

## Gavi Alliance Evaluation Advisory Committee Meeting

18-19 November 2020

Virtual meeting

### 1. Chair's report

- 1.1 The meeting was held virtually via teleconference and commenced at 14.05 Geneva time on 18 November 2020. Nina Schwalbe, Evaluation Advisory Committee (EAC) Chair, chaired the meeting.
- 1.2 The Chair thanked the EAC members for their availability despite the ongoing challenges related to COVID-19, and informed them all EAC members would be present during the meeting, noting however that Marta Nunes would need to be excused one hour before the end of the first day. The Chair informed the EAC that Cindy Carlson, Chair of the Technical Evaluation Reference Group (TERG) of the Global Fund to Fight AIDS, Tuberculosis and Malaria would be joining the meeting for a dedicated session on the TERG (agenda item 04).
- 1.3 Standing declarations of interest were tabled to the Committee (Doc 01a in the Committee pack). The Chair underlined the importance of declaring any potential perceived conflicts of interest to the Secretariat, noting the increased level of scrutiny that Gavi is currently facing. EAC members fully supported the goal of collecting comprehensive information relevant to assessment of potential conflicts of interest and perceived conflicts of interest. However, a number of EAC members raised concerns that when they report all institutional relationships with Alliance partners that those would then automatically be reported as perceived conflicts of interests when they did not consider them to be such, and encouraged the Secretariat to manage the declarations carefully. This was considered particularly important given that some members declare their interests across multiple organisations that follow different criteria.
- 1.4 The minutes of the EAC meeting of 25 March 2020 were tabled to the Committee for information (Docs 01b in the Committee pack). The minutes had been circulated and approved by no-objection on 28 May 2020.
- 1.5 The Chair referred to the EAC Action Sheet (Doc 01c) and encouraged the Secretariat in the future to state the specific actions taken in the version of the action sheet circulated to the Committee prior to a meeting.
- 1.6 The Chair briefed the EAC members on the various discussions she had on the EAC role and scope of work with the Chairs of the Programme and Policy Committee (PPC) and the Governance Committee (GC). She noted that she will continue these discussions to create better linkages with other committees and the Gavi Board.

- 1.7 Potential overlap between the EAC work with the World Health Organization (WHO) Immunization Agenda 2030 (IA 2030) was discussed, noting that the EAC will strive to find a complementary angle with IA 2030 agenda while focusing on Gavi-related evaluations. The EAC expressed interest in exploring areas for potential collaboration with IA 2030 in the future.
- 1.8 The EAC Chair noted that assuring independence, at the structural and behavioural levels, will be an important focus for EAC.
- 1.9 She also referred to discussions with Anuradha Gupta, Deputy CEO, on the role of the EAC including vis-à-vis the Theory of Change (ToC), and underlined that reviewing ToCs is not part of the EAC's Terms of Reference (ToR). In response to several enquiries from EAC members in this regard, Dr. Hope Johnson, Director, Monitoring & Evaluation, clarified that different Governance bodies review the ToC with different lenses and with varying levels of detail.
- 1.10 At the request of the Chair, the EAC discussed the EAC ToR and responsibilities, including:
  - i. In relation to centralised evaluations, the Chair noted that the EAC must decide on the level of EAC involvement aligned with their ToR. She underlined that the EAC role is strictly to provide guidance, not approval, on the scope and questions to inform Request for Proposal (RFP) development;
  - ii. The Chair noted the EAC's responsibility to review and regularly assess the independence, quality and capacity of the Gavi Secretariat Evaluation function as outlined in the ToR;
  - iii. The Chair noted that she is invited to brief the Board during the regular Board meetings. The Board representatives on the EAC expressed their willingness to explore different opportunities, either during open or closed Board sessions, to convey key EAC messages; and
  - iv. In response to an enquiry on the follow-up to independent evaluations, the Secretariat clarified that an evaluation management response articulating next steps is usually made available publicly together with evaluation reports. The responsibility to follow through the recommendations lies with the business owners.

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## **2. Evaluation of COVAX Facility and COVAX Advance Market Commitment**

- 2.1 Laura Crow, Senior Programme Manager, Monitoring & Evaluation, presented this item (Doc 02) on the potential evaluation of Gavi's engagement in COVAX, the vaccines pillar of the Access to COVID-19 Tools (ACT) Accelerator. This work involves coordinating the COVAX Facility, a global risk-sharing mechanism for pooled procurement and equitable distribution of eventual COVID-19 vaccines.

