Introduction

The fortieth meeting of the Scientific and Technical Advisory Committee (STAC) of the UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases (TDR) took place at World Health Organization (WHO) headquarters in Geneva on 21 and 22 March 2018. The meeting was chaired by Professor Charles Mgone, and attended by STAC members, representatives of departments at WHO headquarters and the TDR secretariat (refer to the list of participants attached for a full list of attendees).

Summary of proceedings

AGENDA ITEM 1 – Opening of the meeting

Key messages

Professor Charles Mgone, Chair STAC, called the meeting to order and requested Director TDR, Dr John Reeder, to formally open STAC40. Dr Reeder welcomed STAC members and introduced the Assistant Director-General for Communicable Diseases (CDS), and TDR Special Programme Coordinator, Dr Ren Minghui, to give opening remarks. Dr Ren acknowledged the significant role of STAC members in providing advice and monitoring the implementation of TDR’s 2018-2023 Strategy. He commended TDR for being the first institution to be certified within the framework of COHRED’s Research Fairness Initiative, aimed at validating fair and equitable practices in health research and innovation for health and development. He also mentioned other TDR achievements, including the artesunate suppositories pre-referral treatment for children in countries which has been prequalified by WHO and made available for procurement. Dr Ren presented some current and future opportunities for TDR to work with other departments and clusters across WHO on priority objectives such as universal health coverage, tuberculosis control and elimination, and other outcomes of WHO’s Thirteenth General Programme of Work (GPW13), which would give TDR and research more visibility with WHO’s Member States. He commended the continued collaboration between TDR and the other departments in the CDS Cluster and gave his wishes for a productive meeting.
Dr Reeder highlighted the scope and focus of the meeting, which covers the first biennium of the new strategy, and reporting on the 2016-2017 biennium implementation and performance. He mentioned STAC’s important role in informing the strategy and aligning TDR’s structure with its strategic objectives, as well as its continuing role in recommending directions and improved ways of working. He invited STAC members to discuss projects and approaches, and to engage with the secretariat across the Programme.

All participants were invited to introduce themselves.

AGENDA ITEM 2 – Statutory business

Professor Mgone invited members to provide good scientific advice that can move TDR’s portfolio of projects forward. He reminded STAC members of their role: to advise on planning and implementation, and to give guidance on prioritization and strategy within TDR.

Professor Mgone proposed that Dr Ayat Abuagla be appointed Rapporteur of STAC40. Dr Abuagla was appointed Rapporteur by acclamation.

A call was issued for any conflicts of interest. No conflicts were declared however Chair STAC invited any members who may have a specific conflict of interest for an agenda item to voice that accordingly.

Decisions:

- Dr Ayat Abuagla was appointed Rapporteur of STAC40
- The Agenda of STAC40 was adopted as proposed
- Declarations of interests were accepted as presented to the Secretariat with no conflicts foreseen

AGENDA ITEM 3 – Director’s Report and follow-up on STAC39 recommendations

Key messages

Dr Reeder’s presentation:

- Highlighted some achievements from 2017, covering the three strategic areas of research, capacity strengthening and knowledge management, such as:
  - expansion of the work on country preparedness for arbovirus outbreak detection and response that includes Zika and Chikungunya, in addition to work on Dengue;
  - advances in research on visceral leishmaniasis, bringing the disease closer to elimination on the Indian subcontinent;
  - establishment of social innovation hubs in countries, focusing research and capacity strengthening work in the field;
  - engagement with non-Anglophone countries;
  - production of policy documents as a result of climate change research in Africa;
  - WHO redefining residual malaria following evidence provided by TDR research;
  - offering of the Implementation Research toolkit online for easy access by all researchers; and
• expansion of regional networks to provide skills, collaboration and improve health in countries.

• Mentioned the instrumental role of STAC during development of the 2018-2023 Strategy, as well as its continuing role in monitoring any strategic drift. Presented some directions for activities under the three strategic areas of the new strategy.

• Explained the transition of knowledge management to global engagement activities across the Programme and their contribution to universal health coverage.

• Regarding the financial update, TDR ended the 2016-2017 biennium on track, with a 94% implementation rate, and initiated the 2018-2019 biennium at the US$ 40 million budget level approved by the Joint Coordinating Board (JCB).

• Major core contributors showed strong loyalty and helped bridge a US$ 5.8 million funding gap in the wake of unexpected contribution decreases from two core donors. Efforts have been made to increase both undesignated and designated funding for 2018-2021 and beyond.

