

# TDR Expected Results

## Strategic Plans 2024–2025 and Progress 2022–2023

### Research Capacity Strengthening

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## 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:	31/03/2024
ER status:	On Track	Comment:	All the main activities planned for up to March 2024 have progressed as expected and outputs delivered on time. Development of IR module on One health is ongoing. Three articles emanating from IR demonstration projects have been published.

WHO region: Global

Partners: UNDP and PATH

Diseases: Dengue;Malaria;Neglected Tropical Diseases;Schistosomiasis;Tuberculosis;Other;Control and elimination of diseases of poverty;One Health

Review mechanism: Annual reports reviewed by the scientific working group and UNDP

ER manager: Edward Mberu KAMAU

Team: RCS - Edward Kamau, Christina Donagher; IMP - Abraham Aseffa, Ekua Johnson

Number of people working on projects: 125

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: No

### TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	No	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 project goal
Roles complimentary:	Yes	Ensure roles are complementary in the focus country by holding consensus and follow up meetings.
Coordination transparent:	Yes	ADP joint review and planning and updated activity workplans
Visibility:	Yes	TDR contributions highlighted at ADP events and technical reports. Impact stories shared among partners websites and appropriate social media platforms.

### Objectives and results chain

Approach to ensure uptake:	Engagement of relevant national and regional stakeholders including implementers and communities from the planning stage
Up-take/Use Indicator:	Number of countries using implementation research resources/tools and project findings to improve access and delivery of health interventions

<b>Gender and geographic equity:</b>	Application of gender analysis and regional representation for all activities under this ER. The Intersectional gender lens toolkit developed by TDR. TDR to updated the current online IR Toolkit with a module on intersectional gender lens for the development and implementation of IR projects.
<b>Publication plan:</b>	Country reports or featured impact stories and scientific articles published in peer-reviewed journals and on open access platforms, e.g. TDR Gateway.
<b>Up-take/use indicator target date:</b>	31/03/2024

## Sustainable Development Goals

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

## Concept and approach

<b>Rationale:</b>	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 10 years, TDR has put in place a number of initiatives to raise awareness and knowledge on IR, especially in LMICs.
<b>Design and methodology:</b>	<ol style="list-style-type: none"> <li>1. Establishment of a pool of resource persons drawn from TDR RTCs, IR toolkit development team, TDR Global, implementers and academia.</li> <li>2) Consultation with in-country stakeholders to identify priorities areas of need.</li> <li>3) A structured capacity building programme from training to actual implementation of research projects.</li> <li>4) Provision of small grants to conduct pilot demonstration IR projects.</li> </ol>
<b>Approach to ensure quality:</b>	<ol style="list-style-type: none"> <li>1) Countries and teams to participate in the programme will be identified and selected based on defined criteria by the Access and Delivery Partnership.</li> <li>2) Regular monitoring of implementation of the programme by TDR staff and consultants.</li> <li>3) Progress technical and annual reports reviewed by RCS SWG.</li> <li>4) Publication in peer-reviewed, open access journals.</li> </ol>

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## ER Objectives

ERObj-0036 : 1. Uptake and use of TDR IR online and multilingual training resources in ADP focus countries and beyond.

ERObj-0037 : 2. Capacity for implementation research in ADP focus countries 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 ADP focus countries.

ERObj-0062 : 4, Establish south-south collaborations among and beyond ADP focus countries

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Biennium Budget

Biennium: 2022-2023

Low and Hight Budget Scenario

	Low Budget Scenario	High Budget Scenario
Undesignated funds	USD 0	USD 0
Designated funds	USD 500000	USD 500000
Total	USD 500000	USD 500000

Planned Budget

Undesignated funds	USD 0
Designated funds	USD 192000
Total	USD 192000

Biennium: 2024-2025

Low and Hight Budget Scenario

	Low Budget Scenario	High Budget Scenario
Undesignated funds	USD 0	USD 0
Designated funds	USD 500000	USD 500000
Total	USD 500000	USD 500000

Planned Budget

Undesignated funds	USD 0
Designated funds	USD 500000
Total	USD 500000

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## ER Biennium Risks

Biennium: 2022-2023

ERRisk - 0261: IR projects not aligned properly with ADP objectives.

Actions To Mitigate Risk: Early involvement of ADP stakeholders in project inception and implementation

Mitigation Status: On Track

Biennium: 2022-2023

ERRisk - 0260: Inadequate utilization of IR project findings at country level

Actions To Mitigate Risk: Targeted selection of partners, robust training of research teams prior to implementation and regular monitoring

Mitigation Status: On Track

Biennium: 2022-2023

ERRisk - 0271: Political and security issues hinder the implementation of planned activities.

Actions To Mitigate Risk: Monitor and respond to emerging political and security situations at country and regional level.

Mitigation Status: On Track

Biennium: 2024-2025

ERRisk - 0284: Inadequate utilization of IR project findings at country or program level.

Actions To Mitigate Risk: Targeted selection of partners, robust training of research teams prior to implementation, collaboration with disease programs and WCO and undertaking regular monitoring.

Mitigation Status: Planning phase

Biennium: 2024-2025

ERRisk - 0285: IR projects not aligned properly with ADP objectives and approaches.

Actions To Mitigate Risk: Early involvement and engagement of ADP stakeholders and country disease programs in project inception, implementation, dissemination and utilization of research findings

Mitigation Status: Planning phase

Biennium: 2024-2025

ERRisk - 0286: Political and security issues hinder the implementation of planned activities.

Actions To Mitigate Risk: Monitor and respond to emerging political and security situations at country and regional level.

