Request for Proposals 2022

Product Development Award

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RIGHT FUND

SNU Research Park, 1 Gwanak-ro, Gwanak-gu, Seoul Korea #08826
Tel: 82-2-6337-9400 E-mail: rightfund@rightfund.org

Request for Proposal for

RIGHT Fund Product Development Award

RF-PDA-2022-001_RFP

Executive Summary

The 1990 Report of the Commission on Health Research for Development and the 1996 Report of the WHO Ad Hoc Committee on Health Research concluded that the central problem in health research is the concentration of health research resources on the diseases that affect the 10% of the world's population [1]. Of the US$ 50-70 billion spent worldwide each year on health research, less than 10% is devoted to the health problems of 90% of the world's population: an observation that gave rise to the term, the 10/90 gap.

These reports suggest that 1) resources for health R&D are highly concentrated in the high-income countries, 2) the resulting innovation, if left to commercial incentives alone, fail to benefit all and exacerbate health inequity, and 3) greater public oversight is needed to ensure innovation in health R&D benefits all.

The goal of the Product Development Award (PDA) is to **support developing new or improved vaccines, therapeutics, biologics, or diagnostic platforms as global public good** for prevention and control of infectious diseases that disproportionately affect the people in the Global South.

To achieve this goal, first, we focus on infectious diseases that have a disproportionate burden of morbidity and mortality in low- and middle-income countries (LMICs) or diseases with a pandemic potential.

Second, we support innovation that will significantly improve the scalability of and equitable access to the health technologies across countries and regions via public procurement including innovation to reduce cost and to improve manufacturability, ease of operation, thermostability and/or environmental sustainability.

Third, we support deep collaboration between Korean and non-Korean institutions that enables an exchange of ideas and expertise in the spirit of allyship and mutual respect. We particularly welcome and encourage collaboration between Korean and LMIC institutions to ensure that health technology development effort is guided by the local insights about the health system and socioeconomic context.

We fund projects with data to support proof-of-principle and are at or near the initiation of the clinical development/validation phase to achieve regulatory approval and WHO pre-qualification (WHO PQ).

Successful projects will be awarded up to 4 billion KRW per project to be conducted for up to 36 months.

By the end of the PDA, grantees are expected to have achieved a series of specific and measurable milestones toward the eventual WHO PQ and public procurement at the national and/or regional level in sub-Saharan Africa, Asia, or Latin America. Applicants will be asked to articulate a plan for scale and sustainability, and engage key stakeholders needed to proceed along the path to impact on improving health and health equity at population level. Successful grantees will be invited to apply for the Bridging Award to advance the product development to the next stage toward achieving the target impact.

1. About RIGHT Fund

The RIGHT Fund was established in 2018 as a partnership between the Korean Ministry of Health and Welfare (MOHW), Korean life science companies, and the Bill & Melinda Gates Foundation (BMGF) with the MOHW as the largest funder. Our mission is **to contribute to reduce health inequities attributable to infectious diseases in LMICs.**

2. Eligibility for funding

The RIGHT Fund reserves the right to determine the eligibility of applicants and public health priority among the submitted proposals at its discretion.

Partnership requirement

The applicant team must include *at least one Korean entity* with the expertise to make a significant contribution to the project (eligible partnerships in Table 2.1). Inclusion of non-Korean partner(s) especially those from the Global South is highly recommended.

Table 2.1 Eligible partnerships

Korean entity	Non-Korean entity
• Korean companies (or entities with a research facility in Korea) • Not-for-profit research organizations and foundations • Government research institutions • Academic institutions	• Life Science/Healthcare companies • Not-for-profit research organizations, foundations or product development partners • Government research institutions • Public health laboratories • Academic institutions

Commitment to Global Access

Our Global Access Policy represents the core principle of the RIGHT Fund 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 Fund 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.

For funding consideration, it is *mandatory for all our grantees and their collaborators* to agree to our Global Access Policy, and to articulate a clear path to achieving global access.

3. Funding Description

Target pathogens	Award amount
Causes of the infectious diseases with a disproportionate burden in LMICs or pathogens with a pandemic potential for which there is a demonstrable need for new or improved vaccines, therapeutics/biologics, or diagnostics to ensure equitable access.	Up to 50% of total project cost of up to 4 billion Korean won per project. Co-funding requirement may be waived for applicant teams which are composed solely of academic institutions and/or non-profit organizations.
Intervention types	**Project duration**
Vaccines, therapeutics/biologics, diagnostic platforms	Up to 36 months
Development stage	
Therapeutics/biologics and Vaccines: From pre-Phase I (e.g. IND enabling studies) to regulatory approval and WHO PQ. Projects should have data from at least one animal model to support the proof of principle at the time of application.	**Diagnostic platforms:** From pre-clinical phase to clinical validation and regulatory approval or WHO PQ. Projects should have some preliminary data to support the proof of principle.

4. Funding scope across intervention types

New approaches to prevent, detect or treat infections or diseases caused by the target pathogens		
Vaccines	**Therapeutics/Biologics**	**Diagnostics**
▪ Vaccine concepts with new antigens or antigenic epitopes to provide highly potent and broadly protective immunity against multiple species, strains, serotypes, groups or variants ▪ Clinical development of novel immunogens designed with the structure-guided approach or reverse vaccinology 2.0 [2,3,4] ▪ New formulations or adjuvants to extend the duration of immunity (i.e., long-lasting immune memory) ▪ Platform technologies for rapid scaling and deployment against multiple high priority pathogens with pandemic potential	▪ New chemicals or biologics that target the molecular sites of vulnerability of the pathogens based on a detailed understanding of the pathogen, host-pathogen interactions, mechanisms of infection or mechanism of severe disease ▪ New approaches to reduce doses and treatment duration	▪ New platforms to simultaneously detect multiple pathogens using minimal specimen volume ▪ Platforms to detect drug resistance to guide clinical management (e.g. malaria, tuberculosis, WHO global priority pathogens list of antibiotic-resistant bacteria)
Optimization of existing tools to improve equity in access, scalability, and sustainability		
Vaccines	**Therapeutics/Biologics**	**Diagnostics**
▪ Innovative delivery platforms to enable more scalable immunization, more effective route of administration, and/or reduce the number of doses ▪ Optimizing production method to reduce cost and improve manufacturability in LMICs, thermostability, and environmental sustainability	▪ Incrementally modified drugs to reduce doses and/or 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 cost and improve manufacturability in LMICs, thermostability and environmental sustainability	▪ 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 ▪ Optimization to permit less invasive, less complex or safer specimen collection ▪ Optimizing production method to reduce cost and complexity to improve manufacturability in LMICs, thermostability and environmental sustainability

We will not consider funding for:

- Discovery-phase proposals to identify pre-clinical candidates
- Basic research studies of pathogen or human biology or host-pathogen interactions
- 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

5. ITA (Intent to Apply) Submission

- **Deadline: 10:00AM KST on August 16th, 2022**
- **Where to submit**: Interested applicants must use the online application form provided, which is ONLY accessible via the RIGHT Fund's Grant Management System.

References

[1] Global Health in Transition: A Synthesis: Perspectives from International Organizations. Health Research: Essential link to equity in development. 1996. Bryant JH et al. National Academies Press.

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

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

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

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보건복지부

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