

Malawi Operational Plan Report FY 2011



Operating Unit Overview

OU Executive Summary

Background

Approximately 12% of the Malawian adult population is HIV-positive, with nearly one million people, including over 80,000 children currently living with HIV (UNAIDS 2008). An estimated 60,000 deaths in Malawi are attributed to HIV each year. The TB case detection rate in Malawi remains below 50% with 26,000 notified TB cases and an estimated burden of 48,000 TB cases in 2007. About 70% of TB patients are HIV-positive. However the Ministry of Health (MOH) notes that 97% of diagnosed TB patients received treatment; the TB notification rate was reduced by 1%, and cure rate of smear positives increased to 86% over the previous year. Malawi continues to rank in the lowest 10% of indicators in the Human Development Index. The under-five mortality rate is 175/1,000 live births, and nearly 2% of live births result in the mother's death.

Population growth has increased four-fold in the past two decades, and without more effective family planning programs, is on a trajectory to triple to an estimated 42,000,000 people by 2040. Unchecked population growth combined with limited reduction in HIV incidence will result in unsustainable human and economic costs for the Government of Malawi (GOM), including further strains on the already overburdened health care system. However, over the past year, reproductive health services have progressed, with skilled attendance at birth up to 58% at MCH sites.

Between July 2009 and June 2010, Malawi tested over 1.7 million people, of whom 53% were reported to be first-time testers. Over 12% of those accessing HIV Testing and Counselling (HTC) services were couples, and 9% of pregnant women tested HIV-positive. Approximately 735 sites provided HTC and 248 counsellors were trained and certified in the last fiscal year. The national PMTCT program has been rapidly scaled-up to more than 500 sites since 2008 and Malawi is on-track to provide HTC to 90% of pregnant women this year. In addition, 87% of those women received Cotrimoxazole and 32% of exposed infants received ARV prophylaxsis.

Malawi has developed an ambitious plan to scale up access to ART for pregnant women through decentralizing the ART program into all 544 ANC sites nationally. Malawi has chosen to implement a modified Option B for PMTCT, and PMTCT providers will be trained to initiate ART in Maternal and Child Health (MCH) settings. This revised national program will be implemented by mid-2011, and the approach is expected to significantly increase ARV coverage for pregnant women from the current 35%, and significantly reduce MTCT by the end of 2012. By the end of June 2010, the national ART program had started 307,683 patients on ART, with 225,010 alive; an estimated 58% coverage of those in need. Approximately 9% of those initiated on ART in the second quarter of 2010 were children, and 61% of new patients were female.

Malawi's HIV epidemic is driven mainly by adult sexual behavior, with the majority of new sexually transmitted HIV infections occurring in long-term stable partnerships. Over 90% of new HIV infections among adults occur through individuals engaging in multiple and concurrent partnerships, and substantial transmission is driven by discordant couples. Malawi has made significant progress in male circumcision (MC) in 2010, with a completed WHO situation analysis, draft National Implementation Plan for MC, and newly drafted Standard Operating Procedures for Voluntary Medical Male Circumcision produced. In



addition, the MOH has committed to the creation of high-throughput 'MOVE' (the improved model for increased efficiency in circumcising high volumes of men by moving them through 4 beds at a time) sites at 3-4 hospitals in high prevalence districts, in an effort to provide sites for training providers, and to demonstrate national and international commitment to the implementation of MC. Malawi has applied for Global Fund support to implement MC in 2011; however, even if approved, the national program remains less than 50% funded, with USG providing 1/4 of the available resources.

Approximately 18 percent of all Malawian children (~1,000,000) are orphans and vulnerable children (OVC) with nearly 50% attributable to AIDS. Malawi's new Child Care, Protection & Justice Bill provides protection for children, including OVC, particularly because of their vulnerability to chronic poverty, food insecurity, child abuse, exploitation, and violence.

In July of 2010, the United States Government (U.S.) and the GOM officially signed a Partnership Framework Implementation Plan (PFIP) which was being operationalized during the FY2010 COP planning season. The Partnership Framework (PF) strategy which prioritzed joint planning, country-led decision making, (country ownership principles), and sustainability of host country health delivery systems has become the cornerstone of PEPFAR's participation of the newly launched Global Health Initiative (GHI). Together with PMI and other Child Survival and Health programs, PEPFAR will continue to support Malawi to achieve its goals in the prevention, care and treatment of HIV/AIDS. The strategy will further fully align PEPFAR efforts to the Malawi GHI strategy which aims to assist the country reduce maternal, neonatal, and child, mortality and morbidity; decrease total fertility; and reduce new HIV infections.

HIV/AIDS Epidemic in Malawi:

- Adult HIV Prevalence: 11.9% (UNAIDS 2008)
- Estimated Number of HIV-infected People (adults and children): 930,000 (UNAIDS 2008)
- Estimated Number of Children Orphaned by AIDS: 560,000 (UNAIDS 2008)

FY2011 Budget

Technical Area	Budget Code	FY2009 PF	FY2010	FY2011
Prevention of Mother to Child Transmission	01 - MTCT	-	12,006,294	12,443,104
Sexual Prevention	02 - HVAB	1,287,447	5,240,472	4,507,850
	03 - HVOP	795,566	3,510,009	3,602,620
Biomedical Prevention	04 - HMBL	-	1,140,000	1,240,000
	05 - HMIN	-	275,000	100,000
	07- CIRC	1,562,380	1,513,168	4,252,770
Adult Care and Treatment	08 - HBHC	769,230	2,556,604	2,515,892
	09 - HTXS	-	1,289,082	1,666,541
Pediatric Care and Treatment	10 - PDCS	-	1,024,695	674,126
	11 - PDTX	-	591,957	748,275
TB/HIV	12 - HVTB	1,240,000	912,997	1,738,336
Orphans and Vulnerable Children	13 - HKID	2,410,770	3,949,388	4,602,924
HIV Counseling and Testing	14 - HVCT	309,607	3,446,036	3,859,373



ARV Drugs	15 - HTXD	-	233,916	-
Laboratory Infrastructure	16 - HLAB	-	3,563,783	3,359,075
Strategic Information	17 - HVSI	200,000	3,838,252	3,037,252
Health Systems Strengthening	18 - OHSS	9,425,000	5,730,310	8,679,934
Management and Operations	19 - HVMO	-	4,453,037	7,971,928
TOTAL		18,000,000	55,275,000	65,000,000

Targets to Achieve 3-12-12 Goals:

Redacted

Sustainability and Country Ownership

In May of 2010 Malawi was selected as one of 8 GHI "plus" countries. The Malawi PF and PFIP were adopted under the GHI strategy pillar to "reduce HIV Infections". Both GHI and the PFIP support the national strategy for HIV/AIDS, the National Action Framework (NAF).

To address the Malawi HIV/AIDS epidemic, the goals of the PFIP, aligned to the NAF are to

- Reduce new HIV Infections in Malawi
- Improve the quality of treatment and care for Malawians impacted by HIV
- Mitigate the economic and psychosocial effects of HIV and AIDS and improve the quality of life for People Living with HIV (PLHIV), Orphans and Vulnerable Children (OVC) and other affected individuals and households
- Support the above listed goals in Prevention, Treatment and Care by providing discrete health systems strengthening support in five key areas – laboratory services, information systems, human resources, procurement and supply chain management and health finance

To promote sustainability and country ownership, USG Malawi has reconfigured its approach of assistance to the health sector to effectively speak as one U.S. government. The HIV Coordinating Team joined forces with PMI and other Child Survival in Health programs to form the Health Coordinating Team. We evaluated key elements of our portfolio and for FY2011, under PEPFAR have intensified support in the following areas:

- Service Delivery including: Support for the integrated PMTCT/ART program; Support for PMTCT, MCH and Family Planning; Support for Medical Male Circumcision; Integration of nutrition efforts under PEPFAR and GHI, with Feed the Future; Support for Infrastructure
- Support for Human Resources for Health including: Nurse Education; Training and Coordination by the MOH; Support for overall leadership, governance, management and accountability in the Health and HIV/AIDS sectors

PEPFAR's model for developing the HIV/AIDS PF and the PFIP provides a solid example of USG's

Custom Page 4 of 155 FACTS Info v3.8.3.30



existing commitment to encourage country ownership and invest in country-led plans. The PF and PFIP were based on the country's NAF and were developed with significant collaboration with GOM. USG under PEPFAR will continue with this model by planning GHI with the same commitment. The USG has strategically aligned its planning to address Malawi's health and development goals in an integrated manner through participation in the design of national plans such as the National Strategy Application and Round 10 proposals to the GFATM. Programs were designed in the FY2011 COP to align and fill gaps around the GFATM. PEPFAR also plans to capitalize on U.S. strengths in providing strategic technical assistance to improve local capacity and to contribute to the sustainability of GOM's plans and systems.

Integration across the USG

As a GHI-plus country, USG Malawi's PEPFAR program is intensely pursuing smart integration across various program and technical areas with the goal of breaking down siloed delivery of care to Malawian clients. As a U.S. mission, PEPFAR is working with PMI and other Child Survival and Health programs to more effectively help Malawi deliver quality care. Partnerships with Education, Democracy and Governance, Economic Growth (Feed the Future) and Millennium Challenge Cooperation under GHI are also new in 2011.

Integration is also being driven by strategic coordination across PEPFAR partners funded by various agencies. USAID and CDC partners delivering service delivery will partner with CDC partner Baobab to scale-up new modules in electronic data systems to expand beyond HIV clinics to include TB/HIV services, MCH, FP, STI and out-patient services in high patient burden hospitals. USAID MC partner will scale up voluntary medical male circumcision services, and provide technical assistance through training for DOD partner the MDF, and CDC partners CHAM and MOH. A flagship "integrated support for service delivery" new procurement will bundle services for HIV, Malaria, FP/RH, MNCH, Nutrition and TB, offering one-stop shopping across 5 zones, 15 districts and reaching over 8 million Malawians.

Across program areas, PEPFAR will work with PMI to expand services for 500 village health clinics in hard-to-reach areas where young children access anti-malaria drugs and treatment for other common childhood illnesses. The health team will continue its partnership with the education team to provide scholarships to vulnerable girls, as a lack of education is a primary risk factor for early acquisition of HIV. The education program provides scholarships for vulnerable school-age girls to attend primary school at which point PEPFAR continues scholarships into secondary school.

Within other USG programs, PEPFAR has formed partnerships with the new MCC compact developers to leverage the private energy sector to make health investments in infrastructure deliver. Feeder roads developed under Feed the Future, households supported by Food for Peace, health policies strengthened under Democracy and Governance, and high efficiency cookstoves purchased with U.S dollars are all merging under common coordination to make wise, smart and timely decisions to help improve all health outcomes.

Health Systems Strengthening and Human Resources for Health

As a non-focus country under PEPFAR I, USG Malawi was mandated to leverage the substantial GFATM investments in Malawi to assist the national response to HIV/AIDS. Limited bilateral funds were heavily

Custom Page 5 of 155 FACTS Info v3.8.3.30



invested into the health system which continues in our FY2011 planning. In the 2009–2010 health budget for Malawi, approximately 90 million dollars in health financing was provided by the GFATM. PEPFAR will directly support Global Fund coordination and implementation of HIV, TB, Malaria and Health Systems grants in the MOH through a senior management advisor previously funded under the GFATM liaison program. This person will not only facilitate coordination and implementation, but build capacity in the MOH to utilize and monitor these funds. PEPFAR continues to provide technical assistance to the national PMTCT, ART, Monitoring and Evaluation, TB, Counselling and Testing and Logistics programs, and will increase technical support to the MC program currently under development.

In PEPFAR II, implementing partners will provide technical assistance and direct support to the MOH and the Christian Health Association of Malawi (CHAM). In Malawi, CHAM provides 40 percent of public health services in rural and hard-to-reach areas of the country. Capacity support to CHAM through PEPFAR implementing partners will include pre-service training for Nurses and Nurse midwife technicians; faculty development for tutors and preceptors; HRH strengthening through identification and recruitment of tutors; clinical preceptors and students (including bursaries); faculty retention, curriculum revisions, in-service training for tutors including clinical and operations research; and, support for clinical teaching.

Also to further capacity building for health systems, PEPFAR will support reinforcement of the MOH training ability nationally, through the establishment of national training standards for integrated HIV care services including nutrition and other health priorities; accreditation of organizations and trainers; support to clinical mentoring and distance learning; strengthening of zonal health offices training and supervision capabilities; and implementation of the training system monitoring and reporting tool (TrainSMART) to accurately track data on training programs, trainers and trainees. PEPFAR will also support health informatics systems at the MOH Central Monitoring and Evaluation Division (CMED) and will fund the development of a database to regularly track health expenditure data.

In social welfare, PEPFAR will help in the development of a human resource information system (HRIS) for the Ministry of Gender, Child Development and Community Development (MOGCCD) to strengthen pre-service training for social work at Magomero Training College.

Through a new sector-wide award, PEPFAR will provide capacity building support to selected OVC subpartners transitioning from a partner whose award will end in 2011. Support to these organizations will:

- 1) Provide tailored capacity building on a range of organizational development issues, and provide technical support for program implementation
- 2) Assess capacity gaps in selected wider civil society groups beyond HIV/AIDS technical areas such as advocacy groups, networking bodies, professional and regulatory bodies. And based on this assessment, provide capacity building to position them to become leaders/drivers in their technical areas, and potentially USG primes

Another new sector-wide award will support coordination and leadership of national level advocacy. This award will facilitate GOM leadership and management across key areas of HR, M&E, strategic leadership and management, and supervision and policy development at central, district and zonal levels. It will further strengthen supervision systems and service training coordination at zonal and district levels. The award will help the GOM in its data systems development and utilization in HRIS and HMIS while providing capacity and technical support in the area of performance based financing.



Coordination with Other Donors and the Private Sector

The Global Fund is the largest donor to Malawi's health sector, having approved a total of \$540,867,090 and provided a total of \$342,782,281 in support for HIV/AIDS, TB and Malaria since 2003. Of this support, 80% is for HIV/AIDS prevention, care and treatment. In addition to the Global Fund, other major donors include the United Kingdom, Norway, Germany, the European Union, and the World Bank. The Global Fund has approved seven grants to Malawi, totaling \$615 million over ten years for AIDS and TB programs. The primary HIV/AIDS coordinating body is the National AIDS Commission (NAC). In addition to working with NAC, USG meets regularly with key officials of individual Ministries (Health, Gender, Finance, Defense, Education and the Office of the President and Cabinet) to ensure that USG assistance complements and supports the Malawian Government's plans for prevention, care and treatment. A strategy for coordination for PEPFAR support was central to successfully developing the PF and PFIP with the GOM and civil society.

In FY2011, PEPFAR will support the private sector for the first time, in the sustainable provision and use of quality family planning, HIV/AIDS, and other health information, products, and services. PEPFAR's implementing partner will conduct an assessment of private health facilities in selected urban areas of Malawi and the findings will be used to promote greater private sector involvement in improving health in Malawi. This will involve providing technical assistance to develop and strengthen private provider networks and franchises and access to the Development Credit Authority for expansion of private health clinics.

Programmatic Focus

PEPFAR funding for FY 2011 will focus on the following programmatic areas to achieve the 3-12-12 goals:

1. Prevention:

Several new initiatives in FY2011 are planned to integrate child survival activities, family planning, malaria, safe motherhood, nutrition and TB, with HIV. With the expansion of existing partner's activities and the development of a flagship "support for service delivery award", the following major deliverables are expected:

- 1) <u>Service Delivery</u>: Training, mentoring and supervision for the delivery of PMTCT services and support health facilities and districts in the roll out of the new integrated ART/PMTCT guidelines
- 2) Finance: Implement performance-based financing at targeted health facilities
- 3) <u>Male involvement</u>: Provide hygiene kits to encourage male involvement and post natal care follow up; renovate high volume antenatal care clinics and labor and delivery wards in support of the GHI focus area. Sensitize communities to create demand, improve adherence, increase male



- involvement and reduce stigma and discrimination. Promote couples counseling and testing and improve healthcare worker skill on couples counseling
- 4) <u>Innovative approaches</u>: Promote mobile phone and other communications technologies to improve health worker efficiency and effectiveness; strengthen MIP follow-up through community workers; assist DHOs and health facilities to adopt PQI approaches leverage cross-funding and MNCH funds and to ensure IYCF guidelines are revised in line with the WHO recommendations; strengthen provider initiated HTC
- 5) Improve quality: Provide sample transportation for EID and CD4;Train, mentor and supervise counselors and lab technicians; train health facility workers on injection safety; establish SOPs for injection safety; support DHO for monitoring and supervision
- 6) <u>Linkages</u>: Strengthen linkages between health services and HTC referral sources; assist DHOs and health facilities in EQA

Also in prevention, PEPFAR will support the integrated PMTCT/ART program at the central level by evaluating the process and impact of program integration and decentralization through expansion to MCH settings. This will assist MOH determine whether integration improves reduction in vertical transmission, increases follow-up of mother-infant pairs, and increases access to early infant diagnosis. The program will also develop and print guidelines for integrated ART/PMTCT, training curriculum and manuals, and procure equipment needed to support the national integrated ART/PMTCT program. The program will then conduct training in integrated HTC/TB/Pre-ART/ART/PMTCT training and complete minor refurbishments of ART/PMTCT sites.

