



Unitaid Executive Board Meeting
30th Session
5-6 December 2018
Radisson Blu hotel
Marrakech

Agenda item 2

Minutes of the 29th Executive Board
(20-21 June 2018)

La Villa du Lac, Divonne

For Information For Review and Advice For Approval

Executive Summary

- The newly appointed Chair, Ambassador Marta Maurás, opened the meeting, thanked the Board for their confidence in her leadership and welcomed new Board Members.
- Revision 2 of the agenda which included a change in the schedule (shift between the KPI report and the Resource Mobilization sessions) was adopted.
- Minutes of EB28 were adopted without modification.
- The Executive Board acknowledged the report of the Executive Director and congratulated him and the Secretariat for its progress and achievements over the past 18 months. It encouraged the Secretariat to pursue its efforts to improve the profile and visibility of Unitaid as part of the global health landscape.
- The Executive Board thanked the PSC Chair for her report and noted for the record the accompanying presentation materials.
- The Executive Board thanked the FAC Vice Chair for his report and noted for the record the accompanying presentation materials. The Executive Board adopted **Resolution 1: Unitaid 2017 Audited Financial Statements**.
- The Executive Board congratulated the Secretariat for the informative portfolio update. They asked that future reports include more information about the challenges and lessons learned.
- The Executive Board acknowledged Unitaid's resource mobilisation efforts and welcomed the more predictable funding. The Board agreed with the need to ensure its support at high political level. Several members expressed support for the establishment of a working group on resource mobilisation and it was suggested that this would be discussed during a call.
- The African constituency, on behalf of the Moroccan government, proposed to host the next Board meeting in Marrakech.
- The Executive Board congratulated the Governance Working Group for its work and adopted the following resolutions: **Resolution 2: Board Operating Procedures ; Resolution 3: Extension of the Vice-Chair's mandate ; Resolution 4: Seat of the Republic of Korea in the Unitaid Executive Board ; and Resolution 6: Creation of a GWG sub-group on the approach to the management of Board declarations of interests**.
- The Republic of Korea proposed to host the 31st Executive Board meeting in Seoul in June 2019.
- The Executive Board thanked the Secretariat for bringing forward two partnership opportunities for its guidance. Board members agreed that the EJAF/CIFF opportunity was a good fit but did not agree with pursuing the Accelerator opportunity. The Secretariat hence confirmed that it would submit the EJAF/CIFF project for go-ahead vote to the Board. The Board requested that the Secretariat develop partnership guidelines, for review and discussion at the next PSC.
- The Executive Board thanked the PRC Chair for his report and agreed for the PRC update to become a standard agenda item of Board meetings.

- The Executive Board agreed that the investment plan should be revisited as a standard agenda item. There was support for more in-depth strategic discussions of content at the PSC.
- The Executive Board appreciated the KPI report and thanked the Secretariat for its work. The Board asked that challenges and lessons learned are fully reflected in the KPI and broader grant portfolio reporting in the future.

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1. Opening remarks and welcome of the new Chair of the Unitaid Board

THE EXECUTIVE BOARD VICE-CHAIR, Sarah Boulton, called the meeting to order at 9:15 on 20 June 2018. She congratulated and welcomed the new interim Chair Marta Maurás, previously Vice-Chair of the Unitaid Board and Board Member representing Chile.

The newly appointed CHAIR expressed her appreciation for the Board's confidence and indicated that she intends to work with passion and care and live up to the remarkable work of her predecessors. She expressed her best wishes to Ambassador Celso Amorim.

She commended the Executive Director for the restructuring of Unitaid. Highlighting the important role of Unitaid in meeting the SDG targets, she mentioned that the organisation must stay aware of humanitarian and development challenges, of social justice, sexual harassment, abuse and exploitation, and ensure that it helps empower women, children and people living with the diseases. She also invited Board Members and the Secretariat to reflect on the broader context of global health related events and meetings coming up in the next 18 months, the space for Unitaid in that landscape and on the preparation of mid-term review on the implementation of Unitaid Strategy.

She thanked the Committees and the Governance Working Group for their work and the Vice-Chair for her leadership over the past months. She mentioned that the closed session, scheduled at the end of Day 1 would focus on learning from the Board effectiveness survey.

She welcomed new Members to the Board: H.E. Mrs Maria Luisa Escorel, Deputy Permanent Representative of Brazil to the UN office and other international organisations in Geneva; H.E. Mr. Juan Eduardo Eguiguren, Permanent Representative of Chile to the UN office and other international organisations in Geneva and H.E. Mrs Carla Serazzi Deputy Permanent Representative of Chile ; H.E. Mrs Stephanie Seydoux, French Ambassador for Global health; and Mrs. Hyunjoo Oh, Director General of the Development Cooperation Bureau at the Korean Ministry of Foreign Affairs. New Board Members thanked the Chair for her introduction and congratulated her for her nomination.

The newly appointed Chair, Ambassador Marta Maurás, opened the meeting, thanked the Board for their confidence in her leadership and welcomed new Board Members.

2. Adoption of EB 29 agenda

Revision 2 of the agenda which included a change in the schedule (shift between the KPI report and the Resource Mobilization sessions) was adopted.

3. Minutes from previous meeting

THE REPRESENTATIVE OF THE COMMUNITIES asked that Board minutes be made more synthetic, carefully capturing decisions and action points, including suggestions from Board Members. Taking these comments into account for future process, the Minutes of EB28 were adopted without any modification.

Minutes of EB28 were adopted without modification.

4. Report from the Executive Director

The EXECUTIVE DIRECTOR welcomed the new Chair and the new Board members. He presented a summary of the achievements over the past 18 months as well as the priorities ahead. He reminded that Unitaid has evolved considerably over the last three years, with a doubling of the portfolio and of the disbursement value, and a tripling in the number of grantees. After 3.5 years of transformation, Unitaid has started to see the results of its projects, which demonstrates the scalability of its investments.

THE EXECUTIVE DIRECTOR then presented four emblematic cases that clearly demonstrate the **scalability of Unitaid's projects**:

- 1) **Paediatric TB:** Until three years ago, no medicine for children was available. Unitaid developed the first effective fixed dose combination treatment for children. Scale-up has been rapid and significant thanks to the strong work with other partners. Within a year of the project closing, 80 countries have adopted this new child-friendly regimen.
- 2) **HIV self-testing:** Unitaid introduced self-tests four years ago. Now, thanks to the effective partnership with the Gates Foundation, self-tests are available for US\$2 in Africa from a previous US\$40. Today, more than 40 countries have adopted a self-testing policy and partners such as PEPFAR and the Global Fund have committed to scaling up self-tests.
- 3) **Dolutegravir:** Until three years ago, Efavirenz was the golden standard to treat HIV but had a high level of resistance and secondary effects. Unitaid contributed to introduce the new generation drug dolutegravir in the global South within less than 3 years from approval in the US (as compared to 13-15 years before) and to reduce the price from US\$ 15,000 to US\$ 70 for a year of treatment.
- 4) **Seasonal Malaria Chemoprophylaxis (SMC):** SMC is a simple preventive solution invented in Africa. It was tested massively by Unitaid in seven countries and within three years, 10 million malaria cases were prevented and 60,000 children were saved. The seven countries in the Sahel region subject to this pilot are adopting this as a normal practice and five additional countries are scaling up these efforts through funding by partners.

And **four main lessons learned**:

- 1) **Relationship with countries:** The closer we work with countries, the more effective we are. Unitaid interacts with a variety of actors and increasingly conducts missions in countries together alongside partners.
- 2) **Working more closely with the inventors:** This allows us to better understand the pipeline and influence the industry. For example, Unitaid will lead an industry summit in India and visited Korea twice to talk directly with manufacturers.
- 3) **Relationship with grantees:** This has evolved considerably over the past year. Unitaid first had to build a standard framework and templates to manage the relationship with grantees and truly become a results-based organization. With the increased maturity of Unitaid, we can now move towards more streamlined and adapted tools, while keeping in mind the heterogeneity of Unitaid's projects. This year, Unitaid organized a grant implementers forum and a CEO meeting that was held in the margins of the World Health Assembly (WHA). Going forward, these meetings will be held on an annual basis.
- 4) **Profiling Unitaid:** We are increasingly communicating on our results as we now have a strong results framework in place.

In terms of **priorities ahead**, Unitaid has three open calls for proposals (fever management, cervical cancer, tuberculosis). The Secretariat has received an A+ score by DFID for the second time and an increased IATI score of 88 as compared to 51 last year. Regarding human resources, Unitaid currently has 62% female and 38% male staff overall, with an exact equal balance in higher grade positions (P4 and above). 75% of staff is dedicated to our core business: grants development and management. Unitaid continues high quality training to staff and job satisfaction is high. It has zero tolerance to sexual harassment.

The EXECUTIVE DIRECTOR concluded by thanking the Vice-Chair for her leadership during the past months and by thanking his senior management team and the entire Secretariat.

Discussion

BOARD MEMBERS thanked the Executive Director for his substantive update and commended the Secretariat for its achievements over the past 18 months. They encouraged the Secretariat to continue improve Unitaid's positioning/profiling as part of the global health landscape. They agreed on the importance of the upcoming mid-term strategy review on which they requested further clarification.