• Strategically, designated funding is being sought to maintain current collaborative projects, but also to expand the area of research on antimicrobial resistance through a SORT IT approach.

• In order to further align with the new strategy, TDR is reorganizing to simplify its structure and integrate the two research teams into one Research for Implementation team. The process is ongoing with WHO’s Human Resources department and the WHO Staff Association.

• A new Performance Framework, including an updated Key Performance Indicators (KPI) list, was developed by TDR with input from donors and co-sponsors to align with TDR’s reporting needs, and also to link with Sustainable Development Goal (SDG) targets and the WHO GPW13 objectives.

• Mentioned the progress made on TDR’s core values, for example: increased focus on low- and middle-income disease endemic countries in funding and in representation on advisory groups; mobilization activities to improve gender equity; and joining the Research Fairness Initiative. STAC members were invited and encouraged to join the mobilization for gender equity.

**Discussion points:**

• STAC commended TDR on the significant progress made since 2014 in delivering a range of outputs. In an environment of increased competition for funding, TDR has adopted a partnership approach that helps make outputs more sustainable. This approach relies on working with existing institutions and networks in countries and regions, and on strengthening their capacity to do work that is in line with TDR’s strategy.

• Aligning TDR’s work with WHO’s universal health coverage goals requires continuing to do what TDR is doing now, with a little fine-tuning (for example, focusing on target countries designated by WHO).

**Decision:**

• **STAC endorsed the Director’s report**
AGENDA ITEM 4 – Programme finance and performance overview

Preliminary financial report for 2016-2017 and outlook for 2018-2019; progress made against TDR’s key performance indicators; and progress on the implementation of TDR’s risk management plan – presented by Dr Beatrice Halpaap, TDR Portfolio and Programme Manager

Key messages

Dr Halpaap’s presentation:

• Covered three areas: progress on the 2012-2017 strategy implementation and performance overview; financial update; and risk management report.

• Showed how 2017 results completed the cycle of the previous strategic plan 2012-2017. TDR achieved most of its KPI targets in technical results, core values application (gender equity, socio-economic equity, quality, sustainability, partnerships) and in managerial performance. Women grantees and first authors continue to represent around 40% which, while promising, is below the 50% target. STAC was invited to provide input on what the targets for disease endemic country representation on advisory groups should be in the future, as these have far exceeded original targets.

• Mentioned the new version of the Performance Framework, updated for the 2018-2023 Strategy, together with the KPI list, and how TDR outcomes are contributing to global impact targets, both under SDG targets and WHO’s 3-billion strategic objectives. Invited STAC to provide comments on the KPI list and targets prior to finalization of the Framework. Mentioned the suggestion to add Goal 9.5 related to building capacity for scientific research and innovation in countries.

• Explained the evolution of TDR’s financial situation over the past year and that implementation for 2016-2017 reached 94%. Given the unexpected drop in contributions from two core donors in October 2017, a contingency plan was developed for the 2018-2019 biennium. The United Kingdom of Great Britain and Northern Ireland Department for International Development (DFID) and the Swedish International Development Cooperation Agency (Sida) increased their contributions to bridge the gap. This allowed for the JCB-approved US$ 40 million scenario to begin implementation on 1 January 2018. Efforts to fundraise both designated (DF) and undesignated (UD) funding need to be sustained, not only for 2018-2019 but also for 2020-2021.

• Presented highlights from the risk management report, mentioning that three risks that are no longer relevant are proposed for closure and asked STAC for input.
  ▪ Risk 11 - Process for selection of TDR’s grantees and monitoring of their work not adequate anymore
  ▪ Risk 13 - Implementation of TDR strategy 2012-2017 and workplan not effective
  ▪ Risk 15 - World Health Assembly requested TDR to consider hosting a pooled funding mechanism for R&D for neglected diseases to be operational by 2016

Discussion points:

• Commended TDR on the achievement of performance targets and the delivery of solid outputs.

• The aspect of how to further make indicators reflect sustainability and impact was discussed. Sustainability is addressed through TDR’s working model, partnerships, which create leverage, continuity and sustainability. Qualitatively, to measure sustainability TDR tracks the use of tools, strategies and solutions that have been produced with TDR support and in use for more than two years. In addition, evaluations look at how countries are making use of and applying TDR outputs.
• Regarding uptake of solutions and how TDR is measuring that, discussed how stakeholders are considered and engaged with from the project design and planning stage, to facilitate translation to policy and practice once outputs have been delivered. Teams are monitoring and reporting on uptake in their annual reports.

