

Nigeria FY 2016 Table 2

Annex 1

Proposed Activity	Mechanism	Old Budget		New Budget		Geographic Area	Description
		Total \$	Commodity \$	Total \$	Commodity \$		
PREVENTIVE ACTIVITIES							
Insecticide-treated Nets							
Procurement of ITNs	GHSC-PSM	\$23,061,000	\$23,061,000	\$25,861,000	\$25,861,000	11 PMI-supported states	Procure 7.9 million ITNs for distribution in 11 PMI-supported states. Distribute 6.9 million ITNs through campaign in Sokoto (2.9m), Kebbi(2.5m) and Nasarawa (1.5m) and 1 million for routine and emergency distributions in PMI-supported states. Additional funds to procure nets for Plateau State (2.63 million nets) Additional funds will be added from reprogramming FY2014 and FY2015 budgets.
Distribution of ITNs from state warehouses to service delivery points	GHSC-PSM	\$1,000,000	\$0	\$1,000,000	\$0	11 PMI-supported states	To distribute 1million nets through routine system and emergency humanitarian response.
Logistics and operational costs for ITN distribution for mass campaigns	GHSC-PSM	\$6,444,320	\$0	\$6,444,320	\$0	3 PMI-supported states	Distribute 6.9 million nets for mass campaigns in Sokoto, Kebbi and Nasarawa.Costs include technical assistance, training, microplanning, and registration. BCC/social mobilization costs are reflected separately in the BCC section.
SUBTOTAL ITNs		\$30,505,320	\$23,061,000	\$33,305,320	\$25,861,000		
Indoor Residual Spraying							
Provide support for vector surveillance and susceptibility monitoring in four ecological zones around Nigeria and establish four new surveillance sites.	IRS 2 TO6	\$680,000	\$0	\$680,000	\$0	Six sentinel sites	Provide support for vector surveillance and susceptibility monitoring in six sites across four ecological zones in Nigeria. In addition to two existing sites, establish four new surveillance sites to align with PMI-supported states.
Strengthen capacity for entomological expertise at federal and state levels.	IRS 2 TO6	\$400,000	\$0	\$400,000	\$0	Six sentinel sites	Strengthen capacity for entomological competence at federal and state levels with training and equipment support (WHO cone wall bioassays, light trap collections, pyrethrum spray collections, surveillance equipment training, larval surveillance, and insecticide susceptibility training) to perform these activities. Maintain an insectary in Nasarawa State.
Technical assistance to NMEP IRS activities	CDC IAA	\$29,000	\$0	\$29,000	\$0	Federal and state level	Two trips to provide insecticide resistance training for Nigerian IRS staff, resistance test kits, and insecticide for Nigerian vector control officers attending training.
Supplies for entomological TA	CDC IAA	\$15,000	\$15,000	\$15,000	\$15,000	Federal and state level	Bioassays and test kits to supplement insecticide resistance and vector surveillance monitoring
SUBTOTAL IRS		\$1,124,000	\$15,000	\$1,124,000	\$15,000		
Malaria in Pregnancy							

Scale-up of MIP activities	TBD/ PMI for States	\$1,300,000	\$0	\$1,300,000	\$0	9 PMI-supported states	Support implementation of MIP and IPTp as part of FANC across nine PMI focus states. PMI support will include the roll-out of the new IPTp policy, introducing new IPTp guidelines in medical training institutions and professional associations, and piloting a “supervised” community-based IPTp-DOT in three states in Northern Nigeria with low ANC attendance.
Scale-up of MIP activities	TBD/ Integrated Health Program	\$500,000	\$0	\$0	\$0	2 PMI supported states	Support implementation of MIP and IPTp as part of FANC across nine PMI focus states. PMI support will include the roll-out of the new IPTp policy, introducing new IPTp guidelines in medical training institutions and professional associations, and piloting a “supervised” community-based IPTp-DOT in three states in Northern Nigeria with low ANC attendance.
Procure SP to scale-up of MIP Aactivities	GHSC-PSM	\$300,000	\$300,000	\$300,000	\$300,000		Procure additional SP to support IPTP outreach intervention by health workers in 2 states
SUBTOTAL MIP		\$2,100,000	\$300,000	\$1,600,000	\$300,000		
SUBTOTAL PREVENTIVE ACTIVITIES		\$33,729,320	\$23,376,000	\$36,029,320	\$26,176,000		
CASE MANAGEMENT							
Diagnosis and Treatment							
Procure rapid diagnostic tests (RDTs) and microscopy supplies	GHSC-PSM	\$5,000,000	\$5,000,000	\$5,000,000	\$5,000,000	11 PMI-supported states	Procure about 10 million RDTs to fill gaps and help prevent stockouts of malaria diagnostic tests in the public sector in 11 states.
Support for malaria diagnostics	Walter Reed Army Institute of Research	\$0	\$0	\$0	\$0	11 PMI-supported states	Support an existing laboratory in Cross River State to serve as a state reference laboratory for malaria diagnostics QA/QC. Conduct training of trainers and quality assurance for malaria diagnosis in 11 states. Expand training and QA for malaria diagnosis in private sector.
Technical assistance	CDC IAA	\$20,000	\$0	\$20,000	\$0	Nationwide	Two CDC TDYs to provide technical support to microscopic and RDT diagnosis of malaria.
Procure ACTs and severe malaria drugs	GHSC-PSM	\$6,060,000	\$7,800,000	\$6,060,000	\$6,060,000	11 PMI-supported states	Procure 8 million ACTs to fill gaps and help prevent stockouts of antimalarial medications in the public sector in 11 PMI focus states.
Train and provide supportive supervision for case management at public health facilities	TBD/ PMI for States	\$10,300,000	\$0	\$10,300,000	\$0	9 PMI-supported states	Training of health care workers at all levels on malaria diagnosis (RDT and microscopy) in public health facilities, including training on malaria case management, conducting supportive supervision and on-the-job capacity building, and providing basic tools and job aids for malaria case management.
Train and provide supportive supervision for case management at public health facilities	TBD/Integrated Health Program	\$2,000,000	\$0	\$0	\$0	2 PMI-supported states	Training of health care workers at all levels on malaria diagnosis (RDT and microscopy) in public health facilities, including training on malaria case management, conducting supportive supervision and on-the-job capacity building, and providing basic tools and job aids for malaria case management.
Subtotal Diagnosis and Treatment		\$23,380,000	\$12,800,000	\$21,380,000	\$11,060,000		
Pharmaceutical Management							

