Annual Report 2023

Global Engagement
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<tr>
<td>AFRO</td>
<td>WHO Regional Office for Africa</td>
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<tr>
<td>AHPSPR</td>
<td>Alliance for Health Policy and Systems Research</td>
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<tr>
<td>AHRI</td>
<td>Armauer Hansen Research Institute</td>
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<tr>
<td>AMR</td>
<td>antimicrobial resistance</td>
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<tr>
<td>ASEAN</td>
<td>Association of Southeast Asian Nations</td>
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<tr>
<td>ASEAN NDI</td>
<td>Association of Southeast Asian Nations – Network for Drugs, Diagnostics, Vaccines and Traditional Medicine Innovation</td>
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<tr>
<td>ClimDevAfrica</td>
<td>Climate for Development in Africa Initiative</td>
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<tr>
<td>DAC</td>
<td>data access committee</td>
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<tr>
<td>DEC</td>
<td>disease endemic, low- and middle-income countries</td>
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<tr>
<td>EDP</td>
<td>Ebola data platform</td>
</tr>
<tr>
<td>EPHI</td>
<td>Ethiopian Public Health Institute</td>
</tr>
<tr>
<td>ERC</td>
<td>ethics review committee</td>
</tr>
<tr>
<td>FAIR</td>
<td>data sharing resources that are findable, accessible, interoperable and reusable</td>
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<tr>
<td>GFCS</td>
<td>Global Framework for Climate Services</td>
</tr>
<tr>
<td>GloPID-R</td>
<td>Global Research Collaboration for Infectious Disease Preparedness</td>
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<tr>
<td>H-NAP</td>
<td>Health National Adaptation Plans</td>
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<tr>
<td>HIFA</td>
<td>health information for all</td>
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<tr>
<td>IMP</td>
<td>TDR unit on Research for Implementation</td>
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<tr>
<td>IDRC</td>
<td>International Development Research Centre (Canada)</td>
</tr>
<tr>
<td>IDDO</td>
<td>Infectious Diseases Data Observatory</td>
</tr>
<tr>
<td>IRI</td>
<td>International Research Institute for Climate and Society at Columbia University, New York, USA</td>
</tr>
<tr>
<td>ISARIC</td>
<td>International Severe Acute Respiratory and Emerging Infection Consortium</td>
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<tr>
<td>JCB</td>
<td>TDR Joint Coordinating Board</td>
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<tr>
<td>LAC</td>
<td>Latin America and the Caribbean</td>
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<tr>
<td>LMICs</td>
<td>low- and middle-income countries</td>
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<tr>
<td>LSHTM</td>
<td>London School of Hygiene and Tropical Medicine</td>
</tr>
<tr>
<td>LSTM</td>
<td>Liverpool School of Tropical Medicine</td>
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<tr>
<td>M&amp;E</td>
<td>monitoring and evaluation</td>
</tr>
<tr>
<td>MGLSD</td>
<td>Ministry of Health, the Ministry of Gender, Labour and Social Development</td>
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<tr>
<td>NDC</td>
<td>national determined contribution</td>
</tr>
<tr>
<td>NIAID</td>
<td>National Institute of Allergy and Infectious Diseases</td>
</tr>
<tr>
<td>NMAIST</td>
<td>Nelson Mandela African Institute of Science and Technology, Arusha, United Republic of Tanzania</td>
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NTD  neglected tropical disease
PABIN  Pan-African Bioethics Initiative
PACIEH  Pan African Community Initiative on Education and Health
PAHO  Pan American Health Organization
PHE (WHO)  Public Health, Environmental and Social Determinants of Health
PHE (AFRO)  Protection of Human Environment
P2I  portfolio-to-impact R&D modelling tool
RCS  TDR unit on Research Capacity Strengthening
RTC  regional training centre
RVF  Rift Valley fever
SDF  Strategic Development Fund
SDG  Sustainable Development Goal
SEAR  WHO South-East Asia Region
SESH  Social Entrepreneurship to Spur Health
SIHI  Social Innovation in Health Initiative
SORT IT  Structured Operational Training IniTiative
SPH  School of Public Health, University of Ghana
SPT  special project team
STAC  TDR Scientific and Technical Advisory Committee
SU  Sokoine University, Morogoro, United Republic of Tanzania
SWG  scientific working group
STH  soil transmitted helminth
TB  tuberculosis
TDR  UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases
UKCDR  UK Collaborative on Development Research
VBD  vector-borne disease/s
WHO HQ  World Health Organization headquarters in Geneva, Switzerland
WMO  World Meteorological Organization
WPR  WHO Western Pacific Region
WPRO  WHO Regional Office for the Western Pacific
Introduction

An essential part of TDR’s work is to engage with the global health community to promote and facilitate the role of research for development and to advocate for the use of high-quality evidence to inform policy. TDR is at the interface between research and health care delivery. Embedded within the United Nations family through its co-sponsors (UNICEF, UNDP, the World Bank and WHO), this unique position allows TDR to create a bridge from local communities to the World Health Assembly to enable the broadest possible scope of dialogue and debate across the spectrum of health research – from priority setting to evidence-based policy-making at local, national, regional and global levels.

This global engagement includes collaboration with WHO regional offices, shaping the global health research agenda, leading a collaborative network on research funding, promoting and supporting research on community-based social innovations for health, and leveraging a global network of scientists and experts who have been associated with TDR.

Objectives

TDR’s approach to Global Engagement is to develop and employ strategies, frameworks, tools and platforms in the following areas:

1. Engagement of key global stakeholders, TDR co-sponsors, WHO regional and country offices, and WHO control and research programmes;
2. Creation of the TDR Global community and promotion of innovative tools for mentorship and collaboration;
3. Advancement of community-engaged social innovation in health care delivery in support of universal health coverage in low- and middle-income countries (LMICs), through research, capacity and advocacy;
4. Development of research policy to identify new approaches to support and finance research, and undertake knowledge management activities to improve the efficiency and maximize the impact of research for health;
5. Development and promotion of models of data sharing and open publications that support and promote research activities in LMICs;
6. Support the ESSENCE on Health Research initiative by working with stakeholders and funders of research to develop and promote best practices in research management, standard methodologies, implementation research (IR) and approaches to monitoring and evaluation (M&E) of impact; and
7. Effectively engage in gender and equity research and capacity strengthening.
Key achievements for the strategic priority area in 2023

- Thirteen SIHI hubs are operational in Africa (Ghana, Malawi, Nigeria, Rwanda, South Africa and Uganda); Asia (China, India, Indonesia, Philippines); Latin and Central America (Colombia, Honduras); and Europe (Sweden).
- TDR Global engaged in developing TDR’s new strategy and continued implementing its initiatives, including the HERMES Institutional Mentorship guide “Focus on equity in mentorship” crowdsourcing contest and the launch of TDR’s 50th anniversary photo contest.
- Several global priority research agenda documents published with engagement of TDR, including on antimicrobial resistance, health and migration and others, which also facilitate TDR’s priority setting under the new TDR strategy.
- A guide for effective capacity strengthening for funders published by ESSENCE in collaboration with the Liverpool School of Tropical Medicine (LSTM).
- Calls for proposals in the Americas, Western Pacific and Eastern Mediterranean regions launched with 20 projects funded.
- Global Health Matters successful season 3 launched and reached a broad audience.

Summary progress description for 2023

Global Engagement continues to encompass a wide range of activities that support the work of TDR in the areas of capacity strengthening and implementation research.

Table 1. Global Engagement workplan overall progress

<table>
<thead>
<tr>
<th>Expected results and deliverables</th>
<th>Indicators and targets</th>
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<tr>
<td>1.3.5 Research on social innovation to enhance healthcare delivery:</td>
<td>By 2023:</td>
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<tr>
<td>i) functioning SIHI secretariat to coordinate the SIHI partner network</td>
<td>- At least 10 operational hubs in LMICs advancing social innovation in health care</td>
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<td>efforts and SIHI global communications; ii) growing number of</td>
<td>delivery through research, capacity and advocacy</td>
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<td>operational SIHI country hubs.</td>
<td><strong>Progress made:</strong></td>
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<tr>
<td></td>
<td>- Thirteen SIHI hubs are operational in Africa (Ghana, Malawi, Nigeria, Rwanda, South</td>
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<td></td>
<td>Africa and Uganda); Asia (China, India, Indonesia, Philippines); Latin and Central</td>
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<td></td>
<td>America (Colombia, Honduras); and Europe (Sweden).</td>
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<td>- The SIHI secretariat established in the Philippines effectively coordinates SIHI</td>
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<td>network activities and communications.</td>
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### Expected Results – Global engagement

#### Expected results and deliverables

<table>
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<tr>
<th>2.1.1.2 WHO regional office collaboration and Impact grants for regional priorities:</th>
<th>Indicators and targets</th>
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| i) impact grants operationalized in at least five WHO regional offices; ii) functional collaboration frameworks with at least five regional offices established. | By 2023:  
- 8–10 impact grants for regional priorities calls launched, projects selected and funded (11-13 for the US$ 50 million scenario).  
- Evidence of collaboration frameworks’ effectiveness based on successful joint projects and activities.  
**Progress made:**  
- 20 impact grants selected and funded. |

| 2.2.1 Shaping the research agenda: |  
| i) report /resource based on a scoping review in the area IR/OR research to further map partners, priorities, ongoing activities and TDR work in this context; ii) analysis of the health product pipeline for HIV, TB, malaria and NTDs in order to identify and describe priorities; iii) research priority setting exercise supported. | By 2023:  
- One report to map partners and priorities and activities published.  
- Two reports on research priority exercises published.  
**Progress made:**  
- COVID-19 live funding tracker published.  
- Three reports published, with TDR technical support, two on AMR, one on migrant health. |

| 2.2.2 Capacity strengthening to bring research evidence into policy: |  
| i) methodology developed and/or adapted from existing approaches to enable appropriate generation of translation mechanisms.; ii) knowledge management and evidence for decision-making delivered in the SORT IT programme; iii) data sharing - support for capacity building and development of policy; iv) LMICs lead on the development of systematic reviews, research synthesis and policy briefs on issues related to infectious diseases of poverty. | By 2023:  
- At least four workshops/training events held.  
- Two reports/publications on knowledge management methodology.  
- At least four evidence to policy reports and briefs finalized and published.  
**Progress made:**  
- TDR ran two rounds of the communications module for SORT IT, resulting in 22 evidence briefs. TDR ran three other SORT IT training courses which will generate evidence briefs in 2024. One training on data sharing was provided and a book chapter on data sharing in pandemics was accepted for publication in 2024. |

| 2.3.1 Collaborative networks (ESSENCE on Health Research) and engagement with global health initiatives: | By 2023, two harmonized principles / policies / practices introduced and adapted by funding agencies and LMIC researchers / research institutions.  
**Progress made:**  
- New good practice guide published in 2023 focused on research capacity strengthening.  
- Over 10 episodes of Global Health Matters podcast released. |
| i) tools and reports used to inform policy and/or practice of global/regional stakeholders or major funding agencies; ii) funding agencies continue to engage in policy dialogue with each other and with LMICs; iii) LMIC capacity in research management, M&E strengthened; iv) cases of TDR’s research, RCS and KM activities benefit and are shaped by global health research agenda. |
### Expected Results – Global engagement

