

Table 1: Budget Breakdown by Mechanism
U.S. President's Malaria Initiative - Senegal
Planned Malaria Obligations for FY 2020
Revised July 26, 2020

| Mechanism | Activity | Budget | % |
|---|--|---------------------|-------------|
| PMI VectorLink | Entomologic monitoring and IRS implementation in 4 districts | \$4,320,000 | 19% |
| Environmental Compliance Operational Support (ECOS) | Environmental monitoring for IRS in 4 districts | \$40,000 | 0% |
| Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria | Procurement of ITNs, SP-AQ for SMC, RDTs, ACTs, rectal artesunate, injectable artesunate, and management, warehousing and distribution costs | \$7,730,527 | 34% |
| Integrated Service Delivery and Health Behaviors (ISD-HB) | SMC operational costs and SBC materials related to SMC | \$1,575,000 | 7% |
| TBD Senegal Bilateral | Routine ITN distribution, SBC related to ITN use, training for MiP, implementation of SMC, training and supervision for malaria case management and community case management in health huts, support for DHIS2 implementation, and assistance with the development and monitoring of the FARA | \$2,802,000 | 12% |
| Senegal Health FARA | Therapeutic efficacy monitoring, training of healthcare workers and lab technicians, supervision and coordination, training and retraining of DSDOMs for the implementation of PECADOM, SBC interventions, implementation of M&E and malariology course, case investigation, and supervision at peripheral levels of the health system | \$3,389,460 | 15% |
| Promoting the Quality of Medicines (PQM) | Antimalarial drug quality monitoring activities | \$200,000 | 1% |
| MEASURE DHS | Technical assistance for the cDHS | \$150,000 | 1% |
| Peace Corps | Support malaria-related Peace Corps small project assistance (SPA) grants | \$10,000 | 0% |
| Governance for Local Development (GOLD) | Support to local government to include malaria and other health priorities in development plans and increase participation of communities in decision-making regarding health issues | \$150,000 | 1% |
| New Partners Initiative | Support for local CSOs to advocate for increased domestic resources for malaria control | \$75,000 | 0% |
| Digital Square | Support for Digital Community Health Initiative | \$168,750 | 1% |
| Civis Analytics | Support for M-DIVE platform | \$168,750 | 1% |
| CDC IAA | Staffing costs, two entomological TDYs, and one SM&E TDY | \$316,669 | 1% |
| USAID | Staffing and administration costs | \$1,403,844 | 6% |
| TOTAL | | \$22,500,000 | 100% |

Table 2: Budget Breakdown by Activity
U.S. President's Malaria Initiative - Senegal
Planned Malaria Obligations for FY 2020
Revised July 26, 2020

| Proposed Activity | Mechanism | Budget (in \$) | Geographic Reach of PMI Activity | | Description of Proposed Activity |
|--|---|----------------|---|---|--|
| | | | If coverage is focused by region(s), name(s) of region(s) | If coverage is focused by district(s), name(s) of district(s) | |
| VECTOR CONTROL | | | | | |
| Entomological Monitoring | | | | | |
| Support Entomologic Monitoring | PMI VectorLink | \$550,000 | To Be Determined | To Be Determined | Support for entomologic monitoring including insecticide resistance assays including molecular and biochemical assays, vector behavior (biting rates, resting densities), parity rates, sporozoite rates, and species identification (including molecular analyses). Residual efficacy of sprayed insecticide will be assessed at the new IRS sites. Fewer sites will be chosen and the frequency of the collection at some sites will be increased to monthly. Training will include a review of the SOPs for all of the team members working in the field. |
| Subtotal : \$550,000 | | | | | |
| Insecticide-Treated Nets | | | | | |
| Procure ITNs for Continuous Distribution Channels | Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria | \$1,968,279 | Nationwide | | Procurement of 723,632 ITNs for routine distribution channels including ANC, general consultation, community and school-based channels. The total need for 2021 for routine distribution is estimated at 1,598,709 but there is an expected carry over of 1.0 million ITNs. The overall allocation of ITNs across routine distribution channels is general consultation 50%, ANC 24%, schools 10% and community organizations 16%. |
| Distribute ITNs for Continuous Distribution Channels | USAID | \$20,000 | Nationwide | | External evaluation of the Ministry of Health and Social Action (MSAS) internal controls to ensure proper controls are in place to store and distribute ITNs through government systems |
| Distribute ITNs for Continuous Distribution Channels | PMI VectorLink | \$300,000 | Nationwide | | Transport, support materials, and supervision for routine distribution channels |

