



UNDP/WORLD BANK/WHO SPECIAL PROGRAMME FOR
 RESEARCH AND TRAINING IN TROPICAL DISEASES (TDR)

Geneva, 25 July to 2 August 1986



REPORT OF THE ELEVENTH MEETING
 OF THE RESEARCH STRENGTHENING GROUP (RSG-11)

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1. INTRODUCTION

Dr Tore Godal, Director, UNDP/WORLD BANK/WHO Special Programme for Research and Training in Tropical Diseases (TDR), opened the eleventh meeting of TDR's Research Strengthening Group (RSG), held in Geneva, Switzerland, from 25 July to 2 August 1986. Dr Godal welcomed the participants and emphasized the importance of the in-depth review of RSG policies, strategies and mechanisms that was being conducted in 1986 by the Scientific and Technical Review Committee (STRC) established for this purpose. He also welcomed the members of the STRC who were present for joint discussions with the RSG. The review was being conducted ten years after the establishment of TDR at a time when the Programme was being critically examined with the intention of streamlining and simplifying its management. For these reasons, this was a vitally important meeting of the RSG.

Dr Godal emphasized that the in-depth review would require a careful analysis of both the successes and failures of the RSG Component and that the time was ripe for such an analysis to begin. In studies on chemotherapy, for example, blind screening had not led to the identification of effective drugs and had thus given way to better strategies, such as the use of drugs being used to treat other diseases, the modification of existing drugs or the rational development of drugs based on knowledge of basic parasite biology. Dr Godal pointed out that one important area for analysis would be to ascertain whether RSG-supported institutions had become more competitive in securing grants from the TDR Scientific Working Groups (SWGs). Since the first group of institutions had only recently completed their long-term period of support, however, the RSG programme was probably still too young for such a critical assessment to be made at this juncture.

Dr Godal endorsed the RSG's philosophy of encouraging all supported institutions to take a more active part in field research, an area which required close collaboration between the RSG and other TDR Components. Because of their opportunities for carrying out epidemiological and community-based studies in endemic areas, institutions in developing countries could take research to a point beyond that possible for institutions in developed countries. The primary purpose of the RSG programme was institutional strengthening of research related to the six diseases in the endemic countries and Dr Godal drew the RSG's attention to the need to have a long-term focus for the process of institutional strengthening. He also supported the major emphasis on training national professional research staff in endemic countries.

Dr Godal referred to the RSG's role in assuming responsibility for basic biomedical research, previously undertaken by the disestablished SWG on Biomedical Sciences (BIOS). In this context, he was concerned that confusion might arise between basic research and biotechnology, which in many respects represented opposite ends of the scientific research spectrum. He urged the RSG to define its priorities clearly so that it could complement SWG activities by giving strong support to both field and basic biomedical research in endemic countries.

2. MATTERS ARISING FROM THE SECRETARY'S REPORT

Dr C.P. Ramachandran, Secretary of the RSG, welcomed members of the RSG and the STRC to the meeting and introduced the two new RSG members. On behalf of the RSG he offered condolences to the family of Mr Eric Simha, interpreter, who had been a strong supporter of TDR until his recent death. Dr Ramachandran then presented his report, which was discussed and accepted by the RSG.

2.1 Progress of Activities Since the Tenth Meeting of the Research Strengthening Group (RSG-10)

1984 and 1985 were turbulent years for the RSG because of financial constraints and major changes in the management of TDR. 1986 was designated as a year of review not only for the RSG but for the Programme as a whole. Dr A.O. Lucas retired as Director of the Programme after a distinguished career, and Dr T. Godal, a leading scientist in leprosy research, was appointed TDR's new Director. Dr P. Ladouceur was appointed Responsible Officer, Programme Management, and Dr J.A. Hashmi was to join the RSG later in the year as Responsible Officer, Research Capability Strengthening.

The Secretary thanked the retiring members of the RSG, in particular the Chairman, Professor J. Kostrzewski, who had been a member of the RSG since 1978 and a strong guiding force as Chairman. The Secretary also thanked a number of TDR Secretariat members who had left or would shortly be leaving the Programme for their contribution to the work of the RSG.

RSG-10 reviewed reports of 17 institutions that had completed their long-term support and reports submitted by members of the RSG who had carried out site visits to further evaluate these institutions and their completed programmes.

Owing to financial constraints, no new major activities in the form of meetings, workshops or seminars were supported since RSG(10); in particular, management meetings (formerly an important feature of the RSG) were curtailed during this period.

From September 1985 to July 1986, the Research Strengthening Team (RST) approved 55 individual training grants, comprising 43 research training grants, 1 visiting scientist grant, 10 re-entry grants and 1 small grant. Attempts to attract additional outside funds for research training were unsuccessful. Nevertheless, the RSG continued to give highest priority to research training.

Four long-term support grants, two formal degree courses, one capital grant and three short-term group-training activities were approved for funding by RSG-10 and have since been implemented. In addition, two short-term group-learning activities, initiated by the BIOS SWG, one in Singapore and one in Mexico, were to be conducted in 1986.

During the course of the year, institution-strengthening activities at a national level were carried out in a flexible manner as opportunities arose; the RSG Secretariat was greatly assisted in this by colleagues in the WHO Regional Offices.

2.2 Matters Arising from the Eighth Scientific and Technical Advisory Committee (STAC-8), the Ninth Joint Coordinating Board [JCB(9)] and RSG-10

STAC-8 commended the progress achieved by TDR, in particular in the coordination of research on malaria vaccine development, in the trials of ivermectin for onchocerciasis control and in TDR's pioneering role in the application of the new tools of molecular biology. JCB(9) also expressed its pleasure at the progress being made by the Special Programme. After

considering the report of the Committee on Designated Funding, JCB(9) agreed that the new policy for the acceptance of designated funds should be instituted for a trial period of two years.

With regard to the STRC in-depth review of the Research Capability Strengthening Component, a brief meeting was held in conjunction with STAC-8 to discuss the RCS STRC review procedures. At this meeting the Secretariat presented a brief review paper entitled "Research Capability Strengthening Activities: Background and Perspectives", a copy of which was made available to RSG members.

