

# Q&A: Global Health EDCTP3 Work Programme 2025 – version 3

## 1. Latest questions:

**1.1 We realize that organisations have official short names that are associated with the PICs in the EU portal. However, some partners didn't include a short name, or we are working with a clinical research unit within a larger partner organization and the acronym is different (JCRC vs. UNHRO in Uganda or SATVI vs. UCT in South Africa). If we include an acronym in the partner table in the beginning of Part B, can we use that acronym to refer to the partner throughout the proposal instead of the short name associated with the PIC?**

For consistency across all phases of the process — including Grant Agreement preparation, amendments, and reporting — the official reference is to be the PIC number and the related short name as registered in the EU Portal.

If applicants wish to include acronyms, this may be done **only to help the consortium draft and read the proposal more easily**. In such cases, we recommend:

- Keeping the PIC number and official short name as the primary reference for all administrative purposes.
- Adding a separate optional table at the beginning of the proposal listing any acronyms alongside their corresponding official short names, so the consortium can use them informally within the text.

This ensures that internal readability of the proposal is improved without creating confusion in the later stages of the process.

**1.2 Part B: page guidance vs. page limit. We understand the guidance for page length for sections is flexible as long as we remain within the 45-page limit of the full proposal. Is that correct?**

Yes, that is correct.

**1.3 Part B: for the List of Deliverables (3.1c), if the deliverable is coded as data, do we have to submit the dataset as a deliverable?**

If possible, yes – if not, this could be fine-tuned during the grant agreement preparation. Please note that the deliverables are submitted in the IT system as a PDF.

**1.4 Clinical trial annex: the guidance mentions we don't need to repeat information in the proposal that is contained in the clinical trial annex. We assume this means that the clinical trial annex is included in the proposal evaluation. For the ethics table, can we refer to a page number in the clinical trial annex?**

The clinical trial annex is indeed evaluated, so you can indeed refer to the page number in the ethics self-assessment (including the ethics table), which is part of the proposal.

**1.5 We are proposing a qualitative study that does not collect health data or samples. We assume it does not require a clinical trials annex.**

The clinical trials annex is optional and to be used when applicable as per decision of the consortium

#### **1.6 Which template is to be used for the endorsement letter for contributing partners of a Global Collaborative Action?**

The template to be used is posted on our website for preparing the LoE: [https://www.global-health-edctp3.europa.eu/document/download/8dc90340-a83c-4314-8d81-688827be964d\\_en?filename=Template%20endorsement%20letter\\_WEBSITE.docx](https://www.global-health-edctp3.europa.eu/document/download/8dc90340-a83c-4314-8d81-688827be964d_en?filename=Template%20endorsement%20letter_WEBSITE.docx)

#### **1.7 The letter should be submitted to the EDCTP3 office for consultation - who should we email the letter to?**

The Letter of Endorsement should be submitted to [partnerships@global-health-edctp3.europa.eu](mailto:partnerships@global-health-edctp3.europa.eu)

#### **1.8 Once the letter is finalized will it be annexed to the proposal that will be submitted or is it enough to submit to the EDCTP3 office? Does it need to be accepted by the Governing Board before the submission of the proposal to the second stage?**

Letters of endorsement should in principle be submitted to the Governing Board by 2 September 2025 (deadline for submission of the second stage proposals), as required in the call topic conditions. However, a more flexible approach and timeline has been communicated to the applicants given that the short timeframe does not guarantee sufficient time for the Programme Office to liaise with contributing partners and ensure that compliant letters of endorsement are submitted by the submission deadline. Contributing partners are now required to submit a first draft of the letter of endorsement to the Programme Office by the submission deadline, and have until 30 September 2025 to finalise in consultation with the Programme Office and submit it to the Governing Board

#### **1.9 For the coordinator of the proposal, do they indicate the support from the Contributing Partner in Table 3.1j: Beneficiary costs supported by third parties? And also in Annex 2? In other words does the contribution from the Contributing Partner need to be divided in the different cost categories (Purchase costs, personnel costs, etc.)?**

Yes, all contributions from the Contributing Partner should be integrated as being part of the respective beneficiaries' different costs categories. The summary of such contribution at project level should be also included in the Letter of Endorsement, in order to allow our respective financial staff to verify and reconcile the figures.

