
TDR Research Capacity Strengthening

Report of the Scientific Working Group

26-28 November 2018, Geneva

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List of abbreviations

ADP	UNDP-TDR-PATH Access and Delivery Partnership
CEPI	Coalition for Epidemic Preparedness Innovations
EDCTP	European and Developing Countries Clinical Trials Partnership
EPPE	Effective Project Planning and Evaluation
ESSENCE	ESSENCE on Health Research
GCP	Good Clinical Practice
GCLP	Good Clinical Laboratory Practice
IR	Implementation Research
IIR	Implementation and Intervention Research
JCB	Joint Coordinating Board
KM	Knowledge Management
LMICs	Low and Middle Income Countries
M&E	Monitoring & Evaluation
MOOC	Massive Open Online Course
OR	Operational Research
RCS	Research Capacity Strengthening
R&D	Research and Development
RTC	Regional Training Centre
SBC	Skill Building Course
STAC	Scientific and Technical Advisory Committee
SWG	Scientific Working Group
TDR	Special Programme for Research and Training in Tropical Diseases
TtT	Train the Trainers
WHO	World Health Organization

Introduction

The Scientific Working Group (SWG) for Research Capacity Strengthening (RCS) has a role in providing strategic input and advising the TDR secretariat on implementation and planning of activities, in the context of overall guidance by the TDR Scientific and Technical Advisory Committee (STAC) and the Joint Coordinating Board (JCB). The recommendations of the 2018 STAC meeting provide the framework for TDR's approach to RCS activities and the work programme for 2018-2019.

The meeting was jointly chaired by Dr Bejarano (the STAC representative) and Dr Mwinga, with Dr Thomas designated as rapporteur. Drs Bejarano, Chang, Jimenez, Mwinga, Osorio, Pratap and Thomas attended the three days of the meeting, and Dr El Jardali attended the first two days.

The meeting procedure consisted of presentation of key activities by RCS staff highlighting the specific inputs sought from the SWG. In advance of the meeting, the SWG received the draft 2018 RCS annual report, which provided a full account of progress made in implementing RCS activities in 2018. In line with TDR policy on mainstreaming gender activities, coverage of gender issues was included in the presentations on the different technical themes.

This report summarizes the proceedings of the SWG meeting, indicating the main points arising in discussion of the TDR activities reviewed and the main suggestions provided by the SWG.

Objectives of the meeting

The aim of the meeting was to provide strategic input and advice on implementing the TDR/RCS 2018-2019 work programme and planning for the 2020-2021 work programme in the context of the TDR strategy 2018-2023.

The objectives were to:

- a) review progress against the 2018-2019 workplan, including implementation of research training schemes and developments and innovations in training on implementation research;
- b) advise on priority areas and budget allocation for the 2020-2021 workplan.

Conflict of interest

To maintain independence, SWG members cannot be current recipients of TDR funding. In line with TDR policy on conflict of interest, each SWG member initially completed and returned a Declaration of Interests (DoI) form on joining the SWG, and then informed the secretariat of any change relevant to their DoI before the SWG meeting. Three SWG members reported some potential but no direct conflict of interest regarding the relation of their institution to the TDR postgraduate training scheme: Dr El Jardali (American University of Beirut), Dr Mwinga (University of Zambia) and Dr Osorio (Universidad del Valle). Dr Osorio reported a potential conflict of interest regarding the relation of her institution to the Regional Training Centre (RTC) supported by TDR in the WHO Region of the Americas and to the Universidad de Antioquia (one of the universities participating in the TDR postgraduate training scheme). Therefore, these three SWG members recused themselves from the meeting during discussions directly related to the relevant institutions supported by TDR.

TDR financial overview

John Reeder, Director TDR, and Beatrice Halpaap, Portfolio and Programme Manager, gave an overview of the TDR financial situation. The overall TDR costed plan for 2020-2021 (including lower and higher scenarios of USD 40 million and USD 50 million respectively) was reviewed by the Scientific and Technical Advisory Committee (STAC) in March 2018 and approved by the Joint Coordinating Board (JCB) in June 2018. The relevant budget tables for RCS activities are in the 2018 RCS annual report. Regarding the forecast TDR revenue for 2020-2021, the current assessment indicates a gap of USD 6 million for undesignated funding under the USD 40 million scenario.

Agenda item 1. Overview of progress against RCS workplan for 2018

Dermot Maher, TDR Coordinator for RCS, provided an overview of the role of SWG in relation to the STAC and JCB. He outlined progress against the RCS workplan and budget for 2018, in particular the progress made regarding the following activities:

- Two sets of regionalized activities fully implemented: postgraduate training grants, and Regional Training Centres supported by TDR.
- Two schemes were renewed: Clinical Research and Development Fellowships (CRDF) (in collaboration with EDCTP) supported by the Bill and Melinda Gates Foundation and the UNDP-TDR-PATH Access and Delivery Partnership (ADP), in collaboration with the TDR team on Research for Implementation and supported by the Government of Japan.
- A continuum of training materials finalized: TDR IR toolkit, Massive Open Online Course (MOOC) on IR with a focus on infectious diseases of poverty, short training course on basic principles in IR (BPIR), module on ethics of IR, guidance for publishing IR results.
- A series of strategic activities are ongoing, including development of RCS theory of change, adding value to the WHO guideline development process, and policy dialogue with the Global Fund.

SWG comments and suggestions

Overall, the SWG commended the RCS team for the progress made on the range of high quality activities, regarding complementary training programmes and tools, which are effectively and efficiently managed. The initial SWG comments and suggestions are included in this SWG meeting report under the discussion of each relevant individual activity.

