

FINANCIAL MANAGEMENT REPORT

2018-2019

OUTLOOK

2020-2023



TDR/STRA/20.1

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2018-2019

Programme budget and workplan implementation

Two budget scenarios for 2018–2019 were approved by the Joint Coordinating Board in 2017 (figure 1)

- The two budget scenarios for the biennium 2018–2019 included a lower scenario at US\$ 40 million and a higher scenario at US\$ 50 million.
- The two-scenario model was developed to manage the uncertainty of funding and to allow a confident start to implementation. The scenarios were to be implemented in a stepped approach as funds became available.

Effective fundraising (figures 2 – 4)

- Funds available include revenue recognized in the current biennium together with funds carried over from the previous biennium.
- Funds available for use in 2018-2019 were estimated at US\$ 39.7 million in January 2018 (US\$ 31.0 million undesignated; US\$ 8.7 million designated) increasing to US\$ 50.7 million by January 2019 (US\$ 35.3 million undesignated; US\$ 15.4 million designated). The increase was due to confirmation of core funding contributions, increases from some contributors and additional designated funds.
- Fundraising efforts for project designated funds proved to be successful, resulting in an increase in contributions during the biennium.
- Part of the designated funds recognized in 2018-2019 were intended to fund 2020 activities.

Moving towards implementation of the US\$ 50 million scenario in 2019 (figure 4)

- In January 2018, implementation of the lower budget scenario was initiated in line with the revenue forecast at that time.
- As additional funds became available, the two-scenario model proved successful, allowing for implementation of the higher budget scenario.
- In January 2019, planned costs were revised to US \$46 million in line with funds available at that time.
- At the internal biannual portfolio review in September 2019, planned costs for 2018–2019 were adjusted to US\$ 45.8 million based on capacity for implementation and reallocation of undesignated funds made available to operations due to some salary and programme support costs being covered by funds designated to projects.

US\$ 37.2 million funds utilized (figures 5 and 6)

As at 31 December 2019, US\$ 37.2 million had been spent or committed (US\$ 0.6 million commitments). This represents:

- 81% implementation of revised planned costs.
- **89% implementation of operations activities supported by undesignated funds.**
- 72% of operational activities supported by designated funds. Delays were discussed and agreed with respective donors.
- Savings in staff costs and WHO administration costs amounted to US\$ 4.0 million. Savings in staff costs were due to: (i) lower costs than WHO standard costs planned as these include benefits which vary depending on the staff member's personal situation; (ii) vacant positions; and (iii) 18 months of reduced salaries due to a decrease in post adjustment in 2018 (staff were actually reimbursed by WHO at a later stage).

2020-2023

Financial update

Two budget scenarios for 2020–2021 were approved by the Joint Coordinating Board in 2019 (figures 7 and 8)

- A lower scenario at US\$ 40 million (US\$ 28 million undesignated funds; US\$ 12 million designated funds).
- A higher scenario at US\$ 50 million (US\$ 34 million undesignated funds; US\$ 16 million designated funds).

A forecast funds available range has been developed for the biennium 2020-2021 and is currently estimated between US\$ 42.9 million and US\$ 47.5 million (figures 9 – 13)

- Forecast funds available include revenue recognized in the current biennium, forecast revenue streams and funds carried over from the previous biennium.
- Forecast revenue is estimated in a conservative way, reflecting uncertainty of contributions and foreign exchange rates. It is based on historical contribution levels, exchange rates and ongoing discussions with donors in light of the current context.
- Due to the uncertainty of forecast revenue streams (exchange rates, COVID-19 pandemic implications on funding, etc.) a forecast revenue range has been established. The current range is from US\$ 34 million to US\$ 39.6 million.
- Carryover from the 2018-2019 biennium amounts to US\$ 11.9 million (US\$4.4 million designated funds and US\$ 7.5 million undesignated funds), resulting from the timing of expenditures and cost savings in the previous biennium. Savings in undesignated funds totalling US\$ 4 million resulted from savings in staff and administration costs mentioned above. As discussed and recommended by the Standing Committee, it is planned to use these funds to top up TDR's working capital account (in response to WHO's request to set aside the equivalent of 2-year's salary costs for personnel liability). The remainder of the carryover is planned to be used towards operational activities in 2020-2021.

- Forecast funds available range from US\$ 42.9 million (US\$ 28 million UD, US\$ 14.9 million DF) to US\$ 47.5 million (US\$ 29.5 million UD, US\$ 18 million DF). These forecasts include US\$ 4.5 million and US\$ 3.5 million of UD carryover respectively.
- The level of forecast revenue in addition to the level of carryover enabled TDR to confidently begin implementation of the lower budget scenario in January 2020.
- Forecast funds available will be reviewed in September 2020 and planned costs will be revised as necessary.

US\$ 7.6 million funds utilized as at 30 April 2020 (figures 14 and 15)

- Implementation in 2020 is on track, despite setbacks resulting from the COVID-19 pandemic.
- Four months (17%) into the biennium, implementation is 19% of the US\$ 40 million budget scenario.

2022-2023 Programme budget scenario levels

Preparing for the 2022-2023 Programme Budget development (figures 16 to 18)

- A two-budget scenario model, similar to 2020-2021, is proposed as follows:
 - A lower scenario at US\$ 40 million (US\$ 28 million undesignated funds; US\$ 12 million designated funds).
 - A higher scenario at US\$ 50 million (US\$ 34 million undesignated funds; US\$ 16 million designated funds).
- Once budget scenario levels have been approved by the Joint Coordinating Board (JCB) in June 2020, TDR will develop the detailed programme budget and workplan for 2022-2023 in consultation with stakeholders. These will be reviewed by the Scientific and Technical Advisory Committee, endorsed by the Standing Committee and approved by the JCB in 2021, as relevant.

Revenue projections and financing of the proposed budget scenarios (figure 16)

- Due to the current level of uncertainty with regard to foreign exchange rates and the ability of donors to maintain existing levels of contributions, especially in the context of possible implications from COVID-19, a forecast revenue range has been developed.
 - The upper limit includes US\$ 30 million undesignated funds and US\$ 9.5 million designated funds (based on favourable foreign exchange rates and 100% current contribution levels)
 - The lower limit includes US\$20 million undesignated funds and US\$ 6.7 million designated funds (based on adverse foreign exchange rates and 80% current contribution levels)
- This range needs to be monitored and reviewed regularly, while all efforts need to be made to sustain donor contributions and identify new funding sources.
- Fundraising efforts will focus on the following approaches:
 - Discussions with existing core donors to best anticipate any impact of COVID-19 on contributions and reaching out to new core donors to diversify contribution sources.
 - Discussion with existing donors of project specific funding regarding continuation of projects and submission of new specific project proposals to new donors (e.g. global emergencies, One Health).

Figures and tables

Figure 1: 2018–2019 budget scenario's (in US\$ millions)

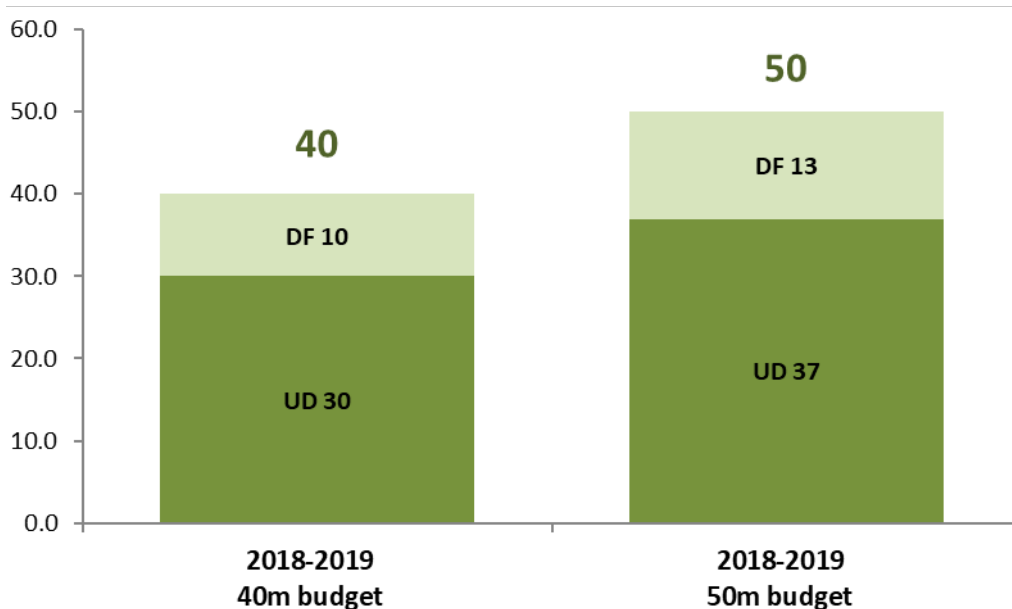
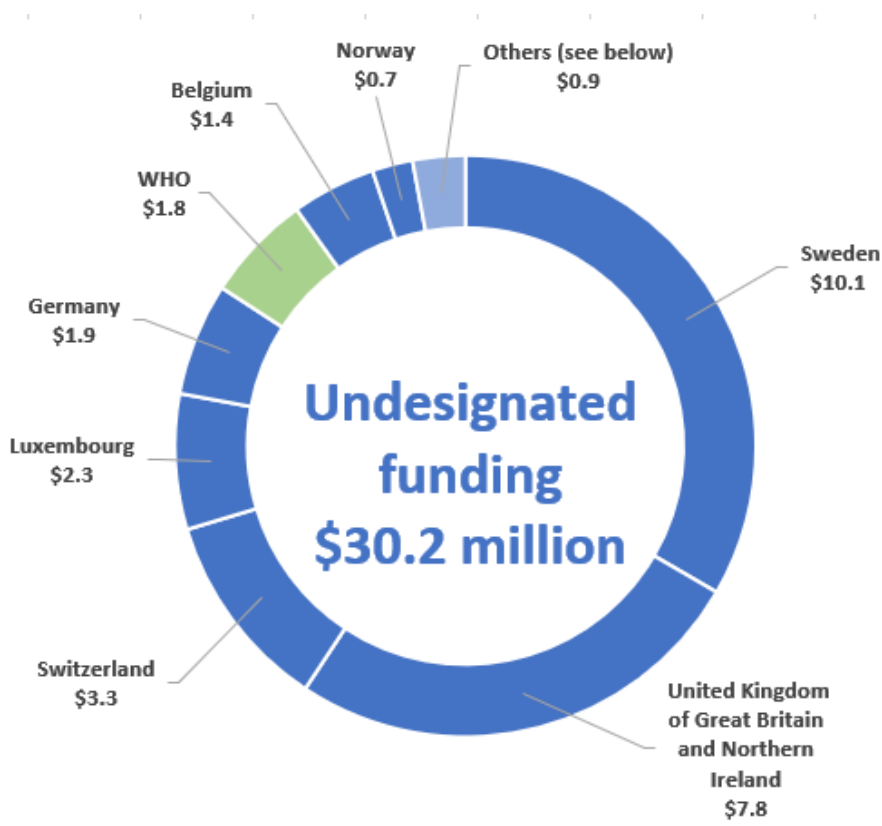


