



**REGIONAL OFFICE FOR THE WESTERN PACIFIC  
BUREAU RÉGIONAL DU PACIFIQUE OCCIDENTAL**

**REGIONAL COMMITTEE**

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**SPECIAL PROGRAMME FOR RESEARCH AND  
TRAINING IN TROPICAL DISEASES: MEMBERSHIP  
OF THE JOINT COORDINATING BOARD**

The Philippines and Malaysia are currently the two Member States of the Region whose representatives serve as members of the Joint Coordinating Board, in accordance with section 2.2.2 of the Memorandum of Understanding on the Administrative and Technical Structures of the Special Programme for Research and Training in Tropical Diseases. The three-year period of tenure of the representative designated by the Philippines ends on 31 December 1994.

The Regional Committee is requested to select one Member State to send a representative to the Joint Coordinating Board for the three-year period commencing 1 January 1995.

A copy of the Memorandum of Understanding on the Administrative and Technical Structures of the Special Programme for Research and Training in Tropical Diseases is attached as Annex 1. It provides for the establishment of a Joint Coordinating Board to coordinate the interests and responsibilities of all parties cooperating in the Special Programme. The composition of the Joint Coordinating Board is described in section 2.2 of the Memorandum of Understanding. Each regional committee of the World Health Organization is responsible for selecting two government representatives to serve on the Board (see Section 2.2.2 of the Memorandum of Understanding).

The periods of tenure of past and present representatives from the Western Pacific Region to the Joint Coordinating Board from 1 January 1978 onwards are shown in Annex 2.

It will be noted that the Region is currently represented by the representatives of the Governments of Malaysia<sup>1</sup> and the Philippines<sup>2</sup>.

The period of tenure of the representative designated by the Government of the Philippines will end on 31 December 1994. It will be necessary for the Regional Committee, at its forty-fifth session, to decide which Member State will send a representative to the Joint Coordinating Board for a three-year period commencing 1 January 1995.

The Committee's attention is also drawn to the following paragraphs of section 2.2 of the Memorandum of Understanding:

(1) section 2.2.3, which indicates that three members, in addition to the members selected by the regional committees and those appointed under section 2.2.1, may be designated by the Board itself from among the remaining Cooperating Parties (see section 1.2 of the Memorandum of Understanding);

(2) the last paragraph, which indicates that governments and organizations which are Cooperating Parties in the Special Programme and have not been selected for membership of the Board, may attend its meetings as observers (at their own expense), subject to its prior approval.

The Regional Director advises Member States by letter each year of the dates by which the name of any government interested in being designated as a member under section 2.2.3 or attending the Board's meeting as an observer should be communicated to the Special Programme Coordinator, WHO, Geneva. The letter relating to the 1994 meeting of the Board, to be held on

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<sup>1</sup>See resolution WPR/RC43.R11, *Handbook of Resolutions and Decisions of the Regional Committee for the Western Pacific*, Vol. III, 4th ed., (1986-1993). Manila: World Health Organization, 1994, p. 43.

<sup>2</sup>See resolution WPR/RC42.R12, *ibid.*

28 and 29 June 1994, was dispatched on 6 April 1994. Requests for designation as member of the Board were to be received by 29 April 1994 and requests to attend the meeting as an observer were to be received by 29 May 1994. The exact dates and place of the 1995 meeting of the Board, when confirmed, will be conveyed to the Member States in the usual letter.



ANNEX 1

**MEMORANDUM OF UNDERSTANDING ON THE ADMINISTRATIVE AND  
TECHNICAL STRUCTURES OF THE SPECIAL PROGRAMME FOR RESEARCH  
AND TRAINING IN TROPICAL DISEASES**

This Memorandum of Understanding describes the functions, composition and operation of the Joint Coordinating Board, the Standing Committee and the Scientific and Technical Advisory Committee of the Special Programme for Research and Training in Tropical Diseases (hereinafter called the Special Programme). The Special Programme is structured on the basis of co-sponsorship by the United Nations Development Programme (hereinafter called UNDP), the World Bank (hereinafter called the Bank) and the World Health Organization (hereinafter called WHO), and operates within a broad framework of the intergovernmental/interagency cooperation and participation.

