

Q&A for Submission of Proposals

Specific Questions on Calls for Proposals: Improving access to diagnostics through the adoption of tools and approaches that drive integration

Question	Answer
Can the proposal be linked to community health or strengthening health systems?	Unitaid's strategic model includes work to create systemic conditions for access. While we expect proposals to respond to the primary objectives, which include community-based strategies, for the call, enabling activities that strengthen the health system to facilitate integration can be included.
What is expected in terms of geographic coverage (number of countries, sub-geographies)?	The suggestion to focus on 4-5 countries emphasizes the importance of providing comprehensive support to countries. There is not a requirement to cover certain geographies, but implementation should target low-to-middle-income countries. Alignment with other investments that can be strengthened may also guide country selection. Proposals with varying levels of effort can be submitted--fewer countries would be acceptable for consideration. Additional countries beyond 5 would require strong rationale to demonstrate meaningful change that can be accomplished in a larger subset of countries. Proposals should articulate how learnings on tools and strategies beyond focus countries would be included to benefit other geographies. More specific criteria are listed in the Call scope
Can applications focus on a particular population?	Proposals are expected to be focused on high impact and aligned with specific disease areas and delivery gaps. Proponents are not expected to tackle all aspects of integration. A focus on populations or settings that would benefit from integration could be proposed and should be articulated in the context of the use-cases.
What kind of evidence does Unitaid expect applicants to generate — operational feasibility, health impact,	The level and type of evidence required will depend on the countries in focus and their requirements to advance policy adoption. Unitaid expects approaches to evidence generation to be primarily to drive policy adoption, and secondarily to support a learning agenda that would benefit other countries. Protocols are

cost-effectiveness, or policy adoption potential?	not expected at the time of submission, but articulation of proposed research or assessment topics can be included in the narrative.
Which diseases/conditions are in scope?	The call for proposals is designed to respond to country priorities, and should align with diseases within Unitaid's programmatic priorities, such as HIV, TB, STIs, Women/Children's Health, and PPPR, leveraging them as an anchor point while also enabling countries to define in their own contexts which additional diseases/co-morbidities could drive testing expansion beyond these anchor programs. Areas beyond Unitaid's programmatic priorities can be considered as part of testing expansion, if aligned with country strategies and priorities.
What integrated diagnostics are eligible for inclusion and in what settings?	The Call for Proposal outlines a focus on molecular diagnostics, but this does not preclude other technologies that have multi-disease/multi-modal capability or can be bundled for integrated delivery. These include immunoassays, immunochemistry, biochemistry, cell-based (like hematology), and molecular platforms at Point of care, near Point of care or facility level. As investment also has a focus on pandemic preparedness, a focus on platform-based technologies should be prioritized. Proposals that respond to a variety of different laboratory networks can be proposed, ensuring access at the most decentralized levels. This includes diagnostic services being delivered at the POC, but also through different levels of care, including laboratory networks at district or regional levels, but delivering access at primary levels.
Would integrated tests within a single disease area (e.g. HIV testing, HIV viral load, CD4, cryptococcal antigen) be a suitable focus for an application?	Proposals can place emphasis on a single disease as an anchor. However, they must also explore the potential to expand access beyond the primary disease of focus/beyond vertical programming.
What is meant by "aiming for full-scale implementation and/or delivery of products" under Areas out of scope of work?	Unitaid's investments are catalytic in nature. While the budget can allow for the purchase of commodities, Unitaid expects proposals to build on priorities within country programs, including the existing footprint of diagnostic technologies. It is also expected the proposals will describe synergies with other potential funding sources (including other Unitaid programs where relevant).