Figure 2a: Undesignated funding by donor (2018-2019) (in US\$ millions)



Designated funding (DF): for specific activity Undesignated funding (UD): flexible for TDR programme

Figure 2b: Undesignated funding by donor (2018-2019): Breakdown of “others” as per Figure 2a (in US\$ thousands)

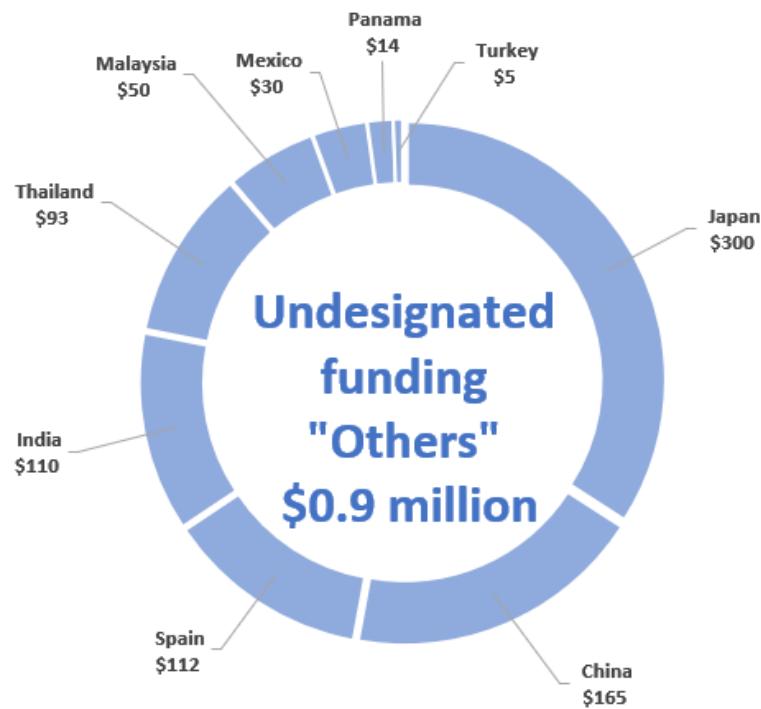


Figure 3: Designated funding by donor and project (2018-2019) (in US\$ millions)

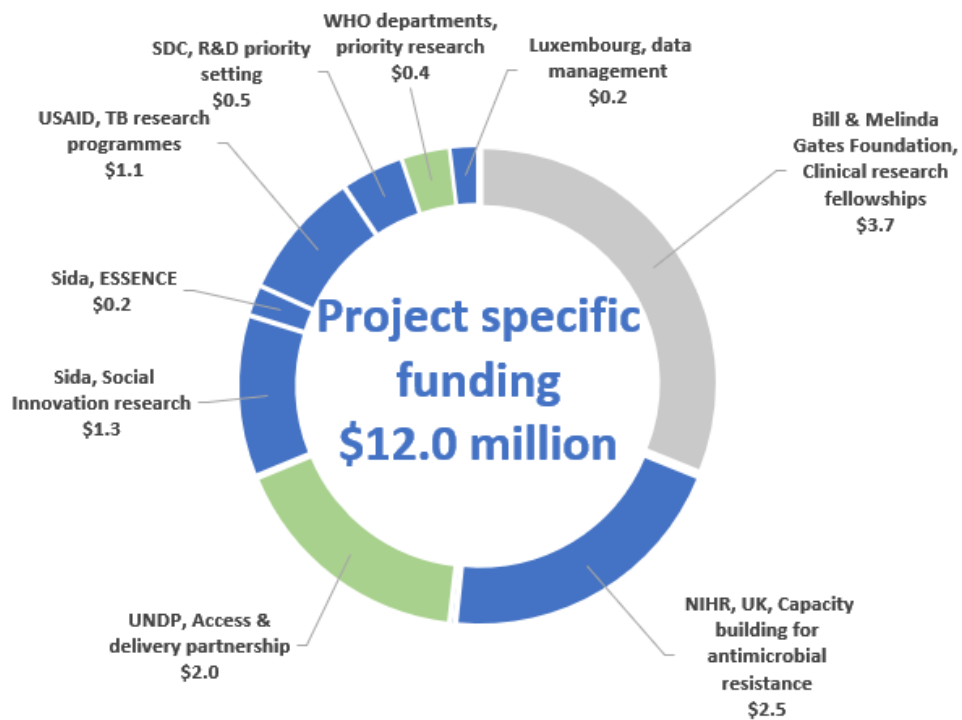


Figure 4: 2018–2019 budget scenarios and revised planned costs (in US\$ millions)

