

**Table 1: Budget Breakdown by Mechanism
U.S. President's Malaria Initiative – DRC
Planned Malaria Obligations for FY 2023
Revised September 22, 2023**

Mechanisms and Proposed Activities	Sum of Budget (in \$)
Breakthrough ACTION	\$ 1,150,000
National Level Support for Case Management	\$ 50,000
Other SBC	\$ 100,000
SBC Implementation	\$ 1,000,000
CDC IAA	\$ 1,469,000
Case Management-Related CDC TDY	\$ 10,000
CDC In-Country Staffing and Administration	\$ 1,250,000
OR-Related CDC TDY	\$ 10,000
SBC-Related CDC TDY	\$ 10,000
SM&E - Related CDC TDY	\$ 10,000
Support to FETP	\$ 150,000
Vector Control-Related CDC TDY	\$ 29,000
Country Health Information Systems and Data Use (CHISU)	\$ 3,014,000
Other Health Systems Strengthening Implementation	\$ 885,000
Support Routine Surveillance	\$ 1,835,000
SBC Implementation	\$ 294,000
Digital Square	\$ 110,000
Other Health Systems Strengthening Implementation	\$ 110,000
Integrated Health Program (IHP-DRC)	\$ 6,581,419
Community-based Case Management	\$ 1,506,000
Distribute ITNs for Continuous Distribution Channels	\$ 1,673,403
Facility-based case management	\$ 1,100,000
MIP Implementation	\$ 652,016
SBC Implementation	\$ 900,000
Support Routine Surveillance	\$ 750,000
Power Africa	\$ 300,000
Other Health Systems Strengthening Implementation	\$ 300,000
Promoting the Quality of Medicines Plus (PQM+)	\$ 300,000
Strengthen Medical Product Quality Assurance	\$ 300,000
TBD - Bilateral Mechanism	\$ 100,000
Other Health Systems Strengthening Implementation	\$ 100,000
TBD - Central Vector Control Mechanism	\$ 1,270,000
Support Entomological Monitoring	\$ 1,270,000
TBD - Malaria Service Delivery Central Mechanism	\$ 1,050,000
Facility-based case management	\$ -
Other Case Management Implementation	\$ 650,000
Support Therapeutic Efficacy Study	\$ 400,000
TBD - Supply Chain Central Mechanism	\$ 31,345,388
Distribute ITNs for Continuous Distribution Channels	\$ 1,579,358
Procure ACTs	\$ 5,222,156
Procure Drugs for Severe Malaria	\$ 3,034,818
Procure IPTp Related Commodities	\$ 2,719,888
Procure ITNs for Continuous Distribution Channels	\$ 11,810,391
Procure RDTs	\$ 3,609,904
Supply Chain and Pharmaceutical Management	\$ 1,475,000
Warehousing and Distribution	\$ 1,893,873
USAID	\$ 2,810,000
USAID In-Country Staffing and Administration: Administration	\$ 960,000
USAID In-Country Staffing and Administration: Staffing	\$ 1,850,000
PMI Evolve	\$ 5,000,193

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Distribute ITNs for Mass Campaigns	\$	5,000,193
Grand Total	\$	54,500,000

Table 2: Budget Breakdown by Activity
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Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Award Type	Local Partner	Budget (in \$)	Nationwide/ Central	Region(s)	District(s)	Description of Proposed Activity
VECTOR CONTROL	Entomological Monitoring	Support Entomological Monitoring	PMI Evolve	Contract	Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$725,000	Nationwide			Support for entomological monitoring in at least 14 sites, including basic entomological indicators. Four sites (Lodja, Inongo, Kimpense and Makalayi) will conduct monthly monitoring to better understand seasonality and vector behavior of various species and human behavior. Support is specifically focused on species identification and insecticide-resistance monitoring through supervision and technical assistance for field and laboratory activities. These activities will be implemented through the National Institute of Biomedical Research and the Kinshasa School of Public Health
VECTOR CONTROL	Entomological Monitoring	Support Entomological Monitoring	PMI Evolve	Contract	Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$80,000	Nationwide			Piloting community-based entomological surveillance in high burden PMI provinces
VECTOR CONTROL	Entomological Monitoring	Support Entomological Monitoring	PMI Evolve	Contract	Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$115,000	Nationwide			Support training in field entomology for national and provincial staff, with a special focus on quality assurance and with the goal of increasing the number of sites not needing INRB supervision. This also includes funding for two participants in the PEDIR training, 1 person in basic training and 1 person in the advanced training.
VECTOR CONTROL	Insecticide Treated Nets	Distribute ITNs for Mass Campaigns	PMI Evolve	Contract	To be determined	\$5,000,193	Central	Kasai Central		Support distribution in Kasai Central for ITN mass campaign. This assumes that AMF will procure the bednets. The funding includes transportation from the port of entry to the provincial warehouse and then to households and all campaign-related activities (census, training, registration, communication, etc.).
VECTOR CONTROL	Insecticide Treated Nets	Distribute ITNs for Continuous Distribution Channels	Integrated Health Program (IHP-DRC)	Contract	No-this activity will not be implemented by Local Partners	\$1,673,403	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika		Distribute 3,346,806 ITNs for continuous distribution in PMI-supported provinces through ANC and child health clinics. Cost estimate includes delivery from health zones to health facilities, storage, and supervision.

