

Report of the 38th Meeting of the TDR Scientific and Technical Advisory Committee – STAC38

Geneva, 16-17 March 2016

Introduction

The thirty-eighth meeting of the Scientific and Technical Advisory Committee (STAC) of TDR, the Special Programme for Research and Training in Tropical Diseases, co-sponsored by UNICEF, UNDP, the World Bank and WHO, took place at WHO headquarters in Geneva on 16 and 17 March 2016. The meeting was chaired by Professor Charles Mgone and attended by all STAC members except Professor Xiao-Nong Zhou, who sent his apologies. The Chair of the Joint Coordinating Board (JCB), Professor Hannah Akuffo, together with representatives of departments at WHO headquarters and the TDR secretariat, also attended the meeting.

Summary of proceedings

Opening of the meeting and introductions

Key messages

Professor Charles Mgone, Chair STAC, welcomed STAC members, acknowledged their significant contribution to the work of TDR and invited members to provide good scientific advice that will move TDR's portfolio of projects forward. He reminded STAC members of their role: to advise on planning and implementation and to give guidance on prioritization and strategy within TDR, and gave his best wishes for a productive meeting.

Professor John Reeder, Director TDR, highlighted the overall focus of the meeting on informing the scientific and technical priorities in preparing the work that will be done in 2016-2017 and preparation of the future strategy for 2018-2023.

Chair STAC then invited participants to introduce themselves.

AGENDA ITEM 1 – Adoption of the agenda and declarations of interest

Statutory business

Chair STAC proposed the adoption of the agenda and proposed Dr Graeme Bilbe as Rapporteur of STAC38. Dr Bilbe was appointed Rapporteur by acclamation.

No conflicts of interest were declared through the routine submission of declaration forms in advance of the meeting, however Chair STAC invited any member who may have a specific conflict of interest for an agenda item to voice that accordingly.

Decisions:

- *Dr Graeme Bilbe was appointed Rapporteur of STAC38.*
- *STAC adopted the agenda as proposed.*
- *Declarations of interests were accepted as presented to the Secretariat with no conflicts foreseen.*

AGENDA ITEM 2 - Message from the Chair, TDR Joint Coordinating Board (JCB)

Key messages

- Professor Hannah Akuffo, Chair JCB, mentioned the importance of STAC's role in supporting the work of the TDR secretariat and the JCB.
- Mentioned the significance of the 2015 Nobel Prize for Medicine and Physiology having been awarded to researchers who opened roads in treating infectious diseases of poverty. Improving the lives of poor people has now been recognized at the highest level.
- The JCB will oversee the development of the next TDR Programme Strategy 2018-2023.
- The Standing Committee is overseeing the Sixth External Review of the Programme and will report to JCB on the recommendations provided in the resulting report.

AGENDA ITEM 3 – Director's report and follow-up on STAC37 recommendations

Key messages

- Professor Reeder acknowledged with thanks all financial contributors who provided support to TDR in 2015.
- Highlights of the technical and financial implementation in 2015 were presented in the context of TDR's strategic plan and results chain.
- Technical achievements were presented in each strategic area. Highlights from each team's work were used to illustrate the shift towards the existing (new) portfolio adopted as a result of TDR's restructuring in 2011-2012. Aside from the core portfolio, TDR participated in activities supporting WHO's global mission in outbreak control linked to Ebola virus disease and Zika infection.

- Innovative approaches recently implemented supporting the shift towards a more efficient and high-impact working model based on productive partnerships and network collaboration.
- Summary report on implementation of the 2014-2015 Strategic Development Fund. Overall it was a successful endeavour, allowing TDR to partner with external organizations and WHO control programmes on emerging priorities, engage with networks to develop innovative tools and work on TDR's core values such as gender equity and socio-economic equity.
- The implementation pace increased dramatically in 2015 compared to previous years, with financial implementation in operations dramatically increasing as projects reached "cruising speed".
- Gave an overview of the follow-up on recommendations from STAC37, all of which were followed up.
- The migrant crisis and other events have negatively impacted the income forecast for 2016-2017, with some governments reducing their contributions. Since TDR's working model is based on an extremely slimmed down secretariat, any adjustments downwards or upwards must come from the operations budget.
- The initial planned budget of US\$ 45 million will be slimmed down to a US\$ 40 million, adjusting the 2016-2017 workplan to the forecasted income. However, around US\$ 5 million has been carried forward, together with their funded activities, so the overall budget for 2016-2017 will still be at a level of around US\$ 45 million. STAC was invited to provide input on adjustments made to the budget and workplan.
- Highlights of TDR's performance in areas that represent core values of TDR, such as gender and socio-economic equity.
- TDR's proactive engagement with the HIV/AIDS, Tuberculosis, Malaria and Neglected Tropical Diseases (HTM) Cluster to promote the importance of continuing commitment to controlling communicable diseases in the SDG era supported by adequate research.
- A timeline of the strategy development was presented. STAC was invited to provide input and contribute to the development of the next strategy for 2018-2023.

