



Investing in our future

The Global Fund

To Fight AIDS, Tuberculosis and Malaria

**B21/EDP/18
For Decision**

TECHNICAL REVIEW PANEL - 2010 MEMBERS AND SUPPORT GROUP REPLENISHMENT

OUTLINE:

This report provides the Board with the recommendations of the Portfolio and Implementation Committee (PIC) and Executive Director of the Global Fund in regard to the full replenishment of the Technical Review Panel (TRP). This report also provides an overview of the process followed, as well as recommendations to strengthen the TRP replenishment process in the future.

EXECUTIVE SUMMARY

1. The last replenishment of the full TRP Support Group took place in early 2006 - a process that typically occurs every two years. Due to a number of policy and strategic initiatives underway in 2008/2009, the Portfolio and Implementation Committee (PIC) recommended that the recruitment of new experts be deferred until 2009/2010 in order to incorporate potential changes in the structure and/or role of the TRP resulting from the new architecture¹.
2. The recruitment and selection process was managed by the PIC through an open, transparent and criteria-based process, and made through a public call for applications which included the placing of advertisements in seven languages through different media (i.e. websites, email distribution lists and the Economist) On behalf of the PIC, the Secretariat invited Board constituencies, lead technical partners (including UNAIDS, the Stop TB and Roll Back Malaria Partnerships), WHO's technical advisory clusters and programs, and current and former TRP members to identify appropriately qualified and independent experts to receive an invitation to apply².
3. To support the replenishment process, the PIC established a sub-working group composed of the PIC Chair and Vice-Chair, five PIC members (Communities, Developing Country NGOs, Italy, Partners, Private Foundations), representatives of WHO, UNAIDS and the World Bank and the TRP Vice Chair.
4. An external company selected through a competitive process by the Secretariat was responsible for the placement of advertisements, screening of applications and short-listing of qualified candidates against agreed upon criteria. In line with policy and past practice, the PIC Sub-Working Group reviewed the shortlist of applications and made recommendations to the PIC and the Executive Director, on the proposed TRP membership and replenished Support Group, as presented in this report.

PART 1: BACKGROUND

- 1.1 Under the direction of the PIC, the Secretariat undertook the TRP replenishment process for the 2010-2012 period between March and July 2010. This process considered the lessons learned from the TRP replenishment conducted in 2006³, as well as the partial replenishment of 2008 and 2009.
- 1.2 The current replenishment was undertaken to ensure:
 - i. An appropriate mix of HIV/AIDS, tuberculosis, malaria and cross-cutting experts with a wide range of expertise, geographically diverse experiences, as well as knowledge of different sectors⁴;
 - ii. The recruitment of new TRP members to fill the Permanent TRP member vacancies commencing from Round 10, as well as to fill Alternate positions for Round 10; and
 - iii. That the TRP Support Group would be fully replenished in order to be able to fill future TRP Member and Alternate Member vacancies (Rounds 11 and 12)
- 1.3 Part 2 of this Report describes the screening and selection processes and Part 3 presents recommendations to further strengthen the TRP recruitment process in the future.

¹ Report of the Portfolio Committee to the Board, GF/B18/5, p.5

² Terms of Reference of the Technical Review Panel, paragraph 13

³ As reflected in the recommendations within the Report of the Thirteenth Board Meeting, GF/B13/8

⁴ As stipulated in paragraph 5 of the TRP terms of Reference

PART 2: OVERVIEW OF SCREENING AND SELECTION PROCESSES

2.1 As in the 2006 TRP recruitment process, HLSP was contracted to provide independent support to the recruitment process. HLSP ensured that multiple methods were utilized to identify the broadest range of suitable candidates - including direct approaches; website reviews; and journal, newspaper and web-based media announcements in multiple languages and across all WHO regions. A two-stage screening process was undertaken to deliver a short-list of applications for review by the PIC Sub-Working Group.

2.2 At various stages of the process, the PIC Sub-Working Group and TRP focal points provided input and guidance in relation to:

- i. the overall approach to recruitment;
- ii. the selection criteria;
- iii. the communications strategy; and
- iv. the application form.

2.3 On 7 July 2010, HLSP reported that in response to the broad-based worldwide search for TRP Member candidates:

- i. Applications from 646 experts across the four areas of expertise were received;
- ii. Applications from 247 candidates were included in the initial short list; and
- iii. Of these, 116 were included in the second and final short list, which was comprised of:
 - 29 HIV/AIDS experts;
 - 14 tuberculosis experts;
 - 16 malaria experts; and
 - 57 cross-cutters.

