support for the training of new scientists engaged in high priority areas of HIV/AIDS research;
- Research to develop a vaccine or cure for HIV/AIDS.

Strategic Goals

As a result of the 2011 planning process, the program and its Advisory Committee, the California HIV/AIDS Research Program Advisory Council, have articulated four strategic goals that will focus the program's priorities going forward:

Strategic Goal 1: To provide resources to address strategic HIV/AIDS research priorities critical to California.

Strategic Goal 2: To catalyze leadership for the discovery of evidence-based solutions for HIV/AIDS issues in California.

Strategic Goal 3: To stimulate increased public and private investment towards the discovery of evidence-based solutions for emerging and critical HIV/AIDS issues.

Strategic Goal 4: To promote the application and real-world impact of California-supported HIV/AIDS research.

Rationale and Design of the Program's Approach for 2011 - 2015

In 2011, CHRP adopted "Initiative Grantmaking", which uses large-scale project-oriented grants instead of smaller pilot awards, in order to increase the impact of our work on the current California epidemic. An initiative approach allows the allocation of funds for similar larger project-oriented grants across multiple sites and institutions, with CHRP playing a coordinating role to help achieve collaboration and synergy among investigators. For example, efforts to develop new models of care and prevention for HIV/AIDS or to significantly reduce new HIV infections require larger, complex research-based interventions.

To increase resources available for strategic initiatives to impact the HIV epidemic in California, the program decided to focus its limited resources on the following four strategic priority areas:

1. Strategic initiatives to curb the California HIV/AIDS epidemic (Epidemic Interventions Research): Evidence has shown that new biomedical-based interventions can have a major impact on the transmission of HIV infection. Implementation of pre-exposure prophylaxis (PrEP) and widespread implementation of testing and linkage to care plus early treatment (TLC+) may play a major role in curbing and driving down the HIV epidemic in California. Evaluations of these interventions will provide critical information necessary for effective implementation in the future.
2. Strategic initiatives to develop and evaluate new models of service delivery for HIV care and prevention (Health Services Research related to Health Care Reform): Given the increasing numbers of persons living with HIV in California, the increasing costs of providing care for this population, and the limited resources in the State, it is imperative that new models of service delivery for HIV care and prevention be developed and evaluated. Evidence-based evaluations of innovative new service delivery models for HIV prevention and care may lead to new approaches, which will improve patient care and quality of life at either reduced or similar cost.
3. Strategic initiatives to develop evidence-based policy research: Policy issues related to HIV care, prevention, and financing are rapidly emerging and evolving, and it is imperative that evidence-based information be developed and disseminated to inform the decision-making process. Collaborations between policy researchers, community advocates, and policymakers are necessary to provide timely information which can have an impact on the federal, state and local decision-making process.
4. Seeding of new ideas and training in the Basic Biomedical Sciences to maintain a pipeline for the future: Basic biomedical science has been the engine which has provided numerous breakthroughs in diagnosis, monitoring, medical care, and treatment for persons with HIV. It is imperative to maintain this pipeline for future breakthroughs which may further advance our ability to improve the quality of life and outcomes for persons with HIV. Seeding new ideas through smaller pilot projects and training new scientists has been shown to be the most effective means of ensuring that these breakthroughs will continue.

All research supported within these four strategic priority areas will continue to emphasize innovation, be peer reviewed, and be investigator-initiated, whether in response to an open call for applications or to a call for research in targeted areas. The following graphic summarizes the four strategic priority areas and shows the grant mechanisms utilized to implement the strategic plan.



As part of the 2011 – 2015 Strategic Plan, CHRP phased out some grant mechanisms from prior years. These include:

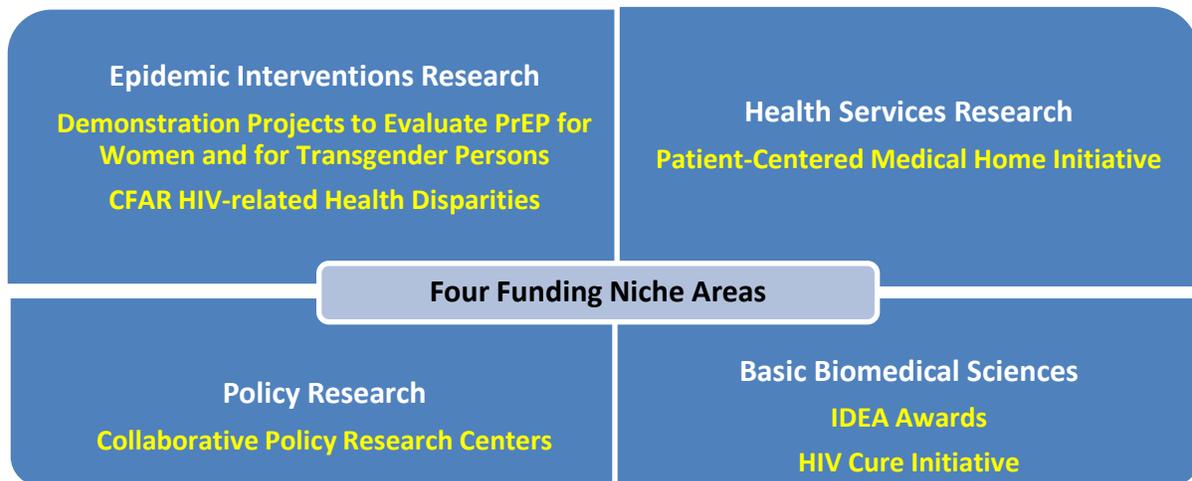
- Clinical IDEA (Innovative, Developmental, Exploratory Awards) awards and training
- Social/Behavioral IDEA awards and training
- Community Collaborative Awards
- California AIDS Multi-Institutional Clinical Studies (CAMICS) Awards

Program Approach for 2016 - 2018

For the 2016—2018 Strategic Plan, we recommit to the current four strategic priorities as stated on page two. In addition, based on broad stakeholder input processes conducted in 2012 and 2014, we added four funding initiatives:

1. HIV Cure Initiative (2014)
2. HIV Pre-Exposure Prophylaxis for Women (2015)
3. HIV Pre-Exposure Prophylaxis for Transgender Persons (2016)
4. CFAR HIV-related Health Disparities (2016)

These each fit into the existing four strategic priority areas as shown below:



Program Approach Beyond 2018

We will utilize a streamlined input process to create the 2018 – 2024 Strategic Plan, which will include reconsidered and updated priorities for niche funding areas and grantmaking models (initiatives, pilot awards, etc.). The 2018-2024 Strategic Plan will be presented to the CHRP Advisory Council in May 2018 for review.