<table>
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<th>Expected results and deliverables</th>
<th>Indicators and targets</th>
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<tr>
<td>2.3.3 TDR Global: i) a user-friendly, online platform that hosts the profiles of current and former grantees, trainees and expert advisors of TDR; ii) community engagement activities that foster collaboration and networking; iii) surveys / crowdsourcing that gather and prioritize ideas from trainees, grantees and experts to support mentorship and themes of interest for the community; iv) enhanced efficiency and effectiveness via increased regional focus.</td>
<td>By 2023, decentralization of mentorship activities to at least six operational regional and country nodes.</td>
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<td><strong>Progress made:</strong></td>
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<td></td>
<td>▪ Alignment of TDR Global plans to the 2024–2029 strategy.</td>
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<td></td>
<td>▪ TDR Global initiatives: the HERMES Institutional Mentorship guide “Focus on equity in mentorship” crowdsourcing contest; launch of TDR’s 50th anniversary photo contest.</td>
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<tr>
<td></td>
<td>▪ TDR Global regional nodes: capacity for communication strengthened, increased regional networking and collaboration.</td>
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<td></td>
<td>▪ Online platform: initiatives to expand its use, foster collaboration and attract new members.</td>
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<td></td>
<td>▪ Evaluation: regional assessment surveys plus launch of TDR Global high-level review.</td>
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| 2.3.4 Effective engagement in gender and equity: | By 2023, gender and equity dimensions progressively mainstreamed across TDR projects and collaborations aligned with TDR’s intersectional gender research strategy. |
| i) Global engagement activities to support TDR’s gender research strategy and its inclusive research agenda in research on infectious diseases implemented; | **Progress made:** |
| ii) Collaborations strengthened across TDR and partners to understand and address gender dimensions of infectious diseases of poverty. | ▪ Gender and equity dimensions mainstreamed across 3 TDR SIHI hubs and IMP projects. |
| | ▪ Collaborations aligned with TDR’s intersectional gender research strategy, e.g. HRP and TDR capacity strengthening collaborations, a virtual gender and health resource hub developed in partnership with HRP. |
## Expected Results – Global engagement

### Expected results and deliverables

<table>
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<tr>
<th>2.3.5 Community engagement and ethics: i) mapping of research ethics initiatives in Africa, identifying successes, lessons learnt and existing gaps; ii) policy briefs and papers on key issues; iii) institutional audits conducted to strengthen local capacity and collect lessons learned; iv) policy dialogues, debates and panels organized; v) ethics network secretariat in regions supported</th>
<th>By 2023:</th>
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- One policy panel debate (two in high budget scenario).
- Secretariat capacity strengthened in one regional network (two in higher budget scenario)
- One policy brief (two in higher budget scenario)
- Two audits conducted (five in higher budget scenario).

### Indicators and targets

**Progress made:**

- All ten projects on community engagement good practices published their results.
- Workshop organized to gather lessons learnt for publication across the ten projects.
- Ethics: supported the work of the regional networks PABIN and SIDCER/FCAP in training and ensuring quality of ethics work and organized panel discussions Africa-Asia.
- Organized ethics seminar with fellows from Asian countries and WHO Ethics unit to exchange knowledge and identify synergies with TDR work.
- Published the results of a study surveying hundreds of ethics committees on the impact and challenges encountered during the pandemic.
Progress description in 2023 and plans for 2024–2025

**ER 1.3.5: Research on social innovation to enhance healthcare delivery**

The Social Innovation in Health Initiative (SIHI) is a network of partner institutions and a community of stakeholders established in 2014 through TDR’s leadership, in collaboration with leading universities in South Africa and the United Kingdom. This follows a vision of transforming health care delivery systems and accelerating universal health coverage through social innovation research. The network has been expanding to engage LMICs and establish SIHI country hubs in research institutions to advance community-engaged social innovation through research, capacity strengthening and advocacy. Thirteen SIHI hubs are operational in Africa (Ghana, Malawi, Nigeria, Rwanda, South Africa, Uganda), Asia (China, India, Indonesia, Philippines), Latin and Central America (Colombia, Honduras) and in Europe (Sweden). Efforts are coordinated by the SIHI secretariat based in the Philippines. SIHI also collaborates with a growing number of contributing partners at local, national and global levels, including all health care delivery stakeholders. These are featured on the SIHI website partnership page. SIHI’s impact chain is reflected in Fig. 1 below.

![SIHI's impact chain](image-url)
Progress in 2023

Watch the Celebrating Ten Years of SIHI video for highlights of results.

Key achievements

1. SIHI Uganda amplified its Fellowship and Research Program with a remarkable financial leverage of US$ 1 from TDR, complemented by US$ 9 raised, thanks to the generous support of the Swedish Embassy.

2. National leadership initiatives in the Philippines, exemplified by the second Gelia Castillo Award for social innovation research funded by the Philippine Council for Health Research and Development, and efforts to establish the Social Innovation Centre at the University of the Philippines National Health Institute.

3. Integration of an equitable and gender-transformative lens in social innovation research in Latin America and the Caribbean (LAC), the Philippines and Uganda.

4. The inauguration of the Goodwill Medical Centre in Nigeria at the Pan African Community Initiative on Education and Health, dedicated to incubating social innovation in healthcare and facilitating related research, thanks to the support of the TY Danjuma Foundation in Nigeria.

5. Successful pilot testing of the exchange programme for social innovators in Latin and Central America, achieved through collaboration with and support of the Pan American Health Organization (PAHO).

Additional achievements

In 2023, the SIHI hubs joined forces to enhance the network’s sustainability. These efforts were coordinated by the SIHI secretariat. Lessons learnt were shared at the November 2023 SIHI Global event in Cape Town, South Africa. Core elements of sustainability such as social, economic, equity and environment factors were addressed.

Research for impact: democratizing research and embedding it in social innovations

An increasing number of social innovations work in collaboration with researchers and other stakeholders and conduct research in order to enhance their process, demonstrate their impact, raise funds and scale up as relevant. Examples are listed below.

Impact research on social innovations in the Philippines

This is a good example of fruitful cross-hub collaboration. SIHI China sponsored a post-doctoral fellow from the London School of Hygiene and Tropical Medicine to visit the SIHI Philippines hub and conduct an in-depth evaluation of the inter-island health service boat project in Zumarraga, Samar. The results were presented at the August 2023 SIHI Talks.

Development and testing of a community-engagement self-monitoring strategy for social innovation

The first phase of this study was conducted in 2022 (published in BMJ Innovations) and aimed at developing and testing two different approaches for community-engagement self-monitoring for social innovation in two communities in the Philippines. Phase II of the study was implemented in 2023 in two barangays (administrative districts). This phase involved face-to-face capacity building workshops and hybrid praxis sessions among the local monitors while they implemented
the monitoring of the Seal of Health Governance. The project was completed in January and featured in the SIHI Talks in February 2023. A manuscript was submitted to BMC Health Services Research.

**Social innovation case study research**

This year, seven research case studies were conducted in Ghana, the Philippines and Uganda and will be published in 2024. These include Holistic water systems for pumping water uphill (Philippines); University of the Philippines Diliman Psychosocial Services (Philippines); Kalinga Health: a hub-and-spoke social enterprise model in engaging the private sector for improved tuberculosis (TB) care (Philippines); Change development initiatives (Uganda); and three case studies in Ghana.

**Embedding an equitable and gender-transformative approach in social innovation research**

SIHI has been working on implementing TDR’s Intersectional Gender Research Strategy. Three research grants were issued on a competitive basis to the SIHI hubs in LAC, the Philippines and Uganda (see ER 2.3.4). The following research projects were conducted in 2022 and 2023:

- Intersection of gender with other social stratifiers in the prevention and control of infectious diseases in indigenous and black communities of Pueblo Rico, in the context of social innovation in health programmes.
- Applying an intersectional gender lens on social innovations in health in the Philippines.
- Gender dimensions and access to health care in Uganda: Using an intersectional gender lens on social innovation health projects.
- Assessment and monitoring of gender and health indicators in social innovation projects in Uganda.

**Enhancing social innovation in health and research capacity**

*Launch of InnovEx, the social innovation in health exchange platform in the Philippines.*

Launched in December 2023, InnovEx was developed in collaboration with SIHI Philippines, the Zweling Family Foundation and Make a Difference, with financial support from the Philippines Council for Health Research and Development. The platform aims to promote knowledge sharing and collaboration.

*SIHI Global Fellow Programme*

The second cohort of the SIHI Global Fellow Programme was announced in early 2023. In order to prepare the next generation of social innovation research leaders, early career researchers were selected at respective hubs and the Social innovation summer training workshops in 2022 and 2023 were co-created and co-organized by these fellows.

*Training tools*

The concept of the Designathon practical guide was developed following a crowdsourcing call. Results were presented at the July 2023 SIHI Talks. The guide will be launched in early 2024.

An online story-telling course has been developed and is being tested to support the hubs in articulating their value and further training social innovators, researchers and other stakeholders as relevant.
Two new modules on social innovation and community engagement for the TDR MOOC on Implementation Research have been developed in collaboration with the TDR Research Capacity Strengthening team and will be launched in 2024.

Grant-o-thon

To build capacity for LMIC early career researchers to write their first United States National Institutes of Health grant, SIHI China organized a grant-o-thon grant writing workshop series. A total of 582 people registered, with the majority of participants completing the course task.

Sustaining SIHI efforts: an economic lens

A TDR fundraising database has been updated and opportunities for grant applications identified and communicated to the hubs, with support from the TDR secretariat.

Innovative financing: testing a trust fund approach

SIHI hubs in LAC, Nigeria, Uganda and the SIHI secretariat are exploring a trust fund model at both hub and network levels. SIHI hubs add value by conducting rigorous due diligence in identifying, selecting, supporting research integration and ensuring effective monitoring and evaluation for impactful social innovations. The hubs discussed with partners and potential donors their interest in channelling resources through this trust fund model.

Enhancing resource leverage from partners

TDR’s financial support to the SIHI hubs is gradually decreasing as the hubs become increasingly self-reliant, developing new partnerships and attracting new funding. In 2022–2023 for every US$ 1 invested by TDR, US$ 2 has been leveraged by the hubs.

System change through integration of social innovation research

A growing number of universities and institutions where the SIHI hubs are hosted promote social innovation and have integrated social innovation in their organization and/or their country policy systems.

- In 2023, efforts to integrate social innovation in health short courses in university curricula continued across the hubs. Short courses are shared and adjusted to each country’s needs.
- A social innovation lens has been systematically integrated into research projects in SIHI LAC and SIHI Indonesia.
- A two-day conference in Uppsala, Sweden, on “Exploring community engagements for social innovation in health”, was organized and hosted by SIHI Sweden in October 2023. The conference explored social innovation in health and community engagement through presentations, posters and workshops, together with researchers and organizations working on projects and methods for social innovation in health. SIHI Sweden is hosted by SWEDESD, Uppsala University, in collaboration with Karolinska Institutet and the Department of Public Health and Caring Sciences, Uppsala University. See link.
A coordinated country-led network

The growth of the SIHI network is being effectively coordinated by the secretariat based in the Philippines.

Improvement of cross-hub collaboration, coordination and lesson sharing

As illustrated above, the SIHI secretariat facilitates a number of cross-network activities. Through the organization of a number of regular meetings and events, they facilitate sharing and learning across the hubs, collaborations and synergies across the network.

- Such meetings include the bi-monthly SIHI hub meetings to discuss specific issues and opportunities and the SIHI initiative coordination group, representing all hubs, to discuss cross hub matters and make recommendations to the SIHI secretariat.
- Monthly SIHI Talks are organized as public webinars to invite potential new partners and/or showcase specific achievements and discuss opportunities for collaboration. In 2023, themes included sustainability for impact, intersectional gender analysis, designathons for health, digital health, network building, and a community engagement self-monitoring strategy.

The SIHI secretariat’s role is also critical in facilitating key strategic and operational SIHI documentations, such as:

- SIHI case study review guide to enhance research quality.
- SIHI strategic plan 2024–2027 and a SIHI Brochure.
- A comprehensive donor database using both traditional research methods and AI-based tools, and the developing of a persuasive, standardized pitch deck using the Value Proposition Canvas tool.

Coordination of SIHI network communications to enhance SIHI visibility and promotion and facilitate partnerships

In 2023, the SIHI secretariat restructured the website to reflect SIHI’s evolution. Communication materials for SIHI Global were developed and support has been provided to all hubs for their own promotion. Specific events and achievements have been promoted; and biannual newsletters have been compiled and disseminated.