Quality assurance will also involve conducting quarterly integrated supervision to service delivery sites. Lab partners will support MOH to develop, implement and monitor a comprehensive national HIV rapid testing QA program; scale up of a national sample transportation and referral mechanism for EID that will inform MOH for the national system required to support the new ART regimen.

Another major element of PMTCT services involves strengthening and expanding electronic data systems (EDS). Expansion of patient tracing activities to follow women in ANC sites and to track mother/infant pairs and pre-ART patients using EDS will further support PMTCT. Training, mentoring, and technical leadership will be supported to increase the quality and impact of PMTCT services in the following ways:

- 1) Scaling-up enrollment of HIV-positive pregnant women, children, and male partners in care and treatment
- 2) Optimizing utilization of lay counselors, community health workers, PLHIV, and support groups to improve care
- 3) Improving monitoring and evaluation of PMTCT programs

PEPFAR will assist the MOH in strengthening access to, and quality of, HTC in ANC settings by implementing a national registration of all HTC providers and expanding structured supervision and quality control. USG will further support integrating EID into HTC services.

In blood safety, the technical priorities to be addressed include national policy and guidelines, strengthening of youth groups to recruit and retain adult donors, appropriate screening of blood and blood products, and implementation of effective monitoring measures. The 2010 independent review of the

Custom Page 8 of 155 FACTS Info v3.8.3.30



HIV/AIDS national response identified a gap in support for adequate quality assured blood to reduce maternal deaths within government hospitals due to hemorrhage. PEPFAR will support these efforts by supporting the Malawi Blood Transfusion Service to: 1) the expansion of the pool of voluntary non remunerated blood donors so that Malawi can meet all of its demand through safe and reliable blood products and (2) developing a robust quality assurance system.

In behavior change, PEPFAR will support the GOM with interventions directed at: partner reduction; targeted condom social marketing in high-risk populations and for discordant couples; positive prevention and support for expansion of HTC especially couples counseling; timely initiation of ART particularly for pregnant women, and increasing access to male circumcision. A strong component of this strategic support is to continue building the capacity of indigenous organizations, both faith- and community-based, to take greater ownership of the HIV and AIDS response in Malawi.

The PFIP goal of reducing HIV transmission is being mitigated through increased national coverage for voluntary medical male circumcision (MC). Coordinated by the PEPFAR support to the MOH, PEPFAR implementing partners are expanding demand creation and MC services for 964,000 men in the next five years. PEPFAR will support training of MC providers, including procurement of equipment needed to conduct trainings, implementation of MC at sites including facility assessments and meetings with DHOs and ZHOs, and supervision of a new MC program including procurement of vehicles, support of supervisory staff, improved data management and reporting, and the development and provision of M&E tools.

In addition, Malawi will support a South-to-South approach with health staff attending MC Meetings regionally and internationally to learn about country experiences and disseminate Malawi's experiences more broadly. In order to achieve these gains in MC, activities will include provision of MC services through a network of private and public providers; innovative demand creation activities; linkages with HTC for counseling and referral; integration of MC referrals in MCH settings as part of male involvement, quality technical assistance and M&E. MC advocacy/communications will be integrated into all existing communication platforms (ie. radio, toolkits-Africa Transformation, Healthy Baby kit, Hope Kit, CAC, advocacy, etc.) as part of risk reduction strategies and to create demand as services become available.

Laslty in MC, PEPFAR will continue activities to develop strategic partnerships with the implementing partner for MC services for HIV prevention in Malawi including MC technical assistance activities to build capacity for social marketing of MC. This helps ensure that MC services in PPAs follow established best practice, development, production, and that private providers are included in the dissemination of evidence-based MC behavior change communications materials, including IEC materials and quality assurance activities, including development of protocols, QA checklists and other appropriate measures.

As a cross cutting education activity, PEPFAR will support the national association of HIV-positive teachers to use the Prevention with Positives Kit with their own support groups in each of the participating districts, to discuss positive living options. USG will fund the development of a weekly radio program specifically for teachers around increasing their own skills for HIV prevention as well as discussing how they might better address issues in the classroom. The program will also develop an integrated hotline for consumer information on all key HIV prevention issues: MCP, MC, PMTCT, discordancy.

As part of its integrated approach to prevention, in FY2011, PEPFAR will increase integration of services



through:

- 1) Expansion of screening and referrals for STIs and TB
- 2) Enhanced tracing activities to record TB treatment outcomes in TB/HIV co-infected clients
- 3) Support to increased blood safety activities under safe motherhood activities to improve maternal deaths caused by hemorrhage in district hospitals
- 4) Integration of primary and family centered care by distributing insecticide-treated nets and Waterguard for women and children; providing RH services including cervical cancer screening, family planning products procured by MOH (IUCD, Depo, pills, condoms) at HIV/TB integration sites

For Orphans and Vulnerable Children (OVC) and People Living with HIV (PLHIV), integrated HIV Effect Mitigation and Positive Action for Community Transformation will improve the wellbeing of 58,017 OVC and increase access to treatment and care for 41,505 PLHIV in nine districts of central and southern regions. Partners will implement four broad activities, including improving infant and young child feeding, protection of OVC from abuse and exploitation, and improving access to secondary school and productive assets.

Principal Partners: Baylor College of Medicine Children's Foundation Malawi (BCM-CFM), Banja La Mtsogolo (BLM), Christian Health Association of Malawi (CHAM), Dignitas International, Malawi Blood Transfusion Service (MBTS), Johns Hopkins University Center for Communication Programs (JHUCOM), Lighthouse, Lilongwe Medical Relief Trust Fund, Malawi AIDS Counseling Resource Organization (MACRO), Malawi Defense Force (MDF), Ministry of Health, Malawi, National AIDS Commission (NAC), Partners in Hope Trust, (PIH), Peace Corps, Population Services International (PSI), Project Concern International (PCI), University of Washington (ITECH)

2. Treatment, Care and Support:

Under the PFIP, PEPFAR will prioritize Care and Treatment support to Malawi through technical assistance in providing more efficacious, life-saving drug regimens. This will include meeting the expected four-fold expansion of treatment need due to changing WHO guidelines on treatment eligibility. A signature Care and Treatment intervention in Malawi is strengthened continuum of care efforts through a new pre-ART program to embolden the entire referral network and significantly reduce loss-to-follow-up (currently 79% of mother-infant pairs). Public-Private Partnerships will continue to be effectively utilized to scale-up the reach of limited PEPFAR and other public dollars in care activities.

Care and Treatment activities will include:

- 1) Increasing the use and quality of pre-ART management for People Living with HIV (PLHIV)
- 2) Strengthening laboratory support services for HIV diagnosis and management
- 3) Strengthening referrals and the continuum of care for PLHIV
- 4) Improving the capacity of the health care system to manage HIV and related diseases
- 5) Providing technical leadership within the MOH and MOGCCD
- 6) Enhancing zonal mentoring and capacity building



- 7) Scaling-up electronic health information systems
- 8) Supporting basic program evaluation
- 9) Providing directed support for pediatric HIV
- 10) Increasing support to military populations and families through the Malawi Defense Force
- 11) Expanding access to opioids
- 12) Strengthening sustainable food and nutrition programs
- 13) Expanding TB/HIV integrated services.

Under the PFIP, \$4,602,924 of PEPFAR funds are directed at OVC. PEPFAR resources will support the GOM to increase OVC access to essential care, support and protection services; improve the quality of OVC services; strengthen the capacity of local institutions to provide OVC and PLHIV services; improve the policy and legal environment for the protection of OVC and PLHIV; and, promote evidence-based strategic planning. Working through local NGOs and CBOs, PEPFAR will support the establishment of a system to assure continuation of existing OVC activities implemented by sub grantees. This support will include scholarships for OVC in secondary schools.

PEPFAR Partners will also launch extensive care services for 200 OVC including support to PLHIV as well as positive prevention activities. A model of "one-stop shopping" service providers will include: ART care; OI treatment; sexual and reproductive health care services including STI treatment and family planning services; mental health and psychosocial support; and as well as general medical care including malaria, TB and other illnesses.

Other support provided through this launch include: mentoring and roll-out of psychosocial services; promotion of income generating projects for girls; addressing gender in adolescent services including women's rights and issues of violence against women, as well as male gender norms and gender roles; operational research regarding disclosure of HIV status to children and adolescents living with HIV. The later is an attempt to focus on the disclosure experience of adolescents, as well as capacity building, and sensitivities of health care workers and guardians around disclosure issues.

Support to major indigenous partners has been a major investment of PEPFAR Malawi. As a major partner agreement concludes, PEPFAR will ensure that there is no interruption in services for OVC beneficiaries of this partner-supported program. The sub-grantees who previously supported OVCs through payment of school fees, provision of school uniforms and materials as well as feeding programs, will be absorbed under other major PEPFAR OVC partners. The organizations will receive oversight and a small level of organizational capacity development, since the intense support received over the past five years has prepared these NGOs to function both organizationally and technically in the fight against HIV.

To determine the level of capacity and sustainability of these sub grantees, an external evaluation will be carried out in early 2011. A study will be undertaken to determine how many organizations are able to mobilize additional resources and provide leadership in their technical areas, as well identify gaps still existing within capacity building in Malawi and how USG may support the local response to HIV further.

With a focus on the young population in Malawi, PEPFAR will support:



- 1) Child Level: Improved quality of Early Childhood Development (ECD) and PSS (Psychosocial Support) programs that protect and promote children's cognitive, social, emotional, and physical development Orientation Children's Clubs (children); Materials for Children Corners
- 2) Parenting and Community Level: Parenting curriculum TOT training of key community resources persons (including CBCC caregivers); Community PSS awareness workshops; Community PSS skills workshops; PSS awareness workshops (parents/guardians) Orientation children's clubs (adult monitors)
- 3) <u>District and Government Level:</u> District level facilitator's training; Strengthened local, regional, national, and/or global policies, capacities, and resources ECD and PSS; District quality assurance monitoring; Joint supervisory visits will all be conducted.

Principal Care Partners: Baylor College of Medicine Children's Foundation Malawi (BCM-CFM), Academy for Educational Development(AED), African Palliative Care Association (APCA), Catholic Relief Services (CRS), CHAM, Dignitas International, Feed the Children, Howard University, Johns Hopkins University Center for Communication Programs (JHCOM), Lighthouse Trust, Malawi Defense Force (MDF), Ministry of Health, Malawi, PACT Malawi, Partners in Hope Trust, Peace Corps, Project Concern International, Save the Children (USA), University of Washington.

Principal Treatment Partners: Dignitas International, Howard University, Lighthouse Trust, Ministry of Health, Malawi, Partners in Hope Trust, University of Malawi - College of Medicine/Lab Consortium.

3. Woman and Girl-Centered Approaches:

Implementing a women, girls and gender equality approach is critical to sustaining the gains made in PEPFAR under GHI. GOM has prioritized mainstreaming of gender issues across all sectors; the GHI guidance provides assistance for USG implementers to ensure a focus on issues such as equitable access, empowerment and inclusion of women and girls, and engagement of men and boys. PEPFAR will prioritize Gender analysis in all USG project design, and a dissemination meeting with stakeholders on the GHI supplemental guidance on women, girls and gender equality principle will also take place.

In FY2011, PEPFAR will support scale-up of new WHO ART/PMTCT and infant feeding programs by GOM; expand women's access to income and productive resources by linking PMTCT services to the Title II Food for Peace program; advance the integration of HIV services with ANC and FP/RH services; strengthen GBV screening in HIV testing and counseling (HTC) sessions and client referrals to Victim Support Units and Post-exposure Prophylaxis (PEP) services at community and district level; address the lack of FP options for young women by increasing access to FP commodities and quality FP counseling through youth friendly HIV health services; prioritize changing harmful gender-based norms and practices in social and behavior change interventions; improve the quality and increase early uptake of ANC; strengthen referrals and linkages to ensure mother and infant pair follow-up; and reduce maternal and neonatal mortality through improvements to infrastructure and to quality of care.

4. Other Programs:

In addition to its support of the Global Fund, as a non-focus country, PEPFAR Malawi has leveraged its limited resources on strengthening the Malawi health care delivery systems as an effective tool to promote country ownership and sustainability of the HIV and AIDS response. Primary health systems



strengthening activities include the following:

- 1) Support to the GOM to increase the number of healthcare and social welfare workers through prioritizing human resources for health
- Strengthening health financing through assessments and utilization of National Health Account data to program efficiently in a resource-constrained environment, and training of local technicians to have this capability
- 3) Providing integrated support for commodities and procurement. PEPFAR will partner with PMI, MCH and POP to refocus efforts on technical assistance to the MOH through the provision of two senior advisors to assist the Ministry to reform Central Medical Stores and strengthen drug management systems and accountability throughout the public sector supply chain. The benchmarking of MOH performance will ensure that US continued assistance in support of the supply chain in Malawi is performance-based and driven by objectively and mutually designed indicators (PEPFAR, PMI, POP, MCH)
- 4) Scaling-up Health Management Information Systems (HMIS) to provide real-time data for patient care, monitoring and evaluation and resource allocation
- 5) Enhancing lab services for the health care delivery system including HIV-related services
- 6) Integrating HIV prevention, care and treatment services with other health and development programs including FP, TB, food and nutrition, education and gender. Gender has been prioritized under the PFIP including the need to examine the gender imbalance at the level of local control of AIDS financing
- 7) Partnerships with the significantly larger Feed the Future program to support GOM nutrition policy, tools and service delivery

Linking with other stakeholders including the government, PEPFAR partners will support training to ensure that GBV screening is an integral part of the referral process including GBV screening during HTC and facilitating referrals to existing victim support services at the community level. This will include development of appropriate modules to be used in all such trainings. This is an opportunity to expand GBV and PEP awareness and knowledge amongst HIV counselors in Malawi and strengthen referrals for GBV cases to appropriate support services including PEP for victims of sexual assault.

A new flagship program under DOD will be launched to expand health service provision in the Malawi Defense Force (MDF) and increase coverage for the civilians they serve (70 percent of clients seen are civilians). Increased resources will scale up comprehensive health care services for maternal and child health and child survival (PMTCT, safe blood, nutrition support, malaria screening); Expansion of prevention with positive for HIV-positive men with limited options for care; Scale up of integrated TB and HIV services and including door-to-door HTC; Infrastructure support to ANC sites, MDF labs and for data management and expanding use of electronic data systems to better manage HIV and STI information.

Peace Corps will strategically place Response Volunteers (PCRVs) in District Assemblies and CBOs to enhance their capacity to effectively manage prevention, treatment and care services within the districts. Peace Corps Volunteers are human resources at the grass-roots level who will increase knowledge of disease transmission, prevention and treatment; promote behavior, social and organizational change;



build capacity of community members, health workers and grass-roots organizations; and strengthen linkages between communities, organizations and health facilities in support of PEPFAR and GHI goals.

In expanding strategic information knowledge, the National AIDS Commission (NAC) will conduct the next Behavioral Surveillance Survey (BSS) in FY2011. PEPFAR will provide technical assistance to the NAC and the National Statistics Office in the design and implementation of the BSS. PEPFAR will also support SABERS, the seroprevalence and behavioral survey in the MDF. The MSPA, a nationwide facility-based survey designed to collect information on the availability and quality of health services, including reproductive health, maternal and child health care, infectious diseases (malaria and TB) and HIV/AIDS services provided to Malawian men, women and children will be conducted. The survey will include all public, private and not-for-profit health facilities throughout the country except mobile or outreach service provision outlets.

Principal Partners:

Academy for Educational Development (AED), Abt Associates, Baobab Health Partnership, CHAM, Dignitas International, Global AIDS Interfaith Alliance, Howard University, IntraHealth International Inc., Johns Hopkins University Center for Communication Programs, John Snow International (JSI), Lighthouse Trust, Macro International, Ministry of Health Malawi, National AIDS Commission (NAC), Partners in Hope Trust, Peace Corps, Project Concern International;

Baylor College of Medicine Children's Foundation Malawi (BCM-CFM), Banja La Mtsogolo (BLM), Christian Health Association of Malawi (CHAM), Dignitas International, Malawi Blood Transfusion Service (MBTS), Johns Hopkins University Center for Communication Programs (JHU COM), Lighthouse, Lilongwe Medical Relief Trust Fund, Malawi AIDS Counseling Resource Organization (MACRO), Malawi Defense Force (MDF), Ministry of Health, Malawi, National AIDS Commission (NAC), Pact Malawi, Partners in Hope Trust, (PIH), Peace Corps, Population Services International (PSI), Project Concern International (PCI), University of Washington (ITECH) University of Malawi, College of Medicine.