Additional points were highlighted by the Board members, including:

- THE REPRESENTATIVE OF KOREA focused on three areas of achievements, namely the extension of priority areas, the human rights perspective and the partnership with stakeholders. She welcomed Unitaid's integrated approach, with childhood fever and cervical cancer being solid examples. She emphasised that Unitaid should take a bold step to address human rights and gender equality issues in all projects. Regarding Unitaid's efforts to deepen partnerships, she reminded that innovation had been at the core of Unitaid's strategy. She welcomed Unitaid's efforts to strengthen the relationship with the Korean health industry through various missions.
- THE REPRESENTATIVE OF THE UNITED KINGDOM welcomed Unitaid's efforts to implement the operating model and strategy and proposed increased efforts on AMR and integration. He congratulated Unitaid on its impact stories that help profile Unitaid. He also encouraged Unitaid to increase its work with the private sector and the funding of new innovative ideas.
- THE REPRESENTATIVE OF FRANCE reaffirmed France's strong support to Unitaid. She reminded that global health was amongst the development priorities of the French President, that France would be hosting the Global Fund's replenishment in 2019 and that Unitaid should position itself within the broader health calendar. She supported Unitaid in its priorities on promotion of innovation, focus on populations, as well as strengthening of health systems. She also expressed support to accompany Unitaid in its efforts towards more flexibility as the organization had reached maturity.
- THE REPRESENTATIVE OF THE FOUNDATIONS congratulated Unitaid on its impressive transformation and on its connectivity and reach out. However, she questioned about the right balance between what Unitaid is doing itself and what countries/grantees are doing and encouraged the Secretariat in its efforts to right-size certain elements of its operations. She commended the success stories but suggested that the lessons learned are further developed and explored in the midterm review. She appreciated the focus on resource mobilization, stating that the focus should be on strategic discussions with targeted countries. Regarding the profile of Unitaid, she encouraged Unitaid to take more credit and indicated that Board members can help Unitaid strike the right balance.

- THE REPRESENTATIVE OF THE NGOS highlighted the usefulness of the grantee forum, which showed Unitaid's maturity. He asked for further clarification on how the Cipla example fits with the rest of Unitaid investments and how Unitaid arrived to this great success. He congratulated Unitaid on taking quick action regarding the tuberculosis (TB) call for proposals and welcomed the expansion of Medicine Patent Pool (MPP)'s mandate towards essential medicines.
- THE REPRESENTATIVE OF NORWAY highlighted the importance of Unitaid 's contribution to reaching the SDGs, which is also high on Norway's agenda who will be hosting the Global Financing Facility replenishment.
- THE REPRESENTATIVE OF CHILE underlined that Unitaid was advancing on the right path, as confirmed by the review done by the WHO PBAC. She also congratulated Unitaid on its progress towards greater visibility. For example, Unitaid gave a remarkable presentation at the G20 meeting with Argentina and she encouraged Unitaid to continue its efforts to ensure that health is a priority on the G20 agenda. She recognized Unitaid's work in AMR and mentioned that Chile had established a national commission on this topic. Finally, she congratulated the Secretariat on its gender balance.
- THE REPRESENTATIVE OF BRAZIL reminded that Brazil had accompanied Unitaid's creation and growth throughout the years and is proud of its uniqueness and modernity. She appreciated the importance of scalability and concrete results mentioned. She mentioned the example of the PREP project in Brazil that was also a successful demonstration of Unitaid's scalability.
- THE REPRESENTATIVE OF THE COMMUNITIES was pleased with the high staff satisfaction and Unitaid's increased engagement with stakeholders during its country visits. He encouraged that Unitaid work together with partners and recipient communities at the upcoming UNGA to clearly articulate the achievements of Unitaid and what the real needs are. While commending the engagement with new players, he cautioned the importance to protect Unitaid's brand so that it would not be associated with the "wrong" types of actors.
- THE REPRESENTATIVE OF SPAIN shared their emphasis on tuberculosis in the preparations towards UNGA and within the field of AMR and that Unitaid should use it as a platform for communication. He reminded that Spain had a new government and that he hoped to have better engagement with Unitaid in the future.
- THE REPRESENTATIVE OF WHO confirmed Unitaid's alignment and close relationship with WHO that had been growing through various grants and mechanisms. He confirmed that there was high interest in Unitaid's work during the presentation at WHO's Executive Board. He also appreciated the rapid action on addressing the tuberculosis shortcoming. He commended Unitaid's work in communicable diseases, AMR, vector control and cervical cancer and mentioned that Unitaid could cover more in non-communicable diseases. He concluded by stating that WHO was happy to be a partner and host of Unitaid.

In response to the comments raised by Board members, the EXECUTIVE DIRECTOR highlighted the importance of the Board's support to Unitaid. Regarding the G20, he confirmed that Unitaid played a crucial role together with the Global Fund and WHO to ensure that health was included as high priority and that other important points were included in the agenda. He assured the Board that Unitaid's presence at the UNGA would be used strategically and that the Board's support would be needed to ensure the space at high political level.

The CHAIR summarized that much progress had been made and that this was acknowledged by the Board and partners. She confirmed that the Board was attempting to lift the bar and that efforts in this sense would continue. She agreed that the mid-term strategy review arrived at a good time as we move into

a new international context. She concluded by stating that Unitaid shows good success but that the key issue of resource mobilisation remained.

The Executive Board acknowledged the report of the Executive Director and congratulated him and the Secretariat for its progress and achievements over the past 18 months. It encouraged the Secretariat to pursue its efforts to improve the profile and visibility of Unitaid as part of the global health landscape.

5. Report from the Policy and Strategy Committee

THE CHAIR OF THE POLICY AND STRATEGY COMMITTEE (PSC) summarized the key discussions and recommendations from the 19th PSC meeting held on 3 May 2018 (document UNITAID/EB29/2018/4). She highlighted the following elements:

- The PSC recommended that the investment plan be regularly discussed and reviewed by the PSC.
- The PSC acknowledged that co-funding has the ability to amplify the impact of Unitaid's investments however members expressed concerns that it could potentially displace core funding and have an impact on governance. The PSC emphasized the importance of core funding which should remain at the heart of Unitaid's resource mobilization efforts. The PSC asked the Secretariat to further develop the list of principles for co-funding for the Board approval.
- The PSC congratulated the Secretariat on the work in antimicrobial resistance (AMR) highlighting in particular Unitaid's increased visibility and leadership of the Interagency Coordination Group on Antimicrobial Resistance (IACG) sub group on Innovation, R&D and Access. The PSC acknowledged that this work provided great visibility for Unitaid. Following an initial discussion on the proposed partnership with FIND on the AMR diagnostics accelerator, the PSC asked the Secretariat to develop the case for presentation to the whole Board.
- The PSC congratulated the Secretariat for the increased engagement with partners. The PSC was presented an opportunity for partnership between Unitaid, the Children's Investment Fund Foundation (CIFF), and the Elton John AIDS Foundation (EJAF), which they asked the Secretariat to further develop and bring to the Board.
- The PSC noted the success of the Grant Implementers Forum which will become an annual event and welcomed the improvements in terms of streamlining of grant management and grant development. A lot of work has been put in three key areas : 1) clarify expectations, 2) simplify and improve the flexibility of grant management tools and 3) increased information sharing and collaboration. PSC members expressed their satisfaction with regard to this progress which shows the great maturity of the organization.

THE CHAIR OF THE PSC concluded by mentioning that the mid-term review of the strategy and the principles for co-funding will be important topics at the forthcoming October PSC meeting.

Discussion

THE EXECUTIVE BOARD thanked the PSC Chair for her report. Both the Chair of the Board and the representative of Brazil indicated that the presentation contained a lot more information than the one pager report provided to the Board and that it would be useful to have more detailed prereads.

Referring to recent governance discussion, the Chair of the PSC indicated that the outcomes of the PSC discussion would be shared with all Board members in the future.

In response to a request from the Executive Board, THE SENIOR ADVISOR TO THE EXECUTIVE DIRECTOR provided further details about Unitaid's role as Chair of the IACG sub group on Innovation, R&D and Access. It was explained that the IACG had launched a consultation on three discussion papers and would report to the UN Secretary General early next year.

THE REPRESENTATIVE OF THE FOUNDATIONS stressed the importance of the PSC's work in reviewing the Investment Plan and in keeping a clear distinction between the work on developing principles for co-funding and the work on partnerships.

THE PSC CHAIR AND THE SENIOR ADVISOR TO THE EXECUTIVE DIRECTOR clarified that, following the last PSC, the Secretariat was developing papers on: 1) partnership principles and 2) modalities for targeted funding.

The Executive Board thanked the PSC Chair for her report and noted for the record the accompanying presentation materials.

6. Report from the Finance and Accountability Committee

THE VICE CHAIR OF THE FINANCE AND ACCOUNTABILITY COMMITTEE (FAC) summarized the key outcomes of the 20th FAC meeting held on 2 May 2018 (document UNITAID/EB29/2018/4) and clarified that one decision point was submitted to the Board.

He highlighted the following elements:

- The FAC reviewed the financial statements for the year ended 31 December 2017 and recommended their approval by the Executive Board. The FAC noted the good financial performance of Unitaid including that the Secretariat costs in relation to the portfolio for 2017 were, at 1.9%, better than the KPI of 2%.
- The FAC took note of the audit report and unqualified audit opinion from the WHO appointed External Auditor on the Unitaid financial statements for the year ended 31 December 2017. The Management Letter for the year under review contained four recommendations, including the adoption of a risk management policy which is being addressed by the Secretariat. The other recommendations relate to the WHO Internal Control Framework self-assessment and the Statement of Internal Control which are being considered by the Secretariat.
- In relation to the budget for 2018, the Vice Chair of the FAC noted the increase of US\$ 688,000 due to the rent for the new Global Health Campus being payable from 22 February 2018 even though the move would take place in August 2018. This will be offset by savings of US\$ 642,000 within the SDIS budget line due to a change in consulting firms. The remaining balance will be absorbed within the previously approved 2018 budget.
- A number of changes in the budget planning for 2019 were proposed by the Secretariat:
 - o setting aside an annual provision of USD 2m for spending on Monitoring and Evaluation (M&E) and External Verification Agent (EVA), which are both linked to the grant lifecycle rather than the annual budget; and
 - o adapting the budget process for 2019: instead of presenting a final budget at the October FAC meeting, it is suggested that a "directional" budget is presented. The final budget would be presented during a call prior to the December Board meeting. The Vice

Chair confirmed that the FAC supported the change but the details and timing would be discussed on a follow-up call between the FAC Members.

