

Portfolio of Expected Results: 2020-2021 progress and plans for 2022-2023

- Global Engagement
- Implementation Research
- Research Capacity Strengthening

Expected results

Global engagement

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Expected Result: 1.3.5

Title: Advancing social innovation in health care delivery in LMICs through research, capacity strengthening and advocacy

Strategic Work Area: Global engagement		Workstream:	
ER type:	Continuing	Funding type:	UD and DF
Start date:	01.01.2014	End date:	31.12.2023
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	CIDEIM (Colombia), Fondation Merieux (France), LSHTM (UK), MAD, Makerere University (Uganda), PAHO, Schwab Foundation (Switzerland), SESH (China), UNAIDS, University of Cape Town (South Africa), University of Malawi, University of the Philippines Manila,		
Diseases:	Not Disease-Specific		
Review mechanism:	Ad hoc expert review group, scientific working group		
ER manager:	Beatrice HALPAAP		
Team:	Abraham Aseffa, Elisabetta Dessi, Beatrice Halpaap, Pascal Launois, Mary Maier, Corinne Merle, Bernadette Ramirez, and staff across TDR as relevant		
Number of people working on projects:			

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance:

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	
Roles complimentary:	Yes	
Coordination transparent:	Yes	
Visibility:	Yes	Credit guidance has been shared with partners

Objectives and results chain

Approach to ensure uptake:	Advocacy for social innovation in health at global and national levels; Engagement of low- and middle-income country stakeholders in leading the Social Innovation in Health Initiative and its collaborative research.
Up-take/Use Indicator:	Advocacy for social innovation in health further conducted by global health and national stakeholders; pioneer social innovation research hubs have engaged new collaborators in their respective country and region- at least four additional SIHI hub will be
Gender and geographic equity:	Social innovations provide solutions to enhance health care delivery and reach vulnerable populations. The Social Innovation in Health Initiative (SIHI) focuses on the needs of countries in the Global South and in their leadership in enhancing social innovation in health. We have initially identified only one institution in low- and middle-income countries engaged in the promotion of and research on social

innovation and social entrepreneurship in health. One of the main focuses of this expected result is to build upon the strength of this institution and engage new institutions in the Global South through collaboration and skills development. SIHI contributes to the implementation of the WHO framework for people-centred integrated health services and of the WHO community engagement framework, which are critical elements to reach universal health coverage and leave no one behind. Gender equity has been especially looked at when establishing external review panels, convening experts, issuing contracts, and in general within our collaborations. The next step is to explore the development of research grant schemes to enhance social innovation in health care delivery, specifically: (i) for women and child health; and (ii) led by women.

Publication plan: It is anticipated that some of the case study research conducted will be published in the TDR Gateway; A special issue on social innovation research is being published in the Journal of Infectious Diseases; SIHI hubs present their work in various conferences

Up-take/use indicator target date: 31.12.2023

Sustainable Development Goals

Good Health and Well-being; Gender Equality; Industry, Innovation and Infrastructure; Reduced Inequality; Sustainable Cities and Communities; Partnerships to achieve the Goal

Concept and approach

Rationale: Why Social Innovation research? Over the past decades, great advances have been achieved by innovation in drugs, devices and vaccines but we have neglected to innovate in the delivery process. Well-intended policies and interventions have not achieved their desired outcomes due to communities not being involved in creation and implementation. The Sustainable Development Goals call for a new healthcare paradigm, inclusive of social, environmental and economic factors responsible for illness and disease. Social innovation contributes to Universal Health Coverage and the SDGs: - Social innovation uses a people-centred perspective. It is based on valuing communities and individuals living across the global south as competent interpreters of their lives and essential contributors in solving the challenges to access quality health services. - The social innovation approach extends beyond silos, sectors and disciplines to inclusively integrate all actors around the needs of communities. - Social innovation results in the implementation of new solutions that enable greater equity, affordability and sustainability of healthcare services for all. Research is needed to (i) understand what works and what does not, (ii) enhance and demonstrate effectiveness, sustainability and impact, and (iii) replicate or scale up innovations. This is a great opportunity for TDR to build upon a long history of research on community-based interventions to explore ways to sustain these.

Design and methodology: SIHI vision is to foster an increasing number of research institutions in the global south to promote and advance social innovations to transform health care delivery. To achieve this the SIHI country hubs and SIHI other partners will continue creating an enabling environment at the global, national and local levels. This is done through building new partnerships and engaging new research institutions and countries to embed social innovation in their programmes. SIHI builds upon its work and expansion during its two initial phases and will focus, in this Phase 3, on disseminating social innovation practice and research in new countries through a regional approach: - 2014-2015 ? Phase 1: SIHI launch ? Making the case & WHO call for action - 2016-2019 ? Phase 2: Expanding the network to low- and middle-income countries ? SIHI country hubs - 2020-2021- Phase 3: Planting the seed ? Network expansion in the regions

Approach to ensure quality: In addition to oversight by expert committee quality assurance mechanisms, include fact checking, peer review of concept papers, technical and copy editing.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$150,000	\$200,000	\$350,000	\$350,000	\$800,000	\$1,150,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$350,000	\$1,039,000	\$1,389,000	\$781,223	\$140,555	\$921,777

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$150,000	\$300,000	\$450,000	\$400,000	\$800,000	\$1,200,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$150,000	\$300,000	\$450,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0024

1. Promote and support research for social innovation: Support research for community-engaged social innovation models and develop tools/ mechanisms to embed research in the process.

ERObj-0025

2. Foster an increasing number of research institutions in the global south to promote and advance social innovations to transform health care delivery.

ER Biennium Risks

2020-2021

ERRisk - 0038

Risk description: Sustainability of efforts and collaborations established is a key challenge.
Actions to mitigate risk: Support interested research institutions in low- and middle-income countries to: (i) become hubs, institutionalize research for social innovation in their organization and transfer and disseminate capacity to others; and (ii) fundraise for further activities.
Mitigation status: On Track

ERRisk - 0090

Risk description: Ensure coherence and synergy as the network expands
Actions to mitigate risk: Define partnership criteria with roles and responsibilities and explore the establishment of an advisory committee to steer the initiative
Mitigation status: On Track

2022-2023

ERRisk - 0208

Risk description: Ensure coherence, synergy and sustainability as the network expands
Actions to mitigate risk: The SIHI Secretariat provides leadership, coherence and promotes synergy.
Mitigation status:

2020-2021

EROutp-0132

Output description:	Growing number of partners which share resources and synergize efforts.
Output indicator:	At least 5 new collaborations to advance social innovation in health in the regions and/or develop new research and capacity strengthening tools
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Five research institutions in Ghana, Honduras, Indonesia, Nigeria, and Rwanda have joined SIHI network and are in the process to establish new SIHI country research hubs.

EROutp-0080

Output description:	At least 4 social innovation research hubs in low- and middle-income countries established, functioning and disseminating social innovation in health practice and research in other countries.
Output indicator:	At least 4 research hubs have (i) institutionalized social innovation as a multidisciplinary approach in their organization to enhance health care delivery research (promotion, convening, research, research capacity, knowledge management) and (ii) engage
Target date:	31.12.2021
Progress status:	On Track
Progress description:	SIHI hubs in Philippines, Uganda, Colombia and Malawi have institutionalized social innovation in their respective organization. SIHI Philippines have also institutionalized social innovation in the national health research system. SIHI Uganda have engaged key stakeholders including the government in the hub's governance.

2022-2023

EROutp-0250

Output description:	Functioning SIHI Secretariat to coordinate the SIHI partner network efforts and SIHI global communications.
Output indicator:	SIHI branding reinforced throughout the expansion of SIHI network and new collaborations established
Target date:	31.12.2023
Progress status:	
Progress description:	

EROutp-0251

Output description:	Growing number of operational SIHI country hubs
Output indicator:	At least 10 operational hubs in LMICs advancing social innovation in health care delivery through research, capacity and advocacy.
Target date:	
Progress status:	
Progress description:	

2020-2021

EROutc-0038

Outcome description: The application and usefulness of social innovation in health care delivery demonstrated, disseminated and scaled up through research hubs in low- and middle-income countries.

Progress made towards outcome: In 2020 the SIHI country hubs have engaged five new research institutions partners in Ghana, Honduras, Indonesia, Nigeria and Rwanda and support them to establish new hubs. SIHI Secretariat has been launched and is based in SIHI Philippines. It coordinates the SIHI partner network and SIHI Global communications.

2022-2023

EROutc-0052

Outcome description: The application and usefulness of social innovation in health care delivery demonstrated, disseminated and scaled up through a growing number of research hubs

Progress made towards outcome:

Expected Result: 2.1.1.2

Title: WHO regional office collaboration and small grants

Strategic Work Area: Global engagement		Workstream:	
ER type:	Continuing	Funding type:	UD
Start date:	01.01.2018	End date:	31.12.2023
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	All six WHO regional offices, country offices and institutions in countries as appropriate		
Diseases:	Not Disease-Specific		
Review mechanism:	Strategic review by scientific working group; small grants review by the regional office, TDR and external reviewers; and project review by regional external reviewers		

ER manager: Garry ASLANYAN

Team: Elisabetta Dessi

Number of people working on projects: 21

FENSA clearance obtained for all Non-State Actors? No

Justification for no FENSA clearance: This is done by each RO

TDR partnership criteria

Add value:		Use resources:	Yes
Align goals:		Address knowledge gaps:	
Integrate mandates:	Yes	Build strengths:	
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Completed
Roles complimentary:	Yes	Completed
Coordination transparent:	Yes	Completed
Visibility:	Yes	Completed

Objectives and results chain

Approach to ensure uptake:	All small grants calls will require inclusion of research update sections and periodic monitoring of research results will be conducted to assess and recommend potential update strategies
Up-take/Use Indicator:	At least 8 cases of new/improved solutions, implementation strategies or innovative knowledge resulted from research funded by small grants are successfully applied in DECs
Gender and geographic equity:	Preference will be given to competitive female candidates of small grant calls and to countries with less developed research capacity. Possibility of outsourcing some of the responsibilities to RTCs or other institutions in regions or engaging fellows from other RCS initiatives.
Publication plan:	TDR to enable publication of results from small grants in each region and bring this to RSG, Regional ACHRs and others, as appropriate

Sustainable Development Goals

No Poverty; Good Health and Well-being; Gender Equality; Reduced Inequality; Partnerships to achieve the Goal

Concept and approach

Rationale:	The integrated approach to strategic regionalization of TDR activities will ensure regional focus and increased visibility of TDR's new strategy, as recommended by STAC and the JCB. This expected result is a key activity that facilitates TDR's global engagement functions. It will also facilitate the engagement of WHO control programmes and research units at both headquarters and regional offices. This approach will: - Facilitate planning in a coherent way through networks and collaboration with regional offices, bringing together the different initiatives of TDR under an overarching approach - Foster the role of LMICs in research and priority settings in support to the development of better approaches for control of diseases, focusing on regionally identified research and training needs - Promote better integration on TDR's research, capacity strengthening and knowledge management functions
Design and methodology:	Each round of calls will be evaluated and verified before the next annual cycle is launched, collaborate with KMS focal points on research proposal writing training. Main steps of implementation will include: (1) Rounds of discussions with each regional office; (2) internal TDR prioritization of RCS and research priorities in each region; (3) request and review priorities list from each regional office; (4) Joint discussion and agreement on synergetic areas of interest to TDR and each regional office; (5) development and review of the call for proposals; (6) issue and disseminate calls for proposals through TDR and regional office networks; (7) screening and selection of the proposals; (8) funding and implementation of projects; (9) monitoring and reporting; and (10) results translation, publication and dissemination.
Approach to ensure quality:	scientific working group review, extensive internal TDR and RO input. Use standardised templates for call for proposals, reviews and follow ups.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$1,000,000	\$100,000	\$1,100,000	\$1,300,000	\$200,000	\$1,500,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$1,200,000	\$ 0	\$1,200,000	\$207,354	\$ 0	\$207,354

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$1,000,000	\$100,000	\$1,100,000	\$1,350,000	\$200,000	\$1,550,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$1,000,000	\$100,000	\$1,100,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0032

1. Financial and technical support for regional research, capacity building and knowledge management priorities.

2. Promote enhanced collaboration between TDR and all WHO regional offices.

ER Biennium Risks

2020-2021

ERRisk - 0043

Risk description:	Insufficient managerial and technical staff at the regional office
Actions to mitigate risk:	Possibility of outsourcing some of the responsibilities to the regional training centre or other institution in the region or engaging fellows from other RCS initiatives
Mitigation status:	On Track

ERRisk - 0095

Risk description:	Instability and inconsistency of regional focal points
Actions to mitigate risk:	Ensure broader engagement of other staff in regional offices and support and buy-in from appropriate directors in each regional office
Mitigation status:	On Track

2022-2023

ERRisk - 0244

Risk description:	Instability and inconsistency of regional focal points
Actions to mitigate risk:	Ensure broader engagement of other staff in regional offices and support and buy-in from appropriate directors in each regional office
Mitigation status:	

ERRisk - 0245

Risk description:	Insufficient managerial and technical staff at the regional office
Actions to mitigate risk:	Possibility of outsourcing some of the responsibilities to the regional training centre or other institution in the region or engaging fellows from other RCS initiatives
Mitigation status:	

ER Biennium Outputs

2020-2021

EROutp-0137

Output description:	Functional collaboration frameworks with at least 5 regional offices established
Output indicator:	Evidence of collaboration frameworks effectiveness based on successful joint projects and activities
Target date:	02.12.2021
Progress status:	On Track
Progress description:	An overall collaboration framework exists and is used.

EROutp-0085

Output description:	Small Grants schemes operationalized in at least 5 regional offices
Output indicator:	Small grants calls launched, projects selected and funded
Target date:	02.12.2021
Progress status:	
Progress description:	

2022-2023

EROutp-0299

Output description: Functional collaboration frameworks with at least 5 regional offices established
Output indicator: Evidence of collaboration frameworks effectiveness based on successful joint projects and activities
Target date: 02.12.2021
Progress status:
Progress description:

EROutp-0298

Output description: Small Grants schemes operationalized in at least 5 regional offices
Output indicator: Small grants calls launched, projects selected and funded
Target date: 02.12.2021
Progress status:
Progress description:

ER Biennium Outcomes

2020-2021

EROutc-0043

Outcome description: Research capacity will be enhanced and research will generate region specific evidence and solutions for priority public health issues
Progress made towards outcome: A review of small grants scheme was completed. The review demonstrated tangible impact of the projects conducted on country health policy making that provided solutions to key public health issues in countries and regions.

2022-2023

EROutc-0070

Outcome description: Research capacity will be enhanced and research will generate region specific evidence and solutions for priority public health issues
Progress made towards outcome:

Expected Result: 2.2.1

Title: Knowledge Management, shaping the research agenda

Strategic Work Area: Global engagement		Workstream:	
ER type:	Continuing	Funding type:	UD and DF
Start date:	01.01.2020	End date:	31.12.2021
ER status:	On Track	Comment:	Publication outputs to be completed in September 2020
WHO region:	Global		
Partners:	Duke University, Policy Cures Research		
Diseases:	Not Disease-Specific		
Review mechanism:	Scientific working group		

ER manager: Robert Fraser Terry

Team: John Reeder; Elisabetta Dessi; Science Division Working Group (24)

Number of people working on projects: 10

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance:

TDR partnership criteria

Add value:	Yes	Use resources:	
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:		Build strengths:	
Reduce burden:		Foster networking:	
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	see table above
Roles complimentary:		
Coordination transparent:		
Visibility:	Yes	Duke University and Policy Cures Research are leaders in their respective fields

Objectives and results chain

Approach to ensure uptake:	1&2 Publication of results in reports and academic press. Create linkage with implementation agencies and LMICs ministries.
Up-take/Use Indicator:	Quality of applications to apply and use TDR tools and analysis of the neglected disease pipeline and OR/IR mapping reports
Gender and geographic equity:	Priority given to disease endemic countries. Gender issues one of the weighted selection criteria for priority selection to ensure equitable distribution of priorities. New methodological approaches developed to priority setting to ensure gender balance is achieved.
Publication plan:	Reports and academic publications
Up-take/use indicator target date:	30.09.2021

Sustainable Development Goals

Good Health and Well-being; Gender Equality; Partnerships to achieve the Goal

Concept and approach

Rationale:	Continuous identification of research and research capacity needs is key to inform stakeholder's strategies (HTM, WHO RO, funding agencies, countries). This applies to TDR's own portfolio of future priorities and to that of stakeholders. Mapping of health product pipeline and support for OR/IR are key to providing the evidence that underpins advocacy to support research for implementation.
Design and methodology:	Adapt and develop the TDR Portfolio to Impact R&D modelling tool as well as the methods to understand the funding available for operational research and research for implementation.
Approach to ensure quality:	Application of good practice in priority setting through the development of WHO norms and standards for staff managing health research priority setting.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$100,000	\$100,000	\$200,000	\$250,000	\$200,000	\$450,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$100,000	\$168,000	\$268,000	\$5,155	\$78,989	\$84,144
2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$100,000	\$750,000	\$850,000	\$100,000	\$950,000	\$1,050,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$100,000	\$750,000	\$850,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0039

Continuous identification of research and research capacity needs is key to inform TDR's own portfolio of future priorities and to that of our stakeholders. TDR's engagement in this area ensures that its future priorities engage key stakeholders in disease endemic countries in setting the research agenda and ensuring research reflects their needs as well as guides stakeholder engagement.

ER Biennium Risks

2020-2021

ERRisk - 0047

Risk description:	Failing to clearly define the need for and use of such priority setting processes
Actions to mitigate risk:	Engagement with stakeholders - feedback from donors e.g. ESSENCE group. Use of WHO good practice guidance.
Mitigation status:	On Track

ERRisk - 0236

Risk description:	Failing to clearly define the need for and use of such priority setting processes
Actions to mitigate risk:	Engagement with stakeholders - feedback from donors e.g. ESSENCE group. Use of WHO good practice guidance.
Mitigation status:	On Track

ERRisk - 0235

Risk description:	Failing to clearly define the need for such priority setting processes
Actions to mitigate risk:	Engagement with stakeholders - feedback from donors e.g. ESSENCE group. Production of WHO good practice guide.
Mitigation status:	On Track

ERRisk - 0237

Risk description:	Lack of take up of the recommendations from gap analysis to reshape research and capacity strengthening portfolio of TDR and others.
Actions to mitigate risk:	Ensure engagement from design through to identification of recommendations
Mitigation status:	On Track

ER Biennium Outputs

2020-2021

EROutp-0193

Output description:	Provide technical support on request through regional offices to Member States engaged in health research
Output indicator:	One support activity provided
Target date:	30.09.2021
Progress status:	On Track
Progress description:	No requests from Member States but technical assistance provided to PHE and creating a research agenda with respect to communication re COVID-19 - termed the Infodemic

EROutp-0141

Output description:	Analysis of the health product pipeline for HIV, TB, malaria and NTDs combined with mapping of operational and research for implementation
Output indicator:	Report published
Target date:	30.09.2021
Progress status:	Completed
Progress description:	Report completed and academic paper published 21 May 2020

EROutp-0089

Output description:	Support through technical advice and/or workshop to TDR or its stakeholders
Output indicator:	Workshop held and reported
Target date:	30.09.2021
Progress status:	On Track
Progress description:	Workshops planned for ARFO and EMRO in October 2020

EROutp-0289

Output description:	Complete a Research Fairness Initiative assessment for TDR
Output indicator:	Report published and verified by COHRED
Target date:	03.01.2022
Progress status:	On Track
Progress description:	Deferred to 2021 as no interns allowed to work in WHO due to COVID-19

2022-2023

EROutp-0288

Output description: One report/resource per biennium based on a scoping review in the area IR/OR research to further map partners, priorities, ongoing activities and TDR work in this context.

Output indicator: Report published and/or resource established

Target date: 30.08.2023

Progress status: On Track

Progress description:

EROutp-0286

Output description: Analysis of the health product pipeline for HIV, TB, malaria and NTDs in order to identify and describe priorities.

Output indicator: Report published

Target date: 29.09.2023

Progress status: On Track

Progress description:

EROutp-0287

Output description: One research priority setting exercise supported p.a.

Output indicator: Report published and/or resource established

Target date: 30.09.2022

Progress status: On Track

Progress description: TDR led a WHO Science Division working group to produce systematic guidance for WHO staff managing research priority setting exercises. This approach will now be rolled out across WHO offices.

ER Biennium Outcomes

2020-2021

EROutc-0047

Outcome description: 1) Continuous identification of research and research capacity needs to inform strategies (HTM, WHO RO, funding agencies, countries). 2) Creation of public goods through development of tools and analysis of the health product pipeline for HIV, TB, malaria and NTDs. 3) as requested provide technical support through Regional Offices to Member States engaged with health research

Progress made towards outcome: TDR led the WHO working group to develop normative guidance for WHO setting research priorities this has already been used by PHE in its priority agenda for communicating public health messages re COVID-19. The P2I is designated a global public good by WHO. The Health Product Profile Directory will enable an end-to-end process for health product priority setting and coordination.

EROutc-0067

Outcome description: One research priority setting exercise supported at regional or country level

Progress made towards outcome: ongoing.

2022-2023

EROutc-0065

Outcome description: (1) Gap analysis conducted, stakeholder dialogue facilitated priorities identified and reflected in TDR programmes. 2) Technical support provided through Regional Offices to Member States undertaking health research priority setting.

Progress made towards outcome:

EROutc-0066

Outcome description:	1) Continuous identification of research and research capacity needs to inform strategies (HTM, WHO RO, funding agencies, countries). 2) Creation of public goods through development of tools and analysis of the health product pipeline for HIV, TB, malaria and NTDs. 3) as requested provide technical support through Regional Offices to Member States engaged with health research
Progress made towards outcome:	TDR led the WHO working group to develop normative guidance for WHO setting research priorities this has already been used by PHE in its priority agenda for communicating public health messages re COVID-19. The P2I is designated a global public good by WHO. The Health Product Profile Directory will enable an end-to-end process for health product priority setting and coordination.

Expected Result: 2.2.2

Title: Capacity strengthening to bring research evidence into policy

Strategic Work Area: Global engagement		Workstream:	
ER type:	Continuing	Funding type:	UD and DF
Start date:	01.01.2020	End date:	31.12.2021
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	EVIPNet, IDDO, stakeholders in Fleming Fund (AMR), ISARIC, COVID-19 Clinical Coalition, Ministries of Health Sierra Leone, Guinea, Liberia. cOAlition S		
Diseases:	Other		
Review mechanism:	Scientific working group		
ER manager:	Robert Fraser Terry		
Team:	Elisabetta Dessi, John Reeder, Rony Zachariah, Mohamed Khogalhiq, Rony Zachariah, Garry Aslanyan and other team members TBC		
Number of people working on projects:	100		

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance:

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:		Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Partnership with WHO and its regional offices, esp. AMR SORT IT
Roles complimentary:		
Coordination transparent:	Yes	Partnership with WHO and its regional offices, esp. AMR SORT IT
Visibility:		

Objectives and results chain

Approach to ensure uptake:	The adaptation of existing knowledge translation approaches , for example EVIPNet, to ensure policy makers, researchers and knowledge brokers are brought together and work jointly on generating the policy. Partnership with organizations with a good track
Up-take/Use Indicator:	Citation, surveys, tracking changes in funding patterns, changes in clinical intervention approaches. Impact on national policy esp. AMR SORT IT
Gender and geographic equity:	Ensure policy brief development is undertaken with gender balance as one of the elements. Use the TDR gender tool for guidance.
Publication plan:	Reports of the methodology and academic paper as appropriate; publication of policy briefs suited to the local context, language, etc.; publication on new open innovation approaches and their impact/improvement in the R&D processes evaluated; use of TDR G

Up-take/use
indicator target
date:

30.09.2021

Sustainable Development Goals

Good Health and Well-being; Clean Water and Sanitation; Partnerships to achieve the Goal

Concept and approach

Rationale:	Continuous focus on translating evidence into policy is key in demonstrating the relevance of TDR's activities. The new evidence generated by research funded by or in collaboration with TDR, needs to inform the most effective delivery of disease control tools, strategies and policies. This will engage new stakeholders in countries such as policy-makers and programme managers.
Design and methodology:	There are a large number of existing approaches to knowledge translation e.g. EVIPNet, SORT IT, WHO guidelines, work of the Alliance HPSR, Cochrane Collaboration, Norwegian Knowledge Centre, etc.; fewer established for research for implementation. Therefore needs consultation of experts and possibly a concept paper to design a 'new' approach. Methodology may need piloting in a workshop but existing approaches e.g. EVIPNet can also be utilized to ensure progress is made with what we have as new approaches emerge.
Approach to ensure quality:	Use of scientific working group and expert peer review.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$100,000	\$100,000	\$200,000	\$200,000	\$200,000	\$400,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$100,000	\$ 0	\$100,000	\$25,202	\$ 0	\$25,202

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$100,000	\$150,000	\$250,000	\$100,000	\$150,000	\$250,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$100,000	\$150,000	\$250,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0040

Research supported by TDR has relevance to country priorities as the research is used by other researchers, programme managers, communities and policy-makers to influence their behaviour, practice and policies. To achieve this requires a comprehensive knowledge management approach to ensure research is undertaken in line with best practice. The research needs to be openly disseminated and systems put in place to ensure managed sharing of data, reagents and research tools.

The appropriate ethical, technical and political challenges need to be appropriately addressed and researchers supported with training and infrastructure where necessary to encourage open innovation. Evidence must be synthesized and translated into other media to enable its communication and translation into new recommendations, guidelines and policies, which in turn must be

translated into action through research for implementation. Existing approaches, such as the EVIPNet, open access publishing and novel mechanisms to fund R&D need to be supported and applied and new approaches need to be developed.

ER Biennium Risks

2020-2021

ERRisk - 0048

Risk description:	Lack of take-up of the recommendations from reports/briefs by policy-makers and programme managers
Actions to mitigate risk:	Use of established methodology, embed knowledge management into whole process, rather than adding after research undertaken. Coordination with National Committee for AMR
Mitigation status:	On Track

ERRisk - 0100

Risk description:	Resistance to data sharing from within the research community
Actions to mitigate risk:	Take a stepwise approach; start with a closed, managed system of sharing to build trust before moving to more open approaches. Develop good governance mechanisms to ensure equitable access in line with FAIR principles
Mitigation status:	On Track

2022-2023

ERRisk - 0213

Risk description:	Resistance to data sharing from within the research community
Actions to mitigate risk:	Take a stepwise approach; start with a closed, managed system of sharing to build trust before moving to more open approaches. Develop good governance mechanisms to ensure equitable access in line with FAIR principles
Mitigation status:	Planning phase

ERRisk - 0239

Risk description:	Lack of take up of the recommendations from reports/briefs by policy makers and programme managers.
Actions to mitigate risk:	Problem endemic in clinical practice globally so the key is involving stakeholders from the beginning and identifying key, high priority areas where translation is needed and asked for by the disease endemic countries to ensure a strong pull for the work.
Mitigation status:	On Track

ERRisk - 0240

Risk description:	Inability to provide direct face-to-face training and/or workshops in country due to travel restrictions caused by security or health emergencies
Actions to mitigate risk:	Develop online training courses and expertise in delivering projects virtually including the training of WHO staff in these areas.
Mitigation status:	

ERRisk - 0238

Risk description:	Failing to develop good collaboration with EVIPNet and use their regional networks.
Actions to mitigate risk:	Involve all stakeholders from the beginning take an open minded approach so not wedded to just the EVIPNet methods.
Mitigation status:	On Track

ER Biennium Outputs

2020-2021

EROutp-0194

Output description:	Application and use of knowledge management tools to improve the dissemination and mapping of TDR supported research
Output indicator:	Use of ORCID ID, application of the TDR open access policy, number of papers in the TDR Gateway
Target date:	30.09.2021

Progress status: On Track
Progress description: 24 papers in TDR Gateway each with at least one author with ORCID ID

EROutp-0142

Output description: Data sharing: 1. support for capacity building; and 2. development of policy
Output indicator: Development and use of data sharing platform in the TDR target diseases
Target date: 30.09.2021
Progress status: Completed
Progress description: Ebola Data Platform launched and 3 of the 4 first round of applications were researchers from the Ebola affected countries.