New Procurements

Redacted.

<u>Program Contact:</u> PEPFAR Country Coordinator, Mamadi Yilla

<u>Time Frame:</u> FY 2011 – FY 2012

Updates to PFIP Policy

Policy Areas	Policies/Plans/Guidelines/ Strategies	Expected Output	Year 1 Progress
1. Human Resources for	P ¹ 1.1 MOH – Current Human Resources for Health (HRH) Strategic		P1.1 – Evaluation of POW I and EHRP

¹ P = Policy; see separate Monitoring and Evaluation plan



		T.	i
Health	Plan (2007-2011) focuses on -Training and staff development; Improving recruitment; Developing mechanisms for deployment; Improving retention; Performance management & career dev; HR policy and systems dev.; Communication and information sharing; Improving tools for research and dev.; Management leadership development; Coordination and harmonization of HRH mechanisms; MOH HRH Strategy for '07-'11, reviewed and updated; MOH SWAp POW – Pillar 1: Human Resources reviewed and updated P1.2 MOGCCD: Human Resource Information System software deployed and operational – for effective staff recruitment, deployment and retention P1.3 MOGCCD: Upgrade of Magomero college to a social welfare diploma/degree awarding institution P1.4 MOGCCD - implement restructuring and functional review of staffing and career path structures; MOGCCD HRH policy and Institutional review recommendations, supported and implemented respectively P1.5 MOLGRD - Ministry of Local Government and Rural Development Decentralization policy reviewed	be developed for SWAp II in 2011; opportunity for HR contribution from HIV sector to be included in MOH national health plan; MOGCCD - Regionally and internationally recognized social welfare diploma/degree program at Magomero college MOLGRD - Make operational and then implement decentralization policy in areas were currently lacking	completed. POW II development in progress; HRH strategy revision/development to follow. Final POW II draft expected by 31 January 2011 P1.2 MOGCCD: Assessment of MGCCD and DHRMD HRIS completed. P1.3MOGCCD: Draft social welfare diploma and degree curriculum completed, and reviewed by stakeholders, now being finalized. P1.4 MOGCCD: ongoing
2. Gender Issues	P2.1 MOH: Implementation of recommended actions for integration of gender aspects in HIV and AIDS services in the health sector in study commissioned by the German Development Cooperation ² P2.2 MOGCCD /OPC: Gender Equity Act and the Domestic Violence Act P2.3 MOH: Male circumcision guidelines and policy for safe male medical circumcision as part of male reproductive health and HIV prevention MOH - Promotion of male circumcision beyond male reproductive services needed; WHO to lead stakeholder consultation inclusive of evidence-based presentation from SADC countries (Lesotho/Swaziland)	MOGCCD- Improved gender coordination at the national level, Gender policies translated into programs; advocacy for gender oriented programming; Promotion of gender sensitivity in district implementation plans MOH – MC	P2.2 MOGCCD/OPC: Gender Equity Bill — being drafted Domestic Violence Amendment Bill — being drafted P2.3: Standard Operating Procedures for MC have been developed and MC Communication strategy is being developed

 $^{^{2}}$ July 2009 Gender Report – German Development Cooperation



		n alia.	1
		policy development progresses after policy decision makers assess evidence	
3. Children's Issues	 P3.1 MOGCCD: Revise and implement the National OVC plan of action (NPA), revise and implement the Monitoring and Evaluation (M&E) framework and system to monitor the National Plan of Action (NPA), and strengthen the capacity of GOM, communities and families to care, support and protect OVCMOGCCD – finalize and roll out implementation of National Quality improvement standards for OVC programs P3.2 MOH: National plan for CD4 and infant diagnosis and treatment scale-up P3.3 OPC/MOGCCD: Advocate for passage of the child protection and justice bill in Parliament as well as the wills and inheritance acts 	MOGCCD - Passage of child protection and justice bill; Implementation MOGCCD- National QI standards for OVC programs used nationwide	P.3.1 NPA 2010 – 2011 developed; National OVC QI standards being piloted. P3.3 MOGCCD Child Care, Protection and Justice Act passed in July 2010; Wills and Inheritance bill. Stakeholder consultations completed. Draft Report and bill to be ready by Dec 2010
4. Uptake of Counseling and Testing	P4.1 MOH: HTC policy reform changing "anonymous" reporting to "confidential" reporting in order to permit a name-based referral system at all HTC sites to commence	MOH - provider- initiated testing and counseling (PITC) policy in place; Steps for implementation begun – actions to strengthen referrals;	<u>Progressing</u>
5. Increase use and quality of pre- ART program	P5.1 MOH: ART guidelines continuously updated to reflect WHO recommendations and ongoing operations research on ART regimens in Malawi P5.2 MOH: Revise the national community home-based care policy and guidelines; emphasis on early referral and retention in care through an effective pre-ART program; stronger linkages between services for pre-ART community and facility-based, including TB services P5.3 MOH: Develop, standardize, and implement an essential care package for facility- and community-based care, which includes regular CD4 testing; provision of Cotrimoxazole;	MOH – to convene taskforce of experts by 2010 to advice GOM on the ART regimens to be pursued by Malawi including pediatric regimens MOH – pre-ART program and basic care package developed and implemented	P5.1 MOH: Guideline revision and program planning to implement upgraded ART regimen and new integrated ART/PMTCT program for pediatric and adult patients consistent with 2009 WHO guidelines are in final stages of drafting for implementation by mid-2011 P5.2 MOH: is in the



	tuberculosis screening and management; integration and scale up of a comprehensive positive prevention package into care and treatment programs as standard of care • P5.4 MOH: to review guidelines on blood safety that are expected to promote voluntary donation and training of HCWs on rational use of blood and blood products. • P5.5 MOH: Name-based confidential referrals allowed to enable electronic data systems (EDS) to capture pre-ART patients; Policy to support Unique Patient Identifiers; Revised National Health Information System Policy to support open source data systems	nationwide; MOH - Electronic data systems (EDS) to capture pre-ART patients; strengthened referral system (tools and service directories) coordinated by MOH and developed with partner support.	process of being integrated with the new PMTCT/ART integrated program; National community home based care policy and guidelines revised to include pre-ART. P5.4 MOH: New national blood safety guidelines being finalized; training of HCWs in blood safety being delivered at hospitals nationally and work in progress to integrate completely in preservice curricula.
			P5.5 MOH: EDS to capture pre-ART patients will be developed and package is finalized. Strenghtening referral tools in progress
6. Access to Quality Affordable Medications	 P6.1 MOH: Extend lab quality assurance strategy implementation as a component of the national strategic plan for laboratory support to the national response P6.2 MOH: Establish leadership to expand and increase the quality of laboratory services, including development of a new national laboratory strategy P6.3 MOH: CMS trust established; New recommendations for ART and PMTCT treatment guidelines currently being evaluated in country P6.4 MOH: Support advocacy and policy reform efforts to increase access to opioids 	MOH - New lab strategy completed June 2009 MOH - Inform stakeholders on plans to change the treatment guidelines for ART and PMTCT programs MOH - Inform stakeholders on progress in establishing the CMS board	P6.1 MOH: Extensive progress has been made P6.2 MOH: National strategy has been finalized, dissemination by end of November 2010; laboratory support TA to be put in place at MOH P.6.3 – see update for 5.1 CMS Trust not established. Recommendation of names of Trustees for approval with OPC



			P6.4 in need of attention
7. Stigma and Discrimination	P7.1 DNHA (OPC): HIV and AIDS legislation including laws on stigma and discrimination before parliament	OPC - HIV and AIDS law is passed	Bill has been tabled which specific concerns around Education and information; Disclosure obligations and "duty to warn"; HIV testing issues; Criminalization of HIV transmission; and Gender issues are addressed — Parliamentary committee under advisement and bill may or may not be revised
8. Strengthened multi-sectoral response	 P8.1 NAC/UNAIDS: National AIDS Spending Accounts (NASA)) developed and utilized. P1.5 MOLGRD Improved formulas for resources allocation to districts based upon National Health Account (NHA), benefits incidence analysis, and private sector assessment P8.2 OPC: Policy reforms needed to strengthen linkages with other health programs as well as other development efforts such as food & nutrition, education, and economic growth P8.3 MOH: Using multi-sectoral support to strengthen the procurement and supply chain systems in Malawi ensuring sustainable access to care and treatment in the public and private sector P8.4 MOH: Transparency and Good Governance of Investments in the supply chain P.8.5: MOL: Workplace settings: National HIV/AIDS Workplace policy addressing workplace issues in the formal and informal sectors under draft; to be reviewed by the Tripartite Labor Advisory Council (TLAC) followed by Meeting of Principal Secretaries 	NAC - NASA's are in place by the annual reviews of 2010 MOH - PSM plan developed by the MOH assigned to a sub-group and update reported at biannual Health review in 03/2010. MOH - Should consider use the GFATM central coordinated procurement assistance (VPP) while incountry reform processes develop MOL - Ministry of Labor to take lead in ensuring the HIV/AIDS workplace policy	A second NASA report is available and will be finalized before the end of the calendar year (On line) MOL is yet to submit the policy to Cabinet (No progress)



		is submitted to the Cabinet.	
9. Food and Nutrition	P.9.1 DNHA (OPC): National Nutrition policy and Strategic Plan Developed; Nutrition Act Developed	DNHA – The National Nutrition Policy and Strategic Plan was launched with GOM providing \$2M/year; The Nutrition Act is now in development – Progress reported at annual reviews	

Population and HIV Statistics

Population and HIV				Additional Sources		
Statistics	Value	Year	Source	Value	Year	Source
Adults 15+ living	800,000	2009	UNAIDS Report			
with HIV			on the global			
			AIDS Epidemic			
			2010			
Adults 15-49 HIV	11	2009	UNAIDS Report			
Prevalence Rate			on the global			
			AIDS Epidemic			
			2010			
Children 0-14 living	120,000	2009	UNAIDS Report			
with HIV			on the global			
			AIDS Epidemic			
			2010			
Deaths due to	51,000	2009	UNAIDS Report			
HIV/AIDS			on the global			
			AIDS Epidemic			
			2010			
Estimated new HIV						
infections among						
adults						
Estimated new HIV						



infections among					
adults and children					
Estimated number of	573,000	2007	UNICEF State of		
pregnant women in	0.0,000	2001	the World's		
the last 12 months			Children 2009.		
ano last 12 monaris			Used "Annual		
			number of births		
			(thousands) as a		
			proxy for number		
			of pregnant		
			women.		
Estimated number of	57,000	2009	Towards		
pregnant women	31,000		Universal		
living with HIV			Access. Scaling		
needing ART for			up priority		
PMTCT			HIV/AIDS		
			Intervention in		
			the health sector.		
			Progress Report,		
			2010.		
Number of people	920,000	2009	UNAIDS Report		
living with HIV/AIDS			on the global		
			AIDS Epidemic		
			2010		
Orphans 0-17 due to	650,000	2009	UNAIDS Report		
HIV/AIDS			on the global		
			AIDS Epidemic		
			2010		
The estimated	440,000	2009	Towards		
number of adults			Universal		
and children with			Access. Scaling		
advanced HIV			up priority		
infection (in need of			HIV/AIDS		
ART)			Intervention in		
			the health sector.		
			Progress Report,		
			2010.		



Women 15+ living	470,000	2009	UNAIDS Report		
with HIV			on the global		
			AIDS Epidemic		
			2010		

Partnership Framework (PF)/Strategy - Goals and Objectives

(No data provided.)

Engagement with Global Fund, Multilateral Organizations, and Host Government Agencies

Redacted

Public-Private Partnership(s)

Partnership	Related Mechanism	Private-Sector Partner(s)	PEPFAR USD Planned Funds	Private-Sector USD Planned Funds	PPP Description
Building the nursing workforce and nurse training capacity in Malawi	12119:GAIA/H RH/GHAI	Global AIDS Interfaith Alliance	400,000	400,000	PEPFAR Malawi is in a process of developing a PPP agreement with the Global faith Interfaith Alliance (GAIA), an NGO providing scholarships for nurses to go through Kamuzu College of Nursing, a constituent college of the University of Malawi for a four year nursing degree program. Each



	1			
				funded scholar
				agrees to a four
				year bonding
				contract to work with
				the Ministry of
				Health in Malawi.
				GAIA will support 40
				students over a
				period of 5 years.
				This activity will
				contribute
				significantly to the
				numbers of nurses
				that Malawi will
				produce and retain
				by the end of the
				five year
				Partnership
				Framework. The
				program will also
				support 4 Masters
				students in nursing
				and these will
				contribute to
				improving the
				faculty of the
				nursing college.
				Standard Bank
				Group Limited, of
				which Standard
				Bank is a
Capacity Building	O(a a la a l D a a l			subsidiary, is
Initiative Pilot	Standard Bank	U	0	currently the largest
				African Banking
				group in terms of
				assets, geographic
				spread and market



		capitalization. The
		group operates in
		18 African countries
		and over 21
		countries globally.
		The group is
		committed to
		making a real
		difference in
		Southern Africa by
		being relevant to the
		societies in which it
		operates. In this
		partnership with
		USAID/Malawi,
		Standard Bank
		Malawi has
		committed to
		support and
		strengthen the Local
		Assembly finance
		management
		systems through
		capacity building in
		finance
		management and
		reporting as one
		way of contributing
		to the development
		of Malawi. Large
		amounts of
		HIV/AIDS funds are
		channeled through
		Local Assemblies
		yearly and the
		capacity of these
		Local Assemblies to



timely manage and absorb these funds is crucial for the progress of the HIV/AIDS response in Malawi. Standard Bank will place experienced finance management consultants in 4 pilot sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial Support (C-SEP)			
is crucial for the progress of the HIV/AIDS response in Malawi. Standard Bank will place experienced finance management consultants in 4 pilot sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (C-SEP) 12120:C-SEP			
progress of the HIV/AIDS response in Malawi. Standard Bank will place experienced finance management consultants in 4 pilot sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (FSS). C-			
HIV/AIDS response in Malawi. Standard Bank will place experienced finance management consultants in 4 pilot sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (FCS). C-			
in Malawi. Standard Bank will place experienced finance management consultants in 4 pilot sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (FCS). C-			progress of the
Bank will place experienced finance management consultants in 4 pilot sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			HIV/AIDS response
experienced finance management consultants in 4 pilot sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			in Malawi. Standard
management consultants in 4 pilot sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			Bank will place
consultants in 4 pilot sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (C-SEP) 12120:C-SEP			experienced finance
sites for a period of 6 months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their for Early Childhood Development & Psychosocial Support (C-SEP) 12120:C-SEP separation in quality early childhood development (ECD) and psychosocial support (PSS). C-			management
Capacity support for Early Childhood Development & Psychosocial Support (C-SEP) G months to transfer skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			consultants in 4 pilot
skills. USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their for Early Childhood Development & Psychosocial Support (C-SEP) 12120:C-SEP			sites for a period of
USAID/Malawi through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their for Early Childhood Development & 12120:C-SEP Strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			6 months to transfer
through PEPFAR will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their for Early Childhood Development & Psychosocial Support (C-SEP) 12120:C-SEP			skills.
will not match funds in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (C-SEP) will not match funds in this initiative, but will utilize its experience in development will oprove to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			USAID/Malawi
in this initiative, but will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (C-SEP) in this initiative, but will utilize its experience in development will utilize its experience in developmented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			through PEPFAR
will utilize its experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their for Early Childhood Development & Psychosocial Support (C-SEP) 12120:C-SEP			will not match funds
experience in development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			in this initiative, but
development work to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their for Early Childhood Development & 12120:C-SEP Strengthening participation in quality early childhood development (C-SEP) development & participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			will utilize its
to provide technical support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by Strengthening Psychosocial Support (C-SEP) 12120:C-SEP 12120:C-SEP			experience in
support. C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (C-SEP) Support (C-SEP) Support (C-SEP)			development work
C-SEP is a three year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			to provide technical
year co-ag implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			support.
implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			C-SEP is a three
implemented by Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			year co-ag
Save the Children. Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			
Capacity support for Early Childhood Development & 12120:C-SEP Psychosocial Support (C-SEP) Its goal is to help OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			
Capacity support for Early Childhood Development & 12120:C-SEP Psychosocial Support (C-SEP) Support (C-SEP) OVC realize their full potential by strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			
for Early Childhood Development & 12120:C-SEP Psychosocial Support (C-SEP) Support (C-SEP) Grain and psychosocial support (PSS). C-	Capacity support		
Development & 12120:C-SEP Psychosocial Support (C-SEP) Support (C-SEP) Strengthening participation in quality early childhood development (ECD) and psychosocial support (PSS). C-			
Psychosocial Support (C-SEP) participation in quality early childhood development (ECD) and psychosocial support (PSS). C-		12120:C-SEP	
Support (C-SEP) quality early childhood development (ECD) and psychosocial support (PSS). C-			
childhood development (ECD) and psychosocial support (PSS). C-	-		
development (ECD) and psychosocial support (PSS). C-	, , , , , , , , , , , , , , , , , , , ,		
and psychosocial support (PSS). C-			
support (PSS). C-			
			SEP will accomplish