- The FAC acknowledged the positive work of the Secretariat on resource mobilization and highlighted the need to increase funding to achieve the KPI target and overall Investment Plan. The FAC Vice Chair noted a number of suggestions put forward by FAC Members, including creating a resource mobilization working group and exploring new types of funding.

THE VICE CHAIR OF THE FAC presented the funding forecast for the next three years. The baseline scenario would allow for full funding for the investment pipeline until 2020, however, the adjusted investment scenario would present shortfalls in 2019 and 2020.

THE VICE CHAIR OF THE FAC then summarized the key outcomes of the Joint session of the FAC and PSC held on 2 May 2018 (document UNITAID/EB29/2018/4). The FAC/PSC joint session included a workshop on risk management, a discussion on the internal review report of Grant Implementation Process and an update on reported cases of wrongdoing. The aim of the workshop was to understand Unitaids' approach to risk management and agree on a specific set of documents to be reviewed on a regular basis as part of the Committees' risk oversight responsibility. It was proposed that this set of documents include: the organizational risk register, risk heat map and detailed risk one pagers. The results of the internal review conducted by Moore Stephens on grant implementation processes were presented to the FAC/PSC joint session. It was decided to extend their contract to allow for review of other areas relevant for 2018, including on risk management. The Secretariat was requested to finalise the risk management policy and to share it with the FAC/PSC for endorsement before the Executive Board at the end of 2018. An update was provided on the cases of reported wrongdoing which were minor.

Discussion

THE EXECUTIVE BOARD thanked the Vice Chair of the FAC for his report and noted the quality and detail of the accompanying presentation materials. It was recognized that Unitaids is beginning to manage risk in a structured way and Board members expressed enthusiasm about discussing risk management at future Executive Board meetings.

The Executive Board thanked the FAC Vice Chair for his report and noted for the record the accompanying presentation materials.

The Executive Board adopted Resolution 1: Unitaids 2017 Audited Financial Statements.

7. Portfolio update, Part 1

THE DIRECTOR OF OPERATIONS, AND THE TEAM LEAD RESULTS jointly introduced the portfolio update presentation. In 2017, Unitaids had 39 active grants, 19 in HIV, 6 in TB, 9 in malaria and 5 in cross-cutting. The Director of Operations indicated that the number of grant implementers had tripled, and now stands at 32. Between 2015 and 2017, there had also been a 50 percent increase in disbursements.

THE TEAM LEAD RESULTS explained that though Unitaids' US\$ 1 billion portfolio represents one percent of the global response, it aims to impact the remaining 99 percent through scale-up. He mentioned project achievements in areas such as HIV self-testing, optimal ARVs, improvements in cure rates for MDR-TB and severe malaria, contribution to HCV elimination, resistance tools and advancements toward universal health coverage. In terms of monitoring, the Team Lead Results indicated that Unitaids was

constantly looking through both strategic and operational lenses, and seeking to adapt grants for greater effectiveness. He explained the different aspects looked at when assessing the grants: programmatic performance, scalability, budget implementation and risk management. He noted that 2017 performance ratings showed that 87 percent of the grants are performing well. Last year's assessment showed that 31 percent of projects needed improvement, that number dropped to 13 percent this year, highlighting the increased strength of the portfolio.

THE TEAM LEAD OPERATIONS presented Unitaid's HIV and coinfections portfolio. She noted that HIV was the largest of Unitaid's portfolios, representing half of Unitaid investment. She described the successes and the challenges that the global community was facing in reaching the fast-track (90-90-90) targets to end the HIV epidemic, notably, a stubborn gap in HIV testing, and plateauing declines in new HIV infections and deaths. She highlighted the relevance of Unitaid moving into cervical cancer testing and treatment, as this is a major, deadly HIV co-infection. She described Unitaid's pioneering work in HIV self-testing and noted that 43 countries now have policies on self-testing. Thanks to Unitaid's investments and efforts of partners such as the Bill and Melinda Gates Foundation, the self-tests, which cost US\$ 40 in a lot of countries, have dropped in price to US\$ 2 in lower-income countries. However further market shaping work is needed, particularly to increase the supplier base which remains limited at the moment.

THE TEAM LEAD OPERATIONS presented Unitaid achievements in the field of point-of-care infant diagnosis: using small diagnostic machines for same-day test results has decreased the turnaround time from 2-3 months to the same day and is saving many lives, as babies can be tested, diagnosed, and started on treatment all on the same day. She noted that better ARV drugs for babies are on the horizon. She explained that the small diagnostic machines have the potential to be "anchors" for multi-disease management and that Unitaid was investigating what other diseases and co-infections could be diagnosed with this technology. She then discussed Unitaid's involvement in hepatitis C, which began at the end of 2015, first focused on getting better drugs with fewer side effects and bringing down prices. Unitaid's work with partners has shown that HCV treatment can work across genotypes, which had a huge effect on treatment guidelines.

THE SENIOR PROGRAMME MANAGER OPERATIONS gave a presentation on Unitaid's tuberculosis portfolio. She reiterated the challenges related to the disease - TB is the leading cause of death from a single infectious disease and from antimicrobial resistance, as well as the major killer of people living with HIV - and highlighted that TB was now high on the world political agenda as illustrated by the first TB summit at the UN General Assembly scheduled for September. She pointed out that, with a US\$ 200 million TB portfolio (focusing on testing, treatment, adherence and prevention), Unitaid is the 4th largest investor in TB research globally. She explained that ample data on new medicines was emerging from the endTB project; data which will be analysed and expected to influence and inform new global policy. She briefly presented the five new TB projects which focus on improving diagnosis, finding missing paediatric cases, and integrating TB diagnosis into other services and mentioned that a new MDR-TB call for proposals had been published by Unitaid in May 2018.

Discussion

BOARD MEMBERS congratulated the Secretariat for the very informative presentation, films and pre-read. Several Board Members (United Kingdom, Foundations, NGOs) asked that in the future, these reports comprise more information about the challenges/difficulties faced during the grant implementation, the reasons for poor performance and/or for limited budget implementation (United Kingdom) and the

lessons learned from these experiences, seeing these elements as key for the joint Board/Secretariat learning process. In that perspective, the representative of the Foundations (Gates) suggested that some general reflection about the process, lessons learned and how the portfolio contribute to reaching the global strategic objectives of Unitaid be also presented. She also suggested to connect this update with the KPIs.

Additional comments included:

- THE REPRESENTATIVE OF THE UNITED KINGDOM indicated that it would be helpful to review how the grant portfolio links together to meets the various AfIs and analyse potential gaps.
- THE REPRESENTATIVE OF BRAZIL commented on the importance of integration, and encouraged Unitaid to promote it further, for example she suggested that TB and HIV be tested at the same time.
- While noting the positive evolution in the TB portfolio, a number of constituencies (Korea, NGOs, Communities) regretted that the proportion of funding allocated to TB remained low compared to HIV and malaria and strongly encouraged Unitaid to increase its investments in that field. The representative of the Communities also highlighted that more could be done in terms of prevention in this field.
- THE REPRESENTATIVE OF THE NGOS formulated questions and concerns on the following topics: 1) Cepheid's monopoly on GeneXpert cartridges; 2) learnings from the OPP-ERA and Samba projects (single diagnostic platforms); 3) countries that are transitioning out of Wambo and the Global Fund;; 4) WHO prequalification programme future funding; 5) diversity of implementing partners.
- THE REPRESENTATIVE OF THE COMMUNITIES praised the work of Unitaid in early infant diagnosis (EID) and expressed gratitude for efforts on new TB medicines. She said increasing awareness of the new medicines could help increase demand for them.

In response to these comments, the Secretariat provided the following elements:

- Regarding the need to provide more information on challenges and lessons learned, THE DIRECTOR OF OPERATIONS explained that the Secretariat will do its best to make sure that this surfaces better in the future while ensuring that the reports remain concise. He also noted the need to provide more information about the linkages between the projects.
- Regarding the budget performance, he acknowledged that the grant implementers can sometimes be too ambitious but explained that the Secretariat now has a better track record as the relationships with grantees grow.
- He emphasized that integration was indeed critical and explained that this was a key aspect of the Unitaid strategy. He cited CHAI/EGPAF and University of Bordeaux projects as examples of integration. In addition, the two recent calls for proposals recently launched by Unitaid are by nature focusing on integration (e.g. fever management, coinfections).
- On the importance of the TB portfolio, he explained that the proportion of funding allocated to TB had increased substantially in recent years and we were back on track to a more balanced portfolio.
- Regarding the risk of monopoly, he indicated that Unitaid was working with partners to bring more competition to the area of the diagnostic cartridges, however developing new TB assays remains challenging and will take time.
- THE TEAM LEAD RESULTS provided some elements regarding the lessons learnt from the OPP-ERA and Samba projects. He explained that the Secretariat was doing a lot to help increase the polyvalence of the platforms, however he acknowledged that this remained quite complex as these small companies struggle to be competitive.

- Regarding the Wambo project, THE DIRECTOR OF OPERATIONS explained that a no-cost extension had been granted but that any new disbursement would be conditional on Wambo/Global Fund meeting the Office of the Inspector General (OIG) requirements, in particular the development of a new business case.
- On the diversity of implementers, he explained that US\$ 100 million a year are now going to Southern implementers, mostly from South Africa, compared to US\$ 0 before 2017. The Secretariat will pursue its efforts to expand beyond. On that same issue, the Chair commented that we should also take into account Unitaid's rich partnership with Fiocruz in Brazil.
- Regarding the projected decrease of funding to the WHO Prequalification Programme, THE DIRECTOR OF OPERATIONS indicated that this was not related to performance but a question of sustainability. WHO Prequalification Programme is currently exploring other models to become less reliant on Unitaid funding.