EROutp-0090

Output description: Embed knowledge management and evidence for decision-making into the SORT IT AMR programme
Output indicator: Creation of policy briefs and uptake to change policy and decision-making
Target date: 30.09.2021
Progress status: Delayed
Progress description: Knowledge translation activities not held due to COVID-19 and restrictions on travel and redeployment of in-country staff.

EROutp-0246

Output description: Work with UNU to develop a framework of good practice in research uptake and evidence informed policy.
Output indicator: Framework developed and published.
Target date: 31.12.2020
Progress status: On Track
Progress description: Some initial planning work undertaken with UNU to undertake a survey of knowledge management practice across the UN.

2022-2023

EROutp-0290

Output description: Methodology developed and/or adapted from existing approaches to enable appropriate generation of translation mechanisms.
Output indicator: - At least 4 workshops/training events held - 2 report/publications on knowledge management methodology
Target date: 30.10.2023
Progress status: On Track
Progress description:

EROutp-0291

Output description: Deliver knowledge management and evidence for decision-making in the SORT IT programme
Output indicator: The number of policy briefs developed and degree of uptake to change policy and decision-making
Target date: 30.09.2023
Progress status: On Track
Progress description:

EROutp-0293

Output description: Data sharing: 1. support for capacity building; and 2. development of policy
Output indicator: Development and use of data sharing platforms in the TDR target diseases
Target date: 30.09.2023
Progress status: On Track
Progress description:

EROutp-0292

Output description:	LMICs lead on the development of systematic reviews, research synthesis and policy briefs on issues related to infectious diseases of poverty. Where appropriate work with existing TDR supported research.
Output indicator:	- At least 4 evidence to policy reports and briefs finalized and published
Target date:	30.09.2023
Progress status:	On Track
Progress description:	

ER Biennium Outcomes

2020-2021

EROutc-0048

Outcome description:	Knowledge management training opportunities will be provided through workshops, online materials and support for TDR researchers in the areas of: - Open innovation and new models of collaboration - Data management and sharing - Research dissemination and maximizing research uptake Support for testing new forms of open innovation, infrastructure knowledge management approaches will be evaluated for what works and why and new approaches will be developed through commissioned research. LMICs will be supported to develop research synthesis and policy briefs on issues related to infectious diseases of poverty, integrating TDR research activities (where appropriate) and convene decision makers to assess options for public health policy change. - LMICs recognize and utilize the value of research for implementation in their health systems.
Progress made towards outcome:	

2022-2023

EROutc-0068

Outcome description:	KM training opportunities will be provided through workshops, online materials and support for TDR researchers in the areas of: - Open innovation and new models of collaboration - Data management and sharing - Research dissemination and maximizing research uptake Support for testing new forms of open innovation, infrastructure knowledge management approaches will be evaluated for what works and why and new approaches will be developed through commissioned research. LMICs will be supported to develop research synthesis and policy briefs on issues related to infectious diseases of poverty, integrating TDR research activities (where appropriate) and convene decision makers to assess options for public health policy change. - LMICs recognize and utilize the value of implementation research in their health systems.
Progress made towards outcome:	

Expected Result: 2.3.1

Title: Collaborative networks and Global Health Initiatives (GHIs)

Strategic Work Area: Global engagement

Workstream:

ER type: Continuing

Funding type: DF

Start date: 01.01.2009

End date: 31.12.2023

ER status: On Track

Comment:

WHO region: Global

Partners: Major international donors and funders of research and research capacity strengthening

Diseases: Not Disease-Specific

Review mechanism: ESSENCE Steering Committee

ER manager: Garry ASLANYAN

Team: Elisabetta Dessi

Number of people working on projects: 15

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance:

TDR partnership criteria

Add value: Yes

Use resources:

Align goals: Yes

Address knowledge gaps: Yes

Integrate mandates:

Build strengths:

Reduce burden: Yes

Foster networking:

Increase visibility: Yes

TDR partnership criteria indicators

Objectives aligned: Yes

Objectives are aligned

Roles complimentary: Yes

Roles and responsibilities are complementary

Coordination transparent: Yes

Coordination is transparent

Visibility: Yes

Visibility of TDR and its partners are highlighted

Objectives and results chain

Approach to ensure uptake: All good practice documents will be field tested and consulted as part of their development. This will ensure quality of update. The update will include wide dissemination of the good practice documents among the ESSENCE agencies. In addition, reviews of

Up-take/Use Indicator: Good practice documents are used by the agencies and policies are changed

Gender and geographic equity: Gender, geographic equity and vulnerable populations are considered in the shaping and helping to shape funding agency policies through ESSENCE.

Publication plan: At least one good practice document will be published each year

Up-take/use indicator target date: 31.12.2021

Sustainable Development Goals

Good Health and Well-being; Gender Equality; Reduced Inequality; Partnerships to achieve the Goal

Concept and approach

Rationale:	The Global Engagement role of TDR and its successful implementation ensure that TDR remains the choice for the Secretariat by members of ESSENCE. There is a continuous need to influence funding agency policies and practices to support TDR's research, RCS and knowledge management priorities and activities and, in addition, to engage with new stakeholders for the same purpose. Global Engagement will not be done on an ad hoc basis; it will be preceded by careful analysis of needs and scope of such engagement. Similarly, TDR will need to continuously engage with GHIs to allow the Programme to advocate for policy influence in the areas closely linked to TDR's mandate. Having conducted a detailed analysis of the landscape in its first phase, TDR will work with relevant GHIs as a strong technical, convening and policy partner. TDR will need to continue positioning itself in the global health architecture, especially at the time of the SDG era working towards 2030 goals where there will be a need to maintain focus on research on infectious diseases of poverty in line with the increased attention to universal health coverage.
Design and methodology:	For ESSENCE, regular identification of critical issues of common interest and systematic consultation between members and stakeholders to develop good practice documents, including: (1) identification of issues requiring funding agencies' collaboration; (2) analysis and survey of various information related to the issue; (3) drafting of a good practice document; (4) organizing a consultation to test the content of the document; (5) developing a final draft and getting endorsement of the ESSENCE members; (6) launch and dissemination of the document; and (7) monitoring of update and evaluation. For GHIs: (1) interface with like-minded GHIs based on the results from the analysis; (2) gather up-to-date and clear understanding of portfolios, activities and opportunities; (3) identify joint funding priorities; (4) implement joint project(s); and (6) evaluate achievements.
Approach to ensure quality:	Documents are consulted and peer reviewed, training or other material reviewed and piloted. Meeting and consultations include external independent stakeholders, including STAC, SC and JCB

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$ 0	\$200,000	\$200,000	\$150,000	\$200,000	\$350,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$ 0	\$300,000	\$300,000	\$63,687	\$ 60	\$63,747

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$ 0	\$300,000	\$300,000	\$150,000	\$300,000	\$450,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$ 0	\$300,000	\$300,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0041

Engage funding agencies in policy dialogue in order to harmonize principles, policies, standards and practices related to research and capacity building in LMICs. Based on articulated TDR rules and the scope of Global Engagement with key global health and global health research issues to inform TDR's portfolio.

ER Biennium Risks

2020-2021

ERRisk - 0153

Risk description:	Inadequate prioritization of cost opportunities for engagement with certain GHIs
Actions to mitigate risk:	Closely following rules of engagement that will be developed
Mitigation status:	On Track

ERRisk - 0049

Risk description:	Perception that the needs of LMICs are not well represented in the decision-making process of ESSENCE
Actions to mitigate risk:	Additional efforts to engage LMICs in priority activities and dissemination
Mitigation status:	On Track

ERRisk - 0101

Risk description:	Requires intense and proactive TDR staff time and effort for the success of ESSENCE
Actions to mitigate risk:	Staff are available and time allocated
Mitigation status:	On Track

2022-2023

ERRisk - 0241

Risk description:	Perception that the needs of LMICs are not well represented in the decision-making process of ESSENCE
Actions to mitigate risk:	Additional efforts to engage LMICs in priority activities and dissemination
Mitigation status:	Planning phase

ERRisk - 0242

Risk description:	Requires intense and proactive TDR staff time and effort for the success of ESSENCE
Actions to mitigate risk:	Staff are available and time allocated
Mitigation status:	Planning phase

ERRisk - 0243

Risk description:	Inadequate prioritization of cost opportunities for engagement with certain GHIs
Actions to mitigate risk:	Closely following rules of engagement that will be developed
Mitigation status:	Planning phase

ER Biennium Outputs

2020-2021

EROutp-0195

Output description:	LMIC capacity in key areas such as research management, M&E and other will be strengthened in close collaboration with funding agencies
Output indicator:	40 LMIC researchers trained in good practice fields
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Various webinars and sessions have been organized for dissemination of good practices.

EROutp-0143

Output description:	Funding agencies will continue to engage in annual policy dialogue between each other and with LMIC institutions and pilot countries
Output indicator:	One pilot country initiates dialogue between funding agencies and researchers/research institutions
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Annual interaction continued. A mechanism, called ESSENCE Mechanism to review investments of funding agencies in research capacity strengthening has been established.

EROutp-0091

Output description:	2 tools and reports have been used to inform policy and/or practice of global/regional stakeholders or major funding agencies
Output indicator:	Two harmonized principles, policies, practices introduced and adapted by funding agencies and LMIC researchers/research institutions
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Two documents, focused on implementation research and research costing have been completed. There is a dissemination plan for each in place.

EROutp-0247

Output description:	Case examples of TDR's research, RCS and KM activities benefit and are shaped by global health research and global health agenda.
Output indicator:	TDR activities use ESSENCE documents as reference
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Implementation research good practice document is used by TDR in its IR projects.

2022-2023**EROutp-0296**

Output description:	LMIC capacity in key areas such as research management, M&E and other will be strengthened in close collaboration with funding agencies
Output indicator:	40 LMIC researchers trained in good practice fields
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Various webinars and sessions have been organized for dissemination of good practices.

EROutp-0297

Output description:	Case examples of TDR's research, RCS and KM activities benefit and are shaped by global health research and global health agenda.
Output indicator:	TDR activities use ESSENCE documents as reference
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Implementation research good practice document is used by TDR in its IR projects.

EROutp-0294

Output description:	2 tools and reports have been used to inform policy and/or practice of global/regional stakeholders or major funding agencies
Output indicator:	Two harmonized principles, policies, practices introduced and adapted by funding agencies and LMIC researchers/research institutions
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Two documents, focused on implementation research and research costing have been completed. There is a dissemination plan for each in place.

EROutp-0295

Output description:	Funding agencies will continue to engage in annual policy dialogue between each other and with LMIC institutions and pilot countries
Output indicator:	One pilot country initiates dialogue between funding agencies and researchers/research institutions
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Annual interaction continued. A mechanism, called ESSENCE Mechanism to review investments of funding agencies in research capacity strengthening has been established.

2020-2021

EROutc-0049

Outcome description:	Funding principles, policies, standards and guidance documents are agreed and implemented by partners. TDR is partnering engaging with key GHIs and is seen as a key player in global health agenda.
Progress made towards outcome:	ESSENCE good practice documents are frequently referenced by many agencies in their planning processes. The work done by the ESSENCE Mechanism on review of investments by funding agencies allows for adjustments of funding for specific programmes which are now more aligned.

2022-2023

EROutc-0069

Outcome description:	Funding principles, policies, standards and guidance documents are agreed and implemented by partners. TDR is partnering engaging with key GHIs and is seen as a key player in global health agenda.
Progress made towards outcome:	

Expected Result: 2.3.3

Title: TDR Global - the community of former trainees, grantees and experts

Strategic Work Area: Global engagement		Workstream:	
ER type:	Continuing	Funding type:	UD
Start date:	01.01.2020	End date:	31.12.2023
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	RTCs, universities in TDR's 7-University scheme		
Diseases:	Not Disease-Specific		
Review mechanism:	Ad hoc external advisory group consisting of former TDR grantees, trainees and experts, meeting annually face-to-face and via teleconference twice a year; consulting via email several times a year		
ER manager:	Mihai MIHUT		
Team:	Beatrice Halpaap, Elisabetta Dessi, Mary Maier, Pascal Launois, Mariam Otmani, Edward Kamau		
Number of people working on projects:	6		

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance:

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:		Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	TDR objectives are the ones served through TDR Global activities. Partners' objectives are facilitated by working with TDR Global.
Roles complimentary:	Yes	Local nodes provide expertise and direct contact with people in the field, and they take over significant workload from TDR staff
Coordination transparent:	Yes	TDR coordination of overall activities, and regional coordination of local activities
Visibility:		

Objectives and results chain

Approach to ensure uptake:	The main challenge, identified since the design phase of TDR Global, has remained community engagement and uptake by users. In the previous biennium we tested over ten different tools for engagement, and we will utilize those that are most adapted to the
Up-take/Use Indicator:	Champions from TDR Global community engaging other users on topics of interest and creating new collaborations
Gender and geographic equity:	The advisory group is made up in equal proportion of women and men. One of the main topics for engagement is gender equity, and helping women researchers in their careers. TDR Global encourages South-South and North-South collaboration, mentorship and knowledge sharing.

Publication plan:	Publication on the effectiveness of various community engagement tools used to engage former grantees, trainees and experts; publication on the mapping of collaborations between institutions
Up-take/use indicator target date:	31.12.2021

Sustainable Development Goals

Good Health and Well-being; Partnerships to achieve the Goal

Concept and approach

Rationale:	Over its 45 year history, TDR has built and supported a vast pool of human resources to address infectious diseases of poverty through research and training. This is the 'TDR Global' community. The goal of the TDR Global initiative is to harness this global community in engendering new and expanded collaborations for research and training on infectious diseases of poverty.
Design and methodology:	TDR Global is mapping the expertise of its members, who are recipients of TDR training or research grants as well as worldwide experts who have served on TDR committees. The first phase involved the development of a web-based platform and the piloting of several different engagement tools (TDR Talks, webinars, email, LinkedIn group discussions, problem-solving workshops, crowdsourcing tool, internship, thematic mobilizations, country-focused mobilizations, TDR Global ambassadors, etc.), that will be refined and adapted for engaging community members into new collaborations, e.g. to create mentorship programmes, identify expert reviewers, engage in online consultations or discussions on key thematic areas, and catalyse potential research partnerships across the globe.
Approach to ensure quality:	An external advisory group is reviewing the plans, the activities and the implementation of the TDR Global project.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$300,000	\$ 0	\$300,000	\$500,000	\$ 0	\$500,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$300,000	\$ 0	\$300,000	\$62,716	\$ 0	\$62,716

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$300,000	\$ 0	\$300,000	\$500,000		\$500,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$300,000	\$ 0	\$300,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0042

1. Tracking the careers of current and former grantees, trainees and expert advisers

ERObj-0043

2. Map specific expertise

ERObj-0044

3. Enhance collaborations, including current and former grantees, trainees and expert advisers

ER Biennium Risks

2020-2021

ERRisk - 0154

Risk description:	A drop in TDR's income may affect the ability to maintain the platform as developed
Actions to mitigate risk:	Develop a clear budget with scenarios and contingency plans; Explore designated funding options to sustain the system
Mitigation status:	On Track

ERRisk - 0050

Risk description:	TDR community does not populate their data into TDR Global which may impact the ability: i) to assess the impact of TDR's grants on their careers; and ii) of platform users to find specific expertise and establish collaborations
Actions to mitigate risk:	Login and registration in the system are now mandatory for new TDR direct grantees / trainees; focus on regional support to steer TDR Global members to complete their profile as part of community engagement exercises, country-based mobilizations, etc.
Mitigation status:	On Track

ERRisk - 0102

Risk description:	A platform requiring extensive human resources may affect its sustainability
Actions to mitigate risk:	Identify resources that can work on this project in an efficient manner (e.g. RTCs, universities, other)
Mitigation status:	On Track

ERRisk - 0206

Risk description:	Decentralizing TDR Global to regional training centres may affect its sustainability and quality
Actions to mitigate risk:	TDR Global is included in the RTCs sustainability plan and performance assessment framework
Mitigation status:	On Track

2022-2023

ERRisk - 0246

Risk description:	TDR community does not populate their data into TDR Global which may impact the ability: i) to assess the impact of TDR's grants on their careers; and ii) of platform users to find specific expertise and establish collaborations
Actions to mitigate risk:	Login and registration in the system are now mandatory for new TDR direct grantees / trainees; focus on regional support to steer TDR Global members to complete their profile as part of community engagement exercises, country-based mobilizations, etc.
Mitigation status:	Planning phase

ERRisk - 0249

Risk description:	Decentralizing TDR Global to regional training centres may affect its sustainability and quality
Actions to mitigate risk:	TDR Global is included in the RTCs sustainability plan and performance assessment framework
Mitigation status:	Planning phase

ERRisk - 0247

Risk description:	A platform requiring extensive human resources may affect its sustainability
Actions to mitigate risk:	Identify resources that can work on this project in an efficient manner (e.g. RTCs, universities, other)
Mitigation status:	Planning phase

ERRisk - 0248

Risk description:	A drop in TDR's income may affect the ability to maintain the platform as developed
Actions to mitigate risk:	Develop a clear budget with scenarios and contingency plans; Explore designated funding options to sustain the system
Mitigation status:	Planning phase

ER Biennium Outputs**2020-2021****EROutp-0196**

Output description:	Surveys / crowdsourcing that gather and prioritize ideas from trainees, grantees and experts to support mentorship and themes of interest for the community
Output indicator:	Surveys / crowdsourcing tools collect ideas and prioritize them for action by the TDR Global community
Target date:	31.12.2021
Progress status:	Delayed
Progress description:	Activities are mostly on track, however, meetings had to be postponed due to the impact on Covid19, both on engaging TDR Global members in combating Covid19, and also due to travel restrictions. Online activities were not impacted.

EROutp-0144

Output description:	Community engagement activities are implemented in line with the Community Engagement Strategy, using effective tools piloted in 2017-2019.
Output indicator:	Thematic mobilization activities as well as region or country-based mobilization activities that engage the TDR Global community are taking place and communities of interest are created at grassroots level
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Mentorship activities are ongoing and crowdsourcing allowed to collect a great wealth of ideas that could be tested regionally and scaled up is successful.

EROutp-0092

Output description:	A user-friendly, online platform that hosts the profiles of current and former grantees, trainees and expert advisers of TDR, as well as communications platforms. A new, Analytics module will be rolled out in Elements, making data analysis quick and easy,
Output indicator:	Analytics module in Elements and Discovery module implemented
Target date:	31.12.2020
Progress status:	On Track
Progress description:	Discovery module has been rolled out and is now the public face of TDR Global database. Made it much more user friendly, easier to find experts and collaborations and filter by region, nationality and availability. Analytics remains to be discussed in 2021.

EROutp-0248

Output description:	Enhanced efficiency and effectiveness via increased regional focus and support of TDR Global activities, by involving institutions from regions and working in synergy with existing project-based activities.
Output indicator:	Being able to do more activities with the same resources as compared to the previous biennium
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Regionalization of activities is ongoing, and great contributions from focal points in Africa, Asia and Latin-America brought value to TDR Global activities. Country nodes in Ethiopia and the USA held activities and a new country node in Benin is being initiated.

2022-2023

EROutp-0300

Output description: A user-friendly, online platform that hosts the profiles of current and former grantees, trainees and expert advisers

Output indicator: Analytics module in Elements and Discovery module implemented

Target date: 31.12.2020

Progress status:

Progress description:

EROutp-0301

Output description: Community engagement activities are implemented in line with the Community Engagement Strategy, using effective tools piloted in 2017-2019.

Output indicator: Thematic mobilization activities as well as region or country-based mobilization activities that engage the TDR Global community are taking place and communities of interest are created at grassroots level

Target date: 31.12.2021

Progress status:

Progress description:

EROutp-0303

Output description: Enhanced efficiency and effectiveness via increased regional focus and support of TDR Global activities, by involving institutions from regions and working in synergy with existing project-based activities.

Output indicator: Being able to do more activities with the same resources as compared to the previous biennium

Target date: 31.12.2021

Progress status:

Progress description:

EROutp-0302

Output description: Surveys / crowdsourcing that gather and prioritize ideas from trainees, grantees and experts to support mentorship and themes of interest for the community

Output indicator: Surveys / crowdsourcing tools collect ideas and prioritize them for action by the TDR Global community

Target date: 31.12.2021

Progress status:

Progress description:

ER Biennium Outcomes

2020-2021

EROutc-0050

Outcome description: 1. The impact of TDR grants on the careers of its grantees, trainees and expert advisers can be adequately assessed 2. Identifying desired capacity in a field and a geographical region is facilitated 3. New collaborations, networks and partnerships that include former or current TDR grantees, trainees and expert advisers are created

Progress made towards outcome:

2022-2023

EROutc-0071

Outcome description: 1. The impact of TDR grants on the careers of its grantees, trainees and expert advisers can be adequately assessed

Progress made
towards outcome:

EROutc-0073

Outcome description: 3. New collaborations, networks and partnerships that include former or current TDR grantees, trainees and expert advisors are created

Progress made
towards outcome:

EROutc-0072

Outcome description: 2. Identifying desired capacity in a field and a geographical region is facilitated

Progress made
towards outcome:

Expected Result: 2.3.4

Title: Effective incorporation of intersectional gender analysis in research and training on infectious diseases

Strategic Work Area: Global engagement

Workstream:

ER type: New

Funding type:

Start date: 01.01.2020

End date: 31.12.2021

ER status:

Comment:

WHO region:

Partners: TDR Co-sponsors, HRP, WHO gender team, RTCS?

Diseases:

Review mechanism: Scientific working groups and ad hoc review committees

ER manager: Mariam OTMANI DEL BARRIO

Team: Mariam Otmani

Number of people working on projects:

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance:

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	see table above
Roles complimentary:	A booklet for the role and responsibilities of each partner developed .
Coordination transparent:	Common decision making process developed
Visibility:	Done

Objectives and results chain

Approach to ensure uptake:	Engagement with University senior management, research teams (with at least 50% of women researchers), engagement with Ministries and public health services.
Up-take/Use Indicator:	Engagement with universities, RTCs, ministries of health, finance and education
Gender and geographic equity:	Gender parity will be ensured when establishing external review panels, convening meetings of experts, issuing contracts, and in general within all our collaborations.
Publication plan:	Intersectional gender analysis toolkit published, disseminated and used for further engagement with various stakeholders
Up-take/use indicator target date:	30.11.2021

Concept and approach

Rationale:	Great progress has been made towards combatting infectious diseases of poverty. However, considerable public health challenges remain, including gender and intersecting inequalities that affect health conditions associated with infectious diseases. ER 2.3.4 draws on ER 1.3.12 and builds synergies with it to focus on gender intersecting inequalities that influence differentials in vulnerability to, and the impact of, particular health conditions associated with infectious diseases in low- and middle-income countries. This expected result recognizes that gender norms, roles and relations influence people's susceptibility to different health conditions and they also have a bearing on people's access to and uptake of health services, and on the health outcomes they experience throughout the life-course. It also acknowledges that WHO has recently recognized that it is important to be sensitive to different identities that do not necessarily fit into binary male or female sex categories. In this context, delivery and access to prevention and control approaches and products to prevent and control infectious diseases should not be one-size-fits all but instead should benefit from approaches that take into account the complex interaction of several social stratifiers, and their influence in health outcomes. There is growing recognition that gender roles, gender identity, gender relations, apart from institutionalized gender inequality influence the way in which an implementation strategy works (e.g. for whom, how and why). There is also emerging evidence that programmes may operate differently within and across sexes, gender identities and other intersectional characteristics under different circumstances and contexts. Research should inform implementation strategies to avoid ignoring gender-related dynamics that influence if and how an implementation strategy works. Therefore scientists, including those focusing on research for implementation, would benefit from adequately considering sex and gender intersecting social dimensions within their research programmes, by strengthening both the practice and science of implementation, and by contributing to improved health outcomes and reduction of gender and health inequalities.
Design and methodology:	1. Implementation of this ER will draw on a pilot tested toolkit on intersectional gender analysis in research on infectious diseases of poverty. 2. Methodologies and gender analysis frameworks will be detailed and explained within the afore-mentioned toolkit and presented in a practical "hands-on" toolkit for researchers to incorporate a gender analysis with an intersectional lens, throughout the whole research process, from research study design up to the dissemination of research findings stage.
Approach to ensure quality:	Oversight by expert committee and quality assurance through fact checking, peer review of documentation, technical and copy editing

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$100,000	\$ 0	\$100,000	\$200,000	\$ 0	\$200,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$200,000	\$ 0	\$200,000	\$104,291	\$ 0	\$104,291
2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$100,000	\$100,000	\$200,000	\$250,000	\$100,000	\$350,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$100,000	\$100,000	\$200,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0045

Design and improve engagement strategies to promote gender-responsive health interventions

ERObj-0046

Foster and contribute to gender-responsive research for implementation, evidence, policy and practice

ERObj-0047

Build and strengthen research capacities on gender-based analysis in research on infectious diseases of poverty.

ER Biennium Risks

2020-2021

ERRisk - 0051

Risk description:	Knowledge translation outcomes on gender equality are usually beyond the control or influence of projects
Actions to mitigate risk:	For this programme stakeholders, including those from the affected communities, research teams and policy/decision-makers, will be engaged from the beginning and during the course and completion of the projects to ensure their active involvement, with the expectation that the results will be utilized as effectively as possible
Mitigation status:	On Track

2022-2023

n/a

ER Biennium Outputs

2020-2021

EROutp-0197

Output description:	To ensure gender responsive research capacity strengthening efforts by engaging with RTCs, stakeholder universities and other research partners
Output indicator:	Gender and intersectionality mainstreamed in Massive Open Online Course (MOOC) on IIR. Designed ToT/curricula on intersectional gender analysis in research for implementation training offered at postgraduate programmes in schools of public health across T
Target date:	30.12.2021
Progress status:	On Track
Progress description:	MOOC module on gender and intersectionality being developed in collaboration with UNU and the RCS unit at TDR.

EROutp-0145

Output description:	Ensured technical and research support for gender responsive interventions in research for implementation projects and programmes
Output indicator:	Gender analysis included in TDR research programmes outputs (e.g. gender-responsive evidence generated by research team from SIT-Wolbachia project). Disseminated intersectional gender analysis toolkit on research on infectious diseases across research par
Target date:	31.10.2020
Progress status:	On Track

Progress description: Gender analysis increasingly being considered as an important part of research activities, it is something that cannot happen retroactively and so it is something progressively being considered across TDR activities. Ensured Technical support and developed TDR's Toolkit to incorporate intersectional gender analysis into infectious disease research.

EROutp-0093

Output description: Implemented TDR Strategy on gender and intersectionality across TDR projects and programmes

Output indicator: TDR Strategy on gender and intersectionality launched and disseminated across regions and through RTCs; Number of recommendations from TDR expert group meetings on intersectional gender research implemented, including engaging the broad research community

Target date: 30.11.2021

Progress status: On Track

Progress description: Strategy launched in June 2020 and being disseminated across WHO regions and partners.

EROutp-0249

Output description: New knowledge and evidence generated on the intersection of sex and gender with other social stratifiers to address power relations, social exclusion, marginalization and disadvantage in access the health services and health impacts from infectious diseases

Output indicator: research studies implemented and evidence generated to inform policy and practice and used to engage with TDR stakeholders including research institutions, funders and public health practitioners.

