

**Table 1: Budget Breakdown by Mechanism
U.S. President's Malaria Initiative -- Benin
Planned Malaria Obligations for FY 2024**

Mechanisms and Proposed Activities	Sum of Budget (in \$)
BEMFA-G2G (CREC)	\$ 300,000
Support Entomological Monitoring	\$ 300,000
BEMFA-G2G (NMP)	\$ 1,500,000
MIP Implementation	\$ 300,000
OR or PE Implementation	\$ 50,000
Procure Reagents and Other TES Specific Commodities	\$ 100,000
SMC Implementation	\$ 550,000
Support Routine Surveillance	\$ 300,000
Support Therapeutic Efficacy Study	\$ 150,000
Vaccine Implementation	\$ 50,000
CDC IAA	\$ 369,287
Case Management-Related CDC TDY	\$ 10,000
CDC In-Country Staffing and Administration	\$ 320,287
SBC-Related CDC TDY	\$ 10,000
Vector Control - CDC Entomology Lead TDY	\$ 29,000
Peace Corps	\$ 40,000
Support to Peace Corps	\$ 40,000
TBD (Component 1-Health Systems Strengthening)	\$ 250,000
Private Sector Case Management	\$ 200,000
Support Routine Surveillance	\$ 50,000
TBD (Component 2-Health Services Delivery)	\$ 800,000
Facility-based Case Management	\$ 600,000
MIP Implementation	\$ 200,000
TBD (Component 3-Community Health Strengthening)	\$ 1,372,914
Community-based Case Management	\$ 747,914
SBC Implementation	\$ 575,000
Support Routine Surveillance	\$ 50,000
TBD Supply Chain Central Mechanism	\$ 4,185,155
Procure ACTs	\$ 1,400,000
Procure Drugs for Severe Malaria	\$ 609,105
Procure IPTp Related Commodities	\$ 432,600
Procure RDTs	\$ 760,000
Procure SMC-Related Commodities	\$ 233,450
Supply Chain and Pharmaceutical Management	\$ 450,000
Warehousing and Distribution	\$ 300,000
TBD-Monitoring illegal malaria commodities	\$ 350,000
Other Health Systems Strengthening Implementation	\$ 200,000
Strengthen Medical Product Quality Assurance	\$ 150,000
TBD-Technical Assistance- UHC- ARCH-AM	\$ 250,000
Other Health Systems Strengthening Implementation	\$ 250,000

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USAID	\$ 2,073,644
USAID In-Country Staffing and Administration: Administration	\$ 300,000
USAID In-Country Staffing and Administration: Staffing	\$ 1,773,644
Working Capital Fund, Commodity Procurement	\$ 1,925,000
Procure ITNs for Continuous Distribution Channels	\$ 1,925,000
Working Capital Fund, LLIN Distribution	\$ 1,584,000
Distribute ITNs for Continuous Distribution Channels	\$ 1,584,000
Grand Total	\$ 15,000,000

**Table 2: Budget Breakdown by Activity
U.S. President's Malaria Initiative — Benin
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Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
Vector Control	Entomological Monitoring	Support Entomological Monitoring	BEMFA-G2G (CREC)	Yes- the Prime is a Local Partner for PMI (G2G)	\$300,000	Continue support for 12 entomological monitoring sites to cover key geo-epidemiologic areas with 6 receiving full support from CREC and 6 transitioning to be community-based. Possibly adding sites in other parts of Benin to monitor the entomological impact of PBO nets. Continue monitoring for the detection of An. stephensi at potential introduction sites (i.e., seaports, animal quarantine sites, transit areas, etc.). Support continued monitoring and investigation of malaria vector resistance to insecticides in Benin and the dissemination of CREC research results."
Vector Control	Insecticide Treated Nets	Distribute ITNs for Continuous Distribution Channels	Working Capital Fund, LLIN Distribution	No-this activity will not be implemented by Local Partners	\$1,584,000	Distribute 990,000 PBO ITNs from the port of entry to the health facilities
Vector Control	Insecticide Treated Nets	Procure ITNs for Continuous Distribution Channels	Working Capital Fund, Commodity Procurement	No-this activity will not be implemented by Local Partners	\$1,925,000	Procure 990,000 PBO ITNs for distribution at ANC and EPI public and private clinics (500,000 ITNs with FY2024 MOP and 490,000 ITNs with pipeline funds)
Drug Based Prevention	Prevention of Malaria in Pregnancy	Procure IPTp Related Commodities	TBD Supply Chain Central Mechanism	To be determined	\$432,600	Acquire 1,030,000 doses of SP for IPTp for public and private clinics (Tablet, 50 x 3 Blister Pack, 150 tablets)
Drug Based Prevention	Prevention of Malaria in Pregnancy	MIP Implementation	TBD (Component 2- Health Services Delivery)	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$200,000	Support onsite supervision of MIP services. Provide refresher training for public health facility midwives and nurses to correctly deliver SP and broader MIP services in the context of the antenatal care approach. Refresher training will be provided as part of overall refresher training for service providers in health centers and health posts. Alibori, Atacora, Oueme, Plateau