Discussion points:

- STAC discussed aspects of the international efforts to control the Zika outbreak and the way international working groups share information. Director TDR mentioned other organizations working in this field such as the WHO Reproductive Health and Research Department (RHR), and the fact that TDR has a specific expertise, mainly in vector control and community engagement, that it can contribute to the global effort. Dr Ian Askew, Director of RHR, provided highlights of his Department's engagement in the Zika response.

Decision:

- *STAC endorsed the Director's report.*

AGENDA ITEM 4 – Programme finance and performance overview

The presentation made by Dr Beatrice Halpaap, TDR Portfolio and Programme Manager, included the Preliminary financial report for 2014-2015 and outlook for 2016-2017, progress made against TDR key performance indicators and progress on the implementation of TDR risk management plan.

Key messages:

- **Progress made against TDR key performance indicators**
 - Performance in TDR is assessed in line with the Performance Assessment Framework developed in 2008 and revised in 2013 which is looking at technical achievements, TDR core values and managerial performance.
 - Of 26 expected results, 2 (=8%) are delayed. The rest are either on track or completed.
 - In 2015, 3 new outcomes were achieved.
 - Performance on TDR's core values, with increasing trends noticeable in representation of DEC's in grants/contracts and in gender equity (women in advisory roles).
 - The TDR Global platform and community are being developed to track grantees' careers and enhance collaboration. User engagement will be the focus to get users registered before the launch (expected in November 2016). The project engages TDR staff as well as TDR alumni, advisors and TDR's Regional Training Centres.
- **Preliminary financial report for 2014-2015 and outlook for 2016-2017**
 - Presented financial figures including the approved budget for 2014-2015, income and implementation.
 - Technical and financial implementation increased significantly once projects that started in previous years reached full speed.
 - Income forecast has proved to be sound. Expenditure was aligned with income to avoid gaps or excessive accumulations. Workplan optimization allowed flexibility in moving funds to projects that could implement and scale up quickly.
 - Achievements were presented in four areas: staff career development (new policy successfully applied), optimizing workplan implementation, organizational learning and risk management processes.
 - The current income forecast for 2016-2017 is at a level of around US\$ 30 million core funds compared to the US\$ 35 million forecast in November 2015. Based on the recent reduction in core contributions, the 2016-2017 workplan has been slimmed down to US\$ 40 million (of which US\$ 30 million is undesignated core funds and US\$ 10 million designated funds). Activities carried forward from 2015 (together with their funds) have been added to this slimmed down workplan, resulting in an overall budget of approximately US\$ 45 million in 2016-2017.
- **Progress on the implementation of TDR's risk management plan**
 - Six risks have been fully addressed / closed out: 3, 4, 5, 6, 7, 14
 - Four risks are being mitigated: 8, 11, 12, 13
 - Six risks are being closely monitored: 1, 2, 9, 10, 15, 16
 - One new risk has been identified: 17 (related to the development of the new strategy 2018-2023)

- **Towards the strategy development for the 2018-2023 period**

- The timeline for development of the next strategy was presented.

Discussion points and questions:

- STAC asked for clarification on TDR's approach to scaling up and the prioritization mechanism should more funds come in. Director TDR explained the approach to a layered workplan, where the starting point is at the lower level and as money comes in scaling up is possible in projects that have flexibility. He also explained the 2-level budget scenarios, which will guide the choice for scale-up based on feasibility. With TDR having implemented systems that allow quick scale-up through external partners, scaling up to US\$ 50 or 55 million per biennium if contributors increased their contributions would not be a problem. TDR does not intend to start long-term projects where funding is not secured. There is awareness of the fact that if funds come in late, full implementation at the higher budget level will not be possible.
- Further details were discussed regarding TDR's fundraising strategy and its potential to increase income. Director TDR mentioned efforts already made with existing donors to increase their contribution level, which they currently see as maximal due to competing interests.
- STAC suggested that TDR become more visible to international groups dealing with more and more frequent emerging diseases and outbreaks, possibly attracting some funds from those working groups.
- Director TDR mentioned that TDR is looking into expanding the definition of "first author" of publications to include "last author" when measuring TDR key performance indicators. This may capture former TDR grantees who are now coordinating working groups producing research evidence. STAC members agreed with this idea.
- Risk 16 relating to the impact on TDR of WHO's staff mobility was brought up by STAC. Director TDR outlined previous and ongoing discussions with WHO senior management. STAC agreed with the secretariat's approach and acknowledged the important role of the JCB in addressing the issue.
- STAC discussed Risk 10 (translation of outputs into practice). Dr Halpaap provided a brief explanation, highlighting the fact that at the strategic planning stage of any new expected result the initiators must plan for the uptake, engaging stakeholders in countries and regions from the outset.
- STAC discussed Risk 15 and how TDR was addressing the potential risk coming from TDR hosting the global R&D fund. Dr Aslanyan explained how the secretariat and the JCB are addressing this to avoid TDR core contributor funding being diverted away from TDR to the fund.