Target date: 30.12.2021

Progress status: On Track

Progress description: Research studies ongoing in Uganda and Nepal and in addition, TDR has launched in 2020 a research call to invite institutions to submit proposals from single or multiple contexts that span the translational research spectrum and are of any methodological underpinning. Teams should address gender, sex, and their intersections with associated inequities in infectious diseases.

2022-2023

n/a

ER Biennium Outcomes

2020-2021

EROutc-0051

Outcome description: Gender-responsiveness mainstreamed in TDR research programmes, research for implementation projects and research capacity strengthening efforts

Progress made towards outcome: In 2020 TDR is developing in collaboration with the United Nations University - International Institute for Global Health, an Implementation Research (IR) MOOC module on Gender and Intersectionality. This module, to be completed in 2021, emphasizes that addressing sex, gender and intersecting axes of inequality is important across the entire research process from agenda-setting through communication, stakeholder engagement and decisions for the uptake and implementation of effective interventions. TDR and UNDP in collaboration with The Liverpool School of Tropical Medicine, under the umbrella of the Access and Delivery Partnership (ADP) project, developed a discussion paper on The Gender Dimensions of Tropical Diseases, which was also launched during the ASTMH Conference in November 2019, followed by a webinar to raise awareness during World NTD Day in January 2020. The discussion paper is accessible in the following link: <https://www.who.int/tdr/diseases-topics/gender/en/>

2022-2023

n/a

Expected Result: 2.3.5

Title: Community Engagement and Ethics

Strategic Work Area: Global engagement

Workstream:

ER type: New

Funding type: UD

Start date: 01.01.2022

End date: 31.12.2023

ER status:

Comment: Planning phase

WHO region: Global

Partners: SIDCER, PABIN, FERCAP, EDCTP

Diseases:

Review mechanism: Community engagement external working group, Global Engagement SWG review mechanism

ER manager: Mihai MIHUT

Team: Abraham Aseffa, Elisabetta Dessi, Michael Mihut

Number of people working on projects: 4

FENSA clearance obtained for all Non-State Actors? No

Justification for no FENSA clearance:

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:

Roles complimentary:

Coordination
transparent:

Visibility:

Objectives and results chain

Approach to ensure uptake:	We engage with country institutions to share good practices on ethics and community engagement in research, and to test, apply and scale up best practice methods. We support ERCs and IRBs to join networks that foster knowledge sharing, continuous learning
Up-take/Use Indicator:	Number of institutions in countries that show improved capacity for ethics oversight, and they have access to a pool of experts for technical support
Gender and geographic equity:	Our focus is on institutions and researchers from Low- and middle-income countries. The initial activities will focus on Africa and on building collaborations with Asian networks. If the higher scenario materializes, we will support such activities in Latin-America.
Publication plan:	Lessons learnt and good practices will be promoted via 1-2 publications and online seminars.

Sustainable Development Goals

Good Health and Well-being; Partnerships to achieve the Goal

Concept and approach

Rationale: This is an expected result aimed to further develop ethics oversight and community engagement for research. It links with the WHO ethics unit, with IMP and RCS to leverage and add value and use existing networks and institutions to bring institutions up to international standards. As a global health research initiative, TDR continues to ensure the quality of research and human research subject protection, as well as the aspect of sustainably linking the capacity built in countries to a larger expert network. The quality of human subject research depends very much on the quality of the ethics review within the local research institutions. Expanding TDR's engagement in developing the capacity of Ethical Review Committees in low and middle-income countries is needed. SIDCER was initiated within TDR in 2000 and has successfully established as an independent foundation in Asia with its priority in globalizing ethics in research. TDR can leverage from the SIDCER activities that relate to knowledge transfer/mentorship facilitation in the field of research ethics and harmonization of ethics practices and accreditation systems in low and middle-income countries. A pilot project has been carried out early this year by the TDR's global network with 5 African countries that participated in the SIDCER recognition program activities in Addis Ababa, and was successful in building awareness on the importance of ethical review quality in health research. A survey of the ERCs in Africa and Asia to identify gaps and challenges (and potential solutions) due to the Covid19 pandemic is being rolled out through SIDCER and PABIN in Asia and Africa, and is used to prime the collaboration with the regional networks that work in the field of research ethics.

Design and methodology: A mapping exercise will be carried out to obtain a picture of existing initiatives on ethics in Africa and across WHO; this will assess key dilemmas and challenges, successes and failures and will identify existing gaps. In parallel, we will conduct training and network support activities that engage national and local ERCs/IRBs, and regional networks, such as: Institution audits/visits (called "surveys") with three roles: strengthening the institution, learning lessons that can then be shared with other institutions, and training the auditors (surveyors) on the job. Organizing policy dialogues and panels, recorded for dissemination to the network Writing policy briefs to help countries improve their ethics oversight system Training courses online for members of ERCs and IRBs, and for surveyors through TDR's MOOC, also using SIDCER materials It is expected to develop capacity for managing health research through, accreditation systems; train-the-trainers opportunities; and enhancing partnership and collaboration between ethics networks (PABIN - Africa, SIDCER, FERCAP- Asia), ERCs, and creating a pool of TDR Global members capable to volunteer for review or ethics advisory roles. Additional funds (higher budget scenario) will allow engaging with the Latin-American network while adding one more policy dialogue/panel debate, one more policy brief and publication, and fund 3-4 more surveys. Also, they will allow supporting the work of regional networks.

Approach to ensure quality:

Biennium budgets

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$100,000		\$100,000	\$220,000		\$220,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$100,000		\$100,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj- 0053

Test novel, effective solutions for local community engagement in research for implementation, and disseminate the new knowledge

ERObj- 0052

Advance the research ethics capacity in countries and create a community of trained experts that can support institutional needs

ER Biennium Risks

2020-2021

n/a

2022-2023

ERRisk - 0251

Risk description:	Duplication of efforts with other stakeholders
Actions to mitigate risk:	Consultation and harmonization of efforts with WHO ethics unit and existing networks to use TDR strengths on underserved gaps/niche.
Mitigation status:	Planning phase

ERRisk - 0250

Risk description:	Potential slow engagement with some countries due to Covid19 impact on health systems resources
Actions to mitigate risk:	Using existing networks and infrastructures to reach out; planning longer timeframe for activities
Mitigation status:	Planning phase

ER Biennium Outputs

2020-2021

n/a

2022-2023

EROutp-0307

Output description:	Policy dialogues, debates and panels
Output indicator:	1 policy panel debate (2 in high budget scenario)
Target date:	31.12.2023
Progress status:	
Progress description:	Planning phase

EROutp-0309

Output description:	Support for network secretariat
Output indicator:	Secretariat capacity strengthened in 1 network (2 in higher budget scenario)
Target date:	31.12.2023
Progress status:	
Progress description:	Planning phase

EROutp-0305

Output description:	Mapping of research ethics initiatives in Africa, identifying successes, lessons learnt and existing gaps
Output indicator:	Report approved
Target date:	31.07.2022
Progress status:	
Progress description:	Planning phase

EROutp-0308

Output description: Policy briefs and papers on key issues
Output indicator: 1 policy brief (2 in higher budget scenario)
Target date: 31.12.2023
Progress status:
Progress description: Planning phase

EROutp-0306

Output description: Institutional audits (surveys) to strengthen local capacity and collect lessons learned
Output indicator: Two survey conducted (five in higher budget scenario)
Target date: 31.12.2023
Progress status:
Progress description: Planning phase

ER Biennium Outcomes

2020-2021

n/a

2022-2023

EROutc-0076

Outcome description: Strengthened regional networks in Africa (and Latin-America - higher budget scenario)
Progress made
towards outcome:

EROutc-0075

Outcome description: Trained experts mentor, collaborate and volunteer to advance the research ethics in their country and region
Progress made
towards outcome:

EROutc-0074

Outcome description: Institutions in countries show improved capacity for ethics oversight, and they have access to a pool of experts for technical support
Progress made
towards outcome:

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Research for implementation

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Expected Result: 1.1.1

Title: Country preparedness for disease outbreaks

Strategic Work Area: Research for implementation		Workstream: Research for implementation	
ER type:	Evolved	Funding type:	UD
Start date:	01.01.2013	End date:	31.12.2022
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	Endemic country programmes and researchers, WHO regional offices		
Diseases:	Arboviral diseases; Arboviruses; Chikungunya; Dengue; Vector-borne diseases		
Review mechanism:	Scientific working group + other ad hoc or collaboration-based review systems as appropriate		
ER manager:	Corinne Simone Collette MERLE		
Team:	Michelle Villasol, others TBD		
Number of people working on projects:	2		

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: Obtained when applicable

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Objectives aligned
Roles complimentary:	Yes	Complementary role and responsibilities
Coordination transparent:	Yes	Transparent coordination
Visibility:	Yes	Visibility of TDR highlighted

Objectives and results chain

Approach to ensure uptake:	National control programmes and WHO (HQ, ROs) fully involved in research planning, implementation and analysis
Up-take/Use Indicator:	TDR outputs considered among evidence informing guidelines and policy decisions or control programme advisory committee recommendations
Gender and geographic equity:	Gender specific Zika issues as they relate to outbreak surveillance and response will be taken into account during research design. All affected regions will be considered.
Publication plan:	Scientific meetings, Open access journals, TDR website
Up-take/use indicator target date:	31.12.2023

Sustainable Development Goals

Good Health and Well-being; Reduced Inequality; Partnerships to achieve the Goal

Concept and approach

Rationale:	1. Dengue and Zika outbreaks have shown the importance of coping capacity (surge capacity) and case management under disease outbreak conditions. Availability of training materials based on lessons learnt in past outbreaks will facilitate and accelerate adequate managerial response during the next epidemic. 2. Chikungunya and Zika virus outbreak surveillance and response tools are needed. TDR is in a unique position to lead this because of its prior experience and track record with research for Dengue. 3. In response to a request from Burkina Faso, TDR organized a regional meeting in West Africa to map the issues, knowledge and capacity gaps for vector control, surveillance and outbreak response, and design a plan to build capacity in the region through OR/IR generated evidence-based interventions. There is a need now for an action plan at regional level that synergizes the efforts of all key stakeholders.
Design and methodology:	- EWARS training in relevant countries - Consensual discussion with West African countries and key stakeholders
Approach to ensure quality:	Scientific working group and, as applicable, other expert review of proposals, progress reports, monitoring of application of the research protocol.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$150,000	\$ 0	\$150,000	\$200,000	\$ 0	\$200,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$150,000	\$ 0	\$150,000	\$60,444	\$ 0	\$60,444

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$150,000	\$ 0	\$150,000	\$200,000	\$ 0	\$200,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$150,000	\$ 0	\$150,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0000

To enable countries to improve their response capacity to arboviruses outbreaks and other diseases outbreaks

ER Biennium Risks

2020-2021

ERRisk - 0026

Risk description:	Lack of interest outside epidemic peaks resulting in insufficient funding
Actions to mitigate risk:	Raise awareness of potential donors; explore alternative ways of supporting work
Mitigation status:	On Track

2022-2023

ERRisk - 0222

Risk description:	Lack of interest outside epidemic peaks resulting in insufficient funding
Actions to mitigate risk:	Raise awareness of potential donors; explore alternative ways of supporting work
Mitigation status:	

ER Biennium Outputs

2020-2021

EROutp-0120

Output description:	Regional plan to improve arbovirus disease surveillance and vector control in West Africa
Output indicator:	Agreement on the regional plan
Target date:	31.12.2021
Progress status:	On Track
Progress description:	collaboration with the West African Health Organisation for developing the plan and implementing activities. the strengthening of the entomological surveillance system was identified as a key priority for 7 countries of the region

EROutp-0068

Output description:	Expanded countries' capacities to use EWARS tool
Output indicator:	Number of countries using EWARS tool
Target date:	31.12.2020
Progress status:	On Track
Progress description:	Collaboration with the Climate Change and Health Programme at WHO (PEH) for the use of EWARS in countries of the SEARO and AFRO region

2022-2023

EROutp-0281

Output description:	Expanded countries' capacities to use EWARS tool
Output indicator:	Number of countries using EWARS tool
Target date:	31.12.2023
Progress status:	
Progress description:	

EROutp-0280

Output description:	Strengthened capacities of West african countries in terms of disease outbreaks reponse
Output indicator:	situation analysis report
Target date:	31.12.2023
Progress status:	
Progress description:	

ER Biennium Outcomes

2020-2021

EROutc-0026

Outcome description:	Country preparedness and policy decisions for arbovirus outbreaks informed or facilitated by TDR outputs
Progress made towards outcome:	

2022-2023

EROutc-0062

Outcome description:	Country preparedness and policy decisions for arbovirus outbreaks informed or facilitated by TDR outputs
Progress made towards outcome:	

Expected Result: 1.1.4

Title: Country resilience to the threat of drug-resistant infections

Strategic Work Area: Research for implementation		Workstream: Research for implementation	
ER type:	Continuing	Funding type:	DF
Start date:	01.01.2018	End date:	31.12.2023
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	WHO country offices, National AMR committees, various implementing partners including NGOs, research and academic institutions, relevant MoH departments/programmes, hospitals/clinics in selected countries. Fleming Fund and NIHR (funder)		
Diseases:	Not Disease-Specific		
Review mechanism:	Scientific working group + other adhoc or collaboration-based review systems as appropriate		
ER manager:	Rony ZACHARIAH		
Team:	Abraham Aseffa, Ekua Johnson, Ramiriez Bernaddette, Annette Kuesel, Mohammed Khogali, Michelle Villasol, Maier Mary, Abdul Masoudi, Mariam Otmani del Barrio, Kamau Eddy, Terry Robert, Zachariah Rony		
Number of people working on projects:	14		

FENSA clearance obtained for all Non-State Actors? No

Justification for no FENSA clearance: Obtained when applicable

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Aligned
Roles complimentary:	Yes	WHO country offices and SORT IT partners leverage their local convening power and allow use of their trained and experienced human resources for implementation
Coordination transparent:	Yes	All research subjects and participants are endorsed by national AMR selection committees, Phone calls each month with partners, all reports shared widely. SORT IT selection criteria and SOPs established.
Visibility:	Yes	The TDR website is updated every quarter and all reports and training documents include the required Logos.

Objectives and results chain

Approach to ensure uptake:	Early engagement with those expected to use the results, regular updates to stake holders and relevant programmes and active involvement of relevant stakeholders in planning, implementation, consultations, policy and issue briefs
Up-take/Use Indicator:	New or updated/improved guidelines , policies, implementation plans and/or practice (as applicable) informed by TDR outputs

Gender and geographic equity: Beneficiaries: Drug resistance affects both sexes alike. Geographic equity will be dependent on the disease addressed and the target countries which currently include selected countries in Africa, Asia and Latin America. Calls for proposals will include the information that TDR is encouraging women scientists to apply. Selections will consider gender equity. FOR DF: Collaborators will be those participating in the preparation and submission of the proposal funded by third parties - if applicable.

Publication plan: Scientific meetings, Open access journals, TDR website, TDR-gateway, Partner websites, published annual reports

Up-take/use indicator target date: 31.12.2025

Sustainable Development Goals

Good Health and Well-being; Quality Education; Gender Equality; Clean Water and Sanitation; Industry, Innovation and Infrastructure; Responsible Consumption and Production; Life Below Water; Life on Land; Partnerships to achieve the Goal

Concept and approach

Rationale: AMR is a global public health challenge that makes standard treatments ineffective and allows infections to persist and spread. To implement effective plans for containment of /response to emerging drug resistance, countries need support for:

1. Building sustainable local capacity to conduct operational research and for using programme data
2. Improving understanding of AMR along the strategic pillars : a) Strengthen surveillance, monitoring and reporting b) Reduce incidence of infection (health facilities, community, animal health) c) Optimize use of anti-microbials (human, veterinary, agriculture) d) Sustainable investments in new diagnostics and measuring burden
3. Building sustainable structures and processes for evidence-informed decision-making and knowledge management to maximize broader research impact.

Design and methodology: The approach involves early and multi-disciplinary involvement with those expected to use the results as appropriate and includes the proven SORT IT approach to generating evidence for informed decision making.

Approach to ensure quality: Selection of countries, partners and trainees will be guided by specific selection criteria, projects will be followed up and monitored; selection of investigators will involve specific eligibility criteria including appropriate expertise through review of their proposals by experienced technical committees complemented by external subject matter experts, and with specific training activities, as applicable. The SORT IT approach has its own quality and performance standards which are monitored on a quarterly basis.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$ 0	\$3,500,000	\$3,500,000	\$370,000	\$4,600,000	\$4,970,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$ 0	\$4,500,000	\$4,500,000	\$ 0	\$1,417,669	\$1,417,669

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$200,000	\$3,400,000	\$3,600,000	\$400,000	\$4,500,000	\$4,900,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$200,000	\$3,400,000	\$3,600,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0001

Support countries in developing workable approaches to implementation of effective strategies for detecting and containing drug resistant infections.

ERObj-0002

Build sustainable capacity to conduct operational research using "one health" data and use the generated knowledge for informed-decision making to improve public health

ER Biennium Risks

2020-2021

ERRisk - 0027

Risk description:	Lack of continued engagement from WHO country offices and AMR national committees
Actions to mitigate risk:	Continue close collaboration with WHO country offices, AMR committees and implementers throughout the project cycle. Provide additional financial, human resources and implementation support to WHO Country offices and AMR committees
Mitigation status:	On Track

ERRisk - 0224

Risk description:	Delays in the pace of implementation due to COVID-19 related restrictions o travel and gatherings
Actions to mitigate risk:	Several activities have been rescheduled, alternatives including use of virtual platforms for training are being explored and discussions are underway with the donors for a No cost extension.
Mitigation status:	Planning phase

2022-2023

ERRisk - 0227

Risk description:	Lack of continued engagement from WHO country offices and AMR national committees
Actions to mitigate risk:	Continue close collaboration with WHO country offices, AMR committees and implementers throughout the project cycle. Provide additional financial, human resources and implementation support to WHO Country offices and AMR committees
Mitigation status:	

ER Biennium Outputs

2020-2021

EROutp-0173

Output description:	(Subject to funds availability - US\$ 50 million budget scenario) - Evaluation of biomarker to guide management of fever at field level
Output indicator:	Evidence on potential of at least one biomarker generated
Target date:	31.12.2023
Progress status:	On Hold
Progress description:	No dedicated funds available

EROutp-0121

Output description:	Documentation of practical approaches to improve targeted treatment and reduce drug misuse and risk of resistance development and spread
Output indicator:	Reports/publications made available
Target date:	31.12.2023
Progress status:	On Track

Progress description: Research studies in this regard are under implementation

EROutp-0069

Output description: OR/IR strategies for countries to build effective systems for monitoring and responding to emerging drug resistance of all relevant infectious agents

Output indicator: Strategies endorsed by stakeholders at relevant levels

Target date: 31.12.2023

Progress status: On Track

Progress description: 36 country relevant AMR projects underway in 5 countries (Ghana, Myanmar, Nepal, Sierra Leone and Uganda), 24 more endorsed by country AMR committees (Myanmar and Sierra Leone).

EROutp-0225

Output description: Strategies for monitoring and responding to potential emergence of drug resistance

Output indicator: Report to scientific working group (and DF agency, as applicable)

Target date: 31.12.2023

Progress status: On Track

Progress description: Studies to inform strategies underway in target countries

2022-2023

EROutp-0273

Output description: Strategies for monitoring and responding to potential emergence of drug resistance

Output indicator: Report to scientific working group (and DF agency, as applicable)

Target date: 31.12.2023

Progress status:

Progress description:

EROutp-0271

Output description: Documentation of practical approaches to improve targeted treatment and reduce drug misuse and risk of resistance development and spread

Output indicator: Reports/publications made available

Target date: 31.12.2023

Progress status:

Progress description:

EROutp-0270

Output description: OR/IR strategies for countries to build effective systems for monitoring and responding to emerging drug resistance of all relevant infectious agents

Output indicator: Strategies endorsed by stakeholders at relevant levels

Target date: 31.12.2023

Progress status:

Progress description:

ER Biennium Outcomes

2020-2021

EROutc-0027

Outcome description: Guidelines, policies or policy implementation plans (as applicable) informed by TDR outputs

Progress made towards outcome: Implementation of studies are underway and outputs will be available in due course

2022-2023

EROutc-0059

Outcome description: Guidelines, policies or policy implementation plans (as applicable) informed by TDR outputs

Progress made
towards outcome:

EROutc-0058

Outcome description: Guidelines, policies or policy implementation plans (as applicable) informed by TDR outputs

Progress made
towards outcome:

Expected Result: 1.1.5

Title: Directions for development and accelerated access to new tools and strategies

Strategic Work Area: Research for implementation		Workstream: Research for implementation	
ER type:	Continuing	Funding type:	UD
Start date:	01.01.2018	End date:	31.12.2025
ER status:	On Track	Comment:	For Internal Use: Broader accessibility of the E.R. to whole Unit will be ensured for best utilization of opportunities
WHO region:	Global		
Partners:	TBD		
Diseases:	Not Disease-Specific		
Review mechanism:	Scientific working group + other ad hoc or collaboration-based review systems as appropriate		
ER manager:	Abraham ASEFFA Dr		
Team:	Annette Kuesel, Corinne Merle, Florence Fouque, Bernadette Ramirez, Mariam Otmani, Rony Zachariah, Abdul Masoudi, Ekua Johnson, Michelle Villaso, Daniel Hollies		
Number of people working on projects:			

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: Clearance obtained when applicable.

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:		Address knowledge gaps:	Yes
Integrate mandates:		Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Yes still apply
Roles complimentary:	Yes	Yes still apply
Coordination transparent:	Yes	Yes still apply
Visibility:	Yes	Yes, still apply

Objectives and results chain

Approach to ensure uptake:	Quality of work generated and inclusiveness of stakeholders will underpin these activities
Up-take/Use Indicator:	Number of: a) projects/initiatives which take into account TDR contributions/directions; and b) researchers, developers, organizations, funders utilizing TDR input/output
Gender and geographic equity:	Gender and geographic equity considerations will be included
Publication plan:	TBD

Up-take/use
indicator target
date:

31.12.2023

Sustainable Development Goals

Good Health and Well-being

Concept and approach

Rationale:	Control programme objectives cannot be reached for many poverty-related infectious diseases, especially NTDs, because they lack new effective and safe tools for their diagnosis and treatment, as well as efficient methods for quantifying the effect.
Design and methodology:	Inclusiveness and openness are the guiding principles. The scope of this project covers essential, intertwined elements to develop and assess the right tools that will help achieve control and elimination targets.
Approach to ensure quality:	The entire project will be open to public scrutiny by definition, which will ensure quality.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$110,000	\$ 0	\$110,000	\$130,000	\$ 0	\$130,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$110,000	\$ 0	\$110,000	\$14,673	\$ 0	\$14,673
2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$160,000	\$ 0	\$160,000	\$280,000	\$ 0	\$280,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$160,000	\$ 0	\$160,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0003

Foster innovation to fill gaps in new products for neglected infections

ERObj-0004

Engage stakeholders

ERObj-0005

Identify priorities, opportunities

ER Biennium Risks

2020-2021

ERRisk - 0028

Risk description:	Resistance to change by key stakeholders unwilling to adopt new solutions
Actions to mitigate risk:	Achieving critical mass of supporters; showing concrete results
Mitigation status:	

2022-2023

ERRisk - 0219

Risk description:	Resistance to change by key stakeholders unwilling to adopt new solutions
Actions to mitigate risk:	Achieving critical mass of supporters; showing concrete results
Mitigation status:	Planning phase

ER Biennium Outputs

2020-2021

EROutp-0174

Output description:	Strategy development, implementation and monitoring
Output indicator:	Scientific working group meeting reports and recommendations
Target date:	31.12.2021
Progress status:	On Track
Progress description:	<p>2020 Scientific working group meeting held virtually</p> <p>Drug development for onchocerciasis (Drugs for Neglected Diseases initiative, DNDi): TDR staff continue to provide expertise and network in support of DNDi activities as and when requested.</p> <p>A database for case reporting and clinical trial data and a discussion forum on off-label use of drugs for indications with either no or insufficient approved treatments (CURE ID). CURE ID was initiated by the US Food and Drug Administration (US FDA) and the US National Institute of Health (NIH). TDR is working with WHO/UCN/NTD, WHO/UCN/NTD, WHO/UCN/GMP, PQT and other WHO departments as well as the US FDA to obtain global expert input into the deployment of this tool. The originally across indications expert meeting was replaced by virtual meetings for selected indications. The CURE ID application was adapted for COVID-19.</p> <p>TDR collaborations with individual WHO departments:</p> <p>WHO/UCN/NTD: (a) Onchocerciasis subgroup of the NTD Diagnostic Technical Advisory Group for development of Target Product Profiles WHO/UCN/NTD; (b) Member of the Steering group for the development of the WHO Standard guidelines on the treatment of visceral leishmaniasis in HIV co-infected persons; (c) Member of WHO Task Force on Criteria for the Elimination of Leprosy (TFCEL); (d) WHO network for HAT Elimination - Human African Trypanosomiasis Elimination Technical Advisory Group, Ad hoc working group on widened use of acoziborole.</p> <p>WHO/MHP/RPQ/REG/PVG: Selection panel for 'Global network for international epidemiological vaccine safety studies'</p> <p>WHO/UHL/IVB: Selection panel for 'Support for data management systems and statistical analysis' for the RTS,S Malaria Vaccine Implementation Programme.</p> <p>WHO/UCN/NTD: Development of guidance on implementation of Good Clinical Practices (GCP) and Good Data Management Practices (GDMP) in the context of national surveys of the burden of TB disease.</p>

EROutp-0122

Output description:	Optimized methodologies to assess response to case-based and population-based interventions
Output indicator:	Number of methodologies revised and optimized; uptake of revised methodologies; quality of resulting research

Target date: 31.12.2023

Progress status:

Progress description:

EROutp-0070

Output description: Outputs of TDR research projects and TDR staff and adviser expertise used to provide directional perspective for R&D new tools (including advice/support to R&D sponsors) as well as new ways of implementing the tools

Output indicator: Number of R&D initiatives informed by TDR research project output or TDR staff /adviser expertise (at least 4 by 2023)

Target date: 31.12.2021

Progress status: On Track

Progress description: Strategy for clinical development of Acoziborole for g-HAT seropositive non-parasitologically confirmed individuals informed with TDR input into the WHO ad hoc working grouped convened by WHO/NTD.

2022-2023

EROutp-0260

Output description: Outputs of TDR research projects and TDR staff and adviser expertise used to provide directional perspective for R&D new tools (including advice/support to R&D sponsors) as well as new ways of implementing the tools

Output indicator: Number of R&D initiatives informed by TDR research project output or TDR staff /adviser expertise (at least 4 by 2023)

Target date: 31.12.2023

Progress status:

Progress description:

EROutp-0261

Output description: Strategy development, implementation and monitoring

Output indicator: Scientific working group meeting reports and recommendations

Target date: 31.12.2023

Progress status:

Progress description:

EROutp-0262

Output description: Generic protocols to address Implementation Research issues encountered by different disease control programmes

Output indicator: Number of disease control programmes using generic protocols to inform their Implementation Research studies

Target date: 31.12.2025

Progress status:

Progress description:

ER Biennium Outcomes

2020-2021

EROutc-0028

Outcome description: 1. Researchers, developers, funders provided with knowledge available through TDR on specific gaps, needs, opportunities, potential approaches, partners, products and technologies.
2. Knowledge applied by partners resulting in more efficient processes.

Progress made towards outcome:

EROutc-0055

Outcome description: 1. Researchers, developers, funders provided with knowledge available through TDR on specific gaps, needs, opportunities, potential approaches, partners, products and technologies.

