

**Reprogrammed Table 2--FY 2010 Planned Obligations: Madagascar**  
**30 July-10**

Proposed Activity	Mechanism	Total Budget	Commodities	Geographic area	Description of Activity
<b>IRS</b>					
IRS in 16 health districts as part of the National IRS campaign and strategy towards elimination.	IRS Global Task Order	\$13,303,450	\$6,372,619	16 Districts	Conduct PMI IRS operations in 6 health districts in the central highlands and fringe districts, 10 new districts in the northwest and southern transitional zones. Also covers partial cost for insecticide for 2011 IRS campaign and environmental mitigation. GF will support IRS in an additional 26-37 districts depending on the timing of funding. PMI will fund 13 districts next year as originally planned. Takes into account the RTI pipeline.
Entomological surveillance and monitoring	IRS Global Task Order	\$445,000	\$0	4 sites within the 16 districts	Undertake entomological monitoring including comprehensive vector surveillance, assessment of resistance and other indicators in 4 sites (RTI).
Entomological indicators will be measured measures to assess malaria transmission risk in four sentinel surveillance sites	IRS Global Task Order (subgrant to IPM)	\$80,000	\$0	4 sites tied to fever sentinel surveillance sites.	Two additional entomological indicators, sporozoite rates and vector survival will be used to supplement data on malaria transmission. Entomological inoculation rate (EIR) will compliment of the parasite incidence from malaria surveys. EIRs provide important independent confirmation that changes in transmission are related to anti-vector interventions. Vector survival in response to IRS and LLINs is assessed using traditional mosquito dissection methods to identify the proportion of older (epidemiologically important) females in a population. In addition vector survival following entry into a house, protected by and ITN(s) or IRS, the hut trap, will be deployed to assess changes in vector resting and indoor biting behavior that occur in response to selection associated with IRS and LLINs .

Technical assistance to PMI IRS activities	CDC IAA	\$24,000	\$0	53 IRS Target Districts	2 CDC TDYs to provide support for IRS
Technical assistance to PMI IRS activities	USAID	\$0	\$0	53 IRS Target Districts	1 USAID TDY to provide support for IRS (costs covered in core budget)
<b>Subtotal: IRS</b>		<b>\$13,852,450</b>	<b>\$6,372,619</b>		
<b>ITNs</b>					
Procure LLINs for the rolling campaign to reach the national goal of 2 LLINs per household	DELIVER	\$9,300,000	\$9,000,000	72 targeted districts in the Fringe, West, North and South	Purchase an estimated 1.7 million nets to deliver, in coordination with LLINs from other partners, 1 LLIN per 3 people in a household in 72 districts that were not covered in the 2009 E. Coast mass distribution campaign.
Support the logistics, including hang-up activities, of the LLIN rolling campaign	PSI	\$2,900,000	\$0	72 targeted districts in the Fringe, West, North and South	Conduct logistics, including transportation from central to district level and then to distribution sites, as well as storage at district and community level, IEC/BCC and hang-up activities, for 2,570,000 PMI nets used in the 2010 rolling campaign (870,000 procured with FY09 funds + 1.7 million with FY2010 funds).
Monitoring of tagged nets distributed during 2009 mass campaign	PSI	\$50,000	\$0	Drawn from 19 districts from 2009 mass campaign	Implement WHO recommendations to assess net life under field conditions by monitoring tagged nets that were distributed in the 2009 mass campaign.
Technical assistance to PMI LLIN activities	USAID	\$0	\$0	Nationwide	Technical assistance for the 2010 rolling campaign (costs covered in core budget)
Technical assistance to PMI LLIN activities	CDC IAA	\$12,000	\$0	Nationwide	One technical assistance to evaluate the LLIN campaign and build local capacity
<b>Subtotal: ITNs</b>		<b>\$12,262,000</b>	<b>\$9,000,000</b>		
<b>IPTp</b>					
Community based MIP promotion	SanteNet2	\$100,000	\$0	SanteNet2 Districts	Support Community-based IEC/BCC promotion for uptake of MIP services (ITNs and IPTp) at ANCs. This activity will be linked into the integrated services and promotion of ANC attendance provided to remote communities through SanteNet2-sponsored community health workers.
<b>Subtotal: IPTp</b>		<b>\$100,000</b>	<b>\$0</b>		

