DIRECTOR’S REPORT

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JCB42, 25-26 JUNE 2019, GENEVA

REPORT OUTLINE

• Technical update
• Financial overview
• Topical issues
• WHO update
SOME IIR ACHIEVEMENTS IN 2018

- Preparedness for early identification and response to dengue outbreaks (EWARS)
  - Training and support for dengue EWARS implemented in 8 SEAR and WPR countries. Expansion to cover Zika and chikungunya and West Africa.

- Africa sub-regional networks for TB control (WARN-TB / CARN-TB)
  - Strategic approach in West Africa to enhance country research capacity in support to WHO’s End TB strategy leveraged US$ 8.6 million for priority research.
  - Central African Network now established to replicate the WARN-TB model.

- Safety databases
  - New data sharing agreements demonstrated growing buy-in into the value of shared safety data for evidence-based treatment guidelines. First analyses of two databases completed.

- Structured Operational Research & Training Initiative (SORT IT)
  - 16 SORT IT courses in 2018. New SDG themes (key populations, NTDs, NCDs) were embraced.
  - 83 new publications with 69% of projects continuing to report an effect on policy and practice.

- Antimicrobial Resistance
  - US$ 10 million (2019-2021) funding was secured to build sustainable operational research capacity using the SORT IT model to generate and utilize evidence to tackle the threat of AMR.

BUILD OPERATIONAL RESEARCH CAPACITY TO TACKLE ANTIMICROBIAL RESISTANCE (SORT IT)

**WHY ?**
Global public health challenge
- AMR makes treatments ineffective, allows infections to persist/spread
- Causes ≈10 million deaths/year

Identified OR priority: UK-DHSC, Fleming Fund, Wellcome Trust, WHO, countries

TDR mandate / SDGs: Embraces 8 SDGs

Funding: $10 million + human resources

**HOW ?**
In LMICS (2019-2021)
- Support countries to conduct and publish operational research on AMR
- Build sustainable structures & processes for evidence-informed decision-making

**WHERE ?**
Six countries:
- Ghana, Myanmar, Nepal, Sierra Leone, Uganda (Fleming Fund)
- Colombia/Ecuador (cross-border AMR)
- Engagement/partnership with WHO country offices and stakeholders.

**WHO ?**
- Implementers and front-line health workers

Scientific scope ?

GLOBAL ACTION PLAN ON ANTIMICROBIAL RESISTANCE
**SOME VES ACHIEVEMENTS IN 2018**

- **Research on VBDs and climate change**
  - New evidence generated on the impact of VBDs in the context of climate change (over 150 publications). Decision support processes and tools developed.

- **Research on causes and the burdens of residual malaria**
  - Research shows “residual” malaria transmission not only due to changes in behaviour of people and vectors, but inadequate coverage and use of the recommended tools (LLINs and IRS).

- **Environmental prevention and control of VBDs in South-East Asia**
  - Research projects on fighting dengue with innovative community participation and new vector control technology started and ongoing.

- **Multisectoral approaches**
  - Six commissioned reviews produced, publications on a special issue planned and guidance document on the framework started.

- **Gender**
  - Strengthened interdisciplinary research collaboration for implementation of gender-responsive interventions and researchers’ capacities to incorporate intersectional gender analysis.

- **Networks**
  - 2 international networks established (Caribbean and West Africa) to prevent and control VBDs.

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**NETWORK FOR STRENGTHENING COUNTRY CAPACITY FOR IMPROVED ARBOVIRAL DISEASES CONTROL IN WEST AFRICA**

**Assessment of the capacity of Western African countries to prevent and control arboviral diseases**

**Draft Recommendations**:

- Develop a capacity strengthening plan
- Harmonize case definitions to be used in the whole region
- Notify suspected cases
- Develop definitions of outbreaks
- Integrate epidemiological and entomological surveillance and vector control with other relevant and existing country public health interventions (e.g. NTDs and malaria programmes)
- National training curriculum for medical staff and entomologists
- Strengthen existing national reference laboratories
- Attempt to expand minimum laboratory capacity
SOME RCS ACHIEVEMENTS IN 2018

- Consolidation of postgraduate training scheme
  - Uptake of IR by universities and 178 Master’s students trained or in training at end 2018

- First worldwide MOOC on IR launched in May 2018
  - 1585 enrolled participants from 106 different countries, 560 (35%) completed the course and received a certificate. Now in French and Spanish.

