

**Table 1: Budget Breakdown by Mechanism  
U.S. President's Malaria Initiative — Zambia  
Planned Malaria Obligations for FY 2023**

<b>Mechanisms and Proposed Activities</b>	<b>Sum of Budget (in \$)</b>
<b>CDC IAA</b>	<b>\$ 1,161,532</b>
CDC In-Country Staffing and Administration	\$ 1,017,032
Other SM&E Implementation	\$ 120,000
SM&E - Related CDC TDY	\$ 10,000
Vector Control-Related CDC TDY	\$ 14,500
<b>Environmental Compliance Operational Support (ECOS)</b>	<b>\$ 40,000</b>
Support Independent Environmental Monitoring	\$ 40,000
<b>Evidence for Health</b>	<b>\$ 365,000</b>
Other SM&E Implementation	\$ 365,000
<b>G2G</b>	<b>\$ 950,000</b>
Community-based case management	\$ 450,000
Facility-based case management	\$ 500,000
<b>PAMO Plus</b>	<b>\$ 8,155,000</b>
Community-based case management	\$ 1,700,000
Facility-based case management	\$ 900,000
MIP Implementation	\$ 700,000
National Level Support for Case Management	\$ 150,000
Other Case Management Implementation	\$ 50,000
Other Health Systems Strengthening Implementation	\$ 680,000
SBC Implementation	\$ 2,250,000
SM&E for Elimination	\$ 400,000
Support Routine Surveillance	\$ 1,100,000
Support Therapeutic Efficacy Study	\$ 225,000
<b>PASCO</b>	<b>\$ 320,000</b>
Warehousing and Distribution	\$ 320,000
<b>Peace Corps</b>	<b>\$ 45,000</b>
Support to Peace Corps	\$ 45,000
<b>TBD - Bilateral Mechanism</b>	<b>\$ 500,000</b>
Community-based case management	\$ 500,000
<b>TBD - Central Mechanism</b>	<b>\$ 4,500,000</b>
IRS Implementation	\$ 2,500,000
Other ITN Implementation	\$ 500,000
Procure Insecticides for IRS	\$ 1,000,000
Support Entomological Monitoring	\$ 500,000
<b>TBD - Supply Chain Central Mechanism</b>	<b>\$ 10,702,500</b>
Distribute ITNs for Continuous Distribution Channels	\$ 300,000
Procure ACTs	\$ 1,840,000
Procure Drugs for Severe Malaria	\$ 800,000
Procure IPTp Related Commodities	\$ 550,000
Procure ITNs for Continuous Distribution Channels	\$ 3,648,000
Procure Other Diagnosis Related Commodities	\$ 50,000
Procure Other Treatment Related Commodities	\$ 20,000
Procure RDTs	\$ 2,242,000

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<b>Mechanisms and Proposed Activities</b>	<b>Sum of Budget (in \$)</b>
Supply Chain and Pharmaceutical Management	\$ 1,252,500
<b>USAID</b>	<b>\$ 1,260,968</b>
USAID In-Country Staffing and Administration: Administration	\$ 560,000
USAID In-Country Staffing and Administration: Staffing	\$ 700,968
<b>Grand Total</b>	<b>\$ 28,000,000</b>

**Table 2: Budget Breakdown by Activity**  
**U.S. President's Malaria Initiative — Zambia**  
**Planned Malaria Obligations for FY 2023**

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	TBD - Central Mechanism		To be determined	\$500,000	Nationwide	Central, Copperbelt		Support entomological monitoring, including insecticide resistance monitoring (including resistance intensity/synergist testing and molecular analysis). Support seven sentinel sites. Support NMEC capacity in entomological monitoring to leverage GF/GRZ and other partner investments.
VECTOR CONTROL	Insecticide Treated Nets	Procure ITNs for Continuous Distribution Channels	TBD - Supply Chain Central Mechanism		To be determined	\$3,648,000	Nationwide	Copperbelt, Eastern, Luapula, Muchinga, Northern		Procure approximately 1.2 million PBO nets for 2024 continuous/routine distribution channels.