Mitigation Status: Planning phase

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## ER Biennium Outputs

Biennium: 2024-2025

EROutp-0351: Number of TDR IR resources used by disease programs in countries

Output Indicator: ADP focus countries adopt and scale up the use TDR online IR resources

**Output Target Date:** 31/03/2025

**Output Progress Status:** On Track

**Output Progress Description:** Focus countries identified and engagement on priority IR areas initiated, including integrated projects and One Health approach.

**Biennium:** 2022-2023

**EROutp-0323:** Number of health interventions utilizing findings from IR projects.

**Output Indicator:** Research teams in ADP focus countries use IR to optimize and scale up priority health interventions.

**Output Target Date:** 31/03/2023

**Output Progress Status:** Completed

**Output Progress Description:** Monitor, document and evaluate the utilization and impact of research findings from the demonstration projects by the IR teams.

**Biennium:** 2022-2023

**EROutp-0322:** Number and quality of IR projects implemented by partners in countries

**Output Indicator:** Research teams in ADP focus countries trained to develop and implement IR projects.

**Output Target Date:** 31/03/2023

**Output Progress Status:** Completed

**Output Progress Description:** Pilot demonstration IR projects funded as part of the training and mentorship grant in Ghana and Malawi.

**Biennium:** 2022-2023

**EROutp-0321:** Number of TDR IR resources used by countries

**Output Indicator:** ADP focus countries adopt and use TDR online IR resources

**Output Target Date:** 31/03/2023

**Output Progress Status:** Completed

**Output Progress Description:** Countries identified and engagement initiated.

**Biennium:** 2024-2025

**EROutp-0404:** Application of evidence based community practices for control and elimination of dengue in three municipal communities.

**Output Indicator:** Assessment of community based interventions for dengue vectors source reduction for prevention and control of dengue

**Output Target Date:** 31/03/2025

**Output Progress Status:** On Track

**Output Progress Description:** RCS in collaboration with WCO, Bhutan and its national partners has initiated OR study to assess community based vector interventions.

**Biennium:** 2024-2025

**EROutp-0401:** Number of endemic countries conducting IR projects that will enhance the impact of paediatric praziquantel

**Output Indicator:** Engage in IR activities that will support the introduction of paediatric praziquantel in schistosomiasis endemic countries.

**Output Target Date:** 31/03/2025

**Output Progress Status:** On Track

**Output Progress Description:** Two IR projects are ongoing in Ghana and Tanzania to estimate the burden of female genital schistosomiasis and identify integrated approaches with the roll out of paediatric praziquantel.

Working in collaboration with NTD department to finalize a mobile App for the identification snail intermediate hosts for schistosomiasis.

**Biennium:** 2024-2025

**EROutp-0402:** Number of countries piloting the App

**Output Indicator:** Determine usability and accuracy of the new AI based version of WHO skin NTD mobile App

**Output Target Date:** 31/03/2025

**Output Progress Status:** On Track

**Output Progress Description:** RCS in collaboration with NTD department and its partners is supporting a cross-sectional study to assess the usability and accuracy of the skin NTD mobile App among health workers in Kenya.

**Biennium:** 2024-2025

**EROutp-0403:** Evidence based snakebite management practices at community level

**Output Indicator:** Community KAP on snakes and snakebites in Bhutan

**Output Target Date:** 31/03/2025

**Output Progress Status:** On Track

**Output Progress Description:** RCS in collaboration with WCO, Bhutan and its national partners has initiated a mixed methods OR study to assess KAP among rural community members in Chukha Dzongkhag.

**Biennium:** 2024-2025

**EROutp-0352:** Number and quality of IR projects implemented by disease programs in countries

**Output Indicator:** IR teams in ADP focus countries able to provide training for other countries to develop and implement IR projects.

Output Target Date: 31/03/2025

Output Progress Status: On Track

Output Progress Description: Monitor, document and evaluate the utilization and impact of research findings from the demonstration projects conducted by the IR teams.

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#### ER Biennium Outcomes

Biennium: 2022-2023

EROutc-0085: ADP focus countries routinely identify and address factors that impede the effective access and delivery of health interventions.

Progress made towards outcome : Through the comprehensive IR training and mentorship support, IR teams in Ghana and Malawi have developed demonstration project proposals that will be funded for implementation on a pilot basis.

Biennium: 2022-2023

EROutc-0095: ADP focus countries develop or update their national NTD plan in line with the WHO NTD roadmap 2021-2030

Progress made towards outcome : Indonesia and Tanzania have aligned their national NTD or disease plan with the WHO NTD roadmap 2021-2030.

Biennium: 2024-2025

EROutc-0096: ADP focus countries routinely identify and address factors that impede the effective access and delivery of integrated health interventions.

Progress made towards outcome : Review and planning

Biennium: 2024-2025

EROutc-0097: ADP focus countries develop and update their national NTD plans for integrated services delivery in line with WHO NTD roadmap 2021-2030