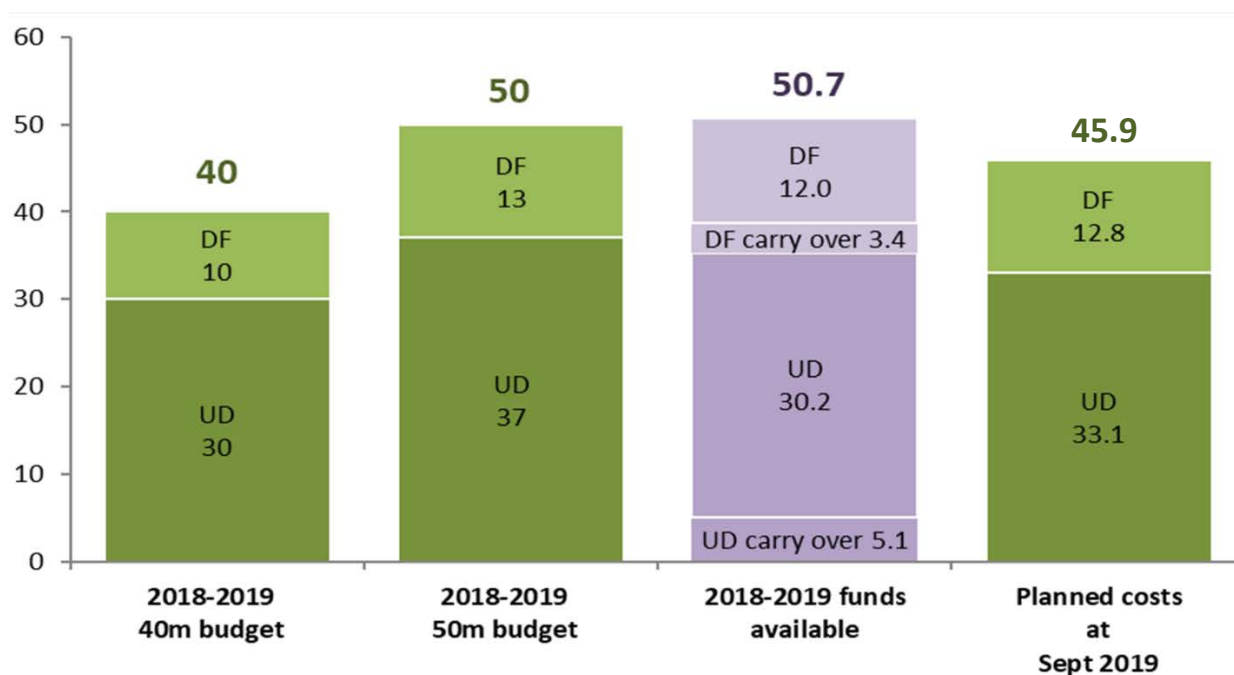
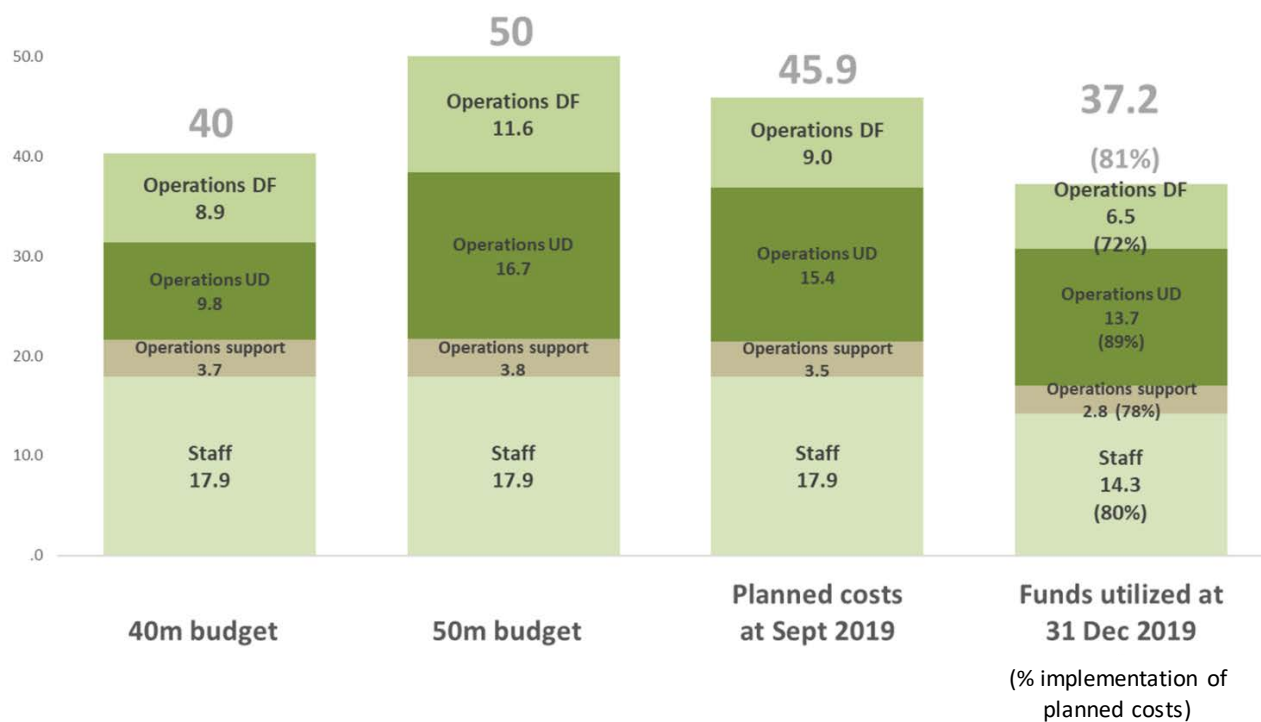
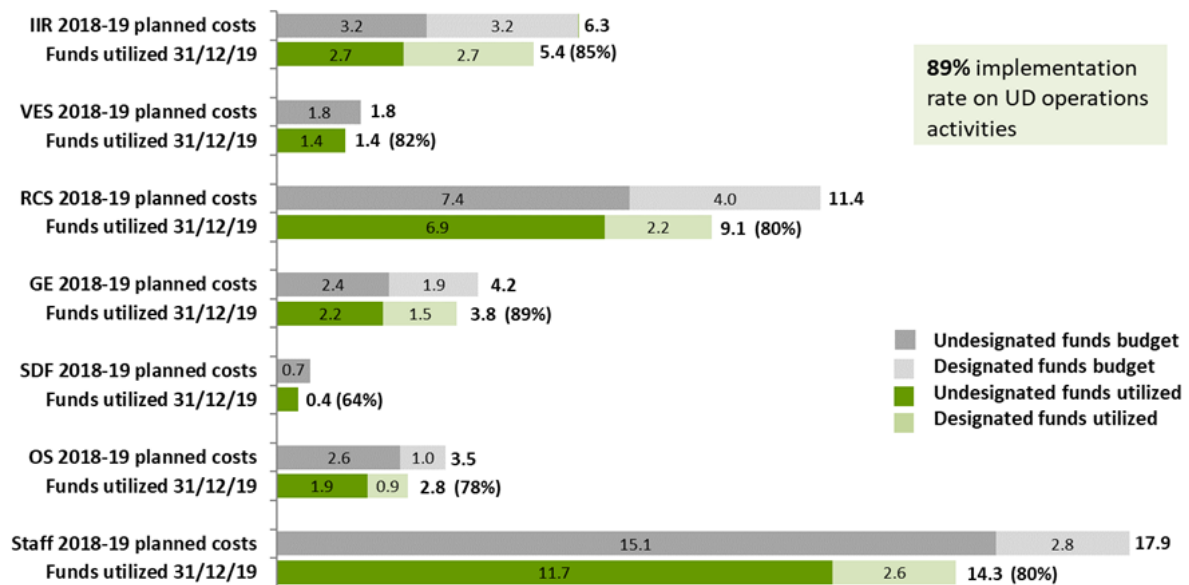


Figure 5: 2018–2019 financial overview as at 31 December 2019 (in US\$ millions)



Designated funding (DF): for specific activity Undesignated funding (UD): flexible for TDR programme

Figure 6: 2018–2019 funds utilized by work area (in US\$ millions)



IIR: Intervention and Implementation Research

VES: Vectors, Environment and Society

RCS: Research Capacity Strengthening

GE: Global Engagement

SDF: Strategic Development Fund

OS: Operations support

Figure 7: 2020–2021 programme budget by fund type (in US\$ millions)

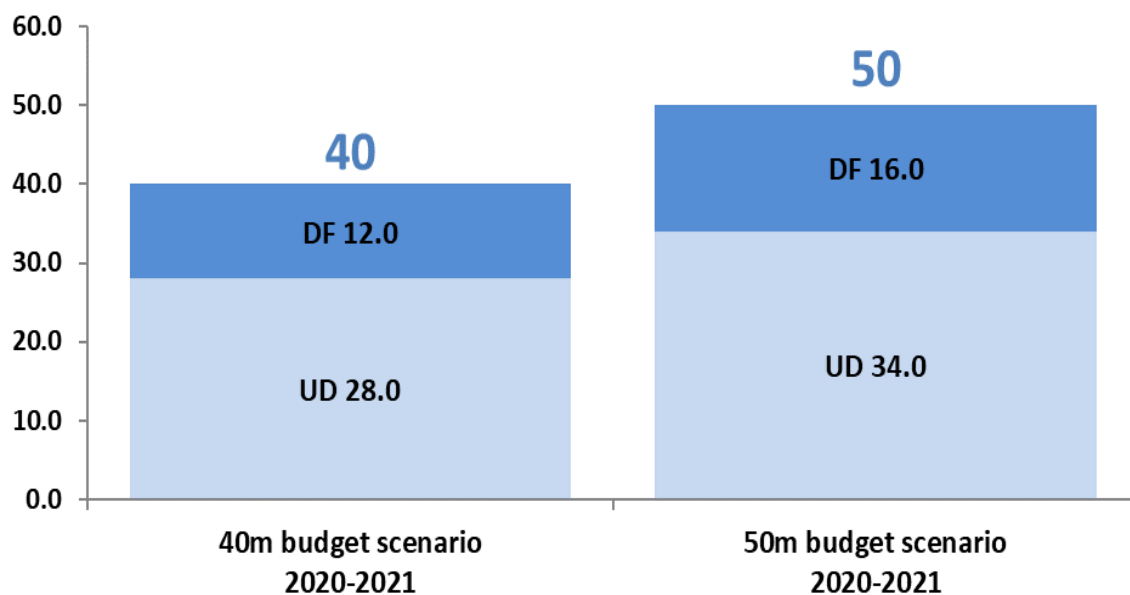
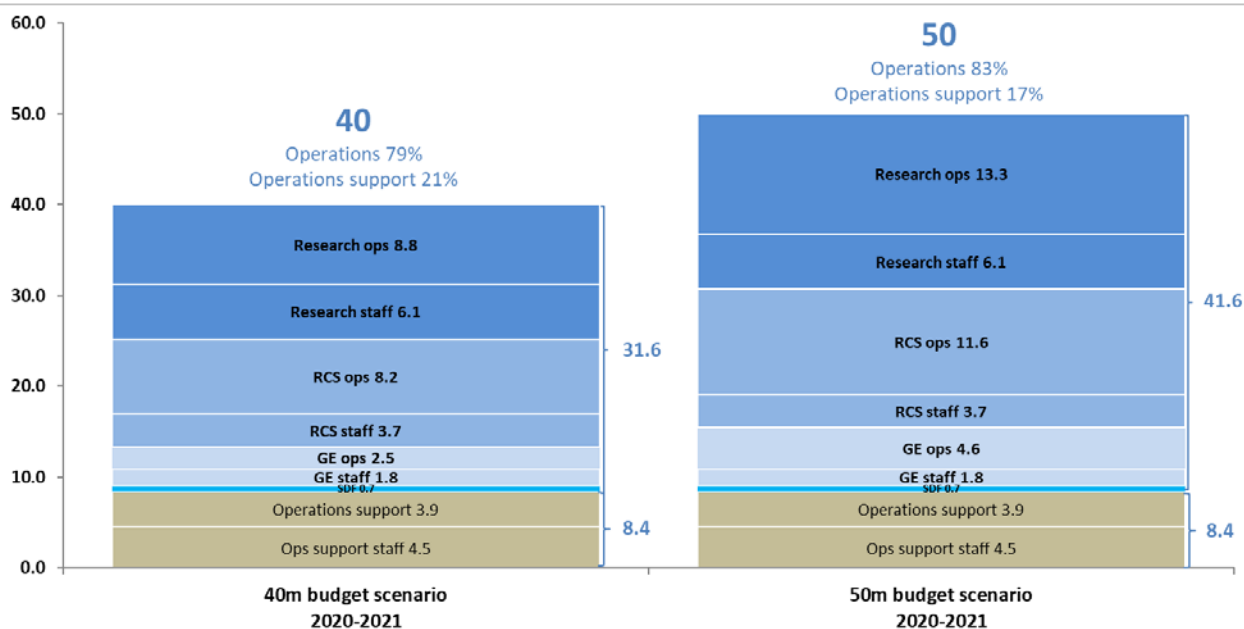


