The Drugs for Neglected Diseases initiative (DNDi) is an international non-profit organization that discovers, develops, and delivers safe, effective, and affordable treatments for the most neglected patients.

DNDi has forged a diverse range of R&D collaborations with over 200 partners in more than 40 countries, united in our pursuit of science driven by collaboration, not competition, and by patients’ needs, not profits. With no labs or manufacturing facilities of our own, we act as a ‘conductor of a virtual orchestra’ at every phase of the R&D process – from drug discovery and pre-clinical research to clinical trials and access. We have been building alliances and strengthening cross-sector networks to deliver lifesaving medical innovation since 2003.

During this Strategic Plan period, we will expand our footprint in low- and middle-income countries (LMICs) to foster sustainable solutions – growing our partnerships and industry networks to power innovation ecosystems that put people’s needs first, accelerate test-and-treat approaches, and ensure equitable access to medical care. And we will continue to champion open science and transparency.

Our progress will contribute directly to achieving the Sustainable Development Goals, including universal health coverage.

**INNOVATING TO SAVE LIVES**

Leveraging our alliances and rich portfolio of new drug candidates, we will deliver 15–18 new treatments between 2021 and 2028.

DNDi will prioritize the needs of patients affected by neglected tropical diseases (NTDs) and viral diseases that exact a disproportionate toll on already vulnerable and neglected communities. Our teams will contribute to responses to pandemic-prone infections and climate-sensitive diseases. Our work will be underpinned by our commitment to advancing a proactive agenda for maternal and child health and gender-responsive R&D and employing new technologies to accelerate R&D and access.

**Read our full Strategic Plan: dndi.org/strategy**
COMMITMENTS: 2021–2028

DELIVER 15–18 ADDITIONAL TREATMENTS
10-12 new treatments from current mature portfolio (2021-24)
5-7 new treatments from earlier-stage NCEs and portfolio expansion (2025-28)

FOCUS ON 5 CROSS-CUTTING STRATEGIC IMPERATIVES

1. Deliver new treatments and expand access for neglected patients by addressing R&D gaps for NTDs and viral diseases, including pandemic-prone and climate-sensitive diseases

2. Join with public health leaders and R&D actors in low- and middle-income countries to advance sustainable innovation ecosystems that address neglected patients’ needs

3. Contribute to building a proactive agenda for maternal and child health and gender-responsive R&D

4. Champion open science and transparency

5. Leverage new technologies to accelerate R&D and access

DRIVE IMPACT ACROSS THE 3 PILLARS OF OUR MISSION

INNOVATE TO SAVE LIVES
- Deliver 15-18 new treatments
- Identify 8-10 new drug candidates from discovery efforts
- Conduct at least 6 new studies on indications for pediatric use
- Develop strategies tailored to target diseases and countries’ specific needs to ensure equitable and affordable access and delivery of new treatments

FOSTER SUSTAINABLE SOLUTIONS
- Grow partnerships for ‘end-to-end’ R&D in LMICs
- Proactively collaborate with LMIC pharmaceutical and other partners
- Conduct half of first-in-human Phase I studies in LMICs
- Train 600 to 1,000 frontline clinicians and researchers every year

ADVOCATE FOR CHANGE
- Secure concrete changes in key policies to make the innovation system more needs-driven, collaborative, equitable, open and transparent, inclusive, and sustainable
- Engage with 50+ strategic advocacy partners to build stronger coalitions and more effective networks of influence
- Document and disseminate key lessons from DNDi’s model
DNDi will deliver 15 to 18 new treatments between 2021 and 2028, for a total of 25 new treatments in our first 25 years