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Drug Based Prevention	Prevention of Malaria in Pregnancy	MIP Implementation	BEMFA-G2G (NMP)	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$300,000	Support community-level implementation of malaria in pregnancy (SP, ITN) interventions in communities located in areas with low IPTp coverage. This will involve the introduction of an accountability framework for department and health zone managers through a memorandum of understanding approach that will be signed with 14 health zones with the lowest indicators. Specific indicators will be agreed upon. Each health zone will propose a business plan for the improvement of the identified IPTp indicators.
Drug Based Prevention	SMC	Procure SMC-Related Commodities	TBD Supply Chain Central Mechanism	To be determined	\$233,450	The 2024 SMC campaign will benefit approximately 121,624 children 3-59 months of age (17,501 children 3-11 months + 104,123 children 12-59 months) residing in the communes of Malanville, Karimama, Tanguieta, Cobli, and Materi (the two health zones of TCM and MK). Given the results of the inventory of the previous campaigns, PMI will purchase XXXX co-blisters (approximately 87,000 co-blisters for children 3-11 months of age and 493,000 co-blisters for children 12-59 months of age) to complete the quantity of the approximately 580,000 co-blisters required for the entire targeted population.
Drug Based Prevention	SMC	SMC Implementation	BEMFA-G2G (NMP)	To be determined	\$550,000	Support the implementation of the 2024 SMC campaign, which will benefit approximately 121,624 children 3-59 months of age (17,501 children 3-11 months + 104,123 children 12-59 months) residing in the communes of Tanguieta, Cobli, and Materi (the entire Atakora department).
Case Management	Procure Case Management-Related Commodities	Procure RDTs	TBD Supply Chain Central Mechanism	To be determined	\$760,000	Procure approximately 2 million single-species RDT.
Case Management	Procure Case Management-Related Commodities	Procure ACTs	TBD Supply Chain Central Mechanism	To be determined	\$1,400,000	Procure approximately 2 million treatments of AL for use in communities and public and private health facilities.
Case Management	Procure Case Management-Related Commodities	Procure Drugs for Severe Malaria	TBD Supply Chain Central Mechanism	To be determined	\$606,000	Procure approximately 300,000 vials of injectable Artesunate for treatment of severe malaria.

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Case Management	Procure Case Management-Related Commodities	Procure Drugs for Severe Malaria	TBD Supply Chain Central Mechanism	To be determined	\$3,105	Procure approximately 9,000 suppositories for referral.
Case Management	Case Management Implementation	Facility-based Case Management	TBD (Component 2- Health Services Delivery)	Yes- one or more of the Sub-partner(s) is/are Local Partners for PMI	\$600,000	Provide support to departments and health zones for onsite supervision of health workers, and coaching that includes supervision of clinical, diagnostic and treatment activities. Atacora, Mono, Donga, and Plateau
Case Management	Case Management Implementation	Community-based Case Management	TBD (Component 3- Community Health Strengthening)	To be determined	\$240,000	Support CHW operational costs in the 4 departments supported by the mission bilateral mechanism— Atacora (9 communes), Donga (3 communes), Mono (4 communes) and Plateau (5 communes) for an estimated 2,000 RCs (approx. 25% of all CHWs nationwide). These costs include training/refresher training, group and onsite supervision, point of distribution supply chain strengthening.
Case Management	Case Management Implementation	Community-based Case Management	TBD (Component 3- Community Health Strengthening)	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$507,914	Provide funds to the new community Health mechanism to support the Direction Departementale de la sante (DDS), in four departments (21 communes) in the implementation of the new community health policy, including training and refresher training for RCs in the targeted communes to rollout the new community health package of services under the One Health platform.
Case Management	Case Management Implementation	Private Sector Case Management	TBD (Component 1- Health Systems Strengthening)	To be determined	\$200,000	Supportive supervision of case management (inclusive of diagnosis by RDT, treatment, and malaria in pregnancy) practices at all registered private hospitals and health centers using comprehensive malaria-specific supervision tool. Department and Health Zone Health Team staff will be actively involved in supervision activities. Supervision visits will include observation of patient consultations and feedback to providers as well as review of clinical record reporting.