Figure 8: 2020–2021 programme budget by expenditure category (in US\$ millions)



Designated funding (DF): for specific activity Undesignated funding (UD): flexible for TDR programme

Figure 9: Illustration of implication of exchange rate on contributions 2012-2019 (in US\$ millions)

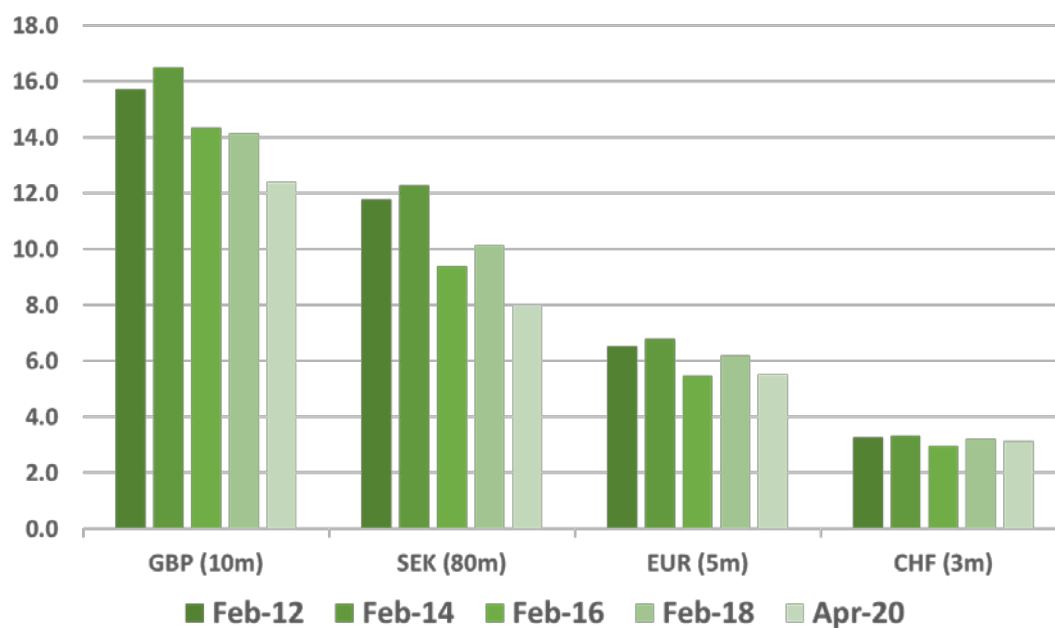
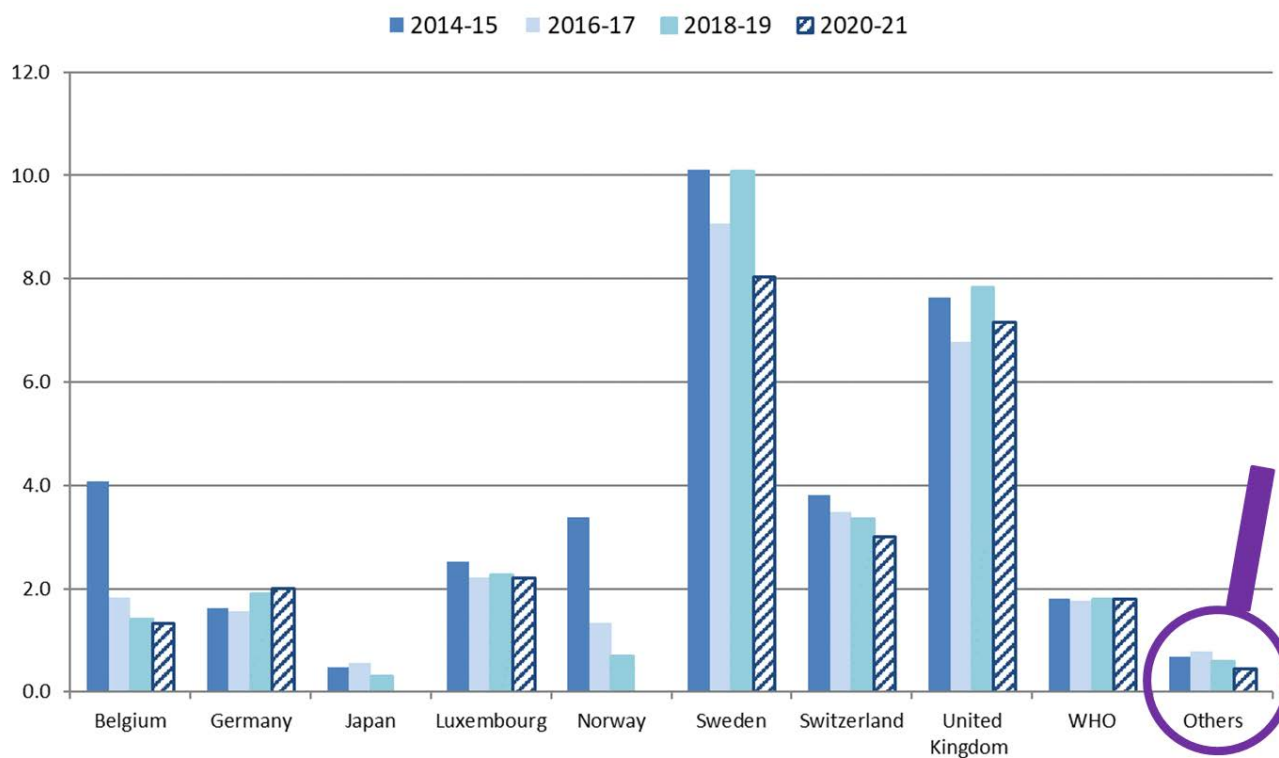


Figure 10: 2014–2019 revenue trend and 2020-2021 forecast (in US\$ millions)



Designated funding (DF): for specific activity

Undesignated funding (UD): flexible for TDR programme

Figure 10b: Revenue trend and 2020-2021 forecast (breakdown of “others” per figure 9a) (in US\$ millions)