### 2021–2024

<table>
<thead>
<tr>
<th>DISEASE</th>
<th>GOAL</th>
<th>DESCRIPTION</th>
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<tbody>
<tr>
<td><strong>SLEEPING SICKNESS</strong></td>
<td>Accelerate sustainable disease elimination</td>
<td>Breakthrough single-dose oral treatment ▶️ New treatment for children ▶️ New treatment for a less common but more acute form of the disease (T.b. rhodesiense) ▶️ Boost access to simplified testing and treatment</td>
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<tr>
<td><strong>LEISHMANIASIS</strong></td>
<td>Deliver safer, simpler treatments to save lives and reduce social stigma</td>
<td>Five new short-course treatments for VL and HIV co-infection, VL in East Africa and Latin America, PKDL, and CL ▶️ Children included in VL clinical trials for paediatric indications ▶️ Two oral combination regimens based on new chemical entities advanced to Phase III; an immunomodulator for CL advanced to clinical development ▶️ Ensure prompt diagnosis and affordable access to new treatments</td>
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<tr>
<td><strong>CHAGAS DISEASE</strong></td>
<td>Contribute to eliminating Chagas as a public health problem</td>
<td>Safer and shorter benznidazole-based treatment ▶️ New chemical entities entering clinical trials, with at least one advanced to Phase III ▶️ Support development of validated early test-of-cure to accelerate clinical trials and regulatory approval ▶️ Reduce mother-to-child transmission and accelerate roll-out of test-and-treat strategies</td>
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<tr>
<td><strong>FILARIA: RIVER BLINDNESS</strong></td>
<td>Advance progress toward breaking the cycle of transmission</td>
<td>Phase II trials to identify new drug candidates that can permanently sterilize or kill adult filarial worms, with one drug or drug combination entering Phase III ▶️ Children included in clinical trials for paediatric indication</td>
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<tr>
<td><strong>MYCETOMA</strong></td>
<td>Prevent devastating amputation and disability</td>
<td>New treatment for mycetoma ▶️ Ensure treatment access for all people in need</td>
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<tr>
<td><strong>HIV</strong></td>
<td>Ensure access to lifesaving treatment for children and people with advanced HIV</td>
<td>Easy-to-administer, child-friendly ‘4-in-1’ treatment formulation ▶️ Promote access to new paediatric formulations (both DNDi treatment and others) ▶️ Improved treatment for cryptococcal meningitis, a leading killer of people with advanced HIV ▶️ Define DNDi role in addressing neglected R&amp;D needs for serious HIV-related opportunistic infections (advanced HIV) and HIV treatments for neonates, children, and adolescents</td>
</tr>
<tr>
<td><strong>HEPATITIS</strong></td>
<td>Help make treatment a reality for millions of people waiting for a cure</td>
<td>Simple-to-use, affordable treatment for hepatitis C ▶️ Promote access to treatment for hepatitis C (both DNDi treatment and others) ▶️ Define DNDi role in addressing neglected R&amp;D needs in hepatitis B and E</td>
</tr>
<tr>
<td><strong>COVID-19 AND PANDEMIC-PRONE DISEASES</strong></td>
<td>Speed tools for testing and treatment to save lives in resource-limited settings</td>
<td>Study treatments for mild-to-moderate COVID-19 ▶️ Define DNDi role in discovery and clinical research to support pandemic preparedness and response</td>
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### 2025–2028

<table>
<thead>
<tr>
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<tr>
<td><strong>NEW AREAS</strong></td>
<td>Investigate additional areas of neglect and assess whether and how DNDi should engage</td>
<td>Assess feasibility and select priorities for the development of treatments among new disease candidates for possible entry in DNDi portfolio, including dengue fever, snakebite, and schistosomiasis</td>
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● Research and development ○ Access and advocacy ▲ New treatment delivery ● Illustrative

New treatments are the result of projects delivering a new registration, a new indication within an existing registration, or a new therapeutic guideline.
FOSTERING SUSTAINABLE SOLUTIONS

Scientific and public health leaders in LMICs are shaping new innovation ecosystems that have the potential to transform how R&D can meet neglected patients’ needs. Our partnerships are amplifying and accelerating this progress.

Our teams are working to more fully harness our proximity to the needs of neglected patients and build from our established alliances to take full advantage of existing and growing LMIC industrial, regulatory, and clinical trial capacity.

Working with partners and expanding our organizational footprint in LMICs, we aim to:

- Encourage public leadership for more effective and equitable approaches to R&D
- Sustain and develop LMIC clinical research networks and ‘lead optimization’ programmes
- Grow our partnerships with pharmaceutical companies in LMICs to ensure sustainable production and supply
- Conduct at least 50% of first-in-human Phase I trials in LMICs
- Facilitate trainings and facility upgrades where needed to sustain robust local management of Phase II-IV trials

ADVOCATING FOR CHANGE

An essential part of DNDi’s mission is to promote public responsibility and advocate for public policies that will enable a more effective and equitable global biomedical R&D system that delivers both innovation and access.

DNDi will continue to stress the need for political leadership to drive system change. We will enrich the evidence base for change by further documenting our own experience, particularly on open knowledge innovation, sustainable and equitable financing models, pro-public health IP and equitable licensing terms, transparency of R&D data and costs, R&D approaches that harness new technologies, and use of innovative regulatory pathways to expedite access for patients.

POWERING OUR AMBITIONS

A diverse workforce and an inclusive culture are central to the success of DNDi’s mission and programmes. Our staff, leadership, and partners working in LMICs are critical to that success. DNDi offices in LMICs now host 40% of our workforce, which we will grow to 50% by 2028 – including a rising share of senior leadership.

We will adopt best practices in alliance management to further our strategic partnerships with industry, public health experts, and academia, while employing new technologies to improve the efficiency of our operations and accelerate the pace of the R&D process, including utilizing AI as a supportive technology. We will foster long-term strategic alliances with at least five global pharmaceutical partners and expand our partnerships with small and mid-size pharmaceutical companies in LMICs.

We will contribute to climate change mitigation – limiting our carbon footprint and working to ‘green’ the pharmaceutical development process wherever possible – to achieve a minimum 30% reduction in our environmental impact by 2028.

We will seek the support of governments, other funding institutions, and private philanthropy to raise EUR 612 million for 2021-2028, including 136 million already secured for the period. We will strengthen our M&E systems to enhance evidence-based decision-making and demonstrate value for money as we maintain optimal efficiency with low overheads.

A further €612 million investment, to reach 25 treatments in 25 years

![Chart showing investment]