RiGHT
국제보건기술연구기금

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Request for Proposals 2023

/ PRODUCT DEVELOPMENT AWARD

GENERAL CALL

Request for Proposals: PDA, General Call

Innovation to develop vaccines, therapeutics/biologics and diagnostics as global public goods

Executive Summary

The Product Development Award (PDA) General Call seeks proposals aimed at **developing new or improved vaccines, therapeutics, biologics, or diagnostic platforms as global public goods** for prevention and control of infectious diseases that disproportionately affect the population in the settings of limited resources, including technology transfer from or to a Korean partner. There are important changes to the PDA General Call from the previous PDAs. First, submissions will be received until 10:00AM KST on 19 August 2024 on a rolling basis (applicable only for the General Call). The call may be extended or amended, depending on the RIGHT Foundation's programmatic needs. Second, the funding scope for diagnostics has an emphasis on developing molecular diagnostic platforms for true or near point-of-care (POC) diagnostic tests that can significantly contribute to closing the global diagnostic gap (please review latest recommendations in [1-2]).

By the end of the PDA, grantees are expected to have achieved a series of specific and measurable milestones toward WHO Prequalification (PQ) or national regulatory approval by the governments of the low- and middle-income countries (LMICs) with the ultimate goal of public procurement at the national and/or regional level in Africa, Asia, or Latin America in alignment the local governments' priorities.

Collaboration with LMIC partners is highly preferred. Applicants will be asked to articulate a plan to engage local stakeholders early to reflect the needs and priorities of the LMIC governments. Upon successful completion of the grants, grantees will be invited to apply for supplemental funding via the Bridging Award to advance the funded work towards licensure and WHO PQ.

The RIGHT Foundation evaluates proposals in the context of global public health needs, potential impact, and the RIGHT Foundation's investment priorities and portfolio. The RIGHT Foundation reserves the right to consider or decline proposals at its sole discretion throughout the proposal evaluation process.

1. About RIGHT Foundation

The RIGHT Foundation is a Korean non-profit organization supported by the Korean Ministry of Health and Welfare, Korean life science companies, and the Bill & Melinda Gates Foundation. RIGHT Foundation aims to alleviate the burden of infectious diseases that disproportionately affect the people in low and middle-income countries.

2. Objective

This RfP seeks to support a broad range of efforts to **develop and make available vaccines, therapeutics/biologics and diagnostics that can significantly improve effectiveness, safety, or access across regions.** Specific areas of interests are described under "Funding Scope".

3. Funding Scope

	Funding Scope
Vaccines	• Vaccine concepts with new antigens or antigenic epitopes to improve efficacy, breadth or duration of protection against multiple related species, strains, serotypes, groups or variants • Clinical development of novel immunogens designed with the structure-guided approach or reverse vaccinology 2.0 [3-5] • New formulations or adjuvants to extend the duration of immunity (i.e., long-lasting immune memory) • Platform technologies that can reduce complexity and cost of manufacturing to support local production in LMICs • Innovative delivery platforms to close immunization gaps in marginalized communities • Optimization of existing vaccines to improve the route of administration, and/or reduce the number of doses
Therapeutics/ Biologics	• New small molecules or biologics that target the molecular sites from new understanding of the pathogen, host-pathogen interactions, mechanisms of infection or mechanism of severe disease • New or improved approaches to reduce doses and treatment duration • New combination of previously characterized compounds to improve potency, safety and expand the target population to include high-risk groups (e.g., pregnant women) • Optimizing production method to reduce complexity and costs to support local production in LMICs

Diagnostics	• True or near point-of-care (POC) molecular diagnostic platforms that can offer:
	  ○ High sensitivity and specificity
	  ○ Detection near patient
	  ○ Fast turnaround time
	  ○ Routine multi-disease tests across >80% of primary healthcare facilities
	  ○ Low-cost and easy-to-use platforms
	  ○ Simple device-based and instrument- free technologies
	(see reference [1] for background information)
	• New platforms to simultaneously detect multiple pathogens using minimal specimen volume
	• Innovative platforms to detect multidrug resistance (e.g., antimicrobial resistance) and analyze results to guide treatment and patient management in support of appropriate use of antibiotics
	• Improvements in existing diagnostics to reduce complexity for end users across diverse resource settings (e.g., rural, community settings), to reduce cost and assay time

Technology Transfer	• Technology transfer of vaccines, therapeutics, biologics or diagnostics from or to a Korean partner to support prevention or control of infectious diseases that disproportionately affect LMICs

We will not consider funding:

- Discovery-phase proposals to identify pre-clinical candidates
- Basic research studies to improve understanding of pathogens, infections or disease
- Proposals without any data to support the proof of principle
- Proposals for setting up research facilities or capital equipment.
- Duplicate technologies without a substantive advantage over the current best practice
- Concepts without a clear hypothesis or rationale for improved efficacy, potency, safety and/or ease of use over the current tools in clinical use or tools currently in development
- Proposals with a target use-case that fails to reflect the gaps, needs and the end-users' perspectives in LMICs
- Development of products with characteristics that will pose a barrier to equitable access to the populations in LMICs

4. Eligibility Criteria

Partnership requirement

The applicant team must include *at least one Korean entity* with R&D expertise to make a significant contribution to the project (eligible entities listed in Table 1). Inclusion of researchers, developers or advisors from the LMICs as the Principal Investigator or a collaborator is highly preferred.