- 2.2 She informed the EAC that the Gavi Secretariat, in consultation with other stakeholders, was developing a proposed Monitoring, Evaluation and Learning approach intended to cover both COVAX Facility and COVAX AMC. Gavi's broader response to COVID-19 (for example, flexibilities introduced or exemptions granted in response to the pandemic) has been included as a specific theme under the proposed Gavi 5.0 learning priorities and would be complementary in nature.
- 2.3 As this is a new and fast-moving area of work, the exact scope of the oversight responsibility of the EAC had not yet been discussed or agreed with the relevant Governance bodies. Once this was clarified in the coming months, it was proposed to call a special meeting of the EAC to consider implications for the Gavi 5.0 evaluation workplan.
- 2.4 The EAC was asked to provide guidance on: (i) whether to add a potential Evaluability and Baseline Assessment of the COVAX Facility and COVAX AMC to the Gavi 4.0 Evaluation Workplan; and (ii) the proposed objectives of the Evaluability and Baseline Assessment of the COVAX Facility and COVAX AMC and any interim EAC engagement, e.g. review of draft Request for Proposal (RFP) by nominated EAC members.

### *Discussion*

- The EAC agreed to include the evaluation of COVAX Facility and COVAX AMC on the Gavi 4.0 evaluation workplan as centralised evaluation topics and that this evaluation(s) should be prioritised.
- The EAC suggested that the Gavi Secretariat proceed with an RFP that focuses on the design of the COVAX Facility and COVAX AMC evaluation(s).
- As part of this, consideration should be given to possible challenges related to evaluability in specific evaluation areas and appropriate strategies for risks and mitigation proposed. To fulfil learning objectives, the EAC also recommended that the design include early-stage learning on processes and data sources. Only once the design and evaluability component has been completed, can a baseline be established. The Secretariat underlined that initial plans were to commission the design, evaluability and the baseline components to one supplier, which would save on transaction costs and that this would be done in a phased manner (i.e. the baseline component only commissioned to the same provider should the design and evaluability component be of sufficient quality).
- The EAC recognised the importance of exploring potential counterfactuals as well as potential unintended consequences of the Facility and AMC on the Gavi Alliance and the programs it funds.
- The EAC flagged the equity dimension as of particular importance when evaluating the COVAX Facility and COVAX AMC. The EAC also recommended that governance, access bottlenecks (including root cause analysis) also be explored as core questions.

- It was suggested as well that Gavi draw lessons from the evaluation of the Pneumococcal AMC.
- The EAC also suggested that Gavi – working with key stakeholders for the COVAX Facility – should be responsible for developing the theory of change, rather than the evaluators, as the theory of change should guide the evaluation design. The Secretariat clarified that the draft high-level theory of change had already been developed by the Secretariat and that it was not intended to have the evaluators design this.
- The EAC will propose members to review the draft RFP to provide guidance and recommendations back to the Secretariat prior to finalisation. It was clarified that the draft RFP would be ready to share with nominated EAC members for review in the following weeks.

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### **3. Update on Gavi 4.0 evaluation workplan**

- 3.1 Esther Saville, Head, Evaluation & Learning, presented an update on the Gavi 4.0 evaluation workplan (Doc 03), including on key developments in relation to centralised evaluations to enable the effective review, guidance and approval of the centralised evaluation workplan; and on progress in relation to decentralised evaluations workplans.
- 3.2 The EAC was requested to: (i) provide feedback on progress of on-going centralised studies on the Gavi 4.0 evaluation workplan; (ii) approve any changes to the Gavi 4.0 evaluation workplan; and (iii) take note of progress on decentralised evaluations.

#### *Discussion*

- The EAC agreed to deprioritise and postpone the post-transition evaluation, which had been included in the Gavi 4.0 evaluation workplan.
- The EAC also agreed to add the evaluation design, evaluability and baseline evaluation of the COVAX Facility and COVAX AMC to the Gavi 4.0 evaluation workplan.
- The EAC discussed the independence of the evaluation process, with a particular focus on the independence of the Steering Committees that are put in place for some of the centralised evaluations and whose members are often Gavi partners. The Secretariat clarified that the Steering Committees were put in place in an effort to strengthen quality and ensure use and uptake of evaluation recommendations, but that there was an opportunity to take stock of their role.
- The EAC agreed that it would like the Secretariat to further consider the role of Steering Committees in terms of whether the Steering Committees are fulfilling their purpose and if they are optimised to make a constructive contribution. The

EAC would look for opportunities to raise this within the EAC Chair Report to the Board and/or with the appropriate Board representatives. The two EAC members who sit on the Board also indicate they would seek to raise this point.