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VECTOR CONTROL	Insecticide Treated Nets	Distribute ITNs for Continuous Distribution Channels	Working Capital Fund, LLIN Distribution; or	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$1,579,358	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Warehousing costs at regional warehouses for continuous distribution (8% of ex-works (factory) of ITNs, product price, in addition to transport to health zones (5% of product price)).
VECTOR CONTROL	Insecticide Treated Nets	Procure ITNs for Continuous Distribution Channels	Working Capital Fund, Commodity Procurement	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$11,810,391	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Procurement of 3,346,806 PBO ITNs for ANC and EPI continuous distribution. This includes delivery to CDRs.
DRUG BASED PREVENTION	Prevention of Malaria in Pregnancy	MIP Implementation	Integrated Health Program (IHP-DRC)	Contract	No-this activity will not be implemented by Local Partners	\$300,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Supportive supervision of health workers, primarily at facilities with ANC clinics. The activity includes mentoring and support for ANC staff on malaria in pregnancy, with a focus on IPTp and management of malaria in pregnant women. The focus of supportive supervision will be informed by findings from the Breakthrough Action ANC/IPTp study carried out in 2021. Approximately 1,000 health workers will be targeted in PMI-supported provinces with priority given to provinces and health zones with poor performance based on DHIS-2 data. Supervision visits are integrated with malaria case management and other health elements. Also, provision/replacement of water containers and reusable cups to facilitate directly observed IPTp.
DRUG BASED PREVENTION	Prevention of Malaria in Pregnancy	MIP Implementation	Integrated Health Program (IHP-DRC)	Contract	No-this activity will not be implemented by Local Partners	\$352,016	Central	To Be Determined	Expansion of community IPTp through community care sites based on global evidence and findings from the DRC TIPTOP study. Support will include training, supportive supervision, and monthly monitoring meetings.

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DRUG BASED PREVENTION	Prevention of Malaria in Pregnancy	Procure IPTp Related Commodities	Working Capital Fund, Commodity Procurement	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$2,719,888	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Procure 6,974,073 treatments of SP (50x3 blister packs). The cost estimate includes delivery to regional warehouses. This procurement will leave a three-month buffer stock in country based on CY 2023 needs for PMI provinces.
CASE MANAGEMENT	Procure Case Management- Related Commodities	Procure RDTs	Working Capital Fund, Commodity Procurement	Cooperative Agreement	To be determined	\$3,609,904	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Procure 9,024,760 HRP2 (Pf) cassette (25 tests) RDTs for use at hospitals, health centers, and community care sites in PMI-supported provinces. This procurement will leave a three month buffer stock in country based on CY 2023 needs for PMI provinces.
CASE MANAGEMENT	Procure Case Management- Related Commodities	Procure ACTs	Working Capital Fund, Commodity Procurement	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$5,222,156	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Procure ACT treatments divided as follows: 30% artemether-lumefantrine (3,333,292) for use in urban areas and 70% artesunate-amodiaquine (7,777,679) for use in rural areas. ACTs will be used at hospitals, health centers, and community care sites. Cost estimate includes delivery to regional warehouses. This procurement will leave a three month buffer stock in country based on CY 2023 needs for PMI provinces.
CASE MANAGEMENT	Procure Case Management- Related Commodities	Procure Drugs for Severe Malaria	Working Capital Fund, Commodity Procurement	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$2,965,064	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Procure 1,418,691 vials of injectable artesunate, covering the CY 2023 estimated needs of children ages 0-5 years, for reference health centers and hospitals. Cost estimate includes delivery to regional warehouses. There will be no anticipated buffer stock of this commodity at the end of CY 2024.
CASE MANAGEMENT	Procure Case Management- Related Commodities	Procure Drugs for Severe Malaria	Working Capital Fund, Commodity Procurement	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$69,754	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Procure 110,721 blister packs for pre-referral treatment. Cost estimate includes delivery to regional warehouses. Assumes two suppositories for each expected need (including for children <10 kg), since they come in blister packs of two. This procurement will leave a sixmonth buffer stock in country based on CY 2023 needs for PMI provinces.