Can proposals have a primary focus on implementation of digital health solution?	Digital Health solutions are important for the strategy of integrated solutions but could be included as a sub-component of proposals.
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General Questions

Question	Answer
What is the proposal process under the Unitaid Operating Model?	1) Once a Call is issued, applicants are invited to attend a webinar on a date specified in the call for proposals text. The webinar presents the call scope, content, and process and answers questions submitted ahead of time using the online webinar registration form. Webinar attendance is not a mandatory requirement, however is strongly encouraged as it allows proponents to obtain further information and ask questions. A webinar recording is posted on the call for proposals web-page for all those unable to attend real time. 2) Full proposals must be submitted electronically using the Unitaid proposal form and the rest of annexes by the indicated closing date. Please note: proposal submissions are considered complete only when the proponent has received an email receipt from Unitaid. 3) Proposals received are reviewed by Unitaid. Finalist proposals are assessed by the Joint Review Committee (JRC), composed of representatives of the Unitaid Secretariat and the Proposal Review Committee (PRC). 4) The recommendations of the JRC must be endorsed by the Unitaid Board for a “go-ahead” to start developing a grant agreement. This endorsement does not mean and should not be perceived as involving any obligation on the part of Unitaid to fund the project. 5) Successful applicants receive a formal “go-ahead” for their proposal and will be requested to develop a full grant agreement in collaboration with Unitaid.

Can a proposal that includes middle-income countries in scope be submitted?	Yes. While the primary focus of Unitaid investments is in low-income countries, proposals that include middle-income countries in scope are eligible. In principle, Unitaid looks for proposals that accrue benefit to those most in need (e.g., those in low-income countries, vulnerable populations). To this end, proposals should clearly demonstrate the use of innovative and sustainable approaches and are expected to outline a concrete and clear pathway to results and impact. Applicants should also demonstrate that their proposal is feasible and that they have the capacity to implement it. Across its portfolio of projects, at least 85% of Unitaid funds dedicated to commodity purchase must be spent in low-income countries. Middle-income countries are also eligible for inclusion in Unitaid-funded projects, however for any proposed project that includes a greater than 15% proportion of funding for commodity purchases in middle-income countries, the justification should be clearly stated, in line with the objectives of the Call for Proposals. Wherever possible, funding in middle-income countries should be used to increase access to commodities for vulnerable groups. Proposals focused on middle income countries will need to explain how low and lower-middle income countries will benefit from the interventions, at least indirectly, and what efforts will be made to ensure these indirect benefits materialize.
Who can submit a proposal?	Unitaid implements its interventions through partner organizations—it does not directly implement projects and has no in-country presence. Therefore, proposals that include country-level implementation must clearly demonstrate that the applicant organization has the capability and capacity to deliver the proposed activities in the target countries, and that the intervention will achieve a measurable global or regional impact. Government agencies and organizations, UN agencies, international organizations, for-profit entities, research institutions, universities, NGOs, and community-based organizations are eligible to submit proposals. Private sector entities may also participate as members of a consortium. Multi-country entities are likewise eligible to apply. For this specific call, Unitaid encourages submissions from regional or south-based leads who bring together a network of partners. Unitaid sees value and expects to award Regional or South-based consortium lead implementers with experience in leading the implementation of multi-country projects that support access to health products in LMICs.
Are NGOs and civil society organizations eligible to submit a proposal?	Yes. Unitaid can provide grants to NGOs and civil society organizations. All Unitaid implementers must demonstrate their established capacity to manage their project.

Can a consortium submit a proposal?	Yes, a consortium approach is encouraged for this call. Any consortium approach should have a strong lead organization with overall responsibility for project implementation.
What constitutes a consortium?	A Consortium is a group of partners who have agreed to implement the project together on the basis of clearly defined agreements, which set out the basis on which all but the lead implementer is a sub-grantee with no direct legal relationship to Unitaids. Entities or individuals providing services to the project on a commercial basis are service providers and not Consortium Members. Partners collaborating on the implementation of the project but that are not active part of the project design and execution are not to be considered members of the consortium but will be identified as collaborating partners. The consortium could include organizations from different countries.
Which organization would Unitaids prefer to have in the lead for a consortium project proposal?	The selection of the lead agency/ organization in a consortium application is at the discretion of the consortium members, however Unitaids remains committed to progressively engaging an increased number of lead implementers from the Global South. It should be noted that the lead of a consortium has overall responsibility for project implementation, including coordination of consortium members and communications with/reporting to Unitaids. They are also often the main route of funding. In determining the most suitable lead, consideration should be given to each of these factors to identify which organization is best suited to deliver on each of them and assume overall responsibility for project activities. The capacity of the lead organization to manage the consortium and to report will be key at all stages of the project implementation.
Can an organization respond with more than one proposal in the capacity of lead organization?	Yes. Organizations can certainly respond with more than one proposal as lead organization. However, the organization must have the capability to deliver on any proposal they submit. Organizations must provide robust justification for the configuration of any consortium proposed, including the relative roles and responsibilities of members in achieving the goals detailed in each proposal.
Can a consortium member, a service provider or a collaborating partner participate in several proposals under the same call for proposals?	Yes, consortium members, service providers and collaborating partners can participate in several proposals under the same call for proposals. If relevant, proponents could also apply to different opened calls for Proposals.
Does Unitaids support R&D projects for diagnostics?	Subject to call scope, Unitaids can support some late-stage R&D activities. Late-stage development for Unitaids means a focus on products that are close to market entry, such as those undergoing final field validation, verification, or regulatory processes. In the context of this investment, projects may include support for regulatory approval or other late-stage development, provided there is a clear rationale for the added benefit of the proposed candidate product(s). Proponents would also be expected to

