



Work Programme 2026

Global Health EDCTP3 Joint Undertaking

Explanatory note

Annex 1 to Governing Board decision No. GH-EDCTP3-GB/07/2026.



1. BUDGET 2026 Amendment 1 (AMBU1) – Statement of Revenue

Compared to Work Programme and Budget 2026 as adopted on 2 December 2025, this new version, recognises and balances (Revenue and Expenditure) new contributions that could be presented accordingly:

- EUR 17 million from Germany is expected through the EDCTP Association as contribution from Members other than the EU. From this amount, up to 12 million will be allocated to fund reserve list projects from 2025 and 2026 calls, and EUR 5 million will be allocated to call topic HORIZON-JU-GH-EDCTP3-2026-02-CH-01-two-stage: Global Collaboration Action on climate and health in sub-Saharan Africa.
- EUR 15.1 million from the United Kingdom is expected through the EDCTP Association as contribution from Members other than the EU. This amount will be allocated towards:
 - the call topic HORIZON-JU-GH-EDCTP3-2026-01-LRTI-02-two-stage: Global Collaboration Action for Prevention and treatment of Lower Respiratory Tract Infections (LRTIs) in sub-Saharan Africa for EUR 2.1 million;
 - the call topic HORIZON-JU-GH-EDCTP3-2026-03-SERP-01: Training networks for sustained capacity building related to ethics, regulatory and pharmacovigilance for EUR 2.1 million;
 - the allocation of EUR 10.9 million to fund one reserve list project from 2025 calls.
 - The EU contribution towards these two topics has been reallocated to ensure that the total budget remains the same.
- Contribution from contributing partner: The Coalition for Epidemic Preparedness Innovations (CEPI) will contribute to one topic of call 2026 with a financial contribution up to EUR 3.45 million. This contribution is added to the revenue and expenditure of the budget subject to the signature of a funding agreement between the JU and CEPI. More information about this can be found in section 2 below.
- Reactivation of unused commitment appropriations from previous years amounting to EUR 16.7 million are included in the amended budget. Also, reactivation of unused payment appropriations from previous years amounting to EUR 105.7 thousand are included in the amended budget.

2. Contributions from contributing partners

Additional contributions of new contributing partner (CEPI)

Compared to Work Programme 2026 approved by the Governing Board of Global Health EDCTP3 on 2 December 2025, this new version of the Work Programme 2026 includes the following:

- Financial contribution from CEPI supporting institutions that will provide successful applications to the call topic “HORIZON-JU-GH-EDCTP3-2026-03-SERP-01: training, and innovation networks for sustained capacity building related to ethics, regulatory, pharmacovigilance, and related digital regulatory platforms”. The total value of this contribution will be up to EUR 3.45 million. By its GB/05/2026 decision, the Global Health EDCTP3 Governing Board has approved the CEPI endorsement letter to become contributing partner of Global Health EDCTP3.

Therefore, for call topic “HORIZON-JU-GH-EDCTP3-2026-03-SERP-01: training, and innovation networks for sustained capacity building related to ethics, regulatory, pharmacovigilance, and related digital regulatory platforms”, the JU indicative budget will increase from EUR 15 million to 18.7 million with a consequent increase of the number of projects from 10 to 12 and an expected JU contribution per project EUR 1.56 million.

The contribution from CEPI is subject to CEPI and Global Health EDCTP3 entering into a specific funding agreement in the context of the framework agreement between Global Health EDCTP3 JU and CEPI.

3. Update of the reference to the new Horizon Europe General Annexes 2026 and derogation for the award criteria for the use of the Horizon Europe General Annexes 2025

With this amendment, the reference to the Horizon Europe General Annexes 2023-2025 is updated and replaced by reference to Horizon Europe General Annexes 2026-2027.

However, Global Health EDCTP3 JU has decided to **derogate to the application of the Horizon Europe General Annexes regarding the application for the evaluation award criteria** and continue the use of the previous Horizon Europe General Annexes 2025 in Global Health EDCTP3 Work Programme 2026 and in consequence, in Global Health EDCTP3 single-stage and two-stage 2026 calls (both RIAs and CSAs).

The Horizon Europe General Annexes 2025 as well as the corresponding templates (Project proposal – Technical description (Part B)) include important aspects related to:

- the scale and significance of contributions (in the **Impact criterion** section) from projects funded by our joint undertaking, and
- important instructions on budget lines and justifications of costs (in the **Quality and efficiency of the implementation criterion** section) related to day-to-day running of clinical studies in sub-Saharan Africa.

However, we have noted that these aspects have been deleted or modified in the new Horizon Europe General Annexes 2026-2027 and consequently, in the templates. Specifically:

- Under the section “Impact”, the following statements have been deleted: *[and the likely scale and significance of the contributions due to the project.]*
- Under “Quality and efficiency of the implementation” section, the new template has simplified Table 3.1h to just “equipment” costs, removed table 3.1 i “other costs categories” and table 3.1 j “in-kind contributions”.

As a Europe-Africa Partnership, our Joint Undertaking supports clinical research studies which aim to develop new or improved medical interventions against infectious diseases. In this context, potential impact of proposals submitted to our calls is also assessed based on how likely the project will lead to registration of new or better medical products, and how likely these products will be scaled up and made available to the wider community of patients. For 1st stage proposals (in two-stage calls) and full proposals (in 2nd stage of two stage calls and in single-stage calls), the description of scale and significance of contributions from these projects is an indispensable part of the proposal, and it is crucial for the template to feature instructions to applicants on how this description must be captured under the Impact section.

