

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

| Mechanisms and Proposed Activities | Sum of Budget (in \$) |
|--|------------------------------|
| Breakthrough ACTION | \$ 900,000 |
| Other SBC | \$ 900,000 |
| CDC IAA | \$ 565,300 |
| CDC In-Country Staffing and Administration | \$ 565,300 |
| Country Health Information Systems and Data Use (CHISU) | \$ 713,500 |
| Support Routine Surveillance | \$ 713,500 |
| PMI Evolve | \$ 617,000 |
| IRS Implementation | \$ 17,000 |
| Support Entomological Monitoring | \$ 600,000 |
| TBD Bilateral Mechanism | \$ 1,539,402 |
| Community-based Case Management | \$ 145,624 |
| Facility-based Case Management | \$ 680,000 |
| MIP Implementation | \$ 243,778 |
| Private Sector Case Management | \$ 200,000 |
| SBC Implementation | \$ 250,000 |
| Vaccine Implementation | \$ 20,000 |
| TBD Integrated community Health | \$ 1,300,000 |
| Community-based Case Management | \$ 800,000 |
| MIP Implementation | \$ 200,000 |
| SM&E for Community based information systems (CBIS) | \$ 300,000 |
| USAID | \$ 997,033 |
| USAID In-Country Staffing and Administration: Administration | \$ 260,000 |
| USAID In-Country Staffing and Administration: Staffing | \$ 737,033 |
| Working Capital Fund, Commodity Procurement | \$ 5,404,805 |
| Procure ACTs | \$ 651,206 |
| Procure ITNs for Continuous Distribution Channels | \$ 4,145,599 |
| Procure RDTs | \$ 608,000 |
| Working Capital Fund, LLIN Distribution | \$ 400,000 |
| Distribute ITNs for Continuous Distribution Channels | \$ 400,000 |
| Working Capital Fund, Supply Chain Technical Assistance | \$ 500,000 |
| Supply Chain and Pharmaceutical Management | \$ 500,000 |
| Working Capital Fund, Warehousing & Distribution | \$ 62,960 |
| Warehousing and Distribution | \$ 62,960 |
| Grand Total | \$ 13,000,000 |

**Table 2: Budget Breakdown by Activity
U.S. President's Malaria Initiative — Burundi
Planned Malaria Obligations for FY 2024**

| Broad Investment Area | Focused Investment Area | Proposed Activity | Mechanism | Local Partner | Budget (in \$) | Description of Proposed Activity |
|-----------------------|------------------------------------|--|---|---|----------------|--|
| Vector Control | Entomological Monitoring | Support Entomological Monitoring | PMI Evolve | N/A | \$600,000 | Support for entomological monitoring including insecticide resistance, vector bionomics, and insecticide residual efficacy. Support laboratory capacity strengthening for staff at the National Public Health Institute (INSP) and Lab of Gihanga on Molecular Assays. Testing for insecticide susceptibility will be expanded to new insecticides as they become available. Insecticide resistance monitoring will be conducted in nine provinces (Cankuzo, Gihofi, Mabayi, Matana, Mpanda, Mutaho, Kiremba Nyanza Lac, Vumbi). TA will also include the implementation of Vectorlink collect DHIS2 database and the capacity building of laboratory technician in entomological monitoring including Anopheles stephensi surveillance by the INSP. |
| Vector Control | Insecticide Treated Nets | Distribute ITNs for Continuous Distribution Channels | Working Capital Fund, LLIN Distribution | N/A | \$400,000 | Distribute 477,170 standard nets, 635,234 Dual AI nets, 205,104 PBO nets for a total of 1,112,404 nets from the central warehouse to 49 districts warehouses and from districts warehouses to facilities (last miles) for routine distribution to pregnant women and under five year old children. |
| Vector Control | Insecticide Treated Nets | Procure ITNs for Continuous Distribution Channels | Working Capital Fund, Commodity Procurement | N/A | \$4,145,599 | Procure approximately 1,112,404 nets (477,170 standard nets and 635,234 Dual AI nets) for continuous distribution channels through ANC and EPI clinics. |
| Vector Control | Indoor Residual Spraying | IRS Implementation | PMI Evolve | N/A | \$17,000 | Provide technical assistance for IRS implemented by others partner, including environmental compliance and testing of insecticide resistance. Support the implementation of a successful IRS (if approved by Global Fund) operation in accordance with international standards including multisectoriel collaboration, monitor the insecticide decay on sprayed walls after IRS, provide inputs to the end of spray report. |
| Drug Based Prevention | Prevention of Malaria in Pregnancy | MIP Implementation | TBD Integrated community Health | Yes- the Prime is a Local Partner for PMI (G2G) | \$200,000 | Support cIPTp implementation and SBC for cIPTp, digital community health, across 25 districts and supportive supervision for CHWs involved. |

