

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

Mechanisms and Proposed Activities	Sum of Budget (in \$)
PMI Evolve	\$ 750,000
Support Entomological Monitoring	\$ 750,000
Working Capital Fund, Warehousing & Distribution	\$ 800,000
Warehousing and Distribution	\$ 800,000
Working Capital Fund, Commodity Procurement	\$ 13,025,000
Procure ACTs	\$ 2,632,605
Procure Drugs for Severe Malaria	\$ 2,004
Procure ITNs for Continuous Distribution Channels	\$ 7,547,606
Procure RDTs	\$ 1,627,825
Procure IPTp Related Commodities	\$ 1,164,960
Procure Reagents and Other TES Specific Commodities	\$ 50,000
G2G	\$ 200,000
Community-based Case Management	\$ 100,000
SBC Implementation	\$ 100,000
TBD Malaria Service Delivery Central Mechanism	\$ 1,200,000
Community-based Case Management	\$ 300,000
Facility-based Case Management	\$ 450,000
MIP Implementation	\$ 100,000
Support Therapeutic Efficacy Study	\$ 150,000
National Level Support for Case Management	\$ 200,000
Working Capital Fund, Supply Chain Technical Assistance	\$ 1,310,000
Supply Chain and Pharmaceutical Management	\$ 1,310,000
Country Health Information Systems and Data Use (CHISU)	\$ 1,000,000
Support Routine Surveillance	\$ 800,000
SM&E for Community based information systems (CBIS)	\$ 200,000
TBD Bilateral Mechanism	\$ 700,000
Community-based Case Management	\$ 100,000
Facility-based Case Management	\$ 200,000
SBC Implementation	\$ 400,000
USAID	\$ 2,000,000
USAID In-Country Staffing and Administration: Administration	\$ 460,000
USAID In-Country Staffing and Administration: Staffing	\$ 1,540,000
CDC IAA	\$ 540,000
Case Management-Related CDC TDY	\$ 10,000
CDC In-Country Staffing and Administration	\$ 500,000

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MIP-Related CDC TDY	\$ 10,000
SBC-Related CDC TDY	\$ 20,000
Peace Corps	\$ 25,000
Support to Peace Corps	\$ 25,000
Working Capital Fund, LLIN Distribution	\$ 800,000
Distribute ITNs for Continuous Distribution Channels	\$ 800,000
MOMENTUM Tikweze Umoyo	\$ 100,000
MIP Implementation	\$ 100,000
MOMENTUM Tiyeni	\$ 400,000
MIP Implementation	\$ 100,000
SBC Implementation	\$ 300,000
Governance for Solutions	\$ 150,000
Other Health Systems Strengthening Implementation	\$ 150,000
Grand Total	\$ 23,000,000

**Table 2: Budget Breakdown by Activity
U.S. President's Malaria Initiative —Malawi
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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	PMI Evolve	N/A	\$750,000	Maintain entomological monitoring and technical assistance, including both insecticide resistance and vector bionomics, at 12 existing sites in six districts and takeover GF supported sites in Balaka and Mangochi (two sites in each districts) for a total of 16 sites per Insecticide Resistance Management (IRM) plan.
Vector Control	Insecticide Treated Nets	Distribute ITNs for Continuous Distribution Channels	Working Capital Fund, LLIN Distribution	N/A	\$800,000	Distribute approximately 1.9M Dual AI ITNs from the central to facility levels for distribute via ANC and labor and delivery channels and any other supported routine channel.
Vector Control	Insecticide Treated Nets	Procure ITNs for Continuous Distribution Channels	Working Capital Fund, Commodity Procurement	N/A	\$7,547,606	Procure approximately 1.9M Dual AI ITNs for national distribution via ANC and L&D.
Drug Based Prevention	Prevention of Malaria in Pregnancy	MIP Implementation	MOMENTUM Tikweze Umoyo	N/A	\$100,000	Support group mentorship at targeted facilities to strengthen direct observation of IPTp and distribution of ITNs at first ANC and improve MIP outcomes; integrated family health outreach clinics providing ANC services; and monthly supervision of data collection activities.
Drug Based Prevention	Prevention of Malaria in Pregnancy	MIP Implementation	MOMENTUM Tiyeni	N/A	\$100,000	Support group mentorship at targeted facilities to strengthen direct observation of IPTp and distribution of ITNs at first ANC and improve MIP outcomes; integrated family health outreach clinics providing ANC services; and monthly supervision of data collection activities.
Drug Based Prevention	Prevention of Malaria in Pregnancy	MIP Implementation	TBD Malaria Service Delivery Central Mechanism	N/A	\$100,000	Provide supportive supervision at the facility level of MIP providers to ensure appropriate SP implementation and ITN distribution, integrated with case management and data quality improvement activities. Revision of guidelines and materials related to MIP at the central level as needed.