Table 1

Eligible entities for Korean or international partners
• For-profit companies engaged in life science or healthcare • Non-profit research organizations and foundations • Government research institutions • Academic institutions • Public health laboratories

Commitment to Global Access

As a funding condition, we require *all our grantees and their collaborators* to agree to our Global Access Policy, and to articulate a clear path to achieving global access.

Our Global Access Policy represents the core principle of the RIGHT Foundation to achieve our mission of improving health and health equity. "Global Access" means (i) all information and knowledge gained from grants, projects or other investments funded by the RIGHT Foundation should be promptly and broadly disseminated; and (ii) products, data and other innovations resulting from the funded work should be made accessible to LMICs in terms of price, quantity, quality, and timeframe to ensure equitable access by those in need regardless of their resource constraints.

5. Award Description

	Vaccines, Therapeutics, Biologics	Diagnostics
Award amount & duration	• Up to 4 billion Korean won per project for up to 36 months • Co-funding required for at least 50% of the project cost from the project team which includes for-profit entities. Not applicable if the project team consists of only academic institutions and/or non-profit organizations.	
Target health conditions	• Infectious diseases with a disproportionate burden in LMICs or infectious diseases with a pandemic potential.	• Neglected tropical diseases (NTDs) especially Visceral Leishmaniasis (see the WHO list of NTDs) • Antibiotic resistant bacteria listed under the WHO Priority 1 and 2 • Malaria, tuberculosis, dengue, cholera
Development stage	• From or near the initiation of the clinical development or validation phase to regulatory approval and WHO prequalification (WHO PQ)	

6. Application Guidelines

- Completed Intent to Apply (ITA) must be submitted in PDF format to our Grant Management System. ITAs will be reviewed at the beginning of every two months.
- Submissions will be received **on a rolling basis until 10AM on 19 August 2024**.
- Short-listed candidates will receive invitations to submit full proposals

7. Evaluation Criteria

Category	Criteria
Responsiveness to public health needs	• Alignment with global health priorities, unmet health needs in low- and middle-income countries, WHO-recommended target product profile or preferred product characteristics where available • Value-add over the current best practice
Strengths of proposal	• Scientific quality/merit (e.g., strength of evidence for the proposed work and analysis plan for QC/QA, potential impact on global public health, feasibility) • Probability of technical and regulatory success • Suitability for local manufacturing in resource-limited settings across diverse regions • Suitability for scalability
Paths to potential impact	• Implementation plan to achieve equitable access within public health systems in LMICs via regulatory approval, WHO PQ, registration in LMICs • Commitment and capabilities to implement the Global Access Policy
Team-level capability	• Capabilities of the Principal Investigator (e.g., proven track-record of success in the related domain, relevant expertise) • Strength of the project team • Quality of the collaboration among the team members
Alignment with RIGHT Foundation strategy	• Alignment with the RIGHT Foundation's strategic priorities and approach • Strategic value in the context of the RIGHT Foundation investment portfolio

8. References

[1] Jani IV & Peter TF. Nucleic Acid Point-of-Care Testing to Improve Diagnostic Preparedness. 75: 723–728, 2022, Clin Infect Diseases

[2] Flemming KA et al. The Lancet Commission on diagnostics: transforming access to diagnostics. 398:1997-205, 2022, Lancet

[3] Burton DR. What Are the Most Powerful Immunogen Design Vaccine Strategies? Reverse Vaccinology 2.0 Shows Great Promise. 2017, Cold Spring Harb Perspect Biol

[4] Kwong PD. What Are the Most Powerful Immunogen Design Vaccine Strategies? A Structural Biologist's Perspective, 2017, Cold Spring Harb Perspect Biol

[5] Rappuoli R. Reverse vaccinology 2.0: Human Immunology Instructs Vaccine Antigen Design, 2016, J Exp Med

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/ OTHER PARTNERS

국제백신연구소 International Vaccine Institute | 국립보건연구원 National Institute of Health

/ LOCATION

#03145 4F Dongduk Building, 68, Ujeongguk-ro, Jongno-gu, Seoul, Republic of Korea

/ EMAIL

RFP@rightfoundation.kr

/ WEBSITE

https://rightfoundation.kr/en/

/ CONTACT US

+82-2-6337-9400

RiGHT 국제보건기술연구기금