8. Portfolio update, Part 2

THE VALUE FOR MONEY MANAGER gave a presentation about Unitaid's malaria grant portfolio. He noted that at global level, malaria was at a crossroads: though an increasing number of countries are on track to eliminate malaria, the total number of cases and deaths has levelled off and remains too high. He reminded that 80 percent of the malaria burden is in 15 countries. He noted that more needs to be done to catalyze access to innovative tools, sprays and insecticide-treated bed nets. He outlined Unitaid's investments in malaria, including work for severe malaria and SMC, indoor spraying to kill malaria-carrying mosquitoes, participation in testing a new malaria vaccine, and prevention for pregnant women.

He then presented the achievements and challenges of two Unitaid flagship projects: Access SMC (pilot program to test the effectiveness of SMC in the high-malaria-burden Sahel region of Africa during rainy season) and NGenIRS (next generation indoor residual spray). Regarding the former, thanks to Unitaid's intervention, the price of the treatment fell by 20 percent, making it cost-effective and affordable and more than 60,000 lives were saved through the project. The impact will be even greater at scale. However, the expected scale-up will only be 50 per cent of the total need for SMC, with financing the major issue inhibiting full scale-up. A similar price reduction has been achieved for next-generation of IRS, however signs of resistance to the new insecticides are emerging, and there are similar challenges around the financing of scale-up.

PROGRAMME MANAGER OPERATIONS presented Unitaid's cross-cutting portfolio. She explained that cross-cutting projects mainly fall into two categories: projects that aim to address transversal challenges (such as the Medicine Patent Pool [MPP], Wambo, WHO Prequalification, and intellectual property projects) and those that aim to amplify the impact of other Unitaid projects (such as the WHO Enablers). In 2017, Unitaid's investments in this field amounted to US\$ 113 million. She then presented the achievements and challenges of two flagship cross-cutting projects: the MPP and WHO Prequalification. She explained that the MPP project had enabled faster access to generic health products through voluntary licensing approach, though the geographic coverage of the voluntary licenses remains a challenge. She explained that WHO Prequalification had demonstrated an improvement in performance, e.g. reductions in lead times to prequalify products, which is supportive of accelerating access to ground-breaking products.

Discussion

- THE REPRESENTATIVE OF THE COMMUNITIES emphasised that MPP and WHO PQ were great contributions to public health and that we should be proud of these investments. He added that he would like to see prequalification become faster and more efficient.
- THE REPRESENTATIVE OF THE NGOS asked whether there was any reflection on a potential role for Unitaid at the elimination stage of malaria. Regarding cross-cutting projects, he explained that they were different in nature than other projects, and that one should not apply the same expectations in terms of sustainability and transition. He indicated that his constituency was nervous about the possibility to introduce a fee system for WHO Prequalification and cautioned against this approach.
- THE REPRESENTATIVE OF BRAZIL asked for more details regarding the respective expansion of MPP and of WHO Prequalification.

The following responses were provided by the Secretariat:

- On malaria elimination and surveillance, THE DIRECTOR OF OPERATIONS explained that there were some activities through the WHO Enablers (e.g. surveillance of injectable artesunate), though these remain limited.
- On MPP, Unitaid has encouraged the expansion of the mandate, in particular the move into TB and HCV. The geographical scope is always the result of a negotiation between MPP and the manufacturer and therefore very much a case by case basis. However, MPP is doing its best to ensure that the coverage is as extensive as possible.
- On prequalification, THE DIRECTOR OF OPERATIONS agreed that the efficiency of the programme still needs improvement and that, despite progress, lead times are still too long (2 years). This will remain a key focus of their efforts in the near future. He also clarified that there was no plan for Unitaid to stop supporting WHO Prequalification, but instead to be supportive of diversification of their funding sources, in order for them not to rely solely on two key funders.

The Chair thanked the Secretariat and reminded that it was worth noting that, though it only represents 1%, Unitaid has an important leverage and impact on the global response.

The Executive Board congratulated the Secretariat for the informative portfolio update. They asked that future reports include more information of the challenges and lessons learned.

9. Resource mobilisation (strategy and activities)

The DIRECTOR FOR EXTERNAL RELATIONS presented the resource mobilisation efforts and tools. He reminded Unitaid's transformation from a procurement agency to a market shaping institution. Unitaid now has a clearer role in the global health response, underpinned by a new strategy, a robust operating model, a strong Secretariat, a portfolio that has doubled and very little commitment buffer. He also presented the evolution of contributions since 2015 and the fact that Unitaid has several multi-year agreements in place that ensures more predictable funding. Some of Unitaid's tools and activities include the investment case, the impact stories, various publications such as the landscapes, country visits, events and work with partners. He then summarised the status of the agreements with existing donors, namely the 5-year agreement with Gates Foundation, the contribution from Brazil that is up to date, a new multi-year commitment with France, a new agreement in discussion with Korea, and a 3-year agreement with the United Kingdom. He indicated that Norway had decreased its contribution in 2017, that Spain

reengaged that same year, and that there was not yet any indication of the amount of the 2018 contributions from these three countries.

The SENIOR ADVISOR TO THE EXECUTIVE DIRECTOR then presented the example of the targeted approach for Japan as a potential new donor. She presented the evolution from the renewed engagement in 2015 until today. The engagement is now more targeted with reinforced engagement with the Ministry of Foreign Affairs, the Global Health Innovative Technology Fund (GHIT) and at several events such as the Universal Health Coverage (UHC) conference and the Nikkei conference. Japan recently approved a solidarity tax which will be allocated to tourism, but discussions are on-going on how the tax could also benefit global health. Japan has approached Unitaid and France to discuss this and Unitaid has been invited to speak at the Forum on solidarity tax in July. Furthermore, the UK-Japan 21st century group will come together to discuss common interests and the Executive Director has been invited to present Unitaid in August 2018. There is no firm commitment but a lot of interest and openness to continue the discussions to move towards a potential future agreement. Unitaid is interested in how the Executive Board can help move political discussions forward.

The DIRECTOR FOR EXTERNAL RELATIONS concluded by presenting the different types and principles of funding such as core-funding, targeted funding (specific areas of investment plan) and co-funding that each have their own principles. He confirmed that Unitaid's efforts are aligned with the global health agenda and mentioned several platforms and events where Unitaid will be working with different partners to increase its visibility and resource mobilisation efforts.

Discussion

BOARD MEMBERS appreciated the presentation on Unitaid's resource mobilisation efforts and commended the more predictable funding. They agreed with the necessity of the Board's support to place Unitaid at a higher political level. Several members expressed support for the establishment of a working group on resource mobilisation and it was suggested that this would be discussed during a call.

- The CHAIR recognized that results and stories were now available but that there was a need to push Unitaid on a higher political agenda with the necessity of having close collaboration between the Board and the Secretariat. She mentioned three specific issues: 1) are there other types of fundings that we should look at? (referring to Unitaid's start as innovative financing mechanism) 2) do we have the framework to advance our resource mobilisation plan and 3) how do we do it together?
- THE REPRESENTATIVE OF FRANCE welcomed the Chair's reminder of Unitaid's start as innovative financing mechanism as the funding also comes from the airline tax. She emphasised that the focus should be on the need of the organization going forward and asked whether further growth should be envisaged. She reminded the importance of Unitaid to position itself clearly in the global health architecture.
- THE REPRESENTATIVE OF THE UNITED KINGDOM would have appreciated more details in the pre-read and felt that innovative financing, new donors outside Japan and the engagement with the private sector were not considered enough in the paper. He supported the proposal by the FAC to establish a working group and asked whether the right skills were available within the Secretariat or whether any other immediate action would be necessary.
- THE REPRESENTATIVE OF THE NGOS explained that they had increased their efforts to engage with Norway as an important funding partner of Unitaid. He noted that the Global Fund replenishment was a big consideration in the global health architecture and that Unitaid should demonstrate its complementarity. While he saw the impact stories as important tools, he suggested that the

investment case be more explicit on what could be achieved with the extra money that is sought (e.g. indicate the number of lives that Unitaid helps save).

- THE REPRESENTATIVE OF NORWAY confirmed that her country would provide support to Unitaid in 2018 but that the amount was not yet clear. She further explained that Norway's reduction of funding was not a reflection of Unitaid's performance but of the priorities in global health. Norway is also in support of the discussions on coordination among key global health actors in which Unitaid is involved in as well. Norway has invested heavily in the Global Financing Facility (GFF) and Coalition for Epidemic Preparedness Innovations (CEPI), both of which are strong in innovative financing mechanisms.
- THE REPRESENTATIVE OF CHILE explained that Chile's 2018 contribution to Unitaid was delayed due to the change of government in March in Chile. She welcomed the visit to Chile with authorities as well as the meetings in the margins of WHA. She agreed that Unitaid should be innovative in looking towards other resources but emphasised that it was essential to ensure stability of existing contributions.
- THE REPRESENTATIVE FROM AFRICAN COUNTRIES thanked the Secretariat for Unitaid's support and projects in HIV and co-infections. On behalf of the Moroccan government, she invited the Unitaid Executive Board to hold its next Board meeting in Marrakesh. The offer was warmly welcomed by Board Members.
- THE REPRESENTATIVE OF THE COMMUNITIES suggested that the impact stories include real life stories with powerful messages (e.g. during PEPFAR's replenishment, a story on adolescents living with HIV was shared).
- THE REPRESENTATIVE OF SPAIN stated that the 2018 contribution to Unitaid would be difficult to materialise but that he is more confident for 2019. He suggested thinking carefully about the reasonable and optimal size of the organization and cautioned on new types of financing as it would impact the Board's governance.
- THE REPRESENTATIVE OF KOREA appreciated Unitaid's efforts to engage with new donors and understood that the efforts with Japan would not materialise soon. She encouraged the Secretariat to take extra measures to expand Unitaid's donor base and asked whether there was any prerequisite to become a new Board member.
- THE REPRESENTATIVE OF BRAZIL confirmed that there was a law adopted by the Congress about Brazil's contribution. Regarding new donors, she wondered whether Unitaid was ready to enlarge its Board.