The SWG recommended continuation of implementation of the RCS activities that were reviewed, as set out in the current biennium (2018-2019) workplan and budget, in close collaboration with the relevant WHO departments and regional offices and other key relevant partners. The SWG commended RCS on the favourable proportions of undesignated (50%) and designated (50%) funds in the 2018-2019 budget. The SWG also supported overall the ongoing and planned complementary range of activities set out according to the 2020-2021 biennium workplan and budget.

Agenda Item 2. Strategic input on selected themes

2.1 Access and Delivery Partnership (ADP)

Olumide Ogundahunsi presented progress in implementation of the ADP project, in collaboration between UNDP, the WHO Essential Medicines Programme, PATH and TDR. The objectives are to assist LMICs to strengthen institutions and mechanisms for an effective and equitable introduction and use of new health technologies, to the target populations. TDR is responsible for two of the strategic pathways of the ADP project: 1) Implementation Research (managed by the TDR RCS team), by strengthening capacity to identify and address country-specific health system needs for effective access and delivery of new health technologies, and 2) safety monitoring and pharmacovigilance (managed by Research for Implementation team), by strengthening capacity to monitor and respond to safety issues associated with new health technologies. Using the TDR IR toolkit, the RCS team facilitated the development of three national research agendas, in Ghana, Indonesia and Tanzania. On successful renewal of support via UNDP in 2018, the project is now scaled up to include four additional countries (Senegal, Malawi, India and Thailand).

SWG comments and suggestions

Overall, the SWG recommended continued support by TDR of the ADP project as TDR works on implementing the activities in 2019 and beyond, with the recently renewed funding from UNDP.

Specific suggestions included the following:

- The SWG suggested clarification of the relationship of the TDR activities under this project to the health technology assessment activities mainly conducted by PATH and WHO/EMP in selected countries.
- Explore potential engagement of other relevant partners.

Training networks and tools

2.2 RTCs supported by TDR

Pascal Launois described how the RTCs (one in each of the six WHO Regions) have been established through a competitive and transparent process. The main activities of the RTCs in the 2018-2019 biennium workplan are to: 1) integrate training courses on good practices/bioethics/project planning and evaluation and IR as a backbone of the RTCs' training programme; 2) disseminate courses to subregional (satellite) institutions either through face-to-face training, train-the-trainer courses or development of distance base learning courses; and 3) develop their own training programmes related to their specific needs (in relation to national/regional health research priorities).

The RTCs supported by TDR offer training courses to build health research skills in Good Health Research Practice and Implementation Research in response to national/regional needs, such as:

- Effective Project Planning and Evaluation (EPPE), Skills Building Courses (SBC) and Train the Trainer (TtT) available in French, English, Spanish and Portuguese.
- Good Clinical Practice (GCP) /Good Clinical Laboratory Practice (GCLP) SBC and TtT.

- Good Health Research Practice for applying concepts of GCP beyond clinical trials to all research involving humans from basic to implementation research in English, French and Spanish
- Courses on writing proposals and on scientific writing.
- IR training courses including the MOOC on IR (see above), the basic principles in IR, the training in Ethics in IR, and the revised version of the IR toolkit.

SWG comments and suggestions

The 2019 workplan was reviewed by two SWG members prior to the meeting and results of these reviews were discussed during this meeting. The SWG approved the 2019 workplan of the RTC for AFR, AMR, EMR, EUR and SEAR and suggested deferred approval of the RTC in WPR (Research Institute for Tropical Medicine) until after submission of an adequate workplan and budget. Overall, the SWG recommended continued support by TDR of the activities of the Regional Training Centres (RTCs) as set out in the 2018-2019 biennium workplan and budget.

Specific suggestions included the following:

- In developing each centre's sustainability plan, continue to identify potential resources in the countries where there is a satellite site.
- Continue to develop the networking functions and activities.
- Explore opportunities to translate the materials to other languages such as Portuguese.

2.3 Massive Open Online Course (MOOC) on IR

Pascal Launois gave an update on the MOOC on IR with a focus on infectious diseases of poverty, with the input of experts from different regions. The objective of the MOOC is to facilitate the dissemination of the concept of IR among the main stakeholders involved in preventing and mitigating the impact of infectious diseases of poverty (including public health researchers and decision-makers, academic and research institutions, and public health practitioners). The MOOC aims to illustrate IR concepts with case studies introduced, presented and interpreted by experienced public health researchers, practitioners and academics. The MOOC and the revised online IR toolkit are complementary, since the MOOC introduces the concept of IR using real life example and the IR toolkit helps those using it to develop proposals in IR.

The MOOC was piloted at the end of 2017 with 149 participants, including the participation of national disease control programme officers from 29 countries. The first worldwide session of the MOOC was officially launched in May 2018. This attracted one thousand and five hundred and eighty-five (1585) participants from 106 different countries who enrolled in the platform. Among these 1585 participants, 560 received a certificate of completion of the course. The high rate of completion (35%) as compared to the completion rate in other MOOCs (around 8-9%), strongly shows that the MOOC on IR corresponds to a real need.

