

TDR JOINT COORDINATING BOARD 43rd Session
Provisional agenda item 4.

**TDR/JCB43/20.4** 26 May 2020

## Follow-up on JCB42 recommendations

Agenda item: 4.

**Action / Information:** JCB is invited to review and endorse the follow-up

action taken

**Purpose:** This document presents an update on the JCB42

recommendations.

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	Recommendations / Decisions	Follow-up action
1.	Welcomes and supports the appointment of Director TDR to take on the dual roles of Director TDR and Director of the new WHO Research for Health Department.  Seeks reassurance that the change will have no impact on TDR's budget and workplan, that the two roles are kept separate and WHO will finance the research division elements of the Director's time. Requested that any potential conflicts of interests are resolved as they arise.  Requested that the risks and opportunities at strategic, programmatic and governance levels for TDR are assessed, and that the arrangement is evaluated in a year's time.	The dual role of the Director is progressing without significant issues. There is no effect on TDR budgeting or workplan and programme management of TDR is kept completely separate from the Research for Health Department. No conflicts have needed to be addressed, but the Chief Scientist stands ready to address any issues if they were to arise. There have been a number of strategic advantages, such as integration of the TPP compendium¹ developed by TDR now being integrated into the WHO end-to-end R&D process, and TDR's work on research prioritization forming the foundation of a WHO wide standardization of research priorities. Additionally, involvement of the Director in discussions with other global partners, for example the Global Fund to Fight AIDS, Tuberculosis and Malaria, under his other role, has also given TDR a voice in a number of fora where TDR may not have otherwise been included.
2.	Recommended that TDR consider analysing the proportion of corresponding authors from disease endemic countries, in addition to the current first authors and last authors, of TDR supported publications.	The analyses were done and are now part of the measurement in the Results Report beginning from 2019 (indicator 12, p.28).
3.	Recommended to further raise TDR's profile within the research related accelerator plan of the SDG3 Global Action Plan by promoting implementation research.	TDR continues to monitor discussions on the GAP, however the COVID-19 R&D blueprint has largely superseded this debate during the pandemic. TDR continues to advocate for consideration of implementation research in this context and will pick up the discussion within GAP when it re-emerges.
4.	Further improve the visibility of TDR funders in its products.	TDR is now producing new communications materials in the form of fact sheets and an improved electronic newsletter. The annual report is now produced earlier in the year, giving the Programme more visibility.
5.	Consider targeted country-based advocacy and communication efforts, using tools such as country information sheets, highlights of achievements.	Information sheets and more focused documents are now produced on a range of TDR activities.
6.	Continue reiterating the unique added value of TDR within the overall health research architecture.	The survey of TDR trainees, conducted right after the onset of the COVID-19 pandemic, provided an opportunity to reiterate the investments made in capacity strengthening by TDR which now provides indispensable support to country activities to combat the pandemic.

<sup>&</sup>lt;sup>1</sup> <u>https://www.who.int/tdr/grants/RFP-TDR-RD-TPP-Compendium.pdf</u>