In accordance with an RSG-10 recommendation, all new proposals for institution strengthening now followed the criteria and procedures for selection outlined by RSG-10. In addition, institutions that had completed five years of RSG support were evaluated in accordance with the criteria and procedures recommended by RSG-10 for this type of evaluation.

With reference to the core support being provided to the Tropical Diseases Research Centre (TDRC) in Ndola, Zambia, for epidemiology and clinical tropical medicine, RSG members carried out, at the suggestion of RSG-10, an in-depth review of the Centre's institutional activities as part of their evaluation of the African Region.

2.3 Budget Reallocations Approved Since RSG-10

2.3.1 840353 Pharmacology/Penang

National Drug Research Centre
Universiti Sains Malaysia
Minden, Penang, Malaysia

Development of Tropical Clinical Pharmacology

The Centre requested that US\$ 5000 awarded for visiting experts be transferred to the equipment budget line. Chairman, RSG and Director, TDR approved the request.

2.3.2 780563 Entomology/Jos

Department of Zoology
University of Jos
Jos, Nigeria

M.Sc. Course in Medical Entomology

RSG-10 had decided not to award any funds for this course in view of an earlier balance of US\$ 17 260 provided for visiting experts. The Dean was requested to allocate US\$ 12 000 of this amount for the recruitment of visiting experts to teach in the course and the remaining US\$ 5260 to the purchase of books and journals. These decisions were approved by Chairman, RSG and Director, TDR.

2.3.3 840333 Malaria/Amani

Amani Medical Research Centre
National Institute for Medical Research
Amani, United Republic of Tanzania

Tropical Diseases, mainly Malaria

The Director of the Centre and the Director General of the National Institute for Medical Research requested that US\$ 10 000 allocated to visiting

experts and US\$ 20 000 allocated to field research be reallocated to the purchase of supplies and equipment. In view of the need for the institution to promote field research activities, authorization of this reallocation was not granted.

2.3.4 790080 Jakarta

Department of Parasitology and General Pathology
Faculty of Medicine
University of Indonesia
Jakarta, Indonesia

Epidemiology, Immunology and Chemotherapy of Filarial Diseases

This grant had formally terminated in 1984 but, upon submission of the final financial report, the Head of the Department requested authorization to reallocate a balance of US\$ 7142 (initially allocated to the recruitment of administrative staff and a third visit by a consultant) to the renovation of the animal house and the purchase of consumable goods. The financial report was approved by TDR Programme Management and the proposed reallocation of funds was authorized by Chairman, RSG and Director, TDR.

2.3.5 840144 Re-Entry Grant

Ms Helen Ekeh
University of Ibadan
Ibadan, Nigeria

Ms Ekeh was studying "the impact of educational intervention in reducing disease transmission through changing behavioural patterns". In the final stages of her work, the data processing costs exceeded the allocated budget by US\$ 1000. As sufficient funds remained under the local transportation budget line to cover this expense, the Secretariat authorized the use of these funds for data processing costs.

2.3.6 820245 Vectors/Pondicherry

Vector Control Research Centre
Indian Council of Medical Research
Pondicherry, India

Biological Control of Vectors

Since the equipment to be purchased from the Trust Fund under the various budget sublines cost more than the amount allocated, the Director of the Centre requested that the shortfall be met from the expendable supplies budget line. The request was approved by the Secretariat.

2.3.7 840422 RIHES/Chiang Mai

Tropical Diseases Research Unit
Research Institute for Health Sciences (RIHES)
Chiang Mai University
Chiang Mai, Thailand

Cuts made by the RSG in the institution's proposed budget for 1986, as well as changes in the institution's plans since the original request for funds had been drawn up, prompted the Director to seek authorization to reallocate funds. He requested that US\$ 7872 be added to field research expenses and that US\$ 4010 be used to purchase minor equipment. For this purpose, he requested approval to transfer US\$ 5553 from the allotment for local salaries, US\$ 2588 from that for visiting experts, US\$ 2291 from

expendable supplies and US\$ 1450 from patient costs. Authorization of these transfers was granted by the Secretariat.

3. DISCUSSIONS WITH MEMBERS OF STAC'S SCIENTIFIC AND TECHNICAL REVIEW COMMITTEE ON RESEARCH CAPABILITY STRENGTHENING

During the course of the RSG-11 meeting, the members of the RCS STRC met with members of the RSG to discuss aspects of RSG activities. The members of the RCS STRC were:

Professor V. Ramalingaswami, Chairman
Professor D.W. Büttner
Professor C. Djerassi
Professor C. Larralde-Rangel
Professor Lie Kian Joe
Professor N.A. Mitchison.

A wide range of issues was raised at these joint meetings, including:

- the need for increased participation by women in TDR advisory committees;
- the importance of reinstating (curtailed because of financial constraints) the regional management meetings attended by directors of supported institutions and of national disease control programmes;
- the support mechanisms to be developed as the RSG enters Phase 2 of its research capability strengthening strategy;
- the recent site visits by members of the RSG and the importance of these institutional assessments in relation to the wider issues of policy and strategy;
- the crucial need for a satisfactory research career structure if research in the endemic countries is to prosper;
- the failure of the mechanism of internal evaluation to promote the necessary concept and routine practice of critical self-evaluation in supported research institutions;
- the need for each institution to be evaluated within its own context;
- the importance within TDR of increased interaction between the SWG Components and the Research Capability Strengthening Component;
- the need for TDR to communicate with other developmental agencies in order for funding policies to be coordinated and complementary, particularly now that the RSG is entering Phase 2 of its strategic plan;
- continued emphasis on the development of human resources (through training programmes) and on field research (through the promotion of epidemiological and sociological skills) as fundamental elements in carrying out the RSG strategic plan;
- the impact of research capability strengthening on disease control in the long term;

- the importance of defining the public health impact of the six TDR target diseases as a prerequisite to the establishment of appropriate disease control programmes;
- the importance placed by the Programme on the need for strong links between research institutions and national disease control programmes if any impact on the endemic diseases is to be achieved;
- the unique quality of the research capability strengthening support provided by the RSG, which was not available to institutions in the developing world from any other source;
- the appropriate level of support for the Research Capability Strengthening Component in relation to the total TDR budget.