Strengthen the pharmaceutical and commodity management system	GHSC-PSM	\$3,516,680	\$0	\$3,516,680	\$0	11 PMI-supported states	Strengthen the pharmaceutical management system, forecasting, management, and distribution of pharmaceuticals and RDTs and provide warehousing and distribution of PMI-procured commodities to the facility level.
Provide support to strengthen NAFDAC's capacity	USP	\$1,000,000	\$0	\$1,000,000	\$0	Federal	Strengthen NAFDAC's capacity for drug quality control including the procurement of necessary equipment and supplies. Support will include establishing functional Minilabs@ that can perform key test for drug quality in the field. Activities include supporting NAFDAC to do post-market surveillance in three priority states to detect counterfeit antimalarial drugs and use of monotherapies in public and private sector.
Subtotal Pharmaceutical Management		\$4,516,680	\$0	\$4,516,680	\$0		
SUBTOTAL CASE MANAGEMENT		\$27,896,680	\$12,800,000	\$25,896,680	\$11,060,000		
HEALTH SYSTEM STRENGTHENING / CAPACITY BUILDING							
Support to the NMEP to strengthen technical capacity and national level coordination of the malaria program	TBD/PMI for States	\$500,000	\$0	\$500,000	\$0	Federal NMEP	Support for the NMEP's role as the lead coordination body through meeting support, supervision support, and training. Support will include technical assistance to states and LGAs.
Support for capacity building to the state, and LGAs	TBD/PMI for States	\$1,000,000	\$0	1,000,000	\$0	11 PMI-supported states	Support the 11 PMI focus states to plan, implement, coordinate, and monitor their malaria control programs.
Support for NFELTP	CDC IAA	\$550,000	\$0	\$550,000	\$0	Federal	Support training for five NMEP and SMEP personnel for the two-year FELTP course (\$50,000/year/trainee). Includes \$50,000 in funding for a short malaria course.
SUBTOTAL HSS & CAPACITY BUILDING		\$2,050,000	\$0	\$2,050,000	\$0		
BEHAVIOR CHANGE COMMUNICATION							
National 'malaria-free' campaign	HC3	\$0	\$0	\$0	\$0	Nationwide	The national-level mass media is targeted to reach 20% of all households, approximately 35 million Nigerians, in one year. This activity will be integrated along the technical areas in the SBCC program.
Integrated 'malaria-free' campaign	HC3	\$0	\$0	\$0	\$0	11 PMI-supported states	PMI will devise BCC activities that utilize mass media and appropriate IPC channels to effectively reach target population. This will reach approximately 35 million people. This activity will be integrated along the technical areas in the SBCC program.
Hausa language broadcasting service in northern Nigeria	VOA	\$0	\$0	\$0	\$0	Nationwide- Northern States	Continuing to support the Hausa language broadcasting service in northern Nigeria to deliver malaria messages, incorporating these into a variety of programs and health topics. Activity will be discontinued.
Mass media and community outreach and engagement through Action Learning Platforms and formal groups	HC3	\$2,500,000	\$0	\$2,500,000	\$0	9 PMI-supported states	Religious and community leadership structures will be engage to mobilize behavior change in communities. Household and community interactive sessions through IPC will be done in communities in PMI focus states. Mass media will be used to reach more people.