Following the Board Members' comments, THE EXECUTIVE DIRECTOR reminded that Unitaid was in a different situation today as its commitment room reduced considerably and Unitaid was hence in a position to ask for new funding. Regarding the working group, he cautioned that it needed to be very clear about what it would discuss. To his view, Unitaid now has the right tools and solid results to present, but political action is now needed. He mentioned the three aspects of the conversation: 1) how to "pitch" the Unitaid story (investment case and results) 2) the role/place for new donors (governance aspects) and more importantly 3) how can the Board help deliver. He explained that the question of the capacity was a sound one, including at Board level - does Board have the capacity to reach Ministers and decision makers in their countries and to trigger political discussion with other countries. He asked Board Members to join forces to promote Unitaid, as they were doing for other institutions. He also requested clarity on the governance discussion as Unitaid was looking towards new potential donors.

In conclusion, the Chair indicated that the discussion on Resource Mobilisation should be pursued. She explained that resource mobilisation was part of the responsibilities of the Chair which she will take on very seriously. Though she was not clear about the exact format that it should take (working group, task

force etc), she confirmed that a number of technical aspects should be addressed such as the type of funding, the governance implications and how the Board can provide support. Regarding the Board's expansion, the CHAIR stated that this would be discussed the following day during the governance session.

The Executive Board acknowledged Unitaid's resource mobilisation efforts and welcomed the more predictable funding. The Board agreed with the need to ensure its support at high political level. Several members expressed support for the establishment of a working group on resource mobilisation and it was suggested that this would be discussed during a call.

The African constituency, on behalf of the Moroccan government, proposed to host the next Board meeting in Marrakech.

10. Closed session

This session was open to Board Members and Alternates only. No minutes taken.

11. Governance

THE CHAIR OF THE GOVERNANCE WORKING GROUP (GWG) reminded the history and context behind the creation of the GWG and provided an update on their work including their 19 June 2018 meeting. She thanked the Secretariat and WHO Legal for the support provided. She reminded the Board Members that the GWG was an open working group that any Board Member could attend.

She reminded the main tasks that the GWG had been mandated with:

- Revision of the BOPs (for decision)

Following review and benchmarking of governance arrangements with comparable organizations, the GWG had recommended that the existing Unitaid Bylaws and Board Operating Procedures be repealed and replaced with a single new set of Board Operating Procedures, to rationalize, clarify and update Unitaid's governance framework.

The version that is brought forward to the Board for its approval comprises two final modifications: 1) clarification regarding the possibility to invite experts to join Committee meetings and 2) clarification regarding the dissemination of Committee documents (they will be shared with all Board members for transparency purposes). The GWG clarified that the GWG recommends that Unitaid's existing Board Operating Procedures and Bylaws be repealed and replaced by the proposed Board Operating Procedures.
- Revision of the Conflict of Interest policy

It was noted that Unitaid's existing policy on Ethics and Conflict of Interest adopted by the Board in March 2007 does not reflect Unitaid's current governance framework and should be replaced. The GWG has made some progress in this work but further work within the GWG will be necessary to find alignment on the key issues, before a new policy can be proposed for adoption by the Board. It was, therefore, proposed by the GWG to establish a sub-group with responsibility for taking forward the work to refine Unitaid's approach to the management of declarations of interest, with a view to submitting proposals in this area to the GWG. The sub-group would also be responsible for managing these declarations of interest.

- Reflection on Board Composition

The Chair of the GWG reported on the discussions of the GWG concerning Board composition, including how to accommodate new Unitaid donors into Unitaid's governance framework. She reported that the GWG has asked the Secretariat to develop a paper setting out options with respect to Board composition, based on the points raised by GWG members during the GWG meeting on 19 June 2018.

In acknowledgment of the Republic of Korea's longstanding commitment to Unitaid and of the current practice, the GWG recommended that the Board endorse a change of name of the "Asian countries" Board seat to "Republic of Korea" and adopt a revised Constitution to reflect the change (for decision).

An additional resolution on the Board and Committee meeting dates for 2019 was presented to the Board. It was decided that this decision should be made later through electronic vote. It was also decided to place PSC meetings prior to FAC meetings.

Discussion

THE EXECUTIVE BOARD congratulated the GWG for its work and thanked the GWG Chair for her report. The Chair of the Executive Board noted that it must be open for the Executive Director to determine the level of support that the Secretariat can provide to the Working Group and offered her assistance in relation to the GWG's mandate to review Unitaid's conflict of interest policy.

THE CHAIR OF THE BOARD expressed the Executive Board's warm welcome to the Republic of Korea and asked the representative of the Republic of Korea to convey the Board's sentiments to the Government of the Republic of Korea.

THE REPRESENTATIVE OF THE REPUBLIC OF KOREA conveyed her sincere thanks to the Chair, the Executive Board and the GWG for the recognition of the Republic of Korea's longstanding commitment. She reflected on the Republic of Korea's commitment to Unitaid and the desire to increase Unitaid's focus on the Asian region. She confirmed that the Republic of Korea invite the Board to host its 31st Executive Board meeting in Seoul in June of 2019.

The Executive Board congratulated the Governance Working Group for its work and adopted the following resolutions:

Resolution 2: Board Operating Procedures; Resolution 3: Extension of the Vice-Chair's mandate; Resolution 4: Seat of the Republic of Korea in the Unitaid Executive Board and Resolution 6: Creation of a GWG sub-group on the approach to the management of Board declarations of interests. The Board invites the constituencies of the NGOs, Brazil, France and WHO to each nominate a named representative to the sub-group.

The Republic of Korea proposed to host the 31st Executive Board meeting in Seoul in June 2019

12. Investment Opportunities

The SENIOR ADVISOR TO THE EXECUTIVE DIRECTOR started the presentation by stating that in certain cases, some flexibility of the model is needed and that Unitaid is seeking the Board's guidance on two specific partnership opportunities. Partnership opportunities are growing for Unitaid, thanks to Unitaid's growing reputation and the fact that Afls are communicated broadly and attract high interest of

partners. Unitaid is also working on establishing a process to operationalize partnership opportunities (principles and modalities) for discussion at the PSC in October 2018.

She then presented some principles that Unitaid considered for these partnership opportunities, namely the fit with Unitaid (mandate, strategy and investment plan) and the public health need and impact (global health impact and opportunities for co-funding). This is underpinned by an overall cost-benefits analysis and the size of the investment that is an additional factor considered.

1) Anti-Microbial Resistance (AMR) Diagnostics Accelerator on Fever Management with FIND

This opportunity arose from Unitaid's recognition as a strong player in AMR. There is a need for practical and actionable solutions to address AMR and an increased recognition of the role of diagnostics in the fight against AMR as the first prescription.

The Accelerator would provide an end-to-end solution from the development of new diagnostics to ensuring that access will take place. It fits with Unitaid's strategic agenda and approved Afls and there is a co-funding opportunity. Fever management would be used as a proof of concept through the approved Afl (specifically, the component of this Afl focused on tools to distinguish bacterial and non-bacterial infections, with US\$ 10 million set aside for this). The main benefits are that it provides a practical end-to-end solution in AMR diagnostics, it links R&D and access, it integrates RMNCH & AMR and it leverages additional resources. It would also offer an opportunity to move fast and respond to a pressing need versus a competitive process that would take several months.

She then explained the key parameters of the partnership model: i) equal funding by Unitaid (US\$ 5 million) and FIND (US\$ 5 million) for initial R&D activities, with the aim to mobilise matching funding to support eventual access-related activities through Unitaid's normal competitive processes, ii) preferred partnership with FIND on accelerating R&D leveraging their own competitive processes for selection of developers, iii) Unitaid would host the Accelerator and administer funds, and iv) a joint steering committee would provide oversight.

2) Elton John AIDS Foundation and Children's Investment Fund Foundation

The DIRECTOR OF OPERATIONS presented the second partnership opportunity. ClIFF/EJAF invited Unitaid to participate in a specific initiative to generate demand for HIV self-testing, specifically among young men. This fits within the approved Afl on HIV self-testing as well as the ongoing projects (STAR, Solthis ATLAS and MTV Alive Foundation). The partnership would provide an opportunity in Eastern Africa, with a first pilot in Kenya given it has one of the largest epidemics and it has adopted a policy on HIV self-testing. It would provide further evidence on types of demand generation that are most evident, and it would reinforce Unitaid's position in HIV self-testing.

The total funding for the Challenge Fund is US\$ 6 million (ClIFF US\$ 3 million, EJAF US\$ 1.5 million, Unitaid US\$ 1.5 million). The Challenge Fund would solicit proposals and competitively select projects for demand creation, considering that they should be transferrable to other countries in the region. The expected impact is to increase the market shaping impact through demand creation, to sustain or reduce prices and attract additional suppliers, and to leverage Unitaid's investment by threefold.

Discussion

The Board recognized that some flexibility was needed in certain cases. Board members felt that the EJAF/CIFF partnership opportunity was quite clear as it was more project based and involved a lower co-funding amount. They saw its clear link with Unitaid's HIV self-testing portfolio and the benefits for increasing Unitaid's visibility in this area. Board members felt less comfortable with the Accelerator partnership as it was less tangible and not clear how additional resources would be leveraged. The Board appreciated the proposed partnership criteria, while acknowledging that further work was needed to develop a framework for the PSC's consideration in October 2018.