2.4 HLSP, together with the TRP Focal Points, ranked the 116 short-listed applicants as either A or B⁵ according to level of expertise within an area of competency as well as overall suitability for the TRP.

2.5 The PIC Sub-Working Group met on 15 and 16 July 2010 to review the candidates and to make recommendations to the Portfolio and Implementation Committee and the Executive Director. The Vice-Chair of the TRP was also present during these deliberations. Secretariat staff members provided background and process information (as needed).

2.6 The PIC Sub-Working Group noted that the TRP recruitment process had improved as compared to previous TRP recruitments. It was also noted that for the most part that the proposed candidates for TRP membership vacancies or Support Group membership represented applicants with a broad-based skill set, from which recommendations could be made by the Sub-Working Group. However, the Sub-Working Group recognized that further enhancements to the process are appropriate and will be presented to the PIC during at its 3rd Meeting (October 2010).

2.7 The PIC Sub-Working Group reviewed the applications in line with the TRP Terms of Reference, as amended at the 21st Board meeting, the agreed upon selection criteria and bearing in mind that TRP members should continue to have a broad overall understanding of the diseases, programming at country level and key issues that impact implementation capacity (even if experts have particular interest in one field).

⁵ A - excellent, robustly qualified as a TRP member; B - very good

2.8 The amended Terms of Reference of the TRP allows employees of the UN and its agencies to serve on the TRP and outlines the Conflict of Interest (COI) policy for TRP members. During the selection process, COI situations were taken into consideration.

2.9 During the meeting, Sub-Working Group members who are representatives of UN organizations recused themselves from decisions regarding candidates from their respective organizations. It was acknowledged that the policy to mitigate conflicts of interest (COI), perceived or real, requires further clarification. The issue of COI is discussed further in Part 3 below.

2.10 The PIC Sub-Working Group also considered the following when making its recommendations:

- With respect to the selection of Round 10 Permanent and Alternate TRP Members, the Sub-Working Group:
 - i. Noted the specific needs and gaps identified by the current TRP leadership, as conveyed by the TRP Vice-Chair, and all matters being equal tried to ensure the widest possible representation of WHO regions⁶ and gender balance in the proposed Round 10 TRP Membership;
 - ii. Operating under the assumption that there is one Round per year, considered the minimum expected vacancies over 2010-2012 across the four categories of expertise; and

Recognized the increasing role of the TRP as it relates to HSS, in particular in light of new initiatives such as the Health Systems Funding Platform and Joint Assessment of National Strategies, and noted that the current and recommended pool of experts could be strengthened in this area.

- With respect to the selection of TRP Support Group Members, the Sub-Working Group:
 - i. Noted that all other matters being equal, it would be ideal to adopt a ratio of Support Group members to serving TRP Members that is relatively complementary to the ratio of TRP Members within the four competency areas⁷;
 - ii. Applied a ranking system within the Support Group membership in order to allow enough flexibility to call upon these individuals as required. Candidates were ranked as either 'Support Group A' or 'Support Group B,' with those candidates ranked 'A' to be called upon first to serve on the TRP; and
 - iii. Noted that a large proportion of TRP Members, disease experts in particular, will end their terms after Round 10, and that there were a number of strong technical experts from the implementing countries who did not meet the criteria of work in multiple countries. Therefore the PIC Sub-Working Group decided it would be beneficial to request that three Support Group members (one per disease) be invited to participate in the Round 10 meeting as 'shadow reviewers.' This experience is expected to well-position these experts as reviewers in future rounds.

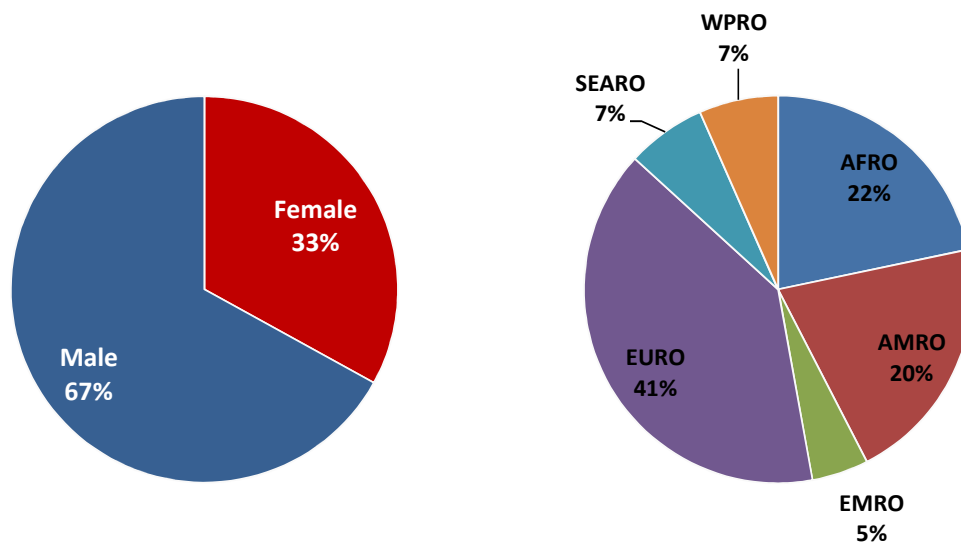
⁶ Although here the reference is made to the candidates' nationality, it should be noted that the PIC Sub-Working Group paid particular attention to experience of candidates in different countries and regions.

