

SUBJECT: BOARD/COMMITTEE MEMBER APPOINTMENTS

Agenda item: 02a

Category: For Decision

Section A: Summary

At its meeting on 27 November 2017, the Governance Committee considered a number of nominations for Board and Committee membership and subsequently agreed on a set of recommendations which are being submitted to the Board for approval at its meeting on 29-30 November 2017.

Section B: Board/Committee Member Appointments

1. Constituency processes for Board and Committee nominations

1.1 Nominations from all constituencies were submitted following consultative processes within the relevant groups, as confirmed to the Secretary to the Board.

2. Gender Implications

2.1 Board-approved guidelines on the Gavi Board gender balance state that a ratio of 60/40 male/female Board Members and Alternate Board members should be established and maintained. This is extended to include Board Committees as required by Article 4.2 of the By-laws.

2.2 For the purposes of this calculation, the Board Members and Alternate Board Members are assessed as separate groups. The Board currently has 14 men (50%) and 14 women (50%). 11 alternates are men (61%) and seven are women (39%).

2.3 The gender balance is deemed to be within the acceptable range if there is no more than 60% of any one gender. These same principles are also applied to the Board Committees. In order to arrive at an aggregate position across the Board and its Committees, it is the sum of the total number of individuals calculated as a percentage between males and females as set out in the table in 2.4 below.

2.4 Based on the nominations received and pending Board approval, as of 1 January 2018, the gender balance¹ of the Board and Board Committees would be as outlined in Table 1 below:

¹ Shading indicates compliance with gender policy

Table 1: Gender Balance of Board and Board Committees

	M	F	Total		% M	% F
BM	15	13	28		54	46
ABM²	9	8	17		53	47
MSDC	7	7	14		50	50
GC	8	4	12		67	33
AFC	7	3	10		70	30
IC	4	1	5		80	20
PPC³	10	9	19		53	47
<i>Persons</i>	60	45				
%	57	43				

2.5 As can be seen from Table 1, while the aggregate balance would be within the parameters of the gender policy, three of the five Board Committees could be regarded individually as non-compliant.

2.6 In response to a request from the Governance Committee at its meeting on 5 October 2017, an analysis has been done of the gender balance amongst Committee Delegates. It was thought that a potential gender imbalance amongst Committee Delegates might be contributing to the overall gender imbalance. As can be seen from the information as summarised in Table 2 below, this would not appear to be the case. It is therefore to be concluded that the imbalance is arising from the fact that committee nominations coming from the Board seem to be predominantly male.

Table 2: Gender Balance of Board Committee Delegates

	M	F
MSDC	n/a	n/a
GC	n/a	n/a
AFC	3	1
IC	1	0
PPC	4	5
<i>Persons</i>	8	6
%	57	43

² WHO seat vacant

³ WHO seat vacant

3. Other issues for consideration

Programme and Policy Committee

- 3.1 Based on the nominations received, and pending Board approval, the PPC will be non-compliant with its Charter in that the Committee would not comprise a majority of Board members as stipulated. Nine of the nineteen will be Board members or Alternate Board members, nine will be Committee Delegates and one will be an Independent Expert. It has already been indicated by WHO that their PPC nominee is unlikely to be their Board member or Alternate Board member.
- 3.2 Richard Sezibera, Chair of the PPC, has indicated that he would be comfortable with the PPC exceptionally remaining non-compliant with its Charter, in particular in order to ensure representation of the developing country constituency where three of the four nominees are Committee Delegates. This has been discussed by the Governance Committee which agrees with this exceptional approach.

Diversity

- 3.3 At its meeting on 5 October 2017, the Governance Committee also indicated that it would be useful for them, in addition to the information on gender diversity, to have information relating to the geographic diversity of Board and Committee members. This can be found summarised as follows in Table 3 below.

Table 3: Gender Diversity of Board and Board Committees

	Europe	North America	Latin America/ Caribbean	Middle East/ South Asia	Australia/ East Asia	Africa
BM	5	9	1	3	3	7
ABM	6	6	0	2	1	2
MSDC	3	6	0	1	0	4
GC	2	5	0	1	1	3
AFC	5	3	0	0	0	2
IC	2	2	0	0	1	0
PPC	5	5	2	4	0	3
<i>Persons</i>	46	54	3	10	6	21
<i>%</i>	33	39	2	7	4	15

Section C: Actions requested of the Board

The Board is invited to consider, and approve as appropriate, the Board and Committee nominations recommended by the Governance Committee as set out in Annex B to Doc 02a.