The governments and organizations which met in Geneva on 1 and 2 February 1978 have endorsed the Administrative and Technical Structures of the Special Programme as set forth below.

A summary of the scientific and technical basis of the Special Programme is attached as an appendix hereto.

**1. DEFINITIONS**

1.1 The Special Programme is a global programme of international technical cooperation initiated by WHO and co-sponsored by UNDP and the Bank, with the two interdependent objectives of developing improved tools for the control of tropical diseases and strengthening the research capability of affected countries themselves.

1.2 Cooperating Parties are:

1.2.1 those governments contributing to Special Programme Resources; those governments providing technical and/or scientific support to the Special Programme; and those governments whose countries are directly affected by the diseases dealt with by the Special Programme;

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1.2.2 those intergovernmental and other non-profit-making organizations contributing to Special Programme Resources or providing technical and/or scientific support to the Special Programme.

1.3 The Executing Agency is WHO.

1.4 Special Programme Resources are the financial resources made available to the Special Programme by governments and organizations, through the Tropical Diseases Research Fund, an international fund administered by the Bank, the WHO Voluntary Fund for Health Promotion and other agency funds.

## **2. THE JOINT COORDINATING BOARD (JCB)**

### **2.1 Functions**

JCB shall, for the purpose of coordinating the interests and responsibilities of the parties cooperating in the Special Programme, have the following functions:

2.1.1 Review and decide upon the planning and execution of the Special Programme. For this purpose it will keep itself informed of all aspects of the development of the Special Programme, and consider reports and recommendations submitted to it by the Standing Committee, the Executing Agency, and the Scientific and Technical Advisory Committee (STAC).

2.1.2 Approve the proposed plan of action and budget for the coming financial period, prepared by the Executing Agency and reviewed by the Standing Committee.

2.1.3 Review the proposals of the Standing Committee and approve arrangements for the financing of the Special Programme in that period.

2.1.4 Review proposed longer-term plans of action and their financial implications.

2.1.5 Review the annual financial statements submitted by the Executing Agency, as well as the audit report thereon, submitted by the External Auditor of the Executing Agency.

2.1.6 Review periodic reports which evaluate the progress of the Special Programme towards the achievement of its objectives.

2.1.7 Endorse the proposals of the Executing Agency and the Standing Committee for STAC membership.

2.1.8 Consider such other matters relating to the Special Programme as may be referred to it by any Cooperating Party.

## **2.2 Composition**

JCB shall consist of 30 members from among the Cooperating Parties as follows:

2.2.1 Twelve government representatives selected by the contributors to the Special Programme Resources.

2.2.2 Twelve government representatives selected by the WHO Regional Committees from among those countries directly affected by the diseases dealt with by the Special Programme, or from among those providing technical or scientific support to the Special Programme.

2.2.3 Three members, designated by JCB itself, from among the remaining Cooperating Parties.

2.2.4 The three Agencies which comprise the Standing Committee.

Members of JCB shall serve for a period of three years and may be reappointed.

Other Cooperating Parties may, at their request, be represented as observers upon approval by JCB.

## **2.3 Operation**

2.3.1 JCB shall meet in annual session, and in extraordinary session if required, and with the agreement of the majority of its members.

2.3.2 JCB shall elect each year from among its members, a Chairman who shall:

- convene and preside over meetings of JCB; and
- undertake such additional duties as may be assigned to him by JCB.

2.3.3 The Executing Agency shall provide the Secretariat and arrange for supporting services and facilities as may be required by JCB.

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2.3.4 Subject to such other special arrangements as may be decided upon by JCB, members of JCB shall make their own arrangements to cover the expenses incurred in attending sessions of JCB. Observers shall attend meetings of JCB at their own expense. Other expenses of JCB shall be borne by the Special Programme Resources.