• A question was raised about the identification of new donors. TDR conducted a mapping of donors and their policy changes, and is applying efforts to strengthen its fundraising. Visibility and promotion of successes needs to increase so that donors see them.

• Relative to the KPIs measuring equity in publication authorship, it was mentioned that in some cases not only first and last authors play a significant role but other authors as well.

• Regarding the proposed KPI 17, it was suggested to rephrase it to include not only the number but also proportion of publications. (resulting text would be: “Number and proportion of peer-reviewed publications explicitly considering: gender and women issues, vulnerable groups or people with disabilities”)

• STAC discussed the need to move faster in engaging with political science and policy-making by bringing the relevant expertise onto STAC and/or the scientific working groups (SWGs) – helping TDR to better define approaches when translating evidence to policy and practice.

**Decision:**

• STAC endorsed the TDR Performance Framework 2018-2023
• STAC endorsed the 2017 TDR Results Report
• STAC endorsed the Risk Management Report 2017

**Recommendations:**

• Ensure that sustainability indicators are included in the key performance indicators (KPIs)
• Complement STAC and SWGs with policy-making and political science expertise to help define better approaches to the research to policy interface

**AGENDA ITEM 5 – Report on technical progress in 2017 and planned activities for 2018**

**Intervention and Implementation Research (IIR) – presented by Dr Piero Olliaro**

**Key messages**

Dr Olliaro’s presentation:

• Highlighted achievements in 2017
• Mentioned the new strategic approach to 2018-2023
• Outlined fundraising efforts targeted at key areas such as research on antimicrobial resistance

**Discussion points:**

• Discussed various opportunities to expand the geographical reach of TDR research as well as possible themes, taking into consideration the need for prioritization based on established criteria and the role of SWGs in providing operational guidance. TDR is not an emergency response programme; activities are prioritized to add the most value.
• The models used in community-based research in rural areas cannot necessarily be replicated in urban areas or in other geographical regions.

• Commended the EWARS system developed by TDR as an excellent capacity building tool for countries to detect and respond to emergencies. Discussed possible additional uses in climate change research as a tool to predict diseases related to climate change and vectors.

Vectors, Environment and Society (VES) – presented by Dr Florence Fouque

**Key messages**

Dr Fouque’s presentation:
- Highlighted achievements in 2017
- Focused on partnerships, networking, leverage and sustainability.
- Mentioned plans for 2018.

**Discussion points:**
- Discussed the concept behind the method of releasing sterile mosquitoes to eventually reduce mosquito populations in determined areas.
- Commended the Caribbean Vector Control Network facilitated by TDR and discussed the lessons learned from this project that could be replicated in other networks – such as how to best determine the right time for TDR to step back from a project without affecting its sustainability. For this project, leverage from countries and existing structures was essential, as was the fact that TDR acted upon a strong wish of the countries to develop such a network. Working groups were formed among partners, which brought leverage from countries as well as external support.
- Highlighted the importance of research around vector control and urban health in TDR’s portfolio.
- In the context of the research on climate change impact and populations resilience project which is coming to an end, discussed the new knowledge, networks and collaboration and the role of social science.

Global Engagement – presented by Dr John Reeder

**Key messages**

Dr Reeder’s presentation:
- As presented in the 2018-2023 Strategy, Global engagement is a TDR-wide activity across all teams which will be coordinated through the Director’s office.
- Engaging TDR with other WHO departments and clusters, co-sponsors and a wide range of other stakeholders in countries, regions and globally.

**Discussion points:**
- The value of the regional office small grants scheme is that it engages people in country programmes and has generated significant interest in national priorities, getting people at the highest level in countries to review their outputs, and therefore facilitate utilization.
Resource Capacity Strengthening and Knowledge Management (RCS/KM) – presented by Dr Dermot Maher

Key messages

Dr Maher’s presentation included:

- Main areas of activity; changes to the RCS portfolio through global engagement projects moving to a separate workplan coordinated by the Director’s office.
- Key achievements in 2017.
- Perspectives for 2018 and beyond, in the context of renewing major designated funding grants.