Annexes

Annex A: Implications/Anticipated impact

Annex B: Recommendations for Board and Committee appointments for approval of the Gavi Alliance Board

Annex C: Biographies supporting nominations set out in Annex B

Annex A: Implications/Anticipated impact

- **Risk implication and mitigation**

- There is a capacity risk for the Board if recommended candidates are not appointed and empty seats are not filled in a timely manner after terms expire but at the same time it is important to ensure that a suitably deliberative process is undertaken to evaluate the suitability of nominations to the Board and/or Board Committees to ensure the effectiveness of the governance system of the Gavi Alliance.
- In this context it is also important to consider a measure of continuity in Board and Committee seats to ensure some semblance of retention of institutional memory and stability in Board and Committee arrangements to enable consistent decision making.
- There is risk for the Board if, when recommended candidates are appointed, there is lack of compliance with Statutes, By-laws and/or Committee Charters. This could be considered a reputational risk for Gavi in light of the outcomes of the 2016 Board and Committee self-evaluation where the Board agreed that all Board Committees should comprise a majority of Board and Committee members for the reasons given below.
- There is also a risk that this could undermine the effectiveness of the governance system of the Alliance insofar that it is an internationally-accepted practice and common legal principle that Committees of the Board should comprise a majority of Board and/or Alternate Board members to ensure alignment of accountability between the Board and its Committees, where the Board is making decisions and choices based on the recommendations of its Committees.

- **Legal and governance implications**

- Governance implications are listed throughout this paper.

Annex B: Recommendations for Board and Committee appointments for the approval of the Gavi Alliance Board

The Gavi Alliance Governance Committee recommends to the Gavi Alliance Board:

- a) That it **appoint** the following Board Member:
 - **Soumya Swaminathan** as Board Member representing WHO in the seat currently held by Flavia Bustreo effective immediately and until her successor is appointed and qualified.
- b) That it **appoint** the following Alternate Board Member:
 - **David Hering** as Alternate Board member to Susan Silberman representing the vaccine industry industrialised countries in the seat currently held by John Roberts effective immediately and until 31 July 2020.
- c) That it **appoint** the following to the Market-Sensitive Decisions Committee effective 1 January 2018:
 - **Saira Afzal Tarar** (Alternate Board Member) until 31 December 2019
- d) That it **appoint** the following to the Governance Committee effective 1 January 2018:
 - **Yifru Berhan Mitke** (Board Member) until 31 December 2019
- e) That it **appoint** the following to the Audit and Finance Committee effective 1 January 2018:
 - **David Sidwell** (Board Member) until 31 December 2019
 - **Reina Buijs** (Board Member) until 31 December 2018
 - **Kwaku Agyeman-Manu** (Alternate Board Member) until 31 December 2019
 - **Craig Burgess** (Alternate Board Member) until 30 June 2019
 - **Ted Chaiban** (Alternate Board Member) until 31 December 2019
 - **Irene Koek** (Alternate Board Member) until 30 June 2019
 - **Gisella Berardi** (Committee Delegate) until 31 December 2019
 - **Alexandru Cebotari** (Committee Delegate) until 31 December 2019
 - **Emmanuel Maina Djoulde** (Committee Delegate) until 31 December 2019
 - **Chris Taylor** (Committee Delegate) until 31 December 2019

f) That it **appoint** the following to the Programme and Policy Committee effective 1 January 2018:

- **Richard Sezibera** (Board Member) until 31 December 2018
- **Edna Yolani Batres** (Board Member) until 31 December 2018
- **Helen Rees** (Board Member) until 30 June 2019
- **Jean-François Pactet** (Board Member) until 31 December 2018
- **Jason Lane** (Alternate Board Member) until 31 December 2019
- **Violaine Mitchell** (Alternate Board Member) until 31 December 2019
- **Kate O'Brien** (Alternate Board Member) until 31 December 2019
- **Michael Kent Ranson** (Alternate Board Member) until 31 December 2019
- **Ahmed Abdallah** (Committee Delegate) until 31 December 2019
- **Dure Samin Akram** (Committee Delegate) until 31 December 2019
- **Abdul Wali Ghayur** (Committee Delegate) until 31 December 2019
- **Vandana Gurnani** (Committee Delegate) until 31 December 2019
- **Lene Lothe** (Committee Delegate) until 31 December 2019
- **Susan McKinney** (Committee Delegate) until 31 December 2019
- **Robin Nandy** (Committee Delegate) until 31 December 2019
- **Adar Poonawalla** (Committee Delegate) until 31 December 2019
- **An Vermeersch** (Committee Delegate) until 31 December 2019
- **Seth Berkley** (Board Member, non-voting)
- **Alejandro Cravioto** (Independent Expert, non-voting) until 31 December 2019