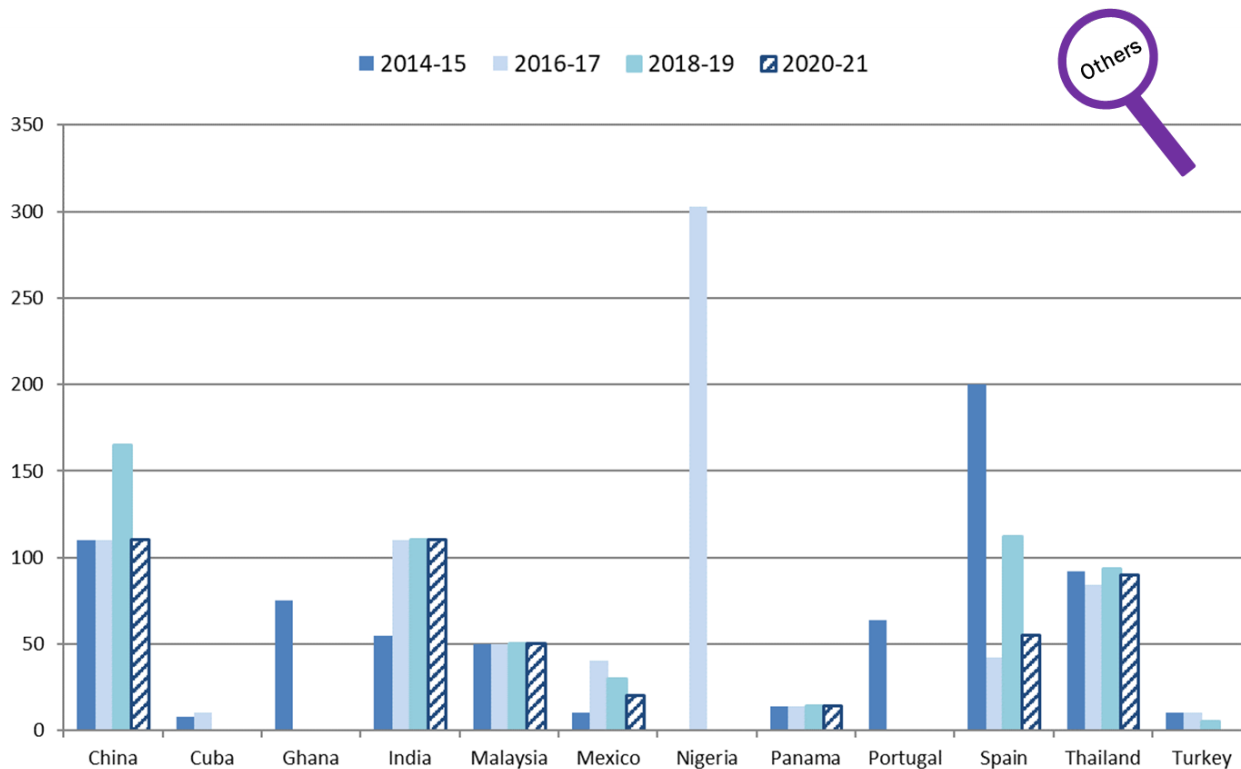
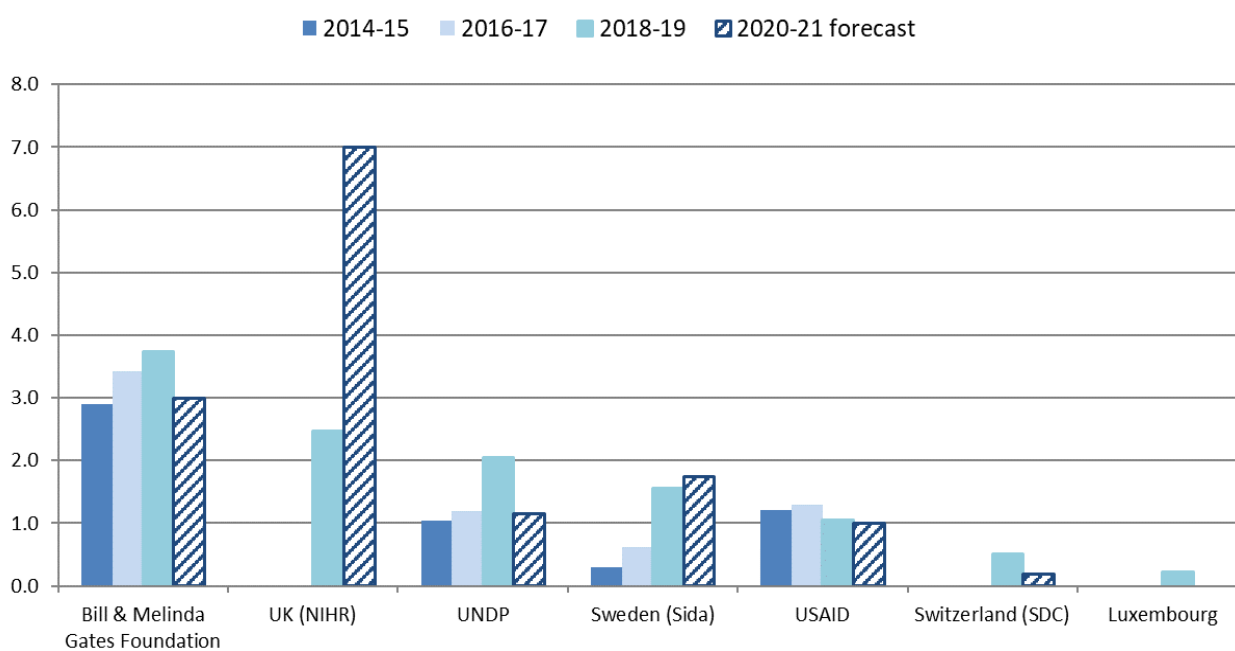


Figure 11: Revenue trend and 2020-2021 forecast (designated funds) (in US\$ millions)



Designated funding (DF): for specific activity Undesignated funding (UD): flexible for TDR programme

Figure 12: 2020-2021 budget scenarios and range of forecast funds available (in US\$ millions)

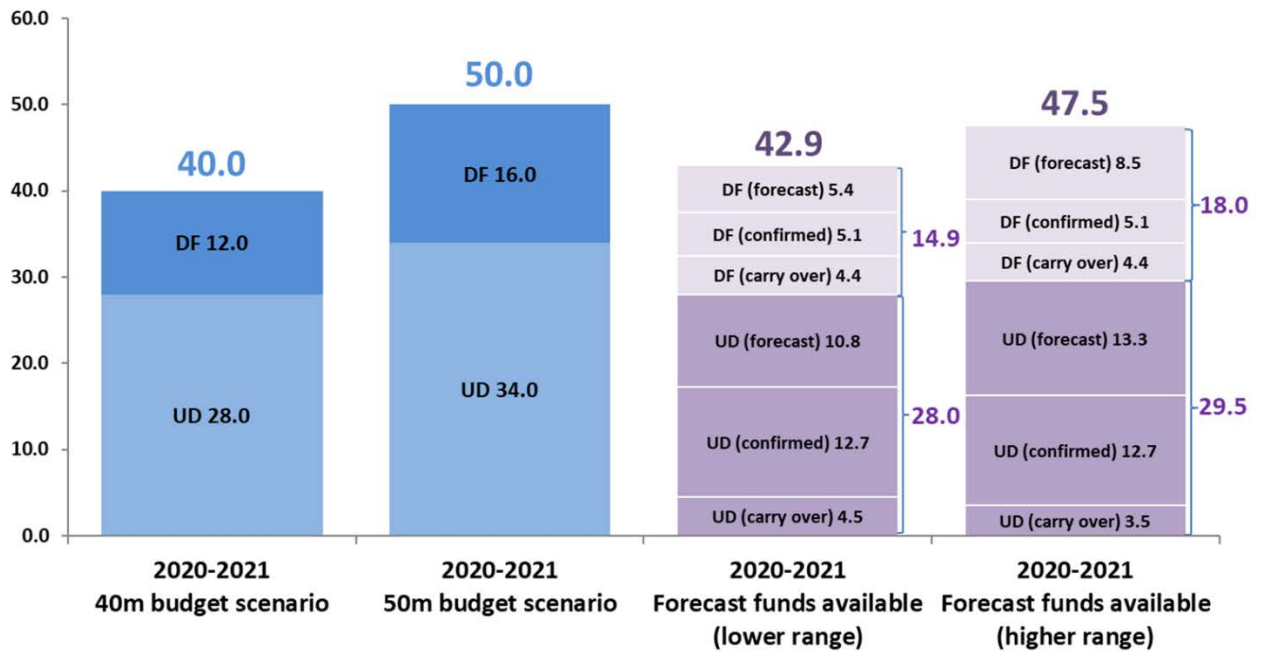


Figure 13: 2018-2019 carry over suggested use in 2020-2021 (in US\$ millions)

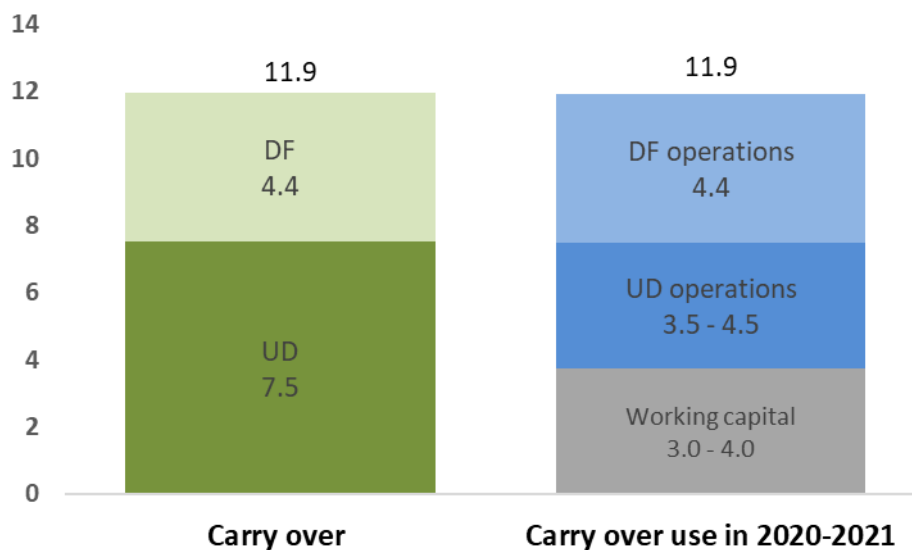


Figure 14: 2020-2021 funds utilized by work area (in US\$ millions)