Additional comments raised by Board members included the following:

- THE CHAIR emphasized the need to find additional funding, including co-funding. She asked clarification on how these opportunities were exceptions and what would be the next steps. She agreed with the Secretariat's proposal to submit a framework for approval.
- THE REPRESENTATIVE OF THE FOUNDATIONS appreciated the Secretariat's transparency and the proposed principles as a good start. She suggested other criteria such as thresholds on funding, how many donors would be leveraged, how to leverage expertise of other donors, and the degree to which Unitaid may be willing to cede management or execution to other organizations. She was comfortable with the EJAF/CIFF opportunity but less comfortable with the Accelerator proposal. She suggested that the idea of the Accelerator could be pitched to other donors to explore co-funding.
- THE REPRESENTATIVE OF THE UNITED KINGDOM appreciated applying the same rigour and analysis to opportunities and agreed with the proposal to include a financial threshold. He recommended having a budget line that would provide flexibility for such opportunities. Regarding the Accelerator opportunity, he indicated that he was not comfortable and asked how this was linked to the portfolio update where FIND's overall assessment had worsened. He also clarified that FIND had made a proposal for their co-funding part to DFID, which had not yet been approved. He was more comfortable with the EJAF opportunity in line with other Board members comments.
- THE REPRESENTATIVE OF FRANCE welcomed the idea of opening a channel for the Secretariat to deal with this type of opportunities. Though she recognised that it was premature for the Board to give a green light to the Accelerator project, she also suggested that the Secretariat could continue working on the topic and suggested that the support of further partners would be needed. She asked whether for diagnostics, much is available in late-stage development, and if a call for proposals may help stimulate innovation.
- THE REPRESENTATIVE OF THE COMMUNITIES agreed with the earlier comments and raised an additional question on how intellectual property considerations were taken into account within the Accelerator project.
- THE REPRESENTATIVE OF WHO reiterated its support to the Secretariat to explore these opportunities. He further confirmed that they had undergone FENSA review. He agreed with the proposal to develop principles for engagement, such as the use of Unitaid's brand and how to protect it, the duration of partnerships, the minimum governance arrangements, periodic reviews and by which entity they would be undertaken, how to ensure that it doesn't create privileged partnership if the partner applied to future calls for proposals, how to enable transfer of funds to these entities.
- THE REPRESENTATIVE OF BRAZIL agreed with the importance to search for new opportunities and saw EJAF as a pilot opportunity to inform the development of future opportunities. She agreed with other Board members comments on the two opportunities presented. In addition to the principles mentioned, she felt that the communication strategy was an important factor to consider.

- THE REPRESENTATIVE OF THE NGOS emphasized the need to have the right balance between respecting the operating model and having more flexibility. He agreed with comments regarding the Accelerator and cautioned on the risk of losing the usefulness of the validation process through filters (such as the PRC review). Regarding the EJAF project, he agreed that the approval should be given soon so that it could be launched at the IAS conference to increase the profile of Unitaid. He asked for more clarity regarding the Hello Tomorrow initiative. He agreed with having funding (up to an agreed threshold) set aside for partnership opportunities and that this could be included in the principles/framework for partnership.
- THE VICE CHAIR asked what approval was needed from the Board in order to announce the EJAF partnership at IAS. She confirmed that principles for seizing these kinds of opportunities should be agreed upon.

In response to the comments and questions raised by Board members on the Accelerator opportunity, the Secretariat clarified that the vehicle was broader but that as initial proof of concept it was proposed to focus on an already approved Afl (fever management), specifically on the differentiation between bacterial and non-bacterial infections. Regarding the question on the pipeline, only a few products are ready and not much can be done regarding access just yet. For this reason, supporting late stage R&D would be a good way to spark further innovation.

THE EXECUTIVE DIRECTOR emphasized the importance and timing of this discussion. Unitaid has built a strong model but certain situations arise where we have concrete opportunities that do not clearly fit within the model. He explained that should the Board decide not to go ahead with these opportunities, the Secretariat will consider other options, but time and co-funding could be lost. He confirmed that the Secretariat would come back to the PSC/FAC with a framework/principles for opportunistic interventions, taking into account the points raised by the Board members. Regarding the EJAF/CIFF opportunity, the Secretariat will submit the project for go-ahead to the Board.

The Executive Board thanked the Secretariat for bringing two partnership opportunities for its guidance. Board members agreed that the EJAF/CIFF opportunity was a good fit but did not agree with pursuing the Accelerator opportunity. The Secretariat hence confirmed that it would submit the EJAF/CIFF project for go-ahead to the Board. The Board requested that the Secretariat develop partnership guidelines, for review and discussion at the next PSC.

12 bis. Report from the Proposal Review Committee (PRC) Chair *(additional agenda item)*

On the PSC Chair's suggestion, the Chair invited the Proposal Review Committee (PRC) Chair to give an update to the Board on its recent work and developments. It was agreed that this update would become a regular item on the Board agenda, for which a pre-read will be provided in the future.

THE PRC CHAIR explained that following the PRC replenishment, an induction meeting gathering all PRC members (core and disease specific) had been organized in order to present Unitaid's model, remind about the principles of independence, the joint review process etc. He indicated that the conflict of interest policy had been carefully applied. As a result of, 2 PRC Disease/Issue-Specific members had

opted to resign from the PRC as they had taken up roles in Unitaid-funded organizations. It was noted that of the two open positions on the PRC, one had been filled by the alternate member, however, the other remained open because the remaining alternate member had declared a material conflict of interest. The PRC Chair suggested that, instead of trying to fill the vacant Disease/Issue-Specific Member seat with expertise in IP issues, the PRC will engage additional external expertise as needed in accordance with the PRC TOR.

THE PRC CHAIR reported on his experience of providing individual feedback to proponents that were not ultimately selected. He highlighted that managing the dialogue with such proponents was challenging and, in particular, it was difficult to avoid being drawn into a debate over the merits of a proposal. It was suggested to provide general feedback to all proponents via a conference call. Finally, he congratulated the Secretariat on the quality and crispness of the final grant packages, highlighting that it was easy to identify where issues had been addressed.

Discussion

The Board thanked the PRC Chair for his report and there was general agreement amongst Board Members on the value of such updates from the PRC becoming a permanent agenda item.

SEVERAL BOARD MEMBERS (NGOs, Foundation, African countries) suggested to defer to the PRC Chair's judgment with regard to the selection process for the IP expert. The representative of the African countries suggested that the Board also explore its own network to help reach out to a diversity of profiles. The representative of Korea highlighted the need to better ensure geographical diversity within the PRC in the future. The representative of the Communities insisted that community skills be better reflected in the composition of the PRC.

Regarding the feedback to proponents, THE REPRESENTATIVE OF THE NGOS emphasized the positive value of such feedback, notably in terms of capacity building and enabling future engagements.

The Executive Board thanked the PRC Chair for his report and agreed for the PRC update to become a standard agenda item of Board meetings.

13. Update on Investment Plan

THE BOARD VICE CHAIR invited the Team Lead Strategy to give an update on Unitaid's investment plan.

Referring to the two pre-reads (EB29/2018/9 and 10), THE TEAM LEAD STRATEGY reminded that the investment plan was a living document. She explained the plan contains sections on: opportunities and context, prioritisation methodology, and the consolidated plan which reconciles planned funding opportunities with the funding forecast.

She reviewed the pipeline of investment opportunities for 2018, 2019 and 2020. She noted that the proposed figures were starting points subject to change during negotiations. For 2018, the total adjusted scenario amounts to US\$ 283 million. The Team lead Strategy reviewed active areas for interventions such as advanced HIV disease, fever management and vector control tools and explained the key changes to the plan since the last presentation (mostly changes in timing or in the estimated amount). Within the area of advanced HIV disease, she described a recent deal with Cipla to decrease

the price of a fixed-dose combination for TB co-infection as the first market intervention that Unitaid did unilaterally; the price drop was an exciting breakthrough and will increase access to TB prevention in people living with HIV.

Looking ahead to 2019 (adjusted scenario amounting to US\$ 305 million), she focused on the key themes being explored as potential future opportunities for Unitaid: long-acting technologies, malaria elimination (single-dose radical cure), and innovative diagnostics. Funding to be committed in support of the recently re-launched TB call for proposals was brought forward from 2020 and is now reflected in 2019. Looking at the 2020 investment plan (adjusted scenario amounting to US\$ 285 million), she indicated that investments could be expected to focus on new Afis such as molecular diagnostics, further work on long-acting technologies, coinfections and comorbidities, fever management, innovation challenges, and further investment in MPP and WHO enablers.

She then presented the reconciliation of funds, explaining that for the three years, all funds available are expected to be used to fund the described pipeline. The adjusted scenario shows a pipeline exceeding the available funds, this is to show that a more robust pipeline has been identified should additional funds be received, and could also be used as a resource mobilisation tool.

Finally she presented a slide on where Unitaid could be in 2020, with implementation of the proposed investment plan: 1) robust portfolio grown by 1/3 (from US\$ 1.05 billion to US\$ 1.38 billion ; 2) US\$ 200 million in new TB grants; 3) by 2020 US\$500 million in grants that directly benefit children, 4) doubling investment in malaria (from US\$235 million to US\$400 million); 5) putting people at the center of care, with integrated approaches reflected throughout most projects 6) a coherent approach to HIV, with over \$600 million in grants to prevent, test, treat, and monitor HIV – and address coinfections.

Discussion

THE VICE-CHAIR AND BOARD MEMBERS commended the presentation and highlighted the importance of these documents for the Board. They agreed that the format of the presentation to the Board was appropriate. France as Chair of the PSC suggested that further discussion of strategic rationale and trade-offs be undertaken at the PSC; this was supported by the NGOs, the Foundations and the UK.