- In terms of level of involvement, the EAC also indicated that it would like to be highly engaged to assure the independence of the three upcoming evaluations: COVAX Facility, COVAX Advance Market Commitment, and the PCV AMC end-line evaluation. The Secretariat queried what this means operationally and the EAC indicated that the Evaluation and Learning Unit should proceed as usual until agreed otherwise, and that the EAC and Evaluation and Learning Unit would work collaboratively to clarify these issues at the earliest.
- It was also suggested to review the length of time it is currently taking to complete evaluation studies.
- For the ongoing Supply and Procurement Strategy evaluation, it was agreed that Juan Pablo Gutierrez, Mira Johri, and Ezzeddine Mohsni would review the final report on behalf of the EAC.

### **Decision One**

The Gavi Alliance Evaluation Advisory Committee:

- a) **Approved** any changes to the Gavi 4.0 evaluation workplan as amended by discussion during the Evaluation Advisory Committee meeting;
- b) **Agreed** on the level of EAC involvement for the centralised evaluations of high strategic value to the Gavi Board; including the COVAX Facility, COVAX Advance Market Commitment, and the AMC end-line evaluation; and
- c) **Noted** the need for independence in evaluations of COVAX Facility and COVAX Advance Market Commitment, and the AMC end-line evaluation.

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#### **4. Update from Technical Evaluation Reference Group of the Global Fund to Fight AIDS, Tuberculosis and Malaria**

- 4.1 Cindy Carlson, Chair of the Technical Evaluation Reference Group (TERG) of the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), gave a brief overview on the role, composition and function of the TERG.
- 4.2 She also presented the TERG workplan for the remainder of 2020, as well as its provisional workplan for 2021-2022.
- 4.3 She noted that the TERG has structural and behavioural independence from the Global Fund Secretariat and its Monitoring and Evaluation (M&E) team.

## Discussion

- In response to an enquiry on the extent of the TERG's influence on the Global Fund's evaluation agenda, Ms Carlson explained that together with the Global Fund Secretariat, the TERG has co-developed an overarching evaluation calendar, which determined the evaluations that would need structural and behavioural independence, and those that could be done in the Secretariat internally.
- Ms Carlson noted that COVID-19 has impacted major TERG workstreams, including a review on the Global Fund Strategy which was underway. She noted that the TERG has requested the Global Fund Secretariat to assess COVID-19 impact on countries, which would be followed by a TERG evaluation on the Global Fund response to COVID-19 towards end of 2021.
- In relation to the structure, workload and time commitment of the TERG members, Ms Carlson noted that the TERG recruitment is carried out through an open recruitment. A selection committee includes members for the Global Fund Strategy Committee, the TERG Chair and an ex officio member of the Secretariat. In terms of time commitment, it was noted that 2020 has been exceptionally demanding in terms of workload.
- In relation to learnings from Prospective Country Evaluations (PCEs), Ms Carlson noted that these evaluations yielded useful information in recent years. The TERG was able to have some influence on Global Fund business practices to ease country reporting processes and requirements. The TERG also works closely with country teams to help them identify bottlenecks and ways to resolve them.
- Finally it was noted that the EAC and the TERG will proactively explore potential areas for joint evaluations, such as evaluations related to countries in Challenging Operating Environments, which comprise similar group of countries that receive support from both organisations.

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## 5. Update from Executive Office

- 5.1 Anuradha Gupta, Gavi Deputy CEO, provided an overview on the Gavi 5.0 strategy with a specific focus on zero-dose children and missed communities, and provided an update on the impact of COVID-19 on Gavi countries and programmes. She briefed the EAC on the COVAX Facility and the role of the EAC vis-à-vis the Facility, in addition to the role of independent evaluations of the Gavi Alliance and the overall role of the EAC.
- 5.2 In relation to the impact of COVID-19 on Gavi countries, Ms Gupta noted that:
  - i. Towards the end of 2019 Gavi observed successes in reaching Gavi 4.0 mission targets; however, in early 2020 the COVID-19 pandemic caused wide scale disruptions to immunisation services. Despite the disruptions,



immunisation services were able to bounce back rapidly. According to WHO, 85% of countries are showing improvements in immunisation services, with the African region showing least disruptions.