Decision:

- *STAC endorsed the 2015 TDR Results Report.*
- *STAC endorsed the Risk Management Report 2015.*

Recommendation:

- *STAC took note of the Preliminary Financial Report 2014-2015 and outlook for 2016-2017 and advised TDR to explore ways to fundraise to cover the gap created by the US\$ 5 million reduction in the income forecast.*

AGENDA ITEM 5 – Update from SWG Chairs

5.1 Update from SWG Chairs

- Professor Rosanna Peeling presented an outline of the 2015 IIR SWG activities and the transition from the previous, product development centred portfolio to the new implementation research focused portfolio of projects.
- Professor Moses Bockarie highlighted some issues regarding the 2015 VES SWG report that addressed specific areas of capacity strengthening, gender and community engagement.
- Professor John Gyapong presented the main outcomes of the 2015 RCS/KM SWG meeting. The move towards regionalization, scaling up of research capacity strengthening activities and the workplan and operations budget for 2016-2017 were reviewed and recommended.

5.1 Approval of current and proposed membership of SWGs

- Dr Aslanyan presented the list of proposed membership of the three SWGs as of 1 January 2016 for STAC's endorsement.

Discussion points and questions:

- STAC discussed the size of the SWGs and whether they have the capacity to operate effectively at their current size.

Decisions:

- *STAC endorsed the membership and chairpersons of the three Scientific Working Groups as proposed.*

AGENDA ITEM 6 – Report on technical progress in 2015 and planned activities for 2016

6.1 Intervention and implementation research (IIR) team

- Dr Piero Olliaro presented a summary of the technical progress as reflected in the work of the IIR team in 2015, including:
- The four work streams IIR is working on and the prioritization mechanisms used to select new initiatives and projects, all of which are aligned with TDR's strategy, results chain and prioritization criteria.
- Challenges posed by the shift from control to elimination phase in infectious diseases of poverty, which require different tools, strategies and approaches, as well as building capacity in countries for such tools and strategies.
- The numerous collaborative projects conducted with other teams in TDR, with WHO departments and regional offices.
- Progression of TDR's projects from surveillance and control of Dengue fever outbreaks to a broader scope addressing research on arboviruses diseases.
- An update on data sharing platforms initiated and facilitated by TDR.
- Collaboration with UNDP which resulted into country-tailored innovative approaches to safety monitoring in two African countries with complementary projects on m-health tools ongoing in the Western Africa subregion.

- The WARN-TB network was created in the Western Africa subregion with TDR facilitation. The network includes control programmes from 16 countries as well as academia and international, multilateral organizations. In 2015 the national TB research agendas were defined and task forces created within and between countries.
- The goals of the SORT IT workplan 2012-2016 were largely achieved. From its initial focus on TB in Europe and Central Asia, the scope of SORT IT expanded to other diseases and continents. In the long term, TDR is looking to spin off these courses to other interested parties who wish to adopt this approach, with TDR maintaining a monitoring and advocacy role.
- Due to the cuts made to TDR's 2016-2017 budget, some activities were scaled down and workplan adjustments made.

Discussion points and questions:

- STAC discussed aspects regarding the challenges raised by data sharing platforms. Dr Oliaro explained that databases contain not only data from clinical trials but other clinical data, as well as potentially data relating to outbreaks and emergencies. He cited various types of challenges: quality, technological, legal, ethical, etc. In the long term, TDR will retain a facilitation role, create a model and outsource it to stakeholders.
- STAC discussed TDR's role in WHO's activities on antimicrobial resistance.
- STAC noted that collaboration with WHO control programmes seems to have improved.
- STAC requested information on the status of Moxidectin development. Dr Oliaro provided details on the progress of the negotiations to have the drug registered by a nongovernmental organization.
- STAC discussed the capacity built in countries. Regarding the sustainability of SORT IT, Dr Oliaro explained that the success of SORT IT courses and model has led to a huge demand for the course which cannot be responded to by the current arrangement, due to the limited capacity of the TDR secretariat. The "train-the-trainer" model, as well as language diversification (English, Russian, Portuguese, etc.), facilitate the outsourcing / franchising of this model to country level institutions.