		Alada ara al larr
		this goal by
		increasing access to
		and quality of ECD
		and PSS programs;
		improving
		household and
		community capacity
		to promote ECD and
		PSS; and
		strengthening
		policies and
		capacities in ECD
		and PSS. These
		activities support the
		"Impact Mitigation"
		goal of the Malawi
		Partnership
		Framework. C-SEP
		is being
		implemented in 3
		districts (Blantyre,
		Chiradzulu and
		Zomba), and works
		with the Ministries of
		Gender, Children
		and Community
		Development
		(MoGCCD), Health,
		and Education at
		the district level. In
		addition to the
		ministries, C-SEP
		works with the ECD
		network and
		community
		structures to ensure
		government-led



					collaboration and
					networking to
					identify
					opportunities for
					leveraging
					community
					resources to support
					the delivery of ECD
					and PSS.
					The Project
					capitalizes on
					existing networks,
					infrastructure and
					acquired expertise
			2,438,000		and skills of
	12107:EQUIP				partners and will
					achieve the goal
					through three
					complementary
				2,438,000	objectives:
					Strengthening the
Extending quality					continuum of care
Extending quality		Partners in			between different
improvement for HIV/AIDS in Malawi		Норе			health services and
HIV/AIDS III Maiawi					between facilities
					and communities.
					Working with CHAM
					and government
					clinics, the project
					will develop a model
					for care that
					involves integration
					of services within
					the same clinic or
					strong linkages
					among different
					clinics when



possible; Developing Zona mentoring teams Individuals in CH hospitals will be trained in clinical and program management to ultimately serve a mentors at other sites in their regions; Creating consortium of sit for operational research to inform the other 2 objectives and					
Developing Zona mentoring teams Individuals in CH hospitals will be trained in clinical and program management to ultimately serve a mentors at other sites in their regions; Creating consortium of sit for operational research to inform the other 2 objectives and					integration is not
mentoring teams Individuals in CH hospitals will be trained in clinical and program management to ultimately serve a mentors at other sites in their regions; Creating consortium of site for operational research to inform the other 2 objectives and					possible;
Individuals in CH hospitals will be trained in clinical and program management to ultimately serve a mentors at other sites in their regions; Creating consortium of sit for operational research to inform the other 2 objectives and					Developing Zonal
hospitals will be trained in clinical and program management to ultimately serve a mentors at other sites in their regions; Creating consortium of site for operational research to inform the other 2 objectives and					mentoring teams-
trained in clinical and program management to ultimately serve a mentors at other sites in their regions; Creating consortium of sit for operational research to inform the other 2 objectives and					Individuals in CHAM
and program management to ultimately serve a mentors at other sites in their regions; Creating consortium of sit for operational research to infort the other 2 objectives and					hospitals will be
management to ultimately serve a mentors at other sites in their regions; Creating consortium of sit for operational research to inform the other 2 objectives and					trained in clinical
ultimately serve a mentors at other sites in their regions; Creating consortium of sit for operational research to inform the other 2 objectives and					and program
mentors at other sites in their regions; Creating consortium of site for operational research to inform the other 2 objectives and					management to
sites in their regions; Creating consortium of site for operational research to inform the other 2 objectives and					ultimately serve as
regions; Creating consortium of sit for operational research to inform the other 2 objectives and					mentors at other
consortium of site for operational research to inform the other 2 objectives and					sites in their
for operational research to inform the other 2 objectives and					regions; Creating a
research to inform the other 2 objectives and					consortium of sites
the other 2 objectives and					for operational
objectives and					research to inform
					the other 2
improve the qual					objectives and
					improve the quality
of HIV care and					of HIV care and
training - This wi					training - This will
involve operation					involve operational
research to address					research to address
critical questions					critical questions of
priority to inform					priority to inform the
national ART					national ART
program.					program.
USAID Malawi					USAID Malawi
embarked on a n					embarked on a new
partnership with					partnership with
Increased Project Peanut	ncreased				Project Peanut
production capacity Project Peanut Butter in December	oroduction capacity	Project Peanut			Butter in December
for ready-to-use 0 0 2008, a locally-	or ready-to-use	Butter	U	U	2008, a locally-
foods in Malawi based company	oods in Malawi				based company that
produces Ready					produces Ready to
Use Therapeutic					Use Therapeutic
Food (RUTF) cal					Food (RUTF) called



			plumpy nut. The
			l l
i			GDA grant supports
			an alliance between
			Project Peanut
			Butter, Nutriset,
			Hickey Family
			Foundation and
			Arnow. The funding
			was used to
			purchase larger-
			scale machinery
			that will increase the
			rate of production
			from roughly 500
			tons/year to 1200
			tons/year, and to
			purchase a foil-seal
			sachet packaging
			machine with
			nitrogen. Plumpy-
			nut, locally known
			as chiponde, is used
			to treat severe acute
			malnutrition in
			children. It is a
			mixture of peanut
			butter, oil, sugar,
			milk powder and
			vitamins and
			minerals in a
			precooked paste.
			The GDA supports
			research into new
			and/or improved
			recipes for treating
			severe and
I			Severe and



Integrated (HIV Effect) Mitigation and Positive Action for Community Transformation (IMPACT)	14249:Integrat ed (HIV effect) Mitigation and Positive Action for Community Transformation (IMPACT)			malnutrition in children and adults who are HIV-positive. The Integrated HIV Effect Mitigation and Positive Action for Community Transformation (IMPACT) project is expected to improve the wellbeing of 58,017 OVC and 41,505 people living with HIV (PLHIV) in nine districts in central and southern Malawi. Catholic Relief Services brings private sector, information technology and faith-based partners to the Title II-supported Wellness and Agriculture for Life Advancement (WALA) consortium. This alliance mobilizes expertise, cash and in-kind resources to expand access to care and treatment services OVC and PLHIV. IMPACT's implements through
--	---	--	--	--



			existing structures
		t	hus enhancing
			sustainability,
			country ownership,
			and active
		ļ ķ	participation of
		l k	oeneficiaries.
			GOM's heavy
		į	nvolvement in the
			orogram at all levels
		l l	nas provided an
			optimal environment
		f	or implementation
			and coordination of
		s	services with
			various departments
			and other programs.
			Tiwalere is a five
			ear project that
		t	akes a
			comprehensive
			approach to food
			security, nutrition
			education, income
			generation, and
Malawi Tiwalere			water and sanitation
Orphans and	12126:Feed/O	i	mprovement.
Vulnerable Children	VC/GHAI		Tiwalere's goal is to
(OVC) Project			ensure improved
			well-being of OVCs
		i	n 15 districts,
		t	argeting 73,051
			children and 39,261
			nouseholds. This
			goal will be
		l la	achieved through
		t	hree strategic



					objectives which
					objectives which
					support the impact
					impact mitigation
					goal of the PFIP.
					The first objective is
					to improve the
					health and nutrition
					status of children
					aged 0-59 months.
					This is done through
					activities for children
					attending
					community-based
					child care centers
					and through
					nutrition education
					to parents and
					caregivers. The
					second objective is
					sustainable
					improvements to
					food security by
					promoting new
					farming methods
					and improved crop
					varieties. The third
					objective is to
					enhance the
					capacity of
					households caring
					for OVC.
					Banja La Mtsogolo
					(BLM) is a national
Male Circumcison	12118:BLM	Banja La	1,750,000	1,750,000	family planning (FP)
	CIRC GHAI	Mtsogolo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and sexual and
					reproductive health
					reproductive nearth



	I.		
			(SRH) organization
			with static clinics in
			22 of 28 districts in
			all three regions of
			Malawi. Under the
			Partnership
			Framework (PF)
			negotiated between
			PEPFAR and the
			Government of
			Malawi (GOM), BLM
			will target
			uncircumcised boys
			and HIV negative
			men between the
			ages of 10 and 29.
			BLM is committed to
			increased access to
			safe, voluntary male
			circumcision (MC)
			for 52,000 people;
			increased
			engagement of men
			in pursuing sexual
			and reproductive
			health for
			themselves and
			their partners, with
			an emphasis on HIV
			prevention and
			integration of MC
			service provision
			into ANC, PMTCT,
			and neonatal care
			programs in
			collaboration with
			MOH. BLM will train



				100 private and MOH providers to provide a minimum package of MC in BLM and MOH facilities. BLM's experience implementing MC programs for HIV prevention in Malawi, and experience gained from similar programs across the MSI Global Partnership, will allow it to feed into policy dialogue and support the creation of the GOM MC policy.
NEPI - Building the nursing workforce and nurse training capacity in Malawi	Columbia University, Clinton Health Access Initiative, ELMA Foundation, IntraHealth/Ca pacityPlus	1,500,000	0	To support innovative strategies and promising practices that will inform curricula development, faculty preparation and strategies for faculty retention, and educational models that prepare new nurses to practice in the diversity of medical and community settings where



			1		
					health needs are
					greatest.
				Redacted	This proposed
					project will be a new
					public-private
					partnership to
					strengthen care for
					orphans and
					vulnerable children
					in HIV-affected
					communities in
					Malawi. The project
					is expected to be
					innovative and pilot
					new strategies
			Redacted		and/or scale up
					tested strategies
OVC (Education &					that show promise
Sustainable	12129:TBD/LM				in addressing
Economic Growth	/GDA	TBD			strengthening family
wrap arounds)					and community
map arounds)					capacity to care,
					support and protect
					vulnerable children,
					as well as improve
					their access to
					essential services.
					One or multiple
					awards may be
					made depending on
					the applications that
					come in under the
					APS. Potential
					partnerships will be
					in line with the
					Malawi HIV and
					AIDS National



					Action Framework
					and the Malawi National Plan of
					Action for Orphans
					and Vulnerable
					Children and
					focused on
					expanding
					implementation of a
					comprehensive
					package of high
					quality interventions
					for orphans and
					vulnerable children
		New Partner	Redacted		67000 OVC and
					33,000 PLHIV will
				Redacted	receive support
					through a third
					application that
					seeks to wrap
					PEPFAR activities
					around Title II Food
					for Peace activities.
					Key activities will
PEPFAR OVC					include improved
Initiative					infant feeding and
iiiiiative					young child feeding,
					integrated
					community
					management of
					childhood illnesses,
					improved child and
					legal protection
					services, education
					support and income
					generating activities
					including village



					savings and loans
					schemes. The
					application will also
					support the efforts
					of the GOM to
					develop and
					implement a
					national pre-ART
					program for PLHIV.
					This five year
					application will
					provide targeted
					supplemental
					nutrition and water
					purification
					commodities to
					OVC in CBCCs, as
					well as strengthen
					community and
					household food
					security through
					improved
					agricultural
					practices, farm
					inputs, and income
					generating activities.
					A total of 27644
					OVC will be reached
					in nine districts.
					The "Safeguard the
	12106:LMRTF/ PMTCT/GHAI				Household" (STH)
Safeguard the Household		Lilongwe			project aims to
		_	1,100,000	1,100,000	improve the quality
		Trust Fund	,	, ,	and impact of
					current PMTCT
					service delivery
	I .		l .	l .	



		systems, increase
		linkages with ART
		and other maternal
		child health and
		family planning
		services, and
		explore new
		technologies and
		approaches make
		PMTCT services
		more effective and
		feasible. The project
		will target HIV-
		infected pregnant
		women, their
		partners, and HIV-
		exposed infants and
		children under five.
		In doing so, the
		project will
		safeguard the entire
		household.The
		overall goal is to
		empower and
		support the MOH in
		its efforts to
		implement a
		comprehensive HIV
		prevention,
		treatment and care
		program in Malawi
		in the areas
		identified by the
		Partnership
		Framework (of the
		GoM and USG) and
		the NAF. The STH



					project will be implemented by a partnership of 12 organizations, all with substantial experience working in Malawi, and will be led by an indigenous organization, Lilongwe Medical Relief Trust Fund (aka Lilongwe Trust) and supported by
					their main technical partners UNC Project, the University of North Carolina and EGPAF.
Support for Health Systems Strengthening and HIV/AIDS service delivery in Malawi's South -East Zone	12105:Dignitas /QCT/GHAI	Dignitas International	1,617,968	1,617,968	The ultimate goal of the program is to achieve the highest attainable standard of health and wellbeing in Malawi. The program will build sustainable, locally owned capacity and increased local autonomy. In order to avoid dependency, the
					program is carried out with and through the South-East



		Zonal Health Office
		(ZHO) and the
		District Health
		Offices (DHOs) of
		the zone, and
		emphasizes
		targeted knowledge-
		exchange. The
		program comprises
		of three clusters of
		implementation
		activities:
		Management of the
		HIV/AIDS referral
		clinic at Zomba
		Central Hospital,
		which serves as a
		pilot site for several
		initiatives aimed at
		improving patient
		care and bolstering
		human resources
		for health; Training
		and mentorship of
		service providers
		(i.e., Clinical
		Officers, Medical
		Assistants, Nurses,
		midwives, and
		counselors), and
		health system
		managers and
		supervisors (i.e.,
		ZHO, DHO, DHMT,
		EHOs, and District
		ART, HTC, PMTCT,
		and HBC



				1
				Coordinators); and
				Design and
				implementation
				support of tools for
				patient
				management, clinic
				management, and
				health systems
				management.
				USG Malawi
				continues to benefit
				from the global
				partnership with
				Pfizer, a U.S. drug
				company that
				provided technical
				expertise to
				USAID/Malawi in
				the development of
				business plans for
				several HPN and
Support to ten				SEG partners in
Malawi Bureau of	Pfizer	0	0	2008. Although the
Standards	FIIZEI	O	O	TA ended his
laboratory				assignment in early
				May 2008, he has
				maintained a close
				relationship with the
				mission and in July
				2008 managed to
				mobilize a high
				performance liquid
				chromatography
				machine to the
				Malawi Bureau of
				Standards (MBS)
				which was handed



				over to the MBS by
				the US Ambassador
				to Malawi by a
				representative of
				Pfizer in 2009. The
				MBS had been
				trying to source
				equipment for a long
				time. Through his
				continued efforts
				and interest in
				Malawi, the TA has
				managed to secure
				additional
				equipment for the
				MBS, from Pfizer.
				The significance of
				this donation is that
				it will help the MBS
				reach International
				Organization for
				Standardization
				(ISO) certification.
				Pfizer is also looking
				into the possibility of
				organizing a fellow
				to assist the MBS
				with the set-up,
				operation and
				maintenance of the
				new equipment. The
				estimated total
				value of the
				equipment and TA
				support is not yet
				available.
The Malawi Teacher	New Partner	Redacted	Redacted	The Malawi Teacher
	1	1	1	malam rodonor