#### **1.10 If the proposal has a contributing partner that submitted an endorsement letter to EDCTP3, this proposal will score higher in "Impact" and "Quality and efficiency of the implementation", right? An endorsement letter is a necessary requirement to enhance the score, in other word a letter of support that is annexed to the grant (not viewed or accepted by the EDCTP3 Governing Board) will not enhance the score according to the conditions laid out in the call topic texts.**

The Letter of Endorsement is a necessary requirement to have the contribution from the contributing partner recognized and approved by the Global Health EDCTP3 Governing Board. It

is a legal pre-requisite that will allow us to sign the grant agreements with the recognition of the contribution of the CP.

While it is correct to mention that specific sub-criteria have been added under the 'impact' and the 'quality and efficiency of the implementation' award criteria for Global Collaborative Actions, and there would be a leverage in the scoring:

- For the 'impact' criterion: Production of meaningful and significant effects enhancing the impact of the relevant support and coordination activities via the inclusion of effective in-kind and/or financial contribution of contributing partners.
- For the 'quality and efficiency of the implementation' criterion: Leveraging of financial and/or in-kind contributions from contributing partners that are equal or greater than the requested JU contribution, in order to ensure the necessary resources and effort for the action.

Consequently, the Joint Undertaking will give instruction for the evaluation that each of these sub-criteria should be assessed by experts like any other sub-criterion within its respective general award criterion and is therefore to be taken into account when scoring a proposal.

## 2. General questions across topics:

### 2.1 Can any legal entity (e.g. non-governmental institutions) established in a SSA country that is an EDCTP Association member be coordinator (lead applicant) of a proposal?

No. As provided for in the Global Health EDCTP3 Work Programme, coordinators can only be established in European Union Members States, countries associated to Horizon Europe or South Africa.

### 2.2 Is it possible for a legal entity to participate in a proposal even if it is based in a country that is not an EDCTP Association member?

In principle, any legal entity, regardless of its place of establishment, including legal entities from non-associated third countries or international organisations, is eligible to participate (whether it is eligible for funding or not).<sup>1</sup>

Furthermore, to be eligible for funding, legal entities must be established in one of the Member States of the European Union, in a country associated to Horizon Europe or a country that is a member of the EDCTP Association.

Legal entities not eligible for funding can still participate in Global Health EDCTP3 projects in other roles, for example as associated partners.

### 2.3 Can a legal entity established in a country which not a European Union Member State, nor associated to Horizon Europe, nor a member of the EDCTP Association, participate as a consortium member?

Yes, though in principle without receiving funding. Please see previous answer.

---

<sup>1</sup> Provided that the conditions laid down in the Horizon Europe Regulation have been met, along with any other conditions laid down in the specific call topic. Please also note that the General Annexes of the Horizon Europe Work programme also establishes exceptions for example for entities established in Russia or Belarus.

## 2.4 Who can participate in Global Health EDCTP3 calls?

Participation is generally open to all legal entities, regardless of their place of establishment; however, eligibility for funding is restricted to organisations based in the European Union Member States, in countries associated to Horizon Europe and in countries that are members of the EDCTP Association.

## 2.5 Belgium is a member country of the EDCTP Association but Belgium is represented by at least three regions. Are Flanders, Brussels and Wallonia all EDCTP Association members?

Belgium is both a member country of the EDCTP Association as well as a European Union Member state, therefore organisations established in any of its regions can participate as beneficiaries and receive funding.

## 2.6 From the collaboration aspect, the consortium should include a minimum composition of three different entities - should they be from different countries? Or can they be within the same country, for example, from South Africa? Can there be at least one collaborator from the same country?