6.2 Research on vectors, environment and society (VES) team

- Dr Florence Fouque presented the approach to promoting research, building capacity and involving communities which is applied to her team's work, including
- The four work streams on which VES has been working and the way their activities translate to outputs, outcomes and impact in disease endemic countries.
- The project on assessing vulnerabilities and population resilience to environmental changes has built capacity in five countries.
- Outputs and outcomes of the project that addressed community access to health care in Africa. Regarding community-based research in Latin America, some interventions in Brazil overlap with the current Zika map and may provide data on the impact of such control measures on arboviruses other than Dengue.
- Showed some examples of social innovation initiatives and mentioned that the deployment of such interventions may have an impact on disease control and access to health care.
- As part of the newly established Caribbean network on emerging vector-borne diseases, 23 countries started to collaborate on emergency response for Zika, Dengue, Chikungunya and malaria.

- Gender equity has been one of the topics of focus in 2015 and VES has led initiatives across TDR in this area.
- Examples of new collaborations being initiated were presented including VES' work with WHO departments GMP (the Global Malaria Programme) and NTD (Control of Neglected Tropical Diseases) as well as working groups on outbreaks.
- Due to the cuts made to TDR's 2016-2017 budget, some activities were scaled down and workplan adjustments made with some flexibility for scaling up if additional funds arrive.

Discussion points and questions:

- STAC recommended some editorial corrections to be made in the VES SWG report with replacement of the SWG membership annex.
- STAC discussed the vision for the Caribbean network's role and potential areas of leverage between the Caribbean network and the Latin American network of diagnostic laboratories. Dr Fouque mentioned a possible natural replication of the network in the Pacific islands.
- STAC suggested translating the experience acquired from projects such as improving access to health care in Africa to other projects dealt with by other groups inside and outside of WHO.
- STAC requested further information on the dynamics and next steps of the project on social innovation and on the community linkages between the projects run in VES. Dr Sommerfeld explained that as a result of TDR's projects, communities in target areas are now working together with control programmes in Latin American countries and in some instances involving social innovation.
- STAC commended the VES team, and Dr Fouque's leadership, on the way they worked together toward the outputs.

6.3 Research capacity strengthening & knowledge management (RCS/KM) team

- Dr Dermot Maher presented highlights of 2015 achievements in the areas of research capacity strengthening and knowledge management, including:
- Examples of key achievements in work streams and results statements.
- Regionalization of activities resulting in the establishment of postgraduate training schemes through seven partner universities and the addition of two Regional Training Centres.
- Work on implementation research has extended to the whole chain from introduction to IR, basic course, course on ethics, implementation toolkit and the guideline for reporting IR/OR.
- Further details were presented on the new working model for education (PhD, MSc) grants through the seven universities.
- Information on the sixth round of the Clinical Research and Development Fellowships grant scheme which was joined by EDCTP in 2015.
- Progress in the area of knowledge management was presented including revision of the ESSENCE Planning, Monitoring and Evaluation Framework.
- Challenges and approaches to research capacity strengthening in 2016-2017 were presented, including the way the workplan and budget for the biennium have been adjusted. Requested STAC input to identify potential sources of designated funding for RCS/KM activities.

Discussion points and questions:

- STAC discussed the importance of open/free access publications with the perspective of 100% of publications eventually being available in open/free access. Director TDR acknowledged the effect of research results being published many years after a grant has been awarded. All new grants awarded by TDR contain a clause pertaining to publication in open access.
- STAC requested further information on the role and future perspective of the Regional Training Centres. Director TDR mentioned that the centres are now being linked to regionally selected universities and are receiving funding from other donors.
- STAC discussed the stance of the Global Fund to Fight AIDS, Tuberculosis and Malaria on implementation research as attempts to engage with the Global Fund have just begun.
- STAC discussed the theoretical possibility of having education grants only partially funded by TDR (with matching funds to be provided by the grantee). The discussion showed that such an approach would raise the risk of people dropping out if matching funds are not found, and thus a loss of investment for TDR.
- The STAC discussed in detail the progress made on research ethics, including the collaboration with WHO's department of ethics for the development of a module on ethics in implementation research.
- Chair STAC encouraged TDR to use the expertise that STAC members volunteer in various areas of work.

