

Global Health EDCTP3 Joint Undertaking 3rd Stakeholders' Group meeting 7 November 2023 – Hybrid meeting Paris

Participants:

Marieke van der Werf (ECDC), Christine Nabiryo (Vice-Chair, PATH), Folu Olugbosi (TB Alliance), Christian Burri (Swiss TPH), Lydia Boudarene (EDCTP3), Neeraj Mistry (Chair, Future Africa Institute), Marieme Ba (Pharmalys), Ralf Sudbrak (Global AMR R&D Hubà, Lorna Leal Alexander (EMA), Hans Hagen (GloPidR, Charite), Willo Brock (FIND), Franck Cobelens (Univ of Amsterdam and European Global Health Research Institute Network), Saul Walker (CEPI), Greg Perry (IFPMA), Peggy Oti-Boateng (African Academy of Science), Francisco Saute (Trials of Excellence in Southern Africa), Joseph Okeibunor (WHO AFRO), Tammy Pillay on behalf of Subasree Srinivasan (GARDP), Constance Walyaro (International Society for Infectious Diseases (ISID)), Eloise Todd (Pandemic Action Network), Regina Mariam Kamoga (Community Health and Information Network), Pascale Ondo (ASLM), Silvia Garcia Perez (EDCTP3), Marta Tufet (GAVI), Aubrey Justin Cunningham (Imperial College, London)

Opening remarks, approval of the Agenda and Clarifications

Dr Neeraj Mistry, Chair of the group, opened the meeting, welcomed participants in person and online and recalled the need to embed science in a given context, which is at the core of the Stakeholders' Group (SG) objectives. He recalled the transition of leadership from the interim to permanent ED of Global Health EDCTP3 and the stressed he support to the new leadership from the SG. The agenda was approved and covered the update on Global Health EDCTP3 activities, discussion on the Rules of Procedures, Work Programme 2024, Survey results and an update on the three deliverables.

Updates on EDCTP3 activities

The new Executive Director of EDCTP3, Michael Makanga, was nominated and will take his functions on November 16th 2024. A governance officer was nominated (Antonia Forte) and will help and facilitate the interaction between the different governance bodies. All grant agreements have been signed and the evaluation of the single stage 2023 calls has been finalised. The two stage calls are still ongoing. The Work Programme 2024 is being designed. Clarification on UK beneficiaries were provided: the UK will join Horizon Europe as of next year (2024) and be eligible for funding. However, only provisional agreement had been secured at the time of the meeting.

Rules of procedures

Laurent Schell, legal officer, described the changes added to the Rules of Procedures since the last meeting to integrate the different requests and comments: addition of the core tasks of the SG, the clarification of serious misconduct and removal of members at the request of majority of members or the ED, the absence of provision for alternates but the possibility to invite observers is included, with the alternate discussion to be followed-up, the chair to report on all activities to all members, exceptional circumstance integrated to obligation of presence to meetings, agreement on year+1 meeting dates at the end of each year, the possibility to raise an issue to the ED and to the GB through the Chair and Vice-Chair, publication of meeting minutes on the EDCTP3 website and the addition of specific mention from the secretariat in case confidential information is circulated and cannot be shared with the rest of the institution represented. Requests from the group included the need for clarification of links and working relations between the SG and the Scientific.

With the changes suggested and the possibility to initiate further amendments, the Rules of Procedures have been provisionally adopted.

Work Programme 2024

The overarching points of the 2024 draft work programme was shared to the SG after the integration of inputs from the EDCTP Association and the European Commission. General feedback from the SG included: the need for better coordination and alignment and interoperability with other programmes, partners and funders, the need to align with ongoing policies and programmes (e.g WHO), to line-up the R&D pipeline with manufacturing, to strengthen community engagement, the need to put more emphasis on implementation research and regulatory pathways (e.g., scale up manufacturing, diagnostic development), social science and cross-cutting priorities. Requests to integrate topics such as diagnostics, Tuberculosis and Climate and Health were made, along with the possibility to consider funding mechanisms allowing the prioritisation of successful programmes or to have a portfolio approach. A harmonization across all call topics was recommended. Topic specific recommendations included the need to target specific HIV populations and a clearer scope for the call. The Malaria vaccine call required further clarification on the requirements, the inclusion of vulnerable groups and communities and recommendations to understand the long-term impact of the introduction of malaria vaccines into the control interventions mixes. The NTD call raised the issue of type of research expected for non-pharmaceutical interventions, the need to include house improvements and to include vaccines in the scope of the call. Recommendations for the AMR call included the need to include DR TB, to ensure the One Health and Health System approach is taken for the stewardship component, the need to include work on financial models to support sustainable production and rational use of products and classes and to acknowledge the cost-effectiveness approach and should consider the development of affordable monoclonal antibodies to address AMR. An increased focus of the digital health call was recommended, with the strengthening of the integration into national strategies and existing systems as well as the call to support open source systems and acknowledge the benefits and risks of AI.

