Revised Table 2:

Table 2

President's Malaria Initiative – *Liberia*Planned Obligations for FY 2008 (USD \$12,398,750)

| Proposed Activity | Mechanism | Budget (commodities) | Geographic area | Description of activity |
|--|-----------------------|--------------------------|---------------------------|--|
| Support improved distribution of LLIN and Jump Start | Deliver TO III | 500,000 | Nationwide and 2 Counties | Working with County Health Teams, support community-based and facility-based systems through NGOs and all other relevant partners that support communities and/or facilities, to improve distribution of LLIN to the household level and in facilities via ANC and EPI-related activities & Support "jump start" activity in Bomi and Cape Mount Counties to distribute 197,000 LLIN that UNICEF will procure and DELIVER will assist in the distribution as well as IEC/BCC development and in follow-up (Procurement of LLINs will be with FY07 funds; FY08 funds for logistics) |
| Procure LLIN | Deliver TO III | 2,985,000 (2,985,000) | Nationwide | Procure 426,429 LLIN for distribution through facilities and through community-based systems, covering 2008 |
| IEC/BCC at the community level to promote LLIN use | Local RFA for NGOs | 500,000 | Nationwide | Support year-long IEC/BCC at community level to assist NMCP to promote correct and consistent use of LLIN by pregnant women and children under five, using various media |
| Systems support for strengthening management of national ITN program | Deliver TO III | 575,000 | Nationwide | Systems support for strengthening management of national LLIN program |

| Proposed Activity | Mechanism | Budget (commodities) | Geographic area | Description of activity |
|--|-----------------------------|------------------------------|--------------------|---|
| SUBTOTAL Insecticide-treated bednets | | \$4,560,000 (\$2,985,000) | | |
| IRS baseline assessment | RTI IRS- IQC/CDC- IAA | 37,500/12,500 | TBD | Support entomological surveys on vector taxonomy, density, insecticide susceptibility in IRS target areas, as well as insecticide acceptability in population, and 1 TA visits from CDC |
| IRS in Monrovia | RTI-IRS-IQC | 375,000 (250,000) | Monrovia | 25,000 households will be sprayed in small pilots using DDT and a pyrethroid insecticide |
| Capacity strengthening in entomology | RTI-IVM | 62,500/12,500 | NA | Training and mentoring for entomology technicians with one TA visit from CDC |
| Technical assistance on vector control activities | CDC | 12,500 | NA | CDC will conduct one visit to monitor planning and implementation of vector control activities |
| Insecticide Resistance Monitoring | RTI-IRS-IQC | 50,000 | 2-3 sentinel sites | Assist NMCP to establish insecticide resistance monitoring system |
| SUBTOTAL: IRS | | \$562,500 (\$250,000) | | |
| Pre-service training for MIP | Local RFA for NGOs | 100,000 | Nationwide | Support and promote training curriculum for MIP at medical and nursing schools, including development and production of training materials |
| Training of CHW, HCW and Midwives | MENTOR | 150,000 | Nationwide | Support and promote training of facility-based as well as community level personnel and volunteers in MIP and ANC referral, including development and production of training materials |
| SUBTOTAL: Malaria in Pregnancy | | \$250,000 (\$0) | | |
| Assist with development of national reference laboratory | IMaD | 100,000 | Monrovia | Assist NMCP/MOHSW to identify specific needs in order to establish a national reference laboratory, in |

| Proposed Activity | Mechanism | Budget (commodities) | Geographic area | Description of activity |
|---|-----------------------|----------------------------|--------------------|---|
| | | | | collaboration with other donors |
| Laboratory baseline assessment | IMaD | 37,500 | Nationwide | Conduct a rapid assessment of laboratory capacity to determine availability of equipment and trained personnel for microscopy, giving attention to quality and effectiveness; 1 TA visit for CDC staff |
| TA Visit | CDC | 12,500 | NA | TA visit to oversee progress on diagnostic capacity development |
| Train laboratory technicians | IMaD | 100,000 | Nationwide | Train laboratory technicians in malaria diagnostics |
| Procurement of RDT | DELIVER TO III | 675,000 (675,000) | Nationwide | Procure 1,185,500 RDT to fill 2008 gap |
| RDT supervision, monitoring, and evaluation | IMaD | 50,000 | Nationwide | On-going supervision/coaching of HCW in use of RDTs, as well as monitoring and evaluation of their use |
| Procurement of laboratory supplies | DELIVER TO III | 100,000 (100,000) | Nationwide | Procure laboratory supplies, which identified as needed during rapid assessment, including reagents, battery-operated lights and others |
| Support for laboratory quality control and supervision | IMaD | 75,000 | Monrovia | Support NMCP to improve supervision and quality control |
| SUBTOTAL: Diagnostics | | \$1,150,000 (\$775,000) | | |
| Procurement of ACTs | DELIVER TO III | 1,270,000 (1,270,000) | Nationwide | Procure AQ/AS for treatment of uncomplicated malaria: 255,000 doses for <5 years; 138,000 doses for ages 5-14, and; 550,000 doses for >14 years |
| Procurement of drugs for severe malaria | DELIVER TO III | 345,000 (345,000) | Nationwide | Procure 67,500 doses of IM artemether (125,000 ampoules), and 32,500 of IV quinine (kits) |
| Pre-service and in-service training for case management | Local RFA for NGOs | 400,000 | Nationwide | Train HCW students and HCW in both public and private facilities in case management, including coaching; updating the curriculum and producing materials and distributing guidelines |