	continue monitoring the product pipeline over the duration of the project. Investments will not fund early-stage or proof-of-concept activities.”
Can I contact Unitaïd for further guidance on proposal development?	Unitaid provides guidance on the application process and the application forms. Questions should be addressed to Grant Applications Manager at proposalsunitaid@who.int In the interest of fairness and transparency, Unitaid does not provide guidance to individual organizations on substantive issues for responding to each call beyond what is available in the call text, associated documents published on the Unitaid website or through webinars announced in the call text.
What is the typical timeframe for Unitaid projects?	Unitaid makes catalytic investments. The timeframe is typically 3 to 5 years, including transition and sustainability plan. For this particular call the suggested timeline is 3-5 years
Is there a limited grant size?	Unitaid considers funding size in light of Unitaid's strategy, available funds, investment required for impact, and existing portfolio of projects. As a general principle, Unitaid aims to fund projects that are targeted and 'lean' – that is, scoped at the minimum size required to achieve the desired market impact and public health effects and demonstrate value for money. The total approximate funding for all project(s) selected from this Call for Proposals will depend on the proposals received and the scope of work undertaken – but will be approximately US\$ 25 million overall at this time. There are no pre-determined country-level funding envelopes. Similarly, there is no pre-determined budget ceiling per project.
Are proposals focusing on a single country allowed?	For this call for proposals, single-country proposals are out of scope. We are looking for proposals that have regional and global impact. If your organization works in one country only, you may want to consider joining forces with others and applying as a consortium. We suggest referring to the webinar participant list to connect and join/create a consortium
Do Unitaid grantees automatically benefit from tax exemption for the importation of goods?	Unitaid encourages the grantees to take all measures to secure tax and customs duty exemptions for all expenses incurred, especially regarding purchase of commodities with delivery to project countries. It should be noted that many of our grantees are successful in securing such exemptions.

Products must comply with Unitaid Quality Assurance Policy to be eligible for procurement. Are there any other conditions to be met?	Conditions on procurement within Unitaid grants may vary according to the commodity purchased, and detailed procurement conditions are typically finalized during grant development. Regarding quality assurance, as a general rule, Unitaid has harmonized its policy with those of other major partners, such as the Global Fund. As a result, Unitaid typically requires that product be WHO Prequalified, authorized for use by a Stringent Regulatory Authority (SRA), or reviewed and permitted for use by the Expert Review Panel for Diagnostics (ERP-D) as described in the Unitaid Quality Assurance guidelines
A high-burden country makes and buys its own local diagnostic, which is not WHO- prequalified or registered by a recognized stringent regulatory authority (SRA). Would Unitaid require that any project work it funds be used to increase demand only for product that is WHO- prequalified or SRA-registered?	Unitaid expects efforts to improve access to better, quality-assured treatment. Unitaid requires that any product procured with its funds conform with the Unitaid Quality Assurance guidelines - i.e., that products are WHO-prequalified or approved by a recognized SRA or reviewed and permitted for use by the Expert Review Panel for Diagnostics (ERP-D). In addition, in funding activities not directly related to product procurement, Unitaid still emphasizes the importance of quality assurance to 1) ensure that people in need receive appropriate, quality-assured medicines and diagnostics and 2) contribute to improving market health and stability for quality- assured health products.
Does Unitaid provide feedback at the end of the proposal review process?	Unitaid informs all proponents of the outcomes of the call through an official letter. Please note that there is no appeal process at Unitaid. Unfortunately, due to limited capacity, Unitaid is unable to provide individual feedback on all proposals received. However, proposals that reach the final stage of the review process are offered more detailed feedback.