Progress made towards outcome : Review and planning

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#### ER Project Links

Project ID : P23-00927 PI Name : Alexandre DELAMOU

ER Project Title : Translation of IR Toolkit modal content to French

ER Start Date : 01/04/2020 ER End Date : 31/03/2024

Project ID : P22-00847 PI Name : Alexandre DELAMOU

ER Project Title : Translation of IR Toolkit gender module content to French



ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P22-00869	PI Name	:	Ratchanekorn Wutirat
ER Project Title	:	Design and incorporation of French version of gender module on the online IR TK			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P21-00453	PI Name	:	Ratchanekorn Wutirat
ER Project Title	:	Design, development and deployment of a digital version of IR Toolkit.			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P21-00449	PI Name	:	Dzinkambani Kambalame
ER Project Title	:	Strengthening capacity of the NTDCP to align and implement the new WHO NTDs roadmap (2021-2030)			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P21-00330	PI Name	:	Yodi Mahendradhata
ER Project Title	:	Development of the Indonesian National NTD Roadmap 2021-2025			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P20-00004	PI Name	:	Issa Sanou
ER Project Title	:	French virtual workshop for the Implementation Research Toolkit			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P21-00309	PI Name	:	Dzinkambani Kambalame
ER Project Title	:	Comprehensive Implementation Research and Mentorship Training Project			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P21-00305	PI Name	:	Paul Kazyoba
ER Project Title	:	Strengthening capacity of the NTDCP to adopt and implement the new WHO road map for NTD 2021-2030			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P21-00206	PI Name	:	Valérie R. Louis
ER Project Title	:	Translation of the new Gender Module for Implementation Research Toolkit (IRTK) to French			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P21-00198	PI Name	:	Robinah Najjemba
ER Project Title	:	Develop and review modules of the IR toolkit			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024
Project ID	:	P21-00182	PI Name	:	Ratchanekorn Wutirat
ER Project Title	:	Updated TDR Implementation Research Tool Kit: Design and hosting of Gender module on the ADP website			
ER Start Date	:	01/04/2020	ER End Date	:	31/03/2024

Project ID :	P20-00014	PI Name :	Alison Krentel
ER Project Title :	Facilitation of a French trainers workshop for the Implementation Research Toolkit		
ER Start Date :	01/04/2020	ER End Date :	31/03/2024
Project ID :	P21-00324	PI Name :	Emmanuel Asampong
ER Project Title :	Comprehensive Implementation Research and Mentorship Training Project		
ER Start Date :	01/04/2020	ER End Date :	31/03/2024

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**ER Country Links**

Country:	Ghana	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Indonesia	WHO Region :	SEARO	World Bank :	Upper middle income Income Group
Country:	Bhutan	WHO Region :	SEARO	World Bank :	Lower middle income Income Group
Country:	Senegal	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Burkina Faso	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Malawi	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Tanzania	WHO Region :	AFRO	World Bank :	Lower middle income Income Group

## Expected Result: 2.1.4

**Title:** Advanced training in Clinical Product Development ( Clinical Research and Development Fellowship grants) and the 2023 Clinical Research leadership (CRL) scheme

**Strategic Work Area:** Research capacity strengthening      **Workstream:**

<b>ER type:</b>	Continuing	<b>Funding type:</b>	UD and DF
<b>Start date:</b>	01/01/2022	<b>End date:</b>	31/12/2025
<b>ER status:</b>	On Track	<b>Comment:</b>	All fellows re-entry phase is expected to be completed in 2023 except 2 in 2024.

**WHO region:** Global

**Partners:** IFPMA; pharmaceutical companies; Product Development Partnerships (PDPs); public research institutions.

**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:** Mahnaz VAHEDI

**Team:** Mahnaz Vahedi, Najoua Kachouri, Mary Maier

**Number of people working on projects:** 3

**FENSA clearance obtained for all Non-State Actors?** No

**Justification for no FENSA clearance:** No

### TDR partnership criteria

Add value:	Yes	Use resources:	No
Align goals:	No	Address knowledge gaps:	Yes
Integrate mandates:	No	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	No		

### TDR partnership criteria indicators

Objectives aligned:	Yes	To develop leaders in clinical research in Low and Middle-Income Countries
Roles complimentary:	Yes	EDCTP has the similar fellowship scheme but works only in sub saharan Africa and TDR works worldwide
Coordination transparent:	Yes	identifiacion of training partners and fellows through call for applications.
Visibility:	Yes	fellowship entirely completed (including re-integration plan ) for 18 CRDF 40 CRL trained.

### Objectives and results chain

<b>Approach to ensure uptake:</b>	Publications of success stories along the grant; TDR RCS annual reports; reports at 6 and 12 months of the fellowship; regular meetings with previous and current fellows
<b>Up-take/Use Indicator:</b>	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:	Publications of success story of Clinical Research Leadership programme
Up-take/use indicator target date:	31/12/2025

## 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/seminars 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.

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## 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.

**ERObj-0067** : 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.

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## Biennium Budget

Biennium: 2022-2023

#### Low and Hight Budget Scenario

	Low Budget Scenario	High Budget Scenario
Undesignated funds	USD 0	USD 0
Designated funds	USD 1500000	USD 1500000
Total	USD 1500000	USD 1500000

#### Planned Budget

Undesignated funds	USD 300000
Designated funds	USD 2252000
Total	USD 2552000

Biennium: 2024-2025

#### Low and Hight Budget Scenario

	Low Budget Scenario	High Budget Scenario
Undesignated funds	USD 0	USD 0
Designated funds	USD 3000000	USD 3000000
Total	USD 3000000	USD 3000000

#### Planned Budget

Undesignated funds	USD 0
Designated funds	USD 3000000
Total	USD 3000000

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#### ER Biennium Risks

Biennium: 2022-2023

ERRisk - 0211: 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

Biennium: 2022-2023

ERRisk - 0214: Geographical distribution biased to AFRO due to EDCTP Partnership which focus only on subsaharian countries

Actions To Mitigate Risk: Distribute call for apllications trough the WHO RO/CO and TDR networks outside Africa and through social media.