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Case Management	Case Management Implementation	Support Therapeutic Efficacy Study	BEMFA-G2G (NMP)	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$150,000	Support for the 2025 therapeutic efficacy monitoring of ACT in three sites (one each north, center, and south) including molecular sample processing plus fieldwork; k13 and other gene deletion monitoring is included. CDC to provide reagents.
Case Management	Procure Case Management-Related Commodities	Procure Reagents and Other TES Specific Commodities	BEMFA-G2G (NMP)	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$100,000	Procure commodities for implementation of TES for the 3 sites
Supply Chain	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	TBD Supply Chain Central Mechanism	To be determined	\$400,000	Support for regional offices and depots in the SoBAP area and logistics information system. Includes 100% surveillance in 12 low performance health zones.
Supply Chain	In-Country Supply Chain	Strengthen Medical Product Quality Assurance	TBD-Monitoring illegal malaria commodities	To be determined	\$150,000	Support for implementation of the national action plan for the strengthening of Laboratoire National de Controle de Qualite (LNCQ). Provide support to the national laboratory for quality control to perform routine testing of malaria commodities at the port and spot checks in public and private health facilities. Support the cost of reagents and equipment for drug quality testing and staff time. Support the Agence Beninoise de Regulation Pharmaceutique (ABRP) to perform its functions of ensuring the quality pharmaceutical products and monitoring of illegal malaria commodities in markets and formal health services.
Supply Chain	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	TBD Supply Chain Central Mechanism	To be determined	\$50,000	Support for the implementation of EUV in 12 departments.
Supply Chain	In-Country Supply Chain	Warehousing and Distribution	TBD Supply Chain Central Mechanism	To be determined	\$300,000	Support for management, oversight, and physical distribution of PMI-procured ACTs, RDTs, SP, and drugs for severe malaria. PMI support will leverage broader cross-element USAID investments in warehousing and distribution in Benin. This includes offsite warehousing by SoBAPS.

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Vaccine	Vaccine	Vaccine Implementation	BEMFA-G2G (NMP)	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$50,000	Support the NMCP to engage with the national EPI program to strategically use data to introduce/rollout the vaccine. Provide complementary support to maximize uptake without affecting coverage of other malaria interventions.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	TBD (Component 3-Community Health Strengthening)	To be determined	\$50,000	Support RCs training/refresher training, group and onsite supervision to improve community-level data collection.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	TBD (Component 1-Health Systems Strengthening)	To be determined	\$50,000	Review of clinical record reporting as part of supportive supervision of case management practices at all registered private hospitals and health center. Department and Health Zone health team staff will be actively involved in supervision activities.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	BEMFA-G2G (NMP)	Yes- the Prime is a Local Partner for PMI (G2G)	\$300,000	Provide continuous support at the national, regional, and operational levels for the implementation of the RMIS and eLMIS information systems—in particular, the development of data quality assurance guidelines, training of key actors, implementation of monthly RMIS validations by communes, monthly validation of death audits by health zone, quarterly or semestrial monitoring (supervision and review), and distribution of malaria bulletins and permanent and systematic monitoring of data quality carried out by the district health offices. PMI support for this activity is part of a larger effort to strengthen the HMIS system, supported by USAID, the Global Fund, etc. This includes the decentralization of data validation workshops at the commune level and the audit of malaria deaths at the health district level on a monthly basis.
Monitoring, Evaluation, & Research	Operational Research (OR) and Program Evaluation (PE)	OR or PE Implementation	BEMFA-G2G (NMP)	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$50,000	Establish a research committee within the NMCP that will be meeting regularly to review available research/study results for policy and strategic decisions to inform the national strategic plan. This support will also include the development of a research database/repository