⁷ The current division of TRP permanent members by expertise is: HIV/AIDS: 8, tuberculosis: 6, malaria: 6, and cross cutters: 20

2.11 Figures 1 and 2 below show the breakdown by WHO region and gender of the 106 newly recruited TRP members consisting of 9 new Permanent TRP members starting Round 10, 19 Alternate members for Round 10 and 78⁸ TRP Support Group members for the 2010-2012 period.

2.12 In terms of gender distribution, the ratio of male to female candidates recruited in 2010 is similar to the ratio in the last full TRP recruitment in 2006. As in the last recruitment process, candidates from the AMRO and EURO regions constitute the majority of the newly-recruited candidates. There has been a slight improvement in the representation of the SEARO region.

Figure 1 and 2: Breakdown by Gender and WHO Region of the Recommended TRP Members



Part 3: RECOMMENDATIONS FOR STRENGTHENING THE TRP RECRUITMENT PROCESS

3.1 The PIC Sub-Working Group noted that although the process has improved, further enhancements are required for the future. Recommendations on how to improve the process (for example, consider separate recruitment processes for the four categories of expertise (HIV/AIDS, tuberculosis, malaria and cross-cutting (including HSS), improving the application form, reaching out to institutions to encourage suitable candidates, particularly from implementing countries, to apply) will be presented to the PIC at its 3rd Meeting. However, the PIC Sub-Working Group would like to draw the Board's attention to need for strengthening and clarification of the policy on potential or perceived conflicts of interest.

3.2 At the Twenty-first Board Meeting, changes were made to the Terms of Reference of the TRP allowing employees of the UN and its agencies to serve on its panel and strengthening the COI policy for TRP members. During the various stages of the TRP recruitment process and, in particular, during its final deliberations, the Sub-Working Group noted with concern that otherwise strong candidates (employees of UN agencies) could not be recommended to be part of the TRP due to real, potential or perceived conflicts of interest.

3.3 The Sub-Working Group recommends that guidelines be developed to clarify how the Ethics and Conflict of Interest Policy (Ethics Policy) is to be implemented with respect to the recruitment and selection of TRP members (particularly in light of the decision at the last Board meeting to allow employees of the United Nations and its specialized agencies to serve as TRP

⁸ Two members listed in the Support Group, namely Katya Burns and Sarah Hawkes, were recruited in 2009 through the partial TRP replenishment for cross-cutting experts with gender focus

members). These guidelines will be developed and presented to the PIC and the Ethics Committee for review. In addition, the Sub-Working Group recommends that, prior to the TRP meeting to review Round 10 proposals, the TRP Chair further develop the internal guidelines on how the Ethics Policy will be implemented (i) during TRP meetings, and (ii) with respect to the conduct of TRP members outside TRP meetings, during the TRP member's term of service and the one year 'cooling off' period.

3.4 In this regard, TRP Internal Guidelines on how to comply with the Policy on Ethics and Conflicts of Interest⁹ will be amended and a note on COI issues during the TRP recruitment and selection process will be drafted and presented to the PIC for their review.

Decision Point (B21/EDP/18): Technical Review Panel Recruitment 2010-2012

The Board approves the appointment of the following:

1. *Anupong Chitwarakorn (HIV/AIDS), Stephen Mills (HIV/AIDS), Anthony David Harries (Tuberculosis), Frank Adae Bonsu (Tuberculosis), Daniel Tarantola (Cross-cutting), Mari Nagai (Cross-cutting), Lev Khodakevich (Cross-cutting), Claudia Surjadjaja (Cross-cutting) and Lucie Blok (Cross-cutting) as Permanent Technical Review Panel (TRP) Members to serve for up to four Rounds commencing from Round 10;*
2. *In respect of Round 10, the twenty (20) persons identified as Alternate Members as presented in Annex 1 of this Report (B21/EDP/18); and*
3. *The membership of the Technical Review Panel Support Group (as presented in Annex 1 of this Report (B21/EDP/18)), comprising the pool of experts from which TRP membership will be replenished in the event of TRP vacancies as they may arise.*

Each Permanent TRP, Alternate and Support Group Member has been recommended by the Portfolio and Implementation Committee and the Executive Director of the Global Fund Secretariat.