| Proposed Activity | Mechanism | Budget (commodities) | Geographic area | Description of activity |
|---|--|------------------------------|--------------------|---|
| IEC/BCC for treatment | Local RFA for NGOs | 400,000 | Nationwide | Support broad communication strategy of NMCP on dangers of malaria, the need for prompt referral to health facilities, and current drug policy, and MIP, targeting HCW and the general public |
| Strengthening of drug management system | Strengthenin g of Pharmaceutic al Management TBD | 300,000 | Nationwide | Support NMCP/MOHSW to strengthen the drug management system capacity including development of drug financing, registration, logistic/information system, supervision, forecasting and warehousing plans at all levels |
| Strengthening drug quality monitoring capacity | USP-DQI | 100,000 | Monrovia | Support to NDS to strengthen inspection and testing of anti-malaria drugs |
| Evaluation of rectal artesunate as a pre-referral drug for severe malaria | CDC | 120,000 | TBD | MOH wants to evaluate the possible use of the drug in the home before referral to a facility for severe malaria |
| Supporting <i>in vivo</i> clinical efficacy monitoring | MENTOR | 50,000 | TBD | Assist NMCP to select 2 sites (chosen from 5 sentinel sites), outside of Monrovia, to monitor drug efficacy |
| SUBTOTAL: Treatment | | \$2,985,000 (\$1,615,000) | | |
| Supporting integration of malaria M&E plan with national HMIS | TBD M&E support to PHN programs /CDC-IAA | 37,500 | Nationwide | Support to MOHSW to integrate and rationalize the NMCP data system and overall M&E plan with the national HMIS, including one TA visit from CDC |
| Training of personnel in data collection and management | TBD M&E support to PHN programs /CDC | 37,500 | Nationwide | Support training of HCW in data collection, management, analysis and reporting, at all levels; this includes one TA visit from CDC |

| Proposed Activity | Mechanism | Budget (commodities) | Geographic area | Description of activity |
|---|--|----------------------|--------------------|--|
| Supporting standardization of data collection tools | TBD M&E support to PHN programs | 10,000 | Monrovia | Assist NMCP to develop standardized data collection tools for use at all levels, including tool production and dissemination; this includes TA from CDC (above) |
| Support MIS | Measure DHS Phase III | 950,000 | Nationwide | Support for 2008 MIS to gather baseline data |
| Supporting establishment of sentinel sites | Local RFA for NGOs | 100,000 | WHO | Assist NMCP to select and establish sentinel sites to collect malaria specific and all-cause mortality data disaggregated by age group and pregnancy status |
| TA Visit to support M&E activities | CDC | 12,500 | NA | One TA visit by CDC staff to support M&E activities |
| Monitoring and Evaluation System Strengthening Tool (MESST) | TBD M&E support to PHN programs | 40,000 | Monrovia | Stakeholders meeting utilizing new RBM initiative tool to develop a country- specific M&E plan |
| SUBTOTAL: Monitoring and Evaluation | | \$1,187,500 (\$0) | | |
| In-country staff and administrative expenses | TBD | 1,003,750 | Monrovia | Salaries and benefits as well as administrative- related costs of in-country PMI staff (CDC and USAID) and other cross-cutting activities as needed by the Mission. |
| SUBTOTAL: Management and Administration | | \$1,003,750 (0) | | |
| Improving capacity for program management and supervision | Local RFA | 250,000 | Nationwide | Improve NMCP capacity for program management and supervision at central and county levels through training and mentoring; may include purchase of some vehicles |

| Proposed Activity | Mechanism | Budget (commodities) | Geographic area | Description of activity |
|---------------------------|-----------|-------------------------------|--------------------|---|
| Renovating NMCP offices | Local RFA | 450,000 | Monrovia | Renovation of NMCP office in MOHSW including electrical, plumbing, and related office equipment |
| SUBTOTAL: Capacity | | \$700,000 | | |
| Building | | (\$0) | | |
| GRAND TOTAL | | \$12,398,750 (\$5,625,000) | Comm | nodities represent 45.4% of the total budget |

| Supporting Documents (attachments): If necessary | |
|--|-------|
| Approval: | |
| R.T. Ziemer: | Date: |
| Drafted: <u>CM</u> _ CMcDermott, Health Office Leader USAID/Liberia Clearances: <u>MJE</u> _ JEliades, GH/HIDN <u>TH</u> _ THall, AFR/SD | |
| RNewman, CDC RGreene, GH/HIDN | |