Other comments included:

- THE ALTERNATE BOARD MEMBER FOR BRAZIL raised a technical question about CD4 count and fixed-dose combinations in relation to WHO guidelines.
- THE REPRESENTATIVE OF FRANCE asked for clarification on figures presented in the various documents.
- THE REPRESENTATIVE OF THE NGOS raised a number of specific issues, including: 1) IP: NGOs welcomed the additional US\$7 million in this field 2) Hepatitis and coinfections: questioned what the Secretariat envisaging to unlock in that area; flagged issues in hepatitis B; 3) Advanced disease: the NGOs found the context on the Cipla deal to be helpful; 4) Malaria: queries on the need for further demand creation work; 5) TB: NGOs appreciated the TB approach and felt this would contribute to Unitaid's positioning at the High-level meeting on TB in September.
- THE REPRESENTATIVE OF WHO reiterated appreciation of the context for the Cipla deal, and asked whether the prices negotiated with Cipla had been communicated with countries.

- THE REPRESENTATIVE OF THE FOUNDATIONS commended the investment plan as a useful tool that would enable the Board to endorse priorities and resource allocation for the coming year, knowing that the situation in future years may evolve.
- THE REPRESENTATIVE OF THE COMMUNITIES sought clarification on the amount allocated to TB.

THE VICE-CHAIR concluded that the investment plan was a very exciting piece of work, and central to Unitaid's work. She suggested discussing further at the PSC, for the committee to better understand selection and prioritization, and to consider how the plan (especially the adjusted / upside scenario) could be leveraged in resource mobilisation discussions.

THE TEAM LEAD STRATEGY thanked the Board for its input and indicated that she looked forward to further reviewing the investment plan with the PSC. She suggested to follow up bilaterally with regard to more specific technical questions. She indicated that the work in progress would position Unitaid well in all areas including TB.

The Executive Board agreed that the investment plan should be revisited as a standard agenda item. There was support for more in-depth strategic discussions of content at the PSC.

14. 2017 Key Performance Indicators (KPI) report

The TEAM LEAD RESULTS reminded that this was the first time the Secretariat reports against the new KPI framework and that it is the first time that KPIs have been discussed at the Board in this way. When presenting the strategic KPIs, he made an analogy with a domino chain, meaning that small changes can lead to a chain reaction that catalyze high impact down the value chain. Many steps need to be overcome before new products introduction leads to impact. He reminded that Unitaid is positioned between late-stage Research & Development and delivery agencies and our strategic objectives of innovation, access and scalability spreads across a wide range of barriers to access. The KPIs were established with a specific Unitaid "flavour", following the progress we make along the value chain in innovation, access, scalability, impact and equity. He then presented what we are measuring under each of the strategic KPIs. He also reminded that strategic KPIs are measured at the point of grant closure as this is when sufficient data and evidence is typically available to measure success. Strategic KPIs offer clarity on the outcomes of our investments, and project scale up of innovative products and approaches. The VALUE FOR MONEY MANAGER then presented the Strategic KPI results for 2017. All projects with a grant end date in 2017 were in scope of reporting, as was WHO Prequalification, which is a benchmark for progress against the access barrier – Quality. He summarised that there were important achievements in terms of project outcomes, but also certain limitations regarding scale-up, specifically in relation to the original project design which was less focused on transition and scale-up of innovative products and approaches; thus limiting the scale-up expected. He presented some detail on the overall Strategic KPI performance, noting that despite there being limited evidence of mission level impact, in some cases there is a need for complementary investments to come to fruition, e.g. in respect of point-of-care diagnostics, and childhood TB treatment.

The GRANT PERFORMANCE MANAGER presented the operational KPIs. He highlighted the importance of 2017 as the first year where all tools needed to fully implement the new model were in place and where there were metrics in place for monitoring that performance against targets. He mentioned three important lessons learned from the analysis of 2017 operational performance against KPIs, namely that there was good achievement against established processes (e.g. audit status, risk assessments, and staff

development), that there was good progress towards 2019 targets (e.g. disbursement efficiency, grantee responsiveness) and that Unitaid had started improving on KPIs that missed their 2017 target. He then focused on three specific KPIs in more detail (KPI A, KPI C and KPI D). Interventions already put in place made in response to 2017 results are already leading to substantial improvement. In summary, it was noted that the operational KPIs have helped strengthen internal ways of working, as they offer clarity on what good performance looks like in practice, in the process of managing a diverse portfolio of projects.

The TEAM LEAD RESULTS concluded that systems were now in place, that KPIs are linked to Unitaid's ultimate impact, that it required a change in mind-set at the Secretariat and grantee level, and that the KPI report would be published by end June.

Discussion

The KPI report was widely appreciated and the annex with background on each grant was considered useful. However, Board members felt that the KPI report did not sufficiently reflect lessons learned and commonalities across different grants. The KPI report was recognized as a useful tool for communication on success but Board members felt that it should also guide Unitaid in its everyday work in terms of what could be improved.

Additional points were raised as follows:

- THE REPRESENTATIVE OF THE FOUNDATIONS regretted that the KPI report focused only on seven grants as she felt it was a missed opportunity not to look at the impact we have across all the grants given the information that is available.
- THE REPRESENTATIVE OF THE UNITED KINGDOM stated that its log frame was closely aligned with Unitaid's KPI framework, which is a positive step. Looking ahead, it would be helpful to have more in-depth discussion of the challenges being faced across the portfolio, and how that ultimately affects the overall impact delivered, as measured through the Strategic KPIs to provide greatest clarity to the Executive Board on Unitaid's performance.
- THE REPRESENTATIVE OF THE COMMUNITIES highlighted that it takes a long time to see impact in terms of KPIs that reflect legal issues and similar investments such as intellectual property.

In response to the comments raised by Board members, the Secretariat cautioned about the expansion of the KPI reporting as they act as a benchmark for end of project performance. However, there is scope to join the dots further, to fully convey the progress being made by Unitaid and to pinpoint challenges being faced. This includes further connection to an arsenal of measures to follow-up and monitor grants, such as the project evaluations, the grant one-pagers, and impact stories. The Secretariat also clarified that 2017 was a transition year with a small number of lower-value grants but that in future KPI reporting, the projects in scope would be cover the entire spectrum of the value chain including scalability and impact. Regarding providing full clarity on all of the challenges being faced during the delivery of projects, the Secretariat is using external evaluations to inform KPIs, providing an independent perspective and reassurance. The Secretariat suggested that a future Executive Board session on challenges and lessons learned could be provided, which would supplement the information presented as part of the KPI reporting..

The Executive Board appreciated the KPI report and thanked the Secretariat for its work. The Board asked that challenges and lessons learned are fully reflected in the KPI and broader grant portfolio reporting in the future.

15. AOB & Closure of the Executive Board meeting

The other items discussed before the closure of the meeting were as follows:

- Board Members expressed their gratitude and congratulations to the incoming Chair for the great job in chairing the meeting.
- THE REPRESENTATIVE OF THE COMMUNITIES informed that the Community Dialogues was organized by the Communities delegation from 29-30 August in Ivory Coast and that the invitation was open to all Board members.
- THE REPRESENTATIVE OF BRAZIL thanked the Executive Director for Unitaid's achievements under his leadership as well as the team's work and enthusiasm. She also thanked all Board members, recognizing that everybody was pursuing the same objective, and expressed special gratitude to the Chair for stepping up in this special situation. She concluded by encouraging Unitaid to continue in a mode of transparency.
- The CHAIR informed that Morocco would work with the Secretariat on the proposition to hold the December Board meeting in Marrakesh, bearing in mind the costs. The same would be valid for the offer by Korea in 2019. She also thanked the representative of Morocco (Alternate Board Member for African countries), Mr. Khalid Atlassi, for his contribution over several years as this was his last board meeting. Mr. Atlassi thanked the Chair and indicated that the Moroccan government would do their utmost to ensure that the Board meeting would be a success.
- The EXECUTIVE DIRECTOR concluded by thanking the Board for its comments and support to the Secretariat, reminding everybody that we are all working together towards a bigger common goal.

The 29th meeting of the Unitaid Executive Board was concluded on 21st June at 15:15.

Annex: List of Participants

BOARD MEMBERS / REPRESENTATIVES

CHAIR a.i.

H.E. Mrs Marta Mauras

Telephone No.: +41 79 326 2567
Email: maurasm@unitaid.who.int

AFRICAN COUNTRIES

Lindiwe Makubalo

Health Attaché
Permanent Mission of South Africa to the UN

Telephone No.: +41 22 843 54 79
Email: lmakubalo@gmail.com

Khalid Atlassi

Counsellor
Permanent Mission of Morocco to the UN

Telephone No.: +41 22 791 81 81
Email: atlassi@mission-maroc.ch

Ibtissam Khoudri

Manager, National Viral Hepatitis Programme
Ministry of Health of Morocco

Telephone No.: + 212 5 37 67 13 20
Email: ibtissamkhoudri@gmail.com

ASIAN COUNTRIES – Republic of Korea

Hyunjoo Oh

Director-General, Development Cooperation Bureau
Ministry of Foreign Affairs

Telephone No.: +82221008046
Email: hjoh94@mofa.go.kr

Keunwang Nah

Second secretary
Multilateral development cooperation &
Humanitarian Assistance Division
Development Cooperation Bureau, Ministry of Foreign Affairs

Telephone No.: +82221008461
Email: kwna@mofa.go.kr

Jongkyun Choi

Minister Counsellor
Permanent Mission of the Republic of Korea

Telephone No.: +41 22 748 00 32
Email: jkchoi21@gmail.com

BRAZIL

H.E. Mrs Maria Luisa Escorel de Moraes

Ambassador Deputy Permanent Representative
Permanent Mission of Brazil to the UN

Telephone No.: +41 22 322 5040
Email: luisa.escorel@itamaraty.gov.br

Adele Benzaken

Director STI, HIV/Aids and Viral Hepatitis Department
Ministry of Health of Brazil