2. Knowledge applied by partners resulting in more efficient processes.

Progress made
towards outcome:

Expected Result: 1.1.7

Title: Maximized utilization of data for public health decision-making

Strategic Work Area: Research for implementation		Workstream: Research for implementation	
ER type:	Continuing	Funding type:	UD and DF
Start date:	01.01.2012	End date:	31.12.2023
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	The SORT IT global partnership including Public health programmes in target countries, ministries of health, NGOs and academic institutions.		
Diseases:	Ebola; Malaria; Neglected Tropical Diseases; Schistosomiasis; Tuberculosis; Other		
Review mechanism:	Scientific working group + other ad hoc or collaboration-based review systems as appropriate		
ER manager:	Rony ZACHARIAH		
Team:	Corinne Merle, Mohammed Khogali, Michelle Villaso, Abdul Masoudi, Ekua Johnson Rony Zachariah, Robert Terry, Garry Aslanyan, Maier Mary + relevant RCS staff		
Number of people working on projects:	13		

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: FENSA clearances received as applicable

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Aligned
Roles complimentary:	Yes	SORT IT partners and alumni allow use of trained resources for expansion
Coordination transparent:	Yes	Partner calls each month to coordinate activities. Selections criteria and SOPs established
Visibility:	Yes	TDR and partner Websites updated on a quarterly basis . The process of inclusion of LOGOS etc is underway on lectures, material etc

Objectives and results chain

Approach to ensure uptake:	Research questions identified and endorsed early with programmes and stakeholders at national and international levels, as well as WHO offices where applicable. Early engagement with those expected to use the results will facilitate research uptake.
Up-take/Use Indicator:	Number of new or changed policies guidelines or practice change and/or decisions taking into account.
Gender and geographic equity:	In calls for proposals gender-equitable selections criteria apply. SORT IT focuses on vulnerable and excluded groups and is in line with efforts to achieve UHC
Publication plan:	Open access publications; policy and issue briefs; documents for WHO control programmes

Sustainable Development Goals

Good Health and Well-being; Quality Education; Gender Equality; Clean Water and Sanitation; Reduced Inequality; Life Below Water; Life on Land; Partnerships to achieve the Goal

Concept and approach

Rationale:	Countries and WHO need evidence for informing operational decisions, formulating recommendations/ guidelines and policies. TDR can play a key role in helping to crystallize relevant research questions within programme settings and strengthening country capacity for compilation and analysis/interpretation of available data. This is in line with the SDG 17.18 which is to enhance capacity-building support to countries to increase significantly the availability of high-quality, timely and disaggregated data for public informed decision making. Identifying knowledge and information gaps is also important to inform research agendas and move research into action. many countries are data rich but information poor. This paradigm need to change and SORT IT is aimed at making countries and institutions "Data rich, information rich and Action rich"
Design and methodology:	Priority areas will be identified by the countries in collaboration with WHO country offices and relevant stake holders. Countries will play a central role in identifying the implementing staff. The SORT IT approach which combines research implementation with training will be used to empower participants on being able to independently conduct research thereafter .
Approach to ensure quality:	TDR has inbuilt milestones and performance targets, research subjects and participants will be endorsed by those expected to use the results, including publishing as a part of quality control; Standard Operating Procedures where appropriate customized to national requirements and capacity. All franchised courses will have quality control measures that need to be accounted for.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$210,000	\$ 0	\$210,000	\$400,000	\$ 0	\$400,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$210,000	\$315,000	\$525,000	\$65,868	\$156,417	\$222,285

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$250,000	\$400,000	\$650,000	\$600,000	\$600,000	\$1,200,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$250,000	\$400,000	\$650,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0006

1. Build sustainable capacity to promote and support the effective use of public health data for evidence-based decision-making

ERObj-0007

2. Promote and support data sharing for evidence-based decision-making (guidelines/policy/practice and research)

ER Biennium Risks

2020-2021

ERRisk - 0029

Risk description:	Possibility of "weaning funding for TDR" for SORT IT
Actions to mitigate risk:	Fundraising efforts, including outside usual regular donors are being expanded
Mitigation status:	On Track

ERRisk - 0081

Risk description:	Loss of quality as we franchise the model to other institutions
Actions to mitigate risk:	Quality indicators and strict methodology to be implemented by institutions franchising the SORT IT model. Quality indicators and strict methodology to be implemented for institutions wishing to franchise the SORT IT model. All SORT IT courses have to formally register with TDR and report on achievement (or not) of TDR performance targets. SOPs are shared with all institutions that wish to run franchised SORT IT programmes.
Mitigation status:	On Track

2022-2023

ERRisk - 0228

Risk description:	Possibility of "weaning funding for TDR" for SORT IT activities
Actions to mitigate risk:	Fundraising efforts, including outside usual regular donors
Mitigation status:	

ERRisk - 0229

Risk description:	Loss of quality as we franchise the model to other institutions
Actions to mitigate risk:	Quality indicators and strict methodology to be implemented by institutions franchising the SORT IT model. Quality indicators and strict methodology to be implemented for institutions wishing to franchise the SORT IT model. All SORT IT courses have to formally register with TDR and report on achievement (or not) of TDR performance targets. SOPs are shared with all institutions that wish to run franchised SORT IT programmes.
Mitigation status:	

ER Biennium Outputs

2020-2021

EROutp-0123

Output description:	Publications and issue/policy briefs to inform evidence-based policies/ practice
Output indicator:	Number of publications and evidence of change in policies/ practice
Target date:	31.12.2023
Progress status:	On Track
Progress description:	75 publications in 2020 of which approximately 69% have reported an effect on policy and/or practice.

EROutp-0071

Output description:	Build capacity for the effective collection and analysis and use of data
Output indicator:	Number of successful trainees and number of data analyses conducted and reported
Target date:	31.12.2023
Progress status:	On Track
Progress description:	Over 90% of all SORT IT participants complete SORT IT milestones. 75 research projects involving programme data developed and published.

2022-2023

EROutp-0279

Output description: Publications and issue/policy briefs to inform evidence-based policies/ practice
Output indicator: Number of publications and evidence of change in policies/ practice
Target date: 31.12.2023
Progress status:
Progress description:

EROutp-0278

Output description: Build capacity for the effective collection and analysis and use of data
Output indicator: Number of successful trainees and number of data analyses conducted and reported
Target date: 31.12.2023
Progress status:
Progress description:

ER Biennium Outcomes

2020-2021

EROutc-0029

Outcome description: Strengthened evidence-base for policy and practice decisions
Progress made
towards outcome: About 69% of research evidence generated through SORT IT contribute to policy and practice decisions.

2022-2023

EROutc-0061

Outcome description: Strengthened evidence-base for policy and practice decisions
Progress made
towards outcome:

Expected Result: 1.1.8

Title: Maximized utilization of safety information for public health decision-making

Strategic Work Area: Research for implementation		Workstream: Research for implementation	
ER type:	Continuing	Funding type:	UD and DF
Start date:	01.01.2014	End date:	31.03.2023
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	Other departments (HIV, TB, EMP etc.) within WHO, University of Ulster, UNDP and PATH, national control programmes, researchers and research institutions (academia, others), MoH and national control programmes in countries		
Diseases:	Not Disease-Specific		
Review mechanism:	Scientific working group, and the Access and Delivery Partnership scientific advisory group convened by UNDP for the ADP project		
ER manager:	Corinne Simone Collette MERLE		
Team:	Abraham Aseffa, Ekua Johnson		
Number of people working on projects:	1		

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: FENSA clearance obtained when applicable - was not required for all partners

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Still aligned
Roles complimentary:	Clear for all
Coordination transparent:	Transparent decision making and coordination
Visibility:	Attribution of TDR role in the partnership highlighted

Objectives and results chain

Approach to ensure uptake:	Involvement of different WHO departments and control programmes; capacity built at country level
Up-take/Use Indicator:	Incorporation of evidence in treatment guidelines; use of new tool by countries or research groups; translation of research evidence into practice
Gender and geographic equity:	Safety in pregnancy targeted in output 1. Data from DEC. Contracts with qualified women investigators favoured.
Publication plan:	Scientific meetings, Open access journals, TDR website

Sustainable Development Goals

Good Health and Well-being; Reduced Inequality; Partnerships to achieve the Goal

Concept and approach

Rationale:	In most developing countries, weak pharmacovigilance systems and generalized under-reporting explain that safety information is often lacking. A lot of work is needed at different levels and has been identified as a priority to ensure safe use of drugs in developing countries. This is even more important in a programme where the drugs are distributed on a large scale and used as preventive treatment where the balance risk/benefit will be more easily challenged. This ER looks at different ways of working with developing countries and programmes to help them strengthen safety monitoring systems, collect and collate safety data, and use adequately data available to extract any useful safety information. This should help generate data and evidence that will be used for policy decision and programme implementation.
Design and methodology:	The following methodology will be used: a) Strengthening of collaboration around central databases for collection of safety data and analysis of pooled data to identify evidence related to drug safety; b) Development and field testing of the mHealth tool to facilitate data collection around safety monitoring; and c) Capacity building at country level.
Approach to ensure quality:	Regular monitoring of project implementation; involvement of experts in project design (pharmacovigilance, neonatologist, etc.) from the beginning.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$220,000	\$200,000	\$420,000	\$400,000	\$400,000	\$800,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$220,000	\$740,000	\$960,000	\$157,847	\$335,425	\$493,272

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0008

1. Provide policy-makers with essential information on drug safety and contribute evidence on safety for WHO treatment and normative guidelines

ERObj-0009

2. Build capacity in countries to collect, assess and use drug safety data for decision-making

3. Identify strategies to improve safety monitoring systems in LMICs.

ER Biennium Risks

2020-2021

ERRisk - 0030

Risk description:	Refusal from sites or countries to share data
Actions to mitigate risk:	Involvement of WHO partners and countries in the project planning from the beginning of the projects; advocacy to highlight the benefit of data sharing
Mitigation status:	On Track

ERRisk - 0082

Risk description:	Low quality implementation at country level
Actions to mitigate risk:	Careful selection, adequate training prior to country implementation and regular monitoring
Mitigation status:	On Track

2022-2023

n/a

ER Biennium Outputs

2020-2021

EROutp-0278

Output description:	Build capacity for the effective collection and analysis and use of data
Output indicator:	Number of successful trainees and number of data analyses conducted and reported
Target date:	31.12.2023
Progress status:	
Progress description:	

EROutp-0072

Output description:	Improved evidence of drug safety in specific patient groups (e.g. HIV positive, pregnancy, MDR-TB)
Output indicator:	At least 50% increase in data content on the two key databases established by TDR (pregnancy and aDSM); and one analysis of data run per year for each database
Target date:	31.12.2021
Progress status:	On Track
Progress description:	data analysis performed for aDSM

EROutp-0176

Output description:	Capacity for safety monitoring of new drugs built in target countries
Output indicator:	Adverse event reporting rates in target countries
Target date:	31.03.2023
Progress status:	On Track
Progress description:	through the ADP project, safety monitoring is strengthen in Burkina Faso, Senegal, Indonesia, Malawi

2022-2023

n/a

2020-2021

EROutc-0030

Outcome description: Strengthened evidence on drug safety

Progress made
towards outcome:

2022-2023

n/a

Expected Result: 1.2.1

Title: Strategies to achieve and sustain disease elimination

Strategic Work Area: Research for implementation		Workstream: Research for implementation	
ER type:	Continuing	Funding type:	UD and DF
Start date:	01.03.2014	End date:	31.12.2025
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	Control programmes and research institutes in countries, Medicines Development for Global Health, Communauté Evangelique au Centre de l'Afrique (CECA20)		
Diseases:	Onchocerciasis; Visceral leishmaniasis		
Review mechanism:	Scientific working group + other ad hoc or collaboration-based review systems as appropriate		
ER manager:	Annette Christiane KUESEL		
Team:	Michelle Villasol, Abraham Aseffa		
Number of people working on projects:	1		

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: FENSA clearance obtained when needed (for partnership for moxidectin evaluation) - to be evaluated for new future partners

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Aligned
Roles complimentary:	Yes	Role complementary
Coordination transparent:	Yes	Coordination transparent
Visibility:	Yes	Visibility of TDR highlighted

Objectives and results chain

Approach to ensure uptake:	Control programmes and researchers from concerned countries, as well as WHO 3 levels are fully engaged in the design and implementation of the research
Up-take/Use Indicator:	TDR outputs considered among evidence informing decision-making at global, regional and national levels
Gender and geographic equity:	Work will target LMICs (for oncho in Africa, for VL Nepal/Bangladesh). Whenever possible funding to women investigators will be favoured. Whenever possible results of research will be disaggregated by gender.
Publication plan:	Scientific meetings, Open access journals, TDR website

Sustainable Development Goals

Good Health and Well-being

Concept and approach

Rationale:	Some diseases are targeted for elimination in certain areas. Research is needed to inform appropriate strategies and practices. While some of these can be broadly applied, others need to be targeted to the disease, and/or the interventions and/or specific epidemiological setting and/or the extent to which prevalence/incidence of infection have been reduced and the elimination goal (elimination as a public health problem or elimination of transmission). TDR has a decades long history of research for the tools that have allowed countries targeting VL elimination in the SIC and onchocerciasis elimination where feasible in Africa. TDR has been funding and managing research to support these elimination goals in past biennia and is continuing this work as recommended by the scientific working group.
Design and methodology:	Continuation of collaboration with and between researchers and national/regional or global control programmes. Research will be designed to address specific knowledge gaps and research priorities, and will be conducted by qualified investigators (with appropriate training).
Approach to ensure quality:	Selection of investigators and proposals with appropriate expertise through review of their proposals and progress reports/renewal requests by the scientific working group complemented by external subject matter experts (ad hoc reviewers). Grant proposal review by external reviewers nominated by funders, if applicable.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$760,000	\$ 0	\$760,000	\$1,500,000	\$ 0	\$1,500,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$760,000	\$3,500	\$763,500	\$63,821	\$ 0	\$63,821

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$740,000	\$200,000	\$940,000	\$1,200,000	\$300,000	\$1,500,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$740,000	\$200,000	\$940,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0011

Generate evidence to guide programmes on strategies to achieve and sustain elimination, where and when to stop intervention and how to certify elimination

ER Biennium Risks

2020-2021

ERRisk - 0031

Risk description:	Insufficient funding
Actions to mitigate risk:	Raise awareness of potential donors; explore alternative ways of supporting work
Mitigation status:	

ERRisk - 0083

Risk description:	Research question are not targetting key priorities for programmes
Actions to mitigate risk:	Ensure large involvement of WHO country/regional/HQ level and of country representatives in discussion to identify priority research questions.
Mitigation status:	On Track

2022-2023

ERRisk - 0220

Risk description:	Insufficient funding
Actions to mitigate risk:	Raise awareness of potential donors; explore alternative ways of supporting work
Mitigation status:	Planning phase

ERRisk - 0221

Risk description:	Research question are not targetting key priorities for programmes
Actions to mitigate risk:	Ensure large involvement of WHO country/regional/HQ level and of country representatives in discussion to identify priority research questions.
Mitigation status:	Planning phase

ER Biennium Outputs

2020-2021

EROutp-0177

Output description:	Data to support WHO guidelines and onchocerciasis endemic country registration and policies on moxidectin for onchocerciasis elimination
Output indicator:	Study reports/publications provided to WHO and countries (directly and/or via ESPEN)
Target date:	31.12.2024
Progress status:	Delayed
Progress description:	Start of all studies delayed due to required revisions of the study protocols and implementation plans to accomodate the requirements of conducting the studies during COVID-19 pandemic. COVID-19 adaptation of implementation plans will translate into slower recruitment.

EROutp-0125

Output description:	Improved basis for monitoring progress of preventive chemotherapy-based elimination programmes towards elimination and for decisions to stop interventions
Output indicator:	Report to scientific working group; results delivered to the country control programmes and/or NTD programmes/advisory committees at regional and/or HQ level
Target date:	31.12.2021
Progress status:	Delayed
Progress description:	Onchocerciasis: Laboratory and field work has been delayed due to COVID-19 pandemic lock-downs and travel restrictions

EROutp-0073

Output description:	Generate evidence on sustainable strategies for the elimination of VL in the sub-Indian continent
Output indicator:	Report to scientific working group; results delivered to the country control programmes
Target date:	31.12.2021
Progress status:	On Track

Progress description: Research findings have been published on benefits of alternative vector control strategies to reduce transmission (wall painting vs indoor residual spraying), the diagnostic performance of rK39 in asymptomatic and PKDL cases and on safety of AmBisome with implications on policy and practice.

- Studies on community based vector control and case surveillance in Nepal and Bangladesh are nearing completion. Additional three studies have been developed in consultation with national programmes of Nepal and Bangladesh to address factors behind emergence of new cases in new foci despite elimination efforts, prevalence of PKDL and follow up of treated cases to assess risk of relapse in both Nepal and Bangladesh. The studies will start as soon as WHO ethical clearance is obtained.
- The study to evaluate the use of the rK39 diagnostic test in febrile populations presenting in secondary-level health centres in Bangladesh and India is nearing completion and should provide insight into what could be the best diagnostic tool for the elimination phase.
- A protocol for a study on prevalence of HIV/VL co-infection in Bangladesh has been modified to accommodate feedback and re-submitted to WHO ethics committee for review.

Additional findings submitted for publication include:

- Mondal D. et al., "A comparative study of sandfly control interventions with insecticidal wall paint, insecticidal durable wall lining, insecticide-impregnated bednets and indoor residual spraying with insecticide in Bangladesh"
- Banjara M. et al., "Response to Visceral Leishmaniasis Cases through Active Case Detection and Vector Control in Low Endemic Non-program Districts of Nepal"
- Singh-Phulgenda et al., "Serious adverse events and mortality following treatment of Visceral Leishmaniasis: A systematic review and meta-analysis"

2022-2023

EROutp-0264

Output description: Data to support WHO guidelines and onchocerciasis endemic country registration and policies on moxidectin for onchocerciasis elimination

Output indicator: Study reports/publications provided to WHO and countries (directly and/or via ESPEN)

Target date: 31.12.2025

Progress status:

Progress description:

EROutp-0263

Output description: Improved basis for monitoring progress of preventive chemotherapy-based elimination programmes towards elimination and for decisions to stop interventions

Output indicator: Report to scientific working group; results delivered to the country control programmes and/or NTD programmes/advisory committees at regional and/or HQ level

Target date: 31.12.2024

Progress status:

Progress description:

EROutp-0266

Output description: Generate evidence to support establishment of programmes towards elimination of VL in Eastern Africa

Output indicator: Report to scientific working group; results delivered to the country control programmes

Target date: 31.12.2030

Progress status:

Progress description:

EROutp-0265

Output description: Generate evidence on sustainable strategies for the elimination of VL in the sub-Indian continent

Output indicator: Report to scientific working group; results delivered to the country control programmes

Target date: 31.12.2025

Progress status:
Progress description:

ER Biennium Outcomes

2020-2021

EROutc-0031

Outcome description:	Guidelines, policy decisions and or practice informed by TDR outputs
Progress made towards outcome:	Evidence on sustainable strategies has been published addressing aspects in vector control, diagnosis and treatment - comparison of vector control options, performance of a diagnostic test (rk39) in asymptomatic and post-kala azar dermal leishmaniasis (PKDL) patients and on the safety of a drug of choice (Ambisome) Research findings have been published on benefits of alternative vector control strategies to reduce transmission (wall painting vs indoor residual spraying), the diagnostic performance of rK39 in asymptomatic and PKDL cases and on safety of AmBisome with implications on policy and practice. Studies are ongoing on community based vector control and case surveillance in Nepal and Bangladesh. Additional studies are being developed to address factors behind emergence of new cases in new foci despite elimination efforts, integration of VL into other programmes and follow up of treated cases to assess risk of relapse.

2022-2023

EROutc-0056

Outcome description:	Guidelines, policy decisions and or practice informed by TDR outputs
Progress made towards outcome:	

Expected Result: 1.2.6

Title: Optimized approaches for effective delivery and impact assessment of public health interventions

Strategic Work Area: Research for implementation		Workstream: Research for implementation	
ER type:	Evolved	Funding type:	UD and DF
Start date:	01.01.2015	End date:	31.12.2023
ER status:	On Track	Comment:	Some activities have been postponed or were conducted remotely because of COVID-19 pandemic
WHO region:	Global		
Partners:	Control programmes and research institutions in target countries - WHO/Global TB, and WHO Global Malaria Programmes, WHO regional offices, GFTAM, USAID, PMI, The Union and Damien Foundation		
Diseases:	COVID-19; Malaria; Tuberculosis		
Review mechanism:	Scientific working group + other ad hoc or collaboration-based review systems as appropriate		
ER manager:	Corinne Simone Collette MERLE		
Team:	Corinne Merle, Abdul Masoudi		
Number of people working on projects:	15		

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: All partners are governmental institutions

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes
Roles complimentary:	Yes
Coordination transparent:	Yes
Visibility:	Yes

Objectives and results chain

Approach to ensure uptake:	Involvement of different WHO headquarters, regional and country departments, key stakeholders such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, NGOs and control programmes; capacity built at country level
Up-take/Use Indicator:	Evidence taken into consideration in treatment and normative guidelines
Gender and geographic equity:	Men and women researchers equally represented. Activities focused initially in West and Central Africa (see rationale) for the WARN-TB and CARN-TB activities but other activities are global allowing us to work with the 6 WHO regions
Publication plan:	Peer review publications, presentation at international congress, dissemination in-country including policy brief

Sustainable Development Goals

Good Health and Well-being; Reduced Inequality; Partnerships to achieve the Goal

Concept and approach

Rationale:	Disease control is based on either case- or population-based approaches, depending on the nature and the prevalence of the disease, and the efficacy/safety profile of available medications. Country programmes need to build capacity to generate research questions and data that will allow them to effectively implement policy standards. In other cases, the evolving background epidemiology and programme objectives require that standard approaches be reconsidered and evidence generated to inform guidelines and policies.
Design and methodology:	1. Regional workshops: NTP network workshops to define research priorities and capacity building needs to develop a national TB research plan and share progress and issues (collaboration with relevant WHO programmes, in particular WHO/GTB) 2. Training: Activities addressing training needs through: (i) a regional training programme; and (ii) a "learning by doing" approach with technical support and mentoring for the development and conduct of pilot projects that generate data for the implementation and scale-up of new public health interventions; and 3. Technical and financial support for scaling-up public health interventions and documenting their implementation through research.
Approach to ensure quality:	- Careful interactive development of the workplan of the full project and risk assessment - Careful selection of key partners - Close monitoring of progress

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$550,000	\$300,000	\$850,000	\$800,000	\$600,000	\$1,400,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$917,500	\$1,323,000	\$2,240,500	\$185,162	\$649,693	\$834,855

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$600,000	\$500,000	\$1,100,000	\$1,100,000	\$700,000	\$1,800,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$600,000	\$500,000	\$1,100,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0012

1. Build country programme capacity to develop research questions and generate data to inform effective implementation of their policies

ERObj-0013

2. To support national programmes with evidence for the selection and effective implementation of strategies to control diseases through either case- or population-based approaches

ER Biennium Risks

2020-2021

ERRisk - 0084

Risk description:	Inability of some control programmes to define research priorities and capacity building needs
Actions to mitigate risk:	Shared experience and expertise within the regional network and external technical support provided for the weakest control programmes
Mitigation status:	On Track

ERRisk - 0225

Risk description:	Insufficient engagement of national control programmes
Actions to mitigate risk:	Adequate communication strategy to maintain interaction of all partners within the network
Mitigation status:	On Track

2022-2023

ERRisk - 0032

Risk description:	Insufficient engagement of national control programmes
Actions to mitigate risk:	Adequate communication strategy to maintain interaction of all partners within the network
Mitigation status:	

ERRisk - 0226

Risk description:	Inability of some control programmes to define research priorities and capacity building needs
Actions to mitigate risk:	Shared experience and expertise within the regional network and external technical support provided for the weakest control programmes
Mitigation status:	

ER Biennium Outputs

2020-2021

EROutp-0178

Output description:	Approaches to optimized delivery and effectiveness of seasonal malaria chemoprevention in West and Central Africa evaluated and other NTD control strategies
Output indicator:	Report provided to scientific working group and stakeholders at country, regional and global levels
Target date:	30.06.2023
Progress status:	On Track
Progress description:	baseline analyses of the barriers for effective SMC delivery was conducted in 2020. Implementation research projects are currently developed by countries to overcome these barriers.

EROutp-0126

Output description:	Extend the WARN-TB approach to other geographical areas and/or other disease burdens
Output indicator:	Report provided to scientific working group and stakeholders at country, regional and global levels
Target date:	31.12.2023
Progress status:	On Track
Progress description:	Similar experience of the WARN-TB was launched with the country of the central african region with the establishment of the Central African Regional Network for TB control (CARN-TB).

EROutp-0074

Output description:	Strengthened regional networks of West African National Tuberculosis Programmes (WARN-TB) and Central African Tuberculosis Programmes (CARN-TB) capable of identifying research priorities and designing and conducting OR/IR to generate the evidence-base for
Output indicator:	Report provided to scientific working group and stakeholders at country, regional and global level
Target date:	31.12.2021
Progress status:	On Track
Progress description:	All countries of the WARN-TB and CARN-TB have defined their TB research priorities . More than 50 research projects were or are currently conducted in the region with the support of TDR .

EROutp-0268

Output description:	Approaches to optimize delivery and effectiveness of Seasonal Malaria Chemoprevention (SMC) in West and Central Africa evaluated and other NTD control strategies
Output indicator:	Report provided to SWG and stakeholders at country, regional and global level
Target date:	31.12.2023
Progress status:	On Track
Progress description:	In 2020, TDR provided support to the 13 countries implementing SMC to define the barriers for an effective delivery of SMC - in 2021-2022, implementation research projects will be conducted to find best approaches to overcome the barriers

EROutp-0269

Output description:	facilitation trough the conduct of operational research of the uptake of new all oral shorter regimen for the treatment of Multi Resistant Tuberculosis (MDR/RR-TB)
Output indicator:	Report provided to SWG and stakeholders at country, regional and global level
Target date:	31.12.2022
Progress status:	On Track
Progress description:	a research package comprising a generic research protocol, an electronic data collection tools and a tool kit for conducting the study was developed. In 2020, TDR supported 23 countries to develop and conduct operational research studies for use of all oral shorter treatment for patients suffering of MDR/RR-TB.

2022-2023**EROutp-0276**

Output description:	Extend the WARN-TB approach to other geographical areas and/or other disease burdens
Output indicator:	Report provided to scientific working group and stakeholders at country, regional and global levels
Target date:	31.12.2023
Progress status:	
Progress description:	Similar experience of the WARN-TB was launched with the country of the central african region with the establishment of the Central African Regional Network for TB control (CARN-TB).

EROutp-0304

Output description:	Capacity strengthened for improving the effectiveness of safety monitoring of new drugs in target countries
Output indicator:	Serious Adverse event reporting rates in target countries
Target date:	31.12.2023
Progress status:	
Progress description:	

EROutp-0277

Output description:	Approaches to optimized delivery and effectiveness of seasonal malaria chemoprevention in West and Central Africa evaluated and other NTD control strategies
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Output indicator:	Report provided to scientific working group and stakeholders at country, regional and global levels
Target date:	30.06.2023
Progress status:	
Progress description:	baseline analyses of the barriers for effective SMC delivery was conducted in 2020. Implementation research projects are currently developed by countries to overcome these barriers.

ER Biennium Outcomes

2020-2021

EROutc-0032

Outcome description:	Guidelines and policy decisions informed by TDR outputs
Progress made towards outcome:	The national TB programmes of the WARN-TB used research results to modify their national strategy.

2022-2023

EROutc-0060

Outcome description:	Guidelines and policy decisions informed by TDR outputs
Progress made towards outcome:	The national disease control programmes supported through this ER, used research results to modify their national strategy.