Discussion points:

- To increase the proportion of women in science, the potential role of short courses in regional training centres (RTCs) was mentioned to motivate women to apply for postgraduate training (MSc, PhD) with the seven universities.
- Enhanced linkages and exchanges between RTCs, WHO regional offices and the seven universities in the postgraduate training schemes should be explored where possible. Examples were given of good collaboration in some regions that led to harmonized priorities and the ability for one RTC to expand short courses to two other institutions that received small grants.

Decision:

- STAC endorsed the reports on technical progress and planned activities of all teams

Recommendations:

- Strengthen joint activities between the TDR regional training centres, the universities in the postgraduate scheme and WHO regional offices
- Review activities by geographical region to identify gaps
- Include use of more conceptual diagrams in the annual team reports

AGENDA ITEM 6 – Update from SWG Chairs

Intervention and Implementation Research (IIR) and Vectors, Environment and Society (VES) – presented by Professor Bertie Squire (IIR) and Professor Moses Bockarie (VES)

Key messages

Professor Squire’s presentation:

- Described the context around the impact pathway strategic approach.
- Mentioned that the most recent SWG meeting was a joint meeting of the VES and IIR SWGs.
- Mentioned that bringing the two research teams (VES and IIR) together and transitioned into one Research for Implementation team is in process.
- Described the workplan and structure of the combined team.
- Highlighted specific recommendations made by the joint SWG meeting, which included:
  - Further alignment of activities with WHO GPW13 objectives and with SDG targets
  - Building synergies between expected results
- Making use of Gantt charts for each Expected Result (ER)
- Planning for SWG ER reviews, taking into consideration long-term engagement projects
- Reviewing the balance and integration of capacity strengthening activities between the research teams and RCS.

- Outlined the priorities for 2018-2023

Discussion points:
- Community based research applies to a range of communities: urban, rural, different population densities, different local leadership models and different challenges
- Estimating health impact is done whenever possible, e.g. the research projects to improve access to healthcare in Africa measure mortality in children in target populations.
- TDR has organized a meeting and is working with others in WHO, DFID, IDRC, etc. to define what is expected in terms of data and evidence synthesis that are used for policy-making.
- Requested STAC to agree with incorporate the proposed changes and additions to SWG SOPs coming from the Research SWG.

Research Capacity Strengthening and Knowledge Management – presented by Professor Maria Teresa Bejarano (RCS/KM)

Key messages

Professor Bejarano’s presentation:
- Summarized recommendations made by the RCS/KM SWG.
- Suggested maximizing dissemination and use of the tools developed with TDR support, through the RTC network.
- Expressed the hope that funding to the postgraduate training scheme would be increased.
- Recommended continuation of strategic activities with WHO departments and external partners.

Discussion points:
- STAC took note of the reports by the SWG Chairs and commended the SWGs for their work in 2017.
- Trying to assess the health impact of training MSc students may not be easy, but several mechanisms can be utilized, such as literature review of similar initiatives, evaluation, surveying through TDR Global, or as part of the RCS workplan in partnership with others. ESSENCE considered the impact and has a good practice document on the topic; some is still work in progress.
- There is work in progress between TDR, HRP and the Alliance to define a theory of change for capacity strengthening activities, and their impact on health and development.
- Suggested using SDG goal 9.5 to measure the extent of building capacity for innovation in countries, not only the impact on health.
AGENDA ITEM 7 – STAC and SWG Governance

2018 SWGs, membership and meetings and Oversight of Global Engagement – presented by
Dr Garry Aslanyan, TDR Partnerships and Governance Manager

Key messages

Dr Aslanyan’s presentation mentioned:

• Alignment of TDR’s structure with the new strategy, which requires merging VES and IIR into one Research for Implementation team, and respectively the two SWGs into one.

• Global engagement work area being elevated to a cross-cutting position in TDR, coordinated out of the Director’s office.

• Membership of the SWGs, presenting a list of existing and new members.

Discussion points:

• With the global engagement work area coordinated from the Director’s office, STAC was asked to discuss and decide on the type of oversight mechanism(s) they would like to see implemented for global engagement activities. The proposed options for oversight to be ensured are: i) two SWGs (one each for research and for capacity strengthening); ii) creation of a new SWG for global engagement; and iii) direct oversight by STAC.

• STAC noted the options and decided in favour of an oversight mechanism by both SWGs (research and capacity strengthening) and STAC, depending on the specifics of each expected result.