Professional			Professional
Development			Support activity will
Support (MTPDS)			provide technical
activity,			assistance and
			support to Ministry
			of Education,
			Science and
			Technology
			(MOEST) in
			implementing
			teacher education
			support and
			systems
			management, with
			an emphasis on
			completing and
			reinforcing its
			introduction of the
			Primary Curriculum
			and Assessment
			Reform (PCAR).
			Targeting teachers,
			school
			administrators,
			young people and
			children nationwide,
			this Teacher
			Professional
			Development
			Support activity will
			support linkages
			and complement
			key MOEST and
			GOM priority
			initiatives and plans
			in teacher education
			and professional



					development, including the
					HIV/AIDS and
					Education Strategy
					and Plan.
					The goal of this
					project is to expand
					the scope and reach
					of the Tingathe
					program resulting in
					a majority of
					mothers and infants
					at participating
					facilities receiving
		Baylor	1,100,227		the full complement
					of PMTCT and early
					Infant Diagnosis
					(EID) services, and
					prompt entry of
					infected infants and
Tingathe program	12130:Baylor/	University,		1,100,227	mothers into care
Tingathe program	QCT/GHAI	College of		1,100,221	for optimal
		Medicine			treatment outcomes.
					Despite extensive
					evidence on
					improved PMTCT
					regimens, post-
					exposure
					prophylaxis, and
					rapid clinical
					progression in HIV-
					infected infants,
					there has been
					scant progress
					made on how best
					to coordinate and
					ensure delivery of



				the multiple services that HIV-positive mothers and their infants require in the real-world setting. In the Lilongwe area, the BCM-CFM Tingathe outreach program has made strides in developing systems to improve the quality and utilization of PMTCT, EID, and pediatric HIV care
Together for Girls	New Partner	840,000	0	services. UNICEF Malawi with USG and CHAI will support the government of Malawi to undertake, for the first time, a nationally representative population based survey of sexual, physical and psychological violence against children and young women between the ages of 13 to 24, including those living with and affected by HIV and AIDS. The key



purpose of the survey is to determine the prevalence of violence against children and young women and to develop a better understanding of protective and risk factors. This will contribute to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on violence against		I .		
determine the prevalence of violence against children and young women and to develop a better understanding of protective and risk factors. This will contribute to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				purpose of the
prevalence of violence against children and young women and to develop a better understanding of protective and risk factors. This will contribute to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the neaf for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				survey is to
violence against children and young women and to develop a better understanding of protective and risk factors. This will contribute to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				determine the
children and young women and to develop a better understanding of protective and risk factors. This will contribute to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				prevalence of
women and to develop a better understanding of protective and risk factors. This will contribute to to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				violence against
women and to develop a better understanding of protective and risk factors. This will contribute to to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				children and young
understanding of protective and risk factors. This will contribute to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				women and to
understanding of protective and risk factors. This will contribute to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				develop a better
protective and risk factors. This will contribute to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				•
contribute to informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				factors. This will
informed policy decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
decisions and sound programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
programming, to effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
effectively prevent and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
and respond to violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
violence against children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
children and young women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				•
women in Malawi. This project is in response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
response to concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				This project is in
concerns regarding violence against children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				
children in Malawi and the need for quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				violence against
quality data that is nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				_
nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				and the need for
nationally representative. The implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				quality data that is
implementation of the project will be guided by lessons learned during the successful implementation of similar surveys on				nationally
the project will be guided by lessons learned during the successful implementation of similar surveys on				representative. The
guided by lessons learned during the successful implementation of similar surveys on				implementation of
guided by lessons learned during the successful implementation of similar surveys on				•
learned during the successful implementation of similar surveys on				· -
successful implementation of similar surveys on				,
implementation of similar surveys on				=
similar surveys on				
				violence against



	children conducted
	collaboratively by
	UNICEF and CDC
	in Swaziland in
	2007 and in
	Tanzania in 2009.
	UNICEF will lead
	the survey process
	in collaboration with
	the Ministry of
	Gender, Children
	and Community
	Development
	(MOGCCD) with
	technical assistance
	from CDC and
	National Technical
	Working Group on
	Child Protection,
	which involves key
	government bodies
	including the Malawi
	National Police;
	Ministry of Health;
	the Judiciary;
	Ministry of
	Education; Ministry
	of Labour and key
	civil society
	organizations.

Surveillance and Survey Activities

our romanos ana our roy rion rinos						
Name	Type of Activity	Target Population	Stage			
Behavioral and biological surveillance of	Behavioral	Other	Development			
high risk populations (sex workers,	Surveillance among	Other	Development			



teachers, police, vendors, truck drivers, estate workers, fishermen, border traders)	MARPS		
Early Warning Indicator (EWI) survey	HIV Drug Resistance	Other	Planning
Incidence surveillance (laboratory - based)	Recent HIV Infections	General Population	Planning
Prospective HIV drug resistance surveillance	HIV Drug Resistance	Other	Other
STI surveillance	Other	General Population	Planning
Transmitted drug resistance surveillance	HIV Drug Resistance	Pregnant Women	Other



Budget Summary Reports

Summary of Planned Funding by Agency and Funding Source

		Funding Source				
Agency	Central GHCS (State)	GAP	GHCS (State)	GHCS (USAID)	Total	
DOD			2,000,000		2,000,000	
HHS/CDC		3,052,000	20,095,000		23,147,000	
HHS/HRSA	0		2,550,000		2,550,000	
PC			700,000		700,000	
State			695,628		695,628	
State/AF			90,000		90,000	
USAID	0		20,317,372	15,500,000	35,817,372	
Total	0	3,052,000	46,448,000	15,500,000	65,000,000	

Summary of Planned Funding by Budget Code and Agency

				Age	ncy				
Budget Code	State	DOD	HHS/CDC	HHS/HRS A	PC	State/AF	USAID	AllOther	Total
CIRC		450,000	930,000				2,872,770		4,252,770
НВНС		50,000	1,050,000		16,000		1,399,892		2,515,892
HKID					16,000	40,000	4,546,924		4,602,924
HLAB		100,000	2,865,140				393,935		3,359,075
HMBL		100,000	1,140,000						1,240,000
HMIN							100,000		100,000
HTXS			435,000	300,000			931,541		1,666,541
HVAB		140,000			148,200		4,219,650		4,507,850
HVCT		230,000	1,480,000	50,000			2,099,373		3,859,373
HVMS	695,628	80,000	3,852,000		144,300		3,200,000		7,971,928
HVOP		250,000	420,000		20,100	50,000	2,862,520		3,602,620
HVSI		100,000	1,114,560	650,000			1,172,692		3,037,252



	695,628	2,000,000	23,147,000	2,550,000	700,000	90,000	35,817,372	0	65,000,000
PDTX			235,000				513,275		748,275
PDCS							674,126		674,126
OHSS		150,000	3,255,300	1,450,000	355,400		3,469,234		8,679,934
мтст		200,000	5,500,000	50,000			6,693,104		12,443,104
IDUP							0		0
HVTB		150,000	870,000	50,000			668,336		1,738,336

Budgetary Requirements Worksheet

(No data provided.)



National Level Indicators

National Level Indicators and Targets

Redacted



Policy Tracking Table

(No data provided.)



Technical Areas

Technical Area Summary

Technical Area: Adult Care and Treatment

Budget Code	Budget Code Planned Amount	On Hold Amount
НВНС	2,515,892	
HTXS	1,666,541	
Total Technical Area Planned Funding:	4,182,433	0

Summary:

(No data provided.)

Technical Area: Biomedical Prevention

Budget Code	Budget Code Planned Amount	On Hold Amount
CIRC	4,252,770	
HMBL	1,240,000	
HMIN	100,000	
IDUP	0	
Total Technical Area Planned Funding:	5,592,770	0

Summary:

(No data provided.)

Technical Area: Counseling and Testing

Tooming and T	J	
Budget Code	Budget Code Planned Amount	On Hold Amount
HVCT	3,859,373	
Total Technical Area Planned Funding:	3,859,373	0

Summary:

(No data provided.)

Technical Area: Health Systems Strengthening

Custom Page 52 of 155 FACTS Info v3.8.3.30

2012-10-03 17:47 EDT



Budget Code	Budget Code Planned Amount	On Hold Amount
OHSS	8,679,934	
Total Technical Area Planned Funding:	8,679,934	0

Summary:

(No data provided.)

Technical Area: Laboratory Infrastructure

Budget Code	Budget Code Planned Amount	On Hold Amount
HLAB	3,359,075	
Total Technical Area Planned Funding:	3,359,075	0

Summary:

(No data provided.)

Technical Area: Management and Operations

Budget Code	Budget Code Planned Amount	On Hold Amount
HVMS	7,971,928	
Total Technical Area Planned Funding:	7,971,928	0

Summary:

(No data provided.)

Technical Area: OVC

Budget Code	Budget Code Planned Amount	On Hold Amount
HKID	4,602,924	
Total Technical Area Planned Funding:	4,602,924	0

Summary:

Custom

(No data provided.)

Technical Area: Pediatric Care and Treatment

Budget Code	Budget Code Planned Amount	On Hold Amount
PDCS	674,126	



PDTX	748,275	
Total Technical Area Planned	1 422 401	0
Funding:	1,422,401	9

Summary:

(No data provided.)

Technical Area: PMTCT

Budget Code	Budget Code Planned Amount	On Hold Amount
мтст	12,443,104	
Total Technical Area Planned Funding:	12,443,104	0

Summary:

(No data provided.)

Technical Area: Sexual Prevention

Budget Code	Budget Code Planned Amount	On Hold Amount
HVAB	4,507,850	
HVOP	3,602,620	
Total Technical Area Planned Funding:	8,110,470	o

Summary:

(No data provided.)

Technical Area: Strategic Information

Budget Code	Budget Code Planned Amount	On Hold Amount
HVSI	3,037,252	
Total Technical Area Planned Funding:	3,037,252	0

Summary:

(No data provided.)

Technical Area: TB/HIV

Budget Code	Budget Code Planned Amount	On Hold Amount
HVTB	1,738,336	



Total Technical Area Planned	1,738,336	
Funding:	1,730,330	9

Summary: (No data provided.)



Technical Area Summary Indicators and Targets

Redacted



Partners and Implementing Mechanisms

Partner List

Mech ID	Partner Name	Organization Type	Agency	Funding Source	Planned Funding
7166	Howard University	University	U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	GHCS (State)	3,550,000
9261	Baobab Health Trust	Implementing Agency	U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	GHCS (State)	1,500,000
9266	John Snow, Inc.	Private Contractor	U.S. Agency for International Development	GHCS (State)	0
9270	Lighthouse	NGO	U.S. Department of Health and Human	GHCS (State)	1,200,000
9271	Malawi AIDS Counseling Resource Organization	NGO	U.S. Department of Health and Human Services/Centers for Disease Control and	GHCS (State)	830,000



			Prevention		
9274	Management Sciences for Health	NGO	U.S. Agency for International Development	GHCS (State)	0
9276	National AIDS Commission, Malawi	Parastatal	U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	GHCS (State)	700,000
9277	Pact, Inc.	NGO	U.S. Agency for International Development	GHCS (State), Central GHCS (State), GHCS (USAID)	0
9280	Partnership for Child HealthCare Inc.	NGO	U.S. Agency for International Development	GHCS (State), GHCS (USAID)	0
9281	University of Washington	University	U.S. Department of Health and Human Services/Health Resources and Services Administration	GHCS (State)	2,550,000
9882	Johns Hopkins University Center for Communication Programs	University	U.S. Agency for International Development	GHCS (State), GHCS (USAID)	5,925,000
9883	Population Services International	NGO	U.S. Agency for International Development	GHCS (State), GHCS (USAID)	3,950,000
10427	Malawi Blood Transfusion Service	Parastatal	U.S. Department of Health and Human	GHCS (State)	1,140,000



			0		
			Services/Centers		
			for Disease		
			Control and		
			Prevention		
	Macro		U.S. Agency for		
10764	International	Private Contractor		GHCS (State)	200,000
			Development		
			U.S. Department		
			of Health and		
	University of		Human		
10781	Malawi College of	University	Services/Centers	GHCS (State)	700,000
	Medicine		for Disease		
			Control and		
			Prevention		
			U.S. Agency for	Central GHCS	
10783	JHPIEGO	NGO	International		0
			Development	(State)	
		NGO	U.S. Agency for	GHCS (USAID)	0
10785	IntraHealth		International		
	International, Inc		Development		
	Academy for		U.S. Agency for		
10786	Educational	NGO	International	GHCS (USAID)	0
	Development		Development	,	
		Implementing			
11453	U.S. Peace Corps	Agency	U.S. Peace Corps	GHCS (State)	555,700
			U.S. Agency for		
12105	Dignitas	NGO	International	GHCS (State)	1,617,968
	International		Development		, , -
			U.S. Agency for		
12106	Lilongwe Medical	TBD	International	Redacted	1,100,000
	Relief Trust Fund		Development		, , , , , , , , ,
	UNIVERSITY OF		U.S. Department		
	MALAWI,		of Health and		
12110	COLLEGE OF	Implementing	Human	GHCS (State)	2,300,000
12110	MEDICINE LAB	Agency	Services/Centers	GHCS (State)	2,300,000
	CONSORTIUM		for Disease		
	CONSOINTIUM		וטו טוטכמטכ		



			Control and		
			Prevention		
12111	Ministry of Health, Malawi	Host Country Government Agency	U.S. Department of Health and Human	GHCS (State)	5,500,000
12112	JHPIEGO	NGO	U.S. Agency for International Development	GHCS (State), Central GHCS (State)	0
12113	PATH	NGO	U.S. Agency for International Development	GHCS (State)	0
12115	Project Concern International	NGO	U.S. Department of Defense	GHCS (State)	0
12116	Department of State	Implementing Agency	U.S. Department of State/Bureau of African Affairs	GHCS (State)	90,000
12117	Abt Associates	Private Contractor	U.S. Agency for International Development	GHCS (State)	100,000
12118	Banja La Mtsogolo	TBD	U.S. Agency for International Development	GHCS (State)	1,750,000
12119	Global AIDS Interfaith Alliance	TBD	U.S. Agency for International Development	GHCS (State)	400,000
12120	Save the Children	NGO	U.S. Agency for International Development	GHCS (State)	400,000
12122	Catholic Relief Services	FBO	U.S. Agency for International Development	GHCS (State)	3,530,000



		ľ			1
12124	Academy for Educational Development	NGO	U.S. Agency for International Development	GHCS (State)	0
12125	African Palliative Care Association	NGO	U.S. Agency for International Development	GHCS (State)	200,000
12126	Feed the Children	Implementing Agency	U.S. Agency for International Development	GHCS (State)	1,200,000
12127	TBD	TBD	U.S. Department of Defense	Redacted	Redacted
12129	TBD	TBD	U.S. Agency for International Development	Redacted	Redacted
12130	Baylor College of Medicine Children's Foundation Malawi	Implementing Agency	U.S. Agency for International Development	GHCS (State)	1,100,227
12131	Christian Health Association of Malawi	FBO	U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	GHCS (State)	1,875,000
12550	TBD	TBD	U.S. Agency for International Development	Redacted	Redacted
12590	World Learning	NGO	U.S. Agency for International Development	GHCS (State)	0
12638	TBD	TBD	U.S. Agency for International Development	Redacted	Redacted



					1
			U.S. Agency for		
12649	TBD	TBD	International	Redacted	Redacted
			Development		
	Academy for		U.S. Agency for	GHCS (State),	
12940	Educational	NGO	International	GHCS (USAID)	1,000,000
	Development		Development	GIICS (USAID)	
	F		U.S. Agency for		
13027	Family Health	NGO	International	GHCS (State)	400,000
	International		Development		
			U.S. Agency for		
13062	TBD	TBD	International	Redacted	Redacted
			Development		
	Creative		U.S. Agency for		
13066	Associates	Private Contractor		GHCS (State)	0
	International Inc		Development	,	
	University		U.S. Agency for		
13101	Research	Private Contractor		GHCS (State)	40,000
	Corporation, LLC		Development	orres (state)	,
	,		U.S. Agency for		
13123	TBD	TBD	International	Redacted	Redacted
			Development		
			U.S. Agency for		
13145	Abt Associates	Private Contractor		GHCS (State)	250,000
10140	/ lot / losociates	i iivate contractor	Development	Si ioo (Giaio)	200,000
	University		U.S. Agency for		
13288	Research	Private Contractor		GHCS (State)	540,000
13200	Corporation, LLC	Filvate Contractor	Development	Grico (State)	340,000
	Corporation, LLC				
			U.S. Department		
			of Health and		
1001E	Columbia	Linivoroity	Human	Central GHCS	
13315	University	University	Services/Health	(State)	0
			Resources and Services		
			Administration		
40.450	D				0.400.000
13458	Partners in Hope	FBO	U.S. Agency for	GHCS (State)	2,438,000



		International Development		
40400	TDD	U.S. Agency for	D. L. G.	Delevisi
13496	TBD	International Development	Redacted	Redacted



Implementing Mechanism(s)

Implementing Mechanism Details

<u> </u>		
Mechanism ID: 7166	Mechanism Name: Howard University	
Funding Agency: U.S. Department of Health and		
Human Services/Centers for Disease Control and	Procurement Type: Cooperative Agreement	
Prevention		
Prime Partner Name: Howard University		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 3,550,000	
Funding Source	Funding Amount
GHCS (State)	3,550,000

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Construction/Renovation	250,000
Human Resources for Health	1,280,000

Key Issues

Custom

(No data provided.)

Budget Code Information

Budget Oode Informe	ation
Mechanism ID:	7166



Mechanism Name: Prime Partner Name:	Howard University Howard University		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HTXS	35,000	
Narrative:	_		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	PDTX	35,000	
Narrative:	_		
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	1,000,000	
Narrative:			
		<u> </u>	
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	1,100,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	HLAB	1,380,000	
Narrative:	•		

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9261	Mechanism Name: Baobab
Funding Agency: U.S. Department of Health and	Procurement Type: Cooperative Agreement



Human Services/Centers for Disease Control and	
Prevention	
Prime Partner Name: Baobab Health Trust	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 1,500,000	
Funding Source Funding Amount	
GHCS (State)	1,500,000

Sub Partner Name(s)

_uke International Norway		
---------------------------	--	--

Overview Narrative

Cross-Cutting Budget Attribution(s)

3	
Human Resources for Health	33,000

Key Issues

(No data provided.)