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CASE MANAGEMENT	Case Management Implementation	Community-based Case Management	Integrated Health Program (IHP-DRC)	Contract	No-this activity will not be implemented by Local Partners	\$400,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Provide supportive supervision of community health workers that offer integrated case management for malaria, diarrhea, and pneumonia at community care sites. We are continuing to build on investments from previous years to reduce the gap in the needs and numbers of community care sites. We are currently supporting almost 3,115 community care sites.
CASE MANAGEMENT	Case Management Implementation	Community-based Case Management	Integrated Health Program (IHP-DRC)	Contract	No-this activity will not be implemented by Local Partners	\$1,008,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	CHWs' monthly reimbursements, as a way to motivate them for their valuable contribution. The monthly commodities transport reimbursement is an estimated flat rate paid per community care site, but not per CHW, per year. PMI plans to use \$440k transport, for \$10 per month per CCS, for 3,665 CCS, for 12 months.
CASE MANAGEMENT	Case Management Implementation	National Level Support for Case Management	Breakthrough ACTION		To be determined	\$50,000	Nationwide		Advocacy and coordination to develop a national strategy for professionalization of CHW.
CASE MANAGEMENT	Case Management Implementation	Facility-based case management	Integrated Health Program (IHP-DRC)	Contract	No-this activity will not be implemented by Local Partners	\$1,100,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Supportive supervision (on-the-job training and mentoring) of facility-based health workers responsible for the management of both uncomplicated and severe malaria in public and not-for-profit health centers and hospitals. PMI plans to target health workers in low-performing health structures by using provincial level DHIS2 analysis to identify poor-performing health zones/high volume facilities. Data from various activities will help inform the focus of supportive supervision (e.g., DQAs, RDT adherence study, continuous quality improvement pilot). Supervision will be integrated with MIP and ITN routine distribution. Train ~1,000 health workers and provide refresher training for an additional 500 health workers who provide services in 3,500 health facilities. Pending malaria vaccine rollout, support the introduction of vaccine in health facilities through health system strengthening, supportive supervision and community engagement.
CASE MANAGEMENT	Case Management Implementation	Other Case Management Implementation	TBD - Malaria Service Delivery Central Mechanism	TBD	Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$50,000	Nationwide		Support the malaria pre-service training curriculum repository's activities implementation monitoring, including support for the consultation framework between the PNL and higher education and university institutions trainers, website maintenance (MoH and Ministry of Higher Education and University), and annual review.

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CASE MANAGEMENT	Case Management Implementation	Other Case Management Implementation	TBD - Malaria Service Delivery Central Mechanism	TBD	Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$600,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu,	Supervise and implement a system for quality control and quality assurance of malaria diagnostics and assist in preparation for accreditation of laboratory technicians. Conduct training of 100 laboratory technicians in HGRs.
CASE MANAGEMENT	Case Management Implementation	Facility-based Case Management	TBD - Malaria Service Delivery Central Mechanism	TBD	Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$0	Nationwide		Malaria case management refresher trainings, joint lab/clinical outreach training and supportive supervision (OTSS+) visits. Print and disseminate current national CM guidelines, to clinicians in selected low performing health facilities (HF). Procure additional tablets to support the OTSS+ visits for clinical supervisors from the new selected low performing provinces. Support a feedback session after each OTSS+ visit of selected health facilities from the new low performing provinces, to create a continuous bidirectional feedback loop that engages health facility clinicians, lab technicians, facility in-charges, pharmacists, and other relevant staff in the continuous quality improvement process. Training has been discontinued for this MOP funding round.
CASE MANAGEMENT	Case Management Implementation	Support Therapeutic Efficacy Study	TBD - Malaria Service Delivery Central Mechanism	Cooperative Agreement	Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$707,000	Nationwide		Support NMCP in conducting four therapeutic efficacy studies in Rutshuru and Kimpese as Bunia and Kasongo. Includes costs for reagents to conduct the molecular testing in-country. Additional funds needed to cover new sites and lab analyses per revised TES cost estimates.
SUPPLY CHAIN	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	Working Capital Fund, Supply Chain Technical Assistance;	Cooperative Agreement	To be determined	\$1,275,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Supply chain management strengthening for malaria commodities including forecasting, inventory management at CDR level, and the logistics management information system at national and provincial levels. Work with Health Zone staff to strengthen skills in overseeing and supporting the SC. Capacity building of HZ and FOSA staff in SCM. Strengthening visibility, quality and use of supply chain data from all levels.
SUPPLY CHAIN	In-Country Supply Chain	Strengthen Medical Product Quality Assurance	Promoting the Quality of Medicines Plus (PQM+)		No-this activity will not be implemented by Local Partners	\$300,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Post-marketing surveillance of antimalarial medicines and technical assistance to the Direction de la Pharmacie et du Medicament (DPM) for quality assurance and quality control of antimalarial medicines.