• STAC agreed to merge the two research SWGs (VES and IIR) into one, and agreed the proposed membership.

Decisions:

• Agreed to merge the IIR and VES Scientific Working Groups (SWGs) with the title Research for implementation, chaired by Professor Bertie Squire

• Endorsed the 2018 SWG membership as presented

• Agreed to have the activities under global engagement reviewed and overseen by both SWGs and STAC

Recommendations:

• Review the recommendations from the Joint Scientific Working Group on Vectors, Environment and Society (VES) and Intervention and Implementation Research (IIR) regarding SWG processes and procedures and incorporate as applicable

• Increase active collaboration between Research Capacity Strengthening and Research for Implementation

• Urgently formulate a plan to fill the leadership gap for the Research for Implementation team: short-, medium- and long-term. Succession planning should be extended to other senior positions
AGENDA ITEM 8 – TDR interface with WHO departments

Health Service Innovation and Universal Health Coverage (UHC) – presented by Dr Edward Kelley, Director, Department of Service Delivery and Safety

Key messages
Dr Kelley’s presentation mentioned:

• Service delivery and its linkage with SDG Goal 3.8 Universal health coverage
• Waste through inefficiency in health systems
• Collaboration with TDR on the Social Innovation in Healthcare Delivery initiative is fruitful
• Supporting operational research and a holistic approach to healthcare delivery

Discussion points:
• A lot more can be done globally to analyse the impact of various tools on facilitating adoption of country policy, which would benefit from integrating social science and qualitative research.
• The important role of social science to challenge the status quo of relationships, behaviours and processes in health systems, to improve effectiveness and efficiency.
• Some joint learning approaches in countries give voice to community members on which approaches are effective in their communities

WHO Global TB Programme – presented by Dr Malgosia Grzemska, Coordinator, Technical Support Coordination

Key messages
Dr Grzemska’s presentation mentioned:

• Began working with TDR in 2009 on child-friendly TB tests. Currently working together to build capacity in countries (WARN-TB, CARN-TB, etc.), supporting countries in TB prevalence surveys and designing research programmes.
• TB activities share local community health workers with other TDR projects such as research on seasonal malaria.
• Global mortality from TB is estimated at around 2 million each year, largely due to drug-resistant TB.
• Important role of BRICS countries in funding TB programmes, however, research is seriously underfunded.
• Database facilitated by TDR on active safety data monitoring for new medicines.

Discussion points:
• At this stage, TDR works with heads of country TB programmes to create task forces on research, eventually leading to the possibility of helping MSc and PhD students funded by TDR to carry out field work for their research in countries that need their skills, so that the impact of their research is amplified.
• Involving civil society, youth and nurses groups in the discussion around TB to shake up the status quo is something that may get traction from the highest level in WHO.
AGENDA ITEM 10 – WHO 13th Global Programme of Work and opportunities for TDR collaboration

Presented by Dr Bruce Aylward, Senior Adviser, Organizational Change, Office of the Director General

Key messages

Dr Aylward’s presentation included:

- Commending TDR on its achievements.
- WHO looking to show direct impact on people in the field.
- WHO’s 13th General Programme of Work included a mission (as a new addition) to complement WHO’s vision.
- Strategic plan and objectives with targets for 2023 (3 x 1 Billion).
- Strategic shifts in the way WHO will use its resources and presence.
- Organizational shift: measuring impact, operational model, partnerships and financing model, systems, culture change.
- The case for change: Why change? What does success look like?
- WHO investment case.

Discussion points:

- TDR’s approach of working directly with countries sets a good example through WARN-TB, and its expansion to CARN-TB, by making country priorities visible to the entire region.
- Effective model of a country office would cover four functions: liaison and representation in relation to ministries of health, technical support, partnerships and fundraising.

AGENDA ITEM 11 – Draft recommendations by STAC40

- The decisions and recommendations were reviewed and reworded as necessary by the STAC.

