

PMI Overview



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PRESIDENT'S MALARIA INITIATIVE



IRS 2 RFP Workshop
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The President's Malaria Initiative



Goal: Reduce malaria-related mortality by 50% in 15 target countries

Targets: 85% coverage of vulnerable groups with 4 proven and effective interventions:

- IRS
- ITNs
- IPTp
- ACTs

PMI Management Structure

- Interagency initiative led by USAID with CDC as major partner
- Two in-country malaria advisors in each country – USAID and CDC
- One or more FSNs
- Backstopping by USAID/Washington and CDC/Atlanta country teams

PMI Focus Countries

- Beginning in FY06: Angola, Tanzania, Uganda
- Beginning in FY07: Rwanda, Senegal, Mozambique, and Malawi
- Beginning in FY08: Benin, Ghana, Mali, Kenya, Liberia, Madagascar, Zambia, Ethiopia (Oromiya Region)

Criteria for Focus Countries

- High burden of malaria
- Effective National Malaria Control Program
- Strong national commitment to control malaria
- Existence of Global Fund malaria grant (highly recommended)
- Willingness to partner with the USG
- USAID Mission

Strategy and Approach

- Support an integrated approach to control and strengthen national capacity;
- Work closely with host governments and within national malaria control program plans;
- Coordinate with international and in-country partners

PMI Funding Levels (Additive) and Coverage

Year	Funding Level	Coverage
2006	\$30 million	3 countries
2007	\$154 million	7 countries
2008	\$300 million	15 countries
2009	\$300 million	15 countries
2010	\$500 million	15 countries
<i>Hyde/Lantos</i>	<i>\$5 billion</i>	<i>FY09 - 13</i>

Malaria Operational Plan (MOP)

- Malaria Operational Plan:
 - An annual plan for each PMI country that details activities, targets, and budget breakdown by intervention and implementing partner for USG support
 - MOPs are developed in close collaboration with NMCPs and malaria stakeholders to ensure that plans support the national strategy and complement planned support by other donors and partners

Year 3 Progress to Date

- Spraying completed in 14 countries, protecting over 24 million persons in 2008
- About 13 million LLINs procured or on order (2006-8) with 9 million distributed
- Over 28 million ACTs treatments procured or on order (2006-8) with 18 million distributed
- Drugs for treatment of severe malaria procured in about half of PMI countries
- Malaria in pregnancy activities in all countries

Year 3 Progress to Date

In all countries, support for:

- Pharmaceutical Management Strengthening
- BCC/IEC
- Supervision
- HMIS
- Improved Diagnosis
- Capacity building for NMCPs

PMI Support of Health Systems and Capacity Building

- MOH/NMCP:
 - Planning and management; vector control
- Health facility level:
 - Laboratory diagnosis
 - Quality of antenatal/child health services
- Community level:
 - Community agents
 - Health education, service delivery
- Cross-cutting issues: M&E, training, supervision, supply chain management

Monitoring and Evaluation

- Household surveys every 2-4 years providing outcome data
- Health facility sentinel site surveillance of malaria morbidity and mortality
- Verbal autopsies in 4 countries
- Annual country results reviews (status of interventions, activities, and pipelines)

Non-PMI Programs

- Malaria prevention and treatment programs in Nigeria, DRC, and Southern Sudan
- Regional programs to address the threat of drug resistance in the Mekong and the Amazon

Challenges for PMI

- Revising program approaches as malaria wanes
- Expanding malaria diagnosis, especially rapid diagnostic tests
- Delivering ACTs in the private sector
- How best to employ IRS and ITNs in a complementary fashion
- Attaining high ITN usage in areas of high ownership
- Addressing emerging drug resistance