This decision does not have material budgetary implications.

⁹ Issued in line with the TRP Terms of Reference, para 21

Annex 1 - Recommended Permanent Members commencing from Round 10, Alternate members for Round 10 and TRP Support Group members 2010-2012

No.	Capacity	Surname	First Name	Country of Primary Citizenship	WHO Region	Gender
HIV/AIDS						
1	Permanent	Chitwarakorn	Anupong	Thailand	SEARO	Male
2	Permanent	Mills	Stephen	USA	AMRO	Male
1	Alternate	Daly	Celine Costello	USA	AMRO	Female
2	Alternate	Hawken	Mark	New Zealand	WPRO	Male
3	Alternate	Lugada	Eric	Uganda	AFRO	Male
4	Alternate	van Praag	Eric	Netherlands	EURO	Male
1	SGM	Boltaev	Azizbek	Uzbekistan	EURO	Male
2	SGA	Barnhart	Matthew	USA	AMRO	Male
3	SGA	Dallabetta	Gina	USA	AMRO	Female
4	SGA	Jana	Smarajit	India	SEARO	Male
5	SGA	Janssen	Paul	Netherlands	EURO	Male
6	SGA	Klepikov	Andriy	Ukraine	EURO	Male
7	SGA	Miller	Anna	UK	EURO	Female
8	SGA	Pimenta Oliveira	Cristina	Brazil	AMRO	Female
9	SGA	Pitter	Christian	USA	AMRO	Male
10	SGA	Radeny	Samson	Kenya	AFRO	Male
11	SGA	Rojanapithayakorn	Wiwat	Thailand	SEARO	Male
12	SGB	Chan-Kam	Clement	Mauritius	AFRO	Male
13	SGB	Etchepare	Michel	France	EURO	Male
14	SGB	Khan	Adnan Ahmad	Pakistan	EMRO	Male
15	SGB	Lafort	Yves	Belgium	EURO	Male
16	SGB	Okonkwo	Prosper	Nigeria	AFRO	Male
17	SGB	Omeogu	Chinyere	Nigeria	AFRO	Female
18	SGB	Vogel	Ulrich Friedrich	Germany	EURO	Male

Total selected for the Support Group: 18

Malaria

1	Alternate	Etang	Josiane Desiree	Cameroon	AFRO	Female
2	Alternate	Reithinger	Richard	Germany	EURO	Male
3	Alternate	Tulloch	James	Australia	WPRO	Male
4	Alternate	Graves	Patricia	UK	EURO	Female
1	SGM	Ansah	Evelyn	Ghana	AFRO	Female
2	SGA	Moonasar	Devanand	South Africa	AFRO	Male
3	SGA	Palmer	Kevin	USA	AMRO	Male
4	SGA	Villegas	Leopoldo	Venezuela	AMRO	Male
5	SGA	Williams	Holly Ann	USA	AMRO	Female
6	SGB	Gao	Qi	China	WPRO	Male
7	SGB	Mathanga	Don Pascal	Malawi	AFRO	Male

Cumulative total selected for the Support Group: 25

No.	Capacity	Surname	First Name	Country of Primary Citizenship	WHO Region	Gender
Tuberculosis						
1	Permanent	Harries	Anthony David	UK	EURO	Male
2	Permanent	Bonsu	Frank Adae	Ghana	AFRO	Male
1	Alternate	Tadolini	Marina	Italy	EURO	Female
2	Alternate	Chiang	Chen- Yuan	China	WPRO	Male
3	Alternate	Itoda	Ichiro	Japan	WPRO	Male
4	Alternate	Bleumink	Marijke	Netherlands	EURO	Female
1	SGM	Korobitsyn	Alexei	Russia	EURO	Male
2	SGA	Akhtar	Muhammad	Pakistan	EMRO	Male
3	SGA	Maher	Dermot	UK	EURO	Male
4	SGA	Mohamed	Elsadig	Sudan	EMRO	Male
5	SGA	Scott	Cheryl	USA	AMRO	Female
6	SGA	Steenbergen	Ger	Netherlands	EURO	Male
7	SGB	Khatri	Gulshan Rai	India	SEARO	Male
8	SGB	Zaher	Hanem	Egypt	EMRO	Female