AGENDA ITEM 12 - Date and place of STAC41

Decision:

- STAC agreed that the forty-first meeting of STAC (STAC41) will take place in Geneva during the week of 25 March 2019, including a briefing on TDR for new members

Close of STAC40

Chair STAC thanked members for their hard work preparing for and during the meeting.
STAC40 summary of decisions and final recommendations

Decisions
1. Dr Ayat Abuagla was appointed Rapporteur of STAC40
2. The Agenda of STAC40 was adopted as proposed
3. Declarations of interests were accepted as presented to the Secretariat, with no conflicts foreseen
4. STAC endorsed the Director's report
5. STAC endorsed the TDR Performance Framework 2018-2023
6. STAC endorsed the 2017 TDR Results Report
7. STAC endorsed the Risk Management Report 2017
8. STAC endorsed the reports on technical progress and planned activities of all teams
9. Agreed to merge the IIR and VES Scientific Working Groups (SWGs) with the title Research for implementation, chaired by Professor Bertie Squire
10. Endorsed the 2018 SWG membership as presented
11. Agreed to have the activities under global engagement reviewed and overseen by both SWGs and STAC
12. Agreed that the forty-first meeting (STAC41) of STAC will take place in Geneva during the week of 25 March 2019, including a briefing on TDR for new members

Recommendations
1. Ensure that sustainability indicators are included in the key performance indicators (KPIs)
2. Complement STAC and SWGs with policy-making and political science expertise to help define better approaches to the research to policy interface
3. Strengthen joint activities between the TDR regional training centres, the universities in the postgraduate scheme and WHO regional offices
4. Review activities by geographical region to identify gaps
5. Include use of more conceptual diagrams in the annual team reports
6. Review the recommendations from the Joint Scientific Working Group on Vectors, Environment and Society (VES) and Intervention and Implementation Research (IIR) regarding SWG processes and procedures and incorporate as applicable
7. Increase active collaboration between Research Capacity Strengthening and Research for Implementation
8. Urgently formulate a plan to fill the leadership gap for the Research for Implementation team: short-, medium- and long-term. Succession planning should be extended to other senior positions
### Annex 1. Annotated Agenda

**PRE-MEETING DAY, Tuesday, 20 March**

**From 14:00**  
**BADGE COLLECTION FROM D BUILDING (UNAIDS) RECEPTION**

**Venue:** Room D42022 (4th floor UNAIDS building)

14:30  
**Refreshments available outside the meeting room**

15:00-16:30  
**Briefing session. Introductory meeting about TDR and the STAC being offered to STAC members who wish to acquaint themselves with the Programme and the processes and functions of the Committee. New members are expected to attend.**

**Documentation is available on the STAC SharePoint site.**

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**Wednesday, 21 March (09:00-17:00)**

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<th>Time</th>
<th>Item</th>
<th>Topic</th>
<th>Action</th>
<th>Reference documents</th>
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| 09:00:09:15| 1. Opening of the meeting                                           | Dr Ren Minghui, Assistant Director-General for Communicable Diseases and TDR Special Programme Coordinator  
Prof. John Reeder, Director, TDR |                  | Draft STAC40 agenda  
TDR/STAC40/18.1/Rev1  
Draft Annotated Agenda  
TDR/STAC40/18.1a |
| 09:15-09:30| 2. Statutory business                                               | 2.1 Appointment of the Rapporteur  
2.2 Adoption of the Agenda  
2.3 Declaration of interests  
Prof. Charles Mgone, Chair STAC | Decision        | Report of STAC39  
TDR/STAC39/17.3  
Follow-up on STAC recommendations  
TDR/STAC40/18.4 |
| 09:30-10:30| 3. Director’s Report and follow-up on STAC39 recommendations          | Prof. John Reeder  
Discussion                                               | Information and endorsement                  |  |
| 10:30-11:00| Coffee break                                                         |                                                                      |                  |                                          |
| 11:00-12:00| 4. Programme finance and performance overview                        | Dr Beatrice Halpaap, TDR Portfolio and Programme Manager  
TDR/STAC40/18.5 |
|            | 4.2 Progress made against TDR key performance indicators             |                                                                      | Information and endorsement                  | TDR Performance Framework 2018-2023  
TDR/STAC40/18.6  
2017 TDR results report (draft)  
TDR/STAC40/18.7 |
### Wednesday, 21 March (09:00-17:00) - continued