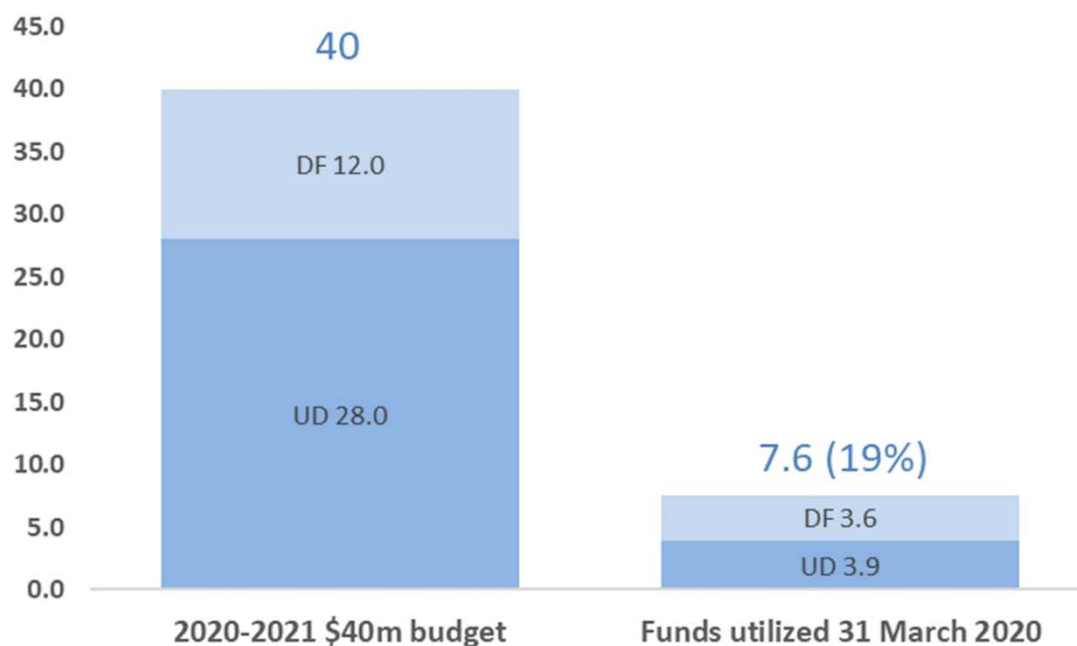
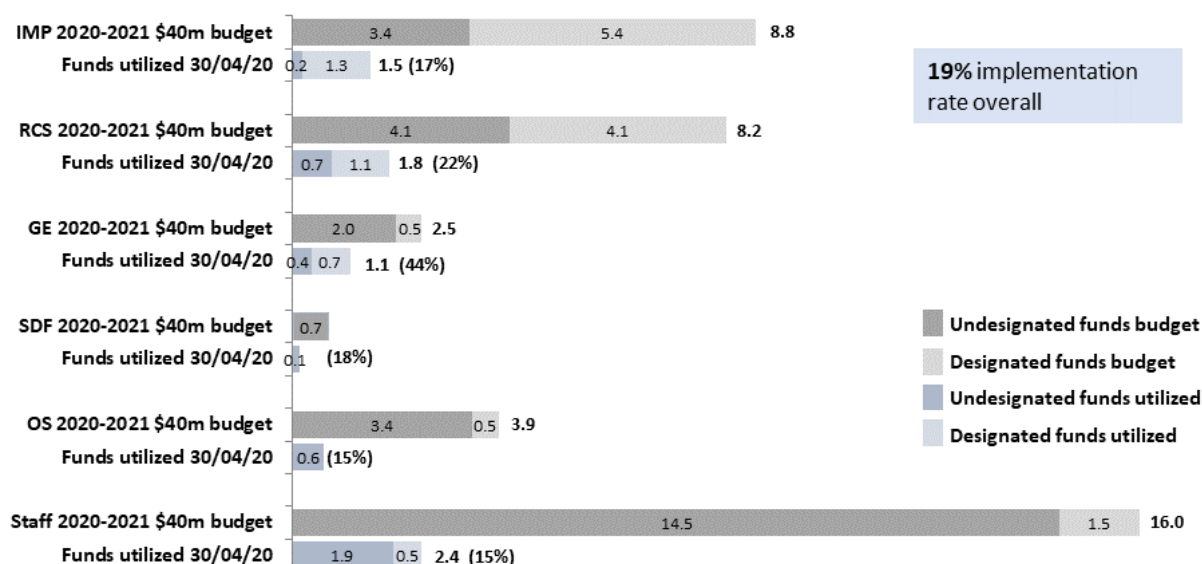


Figure 15: 2020-2021 funds utilized by work area (in US\$ millions)



IMP: Research for Implementation
 RCS: Research Capacity Strengthening
 GE: Global Engagement
 SDF: Strategic Development Fund
 OS: Operations support

Figure 16: 2022-2023 funding and proposed budget scenarios levels by fund type (in US\$ millions)

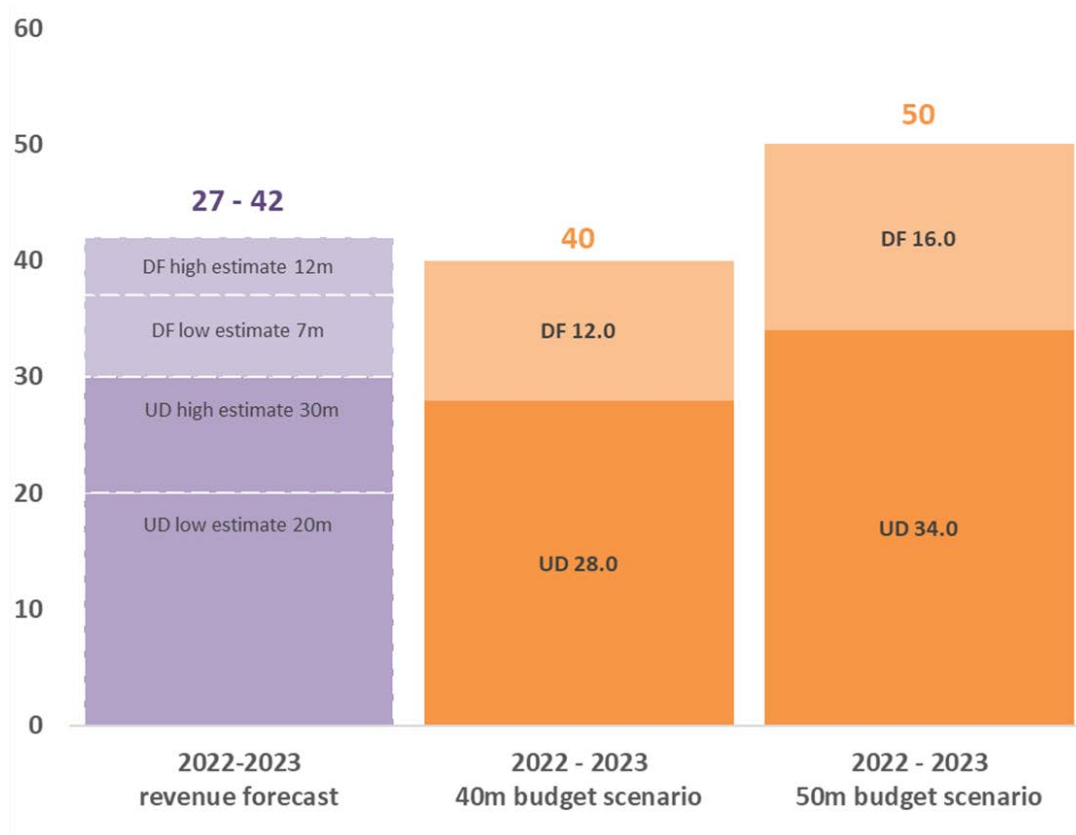


Figure 17: 2022-2023 proposed budget scenarios levels by expenditure category (in US\$ millions)

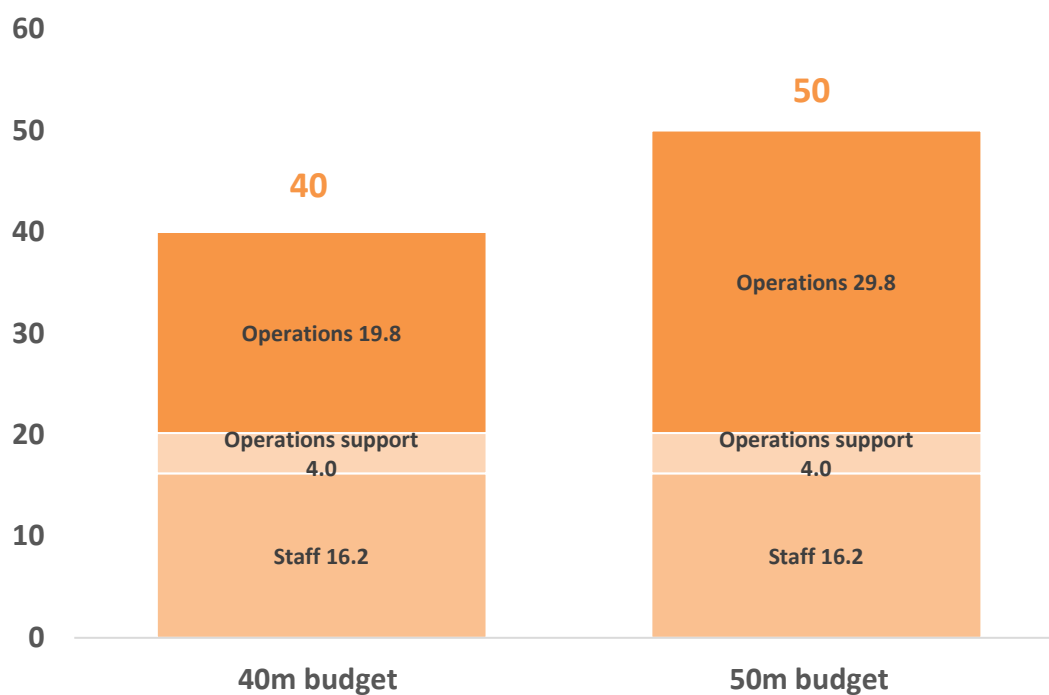
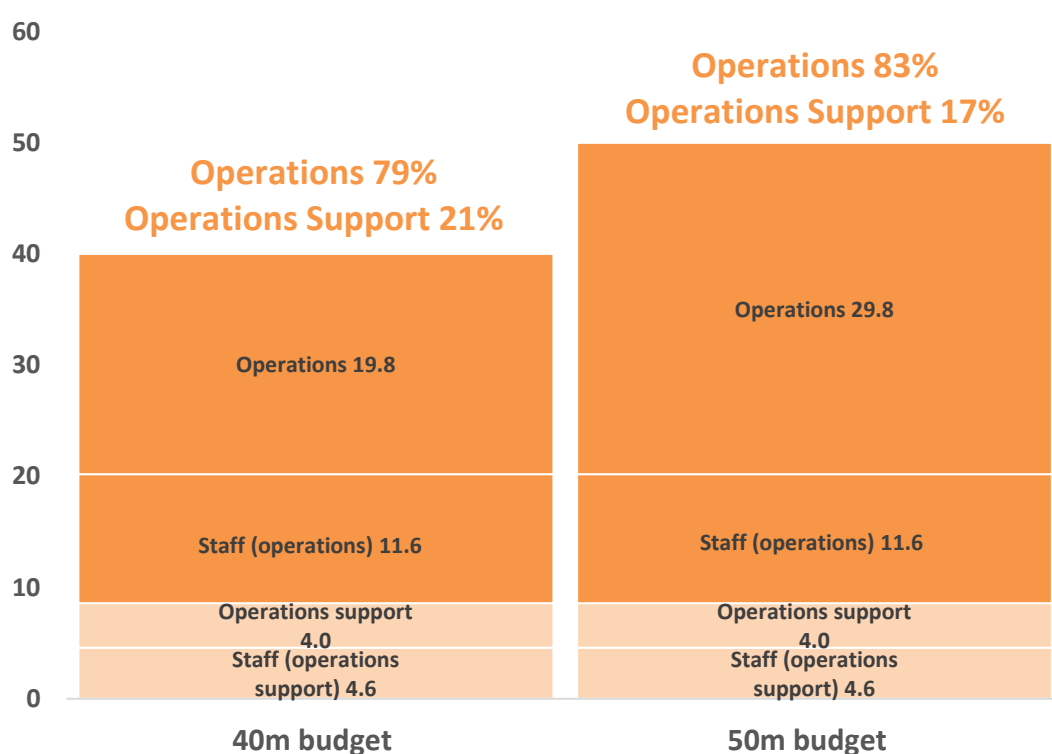