Expected Result: 1.3.3

Title: Population health vulnerabilities to VBDs: Increasing resilience under climate change conditions (Operationalizing a One Health Approach for the Control of VBDs in the Context of Climate Change)

Strategic Work Area: Research for implementation		Workstream: Research for policy	
ER type:	Evolved	Funding type:	UD
Start date:	01.01.2020	End date:	31.12.2023
ER status:	On Track	Comment:	On going work
WHO region:	AFRO		
Partners:	WHO-PHE, Fondation Merieux, WHO - AFRO, UN Environment		
Diseases:	Malaria; Rift valley fever; Schistosomiasis; Trypanosomiasis; Vector-borne diseases		
Review mechanism:	Through SWG		
ER manager:	Bernadette RAMIREZ		
Team:	1 Professional staff (B Ramirez) and 1 admin staff (Daniel Hollies)		
Number of people working on projects:	5		

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance:

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:		Build strengths:	Yes
Reduce burden:		Foster networking:	Yes
Increase visibility:			

TDR partnership criteria indicators

Objectives aligned:	Yes	The objectives of this programme are aligned with TDR strategy
Roles complimentary:	Yes	TDR partners add complementary value and contribution to achieving TDR strategy.
Coordination transparent:	Yes	Coordination with partners is above board and transparent.
Visibility:	Yes	Partners share similar goals as TDR, thus expanding TDR's visibility in the field.

Objectives and results chain

Approach to ensure uptake:	TDR and collaborating research institutions will conduct networking and policy-advice activities to promote the products generated from the research programme: a) Translation and dissemination of the scientific knowledge, evidence and adaptation tools and
Up-take/Use Indicator:	1. Increased national, regional and international attention triggered through research results; 2. Use of tools by African countries for increased resilience to VBD risks under climate change conditions; 3. Number and significance of events where decision
Gender and geographic equity:	All proposals follow gender-sensitive approaches, with all research activities having an explicit gender perspective/framework and taking into account possible gender differentials in the epidemiology and transmission of VBDs and will, if possible and appropriate, define gender-sensitive approaches to the community-based adaptation strategies to reduce population health vulnerabilities. This perspective is further stressed in the call for proposals and during proposed training and workshops where the participation of women researchers is actively encouraged. Best approaches to engage women in

programmes and activities aimed at climate change adaptation for health and reduced risk for VBDs will also be addressed.

Publication plan: At least three publications (open access) expected from projects supported by TDR

Up-take/use indicator target date: 31.12.2021

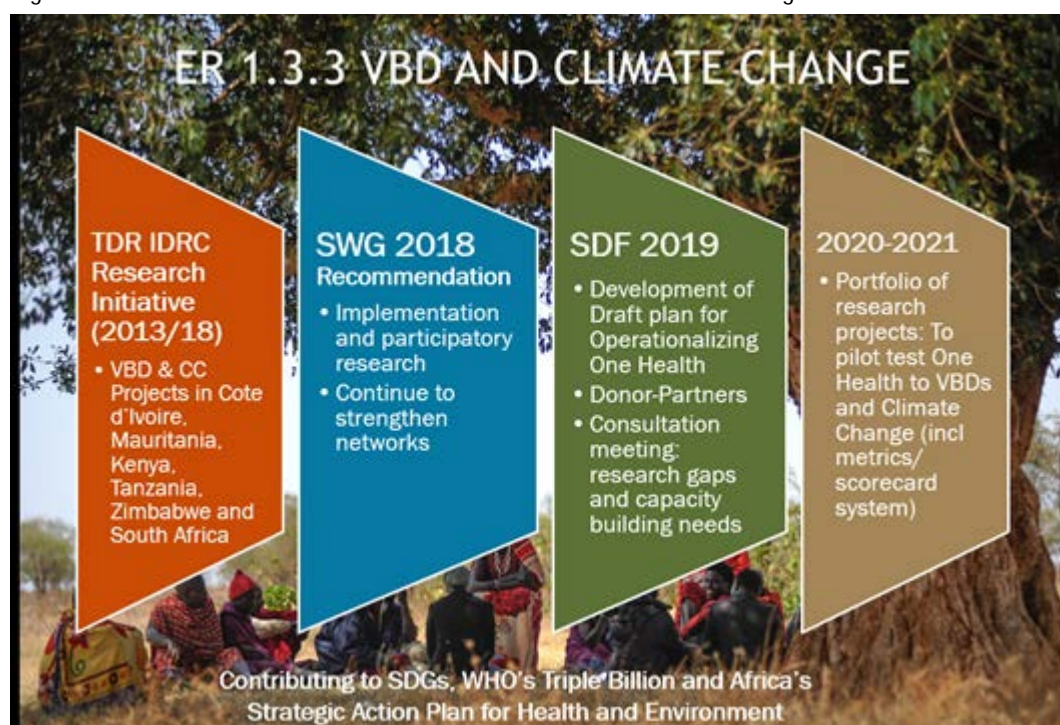
Sustainable Development Goals

Good Health and Well-being; Climate Action

Concept and approach

Rationale: The overall goal of this ER is to generate evidence to enable development of innovative strategies to reduce VBD-related human vulnerability and to increase resilience of African populations to VBD-related health threats. In addition, it aims to broaden and extend knowledge, research capacity, collaboration and policy advice products that can be used throughout Africa and other regions. During previous years (from 2013), and through the TDR IDRC Research Initiative on Vector Borne Diseases and Climate Change, this ER had delivered on the following: 1) identification and characterization of potential impact on vector borne diseases (VBD) of complex socioecological conditions of water systems in Africa, 2) assessment of VBD risks under various environmental exposure conditions and vulnerability context, 3) decision support processes and tools for health impact assessment and management, and 4) a network and community of practice with capacity built to better manage climate and environment-related health risks. For the current biennium (2020-2021), this ER addresses an extraordinary opportunity to build on the outputs of the TDR-IDRC Research Initiative as the basis for operationalizing the One Health, a multisectoral, transdisciplinary approach that ensures collaboration and coordination among all relevant players in public health, animal health, plant health, environment, ministries, stakeholders, sectors and disciplines, to achieve better public health outcomes (see Figure 1. Evolution of ER 1.3.3). This opportunity has now become even more urgent and a critical need with the emergence of Covid-19, re-emergence of Ebola and other zoonotic and vector borne disease (VBD) threats. For example, the social and economic dislocations Covid-19 has catalysed can be expected to increase health risks by increasing the vulnerability of many already vulnerable populations well beyond the pandemic period.

Figure 1. Evolution of ER 1.3.3. Vector borne diseases and climate change



Relevance

Human health is intimately linked to the state of the environment, including the effects of climate change. Nearly one in four premature deaths in Africa, for instance, are linked to the environment and threatens to increase the number of health emergencies and outbreaks in the coming years. IMP SWG members highlighted the importance of the interrelationship between health and climate and acknowledged that research in this area remains highly topical albeit the completion of the TDR IDRC Research Initiative on Vector Borne Diseases (VBDs) and Climate Change.

One of the approaches that could prove to be valuable in the implementation of joint interventions in health and environment, to address population health vulnerabilities and to increase resilience is the One Health approach, which ensures that human, animal, and environmental health concerns are addressed in an integrated, multisectoral and holistic manner, and to provide a more comprehensive understanding of the problems and potential solutions than would be otherwise not be possible with siloed approaches by the stakeholders concerned (researchers, public health practitioners, environment, agricultural sectors, communities and other relevant partners). At the same time, the One Health approach is quite complex, making its practical implementation and operationalization not straightforward, and thus, the stakeholders concerned will benefit from capacity building on the One Health approach to build resilience against VBDs under climate change conditions.

Demonstrable impact

The goal of this ER is to ensure resilience to the adverse impacts of VBDs and climate change among vulnerable populations in Africa.

It is expected to contribute to the following:

- 2030 Agenda for Sustainable Development through Sustainable Development Goal 3 (Health and Well Being) and 13 (Take urgent action to combat climate change and its impacts) and the UNFCCC's Paris Agreement on Climate Change
- WHO's Triple Billion target and WHO's 13th General Programme of Work (2019-2023)
- Strategic Action Plan to Scale up Joint Interventions in Health and Environment in Africa (2019-2029)
- WHO's Global Vector Control Response (2017-2030) and the 2030 NTD Road Map for Ending Neglected Tropical Diseases

Design and methodology:

Operationalizing One Health encompasses a set of tools, currently under development through ER 1.3.3, that combines well-documented, evidence-based principles and practices that specifically address the problem of population vulnerabilities to VBDs in the context of climate change. It is widely agreed among international development agencies, medical and public health scientists that One Health can contribute significantly to global health in this regard. Yet the challenge is how to extend One Health operationalization efforts that are focused on organizational requirements, on elaboration of specific methods including performance metrics (through a scorecard) that reflect the interdependence of human health and ecosystem health. Thus, for operationalizing One Health, we are combining established methods from the environmental and health fields using analytical systems, planning and organizational approaches to form the basis for risk mitigation and management against emerging zoonotic diseases, climate variability and extreme weather events. The One Health scorecard system is critical to measure success and evaluate performance of the One Health plan through performance indicators for collectively developing a metrics standard that incorporates variances of specific settings for a harmonised evaluation (see Figure 2. Example of a One Health Scorecard) .

Figure 2. Example of a One Health scorecard (“What is not measured is not done, What is not measured can not be managed, What is not measured can not be improved, What is not measured is not important to justify”).

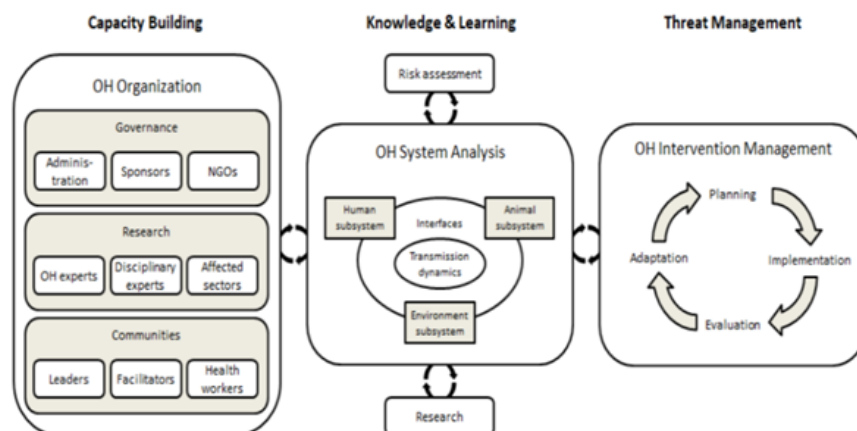
Example of a One Health Scorecard for VBDs in the Context of Climate Change

Collectively developing a standard that incorporates variances of specific settings for a harmonized evaluation

P1 Capacity	3	P2 Intervention Science	2	P3 Risk Management	2	P4 Impact and Risk	4
S1 Governance	3	S4 Intervention Management	2	S7 Social Systems	3	S10 Impact and Risk	4
K1 Sectors	4	K10 Planning	3	K19 Resilience	4	K28 Severity	3
K2 Disciplines	3	K11 Implementation	3	K20 Risk Mitigation	3	K29 Frequency	2
K3 Communities	3	K12 Adaptation	2	K21 Risk Control	3	K30 Risk Potential	4
S2 Organization	3	S5 Implementation Research	2	S8 Animal Systems	2		
K4 Culture	3	K13 Effectiveness	3	K22 Resilience	2		
K5 Knowledge	4	K14 Efficiency	3	K23 Risk Mitigation	3		
K6 Management	3	K15 Sustainability	2	K24 Risk Control	2		
S3 Resources	3	S6 System Analysis	3	S9 Ecosystems	2		
K7 Human Resources	4	K16 Social Systems	4	K25 Resilience	2		
K8 Supplies & Equipment	3	K17 Animal Systems	4	K26 Integrity	3		
K9 Financial Resources	3	K18 Ecosystems	3	K27 Vector Control	2		

Consultation Meeting for Operationalizing a One Health Approach for Vector-Borne Diseases in the Context of Climate Change, 17-18 December 2019, Brazzaville, Republic of the Congo

A significant advance toward accomplishing this was to employ Implementation Science in the design of a Framework/Draft Plan and associated provisional metrics and indicators, which was presented and discussed during the One Health Consultation Meeting held in Brazzaville, Congo, last December 2019 (see Figure 3. Components of an adaptive One Health approach) . Participated in by IMP SWG (represented by Dr Mario Henry Rodriguez, who also chaired the meeting), key researchers from the TDR IDRC network, representatives from the ministries responsible for health and environment, and partners/collaborators [WHO AFRO, Fondation Merieux, UN Environment, OIE-Africa, FAO-Africa, PAMCA], the Brazzaville meeting acknowledged the value of the TDR IDRC research initiative for laying the foundation for more holistic, locally adaptable health systems capable of VBD and climate change risk management and can now be envisioned for the implementing the One Health approach. The refinement of the Framework/Draft Plan from the Brazzaville meeting is expected to result in an essential policy and management tool that currently does not exist for operationalizing One Health. Figure 3. Components of an adaptive One Health approach



The main recommendation from the Brazzaville meeting was a Call to Action to implement the Draft Plan to fully develop the One Health operationalization system using the extensive experience and data outputs from the TDR-IDRC Africa Initiative. Aligned with the Libreville Strategic Action Plan to Scale Up Health and Environment Interventions in Africa (2019-2029), this scorecard and performance metrics system is envisioned to assist in mitigating the impacts of VBD health consequences on the most vulnerable populations. It was further recommended to implement the Draft Plan on a pilot scale based on the Initiative's projects in Cote d'Ivoire, Kenya, Tanzania and South to facilitate increased integrated

coverage of health, agricultural and environment interventions for primary prevention of VBDs while integrating ecosystems preservation in Africa.

Progress in 2020

The following activities have been completed and undertaken:

- Consultation Meeting for Operationalizing a One Health Approach for VBDs in the context of Climate Change, 17-18 December 2019, Brazzaville, Republic of Congo (see Group photo from the Consultation Meeting)
 - o Jointly organized and funded by TDR with Fondation Merieux; participants included TDR partners and collaborators, SWG, researchers, public health practitioners, ministry representatives from public health and environment, other stakeholders
 - o Objectives: 1) To discuss how research products from the TDR IDRC Research Initiative on VBDs and Climate Change can be aligned with and contribute to the Strategic Action Plan (SAP) to Scale up Health and Environment Interventions in Africa (Libreville, 2019-2029), 2) To discuss and provide input into a draft plan that will guide the implementation of One Health
 - o Brief from the meeting: 1) Participants were informed of the new Libreville Strategic Action Plan and discussed how future work can be aligned with and contribute to the SAP, 2) Discussed and provided input to the draft plan for Operationalizing One Health, 3) Conducted a workshop on country scenario-setting for the application of the One Health scorecard/metrics system; 4) Identified research and capacity building needs for the implementation of One Health
 - o Recommendations from the meeting: 1) Revise draft plan for OH with input from participants, 2) Call to Action to pilot test the draft plan including the metrics based assessment tool, 3) Request TDR and partners to support the testing of the draft plan through funding and technical support for country projects and activities for 2020-2021
- Group photo from the Consultation Meeting



Engagement with partners

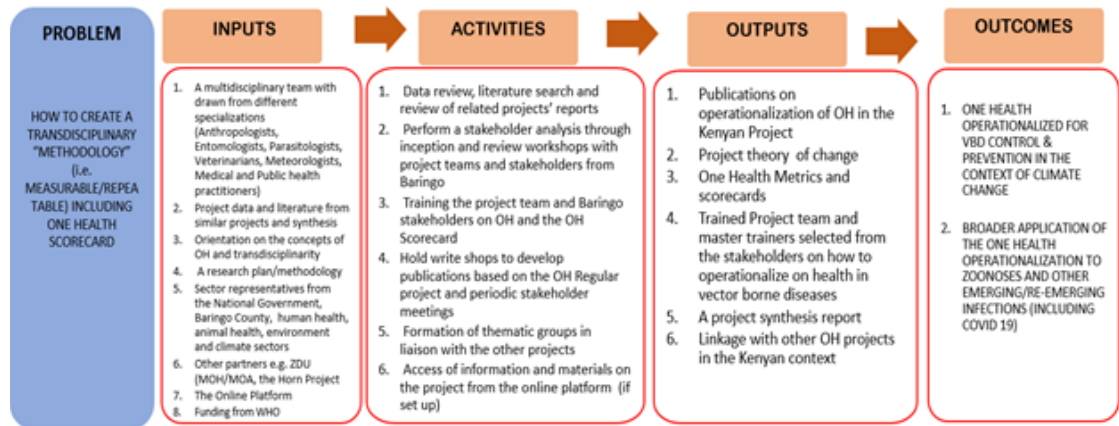
- o TDR is engaged with the following partners: § Fondation Merieux § UN Environment § OIE-Africa (World Organization for Animal Health) § FAO-Africa (Food and Agriculture Organization) § PAMCA (Pan Africa Mosquito Control Association)
- Established collaboration with Global Health Group International (led by Prof Bruce Wilcox at the ASEAN Institute for Health Development, Mahidol University, Thailand) for technical support for the delivery of products relevant to Operationalizing One Health
- o Completion of a Master Plan and Guidance Document for use by research projects in the development of their workplans
- o Development of an interactive web-based collaboration platform for knowledge sharing and to maximize communications and information exchange
- o Planning and organization of a writeshop for African principal investigators to assist in development of workplans to help facilitate TDR's engagement with technical and policy personnel with WHO AFRO, WHO country office in Africa, UN Environment, OIE-Africa, FAO-Africa, Fondation Merieux and PAMCA
- o To assist TDR in providing guidance to countries (researchers, policy makers and other relevant stakeholders) to lay the foundation and tools necessary for translation and uptake of One Health strategies and strengthened capacity for integrating human, animal and ecosystem health
- o Preparation of a publication and research dissemination plan
- Participation at the 26 th Tripartite Annual Executive Meeting on One Health, WHO Headquarters, Geneva, 12-13 February 2020
 - o Objective of the meeting: to discuss critical issues at a political and strategic level, review progress and address bottlenecks
 - o TDR presented its One Health research portfolio in the Session on One Health Research as part of information sharing among partners with an interest to strengthen collaborative research activities on specific topics and methodologies
 - o Presented were the One Health research portfolio on Antimicrobial Resistance and the projects on vector borne diseases and climate change
- Participation of TDR in the Virtual 2 nd Meeting of the Interagency Liaison Group on Biodiversity and Health, 4-6 May 2020
 - o This meeting was hosted by the Department of Environment, Climate Change and Health and the Convention on Biological Diversity (CBD)
 - o Contributed to the finalized Guidance

for mainstreaming biodiversity for nutrition and health o Contributed to the WHO Q&A on climate and health, and post COVID recovery o Contributed to the WHO Q&A on biodiversity, health and infectious diseases o Discussed how to leverage joint WHO-CBD work programme on biodiversity and health can be aligned in the context of COVID 19 o Contributed towards the preparation of a Draft Global Plan of action on Biodiversity and Health, including addition of key elements of the biodiversity-inclusive One Health Guidance · Completion of a Virtual Writeshop with principal investigators (from Cote d'Ivoire, Kenya, South Africa and Tanzania) on 8, 16, 22 and 29 July 2020; 10.30-12.00 CET o To develop workplans for pilot testing the Draft Plan for One Health including the use of the scorecard/metrics system o Proposals submitted to TDR by 1 August 2020; contracts processed, with projects starting by the 1 st week of Sep 2020 for a duration of 1 year. Please see below for an annotated list of projects; see also Proposed Pathway/Logic Model for the 4 Projects.

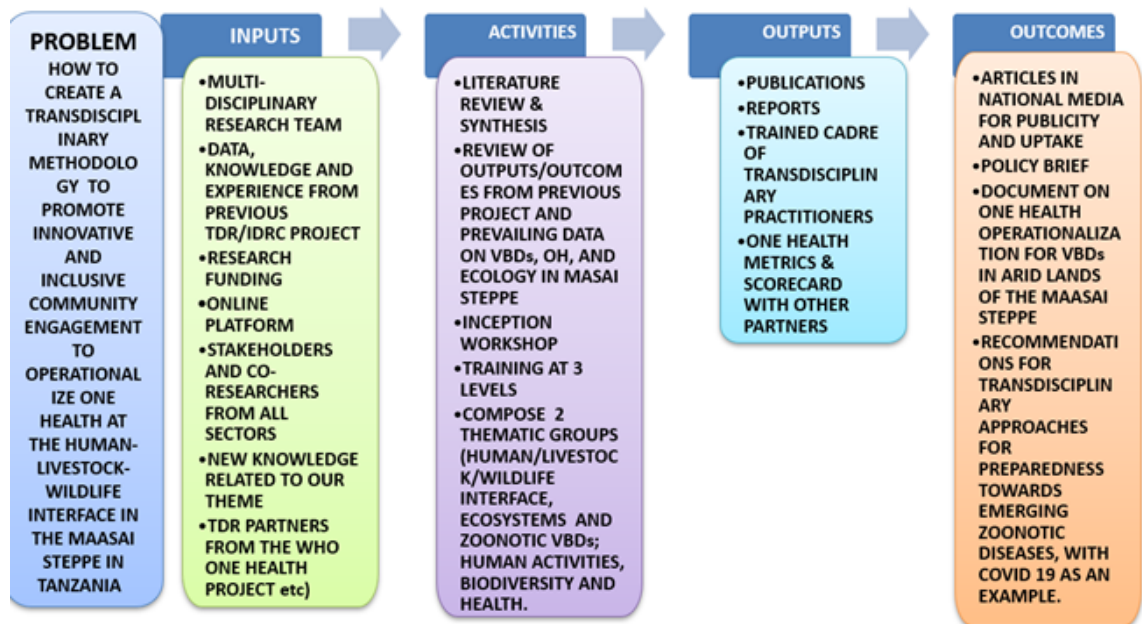
Project 1. From an Ecohealth research project to operationalizing One Health approach in West Africa (Cote d'Ivoire and Mauritania) Principal Investigator: Dr Brama KONE , Centre Suisse de Recherches Scientifiques en Côte d'Ivoire (CSRS), Abidjan, Côte d'Ivoire o Main objective. To operationalize a One Health approach through the assessment of capacity building needs among stakeholders, activities and outcomes of knowledge and learning process and risk management strategies o Specific objectives: § To analyse the actors (governance, organizations) and resources, capacity building activities and their outcomes, employing socio ecological systems analytical methods and stakeholder analysis § To assess the effectiveness of the EcoHealth approach principles in the implementation of One Health intervention science and risk management scorecard components § To Investigate how the previous project results and experience with Malaria and Schistosomiasis interventions, and the role of public versus private health facilities could guide interventions to improve health systems disease risk management capacity, considering OneHealth approach, taking as example the zoonotic disease COVID-19 Demonstrable impact management

RES. QUEST.	SPEC. OBJ.	INPUTS	METHODS / ACTIVITIES	OUTPUTS	SOURCE OF VERIFICATION	OUTCOMES
HOW TO CREATE STANDARDIZED (REPEATABLE) AND MEASURABLE TRANSFORMATIONARY METHODOLOGY / APPROACH, INCLUDING ONEHEALTH TO TACKLE ZOOINOTIC AND OTHER SOCIO-ENVIRONMENTAL DISEASES, DRAWING ON THE EXISTING ECOHEALTH RESEARCH PROJECTS?	S01	- MTV-CC Project dissertations (Masters and PhDs), reports, publications and other documents (previous Ecohealth project implemented in Korhogo) - Other literature - MTV-CC project team members	- Project dissertations (Masters and PhDs), reports, publications and other documents review - Other literature review - Paper writing workshop - Participation to thematic working groups	- Proof of concept validating the OneHealth scorecard capacity building component from the MTV-CC project	- Project reports - Scientific publications - Workshops' reports	- ONE HEALTH OPERATIONALIZED FOR VBD CONTROL & PREVENTION IN THE CONTEXT OF CLIMATE CHANGE
	S02	- Project dissertations (Masters and PhDs), reports, publications and other documents (previous Ecohealth project implemented in Korhogo) - Other literature - MTV-CC project team members	- Project dissertations (Masters and PhDs), reports, publications and other documents review - Other literature review - Paper writing workshop - Participation to thematic working groups	- Proof of concept validating the OneHealth scorecard intervention science and risk management components from the MTV-CC project	- Project reports - Scientific publications - Workshops' reports	- BROADER APPLICATION OF THE ONE HEALTH OPERATIONALIZATION TO ZOOINOTIC AND OTHER EMERGING/R E-EMERGING INFECTIONS (INCLUDING COVID 19)
	S03	- MTV-CC project Stakeholders - Project dissertations (Masters and PhDs), reports, publications and other documents (previous Ecohealth project implemented in Korhogo) - Other literature - MTV-CC project team members	- Remote/Face to face interviews with community leaders and key informants from private and public health centers and health system (District health actors) in the management of Malaria, schistosomiasis and Covid-19 pandemic - Literature review - Paper writing workshop - Result dissemination workshop - Participation to thematic working groups	- Impact of the MTV-CC project on diseases management at community and Health system levels - Lessons from Covid-19 management - Proof of concept validating the OneHealth scorecard impact and risk components from the MTV-CC project	- Project reports - Workshops' reports - Scientific publications	
	S04	- MTV-CC project Stakeholders - Recorded videos during MTV-CC project implementation - Other projects leaders/team members from the ongoing initiative	- Video recording with researchers and other project stakeholders in Côte d'Ivoire and Mauritania on project implementation process and lessons learned for operationalizing OneHealth scorecard	- Video documentary	Video	

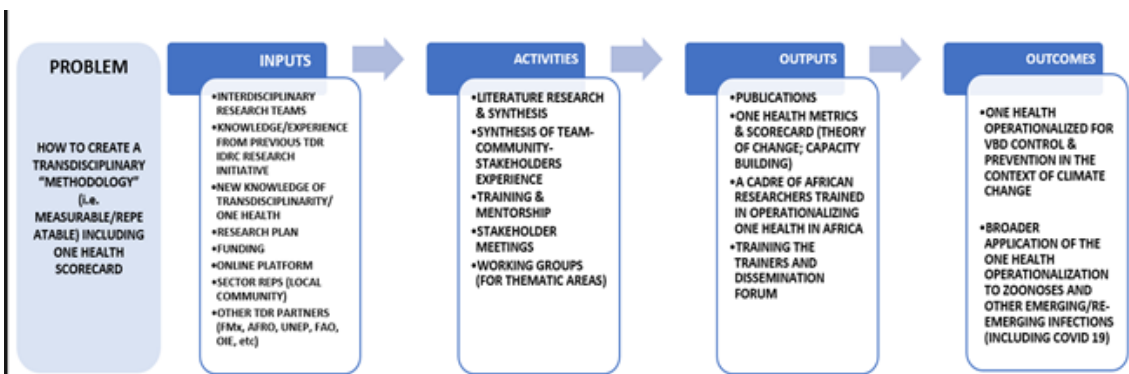
Project 2. Operationalizing One Health Initiative for Malaria and Rift Valley Fever Project in Kenya Principal Investigator: Professor Benson B.A. ESTAMBALE , Research, Innovation and Outreach, Jaramogi Oginga Odinga University of Science and Technology, Bondo, Kenya o Main objective. To contribute to the operationalization of a One Health Research protocol for Implementation Research o Specific objectives: § To synthesize the existing project data based on a One Health Approach and guided by the tenets of social-ecological systems framework (SESF). § To build the capacity of the project team on the One Health Approach to climate sensitive vector borne disease research. § To publish synthesized research papers based on the One Health Approach which incorporates findings from the project.



Project 3. One Health Operationalization in Tanzania Principal Investigator: Professor Paul S. GWAKISA , The Genome Science Centre and Department of Veterinary Microbiology and Parasitology, Faculty of Veterinary Medicine, Sokoine University of Agriculture, Morogoro, Tanzania o Specific objectives: § To build capacity for transdisciplinary research for operationalizing One health at different levels (community level/extension workers/postgraduates and young researchers). § To work closely with all stakeholders and develop a framework for addressing key one health-based community needs using a Theory of Change approach (eg, the human-livestock-wildlife interface and zoonotic diseases). § To collaboratively develop a metrics-based assessment of a One Health scorecard.