2023 SIHI Global partner event

Building on past global advocacy and partnership meetings, this event invited participants to reflect critically on ways to support the sustainability of social innovation and related research initiatives. The importance of human capital and social engagement, and the economics and politics of such initiatives with their environmental aspects, were examined. The role of civil society, private sector and academia in working with the government to build new, locally appropriate and sustainable ways of achieving universal health coverage was discussed. Participants included social innovators and research stakeholders including foundations, donors, governments and social innovation hubs and incubators. See the event site here. The report will be available in early 2024.

Remaining risks and challenges

As the network expands and creates opportunities for evolution, it also brings the challenges of ensuring effective coordination to enhance efficiency, synergy and sustainability. The SIHI secretariat has been critical in playing a coordination role. In 2023, a strong focus was placed on fostering the sustainability of the SIHI network, engaging all hubs in exploring innovative financing and business models and in embedding social innovation research in institutions and governments.
Contributions towards TDR key performance indicators

**Partnerships and collaborations:**
Partnerships at local, national, regional and global levels are at the core of the SIHI operations. The SIHI hubs are called “implementing partners” and focus on advancing social innovation research in LMICs. They work in partnership with governments, academia, communities, private sector organizations and other stakeholders. Their work is supported by SIHI “contributing partners” who contribute to SIHI’s mission by helping to synergize efforts and leverage resources. Global and regional partners include Africa CDC, CGIAR, Fondation Mérieux, the London School of Hygiene and Tropical Medicine-LSHTM, Pan African Community Initiative on Education and Health (PACIEH), the Schwab Foundation for Social Entrepreneurship, UNDP, UNICEF, the World Bank, the World Health Emergency Programme, WHO (HRP, PAHO, WPRO, the WHO Innovation hub).

**Leverage created by this project:**
For every US$ 1 invested by TDR, US$ 2 has been leveraged.

Various SIHI partners and stakeholders at global and country levels contribute directly to promote and advance social innovation in health care delivery. TDR funding to support the SIHI hubs has leveraged resources from: i) established academic centres whose regular activities focus on social innovation (e.g. the self funded hubs in India, South Africa and Sweden); ii) global partners who dedicated time to support SIHI and embed social innovation in their programmes (e.g. LSHTM, Fondation Mérieux); iii) experts (meetings, external review, strategic support); and iv) SIHI country hub partners (including ministries of health, universities, advisory experts and other stakeholders).

The estimated leverage amount in 2022–2023 is: US$ 1 358 100 as at January 2024.

**Gender aspects and vulnerable populations:**
At the organizational level, 69% (9) of all 13 SIHI hubs are led by women; the SIHI ad hoc review committee is chaired by a woman and all four members are women.

Social innovations by nature directly or indirectly assist poor and vulnerable populations to access health care. SIHI supports implementation of the WHO framework on people-centred integrated health services, which aims to leave no one behind. SIHI calls for social innovations often target vulnerable populations such as children, pregnant women and tribes and communities living in remote or hard-to-reach areas. SIHI case studies highlight how social innovations not only help to improve health but also to enhance community members’ dignity and their economic situation.

TDR’s intersectional gender research strategy covers and addresses gender inequalities and health inequities in access to health care, with a specific focus on vulnerable populations. The strategy is being tested with SIHI hubs.

**Training:**
90 students, 10 innovators (SIHI Philippines, introduction course) + 2 (SIHI Indonesia)
10 individuals + 1 PhD (Malawi)
12 SIHI fellows (China, cross hubs) and 250 individuals through summer training programme
10 innovators (China)

A story-telling course is being developed and piloted with SIHI hubs to build further capacity for the hubs and for the innovators in communicating and fundraising.

Two MOOC modules were piloted as part of TDR’s Implementation Research MOOC. The final version will become available in 2024 for researchers and community innovators to grow their knowledge about conducting and managing social innovation research and community engagement.
**Strengthened institutions and/or networks:**
The SIHI hubs in Ghana, Honduras, India, Indonesia, Nigeria, Rwanda and Sweden have been trained in advancing social innovation in health through research, capacity strengthening and advocacy and were coached by the pioneer hubs in China, Colombia, the Philippines, South Africa and Uganda. The SIHI secretariat in the Philippines provided coordination and communication support.

**Publications:** Seven (#1–7)

**Results dissemination and uptake:**
The promotion and embedding of social innovation research in research institutions and governments to accelerate universal health coverage is critical to sustain efforts in LMICs. Evidence provided through case studies and other research has been widely disseminated through numerous advocacy events at regional and global levels, publications, participation in international conferences, social media, SIHI and TDR newsletters, radio and videos. Funding provided at country level to the hubs illustrates successful uptake. These include financial contributions from the Philippine Council for Health Research, University of the Philippines Manila, Zuellig Foundation in the Philippines, Swedish Embassy in Uganda, the World Bank in Malawi, PAHO, WPRO and the TY Danjuma Foundation in Nigeria.

**Plans for 2024–2025**
The focus during the next biennium will be to integrate social innovation research, with an intersectional gender and social justice lens, in LMICs to accelerate universal health coverage.

- Embedding research in social innovations to enhance their sustainability and scale-up.
- Integrating social innovation research in hubs’ country research organizations to enhance health systems and sustain the hubs.
- Enhancing sustainability of the hubs at various levels, including human capital, economic models, gender and social equity, and environment impact on health.
- SIHI partners’ research collaborations.
- Shifting TDR’s focus to global advocacy and partnerships to enhance sustainability of the networks and hubs.
ER 2.1.1.2: WHO regional office collaboration and impact grants for regional priorities

WHO regional office collaboration is key to TDR’s successful outreach, policy and other types of relationships with the entire Organization. As one of TDR’s co-sponsors and executing agency, TDR’s close and productive collaboration with WHO is indispensable for the successful achievement of its goals. The formal collaboration process has helped strengthen that collaboration in recent years. The impact grants for regional priorities is one of the ways TDR is working with the regions. These grants support researchers and public health practitioners, in collaboration with WHO regional offices, through small grants (ranging from US$ 10 000 to $20 000). Since 2014 the focus of the scheme has been on implementation research, and each region has taken more responsibility for jointly identifying with TDR the research priorities to be funded. The scheme has included all WHO regions since 2016.

Progress in 2023

In 2023, several new calls were issued, including in the WHO African, Americas and Western Pacific and South-East Asia regions. The call in the African Region resulted in 10 grants being awarded to various parts of the Region, focused on diverse topics. The call was issued in October 2022. The call in the Western Pacific Region resulted in 11 grants focused on neglected tropical diseases (NTDs), tuberculosis and other areas of interest in the Region. A call in the Americas Region resulted in six grants of a multidisciplinary nature, most of which will commence their work in 2023-2024.

The review of impact grants launched in 2020 concluded with a report and subsequent dissemination of impact via the TDR stakeholders network. As a result of the review, a selection of 10 impact grant stories is being shared via TDR’s social media channels, allowing for broader understanding and engagement. During 2022–2023, one such story in a month or every two months has been shared. Below is one example, focused on how impact grants support understanding the complexities behind antimicrobial resistance is presented.

Remaining risks and challenges

The main risk with this ER has always been the varied degree of engagement of each of the six regional offices. This is managed throughout the biennium and solutions are found to address challenges. The current level of implementation, collaboration and close partnership with all WHO regions is considered to be very high.
Contributions towards TDR key performance indicators

**Partnerships and collaborations:**
The ER by definition is the result of partnering with all WHO regional offices. However, in 2023 we were able to engage headquarters Health Emergencies Programme and the Global Programme on Migration Health in the process of implementation of the impact grants. In addition, partnership with AHPSR and HRP continues on various follow-ups to previous joint calls.

**Leverage created by this project:**
US$ 50 000 was leveraged from WPRO.

**Gender aspects and vulnerable populations:**
Special attention is given to ensure that every call has a 50/50 split of men and women as principal investigators. Calls also have a specific request for grantees to include gender aspects or gender analysis in their proposals.

**Training:**
Two workshops were organized, one virtual and one in person, in the WHO Regional Office for the Eastern Mediterranean, with grantees to improve methodological and other aspects of the impact grants.

**Strengthened institutions and/or networks:**
None

**Publications:**
A long list of publications from all supported projects is part of the TDR publications reporting and is not presented here to avoid duplication.

**Results dissemination and uptake:**
The results of specific projects and region level results are continuously shared via TDR and regional office channels.

**Plans for 2024–2025**
Plans in 2024 are to launch calls in regions and implement all current projects. In addition, TDR staff meet with regional focal points on an annual basis and this year plans for implementation of the new TDR strategy will be discussed.
ER 2.2.1: Shaping the research agenda

Shaping the research agenda addresses the health issues affecting vulnerable and neglected populations, within the framework of the Sustainable Development Goals. It does this by:

- Engaging with many stakeholders, including the WHO control programmes and regional offices, to identify and support demand-driven research priorities.
- Maintaining a governance system that brings together the disease-affected countries and research funders for joint decision-making and complementarity in programme development.
- Developing policy and new approaches to support and finance research and development through the commissioning of research and scoping studies.

Progress in 2023

Priority Setting

In 2020 TDR led a Science Division working group to develop guidance for WHO staff managing research priority setting exercises. In 2023 TDR used this guide to provide technical assistance to five WHO-led priority setting exercises:

- A one health priority research agenda for antimicrobial resistance in partnership with the Food and Agriculture Organization of the United Nations (FAO), the United Nations Environment Programme (UNEP), the WHO AMR Division and the World Organisation for Animal Health (WOAH, founded as OIE). Published July 2023.
- Global research agenda for antimicrobial resistance in human health in partnership with the WHO AMR Division. Summary Published June 2023.
- WHO’s Global research agenda on health and migration: Driving research and strengthening knowledge translation into policy and practice. In partnership with the International Organization for Migration (IOM), the United Nations High Commission for Refugees (UNHCR) and the WHO Migrant Health unit. This included moderating a consultation event at the Third global consultation on the health of refugees and migrants, held in Rabat, Morocco. Published October 2023.

Ongoing work includes a research roadmap for neglected tropical diseases with the WHO Control of Neglected Tropical Diseases (NTD) Department and a guidance document on priority setting methodology for the WHO HIV Department. In each exercise the value of implementation research as an appropriate method for improving the access, delivery and impact of health services is highlighted.

Research Mapping

During the COVID-19 pandemic TDR provided technical advice to the research funder working groups led by the UK Collaborative on Development Research (UKCDR) and the Global Research Collaboration for Infectious Disease Preparedness (GloPID-R). This working group looked at developing specific recommendations for action by funders to improve their funding responses during pandemics. Their report, COVID circle: Funding and undertaking research during the first two years of the COVID-19 pandemic, published in January 2023, drew heavily on the ESSENCE document Seven principles for strengthening research capacity in low- and middle-income
countries (published in 2014). In addition, TDR is part of the GloPID-R working group on the sharing of research data and a member of the Pandemic PACT (Pandemic Preparedness: Analytical Capacity and Funding Tracking programme) steering group developing new approaches to track research funding during the COVID-19 pandemic and put in place a platform for tracking research funds in future outbreaks, epidemics and pandemics. A living review was published on Wellcome Open Research and updated 10 times between September 2020 and July 2023.

The Health Target Product Profile Directory, collating a summary of all health products (diagnostics, treatments, vaccines and other supporting technology, for example patient management software) in development to tackle neglected tropical diseases, has been transferred to the World Health Organization’s Science Division. It has been integrated under the WHO Research and Development Hub and a new version of this online resource is now available.