The consortium should include as beneficiaries:

- At least three legal entities independent from each other and **each established in a different country**, where legal entities are eligible to receive funding;
- At least one independent legal entity established in a European Union Member State, or in a country associated to Horizon Europe that is a member of the EDCTP Association; and
- At least one independent legal entity established in a sub-Saharan African country that is a member of the EDCTP Association.

According to the first condition, at least three of the entities should be established each in a different country, where legal entities are eligible for funding. Additionally, the coordinator must be established in a European Union Member State or country associated to Horizon Europe, or South Africa.

## 2.7 Must all the members of a consortium be entities established in countries that are members of the EDCTP Association, or is it enough if the coordinator is established in such a country?

Not all members of the consortium must be established in EDCTP Association member countries.

The requirement for a consortium to be eligible is:

- At least three legal entities independent from each other and each established in a different country, where legal entities are eligible to receive funding;
- At least one independent legal entity established in a European Union Member State, or in a country associated to Horizon Europe that is a member of the EDCTP Association; and
- At least one independent legal entity established in a sub-Saharan African country that is a member of the EDCTP Association.

## 2.8 In how many calls can a scientist or an institution participate?

A scientist can be part of an institution which participates as a member of a consortium - there is no set maximum number of calls/topics in which a scientist or institution can participate. Yet, a given activity can only be funded once.

## 2.9 Can a UK institution be the coordinator of a proposal/project?

The UK can be coordinator of a proposal/project since the UK is a country associated to Horizon Europe.

## 2.10 Kindly confirm how to check whether a country is a member of the EDCTP Association?

Please check the website of the EDCTP Association: <https://www.edctp.org/about-us/governance/general-assembly/members-of-the-general-assembly/>

## 2.11 It seems that the list of member states eligible for funding is in contradiction with the reference document on the EU portal where interested parties are referred to "eligible countries" in General Annexes of Horizon Europe Work Programme. For example, Madagascar is not an EDCTP Association member state, but is mentioned in the General Annexes. Which list includes all countries in which the legal entities should be established to be eligible and applicants should refer to?

Please refer to the Global Health EDCTP3 Work Programme 2025, where the list of all countries is clearly presented under section 4.1.2.4 (Specific conditions to Global Health EDCTP3). The rules for eligibility for funding of Global Health EDCTP3 differ from the standard rules under Horizon Europe.

For the most up-to-date list of EDCTP Association member countries, please refer to the EDCTP Association website: <https://www.edctp.org/about-us/governance/generalassembly/members-of-the-general-assembly/>

## 2.12 Although the U.S. is unable to receive funding as a partner, can they be subcontracted?

A US entity is not established in a country eligible for JU funding, therefore it can participate as beneficiary or associated partner with its own funding. For a US entity to receive funding, this entity should be considered essential for implementing the action. The "essentiality" of an entity is assessed by the independent experts during the evaluation and decided by the granting authority. Furthermore, subcontracting US entities is only possible in exceptional circumstances.

## 2.13 Who are the stakeholders that are expected to apply to the CSA calls?

Eligibility criteria regarding the composition of the consortium and the entities requesting funding must be complied with. Furthermore, it is the responsibility of applying consortia to add any other co-applicant with relevance to the call topic scope.

Moreover, according to the topic texts of HORIZON-JU-GH-EDCTP3-2025-02-FELLOWSHIP01-two-stage and HORIZON-JU-GH-EDCTP3-2025-03-NETWORKS-01-two-stage, proposals should include consortia with strong representation from institutions and researchers across sub-Saharan African countries, demonstrating a broad regional distribution in the SSA region, including involvement of new institutions and Franco/Lusophone countries, and considering previous EDCTP1 and EDCTP2 investments and the current Global Health EDCTP3 call. Applicants are also reminded of the expectation of reaching out to organisations in countries with high burden of disease with relatively lower research capacities, for which appropriate funding allocations should be proposed. Collaboration with other international research groups with relevant experience and participation in networking and joint activities, as relevant, is strongly encouraged.

#### **2.14 Can a researcher from a country which has won the grant before, join another team, as a team member, applying from another country?**

The question seems to refer to the case where the researcher changes organisation/employer. This is possible, however, please be mindful about the rules on eligibility for funding that apply to the new organisation involved.