Decision:

- *STAC endorsed the reports on technical progress of the three teams: Intervention and implementation research, Research on vectors, environment and society, and Research capacity strengthening and knowledge management.*

AGENDA ITEM 7 – Discussion on specific issues

TDR and follow-up to the CEWG*Key messages*

- Director TDR presented the history of the CEWG and its follow-up, including:
- TDR's engagement as recommended by and under the conditions approved by the JCB.
- Funding to set up and incubate the Fund has been provided by the Swiss Government. TDR gained visibility through the consultation process leading to the drafting of a financial and business model.
- The model developed by the consulting firm including model lists for various funding levels, the number of projects that can be funded, the estimated staffing needs and the timeline to delivery for novel and repurposed products.
- TDR's involvement will depend on the size of the fund. A strategic decision will need to be made by the JCB regarding the level of desired engagement.
- The options for the proposed advisory and oversight model were also presented.

Discussion points and questions:

- STAC thanked the Director for his informative report.
- STAC requested further details on the risk mitigation actions taken so that TDR would not lose further core funding. Dr Reeder outlined the actions taken by the TDR secretariat to mitigate the risk. STAC suggested that the JCB should deal with this risk and consider an exit plan once the Fund is incubated and funded. STAC also discussed the way the workload has been dealt with and how it has been separated from TDR's core activities so that it does not overburden current staff.
- STAC appreciated that TDR has shifted away from product R&D in line with the current strategy and advised on the need to clearly project this image to the outside. Director TDR mentioned that TDR was not getting into product R&D again but would be solely coordinating, at a higher level, investments in various products on projects conducted entirely by external entities. The JCB's view of TDR's involvement in the Fund is that it shares the concerns but still has a strong conviction that TDR has a lot to say in this field.

AGENDA ITEM 8 – TDR interface with WHO departments

Guest speakers representing WHO departments that collaborate extensively with TDR presented updates on joint projects, areas of potential collaboration and synergy with TDR.

*Key messages***Information, Evidence and Research***Dr Taghreed Adam*

- Dr Adam presented the various collaboration projects with TDR over the past ten years including those which are ongoing.

Alliance for Health Policy and Systems Research*Dr Nhan Tran*

- Dr Tran mentioned that the Alliance has had a good working relationship with TDR over the last 5 years. Activities worked on together focus on implementation research and capacity strengthening of institutions to conduct implementation research.

Control of Neglected Tropical Diseases (NTD)*Dr Antonio Montresor*

- Dr Montresor presented NTD's collaboration with TDR in zoonotic diseases, parasitic control, individualized diagnosis and case management. NTD is also collaborating on development of the data sharing platform for schistosomiasis. Compiling this data may reduce the need for future clinical trials.

Global TB Programme (GTB)*Dr Christian Lienhardt*

- Dr Lienhardt mentioned that within the framework of implementation of the WHO End TB Strategy, various areas benefit from collaboration between TDR and GTB. Collaborations span from work on the data sharing platforms, SORT IT projects, the establishment of the sub-regional WARN-TB network, etc.

Global Malaria Programme (GMP)

Dr Tessa Knox

- Dr Knox provided an update on two projects where TDR and GMP are collaborating currently. The impact of insecticide resistance on the effectiveness of the control interventions and the work done on residual malaria transmission is ongoing in more than a dozen countries.

Discussion points and questions:

- STAC commended the TDR secretariat for its engagement with WHO disease control departments and noted a clear improvement compared to previous years, both quantitative and qualitative.
- STAC requested further information and discussed topics of prioritization mechanisms for the joint work, interactions with third party programmes and coordination of the field work, among others.
- Director TDR highlighted the fact that the Strategic Development Fund (SDF) allowed flexibility in establishing linkages with countries and WHO control programmes and that most of the work presented during this session was funded from the SDF. Re-establishing the SDF when more funding comes in would be desirable.

AGENDA ITEM 10 – Update on the Sixth External Review process and new Strategy development

Key messages

- Director TDR presented the timeline and main steps for the development of the next strategy 2018-2023. He reiterated the important contribution of the Sixth External Review of the Programme to provide consultation and input for the new strategy.
- The consultative process will be important, both the internal and external parts. A first solid draft should be generated by the end of 2016.
- STAC was invited to provide input during the strategy development process.

Discussion points:

- STAC agreed that early involvement would likely be beneficial for the development of a sound strategy for 2018-2023.
- STAC discussed the opportunity of using country and regional mechanisms such as regional priority setting groups for input, to the extent that the timing of those meetings allows.
- STAC suggested that SWGs also be involved, bringing to the table country expertise, and that all SWG meetings taking place in 2016 reserve a time slot to discuss the draft strategy.