Figure 18: 2022-2023 operations versus operations support (with staff costs integrated proportionally) (in US\$ millions)



Annex

TDR Certified Financial Statement for the year ended 31 December 2019

Certification of financial statements for the year ended 31 December 2019

The following tables numbered 1 and 2 and related notes have been reviewed and approved.



Beatrice Halpaap
Unit Head, TDR Programme
Innovation and Management



Jane Stewart Pappas
Comptroller a.i
Department of Finance
World Health Organization



John Reeder
Director TDR

Geneva, 15 May 2020

Trust Fund for the UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases

Table 1: Statement of financial performance

For the year ended 31 December 2019

(In thousands of US dollars)

| Description | Notes | 2019 | 2018 |
|--|-------|---------------|---------------|
| Fund balance as at 1 January | | 30 557 | 17 910 |
| REVENUE | 3.1 | | |
| Voluntary contributions | | 13 533 | 26 467 |
| WHO contributions | | 700 | 1 100 |
| Other funding from WHO | | 326 | 66 |
| Interest earned | | 627 | 319 |
| Total revenue | | 15 186 | 27 952 |
| EXPENSES | 3.2 | | |
| Staff costs | | 7 209 | 7 054 |
| Contractual services, transfers and grants | | 11 833 | 6 259 |
| Travel | | 1 391 | 888 |
| General operating expenses | | 392 | 412 |
| WHO administrative costs | | 797 | 692 |
| Total expenses | | 21 622 | 15 305 |
| Fund balance as at 31 December | 3.3 | 24 121 | 30 557 |

Notes to the financial statement

1. Basis of preparation

The financial results of TDR are consolidated within the General Fund of the World Health Organization (WHO). Revenue and expenses for the TDR Trust Fund are recorded in a separate fund to allow for financial reporting. A separate balance sheet is not available for TDR as all balance sheet transactions are managed in one set of ledgers for WHO.

The TDR statement of financial performance has been extracted from WHO accounts and all transactions have been recorded in accordance with relevant WHO accounting policies in accordance with International Public Sector Accounting Standards (IPSAS).

2. Significant accounting policies

For a full set of accounting policies, please refer to the WHO Audited Financial Statement for the year ended 31 December 2019 (see document [A73/25¹](#)). The policies below support TDR's statement of financial performance.

2.1 Revenue

Revenue is recognized following the established criteria of IPSAS 23 (Revenue from Non-Exchange Transactions).

Revenue from voluntary contributions is recorded when a binding agreement is signed by WHO and the contributor. When an agreement contains "subject to" clauses, WHO does not consider the agreement to be binding and does not record the revenue and amount receivable until the cash is received. Where there are no payment terms specified by the contributor, or payment terms are in the current accounting year, revenue is recognized in the current period. Where payment terms specify payment after the year end, the amount is reported as *deferred* revenue.

Deferred revenue is reported on the WHO balance sheet as a liability and is released in the period in which it falls due.

2.2 Expenses

WHO recognizes expenses at the point where goods have been received or services rendered (delivery principle) and not when cash or its equivalent is paid.

2.3 Budget comparison

TDR's budgets are prepared on a biennial basis. Refer to table 3 for budget comparison.

¹ Available shortly at https://apps.who.int/gb/e/e_wha73.html

3. Supporting information to the TDR statement of financial performance

3.1 Revenue

- **Voluntary contributions**

Voluntary contributions in 2019 totalled US\$ 13.5 million (US\$ 26.5 million in 2018). These contributions represent revenue recognized from governments, intergovernmental organizations, institutions and other United Nations organizations. For details of revenue by contributor, refer to table 2.

The decrease year on year is mainly due to Sweden's contribution for the biennium having been recognized in full in 2018, along with additional core funding from the United Kingdom of Great Britain and Northern Ireland in 2018 and higher project specific funding in 2018 due to new projects with both the United Kingdom and the Swiss Agency for Development and Cooperation.

Deferred revenue represents multi-year agreements signed in 2019 or prior years but for which the revenue recognition has been deferred to future financial periods. As at 31 December 2019, deferred revenue amounted to US\$ 1.4 million (US\$ 3.8 million in 2018).

Deferred revenue by contributor

(In thousands of US dollars)

| | 2019 | 2018 |
|--|--------------|--------------|
| Germany | 1 222 | |
| Switzerland | 185 | 185 |
| United Kingdom of Great Britain and Northern Ireland | | 3 576 |
| Total deferred revenue | 1 407 | 3 761 |

- **WHO contributions**

Contributions from WHO are recognized on the basis of expenditure; US\$ 0.7 million has been recognized in 2019 (US\$ 1.1 million in 2018).

- **Other funding from WHO**

Other contributions from WHO reflects implementation of research projects on behalf of other technical areas within WHO. Contributions are recognized on the basis of expenditure.

- **Interest allocation**

Interest earned in 2019 was US\$ 0.6 million (US\$ 0.3 million in 2018). This represents income received from the investment of TDR funds by WHO.

3.2 Expenses

Lower operational expenditure in the first year of the biennium and higher expenditure in the second year reflects the normal biennial cycle.

- **Staff costs**

US\$ 7.2 million in 2019 (US\$ 7.1 million in 2018) reflects the total cost of employing staff, including charges for base salary, post adjustment and other entitlements, e.g. pension and insurance.

- **Contractual services, transfers and grants**

US\$ 11.8 million in 2019 (US\$ 6.3 million in 2018) represents expenses for service providers. The main components are:

- Letters of Agreement for research or capacity building grants issued to individuals and institutions;
- Agreements for Performance of Work, consulting contracts given to individuals to perform activities on behalf of TDR;
- Technical Services Agreements that relate to collaborative research activities between TDR and various institutions, universities and laboratories; and
- Expenses for fellows supported by TDR. The main components include stipends, education allowance, travel and insurance. Expenses for training of grantees who are not fellows is also included.

- **Travel**

US\$ 1.4 million in 2019 (US\$ 0.9 million in 2018) reflects the cost of travel for TDR staff, non-staff participants in meetings, consultants and representatives of TDR's governing and advisory bodies. Travel expenses include airfares, per diem and other travel-related costs. This amount does not include statutory travel for home leave or education grants that is accounted for within staff costs.

- **General operating expenses**

US\$ 0.4 million in 2019 (US\$ 0.4 million in 2018) reflects the general running costs to maintain the office, including utilities, printing, IT hardware and software, telecommunications (fixed telephone, mobile phone, internet and global network expenses) and office rental.

- **WHO administrative costs**

- US\$ 0.8 million in 2019 (US\$ 0.7 million in 2018) reflects the apportionment of WHO administration and management costs. TDR pays administrative costs in accordance with World Health Assembly resolution 34.17.

3.3 Fund balance at end of year

The end of year fund balance of US\$ 24.1 million includes US\$ 8.0 million working capital (set aside as personnel liability as recommended by WHO), US\$ 2.7 million in legally binding commitments, US\$ 1.4 million advance payments for core activities in 2020-2021, US\$ 4.4 million planned for 2020-2021 implementation of projects with specified funds and US\$ 7.5 million balance of core funding to be utilized in the next biennium.