#### **2.15 What is the exact deadline for submission of the first stage (short) proposals?**

The deadline is 20 March 2025, 17:00:00 Brussels time.

#### **2.16 Is it advised to have more than one European partner? Although only one is necessary to meet consortium requirements, would a proposal with more than one European partner be considered as stronger?**

The consortium should include:

- At least three legal entities independent from each other and each established in a different country, where legal entities are eligible to receive funding;
- At least one independent legal entity established in a European Union Member State, or in an associated country to Horizon Europe that is a member of the EDCTP Association; and
- At least one independent legal entity established in a sub-Saharan African country that is a member of the EDCTP Association.

If admissible and eligible, the proposals will be evaluated and ranked against the following award criteria: impact, excellence and quality and efficiency of the implementation. The existence of an additional European partner does not by itself makes the proposal stronger. It is the consortium expertise that is evaluated as part of the “quality and efficiency of implementation” criterion.

**2.17 Can consortium partners who are neither established in EDCTP Association member countries nor in Horizon Europe Associated Countries commit co-funding?**

If such entities are also not established in a European Union Member State, they have to bring their own funding in the proposed project as they are not eligible for JU funding. Therefore, in this situation it is not only possible but required for these consortium partners to commit cofunding.

**2.18 Are overheads (for shared services like HR, legal, IT) incurred by global organisations across their different locations to support their eligible country offices eligible for funding or can we only include the cost incurred locally?**

The overheads (indirect costs) are eligible costs but as flat-rate costs (25% of the eligible personnel and purchase costs). There are no requirements as to how this will be used by the beneficiary, provided the general conditions for flat-rate costs to be eligible are fulfilled.

**2.19 Can partners from Sudan and South Sudan apply together with partners from Ethiopia, for example?**

Please earlier responses to similar questions and consult the rules on consortium composition and eligibility for funding, as outlined in section 4.1.2.4 (Specific conditions to Global Health EDCTP3) of the Global Health EDCTP3 Work Programme 2025.

**2.20 For how many years would the funding be provided for?**

The project duration cannot be beyond the time frame of the Global Health EDCTP3 programme, which is 2031. The total indicative JU budget for the relevant topic should be also taken into consideration by applicant consortia.

**2.21 Are “Transformative innovation in global health” and “Tackling Diarrhoeal Diseases in the context of Climate and Health” different topics?**

Note that the call consists of two separate topics:

1. HORIZON-JU-GH-EDCTP3-2025-04-CH-01-two-stage Tackling Diarrhoeal Diseases in the context of Climate and Health, and
2. HORIZON-JU-GH-EDCTP3-2025-04-ACCESS-02-two-stage Transformative Innovations in global health.

Submissions to the topics are separate. Application should be directly submitted to the selected topic.

**2.22 In the first-stage submission, a consortium should be already formed or this can be done if the proposal gets to second-stage?**



The consortium should be in place already for the first stage submission. Notwithstanding, changes in consortium composition (including the coordinator) are allowed between stage 1 and stage 2 submission. However, the full proposal submitted to stage 2 must be consistent with the outline proposal submitted to stage 1 and may not differ substantially (i.e. obvious change concerning a substantial part of the proposed project) — otherwise it will be inadmissible. Please see responses to earlier similar questions for more details.

**2.23 Where can I find the link to download the application template for preparation before online submission?**

The template can be found [here](#). After selection of the topic you would like to apply to, you will find a link to download the application template of chosen topic. Please note that the templates used for Research and Innovation Actions (RIAs) is different from that of Coordination and Support Actions (CSAs).

**2.24 For the outbreak of Ebola in Uganda, can one send a proposal to Global Health EDCTP3 for public health emergencies without a call?**

The call for public health emergency funding is not open.

**2.25 Is cost share a requirement for the proposal applications? Is there an indirect cost rate limit?**

An estimate of costs for each beneficiary and for each budget category (or work package in case of lump sum calls) will be part of the proposal. The funding rate for Global Health EDCTP3 grants is generally 100%. For the indirect costs, there is a flat-rate of 25% of the eligible personnel and purchase costs.

