Item	Type	Statement	Statement Global Rank		Ease of Implementing (overall rank)	Perceived Protection (overall rank)	Ease of Understanding (overall rank)	Familiarity With (overall rank)	Agreement With (overall rank)
10	P	In the informed consent process, trial participants should be told what prevention services they will receive (UNAIDS, 2007, p.54).	1		11	10	7	2	1
17	C	In the informed consent process, trial participants should be told what care and treatment services they will receive (UNAIDS, 2007, pp.53-54).	2		20	9	8	5	3
14	C	Agreements on who will finance, deliver and monitor care and treatment should be documented (UNAIDS, 2007, p.49).	3		56	32	30	23	17
20	C	Care approaches, and their successes and failures, should be carefully documented (UNAIDS, 2007, p.50).	4		83	31	26	21	14
11	C	Trial participants should get access to optimal care and treatment for HIV infection, including ART (UNAIDS, 2007, p.48).	5		59	13	12	6	4
16	C	Researchers and trial sponsors should collaborate with government to strengthen capacity to deliver care services (UNAIDS, 2007, p.49).	6		79	36	34	25	16
9	P	Researchers and trial sponsors should collaborate with government to strengthen capacity to deliver HIV prevention services (UNAIDS, 2007, p.49)	7		80	49	38	27	25
12	C	Trials should not be conducted when agreements have not been reached among all stakeholders regarding access to care and treatment (UNAIDS, 2007, p.13).	8		91	61	51	41	37
6	P	Communities should be meaningfully involved in determining the type, scope, and duration of HIV prevention services that will be available to participants and communities (GPP, 2007, p.28) .	9		78	54	46	43	22
7	P	The provision of risk reduction interventions should be monitored (UNAIDS, 2007, p.47).	10		86	57	35	29	15
5	P	Trials should not be conducted when agreements have not been reached among all stakeholders regarding the standard of prevention (UNAIDS, 2007, p.13).	11		75	73	66	53	42
18	C	Trials should only take place where participants will have ongoing access to psychological services and legal support (UNAIDS, 2007, p.40).	12		97	84	68	55	40
13	C	Communities should be meaningfully involved in determining the type, scope, and duration of treatment and care that will be available to participants and communities (GPP, 2007, p.28).	13		77	62	52	50	44
15	C	Stakeholders should discuss disseminating results about how access to care was implemented in the trial (GPP, 2007, p.31).	14		95	94	82	69	48
19	C	Trials should help to develop HIV care services within the host country (UNAIDS, 2007, pp. 48-49)	15		90	81	67	45	24
1	P	Trial participants should get access to all state of the art HIV prevention services (UNAIDS, 2007, p.45).	16		98	89	63	39	19
2	P	New prevention methods should be added to the prevention package as they are validated or approved by relevant authorities (UNAIDS, 2007, p.45).	17		99	96	58	47	18
8	P	Stakeholders should discuss disseminating results about how the standard of prevention was implemented in the trial (GPP, 2007, p.31).	18		88	87	76	70	60
3	P	New prevention methods should be added to the prevention package based on consultation among all stakeholders (UNAIDS, 2007, p.45).	19		92	74	71	65	64
4	P	The protocol should describe how stakeholders will negotiate adding new methods to the risk reduction package (UNAIDS, 2007, p.47).	20		100	93	85	72	33