The WHO regions covered were AFR (74.5%): 24 countries; AMR (8.5%): 14 countries; SEAR (7%): 5 countries; EMR (5.5%): 11 countries; EUR (4%): 13 countries and WPR (0.5%): 2 countries. Women represented 45.5% of the participants who got a certificate. The top ten countries with the highest representation were in the following order: Nigeria, Kenya, Uganda, India, Cameroon, Ethiopia, Ghana, Colombia, Malawi and Guyana. TDR first ran the MOOC from Geneva, but the introduction and integration into universities and public health stakeholders in disease-endemic countries are

now managed by the RTCs supported by TDR. Two sessions in November 2018, one for Latin America in Spanish and another worldwide session, were managed by the RTC in AMR and AFR respectively.

SWG comments and suggestions

The SWG commended the progress in implementing the MOOC.

Specific suggestions included the following:

- Continue to promote dissemination of the MOOC through the RTCs and their satellite institutions and through the universities participating in the postgraduate training scheme.
- Continue to ensure quality control through feedback from participants and periodic evaluation.
- Encourage universities to institutionalize MOOC as an accredited course.
- Consider translation of MOOC to other languages (French, Portuguese and Chinese).

2.4 Framework for core competencies in implementation research

Mahnaz Vahedi presented TDR approach on development of framework for core competencies in implementation research. Through an open call competition, the Bloomberg School of Public Health, at Johns Hopkins University was awarded to develop the IR core competency framework which will guide RTCs and the universities supporting TDR postgraduate scheme to identify the existing gaps in their IR curricula.

SWG comments and suggestions

The SWG commended RCS team for developing the IR core competency framework and made the following specific suggestions:

- Ensure the competencies are applicable for a range of training courses and for participants with varying degrees of expertise;
- Continue to liaise with key partners, e.g. AHPSR and RHR;
- Explore with Health Systems Global the possibility of a session during the next Health System symposium (in 2020 in Dubai, organized in collaboration with AUB, Lebanon);
- Continue to involve all the universities participating in the Postgraduate Training Scheme and the RTCs in the development and dissemination of the framework;
- Explore how adaptation of the core competency framework could contribute to accreditation of the courses.

2.5 Structured Operational Research and Training Initiative (SORT IT)

Edward Kamau presented SORT IT, a cross-cutting RCS and Research for Implementation teams activity aimed at strengthening outcome-orientated, policy-relevant operational research capacity within the disease control programmes of LMICs. It is based on an established partnership of international agencies and incorporates a proven training methodology developed by Médecins Sans Frontières (MSF) and the International Union against Tuberculosis and Lung Diseases. The research and the capacity building, undertaken in a series of 3-4 workshops within 10-12 months, are considered of equal importance. Capacity building is integrated with research studies conducted within, and proposed by, disease control programmes. The goal is to build a pool of in-country researchers and catalyse expansion of the initiative in the regions.

Overall, the SWG commended the RCS contribution to SORT IT, in collaboration with the TDR Research for Implementation team, and recommended continued support for this activity.

2.6 Clinical Research and Development Fellowship (CRDF) scheme

Pascal Launois presented an update on the CRDF scheme, under which TDR activities are funded by the Bill and Melinda Gates Foundation. In 2014, EDCTP and TDR decided jointly to implement a fellowship scheme that supports researchers to gain skills for conducting clinical trials outside of an academic or public sector setting. After joint selection with TDR, EDCTP directly funds a number of fellows from sub-Saharan Africa to undertake training at institutions in Europe, while the TDR scheme is not restricted to sub-Saharan Africa.

The programme consists of a 12-month supervised and mentored assignment to a clinical R&D department to engage in ongoing clinical R&D projects followed by a reintegration process of 12 months. The RCS team received renewal of funding (USD 6.7 million) by the Bill and Melinda Gates Foundation for the next stage of the CRDF scheme, from 2018-2022, in which TDR is currently undertaking an evaluation followed by resumption of award of fellowships in 2019.

SWG comments and suggestions

The SWG commended the RCS team on successful renewal of USD 6.7 million funding from the Bill and Melinda Gates Foundation for 2018-2022 and recommended continued support by TDR for this scheme, as it moves into its current phase of evaluation in 2018, followed by resumption of award of fellowships by TDR in 2019.

The SWG commended the steps taken to promote gender equity, including the challenge contest and the implementation of the measures identified in the call issued in November 2018.

Specific suggestions regarding the CRDF scheme included the following:

- Continue to identify and implement measures to promote gender equity;
- Continue to showcase CRDF outcomes to promote the success of the programme;
- Clarify the value of the TDR-EDCTP joint venture;
- Continue to respond to regional trainings needs, e.g. as identified through the evaluation;
- Explore opportunities to involve well developed clinical research sites in LMICs as host training organization (e.g. KEMRI, EDCTP node of excellence).

2.7 TDR Global Engagement activities

John Reeder opened the session with an explanation of the global engagement concept as launched in the 2018-23 strategy. This is not a new department, but a way of gathering together some of the broader, overarching elements of the programme to give them, at the request of STAC and JCB, a greater identity and highlight the value of TDR's cross-UN cosponsored status. The key activities are:

- 1) shaping the research agenda;
- 2) strengthening research systems and;
- 3) supporting knowledge uptake.

He then gave, for information, an overview of the TDR Global initiative, aimed at greater engagement with the TDR community, and the Social Innovation in Health (SIHI) initiative, working

with social innovators outside the formal health delivery sector. These initiatives currently have separate steering groups including STAC members to help guide their development.