Table 2: TDR revenue 2014-2019

(In thousands of US dollars)

| CONTRIBUTORS | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 |
|--|---------------|---------------|---------------|---------------|---------------|---------------|
| Member States | | | | | | |
| Belgium | 2 038 | 2 038 | 1 115 | 721 | 708 | 708 |
| China | 110 | 55 | 55 | 55 | 55 | 110 |
| Cuba | 5 | 3 | 5 | 5 | | |
| Germany | 814 | 817 | 666 | 901 | 876 | 1 016 |
| Ghana | | 75 | | | | |
| India | 55 | | 110 | | 55 | 55 |
| Japan | 270 | 200 | 280 | 280 | 200 | 100 |
| Luxembourg | 1 337 | 1 176 | 1 134 | 1 074 | 1 273 | 1 226 |
| Malaysia | 25 | 25 | 25 | 25 | 25 | 25 |
| Mexico | 10 | | 30 | 10 | 20 | 10 |
| Nigeria | | | 303 | | | |
| Norway | 2 200 | 1 177 | 952 | 379 | 357 | 325 |
| Panama | 7 | 7 | | 14 | 7 | 7 |
| Portugal | 64 | | | | | |
| Spain | 200 | | 42 | | | 112 |
| Sweden | 5 181 | 5 221 | 4 031 | 5 650 | 11 168 | 472 |
| Switzerland | 1 829 | 1 973 | 1 814 | 1 677 | 2 163 | 1 689 |
| Thailand | 46 | 46 | 42 | 42 | 93 | |
| Turkey | 5 | 5 | 5 | 5 | 5 | |
| United Kingdom of Great Britain and Northern Ireland | 3 817 | 3 817 | 3 053 | 3 726 | 5 741 | 4 567 |
| United States of America | 608 | 607 | 628 | 1 254 | 697 | 358 |
| Total - Member States | 18 621 | 17 242 | 14 290 | 15 819 | 23 443 | 10 780 |

1. The core contribution from the government of Sweden for the two years 2018 and 2019 was recognized in full in 2018 in accordance with the terms of the agreement.

| CONTRIBUTORS | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 |
|--|---------------|---------------|---------------|---------------|---------------|---------------|
| Bill & Melinda Gates Foundation | 938 | 1 967 | 2 081 | 1 338 | 1 968 | 1 771 |
| Drugs for Neglected Diseases initiative (DNDi) | 371 | | | | | |
| European Commission | 1 956 | | | | | |
| Global Alliance for TB Drug Development | 80 | | | | | |
| International Union against Tuberculosis and Lung Disease (IUATLD) | | | 340 | 100 | | |
| Royal Tropical Institute (KIT), Netherlands | 125 | 24 | | | | |
| United Nations Development Programme (UNDP) | 565 | 475 | 1 195 | | 1 061 | 980 |
| University of Heidelberg, Germany (funds from CEC) | 521 | | | | | |
| World Bank | | 1 250 | | | | |
| Miscellaneous * | 2 | (530) | (294) | 352 | 1 | 1 |
| Refunds to donors | | | | | (6) | |
| Total - Voluntary contributions | 23 178 | 20 428 | 17 611 | 17 609 | 26 467 | 13 533 |
| WHO Assessed Contribution | | 1 800 | 802 | 967 | 1 100 | 700 |
| WHO Other Funding | | | | 113 | 66 | 326 |
| Interest | 82 | 175 | 157 | 301 | 319 | 627 |
| Grand total | 23 260 | 22 404 | 18 570 | 18 990 | 27 952 | 15 186 |

1. The contribution from UNDP for the period 2016-2018 was recognized in 2016.
2. Negative amounts in 'miscellaneous' represent a decrease in the revenue recognized in a prior period due to changes in contractual terms or a reduction in amounts receivable.

Table 3: Statement of comparison of budget and expenses for the biennium 2018-2019

(In thousands of US dollars)

| Expected result | Description | Programme budget (\$40m) 2018-2019 | Revised planned costs 2018-2019 | Expenses 2018-2019 | Implementation (%) |
|-----------------|--|------------------------------------|---------------------------------|--------------------|--------------------|
| | Intervention and implementation research (IIR) | | | | |
| 1.1.1 | Country preparedness for disease outbreaks | 340 | 445 | 341 | 77% |
| 1.1.4 | Country resilience to the threat of drug-resistant infections | 430 | 1 730 | 1 196 | 69% |
| 1.1.5 | Directions for development and accelerated access to new tools and strategies | 200 | 130 | 97 | 75% |
| 1.1.7 | Maximized utilization of data for public health decision-making | 1 050 | 906 | 887 | 98% |
| 1.1.8 | Maximized utilization of safety information for public health decision-making | 1 000 | 692 | 521 | 75% |
| 1.2.1 | Strategies to achieve and sustain disease elimination | 560 | 550 | 442 | 80% |
| 1.2.6 | Optimized approaches for effective delivery and impact assessment of public health interventions | 880 | 1 600 | 1 397 | 87% |
| | Sub-total IIR (a) | 4 460 | 6 053 | 4 881 | 81% |
| | Vectors, environment and society (VES) | | | | |
| 1.3.3 | Vector-borne diseases and climate change in Africa | 300 | 60 | 40 | 66% |
| 1.3.6 | Impact of insecticide resistance and residual malaria on malaria control | 200 | 215 | 215 | 100% |
| 1.3.7 | Control of vector-borne diseases in South-East Asia through environmental measures | 550 | 490 | 543 | 111% |
| 1.3.8 | Training course for gender data analysis in vector-borne diseases | 100 | 100 | 89 | 89% |
| 1.3.10 | Urban health interventions for control of vector-borne diseases | 300 | 300 | 234 | 78% |
| 1.3.11 | Multisectoral approach on malaria control | 1 040 | 400 | 180 | 45% |
| 1.3.12 | Gender responsive health interventions | 300 | 190 | 116 | 61% |
| | Sub-total VES (b) | 2 790 | 1 755 | 1 417 | 81% |
| | Research capacity strengthening (RCS) | | | | |
| 2.1.1.1 | TDR support to regional training centres | 1 230 | 1 400 | 1 264 | 90% |
| 2.1.2 | Targeted research training grants (MSc, PhD) | 3 550 | 5 700 | 5 175 | 91% |
| 2.1.4 | Career development fellowship grants | 2 420 | 3 900 | 2 055 | 53% |
| 2.1.6 | Structured capacity building in IR (renewal of UNDP Access Initiative) joint with IIR | 1 000 | 412 | 439 | 106% |
| | Sub-total RCS (c) | 8 200 | 11 412 | 8 933 | 78% |

| Expected result | Description | Programme budget (\$40m) 2018-2019 | Revised planned costs 2018-2019 | Expenses 2018-2019 | Implementation (%) |
|-----------------|---|------------------------------------|---------------------------------|--------------------|--------------------|
| | Global engagement | | | | |
| 1.3.5 | Research on social innovation to enhance healthcare delivery | 350 | 1 472 | 1 322 | 90% |
| 2.1.1.2 | Regional office collaboration and small grants | 1 100 | 1 239 | 1 189 | 96% |
| 2.2.1 | Shaping the research agenda | 300 | 575 | 343 | 60% |
| 2.2.2 | Capacity strengthening to bring research evidence into policy | 300 | 100 | 67 | 67% |
| 2.3.1 | Collaborative networks and engagement with global health initiatives | 200 | 376 | 380 | 101% |
| 2.3.3 | TDR Global | 300 | 450 | 417 | 93% |
| | Sub-total Global engagement (d) | 2 550 | 4 212 | 3 717 | 88% |
| | Strategic Development Fund (e) | 700 | 700 | 437 | 62% |
| | Sub-total Operations (f = sum [a:e]) | 18 700 | 24 132 | 19 386 | 80% |
| | Operational support | | | | |
| | Governance meetings | 400 | 200 | 183 | 92% |
| | Advocacy, communications and resource mobilization | 440 | 370 | 348 | 94% |
| | Finance, M&E, audit | 185 | 30 | 31 | 104% |
| | Staff development | 90 | 10 | 2 | 17% |
| | Running costs | 685 | 640 | 624 | 98% |
| | e-TDR | 100 | 500 | 81 | 16% |
| | WHO Administrative Charges | 1 800 | 1 800 | 1 490 | 83% |
| | Sub-total Operational Support (g) | 3 700 | 3 550 | 2 759 | 78% |
| | Staff costs (h) | 17 900 | 17 900 | 14 263 | 80% |
| | Total (i = sum [f:h]) | 40 300 | 45 582 | 36 408 | 80% |
| | Timing differences | | | | |
| | Expenses transferred from prior biennium workplans | | 305 | 208 | |
| | Expenses charged to prior biennium workplans | | | 311 | |
| | Expenses related to prior biennium workplans | | | 519 | |
| | Total expenses as per the Statement of Financial Performance (Statement I) | 40 300 | 45 886 | 36 927 | 80% |

1. Implementation reflects all expenditures recorded in the WHO accounts.
2. Funds utilized as presented in the financial management report (US\$ 37.2 million) includes expenses as well as encumbrances (commitments) of US\$ 0.6 million but excludes expenses charged on prior biennium workplans (\$0.3 million).