4. IN-DEPTH REPORT OF THE RSG ON THE ACTIVITIES OF THE RESEARCH CAPABILITY STRENGTHENING COMPONENT DURING THE PERIOD 1982 TO 1986

The in-depth report prepared by the Secretariat on the research capability strengthening activities of the RSG during the period 1982 to 1986 was discussed in detail. Both the Chairman of the RSG and the Chairman of the STRC expressed their appreciation of the comprehensive nature of the in-depth report and commended the Secretariat on its hard work and on the excellence of its report.

A number of issues were raised by RSG members during discussion of the report, the most important of which was the need for explicit policies and mechanisms to guide the practices of the RSG as it enters Phase 2 of its strategic plan. The Secretariat was instructed by the RSG to prepare a document on proposed policies and mechanisms for Phase 2 for consideration by RSG-12 in 1987. In particular, the Secretariat was asked to consider the role of already strengthened institutions in their new task of helping to strengthen weaker institutions in their region, to devise mechanisms for consolidating the strength of the already strengthened institutions, and to establish new policies and mechanisms for the creation of networks of institutions. The RSG asked that the new policies and mechanisms be explicit but flexible and include separate roles for (a) established institutions, whether or not previously strengthened by TDR, (b) institutions being strengthened by TDR, and (c) weaker institutions with potential for strengthening, and that these policies and mechanisms provide links and networks (a) between strong institutions for the promotion of excellence and collaboration in scientific research, (b) for the principal benefit of weaker institutions and (c) for training programmes.

The question of umbrella grants and other possible new granting mechanisms was discussed at length under this item and also during the discussion of biomedical sciences. It was agreed that no change should be made to the in-depth report with regard to the current practices of the RSG, but that certain changes would need to be incorporated in this document in the future, principally to take into account granting mechanisms previously practised by BIOS. Recommendations to this effect are found in section 6 of this report, Biomedical Sciences and RSG Activities.

In order to incorporate into the RSG the institution-strengthening component developed by BIOS and the promotion of basic biomedical sciences as matters of priority in addition to epidemiological field research, it was important that these new aspects of the RSG's responsibility be built into the RSG's policies and procedures. To this end, the RSG suggested that section 1.3 (Basic Biomedical Sciences Activities within RSG/RCS Plans) of the draft in-depth report be placed before section 1.2 (Research Capability Strengthening as a Holistic Approach).

In the conclusions concerning the grant to the Faculty of Tropical Medicine, Mahidol University, Bangkok, Thailand (page 90 of the draft in-depth report), it was agreed to add the following comment: "Increased collaboration between RSG-supported institutions at Mahidol University is highly desirable and now that the climate for closer collaboration has been established, it is vital that trans-disease collaboration flourish in the future, for the benefit of the whole region".

The differences in the philosophy and working procedures, particularly in methods of evaluation, of the RSG and those of the SWGs were fundamental to a proper understanding of the RSG. Members endorsed the paper prepared by the Secretariat on this issue, entitled "Evaluation of Research Capability Strengthening (RCS)" [document TDR/RSG(9)/WP/84.3], and requested that it be brought to the particular attention of the STRC and STAC.

The RSG suggested that the commentary on the in-depth report and the recommendations made to the Secretariat during this discussion and the discussion of biomedical sciences be drawn to the attention of the STRC and STAC by annexing it to the in-depth report.

5. EVALUATION OF INSTITUTIONS THAT HAVE BEEN STRENGTHENED: RECOMMENDATIONS ON FUTURE POLICIES, STRATEGIES AND MECHANISMS

RSG teams made site visits to Africa, Asia and Latin America to review the institutions that had completed long-term strengthening grants. The site visit reports were presented and reviewed in detail. The following five national institutions were identified as being able to contribute to Phase 2 of the RSG's overall strategic plan:

- The Clinical Research Centre, Kenya Medical Research Institute, Nairobi, Kenya;
- The Department of Pharmacology and Therapeutics, College of Medicine, University of Ibadan, Ibadan, Nigeria;
- The Institute for Medical Research, Kuala Lumpur, Malaysia;
- Regional Research and Training Centre for Applied Malacology, Faculty of Science, Mahidol University, Bangkok, Thailand;
- Instituto Oswaldo Cruz (FIOCRUZ), Fundação Oswaldo Cruz, Rio de Janeiro, Brazil.

After careful discussion of the lessons gleaned during the first ten years of the RSG's work, the following additions and modifications to existing policies and strategies were accepted.

5.1 With regard to the selection of institutions for long-term strengthening, the following criteria have shown a positive correlation with eventual successful strengthening:

- 5.1.1 national and institutional commitment to research;
- 5.1.2 integration of the institution's programme into national health priorities;
- 5.1.3 the leadership capability and innovative imagination of the project leader;
- 5.1.4 the continued involvement of the Regional Office in the development of the programme.

5.2 Staff training was found to be a prerequisite for the success of institution strengthening and the following would further facilitate this aspect:

5.2.1 Selection of the staff for further training should be done during the first few, ideally during the first and second, years of strengthening, so that the additional expertise needed would be available before the end of long-term support. This was a characteristic of those institution-strengthening programmes judged to be fully successful by the RSG in its recent review.

5.2.2 When appropriate institutions already strengthened by the RSG can be identified for doctoral-level training, they should be the first choice for such training, especially in Phase 2.

5.2.3 The policy of requiring Ph.D. candidates to carry out their data collection and field work in their home institutions was highly commended and its importance emphasized.

5.3 The concept of self-evaluation, including continuous reassessment of research priorities, goals and achievements, is an integral part of any successful strengthening programme when the concept is used as a management tool. However, the strategies of "internal evaluation", as originally envisaged, could not be implemented in most instances. A new strategy must be devised which incorporates data gathering for effective research management, the involvement of scientists, especially junior scientists, actively engaged in research in addition to research administrators, and ongoing training in research management for all scientists involved, especially project leaders.

5.4 The outcome of the strengthening process can only be fully assessed by evaluating the scientific output and continued research activities of the strengthened institutions five and ten years after the initial strengthening is over. The SWGs should be actively involved in this.