**2.26 Is Morocco eligible for funding? Is Morocco considered an associated country?**

Morocco is not yet associated to the Horizon Europe Programme. However Moroccan entities are treated as if Morocco was associated to Horizon Europe at the level of proposal submission (transitional arrangements). This means that these entities are provisionally considered eligible for funding, which has implications in terms of budget requested and consortium composition eligibility.

The situation is re-evaluated during grant agreement preparation, taking into account the status of the association agreement between the European Union and Morocco. Grant agreements with beneficiaries established in Morocco can only be signed if the association of the country to Horizon Europe has started producing legal effects, i.e. the association agreement has started to apply. We therefore recommend that any consortium applying with entities based in Morocco makes sure to have a back-up plan, in case Morocco is not associated to Horizon Europe later this year.



## 2.27 Can a private company be a partner and eligible for funding?

Yes, to be eligible for funding, the company must be established in a European Union Member State or a country associated to Horizon Europe, or a EDCTP Association member country.

## 2.28 Under what call can one apply for AMR tackling implementation research?

Note that there is no specific AMR call in the Work Programme 2025. Consortia that would like to submit proposals addressing AMR need to assess whether their proposal fits the scope of one of the other calls in the Global Health EDCTP3 Work Programme 2025.

## 2.29 How does a country become a member of the EDCTP Association? What is the process?

Please check out the membership section of the EDCTP Association website (<https://www.edctp.org/about-us/governance/general-assembly/membership-of-the-edctpassociation/>) for further information on becoming a member.

## 2.30 If a consortium has two companies (including lead member) from same African country and two companies from same European country, i.e. four partners from two countries, is this consortium eligible?

The consortium should include:

- At least three legal entities independent from each other and each established in a different country, where legal entities are eligible to receive funding;
- At least one independent legal entity established in a European Union Member State, or in an associated country to Horizon Europe that is a member of the EDCTP Association; and
- At least one independent legal entity established in a sub-Saharan African country that is a member of the EDCTP Association.

The consortium in question would lack eligibility based on the first condition to have at least three legal entities each established in a different country.

## 2.31 Could you please clarify how the budget of a project can be managed in the consortium?

The project budget has to be managed taking into account the general cost eligibility conditions outlined in the grant agreement. According to the grant agreement, the coordinator distributes the payments received from the granting authority to the other beneficiaries without unjustified delay.

## 2.32 What is the difference between the indicative budget and the expected project budget?

Indicative budget refers to the total indicative Joint Undertaking budget for a specific topic, covering all proposals chosen.

Expected Joint Undertaking contribution is the Global Health EDCTP3's estimated amount that would allow the outcomes of this topic to be addressed appropriately. Nonetheless, this does not preclude submission and selection of a proposal requesting different amounts.

### **2.33 Can we have a partner from India? Would the grant be split to all partners? How does it work?**

Organisations based in India may participate as associated partners, which are not eligible for funding. The grant is paid to the coordinator, who then distributes the respective share to each beneficiary eligible for funding.

### **2.34 Can an African firm be part of a consortium since it's tagged as an associated partner?**

An organisation established in an African country which is a member of the EDCTP Association is eligible to participate as a beneficiary. If it is established in a country that is not a member of the EDCTP Association, it may participate as associated partner (and therefore without JU funding).

### **2.35 Can an early career researcher lead in the consortium probably because other eligible entities are not in eligible project country?**

This matter is something to be discussed at a consortium level. There are no requirements on the seniority of the researcher leading the consortium stipulated in the call text and it is at the discretion of the consortium to assign appropriately experienced individuals to perform the role. Note that the award criteria against which proposals are evaluated are: scientific excellence, impact and quality and efficiency of implementation. Expertise is part of the valuation of the "quality and efficiency of implementation" criterion (please see General Annexes of the Horizon Europe Programme).

