

# MALARIA COMMUNITIES PROGRAM



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PRESIDENT'S MALARIA INITIATIVE



# Malaria Communities Program Overview

- On Dec 14, 2006, First Lady Laura Bush announced the MCP
  - under the umbrella of the PMI, a \$30 million initiative that will provide grants to *new* partners capable of working effectively, either directly or through local partners, to implement community-based malaria prevention and control activities

# What is the Purpose of the MCP?

- Identify and support new partner organizations and networks uniquely positioned to work at the community level
- Support local capacity to undertake community-based malaria prevention and treatment activities
- Build local ownership of malaria control for the long-term in partnership with communities & NMCPs
- Extend coverage of PMI and NMCP efforts to reach a larger beneficiary population with malaria prevention and control interventions

# **MCP FY07 RFA OVERVIEW**

# Who is Eligible to Apply?

- New NGO partners including U.S.- and non U.S.-based non-governmental organizations/ private voluntary organizations and in-country non-governmental organizations and their local partners
- New partners are those that have not been awarded in excess of \$5 million in total, direct U.S. Government funding over the five years prior to submission of an application

# Who is Eligible to Apply?

- Limited to the 7 initial PMI focus countries: Angola, Malawi, Mozambique, Rwanda, Senegal, Tanzania, and Uganda
- Future RFAs under the MCP will expand eligibility to all 15 PMI focus countries

# Guiding Principle of the MCP

- Proposed activities must fit within the PMI Malaria Operational Plan and NMCP Strategy

# MOP – What is it?

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



# Strategic & Program Principles

- Support strong linkages and partnerships with local governments and organizations
- Support for an integrated approach to malaria control and strengthening national capacity;
- Commitment to work closely with host government and consistent with national malaria control plan;
- Close coordination with international and in-country partners to ensure efforts are complementary
- Focus on contributing to scaling-up proven malaria control and prevention interventions

# What will the MCP Support?

- Distribution and promotion of ITNs including correct use of ITNs
- Promotion and implementation of bednet retreatment activities
- IEC activities, including household mobilization, before and during IRS campaigns
- Support community- and/or facility-based activities aimed at preventing and treating malaria in pregnant women and children under five

# What will the MCP Support?

- Support appropriate health seeking behavior among community members aimed at increasing early and effective treatment of malaria
- Support community health workers in community case management of malaria
- Work with private providers, drug sellers, etc. to improve quality of malaria treatment by the private sector

# Is Commodity Procurement an Emphasis?

## Commodity Procurement

- Although the PMI provides significant support to the provision of lifesaving commodities, MCP awardees are not encouraged to procure commodities, but instead to partner with the host country government and existing malaria partners to focus on extending the reach of comprehensive malaria program activities

# How Will Success be Measured?

- Measurable inputs and outcomes that will contribute directly to achieving PMI targets for the given focus country (see MOP for the specific country – [www.fightingmalaria.gov](http://www.fightingmalaria.gov))
- Annual work plans will need to be aligned with MOP activities, co-approved by MCP CTO/team and PMI country team

# Available Funding and Awards?

- Individual awards will be appropriate to the qualifications of the applicants and the scope of the proposed interventions
- Maximum ceiling of \$1.5 million per total award to be used over a 3 – 5 year period
- Three – five awards anticipated under this RFA

# Organizational Capacity Building

- Successful applicants will be eligible for post-award capacity-building assistance focusing on areas such as successful program implementation, needs analysis, and organizational strengthening including financial management

# Key Proposal Preparation Instructions

- Proposals must be in English, not exceeding 20 pages excluding attachments
- Submission of technical and cost applications separately (per instructions in Section IV of RFA)
  - Original + 2 copies + CD-ROM
  - On-line submission Grants.gov (no email or fax submissions allowed)



# Proposal & Evaluation Criteria Format

- Executive Summary
- Org Capability and Past Performance
- Situational Analysis
- Program Strategy & Interventions
- Performance Monitoring & Evaluation
- Management Plan and Work Plan

# Management of the Initiative

- PMI activities are led by the USAID Mission with the support of an inter-agency team, comprised of USAID and CDC staff
- The MCP Initiative will be managed from Washington, with grantees expected to work under the leadership of the in-country PMI Team (USAID & CDC) & in collaboration with other PMI partners in country

# MCP Timetable

- Dec 14, 2006 MCP announced
- March 2007 -Initial MCP RFA issued (FY07)
  - Proposals due May 31<sup>st</sup> 2007
  - Awards anticipated by end of Sept 2007 with implementation beginning immediately thereafter

## Future RFAs (subject to availability of funds):

- Fall 2007 – MCP FY08 RFA (#2) to be issued
  - Awards anticipated spring 2008
- Fall 2008 – MCP FY09 RFA (#3) to be issued
  - Awards anticipated spring 2009

# Summary

- Potential new partners should become familiar with the MOP and NMCP Strategy for their country and ask the question – What role can we play in extending the reach of planned and needed priority malaria prevention and control activities?