The small grants programme was presented by Garry Aslanyan, Manager of Partnerships and Governance at the Director's office. Currently, the programme is a key and effective tool for close collaboration all six Regional Offices of WHO, the main co-sponsor of TDR along with UNICEF, UNDP and the World Bank. The current and revamped small grants programme addresses key issues of public health importance identified through regional priority setting, provides support for implementation research projects that provide evidence for key public health challenges as well as supports capacity building efforts in implementation research. In 2018, calls have been developed in Americas, Western Pacific, Eastern Mediterranean and African Regions. The call in Americas region has been developed in collaboration with the Alliance on Health Policy and Systems Research and PAHO and the call in the African region was developed in collaboration with EDCTP and AFRO. These partnerships effectively leveraged close to US\$ 800 000 of additional funds, in a sense tripling the TDR funding for these regions. In 2019, plans are underway to finalize the results of the call in Western Pacific region as well as launch a call in European and South-East Asian regions. In addition, capacity strengthening tools such as MOOC and IR Toolkit will be more effectively deployed to help candidates acquire skills necessary to develop and implement their projects.

The ESSENCE on Health Research initiative was established in 2010, bringing together main funders of health research and with its secretariat at TDR. The initiative is recognized as a unique forum of funders that work together to identify approaches to enhanced harmonization of efforts and increased alignment with the needs in LMICs. This unique role has been recognized in 2018 when the International Vaccine Research Task Force convened by the Coalition for Epidemic Preparedness Innovations (CEPI), World Bank and other key stakeholders made a series of recommendations, including one that requested ESSENCE to develop a review mechanism that would help coordinate investments in clinical research capacity. In 2018, work has started in developing options for this mechanism. In addition, in 2018, the initiative continued to support research management efforts through working with various research and management associations and consolidating support. In 2019, plans are under way to host a consultation to finalize the proposed mechanism of review as well as finalize a good practice document in implementation research.

Rob Terry, Manager for Research Policy at TDR, gave an overview of knowledge management activities at TDR under the Global Engagement strategy. The TDR approach is to work towards combining evidence synthesis and data to inform decision-making and policy. This is through support for capacity building and methodology development with long associations with EVIPNet, Cochrane and other in-country initiatives, including the Ministry of Health in Malawi. TDR has collaborated with the Infectious Diseases Data Observatory to create the infrastructure and surrounding governance procedures that facilitate the sharing of research data for TB, malaria, schistosomiasis, human African trypanosomiasis and Ebola.

Responding to the problem of anti-microbial resistance (AMR), TDR will support a programme of Structured Operational Research Training Initiative (SORT IT) courses in 6 countries (Colombia, Ghana, Myanmar, Nepal, Uganda and Vietnam) for 3 years from January 2019. This cross-cutting activity, providing an integrated package of evidence-generation to inform decision-making, involves the Implementation Research team and Global Engagement.

TDR contributed to shaping the research agenda through the utilization of a new TDR tool for R&D portfolio analysis (P2I). In collaboration with Duke University and Policy Cures Research, TDR produced the first complete analysis of the HIV, TB, malaria & NTD pipeline with a prediction of how

many launches there will be in 2040 and how the pipeline will have to change if we are going to develop new treatments for HIV, TB and the neglected diseases. In 2018, TDR was the first research funding agency to complete the Research Fairness Initiative. TDR has launched a new publishing platform “TDR Gateway” as an option for TDR-funded researchers to disseminate their research. The intention is that TDR Gateway, with the scientific editing and peer review managed by the F1000Research publisher, will provide an option which is high quality and open access.

SWG overall comments and suggestions

Overall, the SWG recommended continued support of the Global Engagement activities set out in the 2018-2019 biennium workplan and budget. The SWG welcomes future review of these activities and advises TDR to explore potential links between Global Engagement and RCS activities. Potential options that emerged from discussions during the SWG meeting included using the small grants scheme to fund research activities proposed by researchers completing the MOOC, and to provide re-entry grants to fellows on completion of their master’s degree under the Postgraduate Training Scheme.

2.8 Postgraduate training scheme: review of progress

Mahnaz Vahedi presented progress in management of the scheme under the Letter of Agreement number one (LoA1) and Letter of Agreement number two (LoA2). She also explained that the TDR Postgraduate Training Scheme was reoriented in 2015 to strengthen individual and institutional capacity to conduct IR aimed at improving public health programmes in LMICs. The stage of development of the field of IR is such that there are few, if any, universities in LMICs offering postgraduate courses specifically in IR. Under this scheme, TDR supports postgraduate training (mainly Masters) in seven selected universities in the disease endemic regions which offer training in IR-relevant subjects or disciplines.

The seven universities participating in the scheme and selected through open competition to manage the TDR training grants for Masters and PhDs are:

1. BRAC University, Dhaka, Bangladesh
2. Universidad de Antioquia, Medellín, Colombia
3. University of Ghana, Accra, Ghana
4. Universitas Gadjah Mada, Yogyakarta, Indonesia
5. American University of Beirut, Lebanon
6. University of the Witwatersrand, Johannesburg, South Africa
7. University of Zambia, Lusaka, Zambia

Eddy Kamau described the main purpose of the M&E framework to identify the causal relationships between the scheme’s objectives and the related outcomes and outputs and track progress towards achieving expected results. He presented key performance indicators for the current cohort. For example, the universities received a total of 846 eligible applications (493 men and 353 women), of whom fifty candidates (22 men and 28 women) were offered TDR master’s fellowships.

The countries with 4% or more of the total number of fellowships awarded are Bangladesh, Colombia, Ghana, Indonesia, Kenya, Nepal, and Nigeria. These seven countries together account for

41% of the total number of master's fellowships awarded and 65% of eligible applications since the inception of the scheme.

