

# Setting Global Research Priorities in Pediatric and Adolescent HIV Using the Child Health and Nutrition Research Initiative (CHNRI) Methodology

Irvine et al. (2018)

<https://doi.org/10.1097/QAI.0000000000001742>

## For which topic were research priorities identified?

pediatric and adolescent HIV

## In which location was the research priority setting conducted?

international

## Why was it conducted at all?

Competing priorities and rapidly diminishing resources for the HIV response require that efforts are responsive to gaps and needs and streamlined to maximize the impact of future research investments in HIV for children and adolescents. Toward this, a collaborative process was undertaken by WHO and the Collaborative Initiative for Paediatric HIV Education and Research (CIPHER) of the International AIDS Society (IAS).

## What was the objective?

to establish global research agendas in pediatric and adolescent HIV

## What was the outcome?

a list of 112 research questions

## How long did the research prioritization take?

No information provided.

## Which methods were used to identify research priorities?

CHNRI approach

## How were the priorities for research identified exactly?

Step 1: setting up process: establishment of expert working group, defining scope and context, agreeing on scoring criteria to be used for prioritization. Step 2: submission of research questions: via survey, participants could submit up to ten priority research questions across the three research areas (HIV testing, treatment, and service delivery) based on their knowledge and expertise for either one or both populations (children (0-10 years of age) and adolescents (10-19 years of age) living with HIV), participants were also asked to tag their question with the relevant research area and domain, 1735 priority research questions submitted. Step 3: data processing: data cleaned, sorted, topics with less than three questions submitted were excluded, similar questions were merged, final list was then reviewed by expert working group, final collated list included 51 research questions on pediatric HIV and 61 research questions on adolescent HIV. Step 4: scoring of research questions: via survey, participants invited to score a minimum of two research areas that related most to their expertise for one or both populations along four criteria. Step 5: identification of top 5 topics per research area: working group reviewed ranked list of scored research questions, followed by webinar with structured facilitated discussion to reach consensus

## Which stakeholders took part?

Pediatric and adolescent HIV experts: researchers, program managers, clinicians, implementers, community partners, advocates, and young people. 375 participants.

## How were stakeholders recruited?

An overarching expert working group of 19 members, comprising of pediatric and adolescent HIV experts, were identified by the WHO and CIPHER coordinating team. For the survey, targeted snowballing was used. Concentrated dissemination efforts were undertaken through (1) WHO country offices to ensure engagement of national program managers, (2) established community and youth networks, (3) postings on WHO and IAS websites and social media, and (4) the IAS and CIPHER member list serve of 3631 professionals working on pediatric and adolescent HIV. Respondents were encouraged to share the survey with their relevant networks.

## Were stakeholders actively involved or did they just participate?

Stakeholders were mere participants of the research prioritization process; they were not actively involved in the process.