![Fig. 3. Technical support was provided to the WHO AMR Division in creating two global research agenda in 2023](image)

Remaining risks and challenges

The ongoing challenge is seeking to effect change in global research systems with multiple stakeholders and conflicting national and regional agenda. The biggest risk is to making recommendations based on poor quality evidence with a stakeholder group that is not representative. The systematic approaches and technical guidance provided by TDR aims to mitigate this and publish all processes and findings in a transparent and timely manner.
Contributions towards TDR key performance indicators

**Partnerships and collaborations:**
One Health AMR (FAO, UNEP, WOAH)
COVID-19 data sharing and research mapping: UKCDR, GloPID-R

**Leverage created by this project:**
Profile of TDR and value of its technical advice.

**Gender aspects and vulnerable populations:**
All consultation exercises and recommendations were developed to include representative gender balance.

**Training:**
None

**Strengthened institutions and/or networks:**
This ER aims to strengthen global research networks, improve coordination and identify global research priority roadmaps.

**Publications:** Five (#8–12)

**Results dissemination and uptake:**
The research priorities will be implemented by the lead WHO technical department. Each one includes a plan for monitoring and evaluating impact. The research funding tracker work is ongoing.

### Plans for 2024–2025

**TDR will:**

- Continue to work with the WHO NTD and HIV departments to complete their priority setting projects;
- Continue to offer technical advice where appropriate;
- Work with the WHO Science Division to undertake an assessment of the value of research priority setting exercises and their impact on changing the scope of research undertaken and the degree of financial support to the identified priorities; and
- Work with the Science Division’s Evidence to Policy unit to develop a global research agenda related to improving the efficiency and effectiveness of knowledge translation activities.

There are plans for TDR to support the Migrant Health Department to provide implementation research training related to its global research agenda.
ER 2.2.2: Capacity strengthening to bring research evidence into policy

This forms part of strengthening the research system: innovating and supporting new approaches that improve the efficiency and maximize the impact of research for health by:

- Facilitating equitable open science through, for example, platforms to share and analyse research data and research tools and open access to research literature; and
- Building capacity in the translation of research evidence to inform policy

Progress in 2023

Facilitation of open science

In 2022 TDR led a Science Division working group to develop a new WHO policy on the sharing and reuse of health data for research. TDR continues to provide technical assistance to technical departments within WHO on the most appropriate mechanisms for sharing research data. TDR is part of the steering group working with CERN (the European Organization for Nuclear Research) which developed the Zenodo data sharing platform, to develop a bespoke directory for those research data directly under the responsibility of WHO.

TDR continues to work with the Infectious Diseases Data Observatory (IDDO) to develop secure platforms to share clinical data related to a number of diseases including: malaria, schistosomiasis, leishmaniasis and, more recently, Ebola and COVID-19. TDR also accepted a request from the International Severe Acute Respiratory and Emerging Infections Consortium (ISARIC) and IDDO to provide the Chair for the Data Access Committee (DAC) for a new COVID-19 data platform.

A new Structured Operational Training Initiative (SORT IT) course was started to support participants from Liberia, Guinea, Sierra Leone and the Democratic Republic of Congo undertake research on pandemic diseases choosing either to work on Ebola, Lassa fever or COVID-19. They either had access to data from within their own country or TDR facilitated access to Ebola or COVID-19 data held within the IDDO.

As this is a cross-TDR initiative, more details are provided at https://tdr.who.int/activities/sort-it-operational-research-and-training and recordings of the lightning presentations can be viewed via the TDR website.

TDR continues to be a major contributor to the COVID-19 Clinical Research Coalition, specifically contributing to the Data Sharing Working Group, and previously supported six research projects. In 2023 this group relaunched itself as CERCLE (Coalition for equitable research in low-resource settings) a global research response to infectious diseases driven by the needs of people in low-resource settings. TDR funded and provided technical advice to undertake a scoping review and cross-sectional survey of COVID-19 data sharing platforms and registries. Published October 2023.

TDR has contributed a chapter to a book coordinated by the National Institute of Allergy and Infectious Diseases (NIAID) on all aspects of the COVID-19 pandemic: Research, Sample, and Data Sharing during Outbreaks, Pandemics, and Beyond. Due for publication in March 2024.
TDR is an active member of the cOAlition S group promoting open access publishing. There is a growing realization that the article processing fees for many journals are becoming unaffordable for many researchers, particularly those in low- and middle-income countries. In response, TDR is part of a cOAlition S working group to explore how the future of open access publishing can be made more equitable, affordable and sustainable.

**Building capacity in the translation of research evidence to inform policy**

TDR continues to implement a communications module as part of SORT IT. In 2023 this included participants from Ghana, Nepal and Sierra Leone who were on a course to undertake research assessing the impact of previous SORT IT studies to tackle antimicrobial resistance with a One Health approach. A video of the course was made with the participants which demonstrated the value of the SORT IT approach and the importance of effective communication in influencing decision-making and effecting change. A standalone communications module was also provided for 10 participants nominated by the Ethiopian Public Health Institute (EPHI) who had completed research projects related to the control and elimination of NTDs in Ethiopia.

TDR worked with Health Information for All (HIFA) to hold an online discussion to explore what makes for effective communication of health research to policy-makers. The online forum attracted contributions from 30 participants located in 20 countries and covered such questions as: What are the most impactful methods for researchers to communicate their findings to policy-makers so that the research is translated into action? How can research be better packaged and communicated, using formats such as policy briefs, academic papers, videos, social media, infographics and newsletters? How do we define and measure impact? A report summarizing the main points was published in January 2023.

**Remaining risks and challenges**

Work on measuring the impact of communication tools and approaches for research findings has just begun and needs to be followed up with more case studies collected from the SORT IT courses and broadening out into the other areas TDR supports.

**Contributions towards TDR key performance indicators**

- **Partnerships and collaborations:**
  - IDDO, NIAID, HIFA, EPHI

- **Leverage created by this project:**
  - Profile of TDR and value of its technical advice.

- **Gender aspects and vulnerable populations:**
  - All consultation exercises and recommendations were developed to include representative gender balance.

- **Training:**
  - 22 participants on various SORT IT courses.

- **Strengthened institutions and/or networks:**
  - All SORT IT participants are frontline workers in the ministry of health, environment or agriculture.

- **Publications:** Six (#13–18)
Results dissemination and uptake:
The SORT IT course on measuring impact provides evidence and case studies on the effectiveness of this type of research support and the communication training to disseminate research findings. The findings from these studies show the benefits of having a range of communication tools, written briefs, visual and oral presentations when engaging decision-makers.

Plans for 2024–2025

- Complete the SORT IT course on use of existing data on pandemic diseases.
- Contribute to the cOAlition S working group on how to sustain open access publishing in an equitable manner.
- Work with the Science Division Evidence to Policy team to develop and pilot in two countries a checklist and supportive guidance to create an evidence informed policy-making process for the ministry of health.
- Work with the Traditional Medicines team and the Science Division on a framework for developing a mechanism appropriate for this area to generate, collect and collate evidence for policy.

ER 2.3.1: Collaborative networks (ESSENCE on Health Research) and engagement with global health initiatives

ESSENCE on Health Research is an initiative to improve the coordination and harmonization of investments in research capacity. ESSENCE members embrace the principles of donor harmonization and country alignment, and according to these principles, they align their activities and procedures with the priorities of the countries they are supporting. TDR’s Global Health Matters podcast was launched in 2021. Now in its third season, it has gained unprecedented popularity with the global health community.

Progress in 2023

ESSENCE members include some of the top funders of health research around the world. These include health research funding agencies, international health institutions, government research agencies, development agencies, philanthropists and multilateral initiatives. Below are some highlights of progress in 2023:

- ESSENCE has engaged several new member agencies, including the United Republic of Tanzania Commission for Science and Technology, the India Alliance on Research and the network of mental health global funders.
- A policy dialogue at the annual Southern African Research and Innovation Management Association conference engaged African health research funding agencies and identified strategic directions for potential collaboration.
- The new good practice document/guide focused on research capacity strengthening was finalized in collaboration with LSTM and launched in May 2023.
- The good practice documents on research costing and investing in implementation research were widely disseminated via various networks, conferences and webinars.
Produced by TDR, the *Global Health Matters* podcast aims to discuss and share experiences and views on different aspects of global health research, with a focus on LMIC perspectives. Additional objectives of the podcast are to:

- Communicate inspiring stories on research and research careers;
- Engage TDR’s partners and stakeholders;
- Engage the global health community not yet aware of TDR’s work; and
- Share practical lessons learned to promote South-South learning on issues related to global health and research.

The main audience of the podcast is those engaged in global health, global health research or overall development as part of achieving the Sustainable Development Goals. No other podcast focuses on this topic or targets this audience. This makes TDR’s podcast even more important, providing an opportunity to share experiences, learn from each other and be inspired to continue working in global health and global health research. As the podcast is produced by TDR, each episode has at least one angle that covers evidence generation, analysis, translation of knowledge or people/capacity that support that work. The podcast is produced by a team led by the podcast’s Executive Producer and Host, Garry Aslanyan, TDR’s Partnerships and Governance Manager.
Seasons 1 and 2

The podcast started in April of 2021 with Season 1 which had 10 episodes of wide ranging topics and issues in global health.

The response to and engagement with Season 1 confirmed that a new season was anticipated from the current and potential audience and, most importantly, our stakeholders who have warmly welcomed TDR’s new role in the global health debate. Following the 10 episodes of Season 1, an additional ten episodes were planned, six of which have already been produced and released. The experience so far has solidified and confirmed all steps in the podcast production, with increased efficiency, professionalism of media production, as well as increased dissemination/outreach activities. For a full flowchart of all steps and tasks involved in the episode production, please see Annex 1.

To date, the podcast has gathered over 22,000 downloads worldwide. With the number of diverse topics and guests working in 26 countries, in its short life span the podcast has had amazing engagement. We are very proud of the gender balanced, high calibre guests who have joined us so far, particularly those from LMICs. Their geographic distribution based on the place of their current work is presented below.

Fig. 5. Podcast statistics

Fig. 6. Geographic distribution of guests

The geographic distribution of the podcast shows broad reach, although podcast listening cultures globally are not even.
The episode download trend presented below demonstrates a steady increase over time, with only a slight plateau during the Christmas/New Year holidays. This observation has helped us decide to avoid releasing episodes during this period. The number of downloads in the first seven days of an episode’s release has steadily increased, indicating the establishment of a solid number of regular listenership.

Global Health Matters is currently disseminated through all major podcast platforms (Apple, iTunes, Spotify, Google Podcast, Overcast, etc.). It is also promoted on social media (@TDRnews on Twitter, @ghm_podcast on Facebook and Instagram and TDR’s LinkedIn account). Some of the metrics presented below indicate an increase in reach as well as the net positive impact of the podcast on social media presence and followership of TDR accounts overall. As presented below, Twitter profile visits and the LinkedIn page monthly follows have clearly increased with the introduction of the podcast content, driving traffic to our presence overall.
While TDR has hosted the secretariat of ESSENCE since 2009, which is managed by the head of the secretariat who is a TDR staff member, activities are mainly funded by Swedish Sida. To address this challenge, other funders are considering how best they can support the work and activities of ESSENCE.
Contributions towards TDR key performance indicators

Partnerships and collaborations:
ESSENCE includes over 40 member funding agencies. *Global Health Matters* partnered with several organizations, including WHO on specific episodes and with others in the process of dissemination.

Leverage created by this project:
Several funder members of ESSENCE funded work of consultants and other activities in line with ESSENCE workplan, at an estimated cost of US$ 200 000.

Gender aspects and vulnerable populations:
*Global Health Matters* podcast guests are always balanced in gender.

Training:
Not applicable.

Strengthened institutions and/or networks:
A number of regional research and innovation management associations were supported.

Publications: 3 (#19–21)

Results dissemination and uptake:
*Global Health Matters* podcast has been downloaded 30 000 times across 195 countries.