**Mitigation Status:** On Track

**Biennium:** 2022-2023

**ERRisk - 0215:** 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:** On Track

**Biennium:** 2024-2025

**ERRisk - 0308:** 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:** Planning phase

**Biennium:** 2024-2025

**ERRisk - 0309:** Geographical distribution biased to AFRO due to the earlier EDCTP Partnership which focus only on sub-Saharan countries.

**Actions To Mitigate Risk:** Distribute call for applications through the WHO RO/CO and TDR networks outside Africa and through social media.

**Mitigation Status:** Planning phase

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#### ER Biennium Outputs

**Biennium:** 2024-2025

**EROutp-0379:** 20 fellows trained

**Output Indicator:** Highly skilled health research leaders in LMICs

**Output Target Date:** 25/03/2025

**Output Progress Status:**

**Output Progress Description:**

**Biennium:** 2022-2023

**EROutp-0256:** A compendium of training programmes developed

**Output Indicator:** Mapping training programmes which address clinical research team core competencies

**Output Target Date:** 25/03/2021

**Output Progress Status:** Cancelled

**Output Progress Description:** My understanding that development of this compendium was cancelled by previous manager.

Biennium: 2022-2023

EROutp-0254: 70% of home institutions involved in national or international R&D projects

Output Indicator: R&D skills gained during the training implemented in the home institution through a re-entry grant

Output Target Date: 25/03/2023

Output Progress Status: On Track

Output Progress Description: All home institutions are involved in the re-entry grants activities .

Biennium: 2022-2023

EROutp-0253: 20 fellows trained

Output Indicator: Highly skilled health research leaders in LMICs

Output Target Date: 25/03/2023

Output Progress Status: On Track

Output Progress Description:

Biennium: 2024-2025

EROutp-0380: 70% of home institutions involved in national or international R&D projects

Output Indicator: R&D skills gained during the training implemented in the home institution through a re-entry grant

Output Target Date: 31/12/2025

Output Progress Status: On Track

Output Progress Description:

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#### ER Biennium Outcomes

Biennium: 2022-2023

EROutc-0053: Highly skilled trainees (for drugs, vaccines and diagnostics) in LMICs leads clinical trials in their country/region.

Progress made towards outcome :

Biennium: 2024-2025

EROutc-0114: Highly skilled trainees (for drugs, vaccines and diagnostics) in LMICs leads clinical trials in their country/region.

Progress made towards outcome :

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#### ER Project Links

Project ID :	P20-00088	PI Name : Parveen Abdulgani Shaikh
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00087	PI Name : Nomenjanahary Rakotondrandriana Antsa
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00086	PI Name : Masauso Moses Phiri
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00085	PI Name : Adela Ngwewondo
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00084	PI Name : Alebachew Messele Kebede
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00083	PI Name : Anna H. Jammeh
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00082	PI Name : Hiwot Amare Hailemariam
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00078	PI Name : Titus Henry Divala
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00077	PI Name : Dolores Katalina Carrer
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00079	PI Name : Rediet Fikru Gebresenbet
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00080	PI Name : Esayas Kebede Gudina
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)	



ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P20-00076	PI Name	:	Abdalla Abdalla
ER Project Title	:	TDR Clinical Research and Development Fellowship (CRDF)			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P20-00074	PI Name	:	Russell Holley
ER Project Title	:	Interactive M&E toolkit (CRDF)			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P20-00015	PI Name	:	Mark Neijssel
ER Project Title	:	Bibliometric analysis of TDR Clinical Research and Development Fellows publication outputs			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P20-00089	PI Name	:	Trokon Omarley Yeabah
ER Project Title	:	TDR Clinical Research and Development Fellowship (CRDF)			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P22-00789	PI Name	:	N. ria Casamitjana
ER Project Title	:	Article in the Global Health Action (CRDF)			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	B40439	PI Name	:	Nimesh Poudyal
ER Project Title	:	Career Development Fellowship placement at IVI Republic of Korea for one year			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P22-00612	PI Name	:	Mona Ali Osman
ER Project Title	:	CRDF placement at GSK-Biologicals, Belgium			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	B80330	PI Name	:	Jeannhey Christevy Vouvoungui
ER Project Title	:	CRDF placement at IDDO, Oxford, Gates round 9			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P20-00094	PI Name	:	Janet Neubecker
ER Project Title	:	M&E Toolkit editing			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P20-00117	PI Name	:	Philomena PETER ASAGA
ER Project Title	:	Dr Philomena Peter Asaga CRDF			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P21-00183	PI Name	:	N. ria Casamitjana

ER Project Title :	Online M&E Toolkit		
ER Start Date :	01/01/2022	ER End Date :	31/12/2025
Project ID :	P21-00192	PI Name :	Daniel Yilma Bogale
ER Project Title :	CRDF placement at IDDO-Cape and Darwin		
ER Start Date :	01/01/2022	ER End Date :	31/12/2025
Project ID :		PI Name :	
ER Project Title :			
ER Start Date :	01/01/2022	ER End Date :	31/12/2025
Project ID :	P20-00090	PI Name :	Amanda Wanyana
ER Project Title :	TDR Clinical Research and Development Fellowship (CRDF)		
ER Start Date :	01/01/2022	ER End Date :	31/12/2025

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#### ER Country Links

Country:	Nigeria	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Cameroon	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Rwanda	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Gambia, The	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Uganda	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Mali	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Colombia	WHO Region :	AMRO	World Bank :	Upper middle income Income Group
Country:	Burkina Faso	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Ethiopia	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Tanzania	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Nepal	WHO Region :	SEARO	World Bank :	Low income Income Group
Country:	Sudan	WHO Region :	EMRO	World Bank :	Low income Income Group
Country:	Argentina	WHO Region :	AMRO	World Bank :	Upper middle income Income Group