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Drug Based Prevention	Prevention of Malaria in Pregnancy	Procure IPTp Related Commodities	Working Capital Fund, Commodity Procurement	N/A	\$1,164,960	Procure approximately 3.2M doses of SP for IPTP for use in health facilities and outreach clinics.
Case Management	Procure Case Management-Related Commodities	Procure RDTs	Working Capital Fund, Commodity Procurement	N/A	\$1,627,825	Procure approximately 4.3M RDTs for use in health facilities and village clinics.
Case Management	Procure Case Management-Related Commodities	Procure ACTs	Working Capital Fund, Commodity Procurement	N/A	\$2,632,605	Procure approximately 3.8M treatments for use in health facilities and village clinics.
Case Management	Procure Case Management-Related Commodities	Procure Drugs for Severe Malaria	Working Capital Fund, Commodity Procurement	N/A	\$2,004	Procure approximately 2,900 doses of rectal artesunate suppositories. Artesunate Injectable procured by Global Fund.
Case Management	Case Management Implementation	Facility-based Case Management	TBD Bilateral Mechanism	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$200,000	Provide technical assistance and implementation support to the NMCP and District Health Management Teams in at least two districts to facilitate improved malaria case management service delivery at the district and facility levels, including activities to strengthen rational testing of fever cases and prompt and appropriate treatment for confirmed malaria cases, thus ensuring that all malaria cases are identified and managed appropriately at the facility level.
Case Management	Case Management Implementation	Community-based Case Management	TBD Bilateral Mechanism	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$100,000	Provide technical assistance and implementation support to the NMCP and District Health Management Teams in at least two districts to facilitate improved malaria case management service delivery at the community level, including activities to strengthen rational testing of fever cases and prompt and appropriate treatment for confirmed malaria cases, thus ensuring that all malaria cases are identified and managed appropriately at the community level.

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Case Management	Case Management Implementation	Community-based Case Management	G2G	Yes- the Prime is a Local Partner for PMI (G2G)	\$100,000	Provide technical assistance and implementation support to the NMCP and District Health Management Teams to facilitate improved malaria case management service delivery at the community level, including activities to strengthen rational testing of fever cases and prompt and appropriate treatment for confirmed malaria cases, thus ensuring that all malaria cases are identified and managed appropriately at the community level.
Case Management	Case Management Implementation	Facility-based Case Management	TBD Malaria Service Delivery Central Mechanism	N/A	\$450,000	Provide technical assistance and implementation support to the NMCP and District Health Management Teams to facilitate improved malaria case management service delivery at the national, district and facility levels, including activities to strengthen rational testing of fever cases and prompt and appropriate treatment for confirmed malaria cases, thus ensuring that all malaria cases are identified and managed appropriately at the facility level.
Case Management	Case Management Implementation	Community-based Case Management	TBD Malaria Service Delivery Central Mechanism	N/A	\$300,000	Provide technical assistance and implementation support to the NMCP and District Health Management Teams to facilitate improved malaria case management service delivery at the community level, including activities to strengthen rational testing of fever cases and prompt and appropriate treatment for confirmed malaria cases, thus ensuring that all malaria cases are identified and managed appropriately at the community level.
Case Management	Case Management Implementation	National Level Support for Case Management	TBD Malaria Service Delivery Central Mechanism	N/A	\$200,000	Support the Case Management TWG and the National Malaria Advisory Board, updating of critical case management policy, guidelines, and job aids and tools, and laboratory strengthening including microscopy competency assessments and diagnostic refresher training.

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Case Management	Case Management Implementation	Support Therapeutic Efficacy Study	TBD Malaria Service Delivery Central Mechanism	N/A	\$150,000	One arm efficacy monitoring of Malawi's first-line ACT or other relevant ACT. Funds are meant to cover monitoring activities (including k13 testing) for the study to take place in CY 2025. This funding is complemented by \$100,000 in FY 23 MOP for start-up costs.
Case Management	Procure Case Management-Related Commodities	Procure Reagents and Other TES Specific Commodities	Working Capital Fund, Commodity Procurement	N/A	\$50,000	Procure reagents and other TES supplies for one arm study in CY25
Supply Chain	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	Working Capital Fund, Supply Chain Technical Assistance	N/A	\$1,310,000	Technical assistance to the Government of Malawi to improve management, oversight, and accountability for supply chain and logistics management at the central, zonal, and district levels, as well as the MOH Drug Theft Investigation Unit. Also includes support for ongoing Commodity Accountability Performance Tracking (CAPeT) activity entails spot checks of PMI-funded commodities at strategically targeted health facilities and at the community level and validation of LMIS data. Data from LMIS and HMIS are used to analyze the discrepancy ratio between AL treatments issued to confirmed malaria cases at select facilities over time.
Supply Chain	In-Country Supply Chain	Warehousing and Distribution	Working Capital Fund, Warehousing & Distribution	N/A	\$800,000	Support management, oversight, and distribution of donor-procured commodities (RDTs and ACTs) from central to health facility level.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Country Health Information Systems and Data Use (CHISU)	N/A	\$800,000	Central-level support for HMIS and digital health within the MOH. Support for HIS leadership and governance strengthening, regional and district data review meetings and an NMCP quarterly malaria bulletin. Support for routine surveillance through training and supervisions at the facility and district level in eight districts. Improve the capacity of HMIS officers, data clerks and health care workers in order to improve data quality, analysis, and use for decision-making.