Plans for 2024–2025
The ESSENCE initiative will continue its work in the areas prioritized by member funders. A guide for capacity building funding will be developed in 2024. *Global Health Matters* will start season 4 with another 10 episodes of regular programming plus four in-depth interview style “in conversation with” episodes with global health thought leaders.

ER 2.3.3: TDR Global

TDR Global\(^1\) is a worldwide community of passionate scientists and experts who have been working with TDR on research on infectious diseases of poverty.\(^2\)

MISSION
TDR Global supports the action of local scientists associated with TDR by catalysing collaboration between people and helping them fulfil their mission. This facilitation role is undertaken through innovative communication and engagement tools, methods and events that stimulate dynamic participation and strengthens local capacity and collaboration South-South-North.

Progress in 2023
TDR Global Discovery (the public-facing search platform) was utilized by over 30 000 users in 2023. This shows the high level of interest from internal or external users (institutions and researchers) in identifying profiles with the right skills and experience in the various countries of the world.

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\(^1\) For more information on TDR Global see: https://tdr.who.int/activities/tdr-global

\(^2\) See a short animation: https://youtu.be/It-ox1vPFEc
Refreshed composition of the external working group

To guide TDR Global’s work, an external review group made up of independent experts has been in existence since 2015. The group developed a Community Engagement Strategy, which has been implemented in TDR Global’s activities. At the end of 2022, four new experts were appointed as external working group members, linking the work of TDR Global with the countries, as well as with the Research Capacity Strengthening and the Research for Implementation Scientific Working Groups.

The working group provides input and recommendations to guide the TDR Global strategy and activities starting in 2023. It meets with the TDR secretariat and representatives of the TDR Global regional nodes on a quarterly basis in addition to providing advice and support as well as systematic review of proposals, progress reports and final reports.

TDR Global initiatives

- Dissemination of the HERMES Institutional Mentorship guide: the “Focus on equity in mentorship” crowdsourcing contest

Nurturing research capacity in organizations such as universities, professional associations, and research institutes is key to improving research effectiveness and health equity in LMICs. The TDR Global “Health Research Mentorship in Low and Middle-Income Countries” (HERMES) practical guide, launched in October 2022, identified substantial disparities in research mentorship. Many underserved groups have fewer mentorship opportunities and high-income country mentors are prioritized over local mentors, continuing vicious cycles. This highlighted the need to make research mentorship more equitable and inclusive in LMICs.

A series of participatory events was organized in 2023 to enhance equity and inclusivity in research mentorship. This included a crowdsourcing open call and a digital designathon, i.e. a structured process for enhancing collaboration.

The purpose of the open call was to identify innovative strategies to enhance equity in the practice of institutional research mentorship programmes, with a focus on age and gender related dimensions. This included ideas to create more equal opportunities within research mentorship programmes in LMICs and identify methods for measuring equity as it relates to institutional research mentorship.
The digital designathon involved a group of three finalists who were chosen among the applicants by a panel of independent judges. The finalists were invited to a series of four 90-minute workshops occurring over a 4-week period, to refine the strategies identified from the open call and prepare them to implement. Each finalist received support to implement their proposal over a period of six months.

Data from these finalists, together with an update to the scoping review, will contribute to inform future iterations of the HERMES guide.

- **TDR’s 50th anniversary photo contest**

As part of the 50th anniversary celebrations, a photo contest was launched in July 2023 which TDR Global regional nodes were actively involved in. TDR Global members were invited to share powerful images relevant to TDR’s history within three categories: field research or public health in action, clinical research in action and capacity strengthening/mentorship.

Thus, the photo contest not only provided documentation on TDR’s history of tackling infectious diseases of poverty over the last 50 years, but also encouraged TDR Global members to engage actively with the platform and complete their TDR Global profile, thus contributing to enhancing the value of the platform for members.

**TDR Global regional nodes**

- **Communication strategies to increase the visibility of TDR’s mission, vision and activities**

TDR’s resources and opportunities have been leveraged by the regional nodes via their websites (CIDEIM, TDR Global Africa Node webpage), newsletters and/or webinars, as well as via regional events (TDR Global Asia event), encouraging notably TDR Global members in their respective region to participate in the “Focus on equity in mentorship” crowdsourcing contest and the photo contest.

Initiatives to enhance engagement with the TDR Global community also include the creation of regional content, such as CIDEIM publishing the experience of a Clinical Research Leadership fellow on their website and linking the testimonial to associated publications, as well as to the fellow’s profile on the TDR Global platform. Another example is the creation of a Latin American focused version of the “Women in Science” compendium to celebrate International Women's Day.

TDR Global regional nodes have used various social media (Facebook, LinkedIn, Twitter-X) to increase the visibility of TDR’s mission and initiatives in their region beyond the TDR Global community. Examples include communication about the equity and inclusivity in research mentorship call in 2023, as well as updates on training opportunities supported by TDR.

In order to establish clear guidelines and protocols for efficient communication within their network, the regional node in Asia has in addition carried out an evaluation of existing communication channels used for various TDR projects in Asia, to identify the most suitable platforms for effective communication and collaboration in the future.

- **Promoting collaboration between TDR Global members**
  - **Sharing opportunities and challenges in virtual research mentorship implementation**

Building on the experience of two winners of the 2021 virtual research mentorship contests, the TDR Global Africa community engagement activities in 2023 have continued to focus on supporting the implementation of the research mentorship ideas. In addition to this, the African regional node hosted a webinar allowing the implementers to share their experience, discuss challenges and gather valuable feedback.
Promote and disseminate high impact research conducted by TDR Global members

To motivate TDR Global members to actively participate in an international conference, the Asia node organized a crowdsourcing event in May–June, calling for abstracts. The Indonesia Tuberculosis International Research Meeting (INA-TIME) 2023, held 31 August–2 September, provided a platform for TDR Global affiliates to present their projects and initiatives, fostering collaboration, knowledge sharing and networking opportunities among participants.

Increase the use of the TDR Global platform

The regional nodes made numerous efforts to increase the use of the TDR Global platform in 2023, notably through regular reminders but also encouraging participation in TDR’s 50th anniversary photo contest, which required TDR Global profiles to be completed.

One initiative to promote not only participation in training opportunities proposed by the regional training centre, but also to motivate members to update their profile on the TDR Global platform, was the discount offered by the LAC node on the registration fee for the virtual course on “Statistics Applied to Biomedical Research”.

Continuous improvement

Assessment surveys conducted by regional nodes

Online surveys to collect feedback from members were conducted by the regional nodes in 2023 to assess research and mentorship needs (Asia node) and explore areas of interest regarding podcasts and webinars (Africa and LAC nodes). In addition, the Asia node organized a brown bag meeting with 12 TDR implementation research scholarship grantees to gain a deeper understanding of the experience of members with the platform and the engagement opportunities.

All of these initiatives were conducted to ensure the offer of the regional nodes is customized regionally and aligned with members’ needs and areas of interest.

TDR Global high-level review

TDR Global was created in 2015 by TDR at the request of the TDR Scientific and Technical Advisory Committee (STAC) and the Joint Coordinating Board (JCB), aiming to provide more evidence on the impact of TDR’s research and training grants on the careers of researchers in LMICs, and to build on their wealth of expertise to catalyse further collaboration.

Today, the community counts over 3000 members. The ad hoc External Working Group was tasked with a high-level assessment of the achievements of TDR Global, of its community engagement strategy, of the working model through regional nodes and global crowdsourcing contests and of the online platforms used, with a view to providing recommendations for future improvement.

As part of the review, an anonymous survey was conducted to understand TDR Global users’ perspective and collect ideas for improvement. Out of 144 individuals who enrolled in the survey, 56 (38.88%) completed the questionnaire.

While 57% of respondents find the platform useful or very useful, one third had only done the required registration without ever using the platform. About one quarter of respondents said that the reason for not using the platform was that they did not know what it had to offer. About 60% of respondents thought that there should me more frequent communications and 80% agreed that focus should be on mentorship on key research areas relevant to TDR and infectious diseases.
TDR conducted an anonymous survey of members to identify potential gender-specific challenges that researchers encountered during the COVID-19 pandemic, and which may have influenced their ability to apply for research grants during that period.

The survey was fully answered by 64 respondents from 37 countries, among whom 36 were women and 28 were men, from countries representing all income levels.

Of all the respondents, 61% (64% women, 57% men) reported having encountered more challenges in applying for grants during the COVID-19 pandemic compared to previous years. The difference between women and men was even higher when answering questions related to gender roles. Overall, 47% of women and only 7% of men reported that socially assigned gender roles impacted or influenced their capacity and time available to search for and apply for grants or funding opportunities during the pandemic. A publication presenting all the results will follow.

Remaining risks and challenges

Despite multiple efforts and a steady improvement in 2022 and 2023, a significant proportion of TDR Global members still had not completed their profile in 2023, which limits the value of the platform and reduces the likelihood that members will actively engage and find mentors. In addition to the plan implemented in 2022 where regional nodes provided regular reminders and incentives to enhance the proportion of completed profiles, new incentives proposed by the regional nodes and the photo contest launched in 2023 are expected to accelerate the completion of profiles and encourage active engagement. Via the latter, members will not only be participating in a contest, but also contributing to TDR’s 50th anniversary celebrations and be able to share their success stories.

Contributions towards TDR key performance indicators

Partnerships and collaborations:

We partner with three regional nodes: University of Ghana (Africa node), CIDEIM (Americas node), University of Yogyakarta (Asia node), as well as with country nodes in Ethiopia (Armauer Hansen Research Institute – AHRI), USA (University of Carolina Chapel Hill). We work with SESH (Social Entrepreneurship to Spur Health). We work with an external review group made up of independent international experts who provide input and recommendations to guide the TDR Global strategy and activities.

Leverage created by this project:

Leverage through technical support for the development of the “Focus on equity in mentorship” crowdsourcing contest.

External working group volunteering time and expertise.

The CIDEIM website is being upgraded and will include a special space to highlight the programmes supported by TDR (regional training centres, SIHI, TDR Global)

Gender aspects and vulnerable populations:

Two of the three regional node focal points are women. In the Africa node, the core team is made up of two men (including the focal point) and one woman. The Asia node involved six men and six women in their brown bag meeting. In the LAC node, the focal point is a woman. One of their initiatives in 2023 was to create a local “Women in Science” compendium to celebrate International Women’s Day. The purpose of the “Focus on equity in mentorship” crowdsourcing contest is to identify innovative strategies to enhance equity in the practice of institutional research mentorship programmes, with a focus on age and gender related dimensions.
Training:
All nodes: promoting TDR training opportunities, regional webinars addressing training needs/topics of interest of members.
Africa node: capacity building on how to organize podcasts.

Strengthened institutions and/or networks
Dissemination and implementation of the HERMES guide in LMIC institutions: participatory events were organized in 2023 to enhance equity and inclusivity in research mentorship.

Publications: Four (#22–25)

Results dissemination and uptake: None

Plans for 2024–2025
Build on learnings from soft review of TDR Global.

Dissemination of the HERMES Institutional Mentorship guide: the “Focus on equity in mentorship” crowdsourcing contest:
- Reports from five finalists after six months of implementing their proposal.
- Analyse data from the finalists alongside an update to the scoping review to inform future iterations of the HERMES guide.

Update the TDR Global “Women in Science” compendium to include profiles from French speaking Africa.

Define and implement initiatives for TDR Global to contribute to TDR’s 50th anniversary.

ER 2.3.4: Effective engagement in gender and equity
The first phase started in late 2021 and the third phase finished in December 2023. In less than two years, SIHI hubs have moved from relatively gender blind projects, to ensuring gender is a key milestone to understand and address, applying an intersectional gender approach within their research and related activities.

Progress in 2023

Philippines SIHI hub
Research was conducted on two social innovations in health projects adopting an intersectional gender lens to understand how gender and intersecting social stratifiers interplayed within social innovations in health at community level. Capacities were also strengthened through gender responsive learning based on social innovation research and gender research findings.