The minutes will note that Board members who are candidates for these positions, or whose organisations or constituencies provided candidates for these positions, did not participate in discussion or voting on these nominations.

Annex C: Biographies

This annex provides the biographies of nominees to the Board and of nominees to Board Committees who are not Board members.

1. Board members

- 1.1 **Soumya Swaminathan** is a paediatrician from India and a globally recognised researcher on tuberculosis and HIV, with her 30 years of experience in clinical care and research and has worked throughout her career to translate research into impactful programmes. Most recently, Dr Swaminathan was Secretary of the Department of Health Research and Director General of the Indian Council of Medical Research. From 2009 to 2011, she also served as Coordinator of the UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases (TDR) in Geneva. She has sat on several WHO and global advisory bodies and committees, including the WHO Expert Panel to Review Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property, the Strategic and Technical Advisory Group of the Global TB Department at WHO, and as Co-Chair of the Lancet Commission on TB. She received her academic training in India, the United Kingdom of Great Britain and Northern Ireland, and the United States of America, and has published more than 250 peer-reviewed publications and book chapters.

2. Alternate Board members

David Hering is Vaccines Commercial Officer for Pfizer. In this role David leads Global Marketing and Commercial Development for 7 inline products and commercialisation efforts of 9 pipeline assets across various stages of drug development from preclinical to phase III. David is also responsible for Pfizer's Alliances Business including the partnership with Gavi, the Vaccines Alliance. Before joining Pfizer in 2015, Mr Hering spent 7 years at Novartis Vaccines, where he was most recently the Head of the North America Region. In this role, he was responsible for the launch of Bexsero®, Novartis' (GSK's) licensed meningococcal B vaccine. He also led the transition of Novartis Vaccines to GSK as part of the acquisition announced in April of 2014 and completed in March 2015. During the Ebola epidemic, he was selected by the CEO of Novartis to run a unified Ebola Task Force response and coordinate all activities across several divisions of the company, including internal and external communications, research programs, grant responses, and negotiations with governments and third parties. Prior to this role, Mr Hering held positions of increasing responsibility at Novartis Vaccines, including VP of US Marketing, Head Medical Countermeasures (Biodefense franchise), and roles in US Sales, Product Market Access and Government Contracts, and Influenza Marketing. He began his career at Merck in Manufacturing and Finance and

at 3M Company in Consumer Product Marketing. He also worked as a Senior Consultant at Keystone Strategy prior to joining Novartis. Mr Hering earned a bachelor of science degree in operations research and industrial engineering from Cornell University's College of Engineering, and a master of business administration degree from Harvard Business School.