5.5 The RSG should formulate strategies for the active participation of the strengthened institutions in Phase 2, and the Secretariat's specific proposals for this will be considered by RSG-12.

5.6 The RSG should formulate policies and strategies on how to continue to assist institutions that have major weaknesses after five years of strengthening. This should also be part of Phase 2 strategies.

5.7 The RSG reaffirmed the priority to be given to epidemiological and social and economic research and training as outlined in the Report of the Task Force on Epidemiological Research Training (TDR/RSG(10)/85.3, pp. 6-7). It was recognized that adequate development would require a continuous effort over many years and depended upon the existing close working relationships of the Epidemiology (EPD) and Social and Economic Research (SER) SWGs with the RSG.

5.8 The question of ethical clearance and the mechanisms adopted to ensure proper scrutiny of proposals submitted to the RSG for funding were discussed. The RSG emphasized the importance of prior clearance of proposals and the need for standard procedures to ensure that the ethical aspects of all proposals and renewals were examined.

The RSG recommended that the Secretariat prepare for consideration by RSG-12 a statement on how the system of ethical clearances at institutional, national and WHO levels works with regard to RSG proposals and renewals.

5.9 The research output on Chagas' disease which has emerged from investigators in Latin America has emphasized the contributions that can be made by researchers in endemic countries. The RSG had in the last ten years rightly strengthened several institutions in Chagas' disease research. The RSG now

felt that the expertise of Latin American scientists should be harnessed for productive research on the other target diseases. The RSG affirmed that it would favourably consider strengthening institutions in Latin America to undertake research on diseases other than Chagas' disease, and the attention of Director, TDR was drawn to this matter.

6. BIOMEDICAL SCIENCES AND RSG ACTIVITIES

The distinction made by Director, TDR between basic biomedical sciences, including the powerful new techniques of biotechnology, and industrial uses of biotechnology was discussed by the RSG. It was agreed that the promotion of basic biomedical sciences and relevant biotechnology, as recommended by RSG-10, was essential to the scientific research capability of scientists in developing countries and that the transfer of such technology should be achieved in at least some of the institutions being strengthened by the RSG. It was emphasized that the RSG had a role to play in the generation and transfer of information in this rapidly expanding field. In contrast, it was agreed that the RSG had no role to play in industrial uses of biotechnology.

To the comments on the transfer of relevant technologies given in the Report of RSG-10, pages 7-8, subsection 5.1.3, should be added a third main line of activity, namely:

- (iii) special attention to the provision of training grants to scientists from endemic countries, especially from strengthened institutions, to improve their capabilities in the advancing area of basic biomedical sciences.

The RSG agreed upon the need for flexible granting mechanisms to cover needs arising from the promotion of basic biomedical sciences. These mechanisms had been set out on page 8 of the Report of RSG-10. At the same time, the RSG agreed that it was better to incorporate the new concepts as far as possible into the RSG's established mechanisms, which already allowed for considerable flexibility, rather than to create new terms and categories unnecessarily. A good example was the "umbrella grant", a flexible grant designed to cover the collaborative needs of two or more groups of scientists working for a common purpose, which, it was agreed, could be incorporated into the already established, flexible granting mechanisms. The term "umbrella grant" would therefore be formally dropped, but the mechanism would remain.

Taking into account the discussions on activities in the biomedical sciences and the Report of RSG-10 on this subject, the RSG agreed that the mechanisms for supporting these activities should be fully incorporated into the research capability strengthening institutional support mechanisms for research and training. In this way BIOS activities will become an integral part of the RSG rather than an external graft. In this context, the RSG recommended the following additional mechanisms for research capability strengthening:

Institution Grants

No institution will be selected for support unless its work relates to the understanding and control of TDR's target diseases and unless it has an established working relationship with national disease control programmes. Moreover, the institution should aim eventually to establish a link with an effective epidemiological and field programme for the implementation of its scientific research results.

Criteria for selection will include: a balance in geographical locations, disciplines and disease interests of the research groups; the existence of a career structure and career opportunities for the scientists

involved; and national and regional commitments to expand research related to one or more of the six diseases of TDR, including research in basic biomedical sciences and relevant biotechnology.

Short-Term Support Grants

In order to meet the needs of established institutions, especially in relation to basic biomedical sciences, a short-term support grant could be awarded to provide initial support while another type of proposal is being prepared, or to accommodate special cases that do not fit into the other categories of institution grants.

Long-Term Support Grants

Selected institutions which have been satisfactorily strengthened will be encouraged to reapply for support for their further development and for long-term strengthening of collaborative programmes and cooperation with other institutions in the region, particularly in the area of training. Such selected institutions will include those capable of high-quality research which would benefit from further strengthening in appropriate disciplines, including the biomedical sciences, the development of new biotechnological tools for disease control, epidemiology, social sciences and field research.

Applications for institution strengthening to support projects in basic biomedical sciences related to the six endemic diseases are welcomed by the RSG. Such applications:

- will be considered only in the context of institution strengthening;
- will initially be accepted from RSG-strengthened or other strong institutions in the endemic countries;
- should have a trans-disease orientation;
- should be peer-reviewed for their scientific content;
- will be funded on a competitive basis, maintaining regional balances.

The Secretariat, in consultation with Director, TDR will formulate these policies for interim implementation in the next year, and there will be a full discussion and policy decision by RSG-12.

In addition, the RSG approved a total sum of US\$ 30 000 for the costs of publishing and producing the two manuals resulting from the RSG-supported workshops held in Mexico and Singapore.

7. BUDGETARY MATTERS

The RSG discussed the budget for the 1986-87 biennium and the 1986 budget, both of which were presented by the Secretary.