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<th>Item</th>
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<td>12:00-13:15</td>
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<td><strong>Lunch break</strong></td>
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<td>13:15-15:30</td>
<td>5.</td>
<td>Report on technical progress in 2017 and planned activities for 2018</td>
<td>Information and endorsement</td>
<td>TDR Expected Results Strategic Plans and Progress - 2016-2017 TDR/STAC40/18.9</td>
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<td>TDR Expected Results Operational Plans 2018-19 TDR/STAC40/18.11</td>
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<td>15:30-16:00</td>
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<td><strong>Coffee break</strong></td>
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<td>16:00-17:00</td>
<td>5.</td>
<td>Report on technical progress in 2017 and planned activities for 2018 – continued</td>
<td>Recommendation(s)</td>
<td>TDR RCS/KM Annual Report 2017 TDR/STAC40/18.14</td>
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<td>5.4 Research Capacity Strengthening (RCS)</td>
<td>Recommendation(s)</td>
<td>SWG RCS/KM report</td>
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<td>Dr Dermot Maher</td>
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**FROM 18:30: CASUAL GET-TOGETHER AT THE MONTBRILLANT HOTEL**
(with drinks and finger food)
### Thursday, 22 March (09:30-16:30)

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<tr>
<td>09:30-10:20</td>
<td>6.</td>
<td>Update from SWG Chairs</td>
<td>Recommendation(s) and decision</td>
<td>TDR’s STAC and scientific working groups: Terms of reference (June 2014) Note: SWG meeting reports can be found under Item 5.</td>
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<td>Prof. Bertie Squire (IIR) and Prof. Moses Bockarie (VES)</td>
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<td>Prof. Maria Teresa Bejarano (RCS/KM)</td>
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<td>5 min. presentations followed by discussion</td>
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<td>10:20-10:30</td>
<td>7.</td>
<td>STAC and SWG Governance</td>
<td>Decision</td>
<td>List of SWG members TDR/STAC40/18.15</td>
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<td>Dr Garry Aslanyan, TDR Partnerships and Governance Manager</td>
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<td>2018 SWGs, membership and meetings</td>
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<td>Oversight of Global Engagement</td>
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<td>10:30-11:00</td>
<td></td>
<td>Coffee break</td>
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<td>11:00-12:00</td>
<td>8.</td>
<td>TDR interface with WHO departments</td>
<td>Information</td>
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<td>• Health Service Innovation and Universal Health Coverage (UHC) - Dr Edward Kelley, Director, Department of Service Delivery and Safety</td>
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<td>• WHO Global TB Programme - Dr Malgosia Grzemska, Coordinator, Technical Support Coordination</td>
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<td>12:00-13:30</td>
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<td>Lunch break</td>
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<td>13:30-14:30</td>
<td>9.</td>
<td>Closed session with Director TDR</td>
<td>Recommendation(s)</td>
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<td>STAC members only closed discussion with Director TDR on issues requiring special attention.</td>
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<tr>
<td>14:30-15:00</td>
<td>10.</td>
<td>WHO 13(^{th}) Global Programme of Work and opportunities for TDR collaboration</td>
<td>Information</td>
<td>Draft Programme of Work</td>
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<td>Dr Bruce Aylward, Senior Adviser, Organizational Change, Office of the Director-General</td>
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<td>15:00-15:30</td>
<td></td>
<td>Coffee break</td>
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<tr>
<td>15:30-16:00</td>
<td>11.</td>
<td>Draft recommendations by STAC40</td>
<td>Recommendation(s)</td>
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<td>STAC rapporteur will present STAC recommendations made during the meeting</td>
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<tr>
<td>16:00-16:15</td>
<td>12.</td>
<td>Date and place of STAC41</td>
<td>Recommendation(s)</td>
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<td>March 2019, WHO HQ, Geneva</td>
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<td>16:15-16:30</td>
<td>13.</td>
<td>Any other business</td>
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</tbody>
</table>

**CLOSE OF STAC40**
Annex 2. List of participants

STAC Members

Dr Ayat Abuagla
UK and Ireland Focal point, Planning
Sudan Medical Specialization Board
Khartoum
Sudan

Professor Maria Teresa Bejarano
Senior Research Advisor | Unit for Research Cooperation
Department for Partnerships and Innovations
Swedish International Development Cooperation Agency (Sida)
Stocksund
Sweden

Professor Afif Ben Salah
Full Professor of Community Medicine, College of Medicine and Medical Sciences
Department of Community and Family Medicine
Arabian Gulf University
Manama
Kingdom of Bahrain

Dr Graeme Bilbe
Research and Development Director
Drugs for Neglected Diseases initiative (DNDi)
Geneva
Switzerland

Professor Moses Bockarie
Director of South-South Cooperation and Head of Africa Office
European & Developing Countries Clinical Trials Partnership (EDCTP)
Medical Research Council
Cape Town
South Africa