Cumulative total selected for the Support Group: 33

Cross-cutting						
1	Permanent	Blok	Lucie	Netherlands	EURO	Female
2	Permanent	Khodakevich	Lev	Russia	EURO	Male
3	Permanent	Nagai	Mari	Japan	WPRO	Female
4	Permanent	Surjadjaja	Claudia	Indonesia	SEARO	Female
5	Permanent	Tarantola	Daniel	France	EURO	Male
1	Alternate	Amofah	George	Ghana	AFRO	Male
2	Alternate	Andina	Michele	USA	AMRO	Female
3	Alternate	Dubbeldam	René	Netherlands	EURO	Male
4	Alternate	Eckert	Erin	USA	AMRO	Female
5	Alternate	Hafiz	Rehan	Pakistan	SEARO	Male
6	Alternate	Mistry	Neeraj	South Africa	AFRO	Male
7	Alternate	Rohde	Jon	USA	AMRO	Male
8	Alternate	Thapa	Poonam	Nepal	SEARO	Female
1	SGA	Afenyadu	Godwin	Ghana	AFRO	Male
2	SGA	Ahmad	Javed	Pakistan	EMRO	Male
3	SGA	Austen	Anne	UK	EURO	Female
4	SGA	Bakeera	Solome Kiribakka	Uganda	AFRO	Female
5	SGA	Bogg	Lennart	Sweden	EURO	Male
6	SGA	Burns	Katya	USA	AMRO	Female
7	SGA	Fransen-dos Santos	Raoul	Netherlands	EURO	Male
8	SGA	Gruber	Janet	UK	EURO	Female
9	SGA	Kireria	Alexander	Kenya	AFRO	Male
10	SGA	Kironde	Samson	Uganda	AFRO	Male
11	SGA	Klouda	Anthony David	Ireland	EURO	Male
12	SGA	Lisk	Franklyn	Sierra Leone	AFRO	Male

No.	Capacity	Surname	First Name	Country of Primary Citizenship	WHO Region	Gender
Cross-cutting						
13	SGA	Logie	Dorothy	UK	EURO	Female
14	SGA	Mauerstein-Bail	Mina	USA	AMRO	Female
15	SGA	McMinn Mitchell	Philip	UK	EURO	Male
16	SGA	Musowe	Vincent	Zambia	AFRO	Male
17	SGA	Njie	Abdul Bun Hatib	Gambia	AFRO	Male
18	SGA	Peters	Gordon	UK	EURO	Male
19	SGA	Purvis	George	USA	AMRO	Male
20	SGA	Putnam	Eliot	USA	AMRO	Male
21	SGA	Quigley	Paula	Ireland	EURO	Female
22	SGA	Rispel	Laititia	South Africa	AFRO	Female
23	SGA	Rocuts	Federico	Colombia	AMRO	Male
24	SGA	Sandstrom	Anita	Sweden	EURO	Female
25	SGA	Sardie	Marie	Australia	WPRO	Female
26	SGA	Sembajwe	Israel	Uganda	AFRO	Male
27	SGA	Spiegel	Paul	Canada	AMRO	Male
28	SGA	Tezcan	Eva	Germany	EURO	Female
29	SGA	Tyson	Stewart	UK	EURO	Male
30	SGA	Wheeler	Mark	UK	EURO	Male
31	SGA	White	Franklin	Canada	AMRO	Male
32	SGB	Alonso-Garbayo	Alvaro	Spain	EURO	Male
33	SGB	Azefor	Michael	Cameroon	AFRO	Male
34	SGB	Bernhart	Michael	USA	AMRO	Male
35	SGB	Cardona	Jose	Spain	EURO	Male
36	SGB	Frank	Odile	France	EURO	Female
37	SGB	Green	Cathy	UK	EURO	Female
38	SGB	Hawkes	Sarah	UK	EURO	Female
39	SGB	Key	Penelope	UK	EURO	Female
40	SGB	Lavollay	Michel	France	EURO	Male
41	SGB	Medina Sandino	Marta	Nicaragua	AMRO	Female
42	SGB	Milen	Anneli	Finland	EURO	Female
43	SGB	Newbury	Donne	South Africa	AFRO	Female
44	SGB	O'Dougherty	Sheila	USA	AMRO	Female
45	SGB	Oepen	Cornelius	Germany	EURO	Male
46	SGB	Singleton	Garth	UK	EURO	Male

Overall total: recommended TRP Support Group: 79

Key:	Recommended Permanent TRP Members commencing Round 10 (Permanent)
	Recommended Alternate TRP Members for Round 10 (Alternate)
	Recommended TRP Support Group Members (SGA and SGB)
	Invited to participate in R10 mentoring pilot from TRP Support Group A (SGM)