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SBC	SBC	SBC Implementation	TBD (Component 3-Community Health Strengthening)	To be determined	\$525,000	In collaboration with the MOH, the Global Fund, UNICEF, and other partners, the bilateral intervention will promote strategies outlined in the new National Strategy for Malaria Social and Behavioral Change Communication 2021-2025 as updated with results from the MBS and HFS. Specific approaches will be planned to address prompt care-seeking behavior and provider adherence to guidelines on CM and IPTp. Priority will be given to institutional capacity building including strengthening the SBC operational plan elaboration sessions in the communes and the TWG coordination functions of SBC activities at the central and decentralized levels (HZ, communes and the village health committees). This will support national level SBC activities as well as community mobilization and awareness raising in the project supported areas. Appropriate approaches, messaging, and channels (village committees, community radio stations, RC HH visits) will be planned around a dual analysis of behaviors and environmental factors around the perceived susceptibility to malaria, perceived self-efficacy to use nets consistently.
SBC	SBC	SBC Implementation	TBD (Component 3-Community Health Strengthening)	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$50,000	Implement integrated communication plans in supported geographical areas, adapted from the MOH Communication Plan. Local NGO communication plans will generate relevant strategies and messages that provide information about the package of services and address social and cultural norms and barriers around the perceived susceptibility to malaria, prompt care-seeking behavior and provider adherence to guidelines on CM; perceived self-efficacy to use nets consistently and the improvement of IPTp uptake among women.

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Other Health Systems Strengthening	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	TBD-Monitoring illegal malaria commodities	No-this activity will not be implemented by Local Partners	\$200,000	Support for the monitoring of illegal malaria commodities in markets and formal health services, audit of malaria services under national health insurance, and train journalists on malaria and governance. This activity will be co-funded with malaria (maximum one-third of total budget), MCH, and other non-health funding.
Other Health Systems Strengthening	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	TBD-Technical Assistance- UHC- ARCH-AM	No-this activity will not be implemented by Local Partners	\$250,000	Support the country's efforts toward universal health coverage through the provision of technical assistance in the rollout of the Assurance pour le renforcement du Capital humain-assurance maladies (ARCH-AM), including improvement of quality of care services offered to ARCH-AM beneficiaries, refinement of the reimbursement mechanism for health facilities, improvement of communication and strengthening of inclusive dialogue, strengthening of monitoring and evaluation and continuous learning to inform the national scale-up of ARCH-AM.
Other Health Systems Strengthening	Other Health Systems Strengthening	Support to Peace Corps	Peace Corps	No-this activity will not be implemented by Local Partners	\$40,000	Continued support to maintain two Peace Corps malaria volunteers to coordinate and support volunteers' malaria activities throughout the country; one volunteer may be embedded with a PMI implementing partner at the national or regional level (\$20,000). Support small project grants (\$10,000) for which volunteers can submit applications.
Staffing & Administration	Staffing & Administration	Case Management-Related CDC TDY	CDC IAA	No-this activity will not be implemented by Local Partners	\$10,000	
Staffing & Administration	Staffing & Administration	SBC-Related CDC TDY	CDC IAA	No-this activity will not be implemented by Local Partners	\$10,000	

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Staffing & Administration	Staffing & Administration	Vector Control - CDC Entomology Lead TDY	CDC IAA	No-this activity will not be implemented by Local Partners	\$29,000	Funding for two technical assistance visits from CDC to support entomological surveillance, with particular emphasis on coordination of vector monitoring efforts, particularly for mosquito bionomics sampling, and use of data with partners for decision-making. Emphasis will also be placed on synergist and insecticide resistance intensity testing, community-based entomological monitoring, and An. stephensi surveillance.
Staffing & Administration	Staffing & Administration	USAID In-Country Staffing and Administration: Administration	USAID	N/A	\$300,000	
Staffing & Administration	Staffing & Administration	USAID In-Country Staffing and Administration: Staffing	USAID	N/A	\$1,773,644	
Staffing & Administration	Staffing & Administration	CDC In-Country Staffing and Administration	CDC IAA	N/A	\$320,287	