SWG comments and suggestions

Overall, the SWG recommended continued support by TDR of the Postgraduate Training Scheme activities set out in the 2018-2019 biennium workplan and budget. The SWG congratulated the secretariat on the improvements in the review process, involving iterations between each participating university and the secretariat prior to the SWG meeting.

Specific suggestions included the following:

- Continue to work with the participating universities: a) to improve their field mentorship programmes, b) to promote institutionalization of implementation research; c) to encourage networking among the seven universities.
- If funding available, consider a plan for increased collaboration between the fellow's home institution, if relevant, and the university participating in the TDR scheme.
- To continue to consider gender and geographic representation in conjunction with each university in selecting fellows.
- Continue to work with each university on institutional capacity strengthening, including administrative capacity.
- Consider opportunities (depending on funding available and their sources) not only to scale up the numbers of fellows trained in line with the current focus of TDR on implementation research on infectious diseases of poverty, but also to adapt the scheme to be responsive to changing global needs.
- Continue efforts to institutionalize relevant courses in each university, ensure relevant indicators in the M&E framework and improve the reporting template.
- Explore possible opportunities to engage previous fellows in relevant training activities in their respective regions, e.g. as mentors and facilitators.

Agenda Item 3. Strategic projects

Dermot Maher gave an overview of the four main strategic projects undertaken in RCS, which have influence within and beyond TDR.

SWG comments and suggestions

- The SWG commended TDR Coordinator RCS and staff for the wide range of high quality strategic projects and suggested continuation of follow-up of these projects.
- SWG members commended TDR Coordinator RCS on the ongoing strategic engagement activities with key partner institutions he has undertaken on behalf of TDR, overall as a member of the HTM strategic task force and of the WHO-Global Fund advisory group.

3.1 Mapping of externally funded postgraduate students in health research at institutions in sub-Saharan Africa, 2012 – 2017

The SWG commended RCS for the valuable mapping done in collaboration with EDCTP as a first step in promoting a comprehensive mapping by key stakeholders.

Specific suggestions:

- Continue to use the report to catalyse a more comprehensive approach by donors to obtaining and analysing data on externally funded research capacity strengthening activities, e.g. through ESSENCE.
- Consider using data which illustrate TDR's relative advantage (e.g. supporting students in countries which may often not be within the reach of other donors) in raising DF for the TDR postgraduate scheme.

3.2 Theory of change for TDR/RCS activities

The SWG commended RCS for the work in developing the theory of change (ToC), which should help in articulating the contribution of the RCS activities to achieving an impact regarding the SDGs.

Specific suggestions:

- Finalize the ToC taking into consideration the contribution of RCS activities to the SDGs;
- Include Showcases in the final document;
- Continue to use the ToC for RCS to inform the development of a ToC for TDR and also for the wider group of programmes (HRP and AHPSR);
- Review terminology to ensure consistency with the standard ToC approach.

3.3 Adding value to the WHO guidelines development process

The SWG commended RCS for the work in responding to the need of those who became equipped to undertake research, to identify relevant research questions using the systematic reviews conducted as part of the WHO guideline development process.

Specific suggestions:

- To continue the work as planned with the WHO/CDS cluster initially and then beyond to encompass all clusters, building on the set of health issues that are covered by guidelines developed by WHO, with the expectation of coverage becoming increasingly comprehensive.
- To continue to support the development of a directory of research needs using the systematic reviews conducted by the WHO guideline development process.

3.4 Policy dialogue with the Global Fund

The SWG commended RCS for continuing to work on the policy dialogue with the Global Fund, aimed at increasing country-level funding for implementation research and operational research to enhance the effective performance of programmes.

Specific suggestions:

- Consider opportunities to review the status of a selected range of countries and work through partners to facilitate the inclusion of implementation research and operational research in Global Fund grants, building on success stories, e.g. India.

Agenda item 4. Priority areas and budget allocation for 2020-2021 workplan on research capacity strengthening

SWG members reviewed and agreed on the RCS budget and workplan for 2020-21 under the two overall TDR programme scenarios (US\$ 40 million and US\$ 50 million) and commended RCS on maintaining the favourable proportions of undesignated (50%) and designated (50%) funds. The SWG recognised the frequent difficulties in raising designated funding for activities to strengthen research capacity, and the value of pooled undesignated funding by donors in support of the RCS contribution to achieving long-term impact.

Specific suggestions:

- Maintain at least the current minimum level of undesignated funding for postgraduate scheme for the next biennium in view of the quality of management and implementation of the programme, and the opportunity for rapid scale-up in the event of availability of increased funding.
- Highlight to partners (particularly to donors) the relative advantage of TDR in reaching countries which may often not be reached through other externally funded programmes.

Agenda item 5. Addressing the challenges of raising funds

The SWG commended RCS for the wide range of efforts by all staff in support of the Director in raising undesignated funds, and in support of raising designated funding (noting the successful renewal of designated funding for the CRDF programme and ADP project).

Specific suggestions:

- Consider opportunities to highlight to donors the contribution of TDR/RCS to “Leaving no one behind” (in the context of the SDGs).
- Identify opportunities to intensify collaboration with other WHO departments who share similar goals, to maximize synergies and to avoid competition.
- Continue to identify opportunities to seek support for inclusion of a university in a French-speaking country and of a university in a Portuguese-speaking country in the Postgraduate Training Scheme.
- Continue to explore opportunities for funding from selected donors with whom TDR currently has an ongoing collaboration, e.g. IFPMA, and from possible donors when suitable contacts are made.

