

Report of the 46th Meeting of the TDR Scientific and Technical Advisory Committee

Professor Margaret Gyapong
STAC Chair



Directors Report and Finances

- Highlighted activities of RCS, IMP and Global Engagement
- Financially we are in a good place:
 - Savings in undesignated funds reallocated to other activities
 - Efforts are being made to sustain donor contributions and identify new funding sources
 - An investment case has been developed to align with the strategy
- Risks are monitored as part of the internal TDR review process in alignment with the performance framework
- Core values: efforts are made to ensure that disease-endemic countries, and especially women in DEC, are prioritised over non-DECs but based on competence
- Staff changes
- Directors position soon to be available

Response to recommendations of 45th STAC

Recommendation	Response
TDR requested to publish results as to how gender roles affect womens capcity to apply for Grants during the pandemic and monitor enablers of engagement of women in science	<ul style="list-style-type: none"> Results included in a manuscript under review. TDR continues to involve and engage women in Science
Activities supported by TDR shd consider multidisciplinary nature of research and promote equitable recognition of all members of the research team.	<ul style="list-style-type: none"> Publication authorship policy which includes fair recognition of all contributors is being developed.
STAC made minor comments on strategy and endorsed it	<ul style="list-style-type: none"> Comments incorporated draft endorsed by JCB
In light of new strategy and reporting results, TDR to consider measuring impact on policy and program uptake at all levels of the organisation	<ul style="list-style-type: none"> Use of Case studies such as <ul style="list-style-type: none"> Number of SortIT studies that influenced Policy Number of Trainees that used SortIT
Explore opportunities for a new leadership training course in IR	<ul style="list-style-type: none"> Concept note Developed, funders being explored.
Director, Chair and Manager of Partnerships to meet and discuss governace approach for working groups	<ul style="list-style-type: none"> Done

Discussion points

- Overall good year for TDR
- Alignment of investment case with new strategy
- Role of One health as a cross cutting theme in TDR activities
- Practical challenges regarding AMR and vector resistance
- Authorship and attribution
- TB networks and issues of sustainability

RCS-Research Capacity Strengthening

- New MOOC IR modules, online courses, training documents and sensitization videos completed.
- IR toolkit now in Russian.
- An IR toolkit module on One Health was developed in English.
- A guide on 'how to conduct a scoping review' was finalized and made available in English, French and Mandarin, with accompanying instructional videos in English and French.
- 212 master's students were enrolled, including 17 MPH students from across 15 French-speaking West African countries.
- 140 students completed their MPH degree targeting IR.
- IR curriculum for MPH programmes, based on IR core competencies, developed.
- The first cohort of Clinical Research Leadership fellows started
- 18 fellows from the Clinical Research and Development Fellowship completed.

Regional training centres



- 18 functional satellite training centres in AMR, AFR, EUR, SEAR, EMR
- Hybrid and in-person courses (English, French, Spanish)
 - Implementation research
 - Good health research practise
 - Effective programme management and evaluation course
 - Good health
 - Ethics in implementation research
 - Good clinical practises
 - IR/priciples of IR
- Over 4000 registered for courses, 64% women

Discussion Points

- Need for integration of training curricular of RTCs into curricula of academic insitutions.
- Delays in ethical clearance for IR proposals a stumblig block for the IR and some clinical trials.
- Need to work with young scientists from LMICs to negotiate authorship on articles.
- Need for TDR to build additional regional partnerships e.g. with Africa CDC, to establish stronger relationships between academia and the Programme in relation to the Clinical Leadership Programme.

IMP – Research for Implementation Unit

- Early warning and response system (EWARS) against arboviral disease outbreaks was integrated into the national surveillance system in Mexico and piloted in 15 other countries.
- Multisectoral approaches (MSAs) were implemented in seven African countries against malaria and arbovirus, with evidence of impact on transmission of diseases.
- Integration of a self-diagnosis and treatment kit for mobile and hard-to-reach communities (Malakit) into the national malaria programme in Suriname.
- One Health operationalized as a transdisciplinary ecosystem approach addressing various diseases in the context of climate change.
- Positive effect of operational research through Structural Operational Research and Training Initiative (SORT IT) on health care practice case studies on: AMR, Ebola, COVID-19

IMP – Research for Implementation Unit

- Progress made on testing SIT against arboviral diseases, with preparations for testing under way.
- The Southern and East African Network for TB control (SEARN-TB) was launched, targeting 24 countries in the region.
- A generic research package developed to conduct root cause analysis of yellow fever outbreaks in African countries.
- A MOOC on ‘Incorporating an intersectional gender perspective in implementation research’ was launched.
- New evidence generated on:
 - VL elimination in the Indian subcontinent.
 - Gender and intersectionality in healthcare seeking and health related challenges.