Project 4. Operationalizing One Health in Ingwavuma Community: Developing Transdisciplinarity Methodology (South Africa) Principal Investigator: Professor Moses J. CHIMBARI, College of Health Sciences, University of Kwazulu-Natal, Durban, South Africa o Main objective. To address capacity development, knowledge and learning and threat management for operationalizing One Health in South Africa o Specific objectives: § To enhance and develop capacity at different levels for operationalizing One Health § To co-develop a theory of change with stakeholders to easily identify priority areas for research and intervention § To identify hurdles to full empowerment of communities through a co-development of a monitoring and evaluation framework



Scientific Session at the recent virtual World One Health Congress 2020, 30 Oct-3 Nov 2020. The title of the session was A Metrics Based Evaluation of One Health: Toward Control of VBDs in the context of Climate Change in Africa. This session brought together 6 scientist-leads (from Bangkok, Germany, Cote d'Ivoire, Kenya, South Africa and Tanzania) to further articulate the fundamentals of One Health and to draw insights into the conduct of integrative research using One Health transdisciplinary systems approaches including pilot testing a scorecard/metrics-based evaluation for its operationalization. For more information on this Scientific Session, please refer to <https://www.fondation-merieux.org/en/events/6th-world-one-health-congress-2020-virtual-event/>. For more information on the One Health scorecard, please refer to <https://onehealthscorecard.org/>.



Aside from the Scientific Session on One Health at the virtual WOHC 2020 (mentioned above), TDR also participated in another Scientific Session, 'Addressing zoonotic diseases at the animal-human-ecosystem interface: responding to threats', as part of the Science Policy Interface (Global Health Security) - see figure below.

Approach to ensure quality:

VES will collaborate with WHO-PHE, WHO Regional Office for Africa (AFRO), through the Department of Protection of Human Environment (PHE), UN Environment, FAO-Africa, OIE-Africa and Fondation Merieux for implementation of the programme by ensuring that project outcomes feed into national climate change and health policy processes. Uniqueness Building on previous projects from ER 1.3.3, TDR's unit on Research for Implementation is best positioned for research and capacity building toward operationalizing an integrated, multisectoral and holistic One Health approach for the control of VBDs in the context of climate change. Through TDR's convening and facilitation role, various partners and stakeholders from different sectors are brought together for the One Health approach which is envisioned as a novel, essential policy and management tool (including a metrics/scorecard system) for the control of VBDs at a time of changing environment/climate conditions in Africa.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$400,000	\$300,000	\$700,000	\$500,000	\$400,000	\$900,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$500,000	\$ 0	\$500,000	\$343,232	\$ 0	\$343,232

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$400,000	\$ 0	\$400,000	\$600,000		\$600,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$400,000	\$ 0	\$400,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0023

To operationalize and implement a One Health approach, embedded into the health and environment strategic alliance of country task teams, to enable African countries to manage the impact of VBDs in the context of climate change

ER Biennium Risks

2020-2021

ERRisk - 0037

Risk description:	Health researchers and other stakeholders may find it difficult to work under transdisciplinary circumstances (e.g. climate, agriculture, etc). Of particular note is the current COVID pandemic which presents another layer of challenge for project implemen
Actions to mitigate risk:	The cross sectoral approach will be promoted from the outset as an essential aspect required of the proposals and throughout the projects.
Mitigation status:	On Track

ERRisk - 0089

Risk description:	Knowledge translation outcomes are usually not under the control or influence of projects. Of particular note is the current COVID pandemic which presents another layer of challenge for project implementation.
Actions to mitigate risk:	For this research programme, stakeholders, including from the affected communities and policy/decision-makers, will be engaged from the very beginning at the inception and during the course and completion of the research projects to ensure their active involvement in conducting and reporting on the research on the research with the expectation that the results will be utilized as effectively as possible. It is anticipated that the periodic review of successes and failures of the projects and of the implementation of the research programme will allow timely remediation to potential problems that might occur during the course of the implementation of the projects.
Mitigation status:	On Track

2022-2023

n/a

ER Biennium Outputs

2020-2021

EROutp-0183

Output description:	Multisectoral country task teams established to implement a One Health approach to increase resilience to vector borne diseases under climate change conditions
Output indicator:	1-2 functional country task teams implementing the One Health approach
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Country teams are currently being put together, building on existing networks and communities of practice

EROutp-0131

Output description:	Pilot test the draft plan for Operationalizing One Health
Output indicator:	Country projects pilot testing the draft plan and applying the metrics/scorecard system
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Four countries in Africa are currently pilot testing the draft plan

EROutp-0079

Output description:	Development of a draft plan for a One Health approach
Output indicator:	Draft plan for operationalizing a One Health approach including a metrics based assessment tool
Target date:	31.03.2020
Progress status:	On Track
Progress description:	The draft plan is now ready for pilot testing

EROutp-0235

Output description:	Develop and implement a metrics-based assessment to evaluate progress with implementation of the One Health approach
Output indicator:	Metric framework generated and scorecards used
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Four African countries would have validated the use and application of the metrics framework and scorecards for Operationalizing One Health

2022-2023

n/a

ER Biennium Outcomes

2020-2021

EROutc-0037

Outcome description:	Pilot testing of draft plan for Operationalizing One Health
Progress made towards outcome:	Projects in African countries are ongoing

2022-2023

n/a

Expected Result: 1.3.8

Title: Developed, pilot-tested and replicated an innovative training course for capacity building on gender-based analysis in vector-borne disease research and potential others infectious diseases of poverty.

Strategic Work Area: Research for implementation Workstream:

ER type: New Funding type:

Start date: 01.07.2015 End date: 31.12.2020

ER status: Completed Comment:

WHO region:

Partners: WHO-PHE, TDR RCS-KM (through the TDR-supported Regional Training Centres)

Diseases:

Review mechanism: RTCs in Colombia, Indonesia, Kazakhstan, Philippines and Ghana

ER manager:

Team: Bernadette RAMIREZ, Pascal Launois, Madhavi Jaccard-Sahgal, Florence Fouque

Number of people working on projects:

FENSA clearance obtained for all Non-State Actors? No

Justification for no FENSA clearance:

TDR partnership criteria

Add value:	Yes	Use resources:	
Align goals:	Yes	Address knowledge gaps:	
Integrate mandates:	Yes	Build strengths:	
Reduce burden:		Foster networking:	Yes
Increase visibility:			

TDR partnership criteria indicators

Objectives aligned:

Roles complimentary:

Coordination transparent:

Visibility:

Objectives and results chain

Approach to ensure uptake:	TDR and its collaborating partners will proactively engage with the RTCs for the design, pilot-testing and re-design as well as upscale of the training course on gender-based analysis.
Up-take/Use Indicator:	Training course adopted and implemented by the RTCs or other interested research institutions
Gender and geographic equity:	This project addresses a gap in the technical capacity required for incorporating gender-based analysis in research.
Publication plan:	Reports to be shared among the collaborating partners, SWG and RTCs, web-version of the training course

Sustainable Development Goals

Concept and approach

Rationale:	It was identified a need to strengthen research capacities in order to conduct gender-analysis and identify sex-disaggregated data within their research activities and projects.
Design and methodology:	Incorporating gender analysis in vector-borne disease research requires technical capacity among researchers. This technical capacity is limited, especially in the disease endemic countries. Thus, capacity-building in this area is a gap that needs to be filled. Incorporating gender analysis in vector-borne disease research requires technical capacity among researchers. This technical capacity is limited, especially in the disease endemic countries. Thus, capacity-building in this area is a gap that needs to be filled. We therefore propose to manage and coordinate the development of a training course for capacity building on gender-based analysis in vector-borne disease research. The target audience for this training are researchers and policy-makers from disease-endemic countries. Further to this, we plan to support a delivery method of learning that will deviate from the traditional concept, that is, an innovative global classroom approach. In the innovative global classroom approach, we envision the use of online learning e.g. use of web conferencing, video conferencing, discussion forum, use of blogs (and blog moderation); use of social media for assignments, assign reading and other class-related activities. We therefore propose to manage and coordinate the development of a training course for capacity building on gender-based analysis in vector-borne disease research. The target audience for this training are researchers and policy-makers from disease-endemic countries. Further to this, we plan to support a delivery method of learning that will deviate from the traditional concept, that is, an innovative global classroom approach. In the innovative global classroom approach, we envision the use of online learning e.g. use of web conferencing, video conferencing, discussion forum, use of blogs (and blog moderation); use of social media for assignments, assign reading and other class-related activities.
Approach to ensure quality:	TDR and collaborating institutions/partners, in interaction with research institutions, will conduct research and analysis advice activities to promote gender-based analysis within the products generated from the research programme.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
		\$ 0			\$ 0
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
		\$ 0	\$ 0	\$ 0	\$ 0
2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0029

The goal of this project is to develop and pilot-test a training course for capacity building on gender-based analysis in vector-borne disease research using an innovative global classroom approach. The specific objectives are: 1) to develop a training course on gender-based analysis based on an innovative global classroom approach, 2) to pilot-test the course and evaluate the feasibility of its implementation and 3) to improve on the design and delivery of such course.

ER Biennium Risks

2020-2021

n/a

2022-2023

n/a

ER Biennium Outputs

2020-2021

n/a

2022-2023

n/a

ER Biennium Outcomes

2020-2021

n/a

2022-2023

n/a

Expected Result: 1.3.10

Title: Urban health interventions for the prevention and control of vector-borne and other infectious diseases of poverty

Strategic Work Area: Research for implementation		Workstream: Research for implementation	
ER type:	Continuing	Funding type:	UD
Start date:	01.01.2020	End date:	31.12.2021
ER status:	On Track	Comment:	Previous project under this expected result was finalized last year and following SWG 2019 recommendations, in 2020 a new call for proposals was launched.
WHO region:	Global		
Partners:	Universities and research consortium in Latin America		
Diseases:	Vector-borne diseases; Not Disease-Specific		
Review mechanism:	Scientific working group and ad hoc expert reviewers		
ER manager:	Mariam OTMANI DEL BARRIO		
Team:	Abraham Aseffa, Bernadette Ramirez		
Number of people working on projects:			

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: All partners are State-actors for now

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes
Roles complimentary:	Yes
Coordination transparent:	Yes
Visibility:	Yes

Objectives and results chain

Approach to ensure uptake:	Evidence generated will also inform the development of information briefs for policy and practice. Local decision-makers will be part of the community engagement strategy in the implementation phase. In addition to oversight by an expert committee, quality
Up-take/Use Indicator:	Increased national, regional and international attention triggered through research results; number of reports and publications generated; number of meetings with decision-makers at local level
Gender and geographic equity:	Intersectional gender analysis will be applied and tools facilitated by the TDR team for local researchers to ensure disaggregated data.
Publication plan:	Literature reviews planned to be published in peer review journal.

Up-take/use
indicator target
date:

31.12.2021

Sustainable Development Goals

Gender Equality; Reduced Inequality; Sustainable Cities and Communities

Concept and approach

Rationale:	Urban health interventions to prevent and control infectious diseases would benefit from incorporating a gender analysis in order to understand bottlenecks in implementation of interventions and to ensure that social determinants of health are addressed to design effective prevention and control strategies for all urban settings.
Design and methodology:	Design and methods following proposal selection.
Approach to ensure quality:	An ad-hoc review committee will assess suitability of proposals to conduct the literature reviews. SWG members will be also updated on progress made.

Biennium budgets

2020-2021

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$150,000	\$ 0	\$150,000	\$300,000	\$ 0	\$300,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$150,000	\$ 0	\$150,000	\$62,500	\$ 0	\$62,500
2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$150,000	\$ 0	\$150,000	\$250,000	\$ 0	\$250,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$150,000	\$ 0	\$150,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0014

To generate new knowledge and evidence generated on effectiveness of interventions to prevent and control vector-borne diseases by addressing socioeconomic determinants in health in urban settings

ER Biennium Risks

2020-2021

ERRisk - 0033

Risk description:	Weak capacities at country level to effectively apply an intersectional gender analysis in research processes
Actions to mitigate risk:	Ensuring interdisciplinary teams, with social scientists and biomedical scientists and entomologists
Mitigation status:	On Track

2022-2023

n/a

ER Biennium Outputs

2020-2021

EROutp-0127

Output description:	Evidence review on human mobility in urban areas and its impact on disease transmission (particularly dengue and Chikungunya)
Output indicator:	Evidence generated from 2 different selected research teams in a specific location which has experienced recent demographic increase, addressing urban health issues in tropical diseases
Target date:	31.12.2021
Progress status:	On Track
Progress description:	This project under this expected result was finalized last year and following SWG 2019 recommendations and the current covid19 pandemic, in 2020 a new call for proposals was launched covering a broader theme of focus under this expected result and inviting institutions working on public health, urban health, implementation research and infectious disease prevention and control, to submit individual or collaborative proposals where two or more institutions are forming a consortium, to explore social and gender dynamics in urban health contexts.

The call responds to the need to recognize that urban health is influenced by several factors, including governance, population features, urban planning and socioeconomic development and health services, among others, which in turn have major implications for social and environmental determinants of health. The overall objective of this work is to synthesize and consolidate evidence from a series of literature reviews /state-of-the-art scoping reviews that will inform TDR's research agenda on urban health, infectious disease and gender research, including in COVID-19 and post-COVID-19 scenarios to the extent possible. The call is entitled: Literature reviews and research gap analysis on social determinants of urban health; the call is also expected to illustrate to the extent possible, how social and gender dynamics in a COVID-19 context affect the prevention and control of infectious diseases of poverty.

EROutp-0075

Output description:	New knowledge and evidence generated on effectiveness of interventions at household level to prevent and control vector-borne diseases by addressing identified socioeconomic determinants of health in urban settings
Output indicator:	Evidence published from 2 different selected research teams in a selected country in Latin America, addressing urban health issues in tropical diseases
Target date:	31.12.2021
Progress status:	On Track
Progress description:	This project under this expected result was finalized last year and following SWG 2019 recommendations and the current covid19 pandemic, in 2020 a new call for proposals was launched covering a broader theme of focus under this expected result and inviting institutions working on public health, urban health, implementation research and infectious disease prevention and control, to submit individual or collaborative proposals where two or more institutions are forming a consortium, to explore social and gender dynamics in urban health contexts.

The call responds to the need to recognize that urban health is influenced by several factors, including governance, population features, urban planning and socioeconomic development and health services, among others, which in turn have major implications for social and environmental determinants of health. The call is entitled: Literature reviews and research gap analysis on social determinants of urban health; the call is also expected to illustrate to the extent possible, how social and gender dynamics in a COVID-19 context affect the prevention and control of infectious diseases of poverty.

2022-2023

n/a

2020-2021

EROutc-0033

Outcome description:	Evidence generated to inform policy and practice on control of infectious diseases in urban settings in low- and middle-income countries
Progress made towards outcome:	call for proposals launched to conduct literature reviews and research gap analysis on social determinants of urban health; the call is also expected to illustrate to the extent possible, how social and gender dynamics in a COVID-19 context affect the prevention and control of infectious diseases of poverty.

2022-2023

n/a

Expected Result: 1.3.11

Title: Multi-sectoral Approach (MSA) for prevention and control of vector-borne diseases

Strategic Work Area: Research for implementation		Workstream: Research for integrated approaches	
ER type:	Continuing	Funding type:	UD and DF
Start date:	01.01.2020	End date:	31.12.2023
ER status:	On Track	Comment:	No major delays regarding planning and due to COVID-19 situation.
WHO region:	Global		
Partners:	Sweden International Development Agency (Sida), WASH/PHE/WHO Team UNPeace and Development Funds Global Malaria Programme/WHO		
Diseases:	Arboviral diseases; Arboviruses; Chikungunya; Dengue; Malaria; Neglected Tropical Diseases; Vector-borne diseases; Zika virus		
Review mechanism:	Through ad hoc expert review and steering groups, approved by TDR senior management and TDR advisory bodies, including SWG, STAC and JCB		
ER manager:	Florence FOUQUE		
Team:	Abdul Masoudi		
Number of people working on projects:	1		

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: FENSA Clearance will be sought for all Non-State Actors as the ER is progressing and contracting new institutions to perform the work.

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Objectives aligned with TDR strategy and the strategy of the partners.
Roles complimentary:	Yes	Roles and complementary of partners achieved through the different work packages and deliverables of the ER.
Coordination transparent:	Yes	Transparent coordination through open meetings with minutes available and transparent decision process
Visibility:	Yes	The visibility of the ER is through all communication channels and materials from all partners

Objectives and results chain

Approach to ensure uptake:	To ensure the uptake of the findings and their application into countries, the different activities performed through this ER are involving since the planning stage all the relevant stakeholders. The WHO collaborating partner of the ER, namely WASH/WHO al
Up-take/Use Indicator:	The indicator for uptake will be the number of countries for which a multisectoral approach for preventing and controlling VBDs will be developed, based on the TDR framework, tested and evaluated with indicators developed through this ER.

Gender and geographic equity:	Gender and geographical equities are taken into account in all activities among which the building of the ad hoc review groups, the consultancies and in the selection criteria of the research teams.
Publication plan:	The publication plan include guidance documents that will be updated regularly, thematic briefs, scientific publications in open access peer review journals (with special issues) and other materials such as training materials and briefs for stakeholders (
Up-take/use indicator target date:	31.12.2023

Sustainable Development Goals

Good Health and Well-being; Clean Water and Sanitation; Partnerships to achieve the Goal

Concept and approach

Rationale:	<p>Vector-borne diseases, including malaria and emerging arboviral diseases, account for about one quarter of all infectious diseases. Although there has been significant progress for malaria, with a recent decrease in malaria morbidity and mortality rates, other diseases, such as those caused by arboviruses like dengue, chikungunya, yellow fever and more recently Zika, are expanding, with an increased number of cases and fatalities. It has become evident that the prevention and control of these diseases must include more than a single orientated approach, since the transmission patterns are driven by vector host-pathogens relationship where natural conditions, human societies and vector parameters are dynamically interacting. Further, the Global vector control response (GVCR) 2017-2030, which was approved at the World Health Assembly in 2017 by more than 190 Member States (WHO 2017) consider the intra- and intersectoral approach as one of the 4 pillars to achieve efficient vector and vector-borne diseases control. The rationale of this expected result is to work with all partners to develop tools, framework and guidance on how to implement an efficient multisectoral approach (MSA) for preventing and controlling vector-borne diseases (VBDs) as well as test into field conditions and case studies the MSA. This activity is building up on the Multisectoral Action Framework for Malaria (MAFM) developed by the Roll Back Malaria (RBM) Partnership and the United Nations Development Programme (UNDP), and a concept Note was issued by the Swiss Tropical Public Health (STPH) institute and the Swiss Development Cooperation (SDC) entitled: "Leveraging the Sustainable development Goals to intensify transdisciplinary & multisectoral collaboration in the global malaria response. In this context, a collaboration on Multi-Sectoral Approach (MSA) for the prevention and control of malaria and emerging arboviral diseases was started between the Swiss Agency for Development and Cooperation (SDC), the Canadian International Development and Research Centre (IDRC), the Swiss Tropical and Public Health Institute (Swiss TPH) and TDR/VES, to build a multi-disciplinary approach to support commissioned reviews on specific items related to MSA against VBDs, and the development of a Guidance document. Following these first steps a collaboration was established with the WHO Water and Sanitation (WASH) group and supported by funding from the Sweden International Development Agency (Sida) to strengthen countries capacity on MSA against VBDs with a focus on the WASH sector. The overall objectives of the collaboration are to reduce WASH-related disease of poverty as per the WHO WASH Group strategy, with a primary focus on VBDs, as per TDR Strategy including through the progressive mainstreaming of WASH in TDR, and throughout WHO.</p>
Design and methodology:	<p>To promote the MSA and define the conceptual framework and indicators on how to deploy a MSA for VBDs prevention and control, an action plan with several steps was started in 2016:</p> <p>Step 1 was to gather evidence through a landscape analysis through commissioned reviews.</p> <p>Step 2 was to convene a workshop to present the evidence to a panel of experts and to discuss the research on case studies, stakeholder involvement, capacity-building needs and any other topic that may put the MSA into concrete actions.</p> <p>Step 3 was to develop a guidance Framework for countries on how to implement MSA.</p> <p>Step 4 is to support the cases studies. Within the current collaboration with the WHO WASH Team, other activities were added that can be found in the approved concept note attached.</p>
Approach to ensure quality:	<p>The following approaches were taken to ensure quality of the expected results: 1. The objectives, planning, activities and budget of the ER is aligned with TDR strategy and was approved by TDR governing bodies. 2. The groups of experts were invited based on their competencies and experience and approved as per TDR SoPs. All experts accepting to be part of a group completed their DOIs and COIs. 3. The Guidance Document was developed by a consultant, with external and internal reviews, external editing, final check and WHO publication clearance system. 4. For the selection and following up of</p>

research proposals, review and steering groups of external experts were established and approved accordingly. 5. The quality of the findings is reviewed by the selected experts groups through mid-term and final reports and published in open access peer review scientific journals .

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$400,000		\$400,000	\$500,000		\$500,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$400,000	\$1,000,000	\$1,400,000	\$385,258	\$2,497	\$387,755

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$200,000	\$200,000	\$400,000	\$300,000	\$300,000	\$600,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$200,000	\$200,000	\$400,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0015

1. Support research activities on case studies implementing MSA approaches for several chosen diseases and contexts, following the topics already established in the previous part of this ER, which are: i) industrial activities and VBD transmission, with a special focus on gold-mining activities that are strongly disturbing the malaria ecosystems; ii) integrated vector control strategies using Dengue Virus as a proxy; iii) displacement of people and consequences on VBD transmission, with impact of migration (for economic or civil unrest or war reasons), displacement of temporary workers and any other population movements; iv) impact of environmental changes including climatic changes, biological changes such as biodiversity loss and consequences on VBDs cycles and social changes also taking into account water management; and v) intersectoral collaborations for prevention and control of VBDs and how stakeholders are working together to achieve the implementation of a global strategy.

ERObj-0016

2. Help countries to deploy MSA through capacity building activities, guidance documents, networking and workshops.

ER Biennium Risks

2020-2021

ERRisk - 0034

Risk description:	Calls for applications do not result in proposals that support the requested criteria
Actions to mitigate risk:	Work with the most promising applications to improve them
Mitigation status:	Completed

ERRisk - 0086

Risk description:	Insufficient involvement of stakeholders
Actions to mitigate risk:	Understand (through a consultancy work) which barriers are acting at stakeholders level and which incentive should be developed to improve involvement
Mitigation status:	Completed

ERRisk - 0210

Risk description:	The deployment of multisectoral approach for preventing and controlling VBDs at the country level is delayed due to the COVID pressure on health systems.
Actions to mitigate risk:	Optimize the planning of activities to introduce the new approaches when the health systems can take them.
Mitigation status:	On Track

2022-2023

ERRisk - 0255

Risk description:	Delayed in the implementation of the activities due to the situation of the countries health system within the COVID pandemic
Actions to mitigate risk:	Monitor closely the activities and update the implementation according to the situation
Mitigation status:	Planning phase

ER Biennium Outputs

2020-2021

EROutp-0128

Output description:	MSA for prevention and control of VBDs implemented in some countries for some VBDs
Output indicator:	5 countries implementing multisectoral approaches, with monitoring and evaluation of epidemiological results
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Already 6 countries included into the first 2 case studies, and more countries included through a second call for application

EROutp-0076

Output description:	Knowledge and evidence for MSA generated and made available for stakeholders
Output indicator:	A guidance framework document published; 2 to 3 case studies supported and ongoing
Target date:	31.12.2021
Progress status:	Completed
Progress description:	Guidance document released in April 2020. Case studies funded and starting in September 2021.

EROutp-0252

Output description:	Training materials available for the countries to implement and deploy MSA for prevention and control of VBDs
Output indicator:	Number and type of training materials
Target date:	31.12.2021
Progress status:	On Track
Progress description:	The development of the materials was started in collaboration with the WHO WASH group

2022-2023

EROutp-0314

Output description:	Documentation for training stakeholders from the National Malaria Control Programmes on how to implement a MSA for malaria control available
Output indicator:	Number of countries having used and received the training documentation
Target date:	31.12.2023
Progress status:	On Track
Progress description:	This activity will be implemented within the project supported by UNPDF in collaboration with the WHO Global Malaria Programme

EROutp-0313

Output description:	New Case studies implemented in malaria control in several African countries
Output indicator:	Number of countries with MSA approach against malaria initiated
Target date:	31.12.2023
Progress status:	On Track
Progress description:	The activity will be under the UNDPF Funds approved in January 2021 and in collaboration with the WHO Global Malaria Program

ER Biennium Outcomes

2020-2021**EROutc-0034**

Outcome description:	1) Research priorities on MSA for prevention and control of VBDs defined. 2) Materials to implement MSA at regional and country levels available. 3) Countries implementing MSA for prevention and control of VBDs.
Progress made towards outcome:	On track

2022-2023**EROutc-0081**

Outcome description:	African countries strengthened for the implementation of multisectoral approaches for the control of malaria, through capacity building of the stakeholder and support in the deployment of the interventions
Progress made towards outcome:	On track

Expected Result: 1.3.12

Title: Strategies to promote gender-responsive health interventions on prevention and control of infectious diseases of poverty

Strategic Work Area: Research for implementation		Workstream: Research for implementation	
ER type:	Continuing	Funding type:	UD
Start date:	01.01.2018	End date:	31.12.2023
ER status:	On Track	Comment:	
WHO region:	Global		
Partners:	Research teams in countries; WHO and other entities working on gender and public health (e.g. WHO/GER, WHO/HRP; WHO Alliance for Health Systems Research); Health programmes interested in and using research evidence		
Diseases:	Vector-borne diseases; Not Disease-Specific		
Review mechanism:	Scientific working group plus ad hoc review group(s) dealing with specific calls		
ER manager:	Mariam OTMANI DEL BARRIO		
Team:	Bernadette Ramirez, Abraham Aseffa		
Number of people working on projects:	10		

FENSA clearance obtained for all Non-State Actors? No

Justification for no FENSA clearance: Not applicable

TDR partnership criteria

Add value:	Yes	Use resources:	
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	
Reduce burden:		Foster networking:	Yes
Increase visibility:			

TDR partnership criteria indicators

Objectives aligned:	Completed
Roles complimentary:	Completed
Coordination transparent:	Completed
Visibility:	Completed

Objectives and results chain

Approach to ensure uptake:	Engagement with senior management at universities; research teams that involve at least 50% women, engagement with various ministries and public health services
Up-take/Use Indicator:	Engagement with ministry officials, including MoH, MoFA and MoEd
Gender and geographic equity:	Gender parity will be ensured when establishing external review panels, convening meetings of experts, issuing contracts, and in general within all of our collaborations.
Publication plan:	Peer review publication of a Toolkit to conduct intersectional gender

Sustainable Development Goals

Good Health and Well-being; Gender Equality; Reduced Inequality

Concept and approach

Rationale:	Great progress has been made towards combatting infectious diseases of poverty (IDPs). However, considerable public health challenges remain, including gender and intersecting inequalities that affect health conditions associated with infectious diseases. This ER focuses on gender intersecting inequalities that influence differentials in vulnerability to, and the impact of, particular health conditions associated with infectious diseases in low- and middle-income countries. This expected result recognizes that gender norms, roles and relations influence people's susceptibility to different health conditions and they also have a bearing on people's access to and uptake of health services, and on the health outcomes they experience throughout the life-course. It also acknowledges that WHO has recently recognized the importance of being sensitive to different identities that do not necessarily fit into binary male or female sex categories. In this context, delivery and access to prevention and control approaches and products to prevent and control infectious diseases should not be one-size-fits all but instead should benefit from approaches that take into account the complex interaction of several social stratifiers, and their influence in health outcomes. There is growing recognition that gender roles, gender identity, gender relations, apart from institutionalized gender inequality influence the way in which an implementation strategy works (e.g. for whom, how and why). There is also emerging evidence that programmes may operate differently within and across sexes, gender identities and other intersectional characteristics under different circumstances and contexts. Research should inform implementation strategies to avoid ignoring gender-related dynamics that influence if and how an implementation strategy works. Therefore scientists, including those focusing on research for implementation, would benefit from adequately considering sex and gender intersecting social dimensions within their research programmes, by strengthening both the practice and science of implementation, and by contributing to improved health outcomes and reduction of gender and health inequalities.
Design and methodology:	1. Development and pilot of a toolkit on intersectional gender analysis in research on infectious diseases of poverty. 2. Methodologies and gender analysis frameworks will be detailed and explained within the above-mentioned toolkit and presented in a practical "hands-on" toolkit for researchers to incorporate a gender analysis with an intersectional lens, throughout the whole research process, from research study design to the dissemination of research findings stage.
Approach to ensure quality:	Oversight by expert committee and quality assurance through fact checking, peer review of documentation, technical and copy editing.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$300,000	\$300,000	\$600,000	\$550,000	\$300,000	\$850,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$400,000	\$ 0	\$400,000	\$102,107	\$ 0	\$102,107
2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$300,000	\$100,000	\$400,000	\$500,000	\$100,000	\$600,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$300,000	\$100,000	\$400,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0017

Strengthen research capacities and provide innovative tools to generate evidence that informs the design and implementation of gender responsive health interventions to control and prevent infectious diseases of poverty.