PROGRAMME AREA III, RESEARCH CAPABILITY STRENGTHENING: PROPOSED BUDGET FOR THE 1986-87 BIENNIUM (US\$ 000)

	JCB-APPROVED BUDGET	APPROVED WORKING BUDGET
Training Activities	6 570	5 500
Institutional Activities	4 935	4 130
TOTAL	11 505	9 630

The working budget, which is nearly US\$ 2 million less than the budget approved by the JCB, is based on the Secretariat's assessment of funds likely to be available to TDR during the biennium after suitable adjustment at the start of the biennium. The working budget for 1986 amounts to US\$ 4 815 000, with US\$ 2 750 000 allocated for training and US\$ 2 065 000 for institutional activities. After estimating forward commitments until the end of 1986, the Secretary indicated that there would be, as of 7 July 1986, an estimated balance of US\$ 1 820 676 for institution-strengthening grants and of US\$ 1 033 044 for training. RSG-11 recommended US\$ 1 802 500 for renewal and new institutional grants and US\$ 284 400 for courses. There would thus be balances under the two budget lines to be carried over to 1987. The Secretary explained that a further readjustment to the budget was planned later in the year and could lead to a slight increase in funds for the RSG in 1987. The RSG expressed its satisfaction with this in view of the future activities in networking and strengthening in biomedical sciences, which will require additional funding.

The RSG further discussed other activities for which additional funds would be needed:

- Management workshops for leaders of supported institutions and responsible officers of national disease control services should be started up again. Their value in promoting networking and emphasizing the relevance of research to disease control was reiterated.
- Promotional activities should be re-established and special emphasis given on a regional and geographical basis to areas where the impact of institution strengthening continued to lag. Both present and past RSG members should be involved with the Secretariat in promotional and site visits whenever possible.

8. CONSIDERATION OF PROPOSALS FOR RENEWAL

8.1 Renewal of Long-Term Support Grants

8.1.1 800558 Ndola Core Support

Tropical Diseases Research Centre (TDRC)
Ndola, Zambia

Epidemiology and Clinical Tropical Medicine

Recommended: US\$ 168 000 for the seventh year of work
as a Zambian institution.

The recommendations, including budgetary recommendations, of the RSG site visiting team to Ndola were accepted by the RSG and transmitted to the Director of the TDRC. The Liverpool and London schools of tropical medicine should be asked to provide information on their strategic plans for the TDRC with regard to personnel, timing of visits, finances and training. The search for alternative sources of funds for the research activities of the TDRC should continue in order to supplement the considerable efforts of the Government and to offset decreasing TDR funds. Future requests to the RSG should follow the usual practice of specifying the requirements for visiting experts in terms of number of experts, purpose of visit, timing of visit, duration of stay and national counterpart.

8.1.2 810009 Pathobiology/Ethiopia

Institute of Pathobiology
Addis Ababa University
Addis Ababa, Ethiopia

Epidemiology of Schistosomiasis

Recommended: US\$ 28 000 for the fifth and final year of the grant.

The institution's research activities have progressed well under difficult conditions. However, weaknesses in epidemiology and social and behavioural research are still apparent and require the close attention of the Director of the Institute.

8.1.3 810204 National Institute/Ethiopia

National Research Institute of Health
Addis Ababa, Ethiopia

Epidemiology, Parasitology and Entomology

Recommended: US\$ 24 000 for the fifth and final year of the grant.

Progress in the work of the Institute, from purely diagnostic work to the inclusion of research, has been successfully achieved through individual projects. However, the research activities should be more focused.

8.1.4 820077 Primates/Kenya

Institute of Primate Research
National Museums of Kenya
Karen, Kenya

Studies on Tropical Diseases, Using Primate Models

Recommended: US\$ 80 000 for the fourth year of the grant.

The RSG was impressed by the careful and precise preparation of the progress report and proposal for renewal, which clearly demonstrated progress in research on schistosomiasis and leishmaniasis. Take over of local salaries by the institution has been slow and should be accelerated.

8.1.5 810168 OCCGE/Pierre Richet

Organisation de Coordination et de Coopération pour la Lutte contre les
Grandes Endémies (OCCGE)
Institut de Recherches sur la Trypanosomiase et l'Onchocercose
Pierre Richet (formerly, the IRTO)
Bouaké, Côte d'Ivoire

Human Trypanosomiasis and Onchocerciasis

Recommended: US\$ 49 000 for the third year of the grant.

Progress has been made in local staff training through peer support from more experienced expatriate scientists, but some difficulties remain with one of the research projects. Future career development prospects and the assumption of salaries by the OCCGE require further clarification since it will not be possible for the RSG to continue to fund all salaries in the future. The Secretary General, OCCGE should be informed of the necessity for the take over of salaries in this institution and of those associated with the

grant to the Institut Marchoux (see item 8.1.6). The RSG emphasized that the schedule of agreed take over of salaries by the OCCGE has been postponed by only one year.

8.1.6 840402 OCCGE/Marchoux

Organisation de Coordination et de Coopération pour la Lutte contre les
Grandes Endémies (OCCGE)
Institut Marchoux
Bamako, Mali

Leprosy

Recommended: US\$ 28 000 for the third year of the grant.

The work in leprosy, particularly experimental work in the laboratory, is progressing well. There should be greater emphasis on field research and collaboration with the leprosy control service, especially after the recently recruited African epidemiologist returns from training. However, career development prospects and ethical considerations for research activities need clarification.

8.1.7 840351 Trypanosomiasis/Bouaké

Centre universitaire de Formation en Entomologie médicale et
vétérinaire (CEMV)
Faculté de Sciences, Université d'Abidjan
Bouaké, Côte d'Ivoire

Human Trypanosomiasis in Côte d'Ivoire

Recommended: US\$ 66 000 for a second year of support.

The entomology training programme is proceeding well. The associated research projects which are being supported have potential but should be reduced in number in order to concentrate efforts on the most productive areas.

8.1.8 840333 Malaria/Amani

Amani Medical Research Centre
National Institute for Medical Research
Amani, United Republic of Tanzania

Tropical Diseases, mainly Malaria

Recommended: US\$ 98 000 for the second year of the grant.

A satisfactory start has been made in the three projects proposed but methodological problems in all three, and ethical problems in one, still have to be solved.

8.1.9 840354 Leishmaniasis/Sudan

Tropical Medicine Research Institute and Immunology Training and
Research Centre
Medical Research Council
Khartoum, Sudan

Multidisciplinary Research on Leishmaniasis

Recommended: Funding deferred.