Country:	Zambia	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Gambia, The	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	India	WHO Region :	SEARO	World Bank :	Lower middle income Income Group
Country:	Congo, Rep.	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Congo, Dem. Rep.	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Sierra Leone	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Kenya	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Brazil	WHO Region :	AMRO	World Bank :	Upper middle income Income Group
Country:	India	WHO Region :	SEARO	World Bank :	Lower middle income Income Group
Country:	Cameroon	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Liberia	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Madagascar	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Malawi	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Ghana	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Senegal	WHO Region :	AFRO	World Bank :	Lower middle income Income Group
Country:	Mozambique	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Guinea	WHO Region :	AFRO	World Bank :	Low income Income Group
Country:	Gabon	WHO Region :	AFRO	World Bank :	Upper middle income Income Group

## 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:	01/01/2022	End date:	31/12/2025
ER status:	On Track	Comment:	Additional students enrolled with effective and efficient implementation of extra UD and DF that became available on the second year of the biennium.

WHO region: Global

Partners: The ten universities supporting the scheme,  
Directorate for Development Cooperation and Humanitarian Affairs (Ministry of Foreign and European Affairs) of the Government of Luxembourg, and Germany's Deutsche Gesellschaft für Technische Zusammenarbeit

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 & Christina Donagher

Number of people working on projects: 50

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: No

#### 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

<b>Gender and geographic equity:</b>	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 reached our gender equity target. As of September 2023, 471 students received TDR scholarship with equal number of men and women and one transgender student. Of the eight PhD students, one is a woman. In 2022, we selected new universities for the 2nd phase of the scheme. This includes Indian Institute of Health Management, Jaipur, India and 2 French speaking universities namely University of Science Techniques and Technology Mali, University of Cheikh Anta Diop, Senegal.
<b>Publication plan:</b>	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 2023
<b>Up-take/use indicator target date:</b>	31/12/2025

## Sustainable Development Goals

No Poverty;Quality Education;Gender Equality;Reduced Inequality

## Concept and approach

<b>Rationale:</b>	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's 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 2024-2025 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.
<b>Design and methodology:</b>	There are open calls for applications from individuals with confirmed registration/admission to a recognized training institution in an LMIC. TDR is committed to Equality, Diversity and Inclusivity in science. Applicants are encouraged to apply irrespective of gender identity, sexual orientation, ethnicity, religious, cultural and social backgrounds, or (dis)ability status.
<b>Approach to ensure quality:</b>	Annual technical progress reports from each university is reviewed by the responsible manager and RCS Scientific Working Group; Annual M&E report from each university is reviewed by the responsible manager; All articles will be published in peer reviewed open access journals.

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## ER Objectives

ERObj-0034 : Train early career leading to master's degree

ERObj-0066 : Train early career leading to master's degree

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#### Biennium Budget

Biennium: 2022-2023

#### Low and Hight Budget Scenario

	Low Budget Scenario	High Budget Scenario
Undesignated funds	USD 3050000	USD 6000000
Designated funds	USD 500000	USD 700000
Total	USD 3550000	USD 6700000

#### Planned Budget

Undesignated funds	USD 3555000
Designated funds	USD 937000
Total	USD 4492000

Biennium: 2024-2025

#### Low and Hight Budget Scenario

	Low Budget Scenario	High Budget Scenario
Undesignated funds	USD 3200000	USD 6100000
Designated funds	USD 500000	USD 700000
Total	USD 3700000	USD 6800000

#### Planned Budget

Undesignated funds	USD 3200000
Designated funds	USD 500000
Total	USD 3700000

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#### ER Biennium Risks

Biennium: 2022-2023

ERRisk - 0232: 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

**Biennium:** 2022-2023

**ERRisk - 0231:** 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

**Biennium:** 2022-2023

**ERRisk - 0233:** 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:** On Track

**Biennium:** 2024-2025

**ERRisk - 0307:** 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

**Biennium:** 2024-2025

**ERRisk - 0306:** 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

**Biennium:** 2022-2023

**ERRisk - 0257:** 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:** Completed

**Biennium:** 2022-2023

**ERRisk - 0256:** 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

**Biennium:** 2022-2023

**ERRisk - 0234:** 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

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#### ER Biennium Outputs

**Biennium:** 2024-2025

**EROutp-0378:** Under 40 M: Approximately 50 trainees enrolled or completed their master's trainings; Under 50M: Approximately. 100 trainees enrolled or completed their master's trainings.

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

**Output Target Date:** 31/12/2025

**Output Progress Status:**

**Output Progress Description:**

**Biennium:** 2024-2025

**EROutp-0377:** Using virtual platform such as IR COONNECT will enable to share lessons learned, improving communications and collaborations amongst seven universities in different regions

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

**Output Target Date:** 31/12/2025

**Output Progress Status:**

**Output Progress Description:**

**Biennium:** 2022-2023

**EROutp-0285:** Using virtual platform such as IR COONNECT will enable to share lessons learned, improving communications and collaborations amongst seven universities in different regions

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

**Output Target Date:** 31/12/2023

**Output Progress Status:** On Track

**Output Progress Description:**



**Biennium:** 2022-2023

**EROutp-0283:** Under 40 M: Approximately 50 trainees enrolled or completed their master's trainings; Under 50M: Approximately 100 trainees enrolled or completed their master's trainings.