3. Committee Members who are not Board Members

Audit and Finance Committee

- 3.1 **Gisella Berardi** is the Deputy Director for the Office for Development Cooperation, International Financial Relations Directorate, in Italy's Ministry of Economy and Finance. She has responsibility for the Gavi files within her department. She has previously worked for a number of international development finance institutions, including the International Monetary Fund, the Inter-American Development Bank, the Inter-American Investment Corporation, the Global Environment Facility, and European Bank for Reconstruction and Development (EBRD). Her previous responsibilities with Italy's Ministry of Economy and Finance have included the Asian Development Bank, the European Investment Bank, EBRD, and the International Fund for Agricultural Development (IFAD). Mrs. Berardi has a Diploma in European Community Financial Adviser from the Società Italiana per l'Organizzazione Internazionale (SIOI) and a Degree in "Interpreter-Translator in English and French" from the Scuola Superiore per Interpreti e Traduttori, Rome, Italy.
- 3.2 **Alexandru Cebotari** manages a portfolio of large Financial Intermediary Funds (FIFs) in the World Bank's Development Finance Vice-Presidency (DFi). He currently leads the DFi team responsible for the provision of IFFIm Treasury Management Services. In his positions in the World Bank, including in Treasury and Executive Director's office, as well as in the private and public sectors in Moldova, he has gained extensive experience in financial management, treasury operations and financial markets.
- 3.3 **Emmanuel Maina Djoulde** is a senior Cameroonian official, an expert in resource mobilisation and public policy issues in the fields of public finance, partnerships and social and sanitary issues. Mr. Maina Djoulde holds a Master's Degree in Public Administration from the Ecole Nationale d'Administration in Paris. He also has two Higher Diplomas in the same discipline, one from ENA in Paris, the other from the Ecole Nationale d'Administration et de Magistrature (ENAM) Yaoundé. Mr. Maina Djoulde is currently pursuing doctoral studies in political science at the University of Yaoundé II SOA. He has almost 20 years of experience in the functions (10 years of which as Director) of coordination of partnerships and cooperation, and international financing in the health sector. Under his leadership, the department in charge of cooperation and resource mobilisation is listed among the three largest in the country cooperation portfolios in terms of the volume of the portfolio and external financing mobilized. He has also been the key actor in establishing the first National Partnership Strategy in the Health Sector; in managing the largest Public-Private Partnership Programme; in building a comprehensive, strong and credible financial

governance mechanism to mobilise and follow up externally; and setting up the first national funded trust fund to prepare Gavi graduation and graduation from many other donors.

- 3.4 **Chris Taylor** has 15 years of public policy, finance and audit experience. He is currently Deputy Head of the Global Funds Department at the UK's Department for International Development (DFID), responsible for the UK's shareholder relations with the global funds. He has broad experience in corporate governance, strategy and risk management, having previously worked as DFID's Deputy Head of Internal Audit. He is a qualified accountant and internal auditor.

Programme and Policy Committee

- 3.5 **Ahmed Abdallah** is a Public Health Doctor who has worked at all levels of the health pyramid of the Union of Comoros. During the last 10 years, he has served as the National Director of the fight against AIDS and at the same time as the Executive Secretary of the National Council for the fight against AIDS. Before that, he worked at the regional level of the country assuming several responsibilities in the various departments of the Ministry of Health. He served as the focal point of the Union of Comoros to the Indian Ocean Commission for: i) The Endemic Diseases Surveillance Network in the member countries of the Indian Ocean Commission; ii) The Epidemic Surveillance and Investigation Network in the member countries of the Indian Ocean Commission; iii) The Epidemiological Surveillance and Alert Management Network in the member countries of the Indian Ocean Commission; iv) The Project to Support Regional Initiatives for the Prevention of STI / HIV /AIDS in the member countries of the Indian Ocean Commission. He also served at the Organization of First Ladies of Africa as Technical Advisor. Dr. Abdallah was the Director of the Global Fund Grant Recipient for HIV, TB and Malaria. In addition to that, Dr. Abdallah is a member of the East and Southern Africa Task Force for Women, Girls, Gender Equality and HIV, since 2011. As of January 2017, Dr Abdallah is working as national consultant in charge of developing the Health System Strengthening proposal to be submitted to Gavi by the Union of Comoros. Currently, he is an Advisor to the National Coordination of the Expanded Program of Immunization.

- 3.6 **Dure Samin Akram** is a renowned professor of Pediatrics in Pakistan. Dr DS Akram has also remained Chairperson of the Department of Pediatrics at Dow University of Health Sciences, Karachi for 10 years, and currently is the Honorary Chairperson of the "Health Education and Literacy Program" CSO. She was elected as President of the Pakistan Pediatric Association and served at that post between 2002-2004. In addition to obtaining Certification in the American Board of Pediatrics, she also did an MPH in Epidemiology of Infectious Diseases with a special interest in Vector borne infections. Dr DS Akram has authored over 65 scientific papers published in National and International peer reviewed journals. These articles include original research on Poliomyelitis and Dengue infections in Pakistan. She is

a practicing pediatrician and an Honorary Faculty member in the Department of Pediatrics at Aga Khan University in Karachi, Pakistan.