Budget Code Information

Mechanism ID:	9261		
Mechanism Name:	Baobab		
Prime Partner Name:	Baobab Health Trust		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	HVSI	400,000	
Narrative:			



Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Other	OHSS	800,000		
rrative:				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Prevention	MTCT	300,000		
rrative:				
manve.				

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9266	Mechanism Name: JSI CSH
Funding Agency: U.S. Agency for International	December of Tarana Construction Assessment
Development	Procurement Type: Cooperative Agreement
Prime Partner Name: John Snow, Inc.	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 0	
Funding Source	Funding Amount
GHCS (State)	0

Sub Partner Name(s)

(No data provided.)

Overview Narrative



Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Malaria (PMI) Family Planning

Budget Code Information

Budget Code Inform			
Mechanism ID:	9266		
Mechanism Name:	JSI CSH		
Prime Partner Name:	John Snow, Inc.		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	0	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	0	
Narrative:			
ivarrative:			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9270	Mechanism Name: Lighthouse GHAI
Funding Agency: U.S. Department of Health and	
Human Services/Centers for Disease Control and	Procurement Type: Cooperative Agreement
Prevention	
Prime Partner Name: Lighthouse	



Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 1,200,000		
Funding Source Funding Amount		
GHCS (State)	1,200,000	

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Human Resources for Health	480,294
	1

Key Issues

(No data provided.)

Budget Code Information

Budget Code Illionii	ation		
Mechanism ID:	9270		
Mechanism Name:	Lighthouse GHAI		
Prime Partner Name:	Lighthouse		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	НВНС	500,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HTXS	200,000	



arrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	HVSI	30,000	
rrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	100,000	
rrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	100,000	
rrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	HVTB	270,000	
rrative:		·	

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9271	Mechanism Name: Malawi AIDS Counseling Resource Organization	
Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	Procurement Type: Cooperative Agreement	
Prime Partner Name: Malawi AIDS Counseling Resource Organization		
Agreement Start Date: Redacted	Agreement End Date: Redacted	



TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 830,000		
Funding Source Funding Amount		
GHCS (State)	830,000	

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

luman Resources for Health	350,000

Key Issues

Mobile Population

Budget Code Information

Budget Code illioillation				
Mechanism ID:	9271			
Mechanism Name:	Malawi AIDS Counseling Resource Organization			
Prime Partner Name: Malawi AIDS Counseling Resource Organization				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Care	HVCT	830,000		
Narrative:		,		
None				

Implementing Mechanism Indicator Information

(No data provided.)

Custom Page 71 of 155 FACTS Info v3.8.3.30

2012-10-03 17:47 EDT



Implementing Mechanism Details

Mechanism ID: 9274	Mechanism Name: MSH TASC III	
Funding Agency: U.S. Agency for International	Producement Types Cooperative Agreement	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Management Sciences for Health		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 0	
Funding Source	Funding Amount
GHCS (State)	0

Sub Partner Name(s)

District Health Offices - Malawi		
----------------------------------	--	--

Overview Narrative

Cross-Cutting Budget Attribution(s)

	a = 1	
Human Resources for Health	10	
Human Resources for Health	10	

Key Issues

Family Planning

Budget Code Information

Mechanism ID: 9274

Mechanism Name: MSH TASC III

Prime Partner Name: Management Sciences for Health



Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT	0	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	0	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	0	
Narrative:			

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9276	Mechanism Name: NAC GHAI	
Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	Procurement Type: Cooperative Agreement	
Prime Partner Name: National AIDS Commission, Malawi		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 700,000		
Funding Source	Funding Amount	
GHCS (State)	700,000	

Sub Partner Name(s)



טכ	

Overview Narrative

Cross-Cutting Budget Attribution(s)

Human Resources for Health	205,000

Key Issues

(No data provided.)

Mechanism ID:	9276		
Mechanism Name:	NAC GHAI		
Prime Partner Name:	National AIDS Commiss	ion, Malawi	
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT	100,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	HVSI	200,000	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	100,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount



Prevention	CIRC	100,000		
Narrative:	Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Prevention	MTCT	200,000		
Narrative:				

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9277	Mechanism Name: PACT CSH	
Funding Agency: U.S. Agency for International	Description of Trans. Comparative Assessment	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Pact, Inc.		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 0		
Funding Source	Funding Amount	
Central GHCS (State)	0	
GHCS (State)	0	
GHCS (USAID)	0	

Sub Partner Name(s)

Baylor College of Medicine Children's Foundation Malawi	Community Partnership for Relief & Development	Ekwendani Mission Hospital
Elizabeth Glaser Pediatric AIDS Foundation	FVM Matunkha Centre	Lusubilo
Malamulo	Mponela AIDS Information and	Namwera AIDS Coordination



	Counseling Centre	Committee
National Association of People Living with AIDS	Nkhoma Mission Hospital	Nkhotakota AIDS Support Organization
Partners in Hope - UCLA	Toga Laboratories	UCLA Program in Global Health

Overview Narrative

Cross-Cutting Budget Attribution(s)

Education	0
Food and Nutrition: Policy, Tools, and Service	0
Delivery	U

Key Issues

Increasing women's access to income and productive resources

Mechanism ID:	9277		
Mechanism Name:	PACT CSH		
Prime Partner Name:	Pact, Inc.		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HBHC	0	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HKID	0	
Narrative:			
None			



Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Care	HVCT	0		
Narrative:				
None				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Other	HVSI	0		
Narrative:				
None				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Other	OHSS	0		
Narrative:				
None				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Prevention	HMIN	0		
Narrative:				
None				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Prevention	HVAB	0		
Narrative:				
None				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Prevention	HVOP	0		
Narrative:				
None	None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Prevention	MTCT	0		
Narrative:				



- 1		
п		
- 1	Mono	
п	INIONO	
	INOLE	
- 1	1.10.10	

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9280	Mechanism Name: BASICS Task Order II CSH	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Partnership for Child HealthCare Inc.		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 0			
Funding Source	Funding Amount		
GHCS (State)	0		
GHCS (USAID)	o		

Sub Partner Name(s)

Baylor University International Pediatric AIDS Initiative	Chiradzulu	Dignitas International
Neno	Thylo	WALA Food for Peace Project

Overview Narrative

Construction/Renovation	0
Human Resources for Health	0



Addressing male norms and behaviors
Increasing gender equity in HIV/AIDS activities and services
Increasing women's access to income and productive resources
Increasing women's legal rights and protection
Malaria (PMI)
Child Survival Activities
Safe Motherhood
TB
Family Planning

Budget Code Information					
Mechanism ID:	9280				
Mechanism Name:	Mechanism Name: BASICS Task Order II CSH				
Prime Partner Name:	Prime Partner Name: Partnership for Child HealthCare Inc.				
Strategic Area	Budget Code	Planned Amount	On Hold Amount		
Care	HVCT	0			
Narrative:					
None					
Strategic Area	Budget Code	Planned Amount	On Hold Amount		
Care	PDCS	0			
Narrative:					
None					
Strategic Area	Budget Code	Planned Amount	On Hold Amount		
Care	PDTX	0			
Narrative:					
None					
Strategic Area	Budget Code	Planned Amount	On Hold Amount		
Other	OHSS	0			



None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	0	
Narrative:		•	

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9281	Mechanism Name: I-TECH
Funding Agency: U.S. Department of Health and Human Services/Health Resources and Services Administration	Procurement Type: Cooperative Agreement
Prime Partner Name: University of Washington	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 2,550,000		
Funding Source	Funding Amount	
GHCS (State)	2,550,000	

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Human Resources for Health	500,000	
----------------------------	---------	--



Workplace Programs

Budget Code Inform	ation		
Mechanism ID:	9281		
Mechanism Name:	: I-TECH		
Prime Partner Name:	University of Washington		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HTXS	300,000	
Narrative:		•	
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT 50,000		
Narrative:			
None Strategic Area	Budget Code	Planned Amount	On Hold Amount
		050,000	
Other	HVSI 650,000		
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS 1,450,000		
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount



Prevention	MTCT	MTCT 50,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	nt HVTB 50,000		
Narrative:			
None			

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9882	Mechanism Name: JHCOM GHAI - 12159	
Funding Agency: U.S. Agency for International	Procurement Type: Cooperative Agreement	
Development		
Prime Partner Name: Johns Hopkins University Center for Communication Programs		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 5,925,000		
Funding Source	Funding Amount	
GHCS (State)	425,000	
GHCS (USAID)	5,500,000	

Sub Partner Name(s)

International HIV/AIDS Alliance	Malawi Interfaith AIDS Association	National Association of People Living with HIV/AIDS in Malawi
Pact Malawi	Save the Children	T'LIPO

Overview Narrative



Cross-Cutting Budget Attribution(s)

Education	175,000
Gender: Reducing Violence and Coercion	2,750,000

Key Issues

Addressing male norms and behaviors
Increasing gender equity in HIV/AIDS activities and services

Budget Code Information			
Mechanism ID:	9882		
Mechanism Name:	e: JHCOM GHAI - 12159		
Prime Partner Name:	Johns Hopkins University Center for Communication Programs		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	675,114	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	CIRC 499,860		
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVAB 3,250,000		
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	1,250,026	



Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	250,000	
Narrative:			
None			

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 9883	Mechanism Name: PSI CSH	
Funding Agency: U.S. Agency for International	December of Transport Control of the Assessment	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Population Services International		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 3,950,000		
Funding Source	Funding Amount	
GHCS (State)	950,000	
GHCS (USAID)	3,000,000	

Sub Partner Name(s)

Pact Malawi	

Overview Narrative



Gender: Reducing Violence and Coercion	696,073

Increasing gender equity in HIV/AIDS activities and services Mobile Population

Budget Code Inform			
Mechanism ID			
Mechanism Name	PSI CSH		
Prime Partner Name	Population Services Inte	ernational	
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT	813,417	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	CIRC 622,910		
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVAB 969,650		
Narrative:	•		
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	1,544,023	
Narrative:			



(No data provided.)

Implementing Mechanism Details

Mechanism ID: 10427	Mechanism Name: Malawi Blood Transfusion Service	
Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	Procurement Type: Cooperative Agreement	
Prime Partner Name: Malawi Blood Transfusion Service		
Agreement Start Date: Redacted Agreement End Date: Redacted		
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 1,140,000		
Funding Source Funding Amount		
GHCS (State)	1,140,000	

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

<u> </u>	or our outling Europet / turnounento/		
Hu	man Resources for Health	200.000	

Key Issues

Malaria (PMI)
Child Survival Activities
Safe Motherhood
Workplace Programs



Budget Code Information

	10427 Malawi Blood Transfusion Service Malawi Blood Transfusion Service		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HMBL 1,140,000		
Narrative:			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 10764	Mechanism Name: Service Provision Assessment	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Macro International		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 200,000		
Funding Source	Funding Amount	
GHCS (State)	200,000	

Sub Partner Name(s)

(No data provided.)

Overview Narrative



Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Impact/End-of-Program Evaluation

Budget Code Information

Budget Code information				
Mechanism ID:	10764			
Mechanism Name:	Service Provision Assessment			
Prime Partner Name:	Macro International			
Strategic Area	Budget Code Planned Amount On Hold Amount			
Other	HVSI 200,000			
Narrative:				
None				

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 10781	Mechanism Name: GoM/HSS/GHAI
Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	Procurement Type: Cooperative Agreement
Prime Partner Name: University of Malawi College of Medicine	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 700,000		
Funding Source	Funding Amount	



GHCS (State)	700,000
Of 100 (Glate)	700,000

Sub Partner Name(s)

Ministry of Health	

Overview Narrative

Cross-Cutting Budget Attribution(s)

Human Resources for Health	700.000
	1 '

Key Issues

Workplace Programs

Budget Code Information

Baagot Goao IIII oi III			
Mechanism ID:	10781		
Mechanism Name:	GoM/HSS/GHAI		
Prime Partner Name:	University of Malawi College of Medicine		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	700,000	
Narrative:			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 10783	Mechanism Name: JHPIEGO CSH
101 CC1101113111 1D. 107 03	Micchanism Name. On TEGO Con

Custom



Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement
Prime Partner Name: JHPIEGO	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 0	
Funding Source	Funding Amount
Central GHCS (State)	0

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)

Mechanism ID: Mechanism Name: Prime Partner Name:	JHPIEGO CSH		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HMIN	0	
Narrative: None			



(No data provided.)

Implementing Mechanism Details

,		
Mechanism ID: 10785	Mechanism Name: IntraHealth CapacityPlus	
Funding Agency: U.S. Agency for International	Procurement Type: Cooperative Agreement	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: IntraHealth International, Inc		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 0		
Funding Source	Funding Amount	
GHCS (USAID)	0	

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Increasing women's legal rights and protection

.90: 00400	anon
Mechanism ID:	10785



	IntraHealth CapacityPlus IntraHealth International, Inc		
Strategic Area	Budget Code Planned Amount On Hold Amount		
Other	OHSS	0	
Narrative:			

(No data provided.)

Implementing Mechanism Details

<u> </u>		
Mechanism ID: 10786	Mechanism Name: AED/OVC	
Funding Agency: U.S. Agency for International	Progurament Type: Cooperative Agreement	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Academy for Educational Development		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 0	
Funding Source	Funding Amount
GHCS (USAID)	0

Sub Partner Name(s)

(No data provided.)

Overview Narrative

	,	
Human Resources for Health	0	



Increasing gender equity in HIV/AIDS activities and services

Budget Code Information

budget Code Illionii			
Mechanism ID:	10786		
Mechanism Name:	AED/OVC		
Prime Partner Name:	Academy for Educational Development		
Strategic Area	Budget Code Planned Amount On Hold Amount		
Care	HKID	0	
Narrative:			
None			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 11453	Mechanism Name: Peace Corps Volunteers
Funding Agency: U.S. Peace Corps	Procurement Type: USG Core
Prime Partner Name: U.S. Peace Corps	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 555,700		
Funding Source	Funding Amount	
GHCS (State)	555,700	

Sub Partner Name(s)

(No data provided.)

Overview Narrative



Cross-Cutting Budget Attribution(s)

Economic Strengthening	111,140
Education	111,140
Gender: Reducing Violence and Coercion	166,710
Human Resources for Health	166,710

Key Issues

(No data provided.)

Budget Code Informa			
Mechanism ID:	11453		
Mechanism Name:	Peace Corps Volunteers		
Prime Partner Name:	U.S. Peace Corps		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	НВНС	16,000	
Narrative:		,	
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HKID	16,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	355,400	
Narrative:			
		-	
Strategic Area	Budget Code	Planned Amount	On Hold Amount



Prevention	HVAB	148,200	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	20,100	
Narrative:			
None			

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12105	Mechanism Name: Dignitas/QCT/GHAI	
Funding Agency: U.S. Agency for International	December of Target Conservation Assessment	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Dignitas International		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 1,617,968		
Funding Source	Funding Amount	
GHCS (State)	1,617,968	

Sub Partner Name(s)

(No data provided.)

Overview Narrative



Gender: Reducing Violence and Coercion	14,874
Human Resources for Health	415,870

Impact/End-of-Program Evaluation Workplace Programs

Strategic Area Budget Code Planned Amount On Hold Amount Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 387,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Budget Code Informa	ation		
Strategic Area Budget Code Planned Amount On Hold Amount Care HBHC 21,403 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 387,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Mechanism ID:	12105		
Strategic Area Budget Code Planned Amount On Hold Amount Care HBHC 21,403 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 387,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Mechanism Name:	Dignitas/QCT/GHAI		
Strategic Area Budget Code Planned Amount On Hold Amount Care HBHC 21,403 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 387,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Prime Partner Name:	Dignitas International		
Care HBHC 21,403 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 387,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312				
None Strategic Area Budget Code Planned Amount On Hold Amount Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 327,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Strategic Area	Budget Code	Planned Amount	On Hold Amount
Strategic Area Budget Code Planned Amount On Hold Amount Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 387,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Care	НВНС	21,403	
Strategic Area Budget Code Planned Amount On Hold Amount Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 387,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Narrative:			
Care HTXS 294,599 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount On Hold Amount	None			
Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Strategic Area	Budget Code	Planned Amount	On Hold Amount
Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Care	HTXS	294,599	
Strategic Area Budget Code Planned Amount On Hold Amount Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Narrative:			
Care HVCT 287,266 Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	None			
Narrative: None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Strategic Area	Budget Code	Planned Amount	On Hold Amount
None Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Care	HVCT	287,266	
Strategic Area Budget Code Planned Amount On Hold Amount Care PDCS 32,312	Narrative:			
Care PDCS 32,312	None			
<u> </u>	Strategic Area	Budget Code	Planned Amount	On Hold Amount
Narrative:	Care	PDCS	32,312	
	Narrative:			



Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	PDTX	45,177	
Narrative:			
		1	
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	HVSI	429,294	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	153,033	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	225,000	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	HLAB	101,719	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	HVTB	28,165	
Narrative:			
None			

(No data provided.)