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

**Output Target Date:** 31/12/2023

**Output Progress Status:** On Track

**Output Progress Description:**

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#### ER Biennium Outcomes

**Biennium:** 2022-2023

**EROutc-0064:** 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 :** As the Scheme's first phase (2015-2021) comes to an end, the process of selection of universities to participate in the second phase (2022-2026) started with a call for applications from 22 March -10 May 2021. A total of 20 applications submitted and 19 of them were eligible. Each application was reviewed by one member of the Scientific Working Group (SWG) and one external reviewer. Each application was scored from 1 (lowest score) to 5 (highest score) for the following criteria: University's profile; implementation research expertise; staff experience in teaching IR; sustainability and proposal relevance and feasibility. Following a three day virtual meeting held in June 2021, the adhoc scientific review committee proposed names of universities to be selected for the second phase of the scheme. Director TDR made the final decision which was endorsed by the RCS scientific working group during the annual meeting on Nov 2021.

TDR invited all reviewers to a virtual selection committee meeting to present and discuss their findings for final scoring. Three virtual meetings were arranged on 24 and 25 June to review all applications and the final meeting on 29 June 2021 aimed at reviewing and finalising the scores.

The following universities are selected for the second phase of the scheme:

- Universidad de Antioquia, Colombia
- University of Sciences, Techniques and Technologies of Bamako, Mali (for consideration to add another French speaking university if further funding becomes available)
- University of Ghana, Ghana
- Indian Institute of Health Management Research (IIHMR), Jaipur, India
- Institut de Santé et Développement, Université Cheikh Anta Diop, Sénégal
- University of the Witwatersrand, South Africa
- BRAC, Bangladesh
- Univesity of Gadjja Mada, Indonesia

**Biennium:** 2024-2025

**EROutc-0113:** 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 : All universities in the second phase of the scheme are now operational.

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## ER Project Links

Project ID :	P20-00013	PI Name : Malabika Sarker
ER Project Title :	TDR Supported Postgraduate Training Scheme with a focus on Implementation Research	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00016	PI Name : Carlos Alberto Rojas Arbalaez
ER Project Title :	TDR Supported Postgraduate Training Scheme with a focus on Implementation Research LOA 4	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P21-00222	PI Name : Charles Michelo
ER Project Title :	TDR Supported Postgraduate Training Scheme with a focus on Implementation Research	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P21-00223	PI Name : Latifat Ibisomi
ER Project Title :	TDR Supported Postgraduate Training Scheme with a focus on Implementation Research LOA 4	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P21-00475	PI Name : Elaine Fletcher
ER Project Title :	Supported Series - TDR Postgraduate Training Scheme	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P21-00535	PI Name : Olakunle O. Alonge
ER Project Title :	Developing online content for addressing competency gaps in IR training programs	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00042	PI Name : Yodi Mahendradhata
ER Project Title :	TDR Supported Postgraduate Training Scheme with a focus on Implementation Research LOA 4	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00043	PI Name : Jocelyn Dejong
ER Project Title :	TDR Supported Postgraduate Training Scheme with a focus on Implementation Research LOA 4	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	B80035	PI Name : Olakunle O. Alonge
ER Project Title :	Pilot evaluation of implementation research competencies in low- and middle-income countries	
ER Start Date :	01/01/2022	ER End Date : 31/12/2025
Project ID :	P20-00046	PI Name : Russell Holley
ER Project Title :	to convert Ethics course to an interactive online version	

ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P20-00044	PI Name	:	Russell Holley
ER Project Title	:	Production of a training manual for the ethics in implementation research			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P21-00161	PI Name	:	Adama Faye
ER Project Title	:	TDR Supported Postgraduate Training Scheme with a focus on Implementation Research			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	P23-00932	PI Name	:	Dalal Najjar
ER Project Title	:	RCS Satellite Session during Annual Conference CUGH 2023			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025
Project ID	:	B80035	PI Name	:	Olakunle O. Alonge
ER Project Title	:	Pilot evaluation of implementation research competencies in low- and middle-income countries			
ER Start Date	:	01/01/2022	ER End Date	:	31/12/2025

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[ER Country Links](#)

## 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:	31/12/2025
ER status:	On Track	Comment:	24 manuscripts from Guinea and Kenya developed. 16 from Kenya have been submitted for peer review and 8 from Guinea are undergoing English language editing.

WHO region: Global

Partners: Disease programs and GF

Diseases: Malaria; Tuberculosis; Other; Control and elimination of diseases of poverty; Climate change's impact on health

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

ER manager: Edward Mberu KAMAU

Team: Edward Mberu Kamau and Donagher Christina

Number of people working on projects: 50

FENSA clearance obtained for all Non-State Actors? Yes

Justification for no FENSA clearance: No

### TDR partnership criteria

Add value:	Yes	Use resources:	Yes
Align goals:	Yes	Address knowledge gaps:	Yes
Integrate mandates:	No	Build strengths:	Yes
Reduce burden:	Yes	Foster networking:	Yes
Increase visibility:	Yes		

### TDR partnership criteria indicators

Objectives aligned:	Yes	Established SORT IT smart objectives while contributing to the operational research agenda of GF supported programs at country level.
Roles complimentary:	Yes	Ensure clear and complementary roles are supported by disease programs.
Coordination transparent:	Yes	Annual global calendar to ensure availability of SORT IT facilitators. Matching GF grant end date with technical support to include OR components in the new GF applications or reprogramed grants.
Visibility:	Yes	TDR and partners technical and financial contributions highlighted in reports, publications and policy briefs. Impact assessment and stories posted in websites and shared in appropriated social media platforms.