Professor Claudia Chamas
Researcher
Centre for Technological Development in Health
Oswaldo Cruz Foundation (Fiocruz)
Rio de Janeiro
Brazil

Professor Sónia Dias
Associate Professor, International Public Health Institute of Hygiene and Tropical Medicine
Universidade Nova de Lisboa
Lisbon
Portugal

Dr Sara Irène Eyangoh
Directeur Scientifique
Centre Pasteur du Cameroun
Laboratoire National de Référence et de Santé Publique | Ministère de la Santé Publique
Yaoundé
Cameroon

Professor Simon Hales
Research Associate Professor: Environmental Epidemiology
University of Otago
Otaki
New Zealand

Dr Subhash Hira
Professor of Public Health and Senior Advisor Public Health Foundation of India
New Delhi
India

(Chair) Professor Charles Mgone
Dar es Salaam
Tanzania

Dr Shagufta Perveen
Senior Instructor, Health System and Policy Research Group
Department of Community Health Sciences
The Aga Khan University
Karachi
Pakistan

1 unable to attend
**Dr Sonnia Romero Gorski**  
Facultad de Humanidades y Ciencias de la Educación  
Instituto de Antropología  
Montevideo  
Uruguay

**Professor Stephen (Bertie) Squire**  
Professor of Clinical Tropical Medicine, Liverpool School of Tropical Medicine (LSTM) | Consultant Physician, Tropical & Infectious Disease Unit, Royal Liverpool University Hospital  
Centre for Applied Health Research and Delivery  
Liverpool  
United Kingdom

**Professor Xiao-Nong Zhou**  
Director  
National Institute of Parasitic Diseases  
Chinese Center for Disease Control and Prevention  
Shanghai  
People's Republic of China

**Other participants**

**WHO Headquarters Staff**

**Dr Ren Minghui**  
Assistant Director-General for Communicable Diseases (CDS)

**Dr Bruce Aylward**  
Senior Adviser, Organizational Change  
Office of the Director-General

**Dr Malgorzata Grzemska**  
Coordinator, Technical Support Coordination  
GTB Global TB Programme

**Dr Edward Kelley**  
Director  
Service Delivery and Safety (SDS)

**Ms Nuria Toro Polanco**  
Technical Officer, Services Organization and Clinical Interventions  
Service Delivery and Safety (SDS)

**Mrs Isabelle Wachsmuth**  
Technical Officer  
Service Delivery and Safety (SDS)

**Special Programme staff**

**Director's office**

**Dr John Reeder**  
Director, TDR

**Dr Garry Aslanyan**  
Manager, Partnerships and Governance

**Ms Kristen Kelleher**  
Communications Officer

**Mr Rob Terry**  
Manager, Knowledge Management

**Administrative Support to the STAC**

**Ms Izabela Suder-Dayao**  
Team Assistant

**Ms Christine Coze**  
Technical Assistant

**Ms Flora Rutahakana**  
Team Assistant
Portfolio and programme management

Dr Beatrice Halpaap
Portfolio and Programme Manager

Ms Caroline Easter
Programme and Finance Officer

Ms Annabel Francois
Programme and Finance Assistant

Mrs Mary Maier
Administrative & Finance Officer

Dr Mihai Mihut
Portfolio Officer

Research capacity strengthening and knowledge management

Dr Dermot Maher
Coordinator

Ms Elisabetta Dessi
Team Assistant

Ms Najoua Kachouri Aboudi
Team Assistant

Dr Edward Kamau
Scientist

Dr Pascal Launois
Scientist

Dr Olumide Ogundahunsi
Scientist

Dr Mahnaz Vahedi
Scientist

Ms Flore Wagner
Team Assistant

Intervention and implementation research

Dr Piero Olliaro
Team Leader

Dr Christine Halleux
Scientist

Ms Ekua Johnson
Team Assistant

Dr Annette Kuesel
Scientist

Mr Abdul Masoudi
Assistant, Project Management

Dr Corinne Merle
Scientist

Ms Michelle Villasol-Salvador
Team Assistant

Vectors, environment and society

Dr Florence Fouque
Team Leader

Ms Flor Cabanel
Team Assistant

Ms Madhavi Jaccard-Sahgal
Team Assistant

Ms Mariam Otmani Del Barrio
Scientist

Dr Bernadette Ramirez
Scientist