SIHI Colombia
The team explored the role of indigenous and black women in their community’s health, its interaction with other social stratifiers and the barriers for their participation in health programmes, and to understand how an intersectional gender lens influenced, helped or improved participation in social innovations in health initiatives.
SIHI Uganda

The team explored the gendered aspects and dimensions of social innovation in health at community level through social innovation health projects and generated knowledge on what works through social innovation in health activities in local contexts to address inequities resulting from the intersections of gender with other social stratifiers.

Remaining risks and challenges

As the network expands and creates opportunities for evolution it also brings the challenges of ensuring an effective coordination to enhance efficiency, synergy and sustainability. The SIHI secretariat in the Philippines has been critical in playing a coordination role and supporting SIHI coordination activities. Strong focus was placed in 2023 on fostering the sustainability of the SIHI network, engaging all hubs in exploring innovative financing and business models and in embedding social innovation research in institutions and governments.

Contributions towards TDR key performance indicators

**Partnerships and collaborations:** SIHI network; HRP; University of Ghana; ministries of health

**Leverage created by this project:** Leverage is created across SIHI hubs and their regional networks and engaged in fundraising activities for next biennium.

**Gender aspects and vulnerable populations:**

At the organizational level, 69% (9) of the 13 SIHI hubs are led by woman. The SIHI ad hoc review committee is chaired by a woman and four of the members are women.

Social innovations by nature directly or indirectly assist poor and vulnerable populations to access health care. With this project, gender inequities are explicitly explored and addressed. Gender aspects of social innovations are key elements of these SIHI projects.

**Training:**

The Philippines SIHI hub developed a learning module entitled “Applying an Intersectional Gender Lens on Social Innovations in Health” comprising of three learning units. The first unit talks about social innovation in health, and the second unit gives an overview of gender, gender dimensions, intersectionality and intersectional gender analysis. In the third unit, the intersectional gender lens is applied to analysing social innovations in health. The objective is to teach about the transformative potential of adopting an intersectional gender lens to social innovations in health.

**Strengthened institutions and/or networks:**

All SIHI hubs and their sister network hubs have seen strengthened and in some cases built completely their research capacities on gender.

**Publications:**

Work is in progress on 1–2 publications per hub. Drafts include:

As part of the project, Uganda has prepared two research manuscripts for publication:

- “Gender dimensions and access to health care in Uganda: Using an intersectional gender lens on social innovation health projects.

- "Gender-Based Violence and Associated Factors in Communities in Uganda: Data from the Social Innovation in Health Initiative."

CIDEM Colombia has developed a manuscript for submission to a peer-reviewed journal and an evidence brief for dissemination to policy-makers entitled “Barriers and facilitators for equitable participation in health among Indigenous and Afro-Colombian communities of Pueblo Rico (Colombia).”

**Results dissemination and uptake:**

See below
Dissemination and uptake

This is in line with the fourth core area of the TDR Intersectional Gender Research Strategy: (4) Promoting an inclusive infectious disease research agenda that recognizes the health needs of women, girls, men, boys and people in all their diversity, including those with non-binary identities.

Activities and Results

SIHI Talks

In May 2023, a SIHI Talks session was conducted entitled “A Closer Look at Social Innovations in Health: Examining Gender and Intersecting Social Stratifiers at a Community Level”.

SIHI Talks is a series of webinars that provides a platform for potential and current SIHI partners to connect with SIHI hubs/implementing and collaborating partners. It includes short events where members of the SIHI network can learn more about potential and current partners and vice versa.

Dissemination Platform: The Project Website

In line with the main objectives of this project, the three hubs aim to collaborate in the development of an online platform for dissemination and promotion. The platform is a microsite featuring the research results and evidence-based lessons from three hubs. The online platform will feature a summary of research results and lessons, as well as other creative content including videos, photos, briefs, modules, etc. It seeks to be a space for stakeholders, researchers and networks to learn about best practices and challenges of the research.
Initial conversations with a potential web developer took place in May 2023. This was done to help SIHI Philippines understand the scope of the platform, as well as the technicalities involved in creating the platform through an existing SIHI website (https://socialinnovationinhealth.org/). The conversations were helpful to the team, especially with regard to the technical processes involving the platform set-up and functionalities.

A second meeting in June 2023 was also held to open up discussions between the web developer and current manager of the SIHI website. This enabled a discussion on the access and permissions that will be needed in the coming months, especially considering that the platform is to be hosted within the same domain as the SIHI website.

In early September 2023, a first prototype (mock-up) of the microsite was developed. The wireframe and screenshots of the prototype (mock-up) can be found below.

![Fig. 13. SIHI LAC / CIDEIM page](image-url)
Local Promotional Activities

Philippines

On 20 April 2022, SIHI Philippines held a Research Uptake Event which convened 19 representatives from different partner organizations (governments, NGOs, academe, youth, students) to discuss the findings and implications of the hub’s research projects. This included a presentation of Phase 1 (October–December 2021) and future plans for the current project, a 10-minute presentation, as well as a policy brief which was provided to the participants in advance. Following the presentation on intersectional gender analysis, an intervention was made by a representative from the Chief of the Research Information, Communication and Utilization Division of DOST-PCHRD (Department of Science and Technology – Philippine Council for Health Research and Development) who stated that emphasising social innovation in health enables people and communities to act on their own health and leads to changes in gender relations and power dynamics.

SIHI Philippines also presented at The Network: Towards Unity for Health (TUFH). They submitted an abstract for a poster presentation for TUFH’s 2022 international conference, entitled “Towards gender transformative responses for community health: An exploratory rapid appraisal to initiate intersectional gender analysis of social innovations in health.” This oral poster presentation was held on 18 August 2022 in Vancouver, Canada.

Uganda

On 27 April 2022, the 4th Uganda National Social Innovation in Health Initiative Stakeholder’s Workshop was held in Kampala. The workshop was attended by innovators, academia from Makerere University, SIHI partners, officials from the Ministry of Health, the Ministry of Gender, Labour and Social Development (MGLSD), the Secretariat of Science, Technology and Innovation, and other stakeholders.

During the workshop, SIHI Uganda launched the gender and social innovation in health project. The launch was spearheaded by Mr Julius Ocaya Amule from MGLSD. SIHI Uganda made presentations on the concepts of gender, intersectionality and gender assessment in social innovation projects. Presentations were aimed at improving innovators’ knowledge regarding gender aspects and dimensions. The innovators also took part in practical sessions to assess and understand the gender dimensions of their work.

Plans for 2024–2025

- The study team from the Philippines will lead the development of a web-based platform which will be hosted on the SIHI website (https://socialinnovationinhealth.org/) and will be used to disseminate results from the projects from all three country hubs.
- The Philippines hub will develop two manuscripts and submit them to peer-reviewed journals for publication.
- All three countries will develop videos depicting their work and results.
- Dissemination activities will be conducted via stakeholder workshops and online seminars, presentation at scientific conferences, dissemination of videos showcasing their work and using the newly developed web platform hosted on the SIHI website.

Plans for the 2024–2025 biennium include a Special Issue on Social Innovation and Gender to be published in an open access peer-reviewed journal, and the development and piloting of a guidance document for ethics review committees to incorporate an intersectional gender lens in their health research protocol assessments. It is also planned to continue with additional activities within the SIHI network on gender, health research and social innovation.
Recommendations for policy, practice and further research were developed by each of the three SIHI hubs in 2023 and were also featured as part of their presentations for the SIHI Talks. Plans include implementation of key recommendations resulting from the projects described earlier.

**ER 2.3.5: Community engagement and ethics**

This Expected Result was created at the request of the scientific working groups to explore a broad area where community engagement interfaces with social innovation, implementation research and research ethics, contributing to research democratization.

In parallel with expanding on the priming work done in 2021 and 2022 in the areas of community engagement good practices and research ethics mapping, the scope of this crosscutting work serves various priority areas of TDR, such as social innovation research, implementation research, impact grants in regions and gender and intersectionality research.

The main goal in this first biennium is to explore the interest and attractiveness of this work area for TDR’s main stakeholders, map existing initiatives and identify potential gaps and niches where TDR’s contribution would be key and communicate these results.

**Progress in 2023**

Progress has been slower than anticipated, mostly due to the high turnover of interlocutors in the field.

**Development of a community engagement module to be incorporated into the TDR IR MOOC**

The module was finalized in mid-2023 through a long-term collaboration between SIHI and RCS, involving experts from countries. Filming was delayed due to COVID-19, and the work took a long time to finalize, having been delayed by one year compared to the initial plan.

This community engagement module was developed as part of a twin modules package: one related to social innovation and the other to community engagement. Pilot testing took place in October–December 2023 and will continue into 2024, with feedback informing any changes in early 2024 and a new launch date for the modules in Q2 2024.

It is intended that these modules will be made available through dual access: as part of the integral TDR IR MOOC and separately for those who are only interested in these topics. The course is at introductory level, with good examples from the field including some from the Community Engagement project reports.

**Strengthening ties with African and Asian ethics networks**

A visit by Asian fellows of the SIDCER/FCRAP³ network led to an exchange of information with TDR and the WHO ethics unit. The fellows presented the latest findings and trends in ethics review across the 250+ ERC member network and discussed potential opportunities for collaboration, taking into consideration the existing and developing TDR courses on ethics coordinated by RCS, as well as potential dissemination of SIDCER/FCRAP training courses by RTCs.

Several activities to enhance the networking and capacity of ethics review committees in Africa and Asia took place in November and December. To build efficiency, TDR collaborates with the

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³ Strategic Initiative for Developing Capacity in Ethical Review/Forum for Ethical Review Committees in the Asian and Western Pacific Region
regional networks FERCAP (Asia) and PABIN⁴ (Africa), under the auspices of SIDCER, to implement them.

An on-site and online refresher course for ethics committee surveyors for Africa and Asia, where TDR was invited to present, was held during the annual meeting of the SIDCER/FERCAP network which took place in Kuala Lumpur in November.

Also in November, in Addis Ababa a 3-day hands-on training event, facilitated by SIDCER and hosted by AHRI, was organized to address specific areas of improvement identified during the SIDCER survey in April 2023. The event included time for networking to revive PABIN’s activities and the SIDCER-PABIN strategic collaboration.

Jointly with the WHO ethics unit, the WHO benchmark tool for ethical review was piloted by assessing thirty SIDCER-recognized ethics committees in Africa and Asia during November and December. Results will inform future approaches to building capacity for quality in ethics reviews in countries.

Call for identification of good practices in community engagement in LMICs

The work under this Expected Result engaged ten projects in countries in 2021, under a SIHI/TDR call for proposals to conduct research in countries on identifying good practices for engaging communities in social innovation, implementation research, ethics and gender.⁵ The ten projects have completed their activities and submitted their final reports (see Table 2).

An analysis has been started with the ten principal investigators and their teams to gather across the ten projects the lessons learned, the gaps and opportunities, and to publish the results for broader dissemination. A workshop with selected PIs took place in December to develop the structure and main content of the publication(s).

This will inform and guide community engagement activities in 2024–2025.

Remaining risks and challenges

We are working with colleagues in the TDR Research for Implementation unit on a potential project that would study good practices for involving communities in surveillance, detection and response to outbreaks, building on TDR experience in this field and on networks that TDR collaborates with.

As the community engagement ten-project initiative is closer to the end, risks are more related to not being able to find common threads and lessons learnt from the projects conducted. Regarding ethics, risks involve not being able to engage with other players in the capacity strengthening for ethics field, in which case TDR will select its niche based on the feedback from ethics committees in countries where projects are conducted.