Progress has been slow as a result of the unstable political situation, drought and famine in the country and the continued emigration of scientists into the Gulf states. Hence, no request for renewal was received. Further funding is therefore deferred, but the group is allowed to use in 1987 funds remaining from the first two years of support. A detailed and comprehensive progress report will be required to justify future support.

8.1.10 780488 Lima

Instituto de Medicina Tropical "Alexander von Humboldt"
Universidad Peruana Cayetano Heredia
Lima, Peru

Epidemiology of Tropical Diseases with Special Reference to
Leishmaniasis, Leprosy and Chagas' Disease

Recommended: US\$ 38 600 for the third and final year of extended
support.

Progress has been very encouraging and continuation of the research beyond the period of RSG support has been assured through funding from a number of sources. Results should be submitted for publication. Work on too many projects could diffuse the efforts of a skilled and dedicated group of young research workers, many of whom were trained with research training grants from TDR.

8.1.11 790162 Pedro Kourí/Havana

Instituto de Medicina Tropical "Pedro Kourí" (IPK)
Havana, Cuba

Tropical Diseases

Recommended: US\$ 30 000 for the third and final year of the extended
grant.

This very deserving and successful institution has made good use of the extended period of support to strengthen some of the weaker parts of its research programme. Staff training should continue.

8.1.12 820290 CENETROP/Bolivia

Centro Nacional de Enfermedades Tropicales (CENETROP)
Santa Cruz de la Sierra, Bolivia

Field Research in Chagas' Disease, Leishmaniasis and Leprosy

Recommended: US\$ 39 000 for the fifth and final year of support.

This institution has made satisfactory progress and maintained a high standard of research, despite difficulties. Support for local salaries was exceptionally continued into the final year of support. Possible mechanisms for continued support were discussed and it was agreed that a site visit was required to gather more information, discuss the issues with all parties involved and make recommendations.

8.1.13 820231 Malaria/Cali

Department of Microbiology
Faculty of Health
Universidad del Valle
Cali, Colombia

Malaria Field Research

Recommended: US\$ 38 000 for the fifth and final year of the grant.

Progress has been very encouraging. The institution has established many new collaborative and funding links to assist in supporting the continuation of its research programme once RSG support has been phased out.

8.1.14 840336 CIDEIM/Colombia

Centro Internacional de Investigaciones Médicas (CIDEIM)
Cali, Colombia

Multidisciplinary Research on Tegumentary Leishmaniasis

Recommended: US\$ 91 000 for the second year of the grant.

The work produced by the scientists in this institution was considered to be of very high quality. The request approved by RSG(10) for major funding in the third year had now been changed to follow the usual decreasing scale of funding. The work was also supported by funds from a 1985 BIOS grant. Funding needed for a postdoctoral fellow was provided by transferring the remaining funds from the BIOS grant to the project's visiting experts budget line. Since a high level of funding was accepted for the second year, a ceiling of US\$ 75 000 for the third year was set by the RSG.

8.1.15 840331 CAICET/Venezuela

Centro Amazónico para Investigación y Control
de Enfermedades Tropicales "Simón Bolívar" (CAICET)
Caracas, Venezuela

Research on Malaria and Onchocerciasis

Recommended: Funding for 1987 deferred to 1988 and remaining 1986 funds to be used in 1986-87.

The RSG accepted the proposal to defer funding of the second year of the grant to 1988 and to use the 1986 funds to cover activities in 1986-87 under a modified research plan.

8.1.16 820295 Costa Rica

Escuela de Medicina Veterinaria
Universidad Nacional
Heredia, Costa Rica

Leishmaniasis and Chagas' Disease

Recommended: Funding deferred for six months, then a maximum of US\$ 19 500 approved but contingent upon a satisfactory progress report.

Applied research has been strengthened and links with the Ministry of Health improved, but the condition imposed by RSG-10 for further support, i.e. that the group demonstrate new research activity, has not been met.

Funding for the fifth and final year of the grant was deferred for six months and made contingent upon a site visit by the Secretariat. If a satisfactory progress report containing a clear description of future plans for the group was provided at the end of this period, the Secretariat was authorized to provide at its discretion up to a maximum of US\$ 19 500.

8.1.17 840332 Honduras

Universidad Nacional Autónoma de Honduras
Department of Microbiology
Tegucigalpa, Honduras

Epidemiology and Immunoparasitology of Malaria and Chagas' Disease

Recommended: US\$ 72 000 for the third year of the grant.

The institution's progress in research on malaria and Chagas' disease was encouraging. New links with outside institutions had been established and links with the Ministry of Health had been further strengthened. The group should clarify the newly established link with the national leprosy control programme.

8.1.18 820599 Chagas' Disease/Chile

Chagas Research Group
Faculty of Medicine
Universidad de Chile
Santiago, Chile

Clinical and Basic Biology of Chagas' Disease

Recommended: US\$ 64 000 for the fourth year of the grant.

Work on the biology of Trypanosoma cruzi was progressing, although it was considered that the group's potential was not being fully realized. Lack of an epidemiological framework for the study remains a serious deficiency and the need for a staff member trained in epidemiology has become a matter of urgency.

8.1.19 840362 INDIECH/Argentina

Instituto Nacional de Diagnóstico e Investigación de la Enfermedad de
Chagas "Dr Mario Fatala Chaben" (INDIECH)
Buenos Aires, Argentina

Integrated Control of Chagas' Disease and Diagnosis of Malaria and
Leishmaniasis

Recommended: US\$ 51 000 for the third year of the grant.

The institution's research activities, which have progressed from laboratory to field studies, was highly commended, as were its current studies on the use of a primary health care approach for the control of Chagas' disease.

8.1.20 780624 Malaria/Viet Nam

Institute of Malariology, Parasitology and Entomology (IMPE)
Hanoi, Viet Nam

Epidemiology, Pathophysiology, Chemotherapy and Entomology of Malaria

Recommended: US\$ 63 000 for the third and final year of an extension
of a five-year long-term support grant.