- Renewal of designated funding
  - Access and Delivery Partnership (with IIR) US$ 1 million per year from UNDP - RCS component on strengthening capacity for IR expanded to involve 3 additional countries: India, Malawi and Senegal

- Theory of change developed for RCS activities

VISION: Reduce the burden of infectious diseases of poverty (IDPs)

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<th>IMPACT</th>
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<td>GOAL:</td>
<td>To strengthen the capacity of individuals, institutions and societies to produce research evidence useful for reducing the burden of IDPs in LMICs</td>
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<tr>
<td>OUTCOMES</td>
<td>Research that meets evidence-based IDP priorities</td>
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<td>OUTCOMES</td>
<td>Recognised, high-quality institutions for implementation research and training</td>
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<td>OUTCOMES</td>
<td>Global community of researchers, policy makers and funders that understand, promote, generate and use IR to reduce IDP burden</td>
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<td>OUTPUTS</td>
<td>Researchers able to generate evidence on IDP priorities</td>
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<td>MSc/professional quality-assured training courses supported by active researchers</td>
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<td>Network and forums for IR in IDP supported by guidelines and standards for IR researcher competencies</td>
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<td>ACTIVITIES</td>
<td>Researchers’ training and careers integrated into academic institutions</td>
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<td>ACTIVITIES</td>
<td>Develop and monitor implementation and quality of courses in IR research competencies</td>
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<td>ACTIVITIES</td>
<td>Convene stakeholder meetings to foster networks, and create training resources and harmonize their delivery</td>
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PRINCIPLES: Equity, Quality, Partnerships
SOME GLOBAL ENGAGEMENT ACHIEVEMENTS 2018

Evidence to inform decisions and policy and shaping research agenda
- Data sharing infrastructure with IDDO and new publishing platform - TDR Gateway.

ESSENCE
- Celebrated 10 year anniversary - held in high regard by funders

Regional Small Grants with WHO regional offices
- Joint small grant calls with HRP and AHPSR, leveraged significant additional resources

Social Innovation in Health Initiative (SIHI)
- Expanded regional and global SIHI networks
- Developed SIHI crowdsourcing guide

TDR Global
- Reaching TDR Global community - testing TDR Global community engagement models and mobilization on gender in health research

SOCIAL INNOVATION IN HEALTH: EXPANDING THE RESEARCH NETWORK

Building upon past successes
- Community-based participatory research course
- Colombia CIDEIM - ICESI
- South Africa UCT Bertha Centre
- New partnerships > Africa CDC, UNAIDS, UN University, WHO, Asian NDI

Crowdsourcing guide for research
- Health system entrepreneurship fellowship programme
- Fellowship programme
- Research grants for students
2018-2019: MOVING TOWARDS THE HIGHER BUDGET SCENARIO

- UK NIHR - AMR / SORT IT signed (US$ 10 million for 2018-2021)
- Sida - support for social innovation research increased (up to US$ 1.3 million for 2018-2019); ESSENCE maintained at $0.2 million
- Switzerland - R&D priority setting (US$ 0.7 million for 2018-2019)
- Luxembourg - data management course US$ 0.1 million
- Bill & Melinda Gates Foundation renewal for the fellowship scheme signed (US$ 6.7 million for 2018-2022)
- UNDP - Access and Delivery Partnership (ADP) project renewal US$ 1 million for 2019-2020 (from Government of Japan)
- USAID - US$ 0.7 million for 2018-2019 for TB research programmes
- Medicine development for global health - Evidence for Moxidectin (US$ 0.2 million for 2018-2022)
- Discussions with GAVI to apply and disseminate SORT IT
- Discussions with IAEA for Sterile Insect Technology
REVENUE TREND AND 2020-2021 FORECAST

2020-2021 PROGRAMME BUDGET (OPERATIONS VS OPERATIONS SUPPORT)
ACCELERATING UHC AND SDG3

Leave no one behind
- Align
- Accelerate (R&D, innovation, community engagement, determinants of health)
- Account

EQUITY- A TDR COMMITMENT

EQUITY IN RESEARCH
- 68% of experts on TDR advisory committees are from disease endemic countries
- 73% of first authors of TDR-supported publications are from disease endemic countries
- 81% of TDR-funded articles in peer-reviewed publications are in open access journals
- 83% of TDR grants are awarded to institutions or individuals in disease endemic countries

A FEW NUMBERS ON WOMEN
- 45% of grantees are women
- 44% of first authors are women
- 57% of TDR advisory committee members are women
**EQUITY - A TDR COMMITMENT**