ERObj- 0050

from 2021: Utilize research capacities and innovative tools built to generate evidence that informs the design and implementation of gender responsive health interventions to control and prevent infectious diseases of poverty.

ER Biennium Risks

2020-2021

ERRisk - 0035

Risk description:	Knowledge translation outcomes on gender equality are usually beyond the control or influence of projects
Actions to mitigate risk:	For this programme stakeholders, including from the affected communities, research teams and policy/decision-makers, will be engaged from the beginning and during the course and completion of the projects to ensure their active involvement with the expectation that the results will be utilized as effectively as possible

2022-2023

ERRisk - 0223

Risk description:	Knowledge translation outcomes on gender equality are usually beyond the control or influence of projects
Actions to mitigate risk:	For this programme stakeholders, including from the affected communities, research teams and policy/decision-makers, will be engaged from the beginning and during the course and completion of the projects to ensure their active involvement with the expectation that the results will be utilized as effectively as possible
Mitigation status:	Planning phase

ER Biennium Outputs

2020-2021

EROutp-0181

Output description:	Developed, implemented and disseminated a TDR Strategy/Strategic Plan on gender and intersectionality on infectious diseases of poverty
Output indicator:	TDR Strategy/Strategic Plan on Gender and Intersectionality launched and disseminated in regions
Target date:	30.06.2021
Progress status:	On Track
Progress description:	TDR Intersectional Gender research strategy developed and launched in June 2020; currently being implemented and disseminated across regions.

EROutp-0129

Output description:	Upscaled training course modules on gender-based analysis in research on vector-borne diseases and climate change
Output indicator:	2 courses included in at least 2 university curricula or TDR regional training centres' curricula
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Training course incorporated in the curricula of the Master's of Public Health Studies at the University of Ghana and in process of institutionalization within the University of The Witwatersrand (South Africa).

EROutp-0077

Output description:	Applied intersectional gender analysis toolkit within infectious disease research projects
Output indicator:	5 to 7 case studies developed and/or lessons learned documented on applying an intersectional gender lens in infectious disease research projects
Target date:	31.12.2021
Progress status:	On Track
Progress description:	

EROutp-0233

Output description:	New knowledge & evidence on intersection of sex & gender with other social stratifiers to address power relations, social exclusion, marginalization & disadvantages in access to health services, health impacts, prevention/control of IDPs
Output indicator:	Research studies implemented and evidence generated to inform policy and practice
Target date:	31.12.2021
Progress status:	On Track
Progress description:	TDR has launched in 2020 a research call to invite institutions to submit proposals from single or multiple contexts that span the translational research spectrum and are of any methodological underpinning. Teams should address gender, sex, and their intersections with associated inequities in infectious diseases. The evidence generated by the first quarter of 2022 is expected to inform national health policies and TDR's research and programmes, which in turn may also influence future implementation research, policy and practice.

2022-2023**EROutp-0267**

Output description:	New knowledge & evidence on intersection of sex & gender with other social stratifiers to address power relations, social exclusion, marginalization & disadvantages in access to health services, health impacts, prevention/control of IDPs
Output indicator:	Research studies implemented and evidence generated to inform policy and practice
Target date:	31.12.2021
Progress status:	
Progress description:	

ER Biennium Outcomes**2020-2021****EROutc-0035**

Outcome description:	Strengthened capacities and innovative tools provided to promote gender responsive health interventions on control and prevention of VBDs and other infectious diseases of poverty.
Progress made towards outcome:	TDR's Toolkit to incorporate intersectional gender analysis into research on infectious diseases of poverty launched and disseminated (web version). In addition, More than sixty participants are joining the upcoming GBA course at the University of Witwatersrand in September 2020, from a wide range of countries in Africa. Specifically, the online GBA course at The University of Witwatersrand (South Africa) is expected to run from the 1st September 2020 - 18th October 2020. 64 participants that met eligibility criteria from West Africa, East Africa, Southern Africa and Central Africa have been accepted to take the course, following a call for applications with over 200 participants expressing interest. In addition, the GBA course will run in its entirety as one of the approved courses for the BHSc Honours in Public Health programme. The Wits School of Public Health is initiating a new degree programme starting in 2021 ? a Bachelor of Health Sciences Honours in Public Health. This is a one-year full time programme for students wanting to pursue postgraduate studies in public health. The ?Gender-based analysis of infectious diseases and climate change? was approved as one of the courses which students can take as part of the new Honours programme.

2022-2023

EROutc-0057

Outcome description: Strengthened capacities and increased understanding for generation of gender responsive interventions for control and prevention of VBDs and other infectious diseases of poverty.

Progress made
towards outcome:

Expected Result: 1.3.14

Title: Testing of innovative strategies for vector control

Strategic Work Area: Research for implementation		Workstream: Research for innovation	
ER type:	Continuing	Funding type:	UD and DF
Start date:	01.01.2020	End date:	31.12.2023
ER status:	Delayed	Comment:	Delayed because of the COVID pandemic which make impossible to organize meeting(s) with funders (countries) and selected teams. The proposals could not be revised and updated and the field work could not start.
WHO region:	Global		
Partners:	WHO/NTD and the International Atomic Energy Agency (IAEA)		
Diseases:	Arboviral diseases; Chikungunya; Dengue; Neglected Tropical Diseases; Vector-borne diseases; Zika virus		
Review mechanism:	Through ad hoc expert review groups approved by TDR senior management, and through TDR advisory bodies, including the scientific working groups, STAC and JCB		
ER manager:	Florence FOUQUE		
Team:	Bernadette Ramirez, Abdul Masoudi		
Number of people working on projects:	3		

FENSA clearance obtained for all Non-State Actors? No

Justification for no FENSA clearance: The FENSA clearance will be submitted for the NSA partners as we start raising the contract with the research teams.

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Partnership well in place and objectives aligned with the respective strategies of the partners
Roles complimentary:	Yes	The complementary roles of the partners is established through a Memorandum of Understanding signed by TDR, WHO and IAEA
Coordination transparent:	Yes	The coordination mechanism is transparent and follow the rules of the partners.
Visibility:	Yes	The visibility of the partnership is achieved through the communication offices of all partners.

Objectives and results chain

Approach to ensure uptake:	To ensure the uptake of the findings and their application into countries, the different activities performed through this ER are involving since the planning stage the relevant stakeholders. The partners of the ER, namely NTD/WHO and IAEA also have their
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Up-take/Use Indicator:	The indicator for uptake will be the number of countries for which the vector control agency/services will test and then use the new vector control technology. Another uptake indicator can also be the reduction of the vector populations.
Gender and geographic equity:	Gender and geographical equities are taken into account in all activities among which the building of the ad hoc review groups, the consultancies and in the selection criteria of the research teams.
Publication plan:	The publication plan include guidance documents that will be updated regularly, thematic briefs, scientific publications in open access peer review journals (with special issues) and other materials such as training materials and briefs for stakeholders (
Up-take/use indicator target date:	31.12.2023

Sustainable Development Goals

Good Health and Well-being; Industry, Innovation and Infrastructure; Climate Action; Partnerships to achieve the Goal

Concept and approach

Rationale:	Causing more than one million deaths per year, with few new drugs or strategies to combat these emerging infectious pathogens, vector-borne diseases (VBDs) such as malaria, dengue, Zika, chikungunya, yellow fever and others account for 17% of the total morbidity from infectious diseases. The incidence of some VBDs has grown dramatically in recent decades, with about one third of the world population now at risk from Aedes -borne epidemics. This increase is due to global changes and has prompted WHO to state the urgent need for alternative vector control methods in its Global vector control response (GVCR) 2017-2030, which was approved at the World Health Assembly in 2017 by more than 190 Member States (WHO 2017). The rationale of this expected results is to work with all partners to test innovative vector control technologies. One of these alternative technologies is the ? Sterile Insect Technique? (SIT) a method of pest control using area-wide releases of sterile males to mate with wild females, which will then not produce offspring. This technique has been successfully implemented in agriculture against numerous insects since about 60 years, with no side effects and environmentally safe impact. As a first step, a joint collaboration was established between the Department of Nuclear Sciences and Applications (NA), the Department of Technical Cooperation (TC) of the International Atomic Energy Agency (IAEA), and the UNICEF/UNDP/World Bank/ WHO Special Programme for Research and Training in Tropical Diseases (TDR) of the World Health Organization (WHO), in partnership with the WHO Department of Control of Neglected Tropical Diseases (NTD), to develop activities on providing guidance to countries and testing SIT against the Aedes mosquitoes, vectors of arboviral diseases.
Design and methodology:	<p>Design and Methodology of the ER are briefly described below through key activities and timelines, but more detailed description of each phase is available in the technical documentation:</p> <p>Phase 1: January 2019 to February 2020: Development and Production of a Guidance Document on how to test SIT for countries</p> <p>Phase 2: July 2019 to February 2020: Resource mobilization, buildings of ad hoc review committees and Special Project Team, call for proposals and selection of research consortium(s) to test SIT into field conditions.</p> <p>Phase 3: March 2020 to December 2021: Update of proposals, contracts and first field tests</p> <p>Phase 4: January 2022 to December 2023: Continuation of field tests, epidemiological evaluation and if satisfactory implementation of the results and policy recommendations and deployment of this new vector control technology at the country level.</p>
Approach to ensure quality:	<p>The following approaches were taken to ensure quality of the expected results:</p> <ul style="list-style-type: none"> • The objectives, planning, activities and budget of the ER is aligned with TDR strategy and was approved by TDR governing bodies. • The groups of experts were invited based on their competencies and experience and approved as per TDR SoPs. All experts accepting to be part of a group completed their DOIs and COIs. • The Guidance Document was developed in phase 1 by a group of experts, with external and internal reviews, external editing, final check and WHO publication clearance system. • For the selection and following up of research proposals in phase 2, review and steering groups of external experts were established and approved accordingly.

- The quality of the findings in phase 3 is reviewed by the selected experts groups through mid-term reports and published in open access peer review scientific journals.
- The quality of the findings in phase 4 is reviewed by the selected experts groups through mid-term and final reports, published in open access peer review scientific journals, and submitted to the Vector Control Advisory Group (VCAG) of the WHO operational program (NTD/WHO) for policies development.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$100,000	\$800,000	\$900,000	\$300,000	\$1,000,000	\$1,300,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$300,000	\$400,000	\$700,000	\$14,400	\$ 0	\$14,400

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$100,000	\$600,000	\$700,000	\$300,000	\$800,000	\$1,100,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$100,000	\$600,000	\$700,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0018

1. Provide to countries and stakeholders up to date guidance on how to test new vector control technologies through different materials such as guidance document, training materials, workshop and in site evaluations.

ERObj-0019

2. Support research activities to test into field conditions the entomological outcomes of new vector control technologies.

ERObj-0020

3. Support research activities to test into field conditions the epidemiological outcomes of new vector control technologies.

ERObj-0021

4. Develop indicators to evaluate the impact on the vectors populations, the human health and the health systems of innovative vector control technology.

ERObj-0022

5. Provide to the WHO operational programs and the countries the required support to make new recommendations and policies on innovative vector control technologies, and allow full deployment of new validated vector control tools.

ER Biennium Risks

2020-2021

ERRisk - 0036

Risk description:	Calls for applications do not result in proposals that support the requested criteria
Actions to mitigate risk:	Work with the most promising applications to improve them
Mitigation status:	Completed

ERRisk - 0088

Risk description:	Poor involvement of vector control agencies
Actions to mitigate risk:	Work very closely with WHO regional offices and WHO Representatives to improve exchanges and collaboration with national vector control agencies
Mitigation status:	On Track

ERRisk - 0209

Risk description:	Not receive enough funding support from the countries to fund all research proposals selected
Actions to mitigate risk:	Revise the activities and the budget of the selected proposals in order to decrease the cost. Establish a longer timeline to have more time to receive the required funding.
Mitigation status:	On Track

2022-2023

ER Biennium Outputs

2020-2021

EROutp-0182

Output description:	Development of indicators to evaluate the impact on the vectors populations, the human health and the health systems of at least one innovative vector control technology.
Output indicator:	Number of entomological and epidemiological indicators validated for assessing the impact of the SIT
Target date:	31.12.2021
Progress status:	Delayed
Progress description:	The selection of the research teams was completed early 2020, but due to COVID situation the update of the contracts are delayed, the field work could not start and the development of the indicators is also delayed.

EROutp-0130

Output description:	Assessment of the impact of an innovative vector control approach on vector population density and disease transmission into a controlled field situation
Output indicator:	Number of multi-country research projects selected and ongoing, providing evidence on Aedes aegypti adult female densities before and after release, and epidemiological endpoints on disease transmission
Target date:	31.12.2021
Progress status:	Delayed
Progress description:	The selection of the research teams was completed early 2020, but due to COVID situation the update of the proposals could not be done through the planned workshop, the contracts are thus delayed and the field work could not start.

EROutp-0078

Output description:	Guidance Document on how to test at least one new vector control technologies available freely online.
Output indicator:	Number of document available.
Target date:	31.12.2021
Progress status:	Completed
Progress description:	The Document entitled "Guidance Framework for Testing the Sterile Insect Technique as a Vector Control Tool against Aedes-Borne Diseases" has been released in April 2020.

2022-2023

n/a

2020-2021

EROutc-0036

Outcome description: Countries have access to the last up to date guidance and data on the use and tools for testing a new vector control tool, the SIT, against Aedes-borne diseases.

Progress made towards outcome: The Guidance document has been released, but the field testing is delayed and the findings will also be delayed.

2022-2023

n/a

Expected results

Research capacity strengthening

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Expected Result: 2.1.1.1

Title: Strategic support to WHO regional activities: The Regional Training Centres

Strategic Work Area: Research Capacity Strengthening Workstream:

ER type: Continuing Funding type: UD and DF

Start date: 01.01.2020 End date: 31.12.2021

ER status: On Track Comment:

WHO region: Global

Partners: Research and academic institutions in LMICs; WHO disease control programmes and research departments at headquarters; regional and country offices

Diseases: Not Disease-Specific

Review mechanism: External review; internal management evaluation ; annual review by the TDR RCS Scientific Working Group (SWG)

ER manager: Pascal LAUNOIS

Team: Pascal Launois, Mahnaz Vahedi, Najoua Kachouri

Number of people working on projects: 11

FENSA clearance obtained for all Non-State Actors? No

Justification for no FENSA clearance: TSA

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Six RTCs already selected (AFR, AMR, EMR, EUR and SEAR) . A subregional RTC for French-speaking countries in West Africa has been selected
Roles complimentary:	Yes	Each RTC has been selected for their expertise (either good health research practice or implementation research) .
Coordination transparent:	Yes	Process for identifying satellite institutions developed for each RTC.
Visibility:	Yes	The network will be fully operational at the end of 2021.

Objectives and results chain

Approach to ensure uptake:	Analysis of training data base in each RTC; Annual technical and financial reports, Regular external evaluation
Up-take/Use Indicator:	25% increase in number of research projects supported by RTC trainees in each region -which meets international standards
Gender and geographic equity:	PI of RTC in AFR, EUR and WPR are women. Most of trainers are women (72%). Women researchers are encouraged to participate to the trainings offered by each RTC.
Publication plan:	Peer review publications on lessons learnt. Three papers on the usefulness of the MOOC on IR with a focus on IDPs submitted.

Sustainable Development Goals

Good Health and Well-being

Concept and approach

Rationale:	Capacity in good health research practices and project management skills so that health research is efficiently and effectively organized, planned, implemented, monitored and evaluated is needed in LMIC institutions. There is also a need to develop capacities in research for implementation. These skills are not readily taught in academic scientific curricula. Our vision is to develop effective and efficient engagement and leadership of health researchers from disease endemic countries in disease control efforts for poverty alleviation and development. The main objective is to establish an RTC in each of the six WHO regions, which will help decentralize short course training programmes for good practices/bioethics/project planning and evaluation as well as IR training courses
Design and methodology:	1. Engaging already selected RTCs in Colombia, Ghana, Indonesia, Kazakhstan, Malaysia and Tunisia in implementing and disseminating good health research practices and research for implementation training courses (TC, development strategic plan). 2 engage activities with the sub regional RTC for French-speaking countries in West Africa. . 3. Identification of the training gaps in good health research practices for each RTC in response to specific needs (TC and site visit). 4. Develop training courses (if not already available) in response to these identified needs. 5. Implementing the training courses in the RTC training programme (TDR direct and indirect support through grants and selection of experts needed for the implementation of first courses).
Approach to ensure quality:	Qualification of trainers using ToT (Training-of-Trainers) courses; high quality standards developed for ToT courses; Regular external evaluation

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$1,050,000	\$200,000	\$1,250,000	\$1,230,000	\$200,000	\$1,430,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$1,450,000	\$240,000	\$1,690,000	\$688,740	\$ 0	\$688,740
2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$1,050,000	\$200,000	\$1,250,000	\$1,200,000	\$200,000	\$1,400,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$1,050,000	\$200,000	\$1,250,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0030

1. Support RTCs to become operational in the implementation of short training courses on Good Health Research Practices and Implementation research in their respective region.

2. Facilitate effective coordination of the six selected RTCs and the sub regional RTC for French-speaking countries in West Africa to become an effective network.

ER Biennium Risks

2020-2021

ERRisk - 0146

Risk description:	Poor performance of an RTC
Actions to mitigate risk:	Periodic external evaluation. Resignation of RTC if not efficient . Call for applications for identifying a new RTC
Mitigation status:	On Track

ERRisk - 0042

Risk description:	Unable to identify suitable satellite institutions for dissemination of the package of training courses
Actions to mitigate risk:	Involve the WHO regional office from the beginning to ensure selection of the most appropriate institution with existing capacity building initiatives
Mitigation status:	On Track

ERRisk - 0094

Risk description:	Poor uptake of the courses on good health research practices and research for implementation by LMICs in each region
Actions to mitigate risk:	Promote the training courses through regional offices and collaborative research networks
Mitigation status:	On Track

2022-2023

ERRisk - 0216

Risk description:	Unable to identify suitable satellite institutions for dissemination of the package of training courses
Actions to mitigate risk:	Involve the WHO regional office from the beginning to ensure selection of the most appropriate institution with existing capacity building initiatives
Mitigation status:	

ERRisk - 0217

Risk description:	Poor uptake of the courses on good health research practices and research for implementation by LMICs in each region
Actions to mitigate risk:	Promote the training courses through regional offices and collaborative research networks
Mitigation status:	

ERRisk - 0218

Risk description:	Poor performance of a RTC
Actions to mitigate risk:	Periodic external evaluation. Resignation of RTC if not efficient . Call for applications for identifying a new RTC
Mitigation status:	

ER Biennium Outputs

2020-2021

EROutp-0188

Output description:	Support RTCs to become operational in the regional dissemination of short training courses on IR and Good Health Research Practices
Output indicator:	Two satellite institutions per RTC ready to implement at least one training course in IR or Good Health Research Practices

Target date: 31.12.2021
Progress status: On Track
Progress description: Training courses in good health research practice and /or implementation research have been institutionalized in Bolivia, Ecuador, Guatemala, Honduras, Jamaica and Peru for WHO/AMR; in India, Myanmar and Nepal for WHO/SEAR; in Central Asian States (Armenia, Azerbaijan, Belarus, Georgia, Kyrgyzstan, Tajikistan, Uzbekistan, Ukraine and the Kazan state of Russia) for WHO/EUR; in Kenya, Mozambique and Nigeria for WHO/AFR and in Lebanon for WHO/EMR.

EROutp-0136

Output description: Support RTCs to become operational in the dissemination in their region of short training courses on IR and Good Health Research Practices
Output indicator: Two satellite institutions per RTC ready to implement at least one training course in IR or Good Health Research Practices
Target date: 31.12.2021
Progress status: On Track
Progress description: The short training courses in good health research practice and/or Implementaion research have been institutionalized in Bolivia, Ecuador, Guatemala, Honduras, Jamaica and Peru for WHO/AMR; in India, Myanmar and Nepal for WHO/SEAR; in Central Asian States (Armenia, Azerbaijan, Belarus, Georgia, Kyrgyzstan, Tajikistan, Uzbekistan, Ukraine and the Kazan state of Russia) for WHO/EUR; in Kenya, Mozambique and Nigeria for WHO/AFR and in Lebanon for WHO/EMR.

EROutp-0084

Output description: Support RTCs to become operational in the implementation of short training courses on Good Health Research Practices and Research for Implementation in the region
Output indicator: At least two different short training courses on IR or Good Health Research Practice implemented in each RTC
Target date: 31.12.2021
Progress status: On Track
Progress description: MOOC on IR with a focus on IDPS managed by the RTC in the WHO AFR, AMR and EMR and by the sub-regional RTC for French-speaking countries in West Africa . Basic Principles in IR training (BIPR) courses implemented in RTC in WHO AFR , AMR and EUR. Ethics in IR set up in RTC in WHO SEAR.
EPPE implemented i n RTC in WHO AMR, AFR, EMR and EUR. Good Health Research Practice managed by RTC in WHO AFR AMR , EMR and EUR. GCP/GCL set up in RTC in WHO AMR, EUR and SEAR
On line courses for EPPE and BPIR which will be available for all RTCs

EROutp-0240

Output description: An effective coordination of the RTC initiative
Output indicator: Number of courses included in the RTC curricula
Target date: 31.12.2021
Progress status: On Track
Progress description:

2022-2023

EROutp-0258

Output description: Support RTCs to become operational in the dissemination in their region of short training courses on IR and Good Health Research Practices
Output indicator: Four satellite institutions per RTC ready to implement at least two training courses in IR or Good Health Research Practices
Target date: 31.12.2021
Progress status:
Progress description: Mozambique and Nigeria for WHO/AFR and in Lebanon for WHO/EMR.

EROutp-0257

Output description:	Support RTCs to become operational in the implementation of short training courses on Good Health Research Practices and Research for Implementation in the region
Output indicator:	At least two different short training courses on IR or Good Health Research Practice implemented in each RTC
Target date:	31.12.2021
Progress status:	
Progress description:	

EROutp-0282

Output description:	An effective coordination of the RTC initiative
Output indicator:	Number of courses included in the RTC curricula
Target date:	31.12.2023
Progress status:	
Progress description:	

ER Biennium Outcomes

2020-2021**EROutc-0042**

Outcome description:	Increase health research quality in LMICS through their ability to organize, manage and conduct health research
Progress made towards outcome:	The Kirkpatrick Model is used to evaluate training programs. The model comprises four levels and examines: 1) reaction, 2) learning, 3) behaviour and 4) results. The Kirkpatrick model provides a framework for both short- and long-term evaluations and will allow to evaluate the increase in health research quality.

2022-2023**EROutc-0054**

Outcome description:	Increase health research quality in LMICS through their ability to organize, manage and conduct health research
Progress made towards outcome:	

Expected Result: 2.1.2

Title: Targeted research training grants in low- and middle-income countries

Strategic Work Area: Research Capacity Strengthening Workstream:

ER type: Continuing Funding type: UD and DF

Start date: 01.01.2020 End date: 31.12.2021

ER status: On Track Comment:

WHO region: Global

Partners:

Diseases: Chagas; COVID-19; Cutaneous leishmaniasis; Dengue; Lymphatic filariasis; Malaria; Neglected Tropical Diseases; Onchocerciasis; Schistosomiasis; Tuberculosis; Trypanosomiasis; Vector-borne diseases; Visceral leishmaniasis

Review mechanism: M&E reports, RCS Scientific Working Group (annual base), CRE/DAN

ER manager: Mahnaz VAHEDI

Team: Mahnaz Vahedi, Kai Kalmaru

Number of people working on projects:

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: CRE/DAN is fully involved in due diligence risk assessment. All steps are being taken to ensure CRE/DAN clearance is obtained prior to issuance of LoAs. We are currently waiting for their clearance for University of Zambia.

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	Yes	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes
Roles complimentary:	Yes
Coordination transparent:	Yes
Visibility:	Yes

Objectives and results chain

Approach to ensure uptake:	The participating universities will be encouraged to develop partnerships with home institutions of the fellows to provide integration opportunities for the grantees, for example through an agreed mentorship and return home plan between the trainee
Up-take/Use Indicator:	Number of graduates employed in their home country or region upon completion of training
Gender and geographic equity:	All trainees will be from LMICs. Applications received in languages other than English are given equal opportunity. We encourage gender and geographical equity to be taken into account in the selection of candidates without compromising the quality of the application. We recently selected Cheikh Anta Diop University as a French speaking university in West Africa. The key challenges for women in LMICs

(including lack of access to relevant education for women and structural barriers in research institutions) may be far beyond the TDR mandate. We aim at having 40-50% of women trainees in our scheme.

Publication plan: Fellows are encouraged to publish at least one peer reviewed article; TDR supports publication in Open Access journals; earliest publications expected by mid to end 2022

Up-take/use indicator target date: 31.12.2023

Sustainable Development Goals

No Poverty; Quality Education; Gender Equality; Reduced Inequality

Concept and approach

Rationale: Human resources for health research is often accorded low priority as a component of human resources for health in general. A critical mass of indigenous health researchers is necessary for meaningful engagement of DEC in research agenda setting and conduct of research related to their own priority health issues. Early career grants: TDR has a tried and tested approach to identifying potential DEC researchers through support for postgraduate research degrees. While in the past, the field of study has been largely unrestricted, early career grants to be awarded in 2020-2021 will focus on disciplines highly relevant to research for implementation (for example Epidemiology, Biostatistics, Medical Sociology, Anthropology and Health Economics and Policy). In addition, it will seek to address inequities in health research capacity in LMICs and facilitate mentorship and research support. The proposed career grants will enhance the capacity of recipients to: - appreciate core competencies of research for implementation in planning and managing health research programmes (when applicable); - communicate research results effectively to inform policy and practice; and - widen their professional network at national and international level. Through the TDR Global platform, this scheme will proactively engage TDR alumni and co-sponsors as facilitators/mentors.

Design and methodology: There will be open calls for applications from individuals with confirmed registration/admission to a recognized training institution in an LMIC. Women will be encouraged to apply. Applications will be reviewed and selected by universities' admission processes.