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|-----------------------|---|---------------------------------|---|-----|-----------|--|
| Drug Based Prevention | Prevention of Malaria in Pregnancy | MIP Implementation | TBD Bilateral Mechanism | N/A | \$243,778 | Provide refresher training for approximately 300 public and private health facility midwives and nurses to correctly deliver SP and ITNs and broader MIP services in the context of focused antenatal care approach and support the rollout the 8 ANC contacts for 6 IPTp uptake. Refresher training will be provided as part of overall refresher training for service providers in health centers. In addition, funds will support cIPTp implementation, digital community health, monthly supportive supervision for CHWs involved. |
| Case Management | Procure Case Management-Related Commodities | Procure RDTs | Working Capital Fund, Commodity Procurement | N/A | \$608,000 | Procure approximately 1,600,000 RDTs for malaria for use in health facilities and communities as well as for the training of CHW to bridge the gap not covered by Global Fund. |
| Case Management | Procure Case Management-Related Commodities | Procure ACTs | Working Capital Fund, Commodity Procurement | N/A | \$651,206 | Procure approximately 1,209,551 blisters of Artemeter-Lumefantrine for use health facilities and communities to bridge the gap not covered by Global Fund. |
| Case Management | Case Management Implementation | Community-based Case Management | TBD Bilateral Mechanism | N/A | \$145,624 | Support refresher training in malaria case for CHWs on testing, treatment and strengthening the referral systems between CHWs and health facilities including iCCM, PECADOM and demand creation for private health facilities. This will cover the 10 provinces with digital community health implementation. Funds will support ProCCM targeting health facilities reporting higher malaria cases in selected malaria high burden communes within some districts in collaboration with the Integrated community health Activity. |
| Case Management | Case Management Implementation | Facility-based Case Management | TBD Bilateral Mechanism | N/A | \$680,000 | Supportive supervision for providers at health facilities to improve the quality of care in the management of uncomplicated and severe malaria cases. Support training in data collection and analysis for decision making at central, subnational level. |
| Case Management | Case Management Implementation | Private Sector Case Management | TBD Bilateral Mechanism | N/A | \$200,000 | Funds will support case management of uncomplicated malaria including appropriate treatment (with artemisinin-based combination therapies) or referral of patients in approximately 100 private health facilities and selected faith-based healthcare centers. |

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| | | | | | | |
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| Case Management | Case Management Implementation | Community-based Case Management | TBD Integrated community Health | Yes- the Prime is a Local Partner for PMI (not a G2G) | \$800,000 | To support for expansion of iCCM, PECADOM, and SBC activities across 25 districts including improving community engagement and strengthening the quality of malaria services, with the goal of reducing maternal and child mortality and morbidity in targeted twenty-five health districts in 10 provinces. |
| Supply Chain | In-Country Supply Chain | Supply Chain and Pharmaceutical Management | Working Capital Fund, Supply Chain Technical Assistance | N/A | \$100,000 | Conduct end-use verification survey at district and health facilities to monitor the availability of key malaria commodities, to review service provided data and reconcile with commodities consumption data, and to review facilities management and drug storage conditions. |
| Supply Chain | In-Country Supply Chain | Supply Chain and Pharmaceutical Management | Working Capital Fund, Supply Chain Technical Assistance | N/A | \$400,000 | Provide TA to build capacity for malaria commodities quantification, forecasting, and improve the coordination between the malaria supply chain partners through quarterly reviews and supply chain monitoring at the central, province and district levels and ensure last mile delivery. The fund will contribute to printing and distribution of stock management tools to fill the gap as needed. |
| Supply Chain | In-Country Supply Chain | Warehousing and Distribution | Working Capital Fund, Warehousing & Distribution | N/A | \$62,960 | Warehousing for malaria commodities (5% of commodities' cost) |
| Vaccine | Vaccine | Vaccine Implementation | TBD Bilateral Mechanism | N/A | \$20,000 | Support SBC and supportive supervision to health care workers on the introduction of the malaria vaccine in 16 out of the 25 districts identified. |
| Monitoring, Evaluation, & Research | Surveillance, Monitoring and Evaluation | Support Routine Surveillance | Country Health Information Systems and Data Use (CHISU) | N/A | \$713,500 | Provide TA to strengthen the health management information system at the national and provincial levels including governance, data analysis and data use for decision making across the health sector. Provide TA to malaria surveillance including capacity-building, development of protocols, surveillance monitoring and to the evaluation technical working group and sustaining the expansion of digital health in malaria interventions |
| Monitoring, Evaluation, & Research | Surveillance, Monitoring and Evaluation | SM&E for Community based information systems (CBIS) | TBD Integrated community Health | Yes- the Prime is a Local Partner for PMI (not a G2G) | \$300,000 | Provide TA to strengthen national health management information system at community level including governance, digital community health, data analysis and data use for decision making across the health sector especially focused on community level data. |

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| SBC | SBC | SBC Implementation | TBD Bilateral Mechanism | N/A | \$250,000 | Support a comprehensive SBC package (IPC and mass media) to improve early care seeking, correct and consistent use and care of ITNs, to increase ANC and IPTp uptake, and to improve early diagnosis and treatment of malaria in health facilities and communities. Support the production of SBC materials for use at community and facility levels to promote health prevention and treatment behaviors as well as support communication around ITNs mass distribution campaign. |
| SBC | SBC | Other SBC | Breakthrough ACTION | N/A | \$900,000 | Provide malaria related SBC technical assistance to the National Malaria Control Program (NMCP) and relevant government and non-governmental partners. Support capacity strengthening to relevant government and non-governmental stakeholders working in SBC. |
| Staffing & Administration | Staffing & Administration | USAID In-Country Staffing and Administration: Administration | USAID | N/A | \$260,000 | Administration and PD&L including Documentation Outreach Communication officer support |
| Staffing & Administration | Staffing & Administration | USAID In-Country Staffing and Administration: Staffing | USAID | N/A | \$737,033 | Staffing for one USAID TCN Malaria Resident Advisor and three 100% USAID FSNs including one Malaria Specialist, one Data Specialist and one Program Quality Specialist . |
| Staffing & Administration | Staffing & Administration | CDC In-Country Staffing and Administration | CDC IAA | N/A | \$565,300 | Staffing for one CDC Resident Advisor |

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