VECTOR CONTROL	Insecticide Treated Nets	Distribute ITNs for Continuous Distribution Channels	TBD - Supply Chain Central Mechanism		To be determined	\$300,000	Nationwide	Copperbelt, Eastern, Luapula, Muchinga, Northern		Support the storage and distribution of ITNs for continuous distribution channels (ANC clinics, EPI clinics, schools).
VECTOR CONTROL	Insecticide Treated Nets	Other ITN Implementation	TBD - Central Mechanism		To be determined	\$350,000	Nationwide	Copperbelt, Eastern, Luapula, Muchinga, Northern		Provide technical assistance for planning and implementing ITN continuous distribution activities (ANC, EPI, school-based).
VECTOR CONTROL	Insecticide Treated Nets	Other ITN Implementation	TBD - Central Mechanism		To be determined	\$150,000				Deploy geospatial tools to support planning and implementation of the NMESP vector control strategy, building on earlier GIS work. Objectives include minimizing codeployment of ITNs and IRS to conserve resources, and evidence-based targeting of LSM deployments.
VECTOR CONTROL	Indoor Residual Spraying	IRS Implementation	TBD - Central Mechanism		To be determined	\$2,500,000	Nationwide	Copperbelt, Eastern		Support implementation of a robust IRS program in a reduced footprint, including training of spray operators, supervisors, and storekeepers; monitoring and evaluation; SBC for IRS; pesticide storage; waste disposal; and pay for spray operations in PMI-funded districts. Build capacity for focal or responsive IRS in appropriate settings. For the NMEC-implemented IRS program, leverage Global Fund and GRZ resources by supporting microplanning, training of trainers, supervision, environmental compliance, and post-IRS activities including waste disposal.
VECTOR CONTROL	Indoor Residual Spraying	Procure Insecticides for IRS	TBD - Central Mechanism		To be determined	\$1,000,000	Nationwide	Copperbelt, Eastern		Procure insecticides and other IRS supplies and equipment for spraying at least 300,000 structures in Eastern and rural Copperbelt. Choice of pesticide(s) and target areas is not yet finally determined and will be informed by NMEC and PMI policies, by entomologic data including pesticide resistance and duration of efficacy, and by geospatial analysis.
VECTOR CONTROL	Indoor Residual Spraying	Support Independent Environmental Monitoring	Environmental Compliance Operational Support (ECOS)		To be determined	\$40,000	Nationwide			Implement third-party monitoring of environmental compliance of PMI-funded IRS operations. This is required biannually.
DRUG BASED PREVENTION	Prevention of Malaria in Pregnancy	Procure IPTp Related Commodities	TBD - Supply Chain Central Mechanism		To be determined	\$550,000	Nationwide			Procure approximately 1.8 million courses of SP. Financial responsibility for additional IPTp procurement should be transitioning to GRZ between CY2022-2023. Expect future GF grant to support additional procurement in 2024 with GRZ contribution to fully cover any SP gaps. Will routinely monitor stock status and PMI could reprogram if necessary to cover SP gaps.
DRUG BASED PREVENTION	Prevention of Malaria in Pregnancy	MIP Implementation	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$700,000	Nationwide	Eastern, Luapula, Muchinga, Northern		Support the training and supervision of provincial-, district-, and health facility-level health workers on the implementation of MIP and IPTp guidelines in four high malaria burden provinces (Eastern, Luapula, Muchinga, and Northern).

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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
CASE MANAGEMENT	Procure Case Management-Related Commodities	Procure RDTs	TBD - Supply Chain Central Mechanism		To be determined	\$2,042,000	Nationwide			Procure approximately 5.1 million RDTs to be used at health facilities and by CHWs to contribute to meeting the national RDT need.
CASE MANAGEMENT	Procure Case Management-Related Commodities	Procure RDTs	TBD - Supply Chain Central Mechanism		To be determined	\$200,000	Nationwide	Eastern	Eastern > Chadiza, Eastern > Chipangali, Eastern > Chipata, Eastern > Kasenengwa, Eastern > Katete, Eastern > Petauke, Eastern > Sinda	Procure approximately 50,000 RDTs to support expansion of reactive case detection and case investigation in pre-elimination areas.