- 3.7 **Abdul Wali Ghayur** holds a degree in medicine from Kabul Medical University and completed a one year public health course at the London School of Hygiene and Tropical Medicine. He also completed master level studies in Health System Management at Liverpool University. In addition, he has participated in a significant number of international public health courses and trainings. He has over 15 years experience in different disciplines within the health system and has been involved in the management of health care delivery, policy formulation and implementation, monitoring and evaluation and fundraising initiatives with both Government and NGOs. In addition, he has worked as research associate with the health policy unit of the London School of Hygiene and Tropical Medicine to study Afghan health policy formulation and its implementation under different major donor approaches (EU, USAID and WB). His career in health has included senior positions within the Ministry of Public Health, Afghanistan and NGOs, including adviser for policy and planning, Health System Strengthening coordinator and focal point within the Ministry of Public Health dealing with all Global Health HSS initiatives, medical coordinator and Health Information System Manager. Furthermore, he has completed several international assignments in the areas of Health Sector Strategic Plan development, analysing aid effectiveness, contributed to the development of JANS+, worked with GAVI-IRC Monitoring and Proposals, worked as a temporary senior manager in Gavi's monitoring team and was adviser to UNICEF Afghanistan seconded by EMPHNET/CDC etc. He has several publications mainly in the areas of contracting health care delivery and health policy development. Recently he led the process to establish National Medicine and Health Products Regulatory Authority and Medical Council in Afghanistan. He currently works as Senior Technical Adviser to the Afghan Public Health Minister.
- 3.8 **Vandana Gurnani** is a member of the Indian Administrative Service (IAS) belonging to the 1991 batch of Karnataka cadre. Mrs. Gurnani is a post-graduate, in Economics from Delhi School of Economics. During her career, she has worked with both the State Government and the Central Government. She has varied experience in the development sector especially in areas of health and family welfare, disease control, urban development, women and child development, revenue management and district administration etc., with a long experience of 8 years of working in health sector. Mrs. Gurnani became Joint Secretary at the Ministry of Health and Family Welfare on 9 November 2016 and took charge of the RCH division on 13 April 2016.
- 3.9 **Lene Lothe** is Head of the Global Health Section in the Department for Education and Global Health at the Norwegian Agency for Development Cooperation (Norad). Norad is a directorate of the Norwegian Ministry of Foreign Affairs. The Section is responsible for the Norwegian development aid portfolio for global health. The Health Section is central in providing technical guidance on global initiatives and funds as well as bilateral

programmes supported by Norway. The Section is also responsible for grant management, quality assurance, performance measurement and reporting on investments, including Gavi.

- 3.10 **Susan McKinney** is a USAID Senior Advisor for Vaccines and Immunization, and the U.S. Government's Focal Point for Gavi, the Vaccine Alliance. Ms McKinney has over 20 years of experience in this field ranging from working on immunisation programmes at country level, to work at WHO where her focus was vaccine manufacturer relationships, technical support to developing country vaccine manufacturers, global supply, procurement and evaluating self-procuring country regulatory and commercial processes for vaccine purchase. At USAID, as a part of the Child Health and Immunization team, in addition to her global level engagement in Gavi and with partners, she directly supports the USAID Nigeria and Jordan efforts, and supports multiple USAID country Missions in GAVI priority countries to develop. input to, or manage USAID Mission bilateral programming to build capacity at country level down to the point of delivery. USAID strives to effectively leveraging Gavi supported work at country, regional and global levels to sustainably improve immunisation and child health outcomes.
- 3.11 **Robin Nandy** is, since December 2011, the Chief of Child Survival & Development in the UNICEF Indonesia country office. Prior to this, Robin was the Team Lead for the Global Polio Eradication Initiative at UNICEF Headquarters during 2010-2011 and the Team Lead for Health in Emergencies during 2006-2011. He is a medical epidemiologist and public health physician with an extensive background in international public health, particularly in the areas of immunisation and in humanitarian health response. Previous to UNICEF, he has worked as a medical epidemiologist at the Global Immunisation Division of the Centers for Disease Control & Prevention (CDC) in Atlanta (2002-2006). He has also worked at both the country and headquarters level with the International Rescue Committee (IRC) during 1998-2002 and for the Indian government in the Republic of Maldives. As a Medical Officer, he worked four years in various hospitals in New Delhi, India (1990-1994). Robin obtained his medical degree from Mysore University, India (1990) followed by an MPH at the Nuffield Institute for Health, Leeds, UK (1996). He completed the Epidemic Intelligence Service (EIS) fellowship at the CDC (2002-2004).
- 3.12 **Adar Poonawalla** is the CEO and Executive Director of Serum Institute of India Ltd (SIIL), one of the world's largest vaccine manufacturers. Mr Poonawalla is also the Executive Director of Poonawalla Investments & Industries Pvt Ltd and Poonawalla Shares & Securities Ltd, and is a trustee of the Serum Institute of India Research Foundation, Jehangir Hospital and the Minoo Mehta Memorial Trust. Under Mr Poonawalla's stewardship, SIIL has helped grow vaccine manufacturing capacity to meet the rising global demand. He has not only been instrumental in getting new products licensed and prequalified by WHO but has also been actively involved in the research and development of new vaccines such as pneumococcal conjugate, rotavirus and HPV. In addition, SIIL has developed its own oral polio vaccine which will bridge the demand-supply gap for this vaccine. In a