Agenda item 6. SWG members'expertise and experience: alignment to TDR's portfolio

Dermot Maher shared with the SWG a template on the required expertise and experiences which can be used to align with TDR's portfolios and also for selection of TDR future SWG members. The SWG suggested including higher education in LMICs and monitoring and evaluation as cross-cutting expertise in this template.

Agenda item 7. Review and finalize recommendations

Overall, the SWG commended the RCS team for the progress made on the range of high quality activities, regarding complementary training programmes and tools, which are effectively and efficiently managed. The SWG recommended continuation of implementation of the RCS activities that were reviewed, as set out in the current biennium (2018-2019) workplan and budget, in close collaboration with the relevant WHO departments and regional offices and other key partners. The SWG commended RCS on the favourable proportions of undesignated (50%) and designated (50%) funds in the 2018-2019 budget. The SWG also supported overall the ongoing and planned range of activities set out according to the 2020-2021 biennium workplan and budget.

Cross-cutting activities

Regarding the impact of TDR's RCS schemes, including the postgraduate training scheme, the SWG advised TDR to continue developing approaches to monitoring TDR's contribution across the range of its RCS schemes to career development, for example through career tracking by TDR Global.

Access and delivery partnership (UNDP)

Overall, the SWG commended TDR on renewal of the ADP project funding from UNDP for activities in the 2018-2019 biennium, and recommended continued RCS participation in the ADP project in collaboration with the TDR Research for Implementation team, in working towards implementation of activities in 2019 and beyond.

Specific suggestion:

- Clarify the relationship of the TDR activities under this project to the health technology assessment activities, mainly conducted by PATH and WHO/EMP in the selected countries, and explore potential engagement of other relevant partners.

RTCs supported by TDR

Overall, the SWG commended the progress made in implementing the 2018-2019 biennium workplan and budget. The SWG approved the 2019 workplan and budget of the RTCs for AFR, AMR, EMR, EUR and SEAR and suggested deferred approval of the RTC in WPR (Research Institute for Tropical Medicine) until after revision and resubmission.

Specific suggestions:

- In developing each centre's sustainability plan, continue to identify potential resources in the countries where there is a satellite site.
- Continue to develop the networking functions and activities.
- Explore opportunities to translate the materials to other languages such as Portuguese.

Massive Open Online Course (MOOC) on IR

The SWG commended the progress in implementing the MOOC involving a wide range of partners in uptake.

Specific suggestions:

- Continue to promote dissemination of the MOOC through: a) the RTCs and their satellite institutions, b) the universities participating in the TDR postgraduate training scheme, c) institutionalization of the MOOC in universities as an accredited course, and d) consideration of translation to other languages (e.g. French, Portuguese and Chinese).
- Continue to ensure quality control through feedback from participants and periodic evaluation.

Framework for core competencies in implementation research

The SWG commended the RCS team on progress in developing the IR core competency framework.

Specific suggestions:

- Ensure the competencies are applicable for a range of training courses and for participants with varying degrees of expertise.
- Continue to liaise with key partners, e.g. RHR and AHPSR, and explore with Health Systems Global the possibility of a session during the next Health System symposium (in 2020 in Dubai, organized in collaboration with AUB, Lebanon).
- Continue to involve all the universities participating in the Postgraduate Training Scheme and the RTCs in the development and dissemination of the framework, which can be adapted to courses and used for their accreditation.

Structured Operational Research and Training Initiative (SORT IT)

Overall, the SWG commended the RCS contribution to SORT IT, in collaboration with the TDR Research for Implementation team, and recommended continued support for this activity.

Clinical Research and Development Fellowship (CRDF) scheme

The SWG commended the RCS team on successful renewal of US\$ 6.7 million funding from the Bill and Melinda Gates Foundation for 2018-2022 and recommended continued support by TDR for this scheme, as it moves into its current phase of evaluation in 2018 followed by resumption of award of fellowships by TDR in 2019. The SWG commended the steps taken to promote gender equity, including the challenge contest and the implementation of the measures identified in the call issued in November 2018.

Specific suggestions:

- Continue to identify and implement measures to promote gender equity.
- Continue to promote the success of the programme by showcasing CRDF outcomes and by demonstrating how the scheme responds to regional trainings needs, e.g. as identified through the evaluation.
- Clarify the value of the TDR-EDCTP joint venture.
- Explore opportunities to involve well developed clinical research sites.

TDR Global Engagement activities

Overall, the SWG recommended continued support of the Global Engagement activities set out in the 2018-2019 biennium workplan and budget. The SWG welcomed future review of these activities and advised TDR to explore potential links between Global Engagement and RCS activities. Potential options that emerged from discussions during the SWG meeting included using the small grants scheme to fund research activities proposed by researchers completing the MOOC, and to provide re-entry grants to Postgraduate Training Scheme fellows on completion of their master's degree.

Postgraduate training scheme

Overall, the SWG recommended continued support by TDR of the Postgraduate Training Scheme activities set out in the 2018-2019 biennium workplan and budget. The SWG congratulated the secretariat on the improvements in the review process, involving iterations between each participating university and the secretariat prior to the SWG meeting.