Recommendation:

- *STAC agreed with the timeline proposed for the development of the new strategy and offered to contribute from the early stages. The secretariat should share with STAC the overall big picture, the areas of work for drafting groups and the first draft of the strategy. STAC recommended that SWGs reserve a time slot to provide input into the draft strategy before the end of the year.*
- *STAC recommended that 2016 SWG meetings reserve a time slot to provide input into the draft strategy before the end of the year.*

AGENDA ITEM 11 – Draft recommendations by STAC38

- The decisions and recommendations were reviewed and reworded as necessary by STAC.

AGENDA ITEM 12 - Date and place of STAC39

Decision:

- *STAC38 agreed that the thirty-ninth meeting of the STAC (STAC39) will take place in Geneva from 22-23 March 2017, with a briefing and introduction to TDR on 21 March.*

Close of STAC38

Dr Ren Minghui, Assistant Director-General, HIV/AIDS, Tuberculosis, Malaria and Neglected Tropical Diseases (HTM) Cluster and TDR Special Programme Coordinator thanked STAC members for their time and contribution to the meeting. He mentioned that he had known TDR in his previous role in the Ministry of Health and Family Planning in China, and that several of his former colleagues had benefited from the support TDR provided to them.

Dr Ren confirmed that TDR will work on implementing the decisions and recommendations of STAC38.

Director TDR thanked all of the participants for their valuable input into a particularly productive STAC meeting.

STAC38 summary of decisions and final recommendations

Recommendations

- STAC took note of the Preliminary Financial Report 2014-2015 and outlook for 2016-2017 and advised TDR to explore ways to fundraise to cover the gap created by the US\$ 5 million reduction in the income forecast.
- STAC agreed with the timeline proposed for the development of the new strategy and offered to contribute from the early stages. The secretariat should share with STAC the overall big picture, the areas of work for drafting groups and the first draft of the strategy. STAC recommended that SWGs reserve a time slot to provide input into the draft strategy before the end of the year.
- STAC recommended that 2016 SWG meetings reserve a time slot to provide input into the draft strategy before the end of the year.

Decisions

- Dr Graeme Bilbe was appointed Rapporteur of STAC38.
- STAC adopted the agenda as proposed.
- Declarations of interests were accepted as presented to the Secretariat with no conflicts foreseen.
- STAC endorsed the Director's report.
- STAC endorsed the 2015 TDR Results Report.
- STAC endorsed the Risk Management Report 2015.
- STAC endorsed the membership and chairpersons of the three Scientific Working Groups as proposed.
- STAC endorsed the reports on technical progress of the three teams: Intervention and implementation research; Research on vectors, environment and society; and Research capacity strengthening and knowledge management.
- STAC38 agreed that the thirty-ninth meeting of the STAC (STAC39) will take place in Geneva from 22-23 March 2017, with a briefing and introduction to TDR on 21 March.

Annotated Agenda

PRE-MEETING DAY, Tuesday, 15 March		
From 14:00 BADGE COLLECTION FROM D BUILDING (UNAIDS) RECEPTION		
Venue: Room D42022 (4th floor UNAIDS building)		
14:30	Refreshments available outside the meeting room	
15:00-16:30	Briefing session. Coffee available from 14:30. <i>Introductory meeting about TDR and the STAC being offered to STAC members who wish to acquaint themselves with the Programme and the processes and functions of the Committee. New members are expected to attend.</i>	Documentation is available on the STAC SharePoint site.

Wednesday, 16 March (09:00-17:00)				
<i>Time</i>	<i>Item</i>	<i>Topic</i>	<i>Action</i>	<i>Reference documents</i>
Venue: Room D46025 (4th floor UNAIDS building)				
09:00		Welcome/opening <i>Dr Ren Minghui, Assistant Director-General, HIV/AIDS, Tuberculosis, Malaria and Neglected Tropical Diseases (HTM) Cluster and TDR Special Programme Coordinator</i> <i>Prof. John Reeder, Director, TDR</i>		
09:10-09:20	1.	Statutory business In accordance with the TDR Memorandum of Understanding, the appointment of the Chair of STAC was extended to 31 December 2017. 1.1 Appointment of the Rapporteur 1.2 Adoption of the Agenda 1.3 Declaration of interests <i>Prof. Charles Mgone, Chair STAC</i>	Decision	Draft STAC38 agenda TDR/STAC38/16.1
09:20-09:30	2.	Update from Prof. Hannah Akuffo, Chair, TDR Joint Coordinating Board (JCB)	Information	Report of JCB38 TDR/JCB38/15.3
09:30-10:15	3.	Director's Report and follow-up on STAC37 recommendations <i>Prof. John Reeder</i>	Information	Report of STAC37 TDR/STAC37/15.3 Follow-up on STAC recommendations TDR/STAC38/16.4
10:15-10:45	Coffee break and group photo			

