

Anatomy of a Target

It's been four years since AVAC advanced these criteria for effective targets in our 2014/15 Report, *Prevention on the Line*. Then, we identified targets that have advanced the field and ones that have fallen short. Today's prevention crisis exists in part because the primary prevention targets set by UNAIDS didn't meet these criteria. Targets for primary prevention are still essential, but they won't get met without demand creation work, such as we describe in this section. It's not too late to recalibrate resources and commitment.



Resourced



Targets without sufficient resources are empty promises. Set the price tag, raise the resources and don't ask countries to do more with less.



Audacious



The best goals redefine what's possible. There were 50,000 people in low-income countries on ART in 2003. The 3 by 5 target changed the world.



Achievable



Effective targets reflect evidence and experience. AIDS science is evolving. We can't set a deadline for finding a cure. But we can aim high with research milestones.



Measurable



Quantification is key. Prevention targets need to be tied to impact including incidence and other validated, indirect measures.



Accountable



Setting a target means taking responsibility for mobilizing resources, tracking progress and sharing data.



Political Support



Country-level support is key. Goals that originate in Geneva won't go anywhere without endorsement by leaders in hard-hit countries.



Collective Priority



No one, including scientists, can set targets on their own. Civil society, policy makers and politicians all need to buy in.