CASE MANAGEMENT	Procure Case Management-Related Commodities	Procure Other Diagnosis Related Commodities	TBD - Supply Chain Central Mechanism		To be determined	\$50,000				Replenish microscopy supplies and stock new HF's to sustain viable microscopy services.
CASE MANAGEMENT	Procure Case Management-Related Commodities	Procure ACTs	TBD - Supply Chain Central Mechanism		To be determined	\$1,800,000	Nationwide			Procure approximately 3 million ACTs (artemether-lumefantrine) for the treatment of uncomplicated malaria at health facilities and at the community level.
CASE MANAGEMENT	Procure Case Management-Related Commodities	Procure ACTs	TBD - Supply Chain Central Mechanism		To be determined	\$40,000	Nationwide	Eastern	Eastern > Chadiza, Eastern > Chipangali, Eastern > Chipata, Eastern > Kasenengwa, Eastern > Katete, Eastern > Petauke, Eastern > Sinda	Procure approximately 66,000 courses of ACTs (artemether-lumefantrine) for the treatment of malaria in facilities and communities in pre-elimination districts to cover the increase in case capture, which is expected as community-level services expand, in order to avoid stock-outs.
CASE MANAGEMENT	Procure Case Management-Related Commodities	Procure Other Treatment Related Commodities	TBD - Supply Chain Central Mechanism		To be determined	\$20,000				Procure approximately 200,000 courses of single low dose primaquine (7.5 mg).
CASE MANAGEMENT	Procure Case Management-Related Commodities	Procure Drugs for Severe Malaria	TBD - Supply Chain Central Mechanism		To be determined	\$750,000	Nationwide			Procure approximately 358,000 vials of injectable artesunate to contribute to meeting the CY2024 national need for severe malaria treatment.
CASE MANAGEMENT	Procure Case Management-Related Commodities	Procure Drugs for Severe Malaria	TBD - Supply Chain Central Mechanism		To be determined	\$50,000	Nationwide	To Be Determined	To Be Determined	Procure at least 79,000 rectal artesunate suppositories to support pre-referral treatment in selected districts which are also supported with PMI. Selection to be prioritized by the NMEC due to poor access to care and an existing emergency transport infrastructure for referral.
CASE MANAGEMENT	Case Management Implementation	National Level Support for Case Management	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$150,000	Central			Support maintenance of national capacity in malaria microscopy through programming in quality assurance/quality control, slide bank maintenance and use, microscopy and certification, etc.
CASE MANAGEMENT	Case Management Implementation	Facility-based case management	G2G	Other	Yes- the Prime is a Local Partner for PMI	\$500,000	Nationwide	Central, Copperbelt, Luapula, Northern		Conduct a minimum of two rounds of OTSS per year in five provinces to strengthen facility-based case management of malaria. This G2G program will leverage years of investments in technical capacity building by PMI projects and in financial management support by USAID/PEPFAR. The G2G mechanism will provide direct funding to MOH at the provincial level. <b>(Continue Central, CB, Luapula, Northern; add Muchinga.)</b>
CASE MANAGEMENT	Case Management Implementation	Facility-based case management	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$650,000	Nationwide	Central, Copperbelt, Eastern, Luapula, Muchinga, Northern		Strengthen malaria case management and supervisory capacity, and support supervision activities at HF and district levels in six provinces. In coordination with USAID regional offices (as established in all but Eastern Province), provide technical and program management assistance to complement G2G funds to conduct at least two rounds of OTSS per year in each province.
CASE MANAGEMENT	Case Management Implementation	Facility-based Case Management	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$250,000	Nationwide	Central, Copperbelt, Eastern, Luapula, Muchinga, Northern		To reduce case fatality rates in severe malaria cases, provide enhanced training, supervision and mentoring for hospital staff.

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CASE MANAGEMENT	Case Management Implementation	Community-based case management	G2G	Other	Yes- the Prime is a Local Partner for PMI	\$450,000	Nationwide	Luapula, Muchinga, Northern		Conduct training, deployment, and supervision of CHWs to scale up CCM. This G2G program will leverage years of investments in technical capacity building by PMI projects and in financial management support by USAID/PEPFAR. The G2G mechanism will provide direct funding to MOH at the Provincial level (three provinces: <b>Luapula, Northern, add Muchinga; covers training, deployment; consider increased funding depending on G2G absorption</b> ).