### **3. THE STANDING COMMITTEE**

#### **3.1 Composition and Functions**

The Standing Committee shall be comprised of the co-sponsors, namely UNDP, the Bank and WHO. It shall have the following functions:

3.1.1 Review the plan of action and budget for the coming financial period, as prepared by the Executing Agency, in time for presentation to JCB not less than forty-five days before JCB's annual session.

3.1.2 Make proposals to JCB for the financing of the Special Programme for the coming financial period.

3.1.3 Approve reallocation of resources between Programme areas and Scientific Working Groups of the Special Programme during a financial period, upon the recommendation of STAC and the Executing Agency, and report such reallocations to JCB.

3.1.4 Examine the reports submitted to the Executing Agency by STAC and the Executing Agency's comments; make the necessary observations thereon, and transmit these, with comments appropriate, to JCB.

3.1.5 Review particular aspects of the Special Programme, including those which may be referred to it by JCB, and present findings and recommendations in the form of reports to JCB.

3.1.6 Inform JCB, as required, regarding Special Programme matters of interest to JCB.

#### **3.2 Operation**

3.2.1 The Standing Committee shall usually meet at least twice a year; once at the time of JCB meeting, and additionally between sessions of JCB.



3.2.2 The Executing Agency shall arrange for supporting services and facilities as may be required by the Standing Committee.

3.2.3 Members of the Standing Committee shall make their own arrangements to cover the expenses incurred in attending sessions of the Standing Committee.

#### **4. THE SCIENTIFIC AND TECHNICAL ADVISORY COMMITTEE (STAC)**

##### **4.1 Functions**

STAC shall have the following functions:

4.1.1 Review, from a scientific and technical standpoint, the content, scope and dimensions of the Special Programme, including the diseases covered and approaches to be adopted.

4.1.2 Recommend priorities within the Special Programme, including the establishment and disestablishment of Scientific Working Groups, and all scientific and technical activities related to the Programme.

4.1.3 Provide JCB and the Executing Agency with a continuous independent evaluation of the scientific and technical aspects of all activities of the Special Programme.

For these purposes STAC may propose and present for consideration such technical documents and recommendations as it may deem appropriate.

##### **4.2 Composition**

STAC shall comprise 15-18 scientists and other technical personnel who will serve in their personal capacities to represent the broad range of biomedical and other disciplines required for Special Programme activities. Members of STAC, including the Chairman, will be selected on the basis of scientific or technical competence by the Executing Agency, in consultation with the Standing Committee and with the endorsement of JCB.

4.2.1 Members of STAC, including the Chairman, shall be appointed to serve for a period of three years, and will be eligible for further reappointment. To maintain continuity of membership, the expiration of the initial terms of office of members of STAC will be staggered.

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**4.3 Operation**

4.3.1 STAC shall meet at least once each year.

4.3.2 The Executing Agency shall provide the Secretariat to STAC including sustained scientific, technical and administrative support.

4.3.3 Costs of STAC shall be borne by the Special Programme Resources.

4.3.4 STAC shall prepare an annual report on the basis of a full review of all technical and scientific aspects of the Special Programme. This report, containing its findings and recommendations, shall be submitted to the Executing Agency and to the Standing Committee. The Executing Agency shall submit its comments on the report to the Standing Committee. The Standing Committee shall then transmit the report, including the comments of the Executing Agency, together with its own observations and recommendations, to JCB, not less than forty-five days before JCB's annual session. The Chairman of STAC, or in his absence a member of STAC deputized to act for him, shall attend all sessions of JCB.

**5. THE EXECUTING AGENCY**

The Director-General of WHO, after such consultations as he may deem appropriate, shall appoint the Special Programme Coordinator and the Special Programme Director and appoint or assign all other personnel to the Special Programme as specified in the plans of work. Drawing as required upon the administrative resources of WHO and in cooperation with the co-sponsors of the Special Programme, the Coordinator will be responsible for the overall management of the Special Programme. Under the authority of the Special Programme Coordinator and drawing to the full upon the scientific and technical resources of WHO, the Director of the Special Programme shall be responsible for the overall scientific and technical development and operation of the Special Programme including the plan of action and budget.