Proportion of grants and contracts awarded to women, yearly progress 2012-2018 ($ amount)

**UPDATE ON MOXIDECTIN**

Moxidectin now registered with the US FDA

- Potential for quicker achievement of onchocerciasis elimination target: skin microfilariae levels are lower 18 months after moxidectin than ivermectin
- A TDR initiated and led project: transferred to not-for-profit MDGH in 2014, following STAC advice to identify sponsor to register and manufacture moxidectin
- Innovative funding model: MDGH leveraged the potential priority review voucher for funding from GHIF (co-sponsored by SIDA, BMZ and German Development Bank), PRV sale pending.
- Potential for other NTDs: scabies, strongyloidiasis
- TDR provides scientific expertise, LMIC study implementation experience and its networks for MDGH fundraising and implementation research to inform WHO guidelines and country policies
TDR SHAPING THE RESEARCH AGENDA

- New tool for R&D portfolio analysis (P2I)
- First complete analysis of HIV, TB, malaria & NTD pipeline for $ funding and launches
  - Collaboration: Duke University and Policy Cures Research
- Update in 2019 + 5 portfolio analysis projects
  - TB Alliance, EVI, FIND, DNDi and MMV
- Whole pipeline with P2I + GFINDER data

- Developed and launched the Health Product Profile Directory
- Online searchable database. 215 profiles ++ includes all WHO-authored product profiles
- Enables high-level analysis e.g.
  - HIV, TB, malaria & Chagas 40% of all profiles
  - NCDs and FCW <2% of profiles

OPEN ACCESS TO IMPLEMENTATION RESEARCH
FIRST TDR GLOBAL CHAMPION AWARD

Lenore Manderson: 30 years of support to TDR

HR CHANGES: FAREWELL

Piero Olliaro
Team Leader, IIR. With TDR for 25 years, until retirement in late October. Currently recruiting replacement.
- Reached out widely through stakeholders
- Recruitment closed; 268 applicants
- Interviews expected shortly

Madhavi Jaccard-Sahgal
Administrative assistant, VES
- With WHO for 32 years
- Worked with TDR for 29 years

Flore Wagner
Short-term administrative assistant, VES
- With TDR for 3.7 years
HR CHANGES: WELCOME

Makiko Kitamura
Communications Officer
- Journalism background
- Came across from Global Platform for Measurement and Accountability at WHO

Daniel Hollies
Team Assistant, VES
- with WHO since January 2015, previously with the Regulation of Medicines and other Health Products (RHT) Prequalification Team (PQT)

WHO UPDATE

UNIVERSAL HEALTH COVERAGE
- One billion more people benefiting from

HEALTH EMERGENCIES
- One billion more people better protected from

HEALTH AND WELL-BEING
- One billion more people enjoying better
THE NEW WHO-HQ STRUCTURE

Department reporting lines from 18 March (transition structure to June)

- **TDR moves to Science Division**
- **Reporting to Chief Scientist**

Dr Soumya Swaminathan appointed Chief Scientist and TDR Special Programme Coordinator
TDR REORGANIZATION

Director's Office

Research Capacity Strengthening

Research for Implementation

Programme and Portfolio Management

Research Capacity Strengthening and Knowledge Management

Vectors, Environment & Society

Intervention and Implementation Research

WHO RESEARCH FOR HEALTH DEPARTMENT: FROM EMERGING TECHNOLOGIES TO COUNTRY IMPACT

The five functions integrate to apply research and innovation to achieve impact for people’s health around the world

1. Foresight and emerging technologies
   - Getting ahead of the curve
   - Horizon scanning

2. Research prioritization and support
   - Identifying gaps
   - Promoting and supporting research according to the biggest unmet needs

3. Health ethics and governance
   - Placing ethics at the heart of decision-making
   - Providing governance options

4. Research policy for access
   - Leadership on policies in research to ensure access and scale-up

5. Knowledge/Evidence to Impact
   - Country-oriented policy and scaling options to translate innovation to impact
SUMMARY

- New strategy being fully implemented in the 2018-2019 workplan
- Strong operational achievements in 2018
- Good progress towards results targets
- Clear and achievable plans for 2019
- Moved towards $50 million budget scenario allowing additional ≈$6 million to boost 2019 operations
- TDR moved into new Science Division
- TDR reorganization restarted, as approved at JCB 2017

THANKS TO ALL TDR STAFF