- ii. In relation to Gavi support to help countries respond to COVID-19, Gavi extended flexibilities to countries through reprogramming Health System Strengthening (HSS) funds and waiving co-financing obligations upon request. From an EAC perspective, there would be an opportunity in the future to evaluate Gavi's immediate response to country needs.
- iii. Gavi's immediate objective is to support countries in maintaining, restoring and strengthening immunisation services and catching up on the large numbers of children who missed their timely vaccination.

### 5.3 Ms Gupta noted that for Gavi 5.0:

- i. Gavi had to recalibrate its priorities to adapt to new realities considering the impacts of COVID-19. With the support and guidance from the Board and the PPC, it was agreed that certain priorities would shift, such as introductions of new vaccines and the postponement of the new Vaccine Investment Strategy (VIS). Fiscal stress facing most countries made it challenging to meet co-financing obligations, which were waived for twelve countries so far.
- ii. Equity, and leaving no one behind without immunisation is a distinguishing feature of Gavi 5.0. COVID-19 has further exacerbated the hardships faced by the poorest and most marginalised communities.
- iii. Gavi drew on important learnings from the Gavi 4.0 strategy which informed the development approach for the Gavi 5.0. In this regard, the development of the Identify-Reach-Monitor-Measure-Advocate (IRMMA) framework represents a systematic approach to reaching zero-dose children and missed communities.

### 5.4 On Gavi's equity agenda and reaching zero-dose children, Ms Gupta noted:

- i. Data shows that disproportionate child mortality rates are concentrated amongst zero-dose children, most of whom are in fragile countries. This calls for new approaches and adjustment to partnership models particularly in fragile settings. Gavi will strengthen its engagement with humanitarian organisations and other financing institutions to highlight the relevance of zero-dose children as a marker for missed communities. In this regard, the EAC will be critical in framing several equity focused evaluation questions and provide guidance on whether the IRMMA framework is the right approach.
- ii. The Secretariat requested the Board to approve US\$ 500 million under HSS envelope to focus on equity. This amount also foresees providing further support to partnerships. The Board was supportive of the request and referred the approval of the amount to the PPC. At its latest meeting in October 2020,

the PPC recommended the amount for the Board approval at its December 2020 meeting.

- 5.5 With respect to the COVAX Facility, Ms Gupta gave a brief overview of the facility's objective, design, structure and governance mechanisms. She highlighted that the delivery of COVID-19 vaccines in the 92 AMC countries which Gavi will be supporting would be critical from evaluation perspective. She also emphasised that learning on programme design in-countries, the approach for prioritising groups, risks of misuse and/or diversions of vaccines, country readiness for delivery and reaching the right groups was also important.
- 5.6 In relation to the overall role of the EAC, Ms Gupta noted that the EAC is a key pillar supporting the independence of Gavi evaluations. She referred to the Peer Review of the Evaluation function, which led to some adjustments to the EAC charter and more clarity on the EAC mandate. Ms Gupta referred to the important reflections that the EAC Chair made at the October 2020 PPC meeting around the ToC. She noted that the use of ToC would be important in Gavi 5.0. As set out in Gavi's Evaluation Policy, the Secretariat will ensure that all key strategies, programmes, policies and interventions will have a ToC and an M&E framework established from the outset, while remaining cognisant that policies evolve and are not static. Moving forward, the EAC will be instrumental in strengthening evaluation of Gavi's work.

### *Discussion*

- The EAC referred to ethnicity, socio-economic determinants and human rights limitations and discrimination as major drivers of inequity. Social determinants may also affect the demand side, particularly if communities are not aware of vaccines benefits.
- To address such challenges, the Gavi Secretariat responded that it will continue to pursue strategies at country level and will focus not only on finding out where the zero-dose children are, but also who these children are.
- In response to a comment related to Gavi 4.0 progress and learnings, the Secretariat underlined that Gavi had only started focusing on equity in the past four years, which had resulted in a 14% percent reduction in zero-dose children rates, at a time when the number of zero-dose children increased in all Gavi countries by 30%. This sharp reduction, mostly in poor countries with a high fertility rate shows encouraging progress.
- In response to a question regarding how Gavi will engage with countries in fragile settings, the Secretariat clarified that ten countries fall under the Partners' Engagement Framework (PEF) tier 1 classification. Gavi engages with these countries more intensely especially at the political level and amplifies their Technical Assistance (TA). Significant progress in vaccines coverage and the sharpest reductions in zero-dose children were observed in these countries. Gavi will continue to develop new approaches and strategies for partnerships in



challenging countries, and build on lessons through the IRMMA framework in Gavi 5.0.