<i>Wednesday, 16 March (09:00-17:00) - continued</i>				
<i>Time</i>	<i>Item</i>	<i>Topic</i>	<i>Action</i>	<i>Reference documents</i>
10:45-11:30	4.	Programme finance and performance overview <i>Dr Beatrice Halpaap, TDR Portfolio and Programme Manager</i> 4.1 Preliminary financial report for 2014-2015 and outlook for 2016-2017 4.2 Progress made against TDR key performance indicators 4.3 Progress on the implementation of TDR's risk management plan 20 minute presentation followed by 25 minute discussion	Information	Preliminary financial report for 2014-2015 and outlook for 2016-2017 <i>TDR/STAC38/16.5</i> 2015 TDR results report (draft) <i>TDR/STAC38/16.6</i> Risk Management report, 2015 <i>TDR/STAC38/16.7</i>
11:30-12:00	5.	Update from SWG Chairs 5.1 Update from Chairs <i>Prof. Rosanna Peeling (IIR)</i> <i>Prof. Moses Bockarie (VES)</i> <i>Prof. John Gyapong (RCS/KM)</i> 5 min. presentations followed by discussion 5.2 Approval of current and proposed membership of SWGs <i>Dr Garry Aslanyan</i> 5 minute presentation followed by decision	Information Decision	TDR's STAC and scientific working groups: Terms of reference (<i>June 2014</i>) Note: SWG meeting reports can be found under Item 6. List of SWG members <i>TDR/STAC38/16.8</i>
12:00-13:30	Lunch break			
13:30-15:30	6.	Report on technical progress in 2015 and planned activities for 2016 6.1 IIR <i>Dr Piero Olliario</i> 20 minute presentation followed by 40 minute discussion 6.2 VES <i>Dr Florence Fouque</i> 20 minute presentation followed by 40 minute discussion	Recommendation(s) Recommendation(s)	TDR Portfolio of Expected Results for 2014-2015: Progress report <i>TDR/STAC38/16.9</i> TDR Portfolio of Expected Results for 2016-2017 <i>TDR/STAC37/15.15/rev1</i> TDR IIR Report <i>TDR/STAC38/16.10</i> SWG IIR report TDR VES Report <i>TDR/STAC38/16.11</i> SWG VES report
15:30-16:00	Coffee break			
16:00-17:00	6.	Report on technical progress in 2015 and planned activities for 2016 - continued 6.3 RCS/KM <i>Dr Dermot Maher</i> 20 minute presentation followed by 40 minute discussion	Recommendation(s)	TDR RCS/KM Report <i>TDR/STAC38/16.12</i> SWG RCS/KM report
FROM 18:30 - STAC INFORMAL DINNER AT THE MONTBRILLANT HOTEL				

Thursday, 17 March (09:30-16:30)				
<i>Time</i>	<i>Item</i>	<i>Topic</i>	<i>Action</i>	<i>Reference documents</i>
09:30-10:30	7.	Discussion on specific issues: TDR and follow-up to CEWG <i>Prof. John Reeder</i>	Information	Brochure and information is available on our website Click here to access
10:30-11:00 <i>Coffee break</i>				
11:00-12:00	8.	TDR interface with WHO departments <ul style="list-style-type: none"> Information, Evidence and Research <i>Dr Taghreed Adam</i> Alliance for Health Policy and Systems Research <i>Dr Nhan Tran</i> Control of Neglected Tropical Diseases <i>Dr Antonio Montresor</i> Global TB Programme <i>Dr Christian Lienhardt</i> Global Malaria Programme <i>Dr Tessa Knox</i> 	Recommendation(s)	
12:00-13:30 <i>Lunch break</i>				
13:30-14:15	9.	Closed session with Director TDR STAC members only closed discussion with Director TDR on issues requiring special attention.	Recommendation(s)	
14:15-14:45	10.	Update on the 6th External Review process and new Strategy development <i>Prof. John Reeder</i> Discussion	Information	6 th External Review TORs TDR/JCB38/15.8/Rev2
14:45-15:15 <i>Coffee break</i>				
15:15-16:00	11.	Draft recommendations by STAC38 STAC rapporteur will present STAC recommendations made during the meeting	Recommendation(s)	
16:00-16:15	12.	Date and place of STAC39 March 2017, WHO HQ, Geneva	Recommendation(s)	
16:15-16:30	13.	Any other business		
CLOSE OF STAC38				