Good progress had been made in the various malaria projects of the programme. It was considered that the group was now in a position to compete successfully for funding from the SWGs, although there were still weaknesses in the preparation of reports and documentation of proposals. Further technical assistance would be required from WHO, but once the extended grant had ended, the prospects for continuing the quality of work on malaria were considered to be good.

8.1.21 820067 Burma

Department of Medical Research
Ministry of Health
Rangoon, Burma

Malaria: Clinical, Epidemiological and Entomological Studies

Recommended: US\$ 27 000 for the fifth and final year of the grant.

Satisfactory progress had been made in a number of projects. However, research carried out by the institution should be more selective. The RSG expressed serious concern that no attempt had been made to remedy the deficiencies pointed out in previous years and emphasized the need for site visits.

8.1.22 810313 Filaria/Calicut

Regional Filaria Training and Research Centre
National Institute of Communicable Diseases
Calicut, India

Filariasis

Recommended: US\$ 20 000 for the fifth and final year of the grant.

The Centre's main problem has been a shortage of staff, which has prevented the establishment of a comprehensive training programme. Good progress has been made in the epidemiological studies, but outside assistance will be required for analysis of the results.

8.1.23 820245 Vectors/Pondicherry

Vector Control Research Centre
Indian Council of Medical Research
Pondicherry, India

Biological Control of Vectors

Recommended: US\$ 25 000 for the fifth and final year of the grant.

This institution has a well-developed research base and has made good use of its long-term support grant, although training opportunities could have been more fully exploited. The progress and quality of the research projects were considered to be very good and the institution has been able to attract funding from other sources.

8.1.24 830071 Malaria/Sri Lanka

Department of Parasitology
Faculty of Medicine
University of Colombo
Colombo, Sri Lanka

Malaria Research Unit

Recommended: US\$ 78 500 for the fourth year of the grant.

The RSG was pleased with the continued excellence of the work carried out by this institution and substantial achievements had been made over the past twelve months.

8.1.25 830319 Field Research/Surabaya

Health Services Research and Development Centre
Ministry of Health
Surabaya, Indonesia

Field Research in Malaria and Leprosy

Recommended: Funding suspended.

A site visit to examine this project was carried out, as requested by RSG-10. Subsequently, a progress report and renewal request were received. The RSG was not convinced that improvements had been made in the coordination of the project or in collaboration between the different groups involved in it. Training opportunities available through the RSG were not being utilized. Progress with the study was not considered satisfactory. Therefore, despite the importance the RSG attaches to research on health services, it was decided not to continue the project in its present form. The RSG would, however, be prepared to accept a new proposal of more limited scope if the inherent difficulties in conducting the study could be resolved.

8.1.26 840353 Pharmacology/Penang

National Drug Research Centre
Universiti Sains Malaysia
Minden, Penang, Malaysia

Development of Tropical Clinical Pharmacology

Recommended: US\$ 120 000 for the third year of the grant.

The quality of the work and staff of this institution continued to be very high. Local support from the university was strong, but the RSG felt that the take over of local salaries should be accelerated.

8.1.27 840422 RIHES/Chiang Mai

Tropical Diseases Research Unit
Research Institute for Health Sciences (RIHES)
Chiang Mai University
Chiang Mai, Thailand

Tropical Diseases Research Unit

Recommended: US\$ 120 900 for the second year of the grant.

During the first year of support, progress in most aspects of this study had been very encouraging and the RSG commended the group on its exemplary renewal proposal. There was still a need for more advanced training in epidemiology and the social sciences, however, and attention needed to be given to the mechanisms designed to ensure collaboration between the different disciplines involved in the study. The RSG hoped that further support for the group would be obtained from RSG-strengthened institutions in Bangkok.

8.2 Renewal of Degree Courses

8.2.1 780563 Entomology/Jos

Department of Zoology
University of Jos
Jos, Nigeria

M.Sc. Course in Medical Entomology

Recommended: US\$ 42 000 for the third year of the grant.

The concern expressed by RSG-10 was cleared up by the site visit. The course's content and management are satisfactory and it continues to meet an important national and regional need. Emphasis on staff training in disciplines presently unavailable in the faculty is to be encouraged. A further evaluation of the course will be sought from one of the visiting entomologists scheduled to teach in the course during the coming year.

8.2.2 840363 Entomology/Panama

Faculty of Medicine
Universidad de Panamá
Panama, Republic of Panama

M.Sc. Course in Medical Entomology

Recommended: US\$ 45 760 for the third year of the grant.

The course was considered to be going very well but staff development should be accelerated. The RSG was very pleased with the support provided by the Pan American Health Organization/Regional Office for the Americas (PAHO/AMRO).

8.2.3 840376 Entomology/Pondicherry

Vector Control Research Centre
Indian Council of Medical Research
Pondicherry, India

M.Sc. Course in Medical Entomology

Recommended: US\$ 55 000 for the second year of the grant.

There had been some delays in starting the course but it was now reported to be under way. The content of the two-year course was considered to be of high quality.

8.2.4 820249 Epidemiology/Nairobi

Department of Community Health
Faculty of Medicine
University of Nairobi
Nairobi, Kenya

Course Leading to a Master's Degree in Public Health

Recommended: Carry-over of 1986 funds to 1987 approved.

This course is progressing well. The RSG expressed concern about the small number of student research projects on tropical diseases and expected that this would increase in the future. Greater use of the extensive professional resources available in Nairobi for teaching the course should be encouraged. The request to carry over unused 1986 funds to 1987 was approved and further clarification was to be requested during the forthcoming Secretariat visit to Nairobi. A renewal request would be expected in 1987 for a fourth year of support in 1988.

8.2.5 830334 Epidemiology/Dar es Salaam

Muhimbili Medical Centre
University of Dar es Salaam
Dar es Salaam, United Republic of Tanzania

M.Sc. Course in Tropical Disease Research and Control

Recommended: US\$ 35 000 for the second year of support.

The RSG was pleased to note that this course had now started. Staff development and increased regional collaboration should be emphasized at this early stage. Close follow-up of the progress of the course by the Secretariat is essential. Second-year funding was reduced because of the late start of the course, but the RSG would welcome a renewal request next year for a full third year of funding in 1988.