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SUPPLY CHAIN	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	Working Capital Fund, Supply Chain Technical Assistance;	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$200,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Annual end-use verification survey of a representative sample of health facilities and warehouses. Co-funded with the Global FUND to cover 25 of the 26 provinces. Comparison of EUV data against the InfoMED data to see how consistent the data are.
SUPPLY CHAIN	In-Country Supply Chain	Warehousing and Distribution	Working Capital Fund, Warehousing & Distribution.	Cooperative Agreement	Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$1,893,873	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Warehousing costs at regional warehouses for commodities, excluding ITNs, are 8% of ex-works (factory) product price, in addition to transport to health zones (5% of product price).
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Country Health Information Systems and Data Use (CHISU)		No-this activity will not be implemented by Local Partners	\$350,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Support on data analysis and use for program management. Support for supervision to the provincial level, coordination of monitoring and evaluation working groups, and facilitation of national-level reviews. Support for implementing partner meetings to discuss SME activities and coordination.
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Integrated Health Program (IHP-DRC)	Contract	No-this activity will not be implemented by Local Partners	\$750,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Support for 12 monthly data validation meetings at each of the 178 PMI-supported health zones and nearly 3,000 health areas, as well as transmission of data to the zone level. Ensure one day of these validation meetings is malaria specific.
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Integrated Health Program (IHP-DRC)	Contract	No-this activity will not be implemented by Local Partners	\$0	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Reproduction and distribution of registers and tools.
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Country Health Information Systems and Data Use (CHISU)		No-this activity will not be implemented by Local Partners	\$400,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Reproduction and distribution of registers and tools for malaria surveillance data collection and analysis.

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MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Country Health Information Systems and Data Use (CHISU)	No-this activity will not be implemented by Local Partners	\$50,000	Nationwide	Provide technical and financial support to the NMCP for organizing the annual data malaria review meeting. This is at the national level and collaborates with partners such as Global Fund, BMGF, etc. The objective will be to evaluate the implementation of the NMCP annual action plan, to validate malaria data, and analyze the trends of the key indicators. This is a 5-day activity and participants include the NMCP at the national and provincial level (Malaria focal points, Chief of DPS), staff from other MOH's departments the Ministry of Health (DSNIS, Direction Surveillance épidémiologique) and other partners.
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation		Country Health Information Systems and Data Use (CHISU)	No-this activity will not be implemented by Local Partners	\$100,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika Support the training of frontline FETP fellows at provincial levels to serve as field epidemiologist workforce for malaria control and surveillance activities in PMI provinces.
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation		Country Health Information Systems and Data Use (CHISU)		\$100,000	Central	Haut Katanga, Kasai Central, Kasai Oriental, Sankuru, Sud Kivu, Tanganyika Strengthen malaria surveillance through the assessment of the accuracy of the malaria morbidity data using the Audere Health Pulse application in a sample of supported provinces (Haut Katanga, Kasai Central, South Kivu, Kasai Oriental, Tanganyika, and Sankuru) compared to the data reported on the DRC HMIS. These data from a select group of facilities would generate discussions for all HWers and supervisors in the health zone, and potentially change behavior in other facilities in the health zone not using the HP app.
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Country Health Information Systems and Data Use (CHISU)	No-this activity will not be implemented by Local Partners	\$250,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika Training and coaching on data analysis and use, and general monitoring and evaluation support to the NMCP Provincial Health Department. Continued improvement of standard dashboards and visualizations for review of malaria data at the health zone and provincial levels. Work with HZ on malaria data analysis. Ensure they are using the standard malaria dashboards and visualizations to review HZ malaria data and make decisions based on their data. Additionally, this will support the management, monitoring and integration of malaria vaccine introduction data into the national HMIS