- With regard to a question about the need for government support and buy-in on equity, the Secretariat noted that the Gavi 5.0 strategy focuses largely on government support. A requested additional US\$ 500 million funding will enable Gavi to reach more local institutions that can be leveraged as the Alliance strives for sustainability. In relation to human rights barriers, it was also noted that Gavi had partnered with some groups to ensure that legislation makes immunisation a fundamental right. However, noting enforcement challenges, Gavi strives to send key messages to political leaderships which resonate with governments, that not only immunisation is a right for every child, but it is also critical from public health impact perspective.
- One EAC member underlined the importance of Gavi engagement with Middle-Income Countries (MICs) to reach zero-dose children. The Secretariat noted that Gavi 5.0 will aim to reach beyond the standard cohorts and expand the scope of countries that Gavi will be engaging with to reach zero-dose children and missed communities.
- In relation to the COVAX Facility, the Secretariat responded to following queries:
  - i. In relation to providing guidance to countries on choice of vaccines, population needs and Cold Chain Equipment (CCE) requirements, the Secretariat referred to the COVAX Facility AMC Engagement group consultation. More than 600 country representatives were being briefed on the vaccines that are in the pipeline, and the related CCE requirements. Gavi will continue sharing more information with countries on vaccines' candidates, characteristics, price points operational feasibility aspects and prices to help to countries to use their funding correctly.
  - ii. In relation to the possibility of COVID-19 vaccines reaching communities that were not previously reached by Routine Immunisation (RI) services, Gavi will monitor closely how this would unfold and build on such potential achievements.
  - iii. In relation to accountability and EAC responsibility towards the different stakeholders in the COVAX Facility who are not represented in Gavi governance, the Secretariat underlined the distinction between monitoring and evaluation. Monitoring must be stringent and rigorous for accountability purposes and must be done in real time with results being shared with governance bodies. While the evaluation aspect, which is the responsibility of the EAC, would be to agree on the right evaluation questions and ensure that evaluations are useful from a learning perspective and can be used for accountability where required.

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## **6. Multi-year evaluation workplan for Gavi 5.0: Context, development process and proposed content**

- 6.1 Hope Johnson, Director, Monitoring & Evaluation, and Esther Saville, Head, Evaluation & Learning, introduced this item (Doc 06) and explained the two-phase process to develop the key components of the 2021-2025 evaluation workplan. In the first phase, the draft Learning Priorities (LPs) to support delivery of, and learning from, Gavi 5.0 were identified and informed by the Theories of Change. Then, reflecting the evaluation principles discussed by the EAC at its meeting in October 2019, those LPs that could potentially best be met through a centralised evaluation delivered by EvLU were identified and an initial version of the evaluation workplan was developed. In the second phase, between now and March 2021, EvLU will work further with stakeholders to verify that the proposed evaluation topics will address the LPs and produce high level evaluation approaches / designs for each of the potential evaluations identified. This work will be reflected in the workplan presented for consideration and endorsement by the EAC in April 2021.
- 6.2 Five learning themes and supporting questions have been identified through a prioritisation approach as suitable for addressing through centralised evaluations - (i) Equity; (ii) Gender; (iii) Innovation; (iv) Partnerships; and (v) COVID-19. For these themes probable evaluation methodologies have been identified but significant investment in ensuring the designs are fit for purpose, based on users' needs and engagement is required between now and the next EAC meeting.
- 6.3 There are two other learning priority themes – health systems strengthening (HSS) and sustainability – where, notwithstanding the demand, more work is required to understand how centralised evaluation can effectively contribute. Past Gavi, and broader evaluation sector, experience is that centralised evaluations have not been cost-effective at meeting either accountability or learning needs around these themes. In addition, for HSS work currently underway in the Secretariat elaborating the Theory of Change for Strategic Goal 2 and reviewing the health system and immunisation strengthening (HSIS) strategy/approach may affect what the focus and scope for centralised evaluation might be. For sustainability, more work is required to further clarify what the exact demand is, and then how a centralised evaluation, as compared to other options in the broader learning system, could effectively address that demand.
- 6.4 The EAC was requested to provide guidance on the content of the workplan and the next steps covered in the second phase. The EAC was also specifically asked to respond to the following questions:
1. *To what extent is the EAC on board with what is proposed for the five areas for centralised evaluation? Is there something missing or that should be considered?*
  2. *To what extent is the purpose and value of the Mid-term Evaluation clear to the EAC?*
  3. *For HSS and sustainability, are there any suggestions on what is proposed, what we have missed, might do differently?*