8.2.6 840337 Epidemiology/Rio de Janeiro

Fundação Oswaldo Cruz (FIOCRUZ)
Escola Nacional de Saúde Pública
Rio de Janeiro, Brazil

M.Sc. Course in Epidemiology

Recommended: US\$ 41 500 for the second year of support.

This course had started with a well-planned programme, and the RSG gave its full support to the project.

8.2.7 840355 Economics/Manila

School of Economics
University of the Philippines
Quezon City, Philippines

Master's Course in Health Economics

Recommended: US\$ 35 200 for the second year of support.

This course, or more strictly speaking, this option within an established degree programme, had started successfully, although with a limited number of

students. The course was considered to be an innovative one which should eventually attract wide interest.

9. CONSIDERATION OF NEW PROPOSALS

9.1 New Long-Term Support Grant Recommended for Approval

9.1.1 840480 Parasitic Diseases/China

Institute of Parasitic Diseases Control and Research
Hubei Academy of Medical Sciences
Wuhan, Hubei Province, People's Republic of China

Parasitology and Entomology

Recommended: US\$ 103 500 for the first year of the grant.

The RSG supported the proposal for the first year of a long-term grant. The need for further technical assistance from the Secretariat in the conduct of the project was emphasized.

9.2 New Capital Grant Recommended for Approval

9.2.1 840340 Guangxi/China

Guangxi (Zhuang Autonomous Region) Institute of Parasitic Diseases Control (GIPDC)
Nanning, Guangxi, People's Republic of China

Field Research on Malaria, Filariasis and Schistosomiasis

Recommended: US\$ 107 000 for a capital grant.

The RSG approved this request for a capital grant to initiate studies on malaria, filariasis and schistosomiasis. It was noted that the group was also being supported in immunology through bilateral cooperation with the Queensland Institute of Medical Research in Australia.

9.3 New Short-Term Support Grants Recommended for Approval

9.3.1 860219 Malaria/Mexico

Centro de Investigación de Paludismo
Tapachula, Chiapas, Mexico

Dynamics of Malaria Transmission with Emphasis on Vector Biology

Recommended: US\$ 88 000 initially for a one-year short-term grant.

The RSG welcomed this proposal on malaria and vector biology from Latin America. It was relevant to local needs and had the full support of the Ministry of Health. However, the RSG recommended a more modest start, concentrating on the vector biology aspects, while a staff training programme was being initiated. In order to allow time for this training programme to put the institution in a favourable position for requesting longer overall support from the Programme, a short-term grant was recommended, initially for one year. In 1987, the RSG would consider either a one-year extension of this grant or the start of a long-term support grant, whichever was judged at that time to be the more appropriate.

9.3.2 860237 Biotechnology/Bangkok

Department of Biochemistry
Faculty of Science
Mahidol University
Bangkok, Thailand

New Biotechnological Methods for the Study of Parasites

Recommended: US\$ 39 500 for the first year of a short-term support grant.

This project was originally submitted to and approved by the BIOS SWG. It was accepted by RSG-10 as an ongoing responsibility and was now funded as the first year of a short-term support grant. The project was considered to be progressing well. In 1987, the principal investigator would have the option of applying for an institution-strengthening grant or for the second year of a short-term support grant within the three-year cycle originally planned.

9.4 New Small Grant Recommended for Approval

9.4.1 860033 Social Sciences/Quezon City

College of Social Sciences and Philosophy
University of the Philippines
Diliman, Quezon City, Philippines

Social Science Studies of Tropical Diseases

Recommended: US\$ 15 000 for a one-year small grant.

The RSG was pleased to receive a proposal from a college of social sciences with a multidisciplinary staff which planned to work together on a series of health-related projects. However, the proposed plan was not considered sufficiently developed at this stage to warrant long-term support. A small grant was awarded to enable the faculty to initiate planning seminars and workshops for the purpose of reworking their proposal. Assistance in this process would be provided by a site visit in 1986.

10. DATE OF THE TWELFTH MEETING OF THE RSG

The twelfth meeting of the RSG will take place in Geneva from 10 to 18 July 1987.

11. SUMMARY OF RECOMMENDATIONS

11.1 The RSG discussed in detail the in-depth report on the activities of the RCS Component during the period 1982 to 1986 and recommended that its comments on this report be communicated to the STRC.

11.2 The next in-depth review, five years hence, should carefully assess the scientific output of strengthened institutions considered during the present review. The SWGs and SCs should be actively involved in this assessment.

11.3 The Secretariat was requested to prepare a document on proposed policies and mechanisms for Phase 2 of the RCS strategic plan for consideration by RSG-12.

11.4 The RSG reviewed the site visit reports submitted by its members and identified certain fundamental characteristics associated with successful strengthening. The RSG suggested that these characteristics should be taken into account when selecting new institutions for support.

11.5 Selection of staff for further research training should take place during the first few years of the strengthening process, and institutions already strengthened should be the first choice for Ph.D. training and for promoting biomedical research capability.

11.6 The mechanisms for supporting activities in the biomedical sciences should be fully incorporated into the existing mechanisms for institutional support.

11.7 Subject to the availability of additional resources, management workshops and promotional activities should be reinstated.

11.8 The Secretariat should prepare a statement describing the system for ethical clearances for RSG proposals and renewals, for consideration by RSG-12.

11.9 The RSG approved the requests received from 24 institutions for renewal of long-term support grants. Funding was deferred in the case of two institutions pending receipt of additional information in one case and results of a site visit in the other. Support was also renewed for seven ongoing degree courses.

11.10 The RSG approved the following new institutional grants:

Long-Term Support Grant

Institute of Parasitic Diseases Control and Research
Hubei Academy of Medical Sciences
Wuhan, Hubei Province, People's Republic of China

Capital Grants

Guangxi (Zhuang Autonomous Region) Institute of Parasitic
Diseases Control (GIPDC)
Nanning, Guangxi, People's Republic of China

Short-Term Support Grants

Centro de Investigación de Paludismo
Tapachula, Chiapas, Mexico

Department of Biochemistry
Faculty of Science
Mahidol University
Bangkok, Thailand

Small Grant

College of Social Sciences and Philosophy
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