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SBC	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Country Health Information Systems and Data Use (CHISU)	No-this activity will not be implemented by Local Partners	\$785,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Enhanced DQAs with register comparison and review, as well as examination of classification of severe malaria in health facilities. Target 20 health facilities per year per province. In each province, purposefully sample approximately five health zones and pick four health facilities per health zone. This will also include an annual review at the national level and semi annual review for provincial level.
SBC	SBC	Other SBC	Breakthrough ACTION	To be determined	\$100,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Support to the NMCP for national and provincial level coordination of SBC partners through routine meetings of the national SBC technical working group, and NMCP participation in regional and global SBC workshops to build SBC capacity. Support expansion of IPC training curriculum at medical training institutions building on work done at the University of Kinshasa. Support to NMCP to celebrate World Malaria Day and World Mosquito Day.
SBC	SBC	SBC Implementation	Breakthrough ACTION	To be determined	\$800,000	Central	Haut Katanga, Kasai Central, Kasai Oriental, Lualaba, Sud Kivu	SBC implementation to address net use, prompt care-seeking and ANC attendance/IPTp uptake through targeted scale up of pilot interventions developed using a Human-Centered Design approach. Specific activities will include continued implementation of a multi-media campaign (e.g., radio, TV, billboards) targeted to urban and peri-urban areas, and the VIVA campaign with a focus on couples communication for care-seeking decisions, IPC targeted to market-goers, and strategies to encourage household health savings to address cost barriers to care-seeking. The VIVA campaign engages local leaders (teachers, religious, women's and youth groups) to serve as community mobilizers. Additional activities will also be targeted to facility-based providers to address issues identified through studies related to poor counseling and lack of adherence to national directives. BA will work with Faith Based Organizations and CSO to promote community behavior change.
SBC	SBC	SBC Implementation	Breakthrough ACTION	To be determined	\$200,000	Central	Haut Katanga, Kasai Central, Kasai Oriental, Lualaba, Sud Kivu	SBC implementation to support community mobilization in support of Community Health Workers providing both health promotion activities and direct care in their communities. The objective of this initiative is to improve CHW performance and motivation through a series of activities designed to raise the profile and stature of CHWs in their communities. Activities include establishing new criteria and systems for CHW selection and recruitment, CHW identification badges and CHW-specific branding, a mentorship program between new and experienced CHW, and quality service recognition systems.

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SBC	SBC	SBC Implementation	Integrated Health Program (IHP-DRC)	Contract	No-this activity will not be implemented by Local Partners	\$900,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	SBC implementation to address net use, prompt care-seeking and ANC attendance/IPTp uptake through targeted scale up of pilot interventions developed using a Human-Centered Design approach. Specific activities will include the VIVA campaign with a focus on couples communication for care-seeking decisions, IPC targeted to market-goers, and strategies to encourage household health savings to address cost barriers to care-seeking. The VIVA campaign engages local leaders (teachers, religious, women's and youth groups) to serve as community mobilizers. Additional activities will be targeted to facility-based providers to address issues identified through studies related to poor counseling and lack of adherence to national directives. This also supports SBC activities related to the vaccine introduction and roll out.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Support to FETP	CDC IAA		No-this activity will not be implemented by Local Partners	\$150,000	Nationwide		Support for two residents in the advanced field epidemiology training program. Mentoring and activities will have a malaria focus.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Country Health Information Systems and Data Use (CHISU)		No-this activity will not be implemented by Local Partners	\$150,000	Central	Haut Lomami, Sankuru	Malaria management training for Health Zone officers for two provinces (Haut Lomami and Sankuru).
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Country Health Information Systems and Data Use (CHISU)		No-this activity will not be implemented by Local Partners	\$50,000	Nationwide		Attendance of two NMCP staff at a key malaria scientific conference; attendance of NMCP at course(s) that address critical technical needs identified by PMI and the NMCP (can include national malariology course (\$7k/participant)); and/or a site visit to another country to observe activities and explore new approaches.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Country Health Information Systems and Data Use (CHISU)		No-this activity will not be implemented by Local Partners	\$585,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Salary for nine provincial advisors and operational costs for supervision and other fieldbased activities.