Specific suggestions:

- Continue to work with the participating universities to: a) improve their field mentorship programmes, b) promote institutionalization of implementation research, c) consider gender and geographic representation in selecting fellows, d) encourage networking among the seven universities, e) strengthen institutional capacity, including administrative capacity, f) refine the approach to M&E by ensuring relevant indicators in the M&E framework and improving the reporting template, and g) consider a plan (if funding is available) for increased collaboration between the university and the fellow's home institution if relevant.
- Consider opportunities (depending on funding availability and sources) not only to scale up the numbers of fellows trained in line with TDR's focus of on implementation research on infectious diseases of poverty, but also to adapt the scheme to be responsive to changing global needs.
- Explore possible opportunities to engage previous fellows in relevant training activities in their respective regions, e.g. as mentors and facilitators.

Strategic projects

The SWG commended TDR Coordinator RCS and staff for the wide range of high quality strategic projects and suggested continuation of follow-up of these projects. SWG members also commended TDR Coordinator RCS on the ongoing strategic engagement activities with key partner institutions he has undertaken on behalf of TDR overall as a member of the HTM strategic task force and of the WHO-Global Fund advisory group.

Mapping of externally funded postgraduate students in health research at institutions in sub-Saharan Africa, 2012 – 2017

The SWG commended RCS for the valuable mapping done in collaboration with EDCTP as a first step in promoting a comprehensive mapping by key stakeholders.

Specific suggestions:

- Continue to use the report to catalyse a more comprehensive approach by donors to obtaining and analysing data on externally funded research capacity strengthening activities, e.g. through ESSENCE.
- Consider using data which illustrate TDR's relative advantage (e.g. supporting students in countries which may often not be within the reach of other donors) in raising DF for the TDR Postgraduate Training Scheme.

Theory of change for TDR/RCS activities

The SWG commended RCS for the work in developing the theory of change (ToC), which should be helpful in articulating the contribution of the RCS activities to achieving an impact regarding the SDGs.

Specific suggestions:

- Finalize the ToC by taking into consideration the contribution of RCS activities to the SDGs, including "showcases" as relevant, and reviewing terminology to ensure consistency with the standard ToC approach;
- Continue to use the ToC for RCS to inform the development of a ToC for TDR and also for the wider group of programmes (HRP and AHPSR).

Adding value to the WHO guidelines development process

The SWG commended RCS for this work, which responds to the need of those who have become equipped to undertake research to identify relevant research questions using the systematic reviews conducted as part of the WHO guideline development process.

Specific suggestions:

- To continue the work as outlined with the WHO/CDS cluster initially and then beyond to encompass all clusters, building on the set of health issues that are covered by guidelines developed by WHO, with the expectation that the coverage will become increasingly comprehensive.
- To continue to support the development of a directory of research questions identified from the systematic reviews conducted by the WHO guideline development process.

Policy dialogue with the Global Fund

The SWG commended RCS for continuing to work on the policy dialogue with the Global Fund, aimed at increasing country-level funding for implementation research and operational research to enhance the effective performance of programmes.

Specific suggestion:

- Consider opportunities to review the status of a selected range of countries and work through partners to facilitate the inclusion of implementation research and operational research in Global Fund grants, building on success stories, e.g. India.

Priority areas and budget allocation for 2020-2021 workplan on RCS

SWG members reviewed and agreed on the RCS budget and workplan for 2020-21 under the two overall TDR programme scenarios (US\$ 40 million and US\$ 50 million) and commended RCS on maintaining the favourable proportions of undesignated (50%) and designated (50%) funds. The SWG recognised the frequent difficulties in raising designated funding for activities to strengthen research capacity, and the value of pooled undesignated funding by donors in support of the RCS contribution to achieving long-term impact.

Specific suggestions:

- Maintain at least the current minimum level of undesignated funding for postgraduate scheme for the next biennium in view of the quality of management and implementation of the programme, and the opportunity for rapid scale-up in the event of availability of increased funding.
- Highlight to partners (particularly to donors) the relative advantage of TDR in reaching countries which may often not be reached through other externally funded programmes.

Addressing the challenges of raising funds

The SWG commended RCS for the wide range of efforts by all staff in support of the Director in raising undesignated funds, and in support of raising designated funding (noting the successful renewal of designated funding for the CRDF programme and ADP project).

Specific suggestions:

- Consider opportunities to highlight to donors the contribution of TDR/RCS to “Leaving no one behind” (in the context of the SDGs).
- Identify opportunities to intensify collaboration with other WHO departments who share similar goals, to maximize synergies and avoid competition.
- Continue to identify opportunities to seek support for inclusion of a university in a French-speaking country and of a university in a Portuguese-speaking country in the Postgraduate Training Scheme.
- Continue to explore opportunities for funding from selected donors with whom TDR currently has an ongoing collaboration, e.g. IFPMA, and from possible donors when suitable contacts are made.

SWG members’ expertise and experience: alignment to TDR’s portfolio

The SWG commended the TDR approach to ensuring adequate representation of expertise and experience among member of SWGs. SWG members suggested including higher education in LMICs and monitoring and evaluation as cross-cutting expertise in this template.

Annex 1: Agenda

Background

The Scientific Working Group (SWG) for Research Capacity Strengthening (RCS) has an important role in advising the TDR secretariat on implementation and planning of activities, in the context of overall guidance by the Scientific and Technical Advisory Committee (STAC) and the Joint Coordinating Board (JCB). The recommendations of STAC provide the framework for TDR's approach to RCS and the work programme for 2018-2019. The STAC 2018 report is provided to SWG members in their folder.

To maintain independence, SWG members cannot be current recipients of TDR funding. Members will be asked to declare any possible conflict of interest by completing, and if relevant updating, the WHO Declaration of Interests form and may be requested to recuse themselves from any discussion(s) related to the area(s) in question.