parallel development, the acquisition of Bilthoven Biologicals, a Netherlands-based government vaccine manufacturing company, will increase production of the new Inactivated Polio Vaccine (IPV) making it a viable option for more countries. Mr Poonawalla has a degree in management from the University of Westminster (UK) and has completed further training in biotechnology and management in London (UK).

3.13 **An Vermeersch** has more than 20 years of experience in healthcare and particularly in vaccines. Currently she is Vice President Vaccines Global Health and Corporate Affairs at GlaxoSmithKline (GSK). She is leading the global health strategy and driving GSK Vaccines' work to increase access and innovation for the developing countries. As part of this role, she has been working with the Gavi Secretariat and participated in the Gavi board meetings since June 2016. She is also member of the steering team of the GSK-Save the Children partnership. Before, Ms Vermeersch was leading the integration of Novartis Vaccines into GSK and has driven the transformation program of GSK Vaccines as head of the Executive Office. In this role she was member of GSK Vaccines Executive Team and key governance bodies. Ms Vermeersch has also been the head of business operations of Global Vaccines Development, leading the clinical project management team and managing the clinical development budget. Over the years, she has worked in many different areas of GSK Vaccines: R&D, commercial, sales, finance and supply chain. She has also been working eight years as a management consultant with McKinsey & Company, focusing on pharmaceuticals and public health. Ms Vermeersch qualified as an Engineer in microbiology and biochemistry, has a Master's in Business Administration and a Health Economics training.

3.14 **Alejandro Cravioto** is affiliated with the Faculty of Medicine of the Universidad Nacional Autonoma de Mexico (UNAM). Dr. Cravioto received his Medical Degree with honours in 1973 from the Faculty of Medicine of UNAM. He specialised in Pediatrics from 1973 to 1976 at the National Institute of Pediatrics in Mexico City, followed by training at the London School of Hygiene and Tropical Medicine of the University of London, where he received a Diploma in Tropical Public Health in 1977 and a Ph.D. in 1981. After completing his studies, Dr. Cravioto held several research positions in the National Institute of Social Assistance and the National Institute of Public Health in Mexico until 1992 when he returned to the Medical School of UNAM to found a new Department of Public Health before the Board of the University appointed him Dean of the School in 1995. After completing his two four-year terms as Dean of the School, Dr. Cravioto worked closely for the next two years with the International Institute of Medical Education of the China Medical Board to develop tools for the evaluation of medical students, which were used to certify the quality of graduates from eight medical schools in China. In 2005, Dr. Cravioto moved to Dhaka, Bangladesh to become, first the Deputy Executive Director for two years, and from 2007 to 2012, the Executive Director of the International Centre for Diarrhoeal Disease Research (icddr,b). In 2012, he moved to Seoul, South Korea to become the Chief Executive Officer of the International Vaccine Institute for the next two years. In 2015, Dr. Cravioto became the

Chief Scientific Officer of Global Evaluative Sciences, Inc., in Seattle, Washington in the United States, a post that he completed in June 2016. His main interests in research have focused on the interaction between infection and growth in young infants, and the pathogenic capacity of bacteria capable of causing disease in humans with a focus on those causing enteric infections. His laboratory and field study areas have been the training ground for over 150 people from different academic backgrounds, among them 18 Ph.D. students who are now independent researchers. Dr. Cravioto is the author of more than 200 papers published in international journals and two textbooks, one on vaccines and another on pediatric diarrhoea.