

PRS Risk Reduction (RR) Prioritization Plan

The CDC's Division of HIV/AIDS Prevention (DHAP) promotes a [High Impact Prevention \(HIP\)](#) approach which aims to reduce new HIV infections via implementation of interventions that are scientifically proven, cost-effective and scalable. To align with the HIP approach, starting in 2015 the [Prevention Research Synthesis \(PRS\) Project](#) will make the following changes for identifying evidence-based interventions (EBIs) that show evidence of efficacy in changing sex or drug-injection behaviors that directly impact HIV-transmission risk (i.e., Risk Reduction [RR] interventions):

1. Shift focus from evaluating the efficacy of all RR interventions in the literature to evaluating the efficacy of RR interventions targeted to people living with HIV (PLWH), men who have sex with men (MSM), and transgender persons. Other important topics identified by DHAP will also be reviewed.
2. Authors may directly request that PRS review their intervention study if it has been accepted for publication or published in 2015, even if it is not focused on one of the targeted groups. Granting the request will be contingent upon:
 - a. PRS capacity at the time of request
 - b. Author's agreement to provide any additional information PRS requests for completing the efficacy evaluation.
3. PRS will complete a comprehensive review of all RR interventions published in 2014.

For authors who wish to submit their intervention study in press or published in 2015, please email PRSproject@cdc.gov for more information.

Please note – Above changes will not affect the on-going PRS effort to conduct a comprehensive evaluation of interventions for promoting [Medication Adherence \(MA\)](#) or [Linkage to, Retention in, and Re-engagement in HIV Care \(LRC\)](#) among persons with HIV.

