

Table 2: Budget Breakdown by Activity
President's Malaria Initiative -- Mali
Planned Malaria Obligations for FY2018
Revised September 19th, 2018

Proposed Activity	Mechanism	Budget (\$)		Geographic Area	Description
		Total	Commodity		
PREVENTIVE ACTIVITIES					
VECTOR MONITORING AND CONTROL					
Entomologic monitoring and insecticide resistance management					
Entomological monitoring	VECTORLINK	300,000		15 sites	Conduct routine entomological monitoring activities including former IRS areas (7 sites). Insecticide susceptibility testing will be carried out at 15 sites nationally. Support the NMCP entomologist in conducting IRS-related entomological monitoring. Support to DHPS to participate in the monitoring of IRS operations.
CDC entomological TDY	CDC-IAA	29,000		Nationwide	Technical assistance from CDC entomologist for entomological monitoring activities and analysis.
Subtotal Ento monitoring		329,000			
Insecticide-treated Nets					
Procurement of ITNs	GHSC-PSM	4,969,485		Nationwide	Procure up to 2 million ITNs for routine coverage through ANC and EPI.
Distribution of ITNs	GHSC-PSM	1,200,000	-	Nationwide	Distribute up to 2 million routine ITNs through ANC and EPI.
Net durability monitoring	GHSC-PSM/LBMA	150,000	-	Nationwide	Conduct the second year of net durability monitoring as per PMI requirements.
Subtotal ITNs		6,319,485	-		
Indoor Residual Spraying					
Indoor residual spraying	VECTORLINK	3,965,000	1,247,056	Mopti Region	Procure IRS equipment (insecticide, sprayers, etc.), training, implementation, data collection, protocols, guidelines, SBCC, logistic assessment for IRS operations.

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External environmental compliance assessment	ECOS Project	35,000		Mopti Region	External IRS environmental compliance monitoring as per PMI guidance.
Subtotal IRS		4,000,000	1,247,056		
SUBTOTAL VECTOR MONITORING AND CONTROL		10,648,485	1,247,056		
Malaria in Pregnancy					
Procurement of SP	GHSC-PSM	130,000	130,000	Nationwide	Procure 1 million treatments of SP.
Strengthen MIP services	TBD-Service delivery bilateral	700,000		USAID focus regions	Continue to strengthen use of MIP services.
Strengthen MIP services	IMPACT MALARIA	250,000		Non-USAID focus regions	Support strengthening MIP services in non-USAID focus regions in order to increase coverage.
Subtotal Malaria in Pregnancy		1,080,000	130,000		
SUBTOTAL PREVENTIVE		11,728,485	1,377,056		
CASE MANAGEMENT					
Diagnosis and Treatment					
Procurement of RDTs	GHSC-PSM	2,055,000	2,055,000	Nationwide	Procure approximately 3,690,000 RDTs.
Procurement of ACTs	GHSC-PSM	1,100,000	1,100,000	Nationwide	Procure approximately 1,000,000 ACTs (AL).
Procurement of injectable artesunate for treatment of severe malaria	GHSC-PSM	400,000	400,000	Nationwide	Procure approximately 160,000 vials of injectable artesunate for severe malaria.
Procurement of medications for SMC	GHSC-PSM	1,317,145	1,317,145	12 districts in targeted districts.	Cover approximately 650,000 children < 5 years with four rounds of SP-AQ co-blisters for SMC. Plus up to 10 in 1 district. Assumes cost of \$0.49 per treatment per child (x 4 rounds).
Implementation of SMC (training, supervision, distribution)	IMPACT MALARIA	1,700,000	-	12 districts in the 4 USAID focus regions	Implementation of SMC in 12 districts. Implementation will include the costs of training, supervision, community mobilization, and distribution of drugs.
Implementation of iCCM	TBD-Service delivery bilateral	500,000	-	USAID focus regions	Implementation of iCCM in USAID focus regions
Procure microscopes	GHSC-PSM	50,000	50,000		Procure microscopes and kits.
					Training includes OTSS, diagnostics, case management for simple and severe malaria, and supervision on all aspects of case management nationwide. Will cover additional CSCOMC

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Supply chain strengthening	GHSC-PSM	600,000		Nationwide	Strengthen pharmaceutical management and the supply chain system at national, district, and community levels, emphasizing continued improved quantification, forecasting, and distribution. Conduct at least two end-use verification surveys, tracking commodities down to community level and case management practices with an emphasis on follow-up of findings.
Subtotal Pharmaceutical Management		600,000			
SUBTOTAL CASE MANAGEMENT		9,032,145			
HEALTH SYSTEM STRENGTHENING / CAPACITY BUILDING					
Support day-to-day operations of NMCP	IMPACT MALARIA	50,000		Nationwide	Assist with the NMCP's day-to-day operations and ability to work closely with PMI and implementing partners.
SUBTOTAL HSS & CAPACITY BUILDING		50,000			
SOCIAL AND BEHAVIOR CHANGE COMMUNICATION					
SBCC for ITNs	KJK Project (BCC bilateral)	75,000		Nationwide	Continued support to SBCC activities to correct hanging, use, and maintenance of nets, as well as information about how individuals' use of ITNs year-round contributes to local and national malaria control objectives. Support for the revision of national BCC plan.
SBCC for MIP	KJK Project (BCC bilateral)	75,000		Nationwide	Continue to promote SP IPTp uptake and MIP targeting pregnant women. Continuing focus on second and third ANC visits. Support to the revision of the national SBCC plan.
SBCC for case management	KJK Project (BCC bilateral)	75,000		Nationwide	Continued support of messages and communications approaches for case management; implement through relais, train on referral systems at the community level with a focus on early care-seeking behaviors. Support the National Center for Information, Education, and Communication for Health (CНИЕCS) capacity to develop and implement communications approaches and messaging for case management. Support to the revision of the national SBCC plan.
SBCC for seasonal malaria chemoprevention	KJK Project (BCC bilateral)	75,000			Support messages and communications for seasonal malaria chemoprevention, with a focus on attendance at all rounds.
SUBTOTAL SBCC		300,000			
SURVEILLANCE, MONITORING, AND					

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TA for DHIS2	HRH2030	60,000			Provide technical assistance to the NMCP for data analysis and use of epi data derived from DHIS2.
SUBTOTAL SM&E		1,320,000			
OPERATIONAL RESEARCH					
MIP OR	IMPACT MALARIA	400,000			The primary objective of the proposed OR is to assess whether delivery of free ANC services through outreach, or delivery of free services at local health facilities (CSCOMs) leads to improved uptake of IPTp compared with routinely provided ANC services.
SUBTOTAL OR		400,000			
IN-COUNTRY STAFFING AND ADMINISTRATION					
CDC	CDC-IAA	743,370			Support for CDC PMI Resident Advisor (1) with salary, benefits and relocation support
USAID	USAID	1,426,000			Support for USAID PMI staff (1 PSC/1 FSN) with salaries, benefits, contribution to salaries and benefits of Mission support staff, IT support costs, office space, vehicles, other Mission program support costs, local costs for CDC PMI Resident Advisor.
SUBTOTAL IN-COUNTRY STAFFING		2,169,370			
GRAND TOTAL		25,000,000			