Implementing Mechanism Details

lechanism ID: 12106 Mechanism Name: LMRTF/PMTCT/GHA		
Funding Agency: U.S. Agency for International	Drag vision and Times Cooperative Assessment	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Lilongwe Medical Relief Trust Fund		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 1,100,000	
Funding Source	Funding Amount
GHCS (State)	1,100,000

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Human Resources for Health 300,000

Key Issues

Increasing gender equity in HIV/AIDS activities and services

Mechanism ID:	12106		
Mechanism Name:	LMRTF/PMTCT/GHAI		
Prime Partner Name:	Lilongwe Medical Relief Trust Fund		
Strategic Area	Budget Code	Planned Amount	On Hold Amount



Prevention	MTCT	1,100,000
Narrative:		

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12110	Mechanism Name: University of Malawi College of Medicine		
Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	Procurement Type: Cooperative Agreement		
Prime Partner Name: UNIVERSITY OF MALAWI, COLLEGE OF MEDICINE LAB CONSORTIUM			
Agreement Start Date: Redacted Agreement End Date: Redacted			
TBD: No	Global Fund / Multilateral Engagement: No		

Total Funding: 2,300,000		
Funding Source	Funding Amount	
GHCS (State)	2,300,000	

Sub Partner Name(s)

John Hopkins Project	Loma Linda University	University of North Carolina (UNC)
John Hopkins Project		Project

Overview Narrative

Construction/Renovation	200,000
Food and Nutrition: Policy, Tools, and Service	60,000



Delivery	
Human Resources for Health	330,000

ТВ

Budget Code Information				
Mechanism ID: 12110				
Mechanism Name:	University of Malawi College of Medicine			
Prime Partner Name:	UNIVERSITY OF MALAWI, COLLEGE OF MEDICINE LAB CONSORTIUM			
Strategic Area	Budget Code Planned Amount On Hold Amount			
Care	HTXS	200,000		
Narrative:				
None				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Care	PDTX 200,000			
Narrative:				
None				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Other	HVSI	34,560		
Narrative:				
None				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Other	OHSS	330,300		
Narrative:				
None				
Strategic Area	Budget Code	Planned Amount	On Hold Amount	



Prevention	MTCT	200,000			
Narrative:					
None					
Strategic Area Budget Code Planned Amount On Hold Amount					
Treatment	HLAB	1,335,140			
Narrative:					

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12111	Mechanism Name: Supporting implementation of National AIDS Framework through improving coverage and quality of HIV and AIDS Services
Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	Procurement Type: Cooperative Agreement
Prime Partner Name: Ministry of Health, Malawi	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 5,500,000	
Funding Source	Funding Amount
GHCS (State)	5,500,000

Sub Partner Name(s)

Baobab	MSH	

Overview Narrative



Cross-Cutting Budget Attribution(s)

Human Resources for Health	3.600,000
i lullian ixesources for riealth	[3,000,000

Key Issues

Addressing male norms and behaviors
Increasing gender equity in HIV/AIDS activities and services
TB

Mechanism ID: Mechanism Name:	Supporting implementation of National AIDS Framework through e: improving coverage and guality of HIV and AIDS Services		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	НВНС	300,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT	350,000	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	HVSI	400,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount



Prevention	CIRC	530,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	70,000	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	3,200,000	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	HLAB	150,000	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	HVTB	500,000	
Narrative:			
None			

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12112	Mechanism Name: MCHIP (Maternal and Child Health Integrated Project)
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement
Prime Partner Name: JHPIEGO	



Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 0		
Funding Source	Funding Amount	
Central GHCS (State)	0	
GHCS (State)	0	

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

14/	
Water	10

Key Issues

(No data provided.)

Mechanism ID: 12112					
Mechanism Name:	lechanism Name: MCHIP (Maternal and Child Health Integrated Project)				
Prime Partner Name: JHPIEGO					
Strategic Area	c Area Budget Code Planned Amount On Hold Amount				
Prevention	HMIN 0				
Narrative:					
None					
Strategic Area	Budget Code	Planned Amount	On Hold Amount		



IDUP	O	
Budget Code	Planned Amount	On Hold Amount
MTCT	0	
	Budget Code	Budget Code Planned Amount

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12113	Mechanism Name: Path	
Funding Agency: U.S. Agency for International	December of Two Comments of Assessed	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: PATH		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 0	
Funding Source	Funding Amount
GHCS (State)	0

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Food and Nutrition: Policy, Tools, and Service	0
--	---



Delivery	
Delivery	

(No data provided.)

Budget Code Information

Mechanism ID:	12113		
Mechanism Name:			
Prime Partner Name:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	мтст	0	
larrative:			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12115	Mechanism Name: DOD/GHAI	
Funding Agency: U.S. Department of Defense	Procurement Type: Grant	
Prime Partner Name: Project Concern International		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 0		
Funding Source	Funding Amount	
GHCS (State)	0	

Sub Partner Name(s)

|--|



Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)

Budget Code Information			
Mechanism ID: 12115			
Mechanism Name:	DOD/GHAI		
Prime Partner Name:	Project Concern Interna	tional	
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	НВНС	0	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT	0	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	CIRC	0	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVAB	0	



larrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	0	
Narrative:			

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12116	Mechanism Name: ASGF/State for Ambassadors Small Grant for HIV/AIDS	
Funding Agency: U.S. Department of State/Bureau of African Affairs	Procurement Type: Cooperative Agreement	
Prime Partner Name: Department of State		
Agreement Start Date: Redacted Agreement End Date: Redacted		
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 90,000		
Funding Source	Funding Amount	
GHCS (State)	90,000	

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Economic Strengthening	50,000



Key Issues

Increasing gender equity in HIV/AIDS activities and services

Budget Code Information

Budget Code Inform			
Mechanism ID:	12116		
Mechanism Name:	ASGF/State for Ambassadors Small Grant for HIV/AIDS		
Prime Partner Name:	Department of State		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HKID	40,000	
Narrative:	•		
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	50,000	
Narrative:			
None			

Implementing Mechanism Indicator Information

(No data provided.)

Mechanism ID: 12117	Mechanism Name: HS20/20/GHAI	
Funding Agency: U.S. Agency for International	Procurement Type: Cooperative Agreement	
Development	Producement Type. Cooperative Agreement	
Prime Partner Name: Abt Associates		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 100,000	



Funding Source	Funding Amount
GHCS (State)	100,000

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Human Resources for Health	10,000

Key Issues

(No data provided.)

Budget Code Information

Mechanism ID:	12117		
Mechanism Name:	HS20/20/GHAI		
Prime Partner Name:	Abt Associates		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	100,000	
larrative:			

Implementing Mechanism Indicator Information

(No data provided.)

Mechanism ID: 12118	Mechanism Name: BLM CIRC GHAI



Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement
Prime Partner Name: Banja La Mtsogolo	
Agreement Start Date: Redacted Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 1,750,000	
Funding Source	Funding Amount
GHCS (State)	1,750,000

Blue Star Franchising Network	Ministry of Health	PSI
University of Malawi College of	University of Michigan	
Medicine	University of Michigan	

Overview Narrative

Cross-Cutting Budget Attribution(s)

Gender: Reducing Violence and Coercion	104,701
Human Resources for Health	423,055

Key Issues

Addressing male norms and behaviors Impact/End-of-Program Evaluation Family Planning

budget code information		
Mechanism ID:	12118	



Mechanism Name: Prime Partner Name:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	CIRC	1,750,000	
Narrative:			

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12119	Mechanism Name: GAIA/HRH/GHAI	
Funding Agency: U.S. Agency for International	Procurement Type: Cooperative Agreement	
Development		
Prime Partner Name: Global AIDS Interfaith Alliance		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 400,000	
Funding Source	Funding Amount
GHCS (State)	400,000

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Human Resources for Health	400,000	
----------------------------	---------	--



Key Issues

Increasing gender equity in HIV/AIDS activities and services Workplace Programs

Budget Code Information

Mechanism ID:	12119			
Mechanism Name:	GAIA/HRH/GHAI			
Prime Partner Name:	Global AIDS Interfaith Alliance			
Strategic Area	Budget Code Planned Amount On Hold Amount			
Other	OHSS	400,000		
Narrative:				

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12120	Mechanism Name: C-SEP	
Funding Agency: U.S. Agency for International	Procurement Type: Cooperative Agreement	
Development Prime Partner Name: Save the Children		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 400,000		
Funding Source	Funding Amount	
GHCS (State)	400,000	

Sub Partner Name(s)

(No data provided.)



Overview Narrative

Cross-Cutting Budget Attribution(s)

er ood outuming = aragot r tan mounton(e)	
Education	143,598
Food and Nutrition: Policy, Tools, and Service	125,827
Delivery	120,021

Key Issues

Increasing gender equity in HIV/AIDS activities and services

Budget Code Information

Budget Code Illionia	<u>ution</u>		
Mechanism ID:	12120		
Mechanism Name:	C-SEP		
Prime Partner Name:	Save the Children		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HKID	400,000	
Narrative:			
None			

Implementing Mechanism Indicator Information

(No data provided.)

Mechanism ID: 12122	Mechanism Name: CRS/OVC/GHAI	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Catholic Relief Services		



Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 3,530,000		
Funding Source Funding Amount		
GHCS (State)	3,530,000	

Africare	Chikwawa Catholic Health Commission	Dedza Catholic Health Commission
D-Tree International	Emmanuel International	Lilongwe Catholic Health Commission
Opportunity International Bank of Malawi	Project Concern International	Save the Children
World Vision	Zomba Catholic Health Commission	

Overview Narrative

Cross-Cutting Budget Attribution(s)

Economic Strengthening	1,057,660	
Education	137,800	
Food and Nutrition: Policy, Tools, and Service Delivery	63,500	
Gender: Reducing Violence and Coercion	102,670	
Human Resources for Health	139,950	

Key Issues

Increasing gender equity in HIV/AIDS activities and services
Increasing women's legal rights and protection
Custom Page 115 of 155



Safe Motherhood

Budget Code Information

Budget Code Information				
Mechanism Name:	chanism ID: 12122 unism Name: CRS/OVC/GHAI urtner Name: Catholic Relief Services			
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Care	НВНС	1,173,076		
Narrative:				
None				
Strategic Area	Budget Code Planned Amount On Hold Amount			
Care	HKID 2,006,924			
arrative:				
None				
Strategic Area Budget Code Planned Amount On Hold Amount				
Prevention	MTCT 350,000			
Narrative:				
None				

Implementing Mechanism Indicator Information

(No data provided.)

Mechanism ID: 12124	Mechanism Name: FANTAII/GHAI	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Academy for Educational Development		
Agreement Start Date: Redacted Agreement End Date: Redacted		
TBD: No	Global Fund / Multilateral Engagement: No	



Total Funding: 0		
Funding Source	Funding Amount	
GHCS (State)	0	

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Human Resources for Health	0	
Trainan Resources for Fleatin	0	

Key Issues

(No data provided.)

Budget Code Information

Badgot Godo Illiotination			
Mechanism ID:	12124		
Mechanism Name:	FANTAII/GHAI		
Prime Partner Name:	: Academy for Educational Development		
Strategic Area	Budget Code Planned Amount On Hold Amount		
Other	OHSS 0		
Narrative:			
None			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Custom Page 117 of 155 FACTS Info v3.8.3.30



Mechanism ID: 12125	Mechanism Name: Scaling Up Palliative Care Services in Malawi	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: African Palliative Care Associa	tion	
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 200,000		
Funding Source Funding Amount		
GHCS (State)	200,000	

Palliative Care Association of	
Malawi (PACAM)	

Overview Narrative

Cross-Cutting Budget Attribution(s)

Gender: Reducing Violence and Coercion	1,760
Human Resources for Health	198,240

Key Issues

Increasing gender equity in HIV/AIDS activities and services Child Survival Activities TB



	12125 Scaling Up Palliative Care Services in Malawi African Palliative Care Association			
Strategic Area	Budget Code Planned Amount On Hold Amount			
Other	OHSS 200,000			
Narrative:				
None				

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12126	Mechanism Name: Feed/OVC/GHAI		
Funding Agency: U.S. Agency for International	Produrement Type: Cooperative Agreement		
Development	Procurement Type: Cooperative Agreement		
Prime Partner Name: Feed the Children			
Agreement Start Date: Redacted	Agreement End Date: Redacted		
TBD: No	Global Fund / Multilateral Engagement: No		

Total Funding: 1,200,000		
Funding Source Funding Amount		
GHCS (State)	1,200,000	

Sub Partner Name(s)

Local CBOs	NuSkin Inc	Orphan Support Africa
Participatory Rural Development Organization	Proctor & Gamble	Save Orphan Ministries
Total Landcare	World Relief	

Overview Narrative



Cross-Cutting Budget Attribution(s)

Construction/Renovation	121,616
Economic Strengthening	135,802
Education	300,000
Food and Nutrition: Commodities	68,790
Food and Nutrition: Policy, Tools, and Service Delivery	144,362
Water	12,547

Key Issues

Increasing women's access to income and productive resources

Budget Code Information

Budget Code information				
Mechanism ID:	12126			
Mechanism Name:	Feed/OVC/GHAI			
Prime Partner Name:	Prime Partner Name: Feed the Children			
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Care	HKID	1,200,000		
Narrative:				
None				

Implementing Mechanism Indicator Information

(No data provided.)

Mechanism ID: 12127	Mechanism Name: DOD/TBD/MDF
Funding Agency: U.S. Department of Defense	Procurement Type: Grant
Prime Partner Name: TBD	



Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: Yes	Global Fund / Multilateral Engagement: No

Total Funding: Redacted		
Funding Source Funding Amount		
Redacted	Redacted	

BLM	Ministry of Health	

Overview Narrative

Cross-Cutting Budget Attribution(s)

Construction/Renovation	Redacted	
Food and Nutrition: Commodities	Redacted	
Gender: Reducing Violence and Coercion	Redacted	
Human Resources for Health	Redacted	

Key Issues

Addressing male norms and behaviors
Military Population
Safe Motherhood
TB
Family Planning

Saager Gode information		
Mechanism ID:	12127	



Mechanism Name: DOD/TBD/MDF Prime Partner Name: TBD			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	НВНС	Redacted	Redacted
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT	Redacted	Redacted
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	HVSI	Redacted	Redacted
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	Redacted	Redacted
Narrative:			
		ı	
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	CIRC	Redacted	Redacted
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HMBL	Redacted	Redacted
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount



HVAB	Redacted	Redacted
Budget Code	Planned Amount	On Hold Amount
HVOP	Redacted	Redacted
Budget Code	Planned Amount	On Hold Amount
MTCT	Redacted	Redacted
Budget Code	Planned Amount	On Hold Amount
HLAB	Redacted	Redacted
	•	•
Budget Code	Planned Amount	On Hold Amount
HVTB	Redacted	Redacted
	Budget Code HVOP Budget Code MTCT Budget Code HLAB	Budget Code Planned Amount Budget Code Planned Amount MTCT Redacted Budget Code Planned Amount Redacted Budget Code Planned Amount HLAB Redacted

(No data provided.)

Mechanism ID: 12129	Mechanism Name: TBD/LM/GDA
Funding Agency: U.S. Agency for International	Procurement Type: Cooperative Agreement
Development Prime Partner Name: TBD	,, ,
Agreement Start Date: Redacted	Agreement End Date: Redacted
	Global Fund / Multilateral Engagement: No



Total Funding: Redacted	
Funding Source	Funding Amount
Redacted	Redacted

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Increasing gender equity in HIV/AIDS activities and services

Budget Code Information

Baaget Ocae IIIIoiiii	u		
Mechanism ID:	12129		
Mechanism Name:	TBD/LM/GDA		
Prime Partner Name:	TBD		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HKID	Redacted	Redacted
Narrative:			
None			

Implementing Mechanism Indicator Information

(No data provided.)



Implementing Mechanism Details

Mechanism ID: 12130	Mechanism Name: Baylor/QCT/GHAI	
Funding Agency: U.S. Agency for International	Description of Trans. Comparative Assessment	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Baylor College of Medicine Children's Foundation Malawi		
Agreement Start Date: Redacted Agreement End Date: Redacted		
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 1,100,227		
Funding Source	Funding Amount	
GHCS (State)	1,100,227	

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

	` _	
Human Resources for Health		40,000

Key Issues

Increasing gender equity in HIV/AIDS activities and services Child Survival Activities Safe Motherhood Workplace Programs

Dauget Oode information		
Mechanism ID:	12130	



Mechanism Name: Baylor/QCT/GHAI Prime Partner Name: Baylor College of Medicine Children's Foundation Malawi			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HKID	100,000	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT	146,748	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	PDCS	293,070	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	PDTX	189,955	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	370,454	
Narrative:			

(No data provided.)