CASE MANAGEMENT	Case Management Implementation	Community-based case management	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$1,100,000	Nationwide	Eastern, Luapula, Muchinga, Northern		Scale up and strengthen community-level diagnosis and treatment services in four targeted provinces, based on iCCM platform, to include malaria case management for all ages. Where epidemiologically and programmatically appropriate, incorporate 1) RAS with ETS for community referral of severe malaria cases; 2) reactive case detection; 3) case investigation; and 4) potential implementation of proactive CCM, assuming ProACT study findings validated and NMEP approves. In coordination with USAID regional offices, provide technical and programmatic assistance for G2G financing and implementation of CCM activities. Build on previous years' investments and coordinate closely with other donors (e.g., Malaria Partners International).
CASE MANAGEMENT	Case Management Implementation	Community-based case management	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$600,000	Nationwide	Eastern	Eastern > Chadiza, Eastern > Chipangali, Eastern > Chipata, Eastern > Kasenengwa, Eastern > Katete, Eastern > Petauke, Eastern > Sinda	Scale up and strengthen community-level diagnosis and treatment services in seven targeted districts, based on iCCM platform, to include malaria case management for all ages. Where epidemiologically and programmatically appropriate, incorporate 1) RAS with ETS for community referral of severe malaria cases; 2) reactive case detection; 3) case investigation; and 4) potential implementation of proactive CCM, assuming ProACT study findings validated and NMEP approves. Build on previous years' investments and coordinate closely with other donors (e.g., Global Fund/CHAZ).
CASE MANAGEMENT	Case Management Implementation	Community-based Case Management	TBD - Bilateral Mechanism		Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$500,000	Nationwide	Eastern, Luapula, Muchinga, Northern		Provide monthly stipends of up to approximately \$30 per month to community-based volunteers providing CCM services (CHWs). Program design and operationalization will be consistent with MOH and USG policies and closely coordinated with other CBV funders. Funding is conditional on satisfactory resolution of these issues and will be further informed by a CY2023 pilot program. A portion of funding will cover CHW registration and program administration.
CASE MANAGEMENT	Case Management Implementation	Other Case Management Implementation	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$50,000	Nationwide	Eastern	Eastern > Sinda	Provide technical assistance to introduce and scale up administration of SLDPQ in rural HFCAs with <125/1,000 cases (Level 1 and lower Level 2), consistent with national approach and to be informed by a CY2023 pilot. Includes training and deployment at HF and community levels.
CASE MANAGEMENT	Case Management Implementation	Support Therapeutic Efficacy Study	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$225,000	Nationwide			Support therapeutic efficacy monitoring of malaria medications in three sites (where NMEP program operates six total sites, each one every other year).
SUPPLY CHAIN	In-Country Supply Chain	Warehousing and Distribution	PASCO	Contract	To be determined	\$320,000	Nationwide			PMI component of USAID Mission investment in last mile distribution. This funding is for distribution of malaria commodities to meet occasional urgent need, in anticipation of gaps where current deliveries will be unavailable.

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SUPPLY CHAIN	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	TBD - Supply Chain Central Mechanism		To be determined	\$700,000	Nationwide			Provide technical assistance to strengthen malaria pharmaceutical and supply chain management systems within NMEC and as part of larger systems in ZAMMSA, including quarterly forecasting and quantification, semi-annual end-use verification survey activities, and supporting ZAMMSA to ensure successful adoption of its new tasks including forecasting and supply planning capacity and the improvement of the storage and distribution of malaria commodities. This includes all malaria commodities, such as antimalarial medications, RDTs, and ITNs.
SUPPLY CHAIN	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	TBD - Supply Chain Central Mechanism		To be determined	\$40,000				Third-party monitoring of the last mile distribution.
SUPPLY CHAIN	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	TBD - Supply Chain Central Mechanism		To be determined	\$337,500				Support the continuation of regular commodity security spot checks.