Annex 2. List of participants

STAC Members

Professor Maria Teresa BEJARANO, Senior Research Advisor | Unit for Research Cooperation | Department for Partnerships and Innovations, Sida, Stocksund, Sweden

(Rapporteur) Dr Graeme BILBE, Research and Development Director, Drugs for Neglected Diseases initiative (DNDi), Genva, Switzerland

Professor Moses BOCKARIE, Director, Centre for Neglected Tropical Diseases, Liverpool School of Tropical Medicine, Liverpool, United Kingdom

Professor Claudia CHAMAS, Researcher | Centre for Technological Development in Health, Oswaldo Cruz Foundation (Fiocruz), Rio de Janeiro, Brazil

Professor Sónia DIAS, Associate Professor, Department of Public Health | Faculty of Medical Sciences, Instituto de Higiene e Medicina Tropical, Lisbon, Portugal

Dr Sara Irène EYANGO, Directeur Scientifique | Centre Pasteur du Cameroun, Laboratoire National de Référence et de Santé Publique | Ministère de la Santé Publique, Yaoundé, Cameroon

Professor John GYAPONG, Pro-Vice Chancellor for Research Innovation and Development, University of Ghana, Accra, Ghana

Dr Poloko KEBAABETSE, Director Health Systems Research Unit, BoMEPI - Botswana Medical Education Partnership Initiative, University of Botswana School of Medicine, Gaborone, Botswana

Dr Florencia LUNA, Director, Bioethics Program of FLACSO, Latin American University of Social Sciences, Ciudad de Buenos Aires, Argentina

Professor Lenore MANDERSON, Professor, School of Public Health, Faculty of Health Sciences, University of the Witwatersrand, Johannesburg, South Africa

(Chair) Professor Charles MGONE, Dar es Salaam, Tanzania

Professor Frank NYONATOR, Project Director, USAID/Ghana Evaluate for Health (E4H), Management Systems International, Accra, Ghana

Professor Rosanna PEELING, Chair of Diagnostics Research, Department of Clinical Research, ITD, London School of Hygiene & Tropical Medicine, London, United Kingdom

Professor Xiao-Nong ZHOU¹, Director, National Institute of Parasitic Diseases; Chinese Center for Disease Control and Prevention, Shanghai, People's Republic of China

Other participants

JCB Chair

Professor Hannah AKUFFO, Lead Specialist, Research, Swedish International Development Cooperation Agency (Sida), SE-105 25 Stockholm, Sweden

¹ Not able to attend.

WHO Headquarters Staff

Dr Ren Minghui, Assistant Director-General, HIV/AIDS, TB, Malaria and Neglected Tropical Diseases (HTM)

Dr Taghreed Adam, Scientist, Information, Evidence and Research (HIS/IER)

Dr Ian Askew, Director, Reproductive Health and Research (FWC/RHR)

Dr Dennis Falzon, Scientist, Global TB Programme (HTM/GTB)

Dr Tessa Knox, Technical Officer (Entomologist), Global Malaria Programme (HTM/GMP)

Dr Christian Lienhardt, Scientist, Global TB Programme (HTM/GTB)

Dr Antonio Montresor, Scientist, Control of Neglected Tropical Diseases (HTM/NTD)

Dr Nhan Tran, Manager, Alliance for Health Policy and Systems Research (HIS/HSR)

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Dr Beatrice HALPAAP

Ms Caroline EASTER

Ms Annabel FRANCOIS

Ms Kim GAUVIN

Dr Mihai MIHUT

Research capacity strengthening and knowledge management

Dr Dermot MAHER

Ms Elisabetta DESSI

Ms Najoua KACHOURI ABOUDI

Dr Edward KAMAU

Dr Pascal LAUNOIS

Dr Olumide OGUNDAHUNSI

Mr Rob TERRY

Dr Mahnaz VAHEDI

Intervention and implementation research

Dr Piero OLLIARO

Dr Christine HALLEUX

Ms Ekua JOHNSON

Dr Annette KUESEL

Mr Abdul MASOUDI

Dr Corinne MERLE

Dr Andrew RAMSAY

Ms Michelle VILLASOL

Vectors, environment and society

Dr Florence FOUQUE

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Ms Madhavi JACCARD-SAHGAL

Dr Bernadette RAMIREZ

Dr Johannes SOMMERFELD