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OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Country Health Information Systems and Data Use (CHISU)		No-this activity will not be implemented by Local Partners	\$100,000	Central	Haut Katanga, Haut Lomami, Kasai Central, Kasai Oriental, Lomami, Lualaba, Sankuru, Sud Kivu, Tanganyika	Support quarterly multi-partners national Malaria Task Force at the central and provincial levels, including meetings, report dissemination, technical assistance for coordination, and annual review. Support the printing and nationwide dissemination of key NMCP guidelines and strategic documents. Support to Journee Scientifique activities at central level.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	TBD - Bilateral Mechanism		No-this activity will not be implemented by Local Partners	\$100,000	Nationwide		Provide support to the MoH/NMCP to raise their interest to engage with the private sector industry and business interests, and create or establish a private sector TWG. Strengthen the private sector capacity to raise their awareness and interest to be involved in malaria activities support, Support the MoH/Government to maintain and reinforce the public-private partnership, and identify future opportunities.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Digital Square		No-this activity will not be implemented by Local Partners	\$145,000	Nationwide		Funding to establish an enabling environment for digital initiatives identified, including discussions with the NMCP and in-country PMI implementing partners around priorities and needs from the DRC Community Digital Health profile, the dissemination of the DRC Community Digital Health profile to a wider group of stakeholders, support the identification and customization of a community-based digital tool, and support SOP development on community-based surveillance.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Power Africa	GDA		\$300,000	Central	To Be Determined	Health Facility Electrification to improve the quality of services provided and improve access to network for ease of digital health data recording and reporting.
STAFFING & ADMINISTRATION	Staffing & Administration	Vector Control-Related CDC TDY	CDC IAA		No-this activity will not be implemented by Local Partners	\$29,000			Two visits to provide technical assistance on insectary operations, morphological identification of mosquitoes, and proficiency and timeliness of laboratory analysis of entomological monitoring. These TAs will also provide capacity building through training, planning, and monitoring entomological activities, and strengthen the coordination of entomological monitoring and evidence-based vector control decision making among partners.
STAFFING & ADMINISTRATION	Staffing & Administration	Case Management-Related CDC TDY	CDC IAA		No-this activity will not be implemented by Local Partners	\$10,000			One visit to support activities related to case management.
STAFFING & ADMINISTRATION	Staffing & Administration	SBC-Related CDC TDY	CDC IAA		No-this activity will not be implemented by Local Partners	\$10,000			One visit to support activities related to SBC.

Table 2: Budget Breakdown by Activity
U.S. President's Malaria Initiative – DRC
Planned Malaria Obligations for FY 2023
Revised September 22, 2023

STAFFING & ADMINISTRATION	Staffing & Administration	SM&E - Related CDC TDY	CDC IAA	No-this activity will not be implemented by Local Partners	\$10,000	One visit to support activities related to monitoring and evaluation.
STAFFING & ADMINISTRATION	Staffing & Administration	OR-Related CDC TDY	CDC IAA	No-this activity will not be implemented by Local Partners	\$10,000	One visit to support activities related to OR.
STAFFING & ADMINISTRATION	Staffing & Administration	USAID In-Country Staffing and Administration: Staffing	USAID	No-this activity will not be implemented by Local Partners	\$1,850,000	Staffing and administration for one PMI USAID Resident Advisor, two Malaria Program Specialists (100%), and one PMI Data Specialist (100%). Also, partial staffing and administration for cross-cutting technical staff: one Senior Supply Chain Advisor (40%), one Community Case Management Specialist (20%), one Commodities and Logistics Specialist (25%), and one Global Fund Liaison (30%).
STAFFING & ADMINISTRATION	Staffing & Administration	USAID In-Country Staffing and Administration: Administration	USAID	No-this activity will not be implemented by Local Partners	\$960,000	Administrative and oversight costs, and program design and learning costs. Based on 2% of \$48 million.
STAFFING & ADMINISTRATION	Staffing & Administration	CDC In-Country Staffing and Administration	CDC IAA	No-this activity will not be implemented by Local Partners	\$1,450,000	Staffing and administration for one PMI Centers for Disease Control and Prevention Resident Advisor.