RDT use and compliance	HC3	\$400,000	\$0	\$400,000	\$0	11 PMI-supported states	This activity will be carried out in PMI-supported states with the aim to improve service providers' testing of fevers using RDTs and compliance with test results. Service provider engagements and group interactive sessions will aim to improve provider-patient interactions and compliance of service providers with RDT results.
IPTp uptake	HC3	\$350,000	\$0	\$350,000	\$0	7 PMI-supported states	In seven PMI focus states, IPC activities will be carried out with ANC health workers to promote IPTp 1, 2 and 3+ uptake. This will leverage the training to health workers on malaria in pregnancy. During community mobilization activities and routine ANC outreach, traditional birth attendants and private midwives will be encouraged to refer clients for IPTp in health facilities. BCC activities will be integrated into the community IPTp campaigns in the three selected states in Nigeria.
School-based BCC campaign	HC3	\$750,000	\$0	\$750,000	\$0	11 PMI-supported states	PMI will conduct school-based campaigns to engage primary school students in focus states in order to generate discussions around positive behaviors necessary for malaria prevention, diagnosis, and treatment. This will rely on the theory that young children can drive positive behavior change within household in Nigeria.
SUBTOTAL BCC		\$4,000,000	\$0	\$4,000,000	\$0		
MONITORING AND EVALUATION							
Strengthen routine M&E systems	TBD/PMI for States	\$1,680,000	\$0	\$1,680,000	\$0	9 PMI-supported states	Strengthen the harmonized HMIS at health facility, LGA, and state levels in 9 PMI-supported states. Implementation activities will include training and supervision of data clerical staff at selected health facilities, LGAs, and states; completion of unified data collection formats; and improving collection and reporting of routine malaria indicators.
Strengthen routine M&E systems	Measure Evaluation IV	\$320,000	\$0	\$320,000	\$0	9 PMI States	Activity is training to build monitoring and evaluation (M&E) capacity for malaria programs in Nigeria by working with the NMEP to train staff involved in malaria M&E and surveillance
Strengthen routine M&E systems	Measure Evaluation IV	\$200,000	\$0	\$200,000	\$0	Support National level HMIS	Strengthen the HMIS at Federal level. This activity will do an assessment for the US. Government contribution to HMIS
Strengthen routine M&E systems	TBD/RMNCH	\$300,000	\$0	\$0	\$0	2 PMI-supported states	Strengthen the harmonized HMIS at health facility, LGA, and state levels in two PMI-supported states. Implementation activities will include training and supervision of data clerical staff at selected health facilities, LGAs, and states; completing unified data collection formats; and improving collection and reporting of routine malaria indicators.
Drug Therapeutic Efficacy Testing	TBD/PMI for States	\$300,000	\$0	\$300,000	\$0	Nationwide	Support Drug Therapeutic and Efficacy Testing (DTET) in five sentinel sites to monitor efficacy to first-line antimalarial drugs. Each site will cost \$60,000.
Analysis of available malaria data	Measure Evaluation IV*	\$250,000	\$0	\$250,000	\$0	Nationwide	Secondary data analysis using available data sources such as MIS, MIA, MICS, and other available data. *Implementing partner will change to Measure IV
2018 NDHS	DHS Contract	\$500,000	\$0	\$500,000	\$0	Nationwide	contribute to funding the National Demographic and health Survey and incooperating malaria biomarkers.

ITN durability monitoring	Vector Works	\$100,000	\$0	\$100,000	\$0	Three states	Durability monitoring in 3 states.
HMIS Assessment	USAID?PD&L Non MEMS	\$0	\$0	0	\$0	Nationwide	Assessment of U.S. Government contribution to HMIS. Activity will not occur as planned
Endline evaluation	USAID/ PD&L MEMS	\$0	\$0	\$0	\$0	11 PMI-supported states	Endline evaluation of a PMI-funded activity. There will be no evaluation for any PMI-funded project in FY 2016.
Mission-wide M&E services contract	USAID/ PD&L MEMS	\$220,025	\$0	\$220,025	\$0	Nationwide	PMI contribution to Mission-wide M&E services. Budget is part of USAID PD&L.
Technical assistance for M&E strengthening	CDC IAA	\$20,000	\$0	\$20,000	\$0	Federal and State level	Two CDC TDYs to provide technical support for monitoring and evaluation.
SUBTOTAL M&E		\$3,890,025	\$0	\$3,590,025	\$0		
OPERATIONAL RESEARCH							
Operational research	TBD/OR	\$0	\$0	\$0	\$0	Nationwide	Support four studies on malaria OR priority areas: ITNs, case management, MIP, and M&E.
SUBTOTAL OR		\$0	\$0	\$0	\$0		
IN-COUNTRY STAFFING AND ADMINISTRATION							
In-country staffing and administration costs	USAID	\$2,626,975	\$0	\$2,626,975	\$0	Nationwide	Support for USAID annual staffing and administration costs. Also includes A&O. To include two malaria technical specialists for the PMI program.
In-country staffing and administration costs	CDC IAA	\$787,000	\$0	\$787,000	\$0	Nationwide	Support for CDC annual staffing and administration costs. Also includes A&O and PD&L.
Midyear Program Review	CDC IAA	\$20,000	\$0	\$20,000	\$0	Nationwide	Whole interagency team support Mission in midyear review.
SUBTOTAL IN-COUNTRY STAFFING		\$3,433,975	\$0	\$3,433,975	\$0		
GRAND TOTAL		\$75,000,000	\$36,176,000	\$75,000,000	\$37,236,000		