⁴ Pan-African Bioethics Initiative
⁵ See https://who.force.com/etdr/s/gs-solicitation/a0p3X00000avTMMQA2/ca210005
Table 2. Projects selected as part of the call for identification of good practices in community engagement in LMICs

<table>
<thead>
<tr>
<th>Institution</th>
<th>Country</th>
<th>Project theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brain Research Africa Initiative</td>
<td>Cameroon</td>
<td>Rethinking meaningful community engagement in research in Cameroon and Senegal</td>
</tr>
<tr>
<td>Forum for Medical Ethics Society</td>
<td>India</td>
<td>A collaborative research initiative cataloguing key community engagement practices embedded in implementation research public health projects involving disadvantaged (rural/indigenous) communities in India</td>
</tr>
<tr>
<td>Forum of Ethics Committees</td>
<td>Kazakhstan</td>
<td>Mapping ethics committee (IEC/IRB) practices for engaging communities in health research in Eastern Europe and Central Asian countries: social innovative models for implementation and transferring the results of TB-related research</td>
</tr>
<tr>
<td>International Medical University</td>
<td>Malaysia</td>
<td>A systematic review of good practices used to engage communities in health services research in neglected tropical diseases in LMICs of South-East Asia and the Pacific</td>
</tr>
<tr>
<td>Jimma University</td>
<td>Ethiopia</td>
<td>Identification, synthesis and translation of good practices and evidence for engaging communities in research and social innovation in health care delivery for infectious diseases of poverty in sub-Saharan Africa</td>
</tr>
<tr>
<td>Kwame Nkrumah University of Science and Technology</td>
<td>Ghana</td>
<td>Building evidence to facilitate effective community engaged research in Sub-Saharan Africa</td>
</tr>
<tr>
<td>Makerere University Kampala</td>
<td>Uganda</td>
<td>Community engagement in social innovation: a mixed methods analysis from the Social Innovation in Health Initiative</td>
</tr>
<tr>
<td>Mazandaran University of Medical Sciences</td>
<td>Iran, Islamic Republic of</td>
<td>Social innovation in health and community-driven engagement as a key opportunity to address COVID-19 crisis challenges: reflections on the multicultural society of Iran</td>
</tr>
<tr>
<td>Universidad del Valle de Guatemala</td>
<td>Guatemala</td>
<td>Best practices for community engagement to improve access to health services for Chagas disease control</td>
</tr>
<tr>
<td>Women’s Health Care Foundation Inc.</td>
<td>Philippines, the</td>
<td>Modelling community engagement in the study of gender responsiveness in TB prevention and management in a high TB-burden area in the Philippines: promoting enablers and overcoming barriers</td>
</tr>
</tbody>
</table>
Contributions towards TDR key performance indicators

**Partnerships and collaborations:**
PABIN; SIDCER; the SIHI secretariat; TDR colleagues from all strategic priority areas (research for implementation, research capacity strengthening and global engagement); the WHO ethics unit

**Leverage created by this project:**
Will be assessed at the biennium end.

**Gender aspects and vulnerable populations:**
Of the 50 or so people working on the community engagement initiative in the field, 35 are women, 15 are men and one other gender identity. All funded projects are gender-sensitive, looking to see if there are noted differences linked to gender identity or gender roles in the way communities are engaged in research and social innovation.

**Training:**
The project in Australia and Malaysia has developed training materials that have been partially included in TDR’s training materials for the MOOC on implementation research.

**Strengthened institutions and/or networks:**
SIDCER/FERCAP/PABIN collaboration

**Publications:**
None

**Results dissemination and uptake:**
None

**Plans for 2024–2025**

- To gather lessons learnt from across the ten community engagement studies and publish them in a joint publication.

- To create a guide for good practices in community engagement to research and social innovation, if the lessons learned are unique.

- Ethics work: to work jointly with the WHO ethics unit and support the ethics committees in countries to address their identified problems. TDR’s niche is the ethics review committees hosted in research institutions, complementing the scope of work of WHO’s ethics unit, which is mainly on government-level entities.

- All other work to be continued as planned.
Budget and financial implementation

Table 1: Approved Programme Budget 2022–2023 and funds utilized (provisional data)

<table>
<thead>
<tr>
<th>Expected result</th>
<th>Revised planned costs September 2023</th>
<th>Implementation as at 31 December 2023</th>
<th>Implementation rates</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>UD</td>
<td>DF</td>
<td>Total</td>
</tr>
<tr>
<td>1.3.5 Research on social innovation to enhance healthcare delivery</td>
<td>307 000</td>
<td>650 000</td>
<td>957 000</td>
</tr>
<tr>
<td>2.1.1.2 Regional office collaboration and impact grants for regional priorities</td>
<td>900 000</td>
<td>0</td>
<td>900 000</td>
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<tr>
<td>2.2.1 Shaping the research agenda</td>
<td>50 000</td>
<td>0</td>
<td>50 000</td>
</tr>
<tr>
<td>2.2.2 Capacity strengthening to bring research evidence into policy</td>
<td>150 000</td>
<td>0</td>
<td>150 000</td>
</tr>
<tr>
<td>2.3.1 Collaborative networks and engagement with global health initiatives</td>
<td>260 000</td>
<td>445 000</td>
<td>705 000</td>
</tr>
<tr>
<td>2.3.3 TDR Global</td>
<td>402 000</td>
<td>402 000</td>
<td>804 000</td>
</tr>
<tr>
<td>2.3.4 Effective engagement in gender and equity</td>
<td>100 000</td>
<td>574 000</td>
<td>674 000</td>
</tr>
<tr>
<td>2.3.5 (new) Community engagement and ethics</td>
<td>100 000</td>
<td>100 000</td>
<td>200 000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2 269 000</strong></td>
<td><strong>1 669 000</strong></td>
<td><strong>3 938 000</strong></td>
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</tbody>
</table>
### Table 2: Approved Programme Budget 2024–2025

<table>
<thead>
<tr>
<th>Expected result</th>
<th>Global engagement</th>
<th>$40m scenario</th>
<th></th>
<th>$50m scenario</th>
<th></th>
<th>Revised planned costs at February 2024</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>UD</td>
<td>DF</td>
<td>Total</td>
<td>UD</td>
<td>DF</td>
</tr>
<tr>
<td>1.3.5</td>
<td>Research on social innovation to enhance healthcare delivery</td>
<td>150 000</td>
<td>350 000</td>
<td>500 000</td>
<td>400 000</td>
<td>550 000</td>
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<tr>
<td>2.1.1.2</td>
<td>Regional office collaboration and impact grants for regional priorities</td>
<td>1 000 000</td>
<td>100 000</td>
<td>1 100 000</td>
<td>1 350 000</td>
<td>200 000</td>
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<tr>
<td>2.2.1</td>
<td>Shaping the research agenda</td>
<td>100 000</td>
<td>100 000</td>
<td>200 000</td>
<td>100 000</td>
<td>100 000</td>
</tr>
<tr>
<td>2.2.2</td>
<td>Capacity strengthening to bring research evidence into policy</td>
<td>100 000</td>
<td>150 000</td>
<td>250 000</td>
<td>100 000</td>
<td>150 000</td>
</tr>
<tr>
<td>2.3.1</td>
<td>Collaborative networks and engagement with global health initiatives (including ESSENCE)</td>
<td>0</td>
<td>300 000</td>
<td>300 000</td>
<td>150 000</td>
<td>300 000</td>
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<tr>
<td>2.3.3</td>
<td>TDR Global - the community of former trainees, grantees and experts</td>
<td>300 000</td>
<td>0</td>
<td>300 000</td>
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<td>0</td>
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<tr>
<td>2.3.4</td>
<td>Intersectional gender analysis in research and training</td>
<td>100 000</td>
<td>100 000</td>
<td>200 000</td>
<td>250 000</td>
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<td>2.3.5</td>
<td>Community engagement and ethics</td>
<td>250 000</td>
<td>250 000</td>
<td>500 000</td>
<td>350 000</td>
<td>250 000</td>
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<tr>
<td><strong>Total</strong></td>
<td></td>
<td>2 000 000</td>
<td>1 350 000</td>
<td>3 350 000</td>
<td>3 200 000</td>
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## Projects and activities funded