Please also note that it should be the legal entity of the early career researcher that participates as, in Global Health EDCTP3 projects, legal entities rather than individual researchers form the consortia.

### **2.36 Are there calls under Lump Sum form? Please confirm that for direct Lump Sum costs, no invoices need to be demonstrated.**

The two CSAs are lump sum calls. As such, the invoices will not be requested by Global Health EDCTP3 but are probably essential in the financial management within the beneficiary organisation.

**2.37 In the lump sum slides, the example in table WP4 was completed by all partners (each one EUR 50.000) but had a "red" cross (i.e. not paid). Does this indicate a mistake?**

The 'red' cross is to denote that the work package is not yet completed, hence cannot be paid.

**2.38 In lump sum calls, apart from not having financial reporting obligation, has anything changed with respect to depreciation costs?**

The equipment costs should still follow the eligibility conditions. For Global Health EDCTP3 projects, only the applicable depreciation costs are considered eligible.

### **3. Global Collaborative Actions**

**3.1 It is noted that four of the calls of the 2025 Work Programme (i.e. TB, Malaria, Networks of Excellence and Fellowships) require in kind or financial contributions from contributing partners at the level of the proposal. Should the letter of endorsement by a contributing partner be sent and approved before the first-stage submission, or only at the second stage?**

As explained in the 2025 Work Programme, the applicants' contributing partner(s) must submit the endorsement letter for approval by the Global Health EDCTP3 Governing Board before the deadline for submission of the second-stage applications. Therefore, this is not required for the first-stage submission. It is recommended that the draft letter is submitted to the Global Health EDCTP3 Programme Office well in advance of the second-stage submission deadline to allow sufficient time for review.

**3.2 If wishing to apply to the TB vaccines topic, what is the expected amount from contributing partners to a given consortium?**

It is expected that the requested funding from Global Health EDCTP3 would be matched equally or with greater financial and/or in-kind contribution from partners. The contributions can consist of financial contributions and/or in-kind contributions.

The level of contribution by the contributing partner(s) mentioned in the call text is not an eligibility requirement, which means that it does not preclude submission and selection of a proposal with a different contribution profile.

For the first stage evaluation, the proposals will be evaluated and ranked against the award criteria in General Annex D (see annexes to the call in F&T portal). While not an eligibility criterion, additional activities (as financed by contributing partners) may have a favourable effect on the evaluation.

For the second-stage evaluations, the evaluation of the proposals will be done against the award criteria included in General Annex D, and additionally, the following aspects of "Impact" and

“Quality and efficiency of the implementation” criteria: (1) for the ‘impact’ criterion: “production of meaningful and significant effects enhancing the impact of the relevant research activities via the inclusion of effective in-kind and/or financial contribution of contributing partners”; (2) for the ‘quality and efficiency of the implementation’ criterion: “leveraging of financial and/or in-kind contributions from contributing partners that are equal or greater than the requested JU contribution, in order to ensure the necessary resources and effort for the action”.

### **3.3 About the contribution from contributing partners in Global Collaborative Actions: is it expected to equally match or exceed the JU contribution? Does this mean proposals need to secure an additional EUR 15 mil from contributing partners at the moment of submission?**

It is expected that the requested funding from Global Health EDCTP3 would be matched equally or with greater financial and/or in-kind contribution from partners. The contributions can consist of financial contributions and/or in-kind contributions.

The level of contribution by the contributing partner(s) mentioned in the call text is not an eligibility requirement, which means that it does not preclude submission and selection of a proposal with a different contribution profile.

The applicants' contributing partner(s) must submit the endorsement letter for approval by the Global Health EDCTP3 Governing Board before the deadline for submission of the second-stage applications. Please see responses to previous questions for more details.

### **3.4 Could you better explain the roles of contributing partners in the proposals applying for the coordination and support action?**

Please see above replies to similar questions raised on contributing partners and Global collaborative actions.

### **3.5 Is the call generally on collaboration or can a single institute send a proposal?**

An organisation cannot submit a proposal on its own, it must be part of a consortium. For consortium composition, see replies to relevant questions above, as outlined in section 4.1.2.4 (Specific conditions to Global Health EDCTP3) of the Global Health EDCTP3 Work Programme 2025.