Email: adele.benzaken@aids.gov.br

Igor Barbosa

Second Secretary
Permanent Mission of Brazil to the UN

Telephone No.: +41 22 332 52 36
Email: igor.barbosa@itamaraty.gov.br

CHILE

H.E. Mr Juan Eduardo Eguiguren
Ambassador and Permanent Representative of Chile
Permanent Mission of Chile to the UN

Telephone No.: +41 22 919 88 00
Email: misginchile@minrel.gob.cl

H.E. Mrs Carla Serazzi
Ambassador and Permanent Representative of Chile
Permanent Mission of Chile to the UN

Telephone No.: +41 22 919 88 00
Email: cserazzi@minrel.gob.cl

Rosalia Framil
Health Attachée
Permanent Mission of Chile to the UN

Telephone No.: +41 22 919 88 02
Email: rframil@minrel.gob.cl

COMMUNITIES LIVING WITH THE THREE DISEASES

Kenly Sikwese
Programme Coordinator
African Community Advisory Board (AFROCAB)

Telephone No.: +260 966 261 218
Email: ksikwese@gmail.com

Faith Nakigudde
Dorcus Faith Ministries

Telephone No.: +256 705 846 804
Email: knakigood@gmail.com

Wim Vandevelde
Liaison Officer, Communities Delegation
Global Network of PLHIV, South Africa

Telephone No.: +27 761 170 238
Email: wim@eatg.org

Blessi Kumar
CEO, Global Coalition of TB Activists
India

Telephone No.: ++91 9818761110
Email: blessi.k@gmail.com

Rosette Christine MUTAMBI
Member of Parliament, Uganda

Email: rosemutambi@gmail.com

John Rock
APN+ Advisor, Australia

Telephone No.: + 61 414 527 111
Email: johnrock@optusnet.com.au

FRANCE

H.E. Mrs Stéphanie Seydoux
Ambassador for Global Health
French Ministry of Europe and Foreign Affairs

Telephone No.: +33 1 43 17 63 71
Email: stephanie.seydoux@diplomatie.gouv.fr

Catherine Dauphin-Llorens
Focal Point for Unitaid
llorens@diplomatie.gouv.fr
French Ministry of Europe and Foreign Affairs

Telephone No.: +33 1 43 17 71 08
Email: catherine.dauphin-

Justine Bettinger
Advisor to the Ambassador for Global Health
French Ministry of Europe and Foreign Affairs

Telephone No.: +33 1 43 17 70 15
Email: justine.bettinger@diplomatie.gouv.fr

FOUNDATIONS (GATES)**Blair Hanewall**

Deputy Director
Innovation Introduction, Integrated Delivery
Bill & Melinda Gates Foundation

Telephone No.: +33 1 43 17 60 76
Email: blair.hanewall@gatesfoundation.org

NGOs**Diarmaid McDonald**

Access to Medicines Researcher

Telephone No.: +44 20 7324 4785
Email: accessdiarmaid@gmail.com

Fifa Rahman

Health Poverty Action

Telephone No.: +44 79 5580 9114
Email: fifarahman@outlook.com

Robin Jakob

Liaison Officer
Stop AIDS UK

Telephone No.: +44 20 7324 4783
Email: robin@stopaids.org.uk

Morgane Ahmar

Advocacy Officer
Coalition Plus – ALCS (Morocco)

Telephone No.: +44 20 7324 4783
Email: mahmar@coalitionplus.org

Khalil Elouardighi

Senior Policy Analyst
Coalition Plus (France)

Telephone No.: +33 1 49 29 44 88
Email: ke@coalitionplus.org

Thiru Balasubramaniam

Geneva Representative
Knowledge Ecology International

Telephone No.: +44 20 7324 4783
Email: thiru@keionline.org

Austin Arinze Obiefuna

Executive Director
Afro Global Alliance Ghana

Telephone No.: +233242-166414
Email: austinos7@gmail.com

Philip Waweru Mbugua

Executive Director of National Organization
of Peer Educators (NOPE)

Telephone No.: +44 20 7324 4783
Email: pmbugua@nope.or.ke

Sharonann Lynch

HIV & TB Policy Advisor
MSF - Access Campaign

Telephone No.: +1 646 824 3066
Email: sharonann.lynch@gmail.com

Christa Cepuch

MSF

Email: Christina.cepuch@geneva.msf.org

Pavel Aksenov

Russian Harm Reduction Network

Email: pavel@esvero.ru

Edward Mwangi

Kenya NGO Alliance Against Malaria

Email: edward.mwangi@kenaam.org

John Mduli
Community Engagement Manager
Aurum Institute, South Africa

Email: jmduli@auruminstitute.org

NORWAY

Björg Sandkjær
Senior Adviser
Global Health Initiatives
Norwegian Agency for Development Cooperation

Telephone No.: +47 22 24 03 47
Email: bjorg.sandkjaer@norad.no

SPAIN

Martin Remon Miranzo
Counsellor
Permanent Mission of Spain to the UN in Geneva

Telephone No.: + 41 22 909 2830
Email: martin.remon@ties.itu.int

UNITED KINGDOM

Sarah Boulton
Global Health Funds Team Leader
Department for International Development, DFID

Telephone No.: +44 207 023 1735
Email: s-boulton@dfid.gov.uk

Iain Jones
Economic Adviser
Global Funds Department
Department for International Development DFID

Telephone No.: +44 207 023 0301
Email: i-jones@dfid.gov.uk

Olivia Smith
Deputy Programme Manager
Global Funds Department, DFID

Telephone: +44 79 797 25837
Email: o-smith@dfid.gsx.gov.uk

WHO

Ren Minghui
Assistant Director General, Communicable Diseases

Telephone No.: +41 22 791 1099
Email: renm@who.int

Issa Matta
Senior Legal Officer

Telephone No.: +41 22 791 8232
Email: mattai@who.int

Zsofia Szilagyi
Technical Officer
Office of the Assistant Director-General
for Communicable Diseases

Telephone No.: +41 22 791 1332
Email: szilagyiz@who.int

PROPOSAL REVIEW COMMITTEE

Andy Gray
Chair, PRC

Telephone No.: +27-31-2604334/4298
Email: graya1@ukzn.ac.za

INVITED GUESTS

SWITZERLAND**Sabine Unternährer**

Telephone No.: +41 58 46 16041

Advisor for Health R&D and Access
 Federal Department of Foreign Affairs (FDFA)
 Swiss Agency for Development and Cooperation (SDC)

Email: sabine.unternaehrer@eda.admin.ch**UNITAID SECRETARIAT****Lelio Marmora**

Executive Director

Telephone No.: +41 22 791 2265

Email: marmoral@unitaid.who.int**Philippe Duneton**

Deputy Executive Director

Telephone No.: +41 22 791 3574

Email: dunetonp@unitaid.who.int**David Curry**

Director, Finance and Administration

Telephone No.: +41 22 791 3650

Email: curryd@unitaid.who.int**Mauricio Cysne**

Director, External Relations

Telephone No.: +41 22 791 1821

Email: cysnem@unitaid.who.int**Robert Matiru**

Director, Operations

Telephone No.: +41 22 791 3971

Email: matirur@unitaid.who.int**Janet Ginnard**

Team Lead, Strategy

Telephone No.: +41 22 791 3082

Email: ginnardj@unitaid.who.int**Sanne Fournier-Wendes**

Senior Adviser to Executive Director

Telephone No.: +41 22 7921 2481

Email: wendess@unitaid.who.int**Sonia Hilton-Mathew**

Senior Legal Officer

Telephone No.: +41 22 791 4225

Email: hiltons@unitaid.who.int**Vincent Bretin**

Team Leader, Results

Telephone No.: +41 22 791 1875

Email: bretinv@unitaid.who.int**Andrew Hurst**

Team Lead, Communications

Telephone No.: +41 22 791 3859

Email: hursta@unitaid.who.int**Judith Polsky**

Team Lead, Operations

Telephone No.: +41 22 791 3039

Email: polskyj@unitaid.who.int**Eva Nathanson**

Senior Programme Manager

Telephone No.: +41 22 791 3084

Email: nathansone@unitaid.who.int**Timothy Ryan**

Grant Performance Manager

Telephone No.: +41 22 791 1978

Email: ryant@unitaid.who.int

Ross Leach
Manager, Value for Money

Telephone No.: +41 22 791 4462
Email : leachr@unitaid.who.org

Katherine Hencher
Programme Manager

Telephone No.: +41 22 791 4727
Email : hencherk@unitaid.who.int

Julien Pouille
Team Lead, Risk Management & Grant Finance

Telephone No.: +41 22 791 4557
Email : pouillej@unitaid.who.int

Claudia Diebold
Executive Officer

Telephone No.: +41 22 791 2109
Email: dieboldc@unitaid.who.int

Kristen Dorman
Legal Officer

Telephone No.: +41 22 791 2356
Email: dormank@unitaid.who.int

Jason Marett
Legal Officer

Telephone No.: +41 22 791 2182
Email: marettj@unitaid.who.int

Loveena Dookhony
Monitoring & Evaluation Officer

Telephone No.: +41 22 791 2026
Email: dookhonyl@unitaid.who.int

Carol Masciola
Communications

Email: masciolac@unitaid.who.int

Board Support:

Marina Hue
Board Relations and Governance Manager

Telephone No.: +41 22 791 1884
Email: huem@unitaid.who.int

Oksana Koval
Governance Officer

Telephone No.: +41 22 791 1361
Email: kovalo@unitaid.who.int

Laetitia Sieffert
Partnerships Officer

Telephone No.: +41 22 791 4748
Email: sieffertl@unitaid.who.int

Marina Lins Do Carmo
Resource Mobilization Officer

Telephone No.: +41 22 791 2639
Email: linsdocarmom@unitaid.who.int

Fernanda Cruz Ribeiro
Advisor to the Chair of the Board

Telephone No.: +41 22 791 4015
Email: cruzribeirof@unitaid.who.int