4. *Does the EAC have any suggestions to strengthen the approach outlined for development of the workplan by April 2021?*

*Discussion*

- On the ToCs presented, EAC members commented that the way they were displayed made it seem siloed between strategic goals and wondered how to better show the linkages; and that it would be helpful to have more specificity on how to measure the general outcomes. It was clarified that during development of the specific ToCs (eg, MICs, zero-dose), the linkages have become clearer although this may not have been evident from the slide presentation.
- EAC members tended to agree that the level of ambition in the draft workplan for 5.0 seemed very high, and queried the linkages with the universal health care (UHC), primary health care (PHC), and IA 2030 agendas, and suggested more language on integration with those initiatives. Given the ambition, one EAC member suggested dividing the priorities into tiers.
- EAC members also generally cautioned that countries will be facing major challenges related to fiscal space for immunisation in the coming years and this should be reflected.
- On the question of the five areas for centralised evaluation in 5.0, EAC members agreed that the right thematic areas had been identified.
- EAC members also suggested the following areas be considered for evaluations and/or incorporated into the other five areas where appropriate: (1) Middle Income Countries, (2) sustainability, (3) flexibility/adaptability of Gavi programmes to fit with changing contexts like COVID-19 and for Gavi to lead/influence partners, (4) country ownership (if not already included in partnerships), and (5) social determinants of health.
- Further clarification was requested on the exact meaning of innovation, e.g. whether it would include how Gavi's investments in innovation contribute to improved immunisation outcomes (innovations in digitisation of data and monitoring of zero-dose and missed communities, partnerships, gender, products, etc) and how investments in innovation enable identification and scaling across products, services and practices, and the global and community level. Some EAC members suggested that the innovation area should be lower priority among those proposed.
- Several EAC members also remarked that the boundary did not seem clear between research and evaluation questions, and this should be further explored.

- It would be important to clarify which areas are cross cutting, e.g. COVID-19, sustainability, and to ensure that accountability across the whole Gavi Alliance is built in.
- On the question of the mid-term evaluation (MTE), and building on past experience with replenishment cycles, EAC members seemed to agree that this should be a separate exercise from the report that would be prepared for the mid-term review (MTR) fundraising exercise.
- One EAC member suggested the MTE should have a more qualitative focus, addressing some of the “white spaces” and whether the assumptions vis-à-vis causal pathways were correct in the ToC; and if needed, to allow Gavi to course correct.
- EAC members agreed that the proposed questions seemed appropriate and flagged that several areas should be the focus for the review including (1) COVID-19 related questions, and (2) testing the ToC.
- EAC members agreed it would be useful at the next EAC meeting to hold a discussion on evaluation methods, particularly in the context of COVID-19 and in fragile and conflict contexts.
- On the question of health systems strengthening as a topic for 5.0, EAC members agreed this is a key topic for Gavi and that it would be good to seek a steer from the Board on whether this should be a priority for learning for 5.0. This should also be discussed at the next EAC meeting. It was also suggested that some questions on HSS could be built into other evaluations.
- It was agreed that an evaluation of Gavi’s post-transition approach, which was postponed from the 4.0 evaluation, should be retained in the 5.0 evaluation workplan.

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## **7. Review of decisions**

- 7.1 Meegan Murray-Lopez, Senior Manager, Governance reviewed the decision language with the Committee which was approved by them.

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**8. Closing remarks and any other business**

- 8.1 After determining there was no further business, the meeting was brought to a close.

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Mrs Meegan Murray-Lopez  
Secretary to the Meeting

## **Attachment A**

### **Participants**

#### **Committee Members**

- Nina Schwalbe, Chair
- Zulfiqar Bhutta
- Rafael Vilasanjuan
- Juan Pablo Gutiérrez
- Mira Johri
- Ezzeddine Mohsni
- Marta Nunes
- Viroj Tangcharoensathien

#### **Regrets**

- Jeanine Condo

#### **Observers**

- Cindy Carlson, Chair TERG
- Ryuichi Komatsu, TERG Secretariat

#### **Secretariat**

- Hope Johnson
- Esther Saville
- Gilbert Asiimwe
- Emmanuella Baguma
- Laura Craw (item 2)
- Leslie Moreland
- Chris Taylor
- Marie Thomazic
- Nadine Abu-Sway
- Meegan Murray-Lopez
- Dave Cagen (item 5-6)