Coordination between the Scientific Committee and the Stakeholders Group

John Gyapong, Chair of the Scientific Committee (SC), provided an overview of members and tasks of the SC (provision of independent scientific advice, focusing on science, bring consensus on topics, revise the SRIA, with a minimum of 2 meeting/year), stressed the need for coordination between the

two bodies and reiterated the mutual invites of chairs to respective groups, called for clarification on what the SC and SG look from each-other, for a streamlining of the two bodies' recommendations to the Governing Board by the secretariat and the need to find synergies and avoid overlaps between the two bodies. Following up SG meeting, a joint meeting on November 7th was organized.

Deliverables

The following deliverables were discussed:

Deliverable 2: update of the SRIA: a survey was circulated to assess the need to update the SRIA. Out of the replies received at the time of the meeting, 80% of participants recommended slight adjustments to the SRIA. No topic was deemed irrelevant, although it was deemed better prioritization according to the needs needed to be integrated. 70% of respondents were supportive of the development of a framework between the SRIA and the work programme.

Strategic recommendations included a better prioritization of topic calls and multi-annual planning; a more focused approach rather than the addition of new themes; identify initiatives which would work in synergy; develop specific site readiness support for African institutions to actively participate in all clinical stages of vaccine development and development of the EDCTP regional networks.

Funding recommendations included the possibility to include longer-term (co-)funding and portfolio funding, incentives to increase domestic resources for better sustainability, long-term investment in capacity development, and better alignment of the ambitions with the available funding.

Topic recommendations included the possible integration of health rights and equity, IPC/WASH, increased support to NCDs, STI, hemorrhagic fevers, One Health and AMR, tackle co-infections as a topic rather than under a specific disease. In addition, more attention to vaccine research, treatment and earlier stage research were recommended.

Regarding a potential Annual strategic Research and Innovation Agenda for 2025, overarching theme recommendations included health security, One health/AMR, Health rights and equity, Determinants of health, site readiness for vaccine testing in Africa and building on EDCTP2 projects and use of secondary data analysis. Disease prioritization included diarrhoeal diseases, lower respiratory tract infections, One Health and AMR, TB, Malaria and NTDs.

In terms of research environment strengthening, recommendations included the integration of clinical evaluations, including earlier stages, establishment of clinical trial units in low income countries, the strengthening of regional networks and the inclusion of postdoc fellowships an early/mid-career research and follow-on career grants. Emphasis was also put on impact modelling, operational research, pharmacovigilance and implementation research.

Regarding countermeasures to be supported, diagnostics with multiplex testing for key infectious diseases, treatments and preventive measures were recommended to be given more attention.

Deliverable 3: Synergies with other sectors. The first survey results recommended the increase of synergies with the regulatory sector, commercial sector, patients representatives, product development partnerships, major global health research funders (for joint investment in portfolio funding and large trials), technology and pharma industry, patients representatives and public/private partnerships. Requests were made to engage further communities/CSO/CBO, marginalized and disadvantaged communities.

Deliverable 1: The EDCTP Forum: the next EDCTP forum will take place Q1 or Q2 2025 in Rwanda and will be fully organized by EDCTP3. The SG will be strongly involved in its organisation. Lessons learnt from the previous ones for all will be shared and a strategy for the SG contribution will be decided then.

Next Steps

- 1) Finalisation of the survey
- 2) Finalisation of the Work Programme 2024
- 3) Review and finalization of the 1st draft of the annual report
- 4) Agreement on the calendar of the SG meetings in 2024