### 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 and geographic analysis to all activities under this ER,, including disaggregated data reporting complimented by the intersectional gender analysis toolkit and strategy developed by TDR.
Publication plan:	SORT IT articles and policy briefs published in open access, peer reviewed journals or in suitable platforms, e.g. TDR Gateway.
Up-take/use indicator target date:	31/12/2023

## Sustainable Development Goals

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

## Concept and approach

Rationale:	<p>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.</p> <p>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.</p> <p>The expected result 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.</p>
Design and methodology:	<p>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</p>

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 established SOPs, including milestones and measurable targets.
- 4) Regular monitoring of progress and impact of the program by TDR staff and consultants.
- 5) Assessment of the impact on policy and practice of selected OR studies

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**ER Objectives**

**ERObj-0054** : To support national disease programs receiving GF grants integrate OR in GF applications, their NSPs and reprogramed grants.

**ERObj-0058** : To create a critical mass of program personnel with OR skills and experience.

**ERObj-0055** : To ensure uptake and use of TDR OR and multilingual training resources by GF supported programs.

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**Biennium Budget**

Biennium: 2024-2025

**Low and Hight Budget Scenario**

	Low Budget Scenario	High Budget Scenario
Undesignated funds	USD 150000	USD 250000
Designated funds	USD 50000	USD 200000
Total	USD 200000	USD 450000

**Planned Budget**

Undesignated funds	USD 150000
Designated funds	USD 50000
Total	USD 200000

Biennium: 2022-2023

## Low and Hight Budget Scenario

	Low Budget Scenario	High Budget Scenario
Undesignated funds	USD 50000	USD 200000
Designated funds	USD 50000	USD 200000
Total	USD 100000	USD 400000

## Planned Budget

Undesignated funds	USD 250000
Designated funds	USD 0
Total	USD 250000

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## ER Biennium Risks

Biennium: 2022-2023

ERRisk - 0252: 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: On Track

Biennium: 2022-2023

ERRisk - 0253: 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: On Track

Biennium: 2024-2025

ERRisk - 0289: Risk 3: Over dependance on GF grants as the only source of OR support at country level.

Actions To Mitigate Risk: Mitigation action: Disease programs encouraged to share their regular impact evaluation of operational research findings on program performance with all partners to advocate for alternative funding sources for OR activities.

Mitigation Status: Planning phase

Biennium: 2024-2025

ERRisk - 0288: Risk 2: Disease program evaluation and assessment not conducted regularly to demonstrate impact of operational research projects on programme performance.

Actions To Mitigate Risk: Mitigation actions: GF applications and reprogramed grants to include OR impact evaluation funding.

Mitigation Status: Planning phase

Biennium: 2024-2025

ERRisk - 0287: Risk 1: Operational research findings not implemented systematically by the disease programs.

**Actions To Mitigate Risk:** Mitigation actions: Operational research projects to be approved by programme managers and conducted by programme staff to ensure ownership of findings.

**Mitigation Status:** Planning phase

**Biennium:** 2022-2023

**ERRisk - 0270:** Risk 4: Political and security situations hinder implementation of planned training activities.

**Actions To Mitigate Risk:** Close monitoring and response to emerging national and regional political and security situations.

**Mitigation Status:** On Track

**Biennium:** 2022-2023

**ERRisk - 0254:** 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:** On Track

**Biennium:** 2024-2025

**ERRisk - 0290:** Risk 4: Political and security situations hinder implementation of planned training and research activities.

**Actions To Mitigate Risk:** Close monitoring and response to emerging national and regional political and security situations.

**Mitigation Status:** Planning phase

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#### ER Biennium Outputs

**Biennium:** 2024-2025

**EROutp-0353:** Number of national programs receiving GF support to conduct and evaluate operational research projects.

**Output Indicator:** National program teams supported to incorporate operational research in their national strategic plans (NSPs), GF applications or reprogramed grants and trained to conduct SORT IT courses.

**Output Target Date:** 31/12/2025

**Output Progress Status:** On Track

**Output Progress Description:** National SORT IT alumni identified to provide comprehensive technical support to programs while engaging with all national operational research stakeholders.

**Biennium:** 2024-2025

**EROutp-0354:** Number of open access, peer-reviewed publications and policy/practice briefs.

**Output Indicator:** Number of operational research projects completed in each funding cycle

**Output Target Date:** 31/12/2025

**Output Progress Status:** On Track

**Output Progress Description:** Operational research funding to include dissemination workshops and open access publication charges.



**Biennium:** 2024-2025

**EROutp-0355:** Number of national programs with capacity to plan, conduct and utilize operational research findings.

**Output Indicator:** National programs supported to create critical mass of staff with operational research capabilities.

**Output Target Date:** 31/12/2025

**Output Progress Status:** On Track

**Output Progress Description:** All supported SORT IT courses will follow and implement all established SOPs that include milestones, targets, reporting and monitoring.

**Biennium:** 2024-2025

**EROutp-0356:** Availability of a bilingual electronic version of the framework.

**Output Indicator:** Framework for operational research in GF supported programs published, translated to French and disseminated.

**Output Target Date:** 31/12/2025

**Output Progress Status:** On Hold

**Output Progress Description:** Executive clearance in process.

**Biennium:** 2022-2023

**EROutp-0339:** Availability of the electronic version of the Framework.

**Output Indicator:** Framework for OR in GF supported programs co-published, translated and disseminated.

**Output Target Date:** 31/12/2023

**Output Progress Status:** Cancelled

**Output Progress Description:** Awaiting a decision on co-publishing agreement between WHO and GFATM

GFATM delayed decision to participate in the revision of the framework and finally declined. The original OR/IR framework was published by GFATM and its partners that included TDR.