Questions Related to Submission of Proposals

Question	Answer
Does Unitaid provide samples of proposal submissions?	No; however, the submission form provides useful guidance on how proponents should approach each section of the proposal form.
Which template should be used? Which language?	Proposal templates are available on the Call for Proposals webpage. Please note that each template is specific to its corresponding call, and proponents must strictly adhere to the template format and word limits. No other documents are required. Only proposals in English will be reviewed, as we have an international review team. However, please note that we do not penalize or score based on the quality of English.

Does GANTT chart need to include monthly planning for the full duration of the project?	At the proposal stage proponents are requested to provide quarterly planning and monthly planning only for the first year of the project. The monthly planning can be indicative at this stage and if the proposal receives “Go-Ahead” decision, a more detailed planning will need to be done during the grant agreement development process.
What level of detail should the budget contain?	At the stage of submission of a proposal an indicative but realistic budget estimate will have to be prepared using the budget template that can be found at https://unitaid.org/uploads/Annex-2_Budget_Oct2025.xlsx
What are the rules regarding the indirect or overhead costs?	Unitaid agrees to fund a fair share of general administrative expenses linked to the general running of the head office administration of the different consortium members. Such expenses should primarily include expenses associated with head office corporate functions which support the entire operations (e.g. general management, human resources, finance, accounting, legal, internal audit, risk management) as well as expenses linked to the general running of headquarter infrastructures (e.g. facility, information systems). Unitaid has established the following maximum levels: - 2% on commodity expenses. - 13% on other project expenses. Any expenses linked to fundraising and lobbying activities are excluded from such general administrative expenses and are not funded by Unitaid. When projects are implemented through a consortium of organizations, Unitaid only accepts general administrative expenses of either the lead grantee or the sub-grantee and does not support overlapping layers of general administrative expenses.
Is there a list of cost categories allowable/non-allowable for inclusion in the proposal budget?	Yes, Unitaid uses a standard expense classification. It can be found in the proposal budget form (Annex 2) that is available on Unitaid website https://unitaid.org/uploads/Annex-2_Budget_Oct2025.xlsx
Should budget be segregated by sub-grants?	Budgets of sub-awards to partners should be detailed using the proposal budget form (section 1, table Budget by organization).
Is there an audit requirement (do we have to plan some budget for audit or evaluation that would be contractually requested)?	Unitaid requires the grantees to engage with an audit firm to carry out annual financial audits during the project implementation and until the end of the project. The lead applicant should therefore include financial audit costs in the annual budgets. Such financial audit would normally include reasonable assurance engagements and agreed-upon procedures on specific areas. The estimated value of audit costs should be based on prevailing market rates.

Is co-funding required or recommended and if yes, at which level?	Co-funding is not a mandatory requirement; however, proponents are encouraged to include this information in the proposal. Please note that Unitaid defines co-funding as funding secured from other funding sources or as in-kind contribution, in addition to the Unitaid project funding to accomplish the Unitaid project outputs. Other funding sources that will be used to finance activities which will support but not directly contribute to the achievement of the output should not be treated, and therefore not included, as co-funding. Please note that the budget form asks you to indicate the co-funding source (Section 2 of the form), if applicable, and if the co-funding is confirmed or anticipated.
What analysis on impact and value for money needs to be included in the proposal?	The proposal must plausibly demonstrate a clear analysis of the expected market and public health impacts and how the proposal would contribute to goals and targets set in respective disease strategies by WHO and other partner organizations. More detailed guidance on impact assessment can be found at Guidance-on-Impact-Assessment-1.pdf
Can more than 5 risks be listed under Section 7 of the application form?	Unitaid would like to encourage proponents to identify the most critical risks for the implementation of the project instead of presenting a large list of potential risks.
Do Annexes 4, 5, 6, 7, 8 and 9 need to be completed for all members of consortium?	The Annexes 4, 5, 6, 7, 8 and 9 need to be filled for the lead agency only.