Approach to ensure quality: All articles will be published in peer reviewed open access journals.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$3,050,000	\$500,000	\$3,550,000	\$6,050,000	\$700,000	\$6,750,000

Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$3,550,000	\$401,000	\$3,951,000	\$1,909,245	\$ 0	\$1,909,245

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$3,050,000	\$500,000	\$3,550,000	\$6,000,000	\$700,000	\$6,700,000

Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$3,050,000	\$500,000	\$3,550,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0034

Train early career leading to master's degree

ER Biennium Risks

2020-2021

ERRisk - 0044

Risk description:	Some grantees from LMICs are likely to work on other SDG related goals which are beyond infectious diseases of poverty, thus reducing the number of research for implementation in infectious diseases of poverty.
Actions to mitigate risk:	Provide linkages with WHO regional offices, TDR supported regional training centres and other TDR funded projects
Mitigation status:	On Track

ERRisk - 0096

Risk description:	Competition from similar, well-funded initiatives
Actions to mitigate risk:	Seek to identify a specific niche and complementarity/collaborative approaches with such initiatives; promote the concept and value of targeted training in research for implementation
Mitigation status:	On Track

ERRisk - 0200

Risk description:	Allocating inadequate resources to sustain the scheme resulting in discontinuation of the scheme with premature termination for the students
Actions to mitigate risk:	Sufficient undesignated funds earmarked for the scheme; looking for designated funds to scale up the scheme
Mitigation status:	On Track

ERRisk - 0230

Risk description:	The COVID-19 pandemic in 2020 posed a particular challenge to the delivery of MPH training across seven universities. It was challenging to transfer the face to face teaching materials to virtual training.
Actions to mitigate risk:	1. Contingency plan was developed and implementation was closely monitored. 2. Promoting virtual learning provided the opportunity to plan for strengthening their capacities in working together in developing online IR course materials across seven universities. Because of travel restriction, students are unable to do field work for their thesis. We encouraged students to use secondary data for their thesis.
Mitigation status:	On Track

2022-2023

ERRisk - 0256

Risk description:	The COVID-19 pandemic in 2020 posed a particular challenge to the delivery of MPH training across seven universities. It was challenging to transfer the face to face teaching materials to virtual training.
Actions to mitigate risk:	1. Contingency plan was developed and implementation was closely monitored. 2. Promoting virtual learning provided the opportunity to plan for strengthening their capacities in working together in developing online IR course materials across seven universities. Because of travel restriction, students are unable to do field work for their thesis. We encouraged students to use secondary data for their thesis.
Mitigation status:	Planning phase

ERRisk - 0257

Risk description:	TDR is planning to move to the second phase of the scheme by opening competition and selecting new universities to join the scheme during COVID-19 pandemic. This may have impact on the selection and review process.
Actions to mitigate risk:	Considering travel restriction all review process and provision of trainings and quality assurance must be done remotely.
Mitigation status:	Planning phase

ERRisk - 0232

Risk description:	Competition from similar, well-funded initiatives
Actions to mitigate risk:	seek to identify a specific niche and complementarity/collaborative approaches with such initiatives; promote the concept and value of targeted training in research for implementation
Mitigation status:	Planning phase

ERRisk - 0233

Risk description:	Lack of transparency or inadequacy in selection of students resulting in inequity, lack of diversity and admission of low quality students; inadequate quality training offered by some of the selected universities
Actions to mitigate risk:	As a sponsor, TDR will provide input in students' final selection and provide regular oversight of the scheme. Subsequently TDR, in consultation with the scientific working group, will make appropriate decisions on how best to optimize the scheme.
Mitigation status:	Planning phase

ERRisk - 0231

Risk description:	Some grantees from LMICs are likely to work on other SDG related goals which are beyond infectious diseases of poverty, thus reducing the number of research for implementation in infectious diseases of poverty.
Actions to mitigate risk:	Provide linkages with WHO regional offices, TDR supported regional training centres and other TDR funded projects
Mitigation status:	Planning phase

ERRisk - 0234

Risk description:	Allocating inadequate resources to sustain the scheme resulting in discontinuation of the scheme with premature termination for the students
Actions to mitigate risk:	Sufficient undesignated funds earmarked for the scheme; looking for designated funds to scale up the scheme
Mitigation status:	Planning phase

ER Biennium Outputs**2020-2021****EROutp-0190**

Output description:	A global network (intra-inter-regional) of TDR supported scientists in IR developed
Output indicator:	Joint annual networking meeting to be held for planning, lessons learned, improving communications and collaborations amongst seven universities in different regions
Target date:	31.12.2021
Progress status:	On Track
Progress description:	Due to COVID-19 pandemic the joint virtual networking meeting will be conducted in 2021.

EROutp-0138

Output description:	PhD trainees completed their degree within the region
Output indicator:	At least 8 trainees completed their PhD
Target date:	31.12.2021
Progress status:	On Track
Progress description:	On track

EROutp-0086

Output description:	Early career trainees completed their degrees in their home countries or within their region
Output indicator:	Approximately 60 trainees enrolled or completed their master's trainings
Target date:	31.12.2021
Progress status:	On Track
Progress description:	On track

2022-2023

EROutp-0283

Output description: Early career trainees completed their degrees in their home countries or within their region

Output indicator: Approximately 60 trainees enrolled or completed their master's trainings

Target date: 31.12.2023

Progress status: On Track

Progress description:

EROutp-0285

Output description: A global network (intra-inter-regional) of TDR supported scientists in IR developed

Output indicator: Using virtual platform such as IR COONNECT will enable to share lessons learned, improving communications and collaborations amongst seven universities in different regions

Target date: 31.12.2023

Progress status: On Track

Progress description:

ER Biennium Outcomes

2020-2021

EROutc-0063

Outcome description: Increased capacity for scientists to contribute to public health priority setting, research, programme implementation and training in countries with low research capacity.

Progress made towards outcome: Regarding contribution to the broad health system and public health priority settings, including response to COVID-19 pandemic, we conducted a survey in April 2020 which showed that more than seven-in-ten of all trained prior to the COVID-19 pandemic are currently involved in a range of health system areas.

2022-2023

EROutc-0064

Outcome description: Increased capacity for scientists to contribute to public health priority setting, research, programme implementation and training in countries with low research capacity.

Progress made towards outcome:

Expected Result: 2.1.4

Title: Advanced training in Clinical Product Development (Clinical Research and Development Fellowship grants)

Strategic Work Area: Research Capacity Strengthening		Workstream:	
ER type:	Continuing	Funding type:	UD and DF
Start date:	01.01.2020	End date:	31.03.2023
ER status:	On Track	Comment:	31 CRDF placed in 14 Training Partner Organizations (TPOs) during the 2020-2021 period.
WHO region:	Global		
Partners:	IFPMA; pharmaceutical companies; Product Development Partnerships (PDPs); public research institutions; European & Developing Countries Clinical Trials Partnership (EDCTP)		
Diseases:	Not Disease-Specific		
Review mechanism:	External review to identify relevance, effectiveness, efficiency and outcomes of the programme with the goal to assist recommendations and future decision-making; annual review by TDR RCS Scientific Working Group members; internal management evaluation		
ER manager:	Pascal LAUNOIS		
Team:	Pascal Launois, Mahnaz Vahedi, Najoua Kachouri		
Number of people working on projects:	3		

FENSA clearance obtained for all Non-State Actors? No

Justification for no FENSA clearance: Individual fellowship

TDR partnership criteria

Add value:	Yes	Use resources:	
Align goals:		Address knowledge gaps:	Yes
Integrate mandates:		Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:			

TDR partnership criteria indicators

Objectives aligned:	Yes	To improve skills in clinical research in Low and Middle-Income Countries
Roles complimentary:	Yes	EDCTP works only in sub saharan Africa and TDR works worldwide
Coordination transparent:	Yes	Identification of potential training partners and call for applications are common between EDCTP and TDR. Selection of candidates and administrative processes are separated.
Visibility:	Yes	30 CRDF supported by TDR and 30 by EDCTP

Objectives and results chain

Approach to ensure uptake:	Publications of success stories along the grant; TDR RCS annual reports; reports at 6 and 12 months of the fellowship; regulation meetings with previous and current CRDF
Up-take/Use Indicator:	70% of fellows have implemented their skills in their working environment
Gender and geographic equity:	Solutions identified in the gender challenge contest developed in 2018-2019 in place.
Publication plan:	A manuscript on the results of the 2018 CRDF evaluation is currently under review

Sustainable Development Goals

Good Health and Well-being; Partnerships to achieve the Goal

Concept and approach

Rationale:	An increasing number of new products for infectious diseases of poverty are in the pipeline of product development organizations. However, engagement of LMICs in the process has been limited due to a lack of expertise. Scaling up of the CDF programme to clinical product development in partnership with EDCTP that develops a similar project is in line with the RCS strategy to develop individual and institutional capacity in clinical research.
Design and methodology:	1. Identification of potential training Partner organizations (TPOs) (pharmaceutical companies, PDPs, research institutions) 2. Selection of fellows based on clear criteria (e.g. gender, geographical distribution and needs). 3. Training in response to the needs at TPOs. 4. Reintegration in home country after completion of the scheme by developing a specific re-entry grant (avoiding brain drain). 5. Developing an alumni community through regular meetings and an online platform.
Approach to ensure quality:	Selection of partners through IFPMA (an NGO recognized by WHO) with no direct approach with the pharmaceutical companies; selection of fellows by both TDR and partners by using a clear selection criteria (inclusion/exclusion criteria-review committee); competitive open calls; clear roles & responsibilities for fellows, home and host institutions and TDR; letter of award regularly reviewed by committee and LEGAL unit in WHO; regular progress reports (six and 12 months during the training and 12 months after the training); random validation (15%) of the information concerning expertise obtained from grantee done by website manager; feedback from both partners and fellows on the efficiency of the programme.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$ 0	\$2,400,000	\$2,400,000	\$20,000	\$2,400,000	\$2,420,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$300,000	\$2,400,000	\$2,700,000	\$ 0	\$1,133,522	\$1,133,522
2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$ 0	\$1,500,000	\$1,500,000	\$ 0	\$1,500,000	\$1,500,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$ 0	\$1,500,000	\$1,500,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0035

Develop R&D leadership in low- and middle-income countries for control of infectious diseases of poverty through targeted research and development training in priority health issues by: 1. increasing the critical mass of highly skilled scientists in R&D in low- and middle-income countries; and 2. provide a dedicated platform and online community for alumni.

ER Biennium Risks

2020-2021

ERRisk - 0149

Risk description:	Insufficient funds to cover all training needs
Actions to mitigate risk:	Develop a multi-funder model by adding new funding partners; develop a partnership with more financial involvement of host partners
Mitigation status:	On Track

ERRisk - 0045

Risk description:	Insufficient interest of clinical product development partners as training partners
Actions to mitigate risk:	Adequate communication with pharma companies through IFPMA; proactive approach to identify new partners outside existing pharmaceutical companies
Mitigation status:	On Track

ERRisk - 0097

Risk description:	Geographical distribution biased to the African region due to the EDCTP Partnership which focus only on sub-Saharan countries
Actions to mitigate risk:	Distribute calls for applications through WHO's regional and country offices and TDR networks outside Africa and through social media
Mitigation status:	On Track

2022-2023

ERRisk - 0211

Risk description:	Insufficient interest of clinical product development partners as training partners
Actions to mitigate risk:	Adequate communication with pharma companies through IFPMA; proactive approach to identify new partners outside existing pharmaceutical companies
Mitigation status:	

ERRisk - 0215

Risk description:	Insufficient funds to cover all the training needs.
Actions to mitigate risk:	Develop a multi funder model by adding new funding partners; develop a partnership with more financial involvement of host partners.
Mitigation status:	

ERRisk - 0214

Risk description:	Geographical distribution biased to AFRO due to EDCTP Partnership which focus only on subsaharian countries
Actions to mitigate risk:	Distribute call for applications trough the WHO RO/CO and TDR networks outside Africa and through social media.
Mitigation status:	

ER Biennium Outputs

2020-2021

EROutp-0191

Output description:	Mapping institutional clinical research capacity at regional level using the TDR framework for core competencies
Output indicator:	A map of institutional clinical research capacity by country/region
Target date:	31.12.2021
Progress status:	On Track
Progress description:	

EROutp-0139

Output description:	R&D skills gained during the training implemented in the home institution through a re-entry grant
Output indicator:	70% of home institutions involved in national or international R&D projects
Target date:	25.03.2023

Progress status: On Track
 Progress description: The re-entry phase is set up at the end of 2020 -beginning of 2021 . Results are expected at the end of 2021-beginning of 2022.

EROutp-0087

Output description: Highly skilled scientists in R&D in LMICs
 Output indicator: 30 fellows trained
 Target date: 25.03.2023
 Progress status: On Track
 Progress description: Sixteen (16) CRDF already trained in 10 training partner organizations

EROutp-0243

Output description: Mapping training programmes which address clinical research team core competencies
 Output indicator: A compendium of training programmes developed
 Target date: 31.12.2021
 Progress status: On Track
 Progress description: The compendium of training courses obtained in 2019 will be updated in 2021.

2022-2023

EROutp-0254

Output description: R&D skills gained during the training implemented in the home institution through a re-entry grant
 Output indicator: 70% of home institutions involved in national or international R&D projects
 Target date: 25.03.2023
 Progress status:
 Progress description:

EROutp-0256

Output description: Mapping training programmes which address clinical research team core competencies
 Output indicator: A compendium of training programmes developed
 Target date: 25.03.2021
 Progress status:
 Progress description:

EROutp-0253

Output description: Highly skilled health research leaders in LMICs
 Output indicator: 30 fellows trained
 Target date: 25.03.2023
 Progress status:
 Progress description:

ER Biennium Outcomes

2020-2021

EROutc-0045

Outcome description: Highly skilled trainees (for drugs, vaccines and diagnostics) in LMICs leads clinical trials in their country/region.
 Progress made towards outcome: Thirty one CRDF fellows currently trained in 4 training partner organizations.

2022-2023

EROutc-0053

Outcome description: Highly skilled trainees (for drugs, vaccines and diagnostics) in LMICs leads clinical trials in their country/region.

Progress made
towards outcome:

Expected Result: 2.1.6

Title: UNDP structured capacity building in research for implementation to improve access and delivery of health technologies in LMICs

Strategic Work Area: Research Capacity Strengthening		Workstream:	
ER type:	Continuing	Funding type:	DF
Start date:	01.04.2020	End date:	31.03.2023
ER status:	On Track	Comment:	Despite the delay occasioned by COVID-19 pandemic, the main activity (workshop) planned for March 2020 has since been rescheduled and adapted to a virtual format delivery. Development of a module on gender considerations in IR is ongoing.
WHO region:	Global		
Partners:	UNDP and PATH		
Diseases:	Not Disease-Specific		
Review mechanism:	Annual reports reviewed by the scientific working group and UNDP		
ER manager:	Edward Mberu KAMAU		
Team:	RCS - Edward Kamau, Kai Kalmaru; IMP - Abraham Aseffa, Ekua Johnson		
Number of people working on projects:			

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: TDR partners and collaborates with UNDP. TDR is responsible for its activities and deliverables with national institutions in member states. Activities of other entities (PATH) is managed by the UNDP within the agency's responsibility.

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:		Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Distinct objectives but contributing to the same goal
Roles complimentary:	Yes	Ensure roles are complementary in the focus country.
Coordination transparent:	Yes	ADP joint planning and updated activity spreadsheet
Visibility:	Yes	TDR contributions highlighted in ADP events and reports

Objectives and results chain

Approach to ensure uptake:	Engagement of relevant stakeholders including implementers and communities from the planning stage
Up-take/Use Indicator:	Number of countries using research for implementation to improve access and delivery of health interventions
Gender and geographic equity:	Application of gender analysis to activities under this ER. The Intersectional gender analysis toolkit developed by TDR.

Publication plan: Country reports published on suitable platforms, e.g. TDR Gateway

Up-take/use
indicator target
date: 31.03.2023

Sustainable Development Goals

Good Health and Well-being; Gender Equality; Reduced Inequality; Partnerships to achieve the Goal

Concept and approach

Rationale:	Health and human development are interrelated. Diseases, inadequate access to health technologies (medicines, vaccines, diagnostics and devices) and poor implementation of health policies and strategies impact human development. Targeting tuberculosis, malaria and neglected tropical diseases for elimination in the context of the Sustainable Development Goals adopted by the global community underscores the importance of this relationship. The optimum introduction (including access, delivery and usage) of new or proven (validated) interventions (treatment, policies, strategies, etc.) is critical for achieving good health outcomes and ultimately improvement of the health and wellbeing of populations. This however is often not the case due to implementation obstacles and barriers. These barriers are often related to failure to properly identify and contextualize regional, country or community specific characteristics and put in place actions to address them in real time or prior to deployment. Failure to address these impediments before large scale deployment of a new technology may result in considerable costs to the health system as well as loss of confidence in the technology by the target population. The importance of research in identifying solutions and options for overcoming implementation obstacles, barriers and bottlenecks (problems), in health systems and programmes is now widely recognized. A posteriori, these problems may be anchored in the factors related to the local community, national, regional, or health system contexts among others. There remains, however, limited understanding of the process of conducting research for implementation as distinct from other research domain. In the past 5 years, TDR has put in place a number of initiatives to raise awareness and knowledge on IR, especially in LMICs.
Design and methodology:	1. Establishment of a pool of resource persons drawn from TDR RTCs, IR toolkit development team, TDR Global, implementers and academia. 2) Consultation with in-country stakeholders to identify priorities and areas of need. 2) A structured capacity building programme from training to actual implementation of research project.
Approach to ensure quality:	1) Countries and teams to participate in the programme will be identified and selected based on defined criteria by the Access and Delivery Partnership. 2) Regular monitoring of implementation of the programme by TDR staff and consultants.

Biennium budgets

2020-2021					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$ 0	\$1,000,000	\$1,000,000	\$ 0	\$1,000,000	\$1,000,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$ 0	\$426,000	\$426,000	\$ 0	\$102,524	\$102,524

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$ 0	\$500,000	\$500,000	\$ 0	\$500,000	\$500,000
Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$ 0	\$500,000	\$500,000	\$ 0	\$ 0	\$ 0

ER Objectives

ERObj-0036

1. Uptake and use of TDR IR resources in LMICs.

ERObj-0037

2. Capacity for implementation research in LMICs through targeted training of research teams.

ERObj-0038

3. Application of IR to optimize access and delivery of health interventions, including health technologies and innovations in LMICs.

ER Biennium Risks

2020-2021

ERRisk - 0150

Risk description:	Low quality implementation at country level
Actions to mitigate risk:	Careful selection, adequate training of country partners prior to country implementation and regular monitoring by TDR staff, consultants and UNDP collaborators
Mitigation status:	On Track

ERRisk - 0046

Risk description:	Issues addressed by the projects are of low priority to country needs
Actions to mitigate risk:	Careful selection of concept notes and alignment with documented national research priorities
Mitigation status:	On Track

ERRisk - 0098

Risk description:	Implementation of project deviates from core objectives of the UNDP-led Access and Delivery Partnership
Actions to mitigate risk:	Involvement of the UNDP Partnership in project planning prior to inception
Mitigation status:	On Track

2022-2023

n/a

ER Biennium Outputs

2020-2021

EROutp-0192

Output description:	LMICs use IR to optimize and scale up health interventions (including technologies, policies and strategies)
Output indicator:	At least 3 research for implementation projects aimed at addressing a specific access and delivery issue conducted and reported
Target date:	31.03.2023
Progress status:	On Track
Progress description:	Malawi and Tanzania IR projects to address access to NTD diagnostic and treatment including anti-venom for snakebites.

EROutp-0140

Output description:	LMIC research teams trained to develop and implement research for implementation projects and disseminate the findings
Output indicator:	At least 2 LMIC research teams develop and fund IR projects to address implementation bottlenecks

Target date: 31.03.2023
 Progress status: On Track
 Progress description: Senegal developed and is currently implementing IR project co-funded by ADP (PATH and TDR). Tanzania is revising its IR proposal for funding consideration by TDR.

EROutp-0088

Output description: LMICs adopt and use TDR IR resources (IR Toolkit, MOOC, short courses on IR in RTCs, etc.)
 Output indicator: At least 5 LMICs use TDR IR resources in their research and training activities
 Target date: 31.03.2023
 Progress status: On Track
 Progress description: Ghana, Senegal and Tanzania have conducted IR training and developed IR project proposals. Ghana secured funding to implement their project. Senegal and Tanzania are yet to secure funding. Malawi is expanding IR training to district health coordinators and are introducing mentorship program along IR training. South-south collaboration (IR workshop) included participants from Guinea, Burkina Faso, Benin, Niger and Cote d'Ivoire.

2022-2023

n/a

ER Biennium Outcomes

2020-2021

EROutc-0046

Outcome description: LMICs properly identify and address factors that impede the effective access and delivery of health technologies.
 Progress made towards outcome: Ghana managed to get funding for its IR project from EDCTP. The proposal was an output from IR training workshops. There is need to recalibrate the training approach to include provision of seed or catalytic funds to support research projects emanating from the proposal development workshops.

2022-2023

n/a

Expected Result: 2.1.7

Title: Strengthening OR capacity in Global Fund supported programmes

Strategic Work Area: Research capacity strengthening Workstream:

ER type: New Funding type: UD
Start date: 01.01.2022 End date: 31.12.2023
ER status: Comment: Planning Phase

WHO region: Global

Partners: Disease programs and GF

Diseases: Malaria; Tuberculosis

Review mechanism: Annual reports reviewed by the scientific working group.

ER manager: Edward Mberu KAMAU

Team: Edward Mberu Kamau and Kai Kalmalu

Number of people working on projects: 2

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: TDR partners and collaborates with SORT IT global partners. TDR is responsible for its activities and deliverables with national institutions in member states. Activities of other partners are managed by them within their agency's responsibility.

TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	
Integrate mandates:		Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

TDR partnership criteria indicators

Objectives aligned:	Yes	Distinct objectives but contributing to the same goal
Roles complimentary:	Yes	Ensure roles are complementary in the supported programs..
Coordination transparent:	Yes	Annual global calendar to ensure availability of SORT IT facilitators.
Visibility:	Yes	TDR contributions highlighted in reports, publications and policy briefs.

Objectives and results chain

Approach to ensure uptake:	Early engagement of relevant stakeholders including implementers and affected communities from the planning stage.
Up-take/Use Indicator:	Number of GF supported programs using OR findings to improve program performance.
Gender and geographic equity:	Application of gender analysis to activities under this ER, using the intersectional gender analysis toolkit developed by TDR.
Publication plan:	SORT IT articles and policy briefs published in peer reviewed journals or on suitable platforms, e.g. TDR Gateway.

Sustainable Development Goals

Good Health and Well-being; Gender Equality; Reduced Inequality; Partnerships to achieve the Goal

Concept and approach

Rationale:	Three of the most devastating communicable diseases in human history, HIV/AIDS, tuberculosis (TB) and malaria, are being fought by affected low- and middle-income countries with the support of the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), aiming at eventually ending the epidemics. The Global Fund disburses more than USD 4 billion a year to support disease control programs in more than 100 countries, resulting in an estimated 32 million of lives saved. It is the largest multilateral investor in health systems playing a leading role in global health by its contribution to financing the pathways towards universal health coverage in beneficiary countries. The Global Fund's approach is multidimensional, shaping the global markets for medicines and technologies, increasing the resilience and sustainability of global health systems and strengthening human resources for health while promoting the rights and gender equality of the affected communities. OR that is designed to increase both implementation efficiency and effectiveness provides evidence on elements that either enhance or impede the performance of interventions and therefore can support programme managers and policy makers in optimizing and scaling up activities while ensuring value for GF grants. The project aims to build sustainable OR capacity within programmes to support the development of OR agenda, implementation of OR projects using routine data, publication of peer reviewed articles, generation of practice and policy briefs and strengthening of research capacity.
Design and methodology:	Designing and conducting Operational Research (OR) locally contributes to finding solutions in the local context for problems associated with infectious diseases of poverty. Despite this potential benefit and previous efforts and advocacy for OR from different stakeholders (including TDR), OR is not always routinely incorporated in control activities funded by the Global Fund (GF). However, due to considerable variations from one country to another and between programmes with regards to the needs, demands, absorption capacity and funding, structured OR activities have remained very low. There is an urgent need to provide specific technical support to programmes receiving GF grants in developing OR agendas, integrating them in national strategic plans and GF applications while prioritizing human and technical research capacity to strengthen local OR capabilities in disease control programmes. In consultation with Structured Operational Research and Training Initiative (SORT IT) alumni based at country level and in close collaboration with other country stakeholders, RCS will provide technical assistance for the inclusion of OR component into national strategic plans and GF applications. The disease focus is malaria and tuberculosis as two of the priority diseases of poverty within the remit of current TDR strategy. The country-based SORT IT alumni will provide OR implementation support to funded programmes as part of GF grants (and therefore will not depend on TDR funds). The cyclical nature of GF applications ensures a continuous opportunity for programmes to undertake OR and for TDR to routinely avail technical support to countries renewing their GF grants. This situation augurs well with the establishment of a new ER with modest UD allocation that will leverage GF support and has potential to raise DF. Although the proposed project is intricately dependent on GF grants, the technical support activities are applicable to any other funding sources committed to OR at country level.
Approach to ensure quality:	1) National participants to be competitively selected or highly recommended by program managers. 2) Participant's projects to be endorsed by program managers. 3) SORT IT training teams to ensure adherence to defined SOPs. 2) Regular monitoring of progress and impact of the programme by TDR staff and consultants.

Biennium budgets

2022-2023					
\$40M Scenario			\$50M Scenario		
UD	DF	Total	UD	DF	Total
\$50,000	\$50,000	\$100,000	\$200,000	\$200,000	\$400,000

Revised planned costs (January 2021)			Funds utilized (as of 29 January 2021)		
UD	DF	Total	UD	DF	Total
\$50,000	\$50,000	\$100,000	\$ 0	\$ 0	\$ 0

ER Biennium Risks

2020-2021

n/a

2022-2023

ERRisk - 0253

Risk description: Risk 2: Program evaluation not conducted regularly to demonstrate impact of research projects on programme performance.

Actions to mitigate risk: Mitigation actions: GF grants to include OR impact evaluation funding.

Mitigation status: Planning phase

ERRisk - 0254

Risk description: Risk 3: Overreliance on GF grants as the only source of OR support at country level.

Actions to mitigate risk: Mitigation action: Programmes encouraged to share their regular impact evaluation of research findings on programme performance with partners as they seek alternative funding sources for OR activities.

Mitigation status: Planning phase

ERRisk - 0252

Risk description: Risk 1: Research findings not implemented systematically by the program.

Actions to mitigate risk: Mitigation actions: Research projects to be approved by programme managers and conducted by programme staff to ensure ownership of findings.

Mitigation status: Planning phase

ER Biennium Outputs

2020-2021

n/a

2022-2023

EROutp-0310

Output description: Program teams trained to incorporate OR in GF applications.

Output indicator: Number of national programs receiving GF support to conduct OR.

Target date: 31.12.2023

Progress status:

Progress description:

EROutp-0312

Output description: Number of OR projects completed in a funding cycle

Output indicator: Number of peer-reviewed publications and policy briefs.

Target date: 31.12.2023

Progress status:

Progress description:

ER Biennium Outcomes

2020-2021

n/a

EROutc-0080

Outcome description:	Availability of updated research agenda on priority issues affecting the program
Progress made towards outcome:	In planning phase

EROutc-0079

Outcome description:	Additional OR funding received from other sources.
Progress made towards outcome:	In planning phase

EROutc-0078

Outcome description:	Number of program staff dedicated to OR.
Progress made towards outcome:	In planning phase

EROutc-0077

Outcome description:	Programs identify and address factors that impede the effective implementation of interventions.
Progress made towards outcome:	In planning phase.