Mechanism ID: 12131	Mechanism Name: Christian Health Association
	of Malawi



Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention	Procurement Type: Cooperative Agreement	
Prime Partner Name: Christian Health Association of Malawi		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 1,875,000		
Funding Source	Funding Amount	
GHCS (State)	1,875,000	

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Construction/Renovation	150,000
Human Resources for Health	325.000

Key Issues

Addressing male norms and behaviors

ΤB

Mechanism ID:	12131		
Mechanism Name:	Christian Health Association of Malawi		
Prime Partner Name: Christian Health Association of Malawi			
Strategic Area	Budget Code	Planned Amount	On Hold Amount



Care	НВНС	250,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT	200,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	HVSI	50,000	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	325,000	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	CIRC	300,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	HVOP 250,000	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	400,000	
Narrative:			



Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	HVTB	100,000	
Narrative:			
None			

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12550	Mechanism Name: TBD/HPSS	
Funding Agency: U.S. Agency for International	Duna sura mana Tura ay Calamanatiyya A sura a manat	
Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: TBD		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: Yes	Global Fund / Multilateral Engagement: No	

Total Funding: Redacted	
Funding Source	Funding Amount
Redacted	Redacted

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

	<u> </u>	
ſ		
	l	l
	Human Resources for Health	IRedacted I
	i idiliali i testalees foi i lealili	redacted

Key Issues



(No data provided.)

Budget Code Information

Mechanism ID:			
Mechanism Name:	18D/HP22		
Prime Partner Name:	TBD		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	Redacted	Redacted
Narrative:			
None			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12590	Mechanism Name: GSM/CIRC/GHAI	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: World Learning		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 0		
Funding Source	Funding Amount	
GHCS (State)	0	

Sub Partner Name(s)

ICHAM	MOH
ICI IAW	IVICII
	CHAM

Overview Narrative



Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Impact/End-of-Program Evaluation

Budget Code Information

Budget Code Illionia				
Mechanism ID:	12590			
Mechanism Name:	GSM/CIRC/GHAI			
Prime Partner Name:	Prime Partner Name: World Learning			
Strategic Area	Budget Code	Planned Amount	On Hold Amount	
Prevention	CIRC	0		
Narrative:				

Implementing Mechanism Indicator Information

(No data provided.)

Mechanism ID: 12638	Mechanism Name: TBD/SSD
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement
Prime Partner Name: TBD	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: Yes	Global Fund / Multilateral Engagement: No

Total Funding: Redacted	
Funding Source	Funding Amount
Redacted	Redacted



Redacted	Redacted

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Construction/Renovation	Redacted
Human Resources for Health	Redacted

Key Issues

Family Planning

Addressing male norms and behaviors Malaria (PMI) Child Survival Activities Safe Motherhood TB

Mechanism ID: Mechanism Name: Prime Partner Name:	TBD/SSD		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HVCT	Redacted	Redacted
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount



Prevention	HMIN	Redacted	Redacted
Narrative:			
None			t.
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	Redacted	Redacted
Narrative:	•		

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 12649	Mechanism Name: TBD/SCM
Funding Agency: U.S. Agency for International	Procurement Type: Cooperative Agreement
Development Prime Partner Name: TBD	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: Yes	Global Fund / Multilateral Engagement: No

Total Funding: Redacted		
Funding Source	Funding Amount	
Redacted	Redacted	
Redacted	Redacted	

Sub Partner Name(s)

(No data provided.)

Overview Narrative



Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Malaria (PMI) Child Survival Activities Safe Motherhood Family Planning

12649 TBD/SCM TBD		
Budget Code	Planned Amount	On Hold Amount
HTXS	Redacted	Redacted
		1
Budget Code	Planned Amount	On Hold Amount
HVCT	Redacted	Redacted
Budget Code	Planned Amount	On Hold Amount
MTCT	Redacted	Redacted
	TBD/SCM TBD Budget Code HTXS Budget Code HVCT	TBD/SCM TBD Budget Code Planned Amount HTXS Redacted Budget Code Planned Amount HVCT Redacted

Implementing Mechanism Indicator Information

(No data provided.)



Implementing Mechanism Details

Mechanism ID: 12940	Mechanism Name: AED/CAP	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Academy for Educational Development		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 1,000,000	
Funding Source	Funding Amount
GHCS (State)	529,030
GHCS (USAID)	470,970

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Gender: Reducing Violence and Coercion	125,000
Human Resources for Health	250,000

Key Issues

(No data provided.)

Budget Code Inform	ation
Mechanism ID:	12940
Mechanism Name:	AED/CAP
Prime Partner Name:	Academy for Educational Development



Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	1,000,000	
Narrative:			
None			

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 13027	Mechanism Name: Preventive Technologies Agreement - Behavioral Surveillance Survey
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement
Prime Partner Name: Family Health International	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 400,000	
Funding Source	Funding Amount
GHCS (State)	400,000

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues



Impact/End-of-Program Evaluation

Budget Code Information

Mechanism ID:	13027		
Mechanism Name:	Preventive Technologie	s Agreement - Behaviora	l Surveillance Survey
Prime Partner Name:	Family Health Internatio	nal	
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	HVSI	400,000	
Narrative:			
None			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

	_ _
Mechanism ID: 13062	Mechanism Name: TBD/Nutrition
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement
Prime Partner Name: TBD	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: Yes	Global Fund / Multilateral Engagement: No

Total Funding: Redacted	
Funding Source	Funding Amount
Redacted	Redacted

Sub Partner Name(s)

(No data provided.)

Overview Narrative



Cross-Cutting Budget Attribution(s)

Food and Nutrition: Policy, Tools, and Service Delivery	Redacted	
Delivery		

Key Issues

(No data provided.)

Budget Code Information

Budget Code Illionii	ution		
Mechanism ID:	13062		
Mechanism Name:	TBD/Nutrition		
Prime Partner Name:	TBD		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HKID	Redacted	Redacted
Narrative:			
None			

Implementing Mechanism Indicator Information

(No data provided.)

Mechanism ID: 13066	Mechanism Name: MTPDS/CAS
Funding Agency: U.S. Agency for International	Procurement Type: Cooperative Agreement
Prime Partner Name: Creative Associates Internation	nal Inc
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 0	
Funding Source	Funding Amount



	GHCS (State)
	GHCS (State)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)

Budget Code Information

Mechanism ID: Mechanism Name: Prime Partner Name:		ernational Inc	
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	0	
larrative:			

Implementing Mechanism Indicator Information

(No data provided.)

Mechanism ID: 13101	Mechanism Name: Health Care Improvement Project
Funding Agency: U.S. Agency for International	Procurement Type: Contract



Development	
Prime Partner Name: University Research Corporation, LLC	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: No	Global Fund / Multilateral Engagement: No

Total Funding: 40,000	
Funding Source	Funding Amount
GHCS (State)	40,000

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Human Resources for Health	20,000

Key Issues

Impact/End-of-Program Evaluation

	13101 Health Care Improvement Project University Research Corporation, LLC		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Care	HKID	40,000	
Narrative:			
None			



(No data provided.)

Implementing Mechanism Details

implementing meenanem betane		
Mechanism ID: 13123	Mechanism Name: TBD/HSS/MOGCCD	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: TBD		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: Yes	Global Fund / Multilateral Engagement: No	

Total Funding: Redacted	
Funding Source Funding Amount	
Redacted	Redacted

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

Hum	an Resources for Health	Redacted
	an recording to the annual control of the control o	. toddotod

Key Issues

Addressing male norms and behaviors
Increasing gender equity in HIV/AIDS activities and services
Increasing women's access to income and productive resources
Increasing women's legal rights and protection



Budget Code Information

Mechanism ID: Mechanism Name: Prime Partner Name:	TBD/HSS/MOGCCD		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	Redacted	Redacted
Narrative:			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 13145	Mechanism Name: Abt Associates: SHOPS	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Abt Associates		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 250,000	
Funding Source Funding Amount	
GHCS (State)	250,000

Sub Partner Name(s)

(No data provided.)

Overview Narrative



Cross-Cutting Budget Attribution(s)

Economic Strengthening	250,000

Key Issues

(No data provided.)

Budget Code Information

Buaget Code Inform			
Mechanism ID:	13145		
Mechanism Name:	Abt Associates: SHOPS		
Prime Partner Name:	: Abt Associates		
Strategic Area	Budget Code Planned Amount On Hold Amount		
Other	OHSS 250,000		
Narrative:			

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

Mechanism ID: 13288	Mechanism Name: TBCares/TB HIV	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: University Research Corporation, LLC		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 540,000		
Funding Source	Funding Amount	
GHCS (State)	540,000	

Sub Partner Name(s)



(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

	I
Construction/Renovation	240,000
Human Resources for Health	250,000

Key Issues

ТВ

Budget Code Information

Budget Code information				
Mechanism ID:	13288			
Mechanism Name:	TBCares/TB HIV			
Prime Partner Name:	: University Research Corporation, LLC			
Strategic Area	Budget Code Planned Amount On Hold Amount			
Treatment	HVTB 540,000			
Narrative:				
None				

Implementing Mechanism Indicator Information

(No data provided.)

Mechanism ID: 13315	Mechanism Name: Columbia/NEPI
Funding Agency: U.S. Department of Health and	
Human Services/Health Resources and Services	Procurement Type: Cooperative Agreement
Administration	



Prime Partner Name: Columbia University		
Agreement Start Date: Redacted Agreement End Date: Redacted		
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 0		
Funding Source Funding Amount		
Central GHCS (State)	0	

СНАМ	Kamuzu College of Nursing	
------	---------------------------	--

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)

Mechanism ID: Mechanism Name: Prime Partner Name:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	0	
Narrative:			
None			



(No data provided.)

Implementing Mechanism Details

Mechanism ID: 13458	Mechanism Name: PIH/EQUIP/GHAI	
Funding Agency: U.S. Agency for International Development	Procurement Type: Cooperative Agreement	
Prime Partner Name: Partners in Hope		
Agreement Start Date: Redacted	Agreement End Date: Redacted	
TBD: No	Global Fund / Multilateral Engagement: No	

Total Funding: 2,438,000				
Funding Source Funding Amount				
GHCS (State)	2,438,000			

Sub Partner Name(s)

1,1 11 19 1	Elizabeth Glaser Pediatric AIDS Foundation	UCLA Program in Global Health
University of California at Los Angeles		

Overview Narrative

Cross-Cutting Budget Attribution(s)

Food and Nutrition: Policy, Tools, and Service Delivery	14,468
Human Resources for Health	1,662,379

Key Issues

ТВ



Sudget Gode Information								
Mechanism ID: 13458								
Mechanism Name:	PIH/EQUIP/GHAI							
Prime Partner Name:	Partners in Hope							
Strategic Area	Budget Code Planned Amount On Hold Amou							
		1 10111100 7 111100111						
Care	HBHC	205,413						
Narrative:								
Strategic Area	Budget Code	Planned Amount	On Hold Amount					
Care	HTXS	136,942						
Narrative:		,-						
None								
None	voire							
Strategic Area	Budget Code	Planned Amount	On Hold Amount					
Care	Care HVCT 136,942							
Narrative:								
Strategic Area	Budget Code	Planned Amount	On Hold Amount					
Care	PDCS	348,744						
Narrative:		,						
None								
Strategic Area	Budget Code	Planned Amount	On Hold Amount					
Care	PDTX	278,143						
Narrative:		,						
Strategic Area	Budget Code	Planned Amount	On Hold Amount					
Other	HVSI	143,398						
<u> </u>		· · · · · · · · · · · · · · · · · · ·						



Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Other	OHSS	136,942	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	HVOP	68,471	
Narrative:			
None			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	590,618	
Narrative:			
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	HLAB	292,216	
Narrative:			
		1	
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Treatment	HVTB	100,171	
Narrative:			
None			

(No data provided.)

Mechanism ID: 13496	Mechanism Name: TBD/PMTCT/DG		
Funding Agency: U.S. Agency for International	Procurement Type: Cooperative Agreement		



Development	
Prime Partner Name: TBD	
Agreement Start Date: Redacted	Agreement End Date: Redacted
TBD: Yes	Global Fund / Multilateral Engagement: No

Total Funding: Redacted				
Funding Source Funding Amount				
Redacted	Redacted			

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Increasing gender equity in HIV/AIDS activities and services Increasing women's legal rights and protection

Mechanism ID: Mechanism Name: Prime Partner Name:	TBD/PMTCT/DG		
Strategic Area	Budget Code	Planned Amount	On Hold Amount
Prevention	MTCT	Redacted	Redacted
Narrative:			



N	\cap	n	Δ

(No data provided.)



USG Management and Operations

1.

Redacted

2.

Redacted

3.

Redacted

4.

Redacted

5.

Redacted

Agency Information - Costs of Doing Business

U.S. Agency for International Development

Agency Cost of Doing Business	Central GHCS (State)	DHAPP	GAP	GHCS (State)	GHCS (USAID)	Cost of Doing Business Category Total
Capital Security Cost Sharing				33,400		33,400
Computers/IT Services				207,104		207,104
ICASS				314,463		314,463
Management Meetings/Profes sional Developement					654,487	654,487
Non-ICASS Administrative Costs					590,600	590,600
Staff Program Travel				30,101	199,009	229,110
USG Renovation				38,932		38,932
USG Staff				351,000	780,904	1,131,904



Total	0	0	0	975,000	2,225,000	3,200,000
Benefits						
Salaries and						

U.S. Agency for International Development Other Costs Details

Category	Item	Funding Source	Description	Amount
Capital Security Cost Sharing		GHCS (State)		33,400
Computers/IT Services		GHCS (State)		207,104
ICASS		GHCS (State)		314,463
Management Meetings/Profession al Developement		GHCS (USAID)		654,487
Non-ICASS Administrative Costs		GHCS (USAID)		590,600
USG Renovation		GHCS (State)		38,932

U.S. Department of Defense

Agency Cost of Doing Business	Central GHCS (State)	DHAPP	GAP	GHCS (State)	GHCS (USAID)	Cost of Doing Business Category Total
Computers/IT Services				30,000		30,000
USG Staff Salaries and Benefits				50,000		50,000
Total	0	0	0	80,000	0	80,000

U.S. Department of Defense Other Costs Details

Category	Item	Funding Source	Description	Amount
Computers/IT		GHCS (State)		30,000



Services		

U.S. Department of Health and Human Services/Centers for Disease Control and Prevention

Agency Cost of Doing Business	Central GHCS (State)	DHAPP	GAP	GHCS (State)	GHCS (USAID)	Cost of Doing Business Category Total
Capital Security Cost Sharing			297,142			297,142
Computers/IT Services			30,000			30,000
ICASS				800,000		800,000
Management Meetings/Profes sional Developement			228,500			228,500
Non-ICASS Administrative Costs			332,382			332,382
Staff Program Travel			93,919			93,919
USG Staff						
Salaries and Benefits			2,070,057			2,070,057
Total	0	0	3,052,000	800,000	0	3,852,000

U.S. Department of Health and Human Services/Centers for Disease Control and Prevention Other Costs Details

Category	Item	Funding Source	Description	Amount
Capital Security		CAR		007.440
Cost Sharing		GAP		297,142
Computers/IT		0.4.5		00.000
Services		GAP		30,000



ICASS	GHCS (State)	800,000
Management		
Meetings/Profession	GAP	228,500
al Developement		
Non-ICASS		
Administrative Costs	GAP	332,382

U.S. Department of State

Agency Cost of Doing Business	Central GHCS (State)	DHAPP	GAP	GHCS (State)	GHCS (USAID)	Cost of Doing Business Category Total
Computers/IT Services				10,000		10,000
ICASS				120,000		120,000
Management Meetings/Profes sional Developement				45,000		45,000
Staff Program Travel				80,628		80,628
USG Staff Salaries and Benefits				440,000		440,000
Total	0	0	0	695,628	0	695,628

U.S. Department of State Other Costs Details

Category	Item	Funding Source	Description	Amount
Computers/IT		CHCS (State)		10,000
Services		GHCS (State)		10,000
ICASS		GHCS (State)		120,000
Management		CLICC (Ctata)		45.000
Meetings/Profession		GHCS (State)		45,000



al Developement		
ai Developernent		

U.S. Peace Corps

Agency Cost of Doing Business	Central GHCS (State)	DHAPP	GAP	GHCS (State)	GHCS (USAID)	Cost of Doing Business Category Total
Non-ICASS Administrative Costs				4,560		4,560
Peace Corps Volunteer Costs				91,173		91,173
Staff Program Travel				12,012		12,012
USG Staff Salaries and Benefits				36,555		36,555
Total	0	0	0	144,300	0	144,300

U.S. Peace Corps Other Costs Details

Category	Item	Funding Source	Description	Amount
Non-ICASS		CLICS (State)		4.500
Administrative Costs		GHCS (State)		4,560