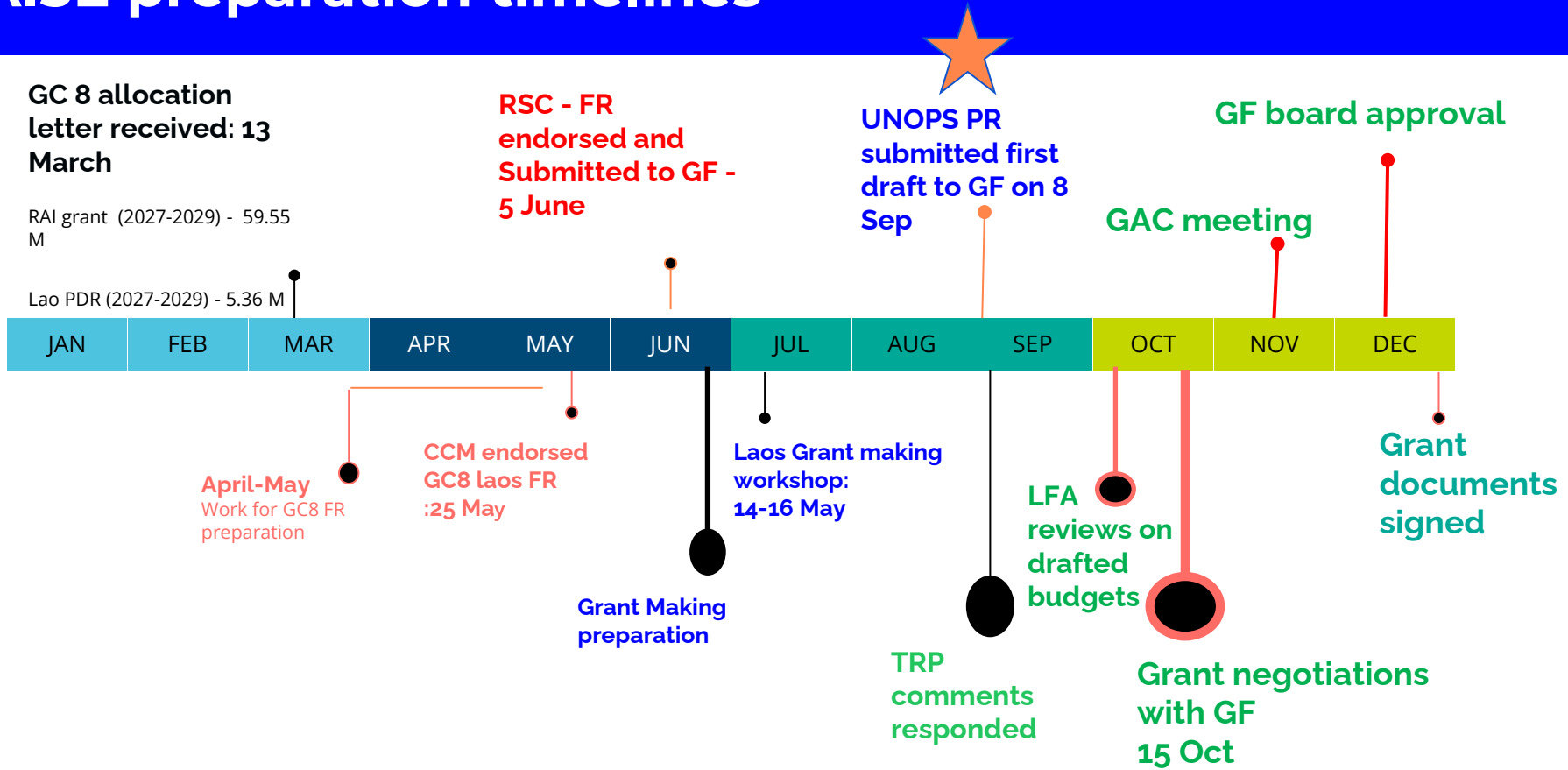
RAI5E Grant Making update

Joint Meeting of Executive, Oversight and Resource Mobilization Committee

Location: Lao PDR
Date: 18 Sep 2026

RAI5E preparation timelines



TRP comments

TRP comments	Responded
High program management costs across multiple countries and implementers limit allocative efficiency and create a risk of crowding out priority malaria elimination interventions	Program management costs fell from 31% to 29% during grant-making by streamlining staff, sharing personnel costs across projects, and minimizing administrative cost to reallocate savings into priority programme activities.
Regional learning and technical capacity are not sufficiently embedded in national workforce and institutional capacity strategies	Lao PDR has made substantial progress toward programme integration through increased domestic funding and integrated operations. Key milestones include: - Funding: A US$17.9 million government commitment (2018–2026),and continues to increase its investment in malaria elimination - Systems: Surveillance and supply chains are now embedded in national platforms (PHEOC-NNDSS, DPF-MOH). - Workforce: DCDC is taking over as PR, and Village Malaria Workers are joining the Village Health Volunteer network.
The TRP requests countries to identify and formalize collaboration with legacy partners, including local NGOs, policy centers and workforce training institutions. These partnerships should strengthen technical support and collect or archive existing training modules to support curriculum, program development, and advocacy for workforce development and training.	Lao PDR is formalizing its partner network under the Roadmap to Malaria Integration 2024–2030 to secure a sustainable, nationally managed program. CMPE will consolidate past training resources into a central Ministry of Health repository and embed core malaria competencies into education and routine training

GC7 (RAI4E) and GC8 (RAI5E) budget comparison - By entity

	GC7 (RAI4E)		GC8 (RAI5E) grant making	
Entity	Allocation (USD)	%	Allocation (USD)	%
CMPE	7,220,067	49.15%	3,572,296	66.64%
CHIAs	1,114,481	7.59%	230,000	4.29%
PEDA	1,121,392	7.63%	230,000	4.29%
WHO	1,605,097	10.93%	375,237	7.00%
DCDC	122,772	0.84%	524,147	9.78%
UNOPS	1,970,070	13.41%	428,842	8.00%
HPA	1,200,700	8.17%	0	
MPSC	214,149	1.46%	0	
DPF	121,802	0.83%	0	
Total GF fund	**14,690,530**	**100.00%**	**5,360,522**	**100.00%**

GC7 (RAI4E) and GC8 (RAI5E) budget comparison - By Module

	GC7 (RAI4E)		GC8 grant making	
Modules	Allocation (USD)	%	Allocation (USD)	%
Case management	4,486,450	31%	1,606,357	30%
Program management	4,318,167	29%	1,572,367	29%
RSSH: Health financing systems	125,905	1%	20,758	0.4%
RSSH: Health products management systems	242,332	2%	81,339	2%
RSSH: Health sector governance and integrated people-centered services	383,025	3%	350,689	7%
RSSH: Monitoring and evaluation systems	2,548,448	17%	1,117,029	21%
RSSH/PP: Human resources for health (HRH) and quality of care	817,425	6%	229,546	4%
RSSH/PP: Laboratory systems	81,485	1%	116,446	2%
Vector control	708,917	5%	265,990	5%
Specific prevention interventions (SPI)	978,376	7%	0	
Total GF fund	**14,690,530**		**5,360,522**	**100%**

Thank You