<table>
<thead>
<tr>
<th>Project ID</th>
<th>Principal investigator</th>
<th>Supplier name (Institution)</th>
<th>Project title</th>
<th>Funding in US$</th>
<th>Disease(s)</th>
<th>Research topic(s)</th>
<th>Countries involved</th>
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<tbody>
<tr>
<td>P22-00616</td>
<td>Banisa Mier Abigail Ruth</td>
<td>Individual</td>
<td>Support TDR with the implementation of its intersectional gender research strategy in 2023</td>
<td>12 800</td>
<td>Gender</td>
<td></td>
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<tr>
<td>P22-00841</td>
<td>Birhanu Zewdie Jimma University</td>
<td></td>
<td>Uncovering intersectional gender-inequalities influencing vulnerabilities access to and uptake of malaria services and developing participatory gender-responsive framework toward malaria elimination in Ethiopia</td>
<td>97 992</td>
<td>Malaria</td>
<td>Gender</td>
<td>Ethiopia</td>
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<tr>
<td>P22-00842</td>
<td>Barau Mrittika BRAC University James P. Grant School of Public Health</td>
<td></td>
<td>Facilitators and barriers of management of multidrug-resistant tuberculosis in Bangladesh: an implementation research through gender lens</td>
<td>97 675</td>
<td>Gender</td>
<td></td>
<td></td>
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<tr>
<td>P23-00878</td>
<td>Halpaap Beatrice</td>
<td>Individual</td>
<td>TDR Social Innovation in Health Initiative – Enhancing network sustainability and impact</td>
<td>59 760</td>
<td>Not Disease-Specific</td>
<td>Networks; Other; Research capacity strengthening Social innovation and research</td>
<td>Global</td>
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<tr>
<td>P23-00922</td>
<td>Fongwen Noah</td>
<td>Individual</td>
<td>TDR Global coordination and monitoring of main activities</td>
<td>17 000</td>
<td>Not Disease-Specific</td>
<td>Other</td>
<td>Global</td>
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<tr>
<td>P23-00935</td>
<td>Loresche Kathleen</td>
<td>Individual</td>
<td>Assessment of SIHI hubs and SIHI network operational approaches and identification of ways to enhance their sustainability</td>
<td>5 000</td>
<td>Not Disease-Specific</td>
<td>Networks; Other</td>
<td>South Africa</td>
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<tr>
<td>P23-00940</td>
<td>Ongkoko Jr Arturo</td>
<td>Foundation for the advancement of clinical epidemiology (FACE)</td>
<td>Strengthening the coordination of the Social Innovation for Health Initiative Network and enhancing its sustainability and scalability through co-designing and co-development of innovative business models</td>
<td>24 740</td>
<td>Not Disease-Specific</td>
<td>Gender; Networks; Other; Research capacity strengthening Social innovation and research</td>
<td>Network of 13 hubs in: Colombia, Honduras, Ghana, Nigeria, Uganda, the Philippines, India, Indonesia, Malawi, Rwanda, South Africa, Sweden</td>
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<tr>
<td>P23-00941</td>
<td>Kharmissa Sabrina</td>
<td>Cochrane Collaboration</td>
<td>To undertake selection and administration of funds to support candidates from low- and middle-income countries to attend the Cochrane London 2023 Colloquium taking place on 4-6 September</td>
<td>25 000</td>
<td>Not Disease-Specific</td>
<td>Other</td>
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<tr>
<td>Project ID</td>
<td>Principal investigator</td>
<td>Supplier name</td>
<td>Project title</td>
<td>Funding in US$</td>
<td>Disease(s)</td>
<td>Research topic(s)</td>
<td>Countries involved</td>
</tr>
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<tr>
<td>P23-00957</td>
<td>Tucker</td>
<td>Social Entrepreneurship to Spur Health - SESH Global LLC</td>
<td>To identify strategies to enhance equity in research mentorship and facilitate implementation of the HERMES practical guide on research mentorship in low and middle-income countries (LMICs).</td>
<td>24 000</td>
<td>Not Disease-Specific</td>
<td>Other</td>
<td>Global</td>
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<tr>
<td>P23-00984</td>
<td>Gibbs</td>
<td>Edwards University of Oxford</td>
<td>Structured Operational and Training Initiative (SORT IT) on emerging infectious diseases using data stored on the Infectious Diseases Data Observatory (IDDO)</td>
<td>33 156</td>
<td>Ebola</td>
<td>Data management; Implementation research; Research for Policy; Research capacity strengthening Social innovation and research</td>
<td>Kenya</td>
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<tr>
<td>P23-01005</td>
<td>Nabil</td>
<td>Farah Individual</td>
<td>Technical development and coordination of a guidance document or practical resource for ethics review committees to integrate sex and gender consideration in their ethics review tasks</td>
<td>15 000</td>
<td>Not Disease-Specific</td>
<td>Gender</td>
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<tr>
<td>P23-01016</td>
<td>de Villiers</td>
<td>Katusha University of Cape Town</td>
<td>Organization of meeting of the pioneer country hubs of the Social Innovation in Health Initiative Network (SIHI)</td>
<td>65 566</td>
<td>Not Disease-Specific</td>
<td>Networks</td>
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<tr>
<td>P23-01017</td>
<td>Ashubwe-Jalemba</td>
<td>Jacklyne Individual</td>
<td>Providing senior knowledge management expertise for implementing the Structured Operational Research and Training Initiative (SORT IT) on antimicrobial resistance in Low- and Middle-Income Countries – Kathmandu Nepal Workshop 6-13 September</td>
<td>4 500</td>
<td>Not Disease-Specific</td>
<td>Antimicrobial Resistance</td>
<td>Nepal</td>
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<tr>
<td>P23-01018</td>
<td>Babarczy</td>
<td>Balazs Individual</td>
<td>Providing senior knowledge management expertise for implementing the Structured Operational Research and Training Initiative (SORT IT) on antimicrobial resistance in Low- and Middle-Income Countries – Kathmandu Nepal Workshop 6-13 September</td>
<td>4 500</td>
<td>Not Disease-Specific</td>
<td>Antimicrobial Resistance</td>
<td>Nepal</td>
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<tr>
<td>P23-01019</td>
<td>Guth</td>
<td>Jamie Individual</td>
<td>Providing senior knowledge management expertise for implementing the Structured Operational Research and Training Initiative (SORT IT) on antimicrobial resistance in Low- and Middle-Income Countries – Kathmandu Nepal Workshop 6-13 September</td>
<td>11 750</td>
<td>Not Disease-Specific</td>
<td>Antimicrobial Resistance</td>
<td>Nepal</td>
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<tr>
<td>P23-01020</td>
<td>Jessani</td>
<td>Nasreen Individual</td>
<td>Providing senior knowledge management expertise for implementing the Structured Operational Research and Training Initiative (SORT IT) on antimicrobial resistance in Low- and Middle-Income Countries – Kathmandu Nepal Workshop 6-13 September</td>
<td>4 500</td>
<td>Not Disease-Specific</td>
<td>Antimicrobial Resistance</td>
<td>Nepal</td>
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<tr>
<td>Project ID</td>
<td>Principal investigator</td>
<td>Supplier name (Institution)</td>
<td>Project title</td>
<td>Funding in US$</td>
<td>Disease(s)</td>
<td>Research topic(s)</td>
<td>Countries involved</td>
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<tr>
<td>P23-01055</td>
<td>Fourie Tina</td>
<td>Because Stories</td>
<td>To develop various communication projects for TDR Social Innovation in Health Initiative in 2023</td>
<td>34 333</td>
<td>Not Disease-Specific</td>
<td>Networks; Other</td>
<td>South Africa</td>
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<tr>
<td>P23-01059</td>
<td>Kanteh Dembo</td>
<td>West African Research and Innovation Management Association - WARIMA</td>
<td>Coordination of the facilitators and administrative processes at the WARIMA Annual Workshop and Conference at the University of Lagos Nigeria from 29 January to 1 February 2023</td>
<td>25 000</td>
<td>Not Disease-Specific</td>
<td>Implementation research</td>
<td>Nigeria</td>
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<tr>
<td>P23-01101</td>
<td>Whittaker Maxine</td>
<td>Individual</td>
<td>Facilitating publication of lessons learnt across ten country-based community engagement projects</td>
<td>5 000</td>
<td>Not Disease-Specific</td>
<td>Other</td>
<td>Australia, Honduras, Ghana, Ethiopia, Malaysia, Uganda, Cameroon, Kazakhstan, Iran, the Philippines</td>
</tr>
<tr>
<td>P23-01107</td>
<td>Neubecker Janet</td>
<td>Individual</td>
<td>Editing of a practical guide for designathons in health and health research</td>
<td>977</td>
<td>Not Disease-Specific</td>
<td>Data management; data sharing; networks; other; research capacity strengthening, social innovation and research</td>
<td>Global</td>
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<tr>
<td>P23-01109</td>
<td>Simion Mihai Marian</td>
<td>Individual</td>
<td>Generate maps to reflect the geographic distribution of active TDR Global members and verify outdated contact details</td>
<td>7 500</td>
<td>Not Disease-Specific</td>
<td>Global</td>
<td>Global</td>
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<tr>
<td>P23-01121</td>
<td>Lencho Alemseged Abdissa</td>
<td>Armauer Hansen Research Institute - AHRI</td>
<td>Expanding TDR engagement with Ethics Review Committees in low- and middle-income countries: Organization of the Capacity building meeting of SIDCER Recognized Ethical Review Committees in Ethiopia and PABIN strategic collaboration</td>
<td>13 650</td>
<td>Not Disease-Specific</td>
<td>Ethiopia</td>
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<tr>
<td>P23-01123</td>
<td>Karbwang Juntra</td>
<td>SIDCER-FERCAP Foundation</td>
<td>Expanding TDR’s engagement with Ethics Review Committees in low- and middle-income countries: Developing Capacity in Ethical Review in Africa and Asia through the SIDCER Network.</td>
<td>42 000</td>
<td>Not Disease-Specific</td>
<td>Regional: sub-Saharan + Asian countries</td>
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<tr>
<td>P23-01148</td>
<td>Stephenson Karen</td>
<td>Health Systems Global Association</td>
<td>Pre-conference organized by Health Systems Global on Exploring the effects of climate change conflict migration and emerging diseases of poverty on Health Systems in Eastern Europe.</td>
<td>25 000</td>
<td>Not Disease-Specific</td>
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<tr>
<td>Project ID</td>
<td>Principal investigator</td>
<td>Supplier name (Institution)</td>
<td>Project title</td>
<td>Funding in US$</td>
<td>Disease(s)</td>
<td>Research topic(s)</td>
<td>Countries involved</td>
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<tr>
<td>P23-01149</td>
<td>Gasch Gallen</td>
<td>Angel</td>
<td>University of Zaragoza</td>
<td>Technical support coordination for the development of a guidance document on research ethics and intersectional gender</td>
<td>8 000</td>
<td>Not Disease-Specific</td>
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<tr>
<td>P23-01152</td>
<td>Tucker</td>
<td>Joe</td>
<td>SESH Global LLC</td>
<td>Strategic Mapping exercise to Pilot the HERMES practical guide</td>
<td>20 000</td>
<td>Not Disease-Specific</td>
<td>Colombia, the Philippines, Uganda, Ghana</td>
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</table>
TDR funding in 2023

<table>
<thead>
<tr>
<th>Contributor</th>
<th>Amount (US$)</th>
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<tr>
<td><strong>Core contributors</strong></td>
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<tr>
<td>Belgium</td>
<td>681 044</td>
</tr>
<tr>
<td>India</td>
<td>55 000</td>
</tr>
<tr>
<td>Japan</td>
<td>50 000</td>
</tr>
<tr>
<td>Luxembourg</td>
<td>1 185 037</td>
</tr>
<tr>
<td>Malaysia</td>
<td>25 000</td>
</tr>
<tr>
<td>Mexico</td>
<td>10 000</td>
</tr>
<tr>
<td>Nigeria (1)</td>
<td>200 000</td>
</tr>
<tr>
<td>Norway</td>
<td>306 341</td>
</tr>
<tr>
<td>Panama</td>
<td>7 000</td>
</tr>
<tr>
<td>Spain (2)</td>
<td>161 813</td>
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<tr>
<td>Sweden</td>
<td>1 162 487</td>
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<tr>
<td>Switzerland</td>
<td>1 940 639</td>
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<tr>
<td>Thailand</td>
<td>44 274</td>
</tr>
<tr>
<td>United Kingdom of Great Britain and Northern Ireland</td>
<td>3 877 001</td>
</tr>
<tr>
<td>World Health Organization</td>
<td>900 000</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>608</td>
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<tr>
<td><strong>Subtotal</strong></td>
<td>10 606 244</td>
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</table>

<table>
<thead>
<tr>
<th>Contributors providing project-specific funding</th>
<th>Amount (US$)</th>
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<tbody>
<tr>
<td>International Development Research Centre</td>
<td>151 172</td>
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<tr>
<td>Luxembourg</td>
<td>413 340</td>
</tr>
<tr>
<td>Medicines Development for Global Health</td>
<td>8 495</td>
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<tr>
<td>Robert Koch Institute</td>
<td>272 065</td>
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<tr>
<td>Sweden (Sida)</td>
<td>313 418</td>
</tr>
<tr>
<td>United Kingdom Foreign, Commonwealth and Development Office</td>
<td>100 000</td>
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<tr>
<td>United Nations Development Programme</td>
<td>1 144 000</td>
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<tr>
<td>World Health Organization</td>
<td>487 986</td>
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<tr>
<td><strong>Subtotal</strong></td>
<td>2 890 476</td>
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</table>

**Total contributions** 13 496 720

1. The contribution from the Government of the Federal Republic of Nigeria for the period 2021 to 2023 was reported in full in the 2022 certified financial statement.

2. The contribution from the Government of Spain is for 2023 only. Contributions received in both 2022 and 2023 will be reported in the 2023 certified financial statement due to the timing of their receipt.
Annex 1. Publications list

1.3.5 Research on social innovation to enhance healthcare delivery


5. Tiangco PMP, Mier-Alpano JD, Cruz JRB, et al


2.1.1.2 WHO regional office collaboration and Impact grants for regional priorities

A long list of publications from all supported projects is part of the TDR publications reporting and is not presented here to avoid duplication.

2.2.1 Shaping the research agenda


2.2.2 Capacity strengthening to bring research evidence into policy

13. AMR-SORT IT evidence summaries: Communicating research findings
14. NIAID Pandemic Response. Chapter XX Research, Sample, and Data Sharing during Outbreaks, Pandemics, and Beyond Due for publication in March 2024. RF Terry K Littler.
15. Video: the impact of SORT IT research studies on AMR https://tdr.who.int/activities/sort-it-operational-research-and-training#
16. Effective communication of health research to policymakers. HIFA (2023).
17. Research is born free but everywhere is in chains…. (apologies to Rousseau). RF Terry. An article celebrating 25 years of the SciELO platform (Scientific Electronic Library Online) providing open access to publications and data from throughout the South American countries. We so loved open access Published October 2023

2.3.1 Collaborative networks (ESSENCE on Health Research) and engagement with global health initiatives

19. https://tdr.who.int/publications/m/item/four-approaches-to-supporting-equitable-research-partnerships

Related news:

2.3.3 TDR Global

LAC node:

Newsletters:
23. 27 September: https://mailchi.mp/cideim/hhxuuu50op-7276877
24. 30 January: https://mailchi.mp/cideim/hhxuuu50op-811530
25. 24 May: https://mailchi.mp/cideim/hhxuuu50op-8124929

Africa node:
First draft manuscript to document the processes of creating and engaging a TDR Global community in Africa between 2019 to 2023, planned January 2024.