Objective of the meeting

Regarding Research Capacity Strengthening (RCS), to provide strategic input and advice on implementing TDR's 2018-2019 work programme, in the context of the TDR strategy 2018-2023:

- a. review progress in 2018 and plans for 2019, including implementation of research training schemes and developments and innovations in training on implementation research;
- b. advise on priority areas and budget allocation for 2020-2021 workplan on research capacity strengthening

Procedure

Strategic input

The themes will be presented by TDR staff highlighting the specific input sought from the SWG. In line with TDR policy on mainstreaming gender activities, coverage of gender issues will be included in the presentations on the different technical themes.

Expected output from the meeting

By the end of the meeting, it is expected that the SWG will have made recommendations for consideration by TDR Director based on: 1) review of progress made in 2018 and plans for 2019 (including management of the Postgraduate Research Training Grant and Clinical Research and Development Fellowship schemes, the Regional Training Centres supported by TDR, innovations in research training and guidance, the Access and Delivery Partnership (ADP) and gender equity activities); 2) agreed prioritisation of expected results for 2020-2021, including budget allocation recommendations.

The Scientific Working Group meeting provides the opportunity also to review TDR Global Engagement activities (including the small grants scheme, partnership and knowledge management), which are managed through the Director's office.

Monday, 26 November		
<i>Time</i>	<i>Topic</i>	<i>Moderator / Presenter</i>
09:00	Welcome by the Chair (MT Bejarano) and Co-Chair (A Mwinga) Opening remarks by Director TDR TDR financial overview Preliminary business a) Role of SWG in relation to the STAC and JCB; b) declaration of interests; c) outline of meeting procedures and expected outcomes of the meeting; d) review of agenda; e) designation of rapporteur; f) review of report on the SWG meeting, 27-29 November 2017	MTB / AM J Reeder J Reeder / B Halpaap MT Bejarano/ D Maher
10:00	Q & A	MT Bejarano
10:30	<i>Group photo - Coffee break</i>	
	<u>1. Overview of progress against RCS 2018 workplan</u> What are the lessons learned from implementation of the 2018 workplan?	A Mwinga
11:00	Overview of activities (see draft 2018 annual report), including response to recommendations by SWG in 2017	D Maher
12:30	<i>Lunch break</i>	
	<u>2. Strategic input on selected themes</u>	A Mwinga
13:30	Access and Delivery Partnership (ADP) Phase 3 (2018 - 2023) (in collaboration with TDR Research for Implementation)	O Ogundahunsi
	Training networks and tools SWG review of, and input to, networks and dissemination of products	
14:00	Regional Training Centres (RTCs): report on progress in 2018 and workplans for 2019-20	P Launois
15:00	<i>Coffee break</i>	
15:30	Massive Open Online Course (MOOC) on implementation research	P Launois
16:00	Framework for core competencies in implementation research	P Launois/ M Vahedi
16:30	Structured Operational Research and Training Initiative (SORT IT) (in collaboration with TDR Research for Implementation)	E Kamau
19:00	<i>Dinner (optional) N.B. at own expense</i>	

Tuesday, 27 November		
<i>Time</i>	<i>Topic</i>	<i>Moderator / Presenter</i>
	Research training schemes (part 1) The SWG will provide comments on progress and strategic direction	
09:00	Clinical Research and Development Fellowship (CRDF) scheme Evaluation to inform a targeted approach Crowdsourcing challenge contest for gender equity in CRDF scheme	P Launois M Otmani del Barrio
10:30	<i>Coffee break</i>	
	TDR Global Engagement activities	
11:00	Review of small grants scheme, partnership and knowledge management	J Reeder R Terry G Aslanyan
12:30	<i>Lunch break</i>	
	Research training schemes (part 2)	
13:30	Postgraduate training scheme Overview of progress and updated M&E reports	M Vahedi E Kamau
14:00	Review of progress for each individual university (15 minutes report by designated SWG members followed by 15 minutes group discussion) Bangladesh Colombia Ghana	A Mwinga
15:30	<i>Coffee break</i>	
16:00	Review of progress for each individual university (continued) Indonesia Lebanon	A Mwinga

Wednesday, 28 November		
<i>Time</i>	<i>Topic</i>	<i>Moderator / Presenter</i>
09:00	Review of progress for each individual university (continued) South Africa Zambia	A Mwinga
10:00	Plenary: lessons learned from review of progress for ongoing and future implementation of the postgraduate training scheme	A Mwinga
10:30	<i>Coffee break</i>	
11:00	<u>3. Strategic projects</u> Mapping the 2012–2017 landscape of externally funded international postgraduate training at institutions in sub-Saharan Africa	D Maher
11:30	Theory of change for TDR/RCS activities	M Vahedi
12:00	Adding value to the WHO guideline development process	D Maher
12:15	Policy dialogue with the Global Fund	D Maher
12:30	<i>Lunch break</i>	
13:30	<u>4. Priority areas and budget allocation for 2020-2021 workplan on research capacity strengthening</u> Review of TDR revenue forecast and prioritisation of activities for 2020-2021, including budget allocation recommendations	A Mwinga
14:30	<u>5. Addressing the challenge of raising funds</u>	MT Bejarano
15:00	<u>6. SWG members' expertise and experience: alignment to TDR's portfolio</u>	MT Bejarano
15:30	<i>Coffee break</i>	
16:00	<u>7. Review and finalize recommendations</u>	A Mwinga
17:00	<i>End of meeting</i>	

Annex 2. List of participants

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