Discussion points

- Repository is needed with a clear strategic pathway to guide training needs for those negotiating the increasing number of MOOCs.
- The use of research capacity tools and techniques and implementing them into research is clearly evident.
- Need to close gaps that exist in links between academia and disease control programmes for capacity strengthening work.
- Need to build capacity, particularly around data collection, database management and secondary analyses.
- TB networks and need for sustainability plan.


Engagement with WHO Departments

- Department for the Control of Neglected Tropical Diseases
- Emerging Diseases and Zoonoses Department, Health Emergencies Programme
- Alliance for Health Policy and Systems Research (AHPSR),
- WHO Regional Office for the Eastern Mediterranean (EMRO)
- Engaged with TDR in various ways
- Challenges with raising resources for issues relating to NTDs, malaria, pneumonia and other diseases that affect children.
- Engagement will continue

Partnerships and Global Engagement



- Strong linkage with regional offices
- Establishment of 13 community social innovations in health hubs in Africa, Asia, Latin and Central America and Europe
- Award of Impact Grants
- *Global Health Matters* podcast
- Knowledge management and promotion of Open Access
- Global priority research agenda documents published with engagement of TDR, including on AMR, health, etc.
- A guide for effective capacity strengthening for funders published by ESSENCE in collaboration with the Liverpool School of Tropical Medicine

The background features a complex arrangement of geometric shapes and patterns. On the left, a light blue vertical band contains a series of thin, parallel blue lines that curve towards the center. Below this, a yellow semi-circle is partially visible. The top of the image is a solid dark green rectangle. The bottom is a solid maroon rectangle. On the right side, there are several overlapping shapes: a large orange semi-circle, a blue semi-circle, and a red semi-circle with a fine vertical line pattern. A solid blue vertical band is also present on the far right.

**STAC WAS OVERALL IMPRESSED WITH THE
ACTIVITIES AND DELIVERABLES OF THE
SECRETARARIAT AND THE EFFORTS MADE
AT ALIGNING ACTIVITIES WITH THE NEW
STRATEGY.**

Key Recommendations

- Efforts made to include innovative approaches into the new strategy, including development of an investment case for resource mobilization, in coordination with the JCB and the Standing Committee, should be incorporated into the overall programme performance cycles.
- There should be a clear linkage from the draft TDR Performance Framework 2024–2029 to the format of the annual results reports, including the addition of indicators at all levels, not only publications; also, further details on definitions should be added.
- TDR's approach to authorship by LMIC colleagues and junior researchers, especially in assisting with negotiating power for authorship should be communicated to a wider audience and included in trainings as part of research planning, knowledge management and dissemination of research results.
- There is the need for rationalization of training resources (e.g. MOOCs) and presenting the full range of modules available on a user-friendly site.
- TDR should:
 - Continue supporting capacity building for data management and data analysis across its activities.
 - Explore opportunities for additional IR (e.g. health economics evaluation, root cause analysis) to strengthen policy engagement and operational systems related to global challenges addressed by TDR's activities.
 - Continue working with WHO regional offices and departments (ethics, research entities, etc.) and engage in further partnerships with regional and global organizations (e.g. Africa CDC and others).

The background is a complex abstract composition. It features a central white rectangular area where the text is located. Surrounding this are various colored regions: a dark teal area at the top, a light blue area on the left, a dark blue area on the right, and a purple area at the bottom. Overlapping these are several semi-circular and circular shapes in orange, red, and blue. Some of these shapes are filled with vertical line patterns in contrasting colors, such as red lines on a blue background or blue lines on a red background. The overall style is modern and graphic.

Thank you