SUPPLY CHAIN	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	TBD - Supply Chain Central Mechanism		To be determined	\$175,000	Nationwide	Eastern	Eastern > Chadiza, Eastern > Chipangali, Eastern > Chipata, Eastern > Kasenengwa, Eastern > Katete, Eastern > Petauke, Eastern > Sinda	Provide technical assistance in the Zambia pre-elimination districts to strengthen malaria pharmaceutical and supply chain management systems within NMEC and as part of larger ZAMMSA systems, including quarterly forecasting and quantification, semi-annual end-use verification survey activities, and supporting ZAMMSA to ensure successful adoption of its new tasks including forecasting and supply planning capacity, and the improvement of the storage and distribution of malaria commodities. This includes all malaria commodities, such as antimalarial medications, RDTs, and ITNs.
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$1,100,000	Nationwide	Eastern, Luapula, Muchinga, Northern		Strengthen routine malaria data reporting at the community, health facility, district, and provincial levels in four targeted high-burden provinces. Includes support for training and mentorship of CHWs, HF staff, and district health offices in data collection, reporting, and use for decision-making. Support DQAs and data review meetings, including resources for central-level NMEP personnel participation and follow-up. Support scale-up of ANC-based surveillance as appropriate, depending on validation of pilot approach.
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	SM&E for Elimination	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$400,000	Nationwide	Eastern	Eastern > Chadiza, Eastern > Chipangali, Eastern > Chipata, Eastern > Kasenengwa, Eastern > Katete, Eastern > Petauke, Eastern > Sinda	In the seven pre-elimination districts, provide enhanced support to strengthen routine malaria data reporting at the community, health facility, district, and provincial levels. Includes support for training and mentorship of CHWs, HF staff, and district health offices in data collection, reporting, and use for decision-making. Support DQAs and data review meetings, including resources for central-level NMEP personnel participation and follow-up. Support scale-up of ANC-based surveillance as appropriate, depending on validation of pilot approach. In appropriate settings, support case-based investigation and rapid response (1,3,7 approach).
MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	Other SM&E Implementation	CDC IAA		No-this activity will not be implemented by Local Partners	\$120,000	Central			Provide support for three Zambian nationals to participate in the Field Epidemiology Training Program at the intermediate or advanced level. This activity will support long-term local capacity within the MOH. Proposed activities include the investigations of malaria surges and reasons, deep dive in MIS data, ad hoc projects, etc.

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MONITORING, EVALUATION, & RESEARCH	Surveillance, Monitoring and Evaluation	Other SM&E Implementation	Evidence for Health	Contract	No-this activity will not be implemented by Local Partners	\$365,000	Nationwide			Support national-level HMIS and MRR system strengthening, coordinating with partners such as the NMEC, the MOH M&E Unit, Gates/DCHI, and Zenisys. Provide technical assistance to enhance standardization and interoperability of databases. Support the secondment of a computer science specialist to backstop the management of databases at the NMEC. Enhance capacity to triangulate routine, ento, and epi surveillance data with datasets from implementation and research partners (example: Nchelenge learning lab).
SBC	SBC	SBC Implementation	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$725,000	Nationwide	Eastern, Luapula, Muchinga, Northern		PMI will provide increased funding for SBC interventions with an emphasis on interpersonal communication at the community level to address behavior barriers to ITN use and care. This will directly support the NMEC's strategic shift from blanket IRS to increased universal ITN coverage. These funds will also leverage the engagement of faith-based communities and will support national-, provincial-, and district-level donor coordination and NMEC national coordination mechanisms. These funds will support one full-time central-level embedded project staff member.
SBC	SBC	SBC Implementation	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$800,000	Nationwide	Eastern, Luapula, Muchinga, Northern		PMI-supported SBC prevention activities aim to promote early care seeking by addressing local barriers and leveraging appropriate motivators through community-based SBC to increase appropriate early care-seeking behavior, demand for proper malaria diagnosis, and adherence to treatment for malaria through multiple channels such as ANC, and under five clinics. Increase community knowledge about the role of CHWs to build trust in the services they provide and leverage Zambia's strong community platform to expand reach and access to care. Activities will leverage the engagement of faith-based communities and will support national-, provincial-, and district-level donor coordination, and NMEC national coordination mechanisms. These funds will support one full-time central level embedded project staff member. Theme: Case Management. No change in funding, but shift in strategy.