### **3.6 Is there any guidance or a template for the Letter of Endorsement?**

Yes, on the Global Health EDCTP3 website: [https://www.global-health-edctp3.europa.eu/aboutus/partner-us\\_en](https://www.global-health-edctp3.europa.eu/aboutus/partner-us_en). It is recommended that the draft letter is submitted to the Global Health EDCTP3 Programme Office well in advance of the second-stage proposal submission deadline to allow sufficient time for review.

### 3.7 How can contributing partners be contacted? How applicants know who they are?

A contributing partner can be based in any country, it can be an international organisation or legal entity, other than a member of the Joint Undertaking, that supports the objectives of the programme. In the case of a contributing partner being a government/public body, it should be based in a country that is not a member of the EDCTP Association.

### 3.8 Can you confirm that contributing partners refer exclusively to funding in cash or in-kind from an external third party and not to co-funding from consortium partners?

A contributing partner can be based in any country, international organisation or legal entity, other than a member of the Joint Undertaking, that supports the objectives of the programme. In the case of a contributing partner being a government/public body, it should be based in a country that is not an EDCTP Association member. The contributing partner can also be part of the consortium and bring in its own resources to the project.

### 3.9 It was mentioned that a contributing partner could not be an organisation in an EDCTP Association member state - how is this possible since all the consortium partners would be established in EDCTP Association member countries?

It may not be a public organisation established in a country that is member of the EDCTP Association. It may however be a private organisation based in an EDCTP Association member country.

Additionally, not all consortium members should be based in EDCTP Association member countries. They can be established in European Union Member States or countries associated to Horizon Europe. Please see rules on consortium composition and eligibility for funding.

## 4. Call topic specific questions

### 4.1 Global collaborative action for strengthening the Regional Networks of Excellence and Epidemic Preparedness Consortia - HORIZON-JU-GH-EDCTP32025-03-NETWORKS-01-two-stage

#### 4.1.1 Is the topic 'Global collaborative action for strengthening the Regional Networks of Excellence and Epidemic Preparedness Consortia' aimed at epidemiology research and diagnostics or at development of vaccines and anti-virals, or both?

Please consult the expected outcomes of the call topic text.

This call topic is **not** aiming at developing products. The topic is aiming at strengthening research capacity and epidemic preparedness. As indicated in the topic scope, proposals must address three of the following areas:

- Expertise
- Training, mentorship and support to senior researchers

- Partnerships
- Infrastructure.

4.1.2 Regarding the calls relating to regional networks, are those calls open to newly formed networks or are they open to existing networks only?

The call is open to both new and existing networks.

#### **4.2 Accelerating the development of prophylactic vaccines against Neglected Tropical Diseases (NTDs) in sub-Saharan Africa - HORIZON-JU-GH-EDCTP3-202501-NTD-03-two-stage**

4.2.1 Are any late-stage preclinical activities allowable under the RIA NTD call? For example, if only GLP Tox is outstanding for compilation of clinical trial dossier. Does this mean that Phase I is the earliest stage that can be considered?

The scope of this call is to generate data on novel or existing vaccines (Phase II/Phase III trials) to make progress towards prevention, control and elimination of NTDs in SSA (note: in case of no or limited vaccine candidates in development, early development is encouraged (Phase I onwards). Preclinical activities are not funded under this call.

4.2.2 In the calls targeting Tuberculosis and NTDs, are preclinical studies, such as toxicity in animal models, considered implementation research?

Pharmaco-toxicological studies in animal models are not considered implementation research. Preclinical studies, including pharmaco-toxicological studies, are not in scope of the TB and NTDs call topics.

4.2.3 Should a legal entity be part of a consortium in order to apply for the call on NTD vaccine development or can one apply as an individual researcher?

The proposal is submitted by a consortium of legal entities (through the coordinator) and not by individual researchers.