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Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	SM&E for Community based information systems (CBIS)	Country Health Information Systems and Data Use (CHISU)	N/A	\$200,000	Provide technical assistance and implementation support to enhance the collection, management, and utilization of health data at the community level through the Integrated Community Health Information System (iCHIS) (number of districts TBD). The support aims to strengthen the community healthcare delivery and monitoring system by leveraging the capabilities of iCHIS to improve health data management, decision-making, and resource allocation.
SBC	SBC	SBC Implementation	MOMENTUM Tiyeni	N/A	\$300,000	Strengthen the capacity of the Ministry of Health and NMCP to lead and coordinate SBC programming at the national and district levels via the Health Education Services Team, and improve the use of data for decision-making in SBC. Activities include supporting the SBC QA/QI process for new SBC materials, organizing and hosting technical working group meetings, providing data bundles, and producing and airing radio and television spots.
SBC	SBC	SBC Implementation	TBD Bilateral Mechanism	Yes- the Prime is a Local Partner for PMI (not a G2G)	\$400,000	Support facility and community-based SBC activities to improve demand for vector control, case management and MIP services in at least six districts. The interventions will promote uptake of ITN use and care (including mitigation of misuse of nets); early ANC attendance, IPTp uptake, provider adherence to policy of DOT and net provision at first ANC and maternity, and client demand for services; prompt care-seeking behaviors; and address behaviors related to provider adherence to test and treat guidelines and patient adherence to treatment.

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SBC	SBC	SBC Implementation	G2G	Yes- the Prime is a Local Partner for PMI (G2G)	\$100,000	Support facility and community-based SBC activities to improve demand for vector control, case management and MIP services. The interventions will promote uptake of ITN use and care (including mitigation of misuse of nets); early ANC attendance, IPTp uptake, provider adherence to policy of DOT and net provision at first ANC and maternity, and client demand for services; prompt care-seeking behaviors; and address behaviors related to provider adherence to test and treat guidelines and patient adherence to treatment.
Other Health Systems Strengthening	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Governance for Solutions	N/A	\$150,000	Increase availability of high-performing staff in service delivery facilities to ensure coverage of essential malaria-related services and (2) support implementation of policy and regulatory frameworks to increase the percent of commercial and artisanal fishers complying with existing laws on ITN misuse
Other Health Systems Strengthening	Other Health Systems Strengthening	Support to Peace Corps	Peace Corps	N/A	\$25,000	Continued support to maintain Malawi Peace Corps Volunteers to support malaria activities throughout the country.
Staffing & Administration	Staffing & Administration	Case Management-Related CDC TDY	CDC IAA	N/A	\$10,000	One technical assistance visit from CDC to support TES implementation.
Staffing & Administration	Staffing & Administration	MIP-Related CDC TDY	CDC IAA	N/A	\$10,000	One technical assistance visit from CDC to support ongoing MIP activities.
Staffing & Administration	Staffing & Administration	SBC-Related CDC TDY	CDC IAA	N/A	\$20,000	Two technical assistance visits from CDC to support for quality control of SBC program.
Staffing & Administration	Staffing & Administration	USAID In-Country Staffing and Administration: Administration	USAID	N/A	\$460,000	Staffing and administration for one PMI/CDC Resident Advisor.
Staffing & Administration	Staffing & Administration	USAID In-Country Staffing and Administration: Staffing	USAID	N/A	\$1,540,000	Staffing and administration for one PMI/USAID Resident Advisor, three 100% PMI-dedicated Foreign Service Nationals, and one PSC.
Staffing & Administration	Staffing & Administration	CDC In-Country Staffing and Administration	CDC IAA	N/A	\$500,000	Administrative and Oversight costs (2%).