

# CALL FOR APPLICATIONS THE GLOBAL DRUG-RESISTANT TB INITIATIVE WORKING GROUP, STOP TB PARTNERSHIP

The Global Drug-resistant TB Initiative (GDI) is announcing a call for applications for a new member to serve on the GDI Core Group in 2016–2017

Closing date of applications: 25 January 2016
Results of applications to be announced on: 15 February 2016

# Background

The Global Drug-resistant TB Initiative (GDI) has been constituted as a Working Group for drug- resistant TB related issues (DR-TB) replacing the previous MDR-TB Working Group and the global Green Light Committee (gGLC). The mission of the GDI is to serve as a multi-institutional, multi-disciplinary platform organizing and coordinating the efforts of stakeholders to assist countries build capacity for programmatic management of DR-TB (PMDT) in the public and private sectors. The ultimate aim is to ensure universal access to care and appropriate treatment for all DR-TB patients. The group will mobilize resources and undertake activities to ensure a holistic, quality-assured, patient-centred approach for all DR-TB patients within existing TB care structures as well as through innovative new partnerships in priority countries.

#### Terms of reference for the GDI include the following:

- Support the dissemination of guidelines and evidence-based policies, norms and standards;
- Facilitate coordination of partner support for PMDT expansion through existing mechanisms;
- Promote communication and coordination among Stop TB Partnership Working Groups and members, and across WHO Departments, on drug-resistant TB related issues;
- Support PMDT expansion through the regional frameworks and recommend strategies based on global and regional analysis on progress in DR-TB scale-up;
- Guide ad-hoc, need-derived task groups for knowledge sharing, research, advocacy and other priority areas
  constituted with different partners as leads for priority thematic areas of work;
- Promote DR-TB related TB advocacy activities, resource mapping and coordinated resource mobilization;
- Identify and prioritise the research agenda including operational research for introduction and roll-out of new policies, new tools and recently approved drugs for management of DR TB cases.

#### The GDI Core Group

The GDI is a Working Group of the Stop TB Partnership, with a Core Group (CG) of selected GDI members. The CG will consist of a maximum of 16 members, of which 6 seats will be reserved for the chairs of the regional Green Light Committees (rGLCs). The rGLCs, according to the 6 WHO regions, have been established to provide decentralised technical assistance to countries in scale-up of MDR-TB services, and hence will form an important link between the GDI's CG and countries, providing an opportunity for experience sharing and appraising the GDI's CG members of ground realities and challenges.

#### What do the GDI Core Group members do?

Members of the CG are expected to attend all CG meetings and participate in all CG decisions. To fulfil the desired tasks, the members need to be familiar with the primary guiding documents on GDI policies and procedures, and be familiar with the Stop TB Partnership, WHO and the public health context in which the GDI operates, including the main partners and their guiding policy and position statements.

Through the CG, the members are expected to:

- 1. Strengthen GDI processes by contributing to related policies and procedures;
- Identify current bottlenecks and challenges in PMDT expansion and provide recommendations to WHO and partners on the way forward;
- 3. Share relevant technical experience and needs from respective constituencies to guide policy making process;
- 4. Participate and contribute equally in the CG activities;
- 5. Periodic review of activities of the GDI and its task forces vis-à-vis the strategic plan of the GDI Working Group; and
- 6. In coordination with the Secretariat, prepare an annual report of activities.

There will be a maximum of 2 in-person CG meetings per year, with a maximum meeting duration of 2 days, depending on availability of funds and agenda items. Ad-hoc meetings via tele/videoconference may be organized as and when required. Members will serve for a term of 2 years, renewable for a second consecutive term.

Accordingly, applications are being sought for one new member to serve on the Core Group of the GDI. Applicants should note that:

- Members can be appointed onto the CG either in their individual capacity or as their institutional
  representative. In case of institutional representation, a letter of endorsement from the relevant authority of
  the institution should be attached along with the application; and
- Members will be selected to ensure that the perspectives of a broad range of constituencies and regions continue to be represented on the Core Group.

Representation on the CG is sought from the following key GDI constituency:

## Civil society, patients and affected communities

The selection of CG members is based on consideration of expertise and experience, and membership will be balanced by gender, region, and constituency. Selection of members is tasked to a committee constituted of the CG Chair, 2 Core Group members and a member of the GDI Secretariat. Their recommendations will be reached through consensus and confirmed by the full Core Group.

The GDI Secretariat is provided by the WHO Global TB Programme's technical Unit for Laboratories, Diagnostics and Drug Resistance, and is hosted in the WHO Headquarters in Geneva, Switzerland.

#### To apply for CG membership

Interested individuals are invited to send their applications to:

The GDI Secretariat Laboratories, Diagnostics and Drug Resistance (LDR) Unit Global TB Programme World Health Organization 20, avenue Appia, CH-1211 Geneva 27, Switzerland

Or by email to gdi\_secretariat@who.int

## Applications will be accepted until 25 January 2016

The applications should include:

- Letter of motivation highlighting the experience, areas of expertise and appropriate constituency to be represented.
- 2. Detailed CV with chronological order of experience.
- 3. In case of institutional representation, a letter of endorsement from the appropriate authority within the respective institution.