4.2.4 What about vector of NTDs? Does the topic cover malaria vectors and other vectors of NTDs?

For the call on Neglected Tropical Diseases (NTDs), the objective of the topic is to progress the development of prophylactic vaccines against NTDs. As indicated in the call topic, combined approaches embracing vector control and vaccine development targeting the host/reservoir in the context of One Health are applicable. However, implementation research is out of scope for this topic. Malaria is also out of scope under this topic. Please consult the topic text for more information.

#### **4.3 Transformative Innovations in global health - HORIZON-JU-GH-EDCTP3-202504-ACCESS-02-two-stage**

- 4.3.1 In the topic "Transformative Innovations in global health", what is meant by the requirement to "generate beyond proof-of-concept data"?

Proof of Concept data, usually phase IIa, are to be available demonstrating that the health solution under investigation shows a favourable effect so that the existence of activity or 'response' can be determined for the intended indication. Data available are usually based on smaller sample size.

- 4.3.2 What are the requirements for the Principal investigator (PI) for the "Transformative innovations in global health" topic please? Can an early-career researcher be a PI, and a senior Scientist be a co-PI? Kindly advise.

There are no requirements on the seniority of the PI and/or co-PI stipulated in the call text and it is at the discretion of the consortium to assign appropriately experienced individuals to perform the role. The proposal will be evaluated based on the award criteria as defined in the Work Programme, including the expertise being part of "quality and efficiency of implementation" criterion.

- 4.3.3 For "Transformative innovations in global health" topic, can the proposal focus on more than one disease, like HIV and TB, or should there be only one focus, such as HIV only?

One proposal can address multiple diseases.

- 4.3.4 Are there any additional requirements for a freshly incorporated start-up company to join a consortium (for the 'Transformative Innovations in Global Health' call)?

SMEs are very welcome to the Global Health EDCTP3 programme. There are no additional requirements beyond those that apply for all participants. Please consult the general conditions and the specific requirements of the call.

- 4.3.5 "Transformative innovation in global health" topic seems to be the only call topic that has a range of maximum budget. Does the maximum depend on the content of the proposal?

As mentioned in the topic text, the amount indicated as the expected JU contribution per project does not preclude submission and selection of a proposal requesting different amounts.

#### **4.4 Global collaboration action for the development of vaccines for reducing the disease burden of Tuberculosis in sub-Saharan Africa - HORIZON-JU-GHEDCTP3-2025-01-TB-01-two-stage**

- 4.4.1 The Tuberculosis vaccine call must include only clinical trials, not pre-clinical development of a vaccine?

Indeed, Global Health EDCTP3 only supports clinical research activities, not pre-clinical development.



- 4.4.2 In the calls targeting Tuberculosis and NTDs, are preclinical studies, such as toxicity in animal models, considered implementation research?

Pharmaco-toxicological studies in animal models are not considered implementation research. Preclinical studies, including pharmaco-toxicological studies, are not in scope of the TB and NTDs call topics.

**4.5 Global Health EDCTP3 JU and contributing partners funded Strategic Training Hubs for Fellowships in Public Health covering Biostatistics, Epidemiology and Modelling - HORIZON-JU-GH-EDCTP3-2025-02-FELLOW-01-two-stage**

- 4.5.1 In the HORIZON-JU-GH-EDCTP3-2025-02-FELLOWSHIP-01-two-stage call, "all proposals submitted under this topic must include the EDCTP Association as a coordinator at the second stage of the proposals' submission". What then happens to the coordinator included in the first stage proposal?

It becomes a beneficiary, but may still keep the lead on scientific aspects – without however being the coordinator.

**4.6 Global collaboration action for research on existing Malaria therapeutics and clinical development of new antimalarial candidates - HORIZON-JU-GHEDCTP3-2025-01-MALARIA-02-two-stage**

- 4.6.1 Does this call cover malaria vaccine research proposals?"HORIZON-JU-GH-EDCTP32025-01-MALARIA-02-two-stage: Global collaboration action for research on existing Malaria therapeutics and clinical development of new antimalarial candidates"

Clinical trials from Phase 2a onwards are in scope.