**SCIENTIFIC AND TECHNICAL SUMMARY FOR THE  
MEMORANDUM OF UNDERSTANDING ON THE  
ADMINISTRATIVE AND TECHNICAL STRUCTURES**

1. Despite the remarkable advances in medical science over recent decades, parasitic diseases still affect or threaten more than a thousand million people in the tropical countries, taking heavy toll on human lives and gravely impeding economic development. Furthermore, rather than coming under control, in many regions some of these diseases are increasing in both prevalence and severity.

2. This disease burden of the tropics is borne by the very people least equipped to control disease - the populations of the developing countries. Not only is development impeded by disease, but some of the development projects, such as man-made lakes and irrigation schemes designed to improve conditions, have in fact altered the ecology and aggravated major public health problems such as malaria and schistosomiasis.

3. In addition, technical problems have significantly reduced the effectiveness of some disease control programmes. A prime example is the increasing resistance of anopheline mosquitos to chemical control, the mainstay of the majority of malaria control programmes. In some areas, such insecticide resistance in the vector is combined with chloroquine-resistant strains of the malaria parasite in man, further increasing the severity of the problem.

In the case of filarial infections, especially in onchocerciasis, commonly called river blindness, there is still no effective and safe drug which can be relied upon to kill the adult worms in man. No vaccine is available for any of the parasitic infections and no new effective, cheap and safe drugs for the widespread treatment of the diseases have become available in the past three decades.

4. To stimulate and coordinate goal-oriented research leading to the development and application of new and improved tools for control of these diseases, the Special Programme for Research and Training in Tropical Diseases has been planned and initiated by the World Health Organization (WHO) with the assistance and co-sponsorship of the United Nations Development Programme (UNDP) and the World Bank (the Bank).

**Annex 1**

**Appendix**

This Programme's two principal objectives can be summarized as:

- research and development for better tools to control tropical diseases, and
- training and strengthening of institutions to increase the research capability of tropical countries.

5. Criteria for selection of the diseases - malaria, schistosomiasis, filariasis, trypanosomiasis (both African sleeping sickness and the American form called Chagas' disease), leishmaniasis and leprosy - included:

- the impact of the disease as a public health problem;
- the absence of satisfactory methods for control of the disease in prevailing circumstances of the tropical countries;
- the presence of research opportunities leading to improved control methods.

Since several major problems requiring research apply to most or all of the six diseases, the Special Programme includes components on epidemiology and operational research, vector control, socioeconomic and biomedical research.

6. Each component of the Special Programme is developed under the guidance and with the participation of the multidisciplinary groups of scientists organized into a number of Scientific Working Groups, each with clearly defined research goals.

7. Intimately related to this search for new tools is the equally important interdependent objective: the development of human resources and the strengthening of research institutions in the endemic countries of the tropics.

8. To these ends, institution strengthening activities focus upon the creation of a network of collaborating centres in tropical countries. These centres will become focal points for strengthening the research capabilities of the affected countries and will also be the sites for training activities.

9. The Special Programme is concerned to ensure that the full spectrum of technologists and scientists is trained to carry out the required research in accordance with the decisions and needs of the countries involved. Thus, while the Special Programme is especially concerned with training leaders in research, it is not neglecting the training of supporting workers in the laboratory, the clinic and the field.

10. The Special Programme must be looked upon as a long-term effort of twenty years or more. It is hoped, however, that within the next five years some of the new tools will be ready for extensive trials within the national health services of those countries needing them.



**PAST AND PRESENT REPRESENTATIVES TO THE TDR JOINT  
COORDINATING BOARD FROM THE WESTERN PACIFIC REGION**

COUNTRY	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	
<i>Under paragraph 2.2.2 of the Memorandum of Understanding</i>																				
Philippines		→			→															
Malaysia			→						→											→
China						→								→						
Republic of Korea								→												
Viet Nam												→								
Fiji													→							
Solomon Islands																→				
<i>Under paragraph 2.2.1 of the Memorandum of Understanding</i>																				
Australia																				→

ANNEX 2