SBC	SBC	SBC Implementation	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$725,000	Nationwide	Eastern, Luapula, Muchinga, Northern		PMI-supported SBC prevention activities aim to promote early ANC attendance and IPTp uptake by addressing local barriers and leveraging appropriate motivators through community-based SBC to increase early ANC attendance and IPTp uptake through multiple channels such as community dialogues, ANC, and under five clinics. Increase community knowledge about the role of CHWs to build trust in the services they provide and leverage Zambia's strong community platform to expand reach and access to care. Activities will leverage the engagement of faith-based communities and will support national-, provincial-, and district-level donor coordination, and NMEC national coordination mechanisms. These funds will support one full-time central level embedded project staff member.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Support to Peace Corps	Peace Corps	IAA	No-this activity will not be implemented by Local Partners	\$20,000	Nationwide			Provide funding for Peace Corps activities in malaria control including small project assistance (SPA) grants.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Support to Peace Corps	Peace Corps		No-this activity will not be implemented by Local Partners	\$25,000	Central			Support third year Peace Corps volunteer position to assist CHWs to improve quality of services and surveillance data in the pre-elimination program; may have expanded SOW for MOP 2023 implementation year.

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OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$180,000	Nationwide, Central			Provide support to strengthen NMEC staff capacity through professional development activities. Activities will include training workshops (e.g., SM&E, commodity quantification, entomological and supply chain management) and regional/global meetings (e.g., American Society for Tropical Medicine and Hygiene). (Start with FY22 MOP reprogramming.) Will support both the national and provincial levels as well as malaria advocacy and orientation for influences in media, the private sector, NGOs, and GRZ. As allowable under USAID rules and regulations, may support light refurbishment of NMEC conference room and ablution block as well as vehicle repairs.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	PAMO Plus	Cooperative Agreement	To be determined	\$250,000	Nationwide	Eastern, Luapula, Muchinga, Northern		Technical assistance to improve the blood supply system, as informed by the CY 2022 blood supply assessment. Activities may include support to strengthen the system for blood collection, logistics, data, and coordination among partners to address bottlenecks, and will focus on provinces with the greatest need and highest burden of severe malaria. These activities will be a co-investment with MCH funds.
OTHER HEALTH SYSTEMS STRENGTHENING	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	PAMO Plus	Cooperative Agreement	No-this activity will not be implemented by Local Partners	\$250,000	Nationwide, Central	To Be Determined		Technical assistance to assist MOH with coordination between NMEC and Immunization teams on vaccine policy, approvals, adoption, operationalization, and evaluation.
STAFFING & ADMINISTRATION	Staffing & Administration	Vector Control-Related CDC TDY	CDC IAA		N/A	\$14,500	Central			Provide CDC technical assistance to vector control activities. Anticipate at least one TDY visit by an Atlanta-based entomologist. Additional visit may be funded from pipeline.
STAFFING & ADMINISTRATION	Staffing & Administration	SM&E - Related CDC TDY	CDC IAA		N/A	\$10,000	Central			Provide CDC technical assistance in surveillance, monitoring and evaluation, and/or operational research activities. Expectation of two CDC TDY visits per year.
STAFFING & ADMINISTRATION	Staffing & Administration	USAID In-Country Staffing and Administration: Staffing	USAID		N/A	\$700,968	Central			Support for in-country PMI USAID international and locally hired staff encompassing salaries, benefits, travel, and other staff support related costs.
STAFFING & ADMINISTRATION	Staffing & Administration	USAID In-Country Staffing and Administration: Administration	USAID		N/A	\$560,000	Central			Support for general administrative costs that enable Mission-wide assistance from which PMI benefits.
STAFFING & ADMINISTRATION	Staffing & Administration	CDC In-Country Staffing and Administration	CDC IAA		N/A	\$1,017,032	Central			Support for in-country PMI CDC resident advisor encompassing salaries, benefits, travel, and other staff support-related costs.