**Biennium:** 2024-2025

**EROutp-0405:** GF supported programs include OR components in their next GF applications grants.

**Output Indicator:** Catalytic funding provided to Sierra Leone to demonstrate the scope and value of OR within GF supported programs

**Output Target Date:** 31/12/2025

**Output Progress Status:** On Track

**Output Progress Description:** RCS in collaboration with WCO, Sierra Leone, HTM programs and their implementing partners are planning for a SORT IT course to be implemented and completed in the current biennium.

Biennium: 2022-2023

EROutp-0312: Number of open access, peer-reviewed publications and policy briefs.

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

Output Target Date: 31/12/2023

Output Progress Status: Completed

Output Progress Description: OR funding to include open access publication charges.

Biennium: 2022-2023

EROutp-0310: Number of national programs receiving GF support to conduct OR.

Output Indicator: Program teams supported to incorporate OR in their NSPs or GF applications and trained to conduct SORT IT courses.

Output Target Date: 31/12/2023

Output Progress Status: Completed

Output Progress Description: SORT IT alumni identified to provide technical support to programs while engaging with national OR stakeholders.

Biennium: 2022-2023

EROutp-0331: Number of national programs with capacity to conduct and utilize OR findings.

Output Indicator: Programs supported to create critical OR capacity

Output Target Date: 31/12/2023

Output Progress Status: Completed

Output Progress Description: All SORT IT courses will follow and implement established SOPs that include reporting and monitoring.

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#### ER Biennium Outcomes

Biennium: 2022-2023

EROutc-0077: Programs identify and address factors that impede the effective implementation of interventions.

Progress made towards outcome : Engagement with country(ies) likely to undertake NSP review or submit new GF applications.

Biennium: 2022-2023

EROutc-0078: Number of program staff dedicated to OR.

Progress made towards outcome : SORT IT courses participants to be reported in line with established SOPs.

Biennium: 2022-2023

EROutc-0079: Additional OR funding received from other sources.

Progress made towards outcome : Self reporting (survey) and tracking of publication's funding acknowledgement.

Biennium: 2022-2023

EROutc-0080: Availability of updated research agenda on priority issues affecting the program performance

Progress made towards outcome : NSP documentation, program review and planning reports.

Biennium: 2024-2025

EROutc-0098: National programs routinely identify and address factors that impede the effective implementation of interventions.

Progress made towards outcome : Engagement with country(ies) likely to undertake NSP review, reprogram or submit new GF grant application.

Biennium: 2024-2025

EROutc-0099: Number and gender of national program staff dedicated to operational research activities.

Progress made towards outcome : All supported SORT IT courses participants to be reported in line with established SOPs.

Biennium: 2024-2025

EROutc-0100: Additional operational research funding received from other sources.

Progress made towards outcome : Self reporting (survey) and tracking of publication's funding and inkind contributions acknowledgement by supported programs.

Biennium: 2024-2025

EROutc-0101: Availability of updated operational research agenda on priority issues affecting the national program performance.

Progress made towards outcome : National strategic plan documentation, national program review and planning reports.

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#### [ER Project Links](#)

Project ID : P22-00875

PI Name : Anani BADJE

**ER Project Title :** Incorporation of operational research component in Global Fund applications by GF-supported programs in Cote D'Ivoire

**ER Start Date :** 01/01/2022 **ER End Date :** 31/12/2025

**Project ID :** P22-00644 **PI Name :** Mbazi Senkoro

**ER Project Title :** Incorporation of operational research component in Global Fund applications by the HIV, malaria and tuberculosis control programme in Tanzania

**ER Start Date :** 01/01/2022 **ER End Date :** 31/12/2025

**Project ID :** P22-00832 **PI Name :** Rose Kosgei

**ER Project Title :** Structured Operational Research and Training Initiative (SORT IT) on retrospective review of national malaria control program routine data 2022 - 2023

**ER Start Date :** 01/01/2022 **ER End Date :** 31/12/2025

**Project ID :** P22-00838 **PI Name :** Alexandre DELAMOU

**ER Project Title :** Structured Operational Research and Training Initiative (SORT IT) on Malaria, Tuberculosis and HIV/AIDS in Guinea

**ER Start Date :** 01/01/2022 **ER End Date :** 31/12/2025

**Project ID :** P22-00621 **PI Name :** Welile Sikhondze

**ER Project Title :** Incorporation of operational research component in Global Fund applications by the HIV, malaria and tuberculosis control programmes in Eswatini

**ER Start Date :** 01/01/2022 **ER End Date :** 31/12/2025

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#### ER Country Links

<b>Country:</b> Eswatini	<b>WHO Region :</b> AFRO	<b>World Bank :</b> Lower middle income Income Group
<b>Country:</b> Côte d'Ivoire	<b>WHO Region :</b> AFRO	<b>World Bank :</b> Lower middle income Income Group
<b>Country:</b> Guinea	<b>WHO Region :</b> AFRO	<b>World Bank :</b> Low income Income Group
<b>Country:</b> Kenya	<b>WHO Region :</b> AFRO	<b>World Bank :</b> Lower middle income Income Group
<b>Country:</b> Tanzania	<b>WHO Region :</b> AFRO	<b>World Bank :</b> Lower middle income Income Group
<b>Country:</b> Ethiopia	<b>WHO Region :</b> AFRO	<b>World Bank :</b> Low income Income Group
<b>Country:</b> Zimbabwe	<b>WHO Region :</b> AFRO	<b>World Bank :</b> Lower middle income Income Group