In addition, the changes under the implementation section would limit the extent to which applicants can describe what they are budgeting for. Simplifying table 3.1h to just equipment costs, removing table 3.1 i “other costs categories” and table 3.1j “in-kind contributions” would exclude important budget lines and justifications related to “travel and subsistence” or “other goods and services” and it would limit the possibility to capture important details used by applicants to ensure inclusion of costs related to day-to-day running of clinical studies in sub-Saharan Africa. This applies to both Research Innovation Actions (RIAs) and Coordination and Support Actions (CSAs).

Furthermore, calls 2026 of Global Health EDCTP3 JU that opened in January 2026 provided a link in SEP to the previous template of General Annexes for the first stage of two-stage RIA call topics, the call closure date of which was 4 March 2026. Therefore, in addition to the above operational considerations, and following a risk assessment, it is considered that a change to the award criteria, as in the new general annexes, would equal a substantial change regarding the rules for the submission of the proposals.

For the second stage of the two-stage RIA calls and for the single-stage CSA calls (which were also open in January 2026 but with a closure date of 2 September 2026), the previous templates should also be used for the above operational reasons.



The approach has been previously discussed with the relevant EC RTD services, to ensure that the changes based on the new General Annexes 2026-2027 as well as the derogation relevant to the evaluation award criteria are correctly implemented in the amendment. For transparency and clarity, this derogation regarding the evaluation award criteria has been added both in the Section on the General Conditions for the calls (RIAs and CSAs) but also in each call topic separately.

Regarding the **new restrictions for the Chinese entities**, the reference to the HE main 2026-2027 WP General Annexes entails that the two 'new China measures' (i.e. Restrictions on the participation of legal entities established in China "unless otherwise stated" as well as restrictions on the 'Participation of Chinese universities linked to the Ministry of Industry and Information Technology (MIIT)) apply.

The following paragraph has been added in the WP26 for clarity: 'Legal entities established in China are not eligible to participate in both Research and Innovation Actions (RIAs) and Innovation Actions (IAs). For additional information please see "Restrictions on the participation of legal entities established in China" in General Annex B of the General Annexes'.

In particular regarding the Chinese entities, for the open call HORIZON-JU-GH-EDCTP3-2026-03 (CSA closing in September 2026), the cross reference to the General Annexes 2026-2027 can apply since the change is introduced well in advance of the call closure, i.e. 2 September 2026.

For the two stage calls - HORIZON-JU-GH-EDCTP3-2026-01-two-stage and HORIZON-JU-GH-EDCTP3-2026-02-two-stage with first submission deadline on 4 March 2026 and the second submission deadline in September 2026, the updated General Annexes can apply because the change does not seriously hinder the possibility for a proposal eligible at first stage to comply with the modified conditions. In particular, a relevant change in a consortium that may include a Chinese entity will be allowed between the two stages.

In the Section 4.1.2.4 Specific conditions to Global Health EDCTP3 and in particular title C. Specific conditions related to scores and weighting, the provision regarding **the scoring and weighing of CSAs** has been changed to align with that applied to the full proposals of the two-stage calls, which derogates from the Horizon Europe General Annexes 2026-2027. This change can also apply since it is introduced well in advance of the call closure of the CSA, i.e. 2 September 2026.

In the same section, under title A. Entities eligible for funding, the **list of countries eligible for funding** has been also updated to include Togo and Japan.

4. Addition of Prizes 2026-2027

In view of EDCTP Forum 2027, Global Health EDCTP3 JU is planning to publish and award seven prestigious international monetary prizes (**EUR 180,000 in total**) to recognise the achievements of outstanding researchers and research teams, especially from sub-Saharan Africa and Europe. In compliance with Article 110 (2) and (3)(d) of the Financial Regulation, the necessary information has been added in the Work Programme in the Section 4.1 (Other actions not subject to the call for proposals) and in particular section 4.1.4.5.

5. Addition of paragraph with explanation for the operational procurement relevant to the Preparation of the EDCTP Forum 2027

The budget regarding the operational procurement for the preparation of the EDCTP Forum 2027 was already part of the Global Health EDCTP3 JU Work Programme as adopted on the 2 December 2025. This amendment has added the relevant text on this operational procurement in the Section 4.1 (Other actions not subject to the call for proposals) and in particular section 4.1.4.4, with explanation on the activities to be supported, its expected impact, the number of service contracts and the indicative timetable of the procurement procedures.

6. Justification for the “consortium composition” and sharing of documents/information following discussions with the CLSS

Justification for the derogation from the general rule of Article 22(2) Horizon Europe Rules for participation for consortium composition based on Global Health EDCTP3 JU policy objectives (in Section 4.1.2.4 Specific conditions to Global Health EDCTP3 and in particular title B. Consortium Composition) as well as a clarification regarding the communication of documents to the Global Health Contributing Partners (in Section 4.1.2.4 Specific conditions to Global Health EDCTP3 and in particular title F. Access to information and involvement of contributing partners), have been added, following exchanges with the European Commission RTD Common Legal Support Service (CLSS).