## Case Management

<b>Case Management</b>					
<b><i>Diagnostics</i></b>					
Provide RDTs to trained private sector/NGO providers	DELIVER	\$550,000	\$500,000	Nationwide	Provide RDTs to trained private sector/NGO providers to ensure rational use of ACTs, in response to the increased amounts of ACTs available in the private sector. Strengthen reporting from private sector/NGO providers.
Develop QA/QC for RDT use at the community level.	SanteNet2	\$50,000	\$0	Selected districts	Develop QA/QC implementation SOPs for the use of RDTs by community health workers. Validate RDT QC in community use conditions.
Expand community-based case management using RDTs	SanteNet2 (subgrants to NGOs/FBOs)	\$600,000	\$0	Targeted districts	Expand community-based case management in an RDT context, strengthen case reporting to the NMCP, incorporate QA implementation. Includes subgrants to NGOs/FBOs.
Procure RDTs for treatment of malaria at the community level	DELIVER	\$890,000	\$890,000	Targeted districts	Procure an estimated 890,000 RDTs for case management of malaria at the community level with an estimated 4800 community health workers implementing IMCI-c
Provide technical assistance for QA/QC activities	CDC/IAA	\$12,000	\$0	Nationwide	One TDY for CDC to provide technical support for diagnostics
<i>Subtotal</i>		<i>\$2,102,000</i>	<i>\$1,390,000</i>		
<b><i>Treatment</i></b>					
Train managers of Depots de Medicaments in malaria testing and treatment.	PSI	\$30,000		Nationwide	Ensure that managers of Depots de Medicaments understand malaria treatment and diagnostics and their responsibility to dispense ACTs in accordance with the overall National Malaria Control Strategy (i.e. with a prescription). This activity responds to the increased volume of ACTs available in the private sector. Work with the 900 managers who are members of the national organization.
Facilitate implementation and on-going supervision of community case management of malaria with ACTs	SanteNet2 (subgrants to NGOs/FBOs)	\$1,000,000	\$0	50% of all communes	Provide support for training/refresher training and routine supervision of community health workers. Support ACT supply chain and reporting of cases from the community level. Includes subgrants to NGOs/FBOs.
TA to support community case management of malaria	USAID	\$0	\$0	Nationwide	One USAID TDY to provide technical support for community case management of malaria

TA to support community case management of malaria	CDC IAA	\$12,000	\$0	Nationwide	One CDC TDY to provide technical support for community case management of malaria
<i>Subtotal</i>		<i>\$1,042,000</i>	<i>\$0</i>		
<b><i>Subtotal: Case Management</i></b>		<b><i>\$3,144,000</i></b>	<b><i>\$1,390,000</i></b>		
<b><i>IEC/BCC</i></b>					
Provide support for implementation of national and targeted mass media and community focused IEC/BCC campaigns	PSI	\$700,000	\$0	Nationwide	IEC/BCC for malaria activities including promoting IRS campaigns, ownership and use of LLINs, uptake of IPTp, case management with RDTs and ACTs.
Support implementation of community-based malaria activities through integrated CCM interventions through NGOs/FBOs	SanteNet2 (subgrants to NGOs/FBOs)	\$500,000	\$0	Nationwide	Support for NGO/FBO grants to expand the implementation of community-based IEC/BCC interventions to reach approximately half of all communes nationwide.
Support implementation of community-based malaria activities through integrated CCM interventions through NGOs/FBOs	New Community RFA	\$300,000	\$0	Districts in west & north not covered by SanteNet2	Support for NGO/FBO grants to expand the implementation of community-based IEC/BCC and case management interventions to reach inaccessible, underserved districts in the west and north of Madagascar not covered by SanteNet2
Support to Peace Corps Volunteers to promote malaria case management and control.	Peace Corps (SPA)	\$30,000	\$0	Nationwide	Support PCVs to promote malaria prevention and treatment seeking behaviors at the community level.
<b><i>Subtotal: IEC/BCC</i></b>		<b><i>\$1,530,000</i></b>	<b><i>\$0</i></b>		
<b><i>M&amp;E</i></b>					
Provide technical assistance to conduct the 2011 MIS	MACRO	\$900,150	\$0	Nationwide	Provide technical assistance for the national MIS planned in 2011 to complement GFATM funding (\$200,000 from RCC4).
Continue support for 15 fever sentinel sites of the fever surveillance system	Santenet2 (subgrant to IPM)	\$350,000	\$0	Nationwide	Support 15 fever sites in order to monitor impact of program interventions on severe malaria. Subgrant to IPM.
Monitor impact of CCM services	SanteNet2 (subgrant to IPM)	\$150,000	\$0	Priority District	Support intensified, ongoing monitoring of community case management within a defined population (through a DSS site) to measure impact of CCM activities, especially on <5 mortality.

Collect baseline information as part of a multi-year assessment of community-based management of fever in children under 5, including integration of RDTs. This will be part of a larger assessment of the effectiveness of community case management of malaria, diarrhea and ARI.	GHTech TO1	\$200,000	\$0	Targeted districts	Assess integration of RDTs, and approach to management of severely ill children <5, as part of a larger review of integrated community case management of malaria, diarrhea and ARI. This activity will be co-funded with USAID/Madagascar MCH and FP funds.
PMI impact evaluation	SanteNet2	\$100,000	\$0	Nationwide	Manage data collection process for 2011 PMI Impact evaluation
TA for M&E strengthening	CDC IAA	\$12,000	\$0	Nationwide	One CDC TDY to provide technical support for monitoring and evaluation
<b><i>Subtotal: M&amp;E</i></b>		<b><i>\$1,712,150</i></b>	<b><i>\$0</i></b>		
<b>Staffing and Administration</b>					
In country staffing and administration costs	USAID/CDC	\$1,299,400	\$0	Nationwide	Support for USAID and CDC annual staffing and administration costs.
<b><i>Subtotal: Staffing &amp; Administration</i></b>		<b><i>\$1,299,400</i></b>	<b><i>\$0</i></b>		
<b>GRAND TOTAL</b>		<b>\$33,900,000</b>	<b>\$16,762,619</b>		