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|--|---|-------------|------------|---------------------------------|---|---|
| Distribute ITNs for Mass Campaigns | TBD Senegal Bilateral | \$100,000 | | DAKAR | To Be Determined | Develop and implement urban-adapted interventions for ITN distribution and utilization. |
| Procure ITNs for Mass Campaigns | Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria | \$2,488,801 | Nationwide | | | Procurement of 687,514 PBO nets for pre-placement in advance of the 2022 universal coverage campaign. PBO nets are being purchased due to data showing continued widespread pyrethroid resistance. |
| Subtotal : \$4,877,080 | | | | | | |
| Indoor Residual Spraying | | | | | | |
| IRS Implementation | PMI VectorLink | \$2,836,000 | | KAFFRINE, KEDOUGOU, TAMBACOUNDA | KEDOUGOU, KOUMPENTOUM, KOUNGHEUL, MAKALAKOLIBANTANG | IRS implementation in 4 districts in the Kaffrine, Tambacounda and Kedougou regions. Budget includes support for planning, training, and payment of spray operators |
| Procure Insecticides for IRS | PMI VectorLink | \$634,000 | | KAFFRINE, KEDOUGOU, TAMBACOUNDA | KEDOUGOU, KOUMPENTOUM, KOUNGHEUL, MAKALAKOLIBANTANG | Procurement of insecticide for implementation in 4 districts |
| Support Independent Environmental Monitoring | Environmental Compliance Operational Support (ECOS) | \$40,000 | | KAFFRINE, KEDOUGOU, TAMBACOUNDA | KEDOUGOU, KOUMPENTOUM, KOUNGHEUL, MAKALAKOLIBANTANG | Environmental monitoring for IRS in 4 districts |
| Subtotal : \$3,510,000 | | | | | | |
| SBC for Vector Control | | | | | | |
| SBC Implementation for Prevention | Senegal Health FARA | \$110,000 | | KAFFRINE, KEDOUGOU, TAMBACOUNDA | KEDOUGOU, KOUMPENTOUM, KOUNGHEUL, MAKALAKOLIBANTANG | Social mobilization at the community level for IRS |
| SBC Implementation for Prevention | Senegal Health FARA | \$30,000 | | KAOLACK | | Support for SBC messaging around ITN use at the operational level, targeting the whole community but with an emphasis on pregnant women and children under five. Channels of communication will include IPC using CHWs, as well as local radios, drama, etc.. Focus on high burden districts of the central region of Kaolack.. |

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|-----------------------------------|-----------------------|-----------|--|---|
| SBC Implementation for Prevention | TBD Senegal Bilateral | \$120,000 | DIORBEL, KEDOUGOU, KOLDA,TAMBA COUNDA | Support for SBC messaging around ITN use at the operational level, targeting the whole community but with an emphasis on pregnant women and children under five. Channels of communication will include IPC using CHWs, as well as local radios, drama, etc.. Focus on districts in high burden regions in Central and Southeast Senegal. |
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Subtotal : \$260,000

Total : \$9,197,080

DRUG-BASED PREVENTION

Prevention of Malaria in Pregnancy

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|--------------------|-----------------------|-----------|--|---|
| MIP Implementation | TBD Senegal Bilateral | \$300,000 | DIORBEL, KEDOUGOU, KOLDA, TAMBACOUNDA | Support includes training for new health facility-level providers as needed on prevention and treatment of malaria during pregnancy. This includes topics such as the importance of ITN use in pregnancy, diagnosis, and management of MiP, counseling and interpersonal communication skills. Support will continue for ANC outreach activities at health huts. Activities will follow district-level priorities as described in regional and district action plans. |
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|--------------------|---------------------|----------|---------|---|
| MIP Implementation | Senegal Health FARA | \$50,000 | KAOLACK | Support includes training for new health facility-level providers as needed on prevention and treatment of malaria during pregnancy. This includes topics such as the importance of ITN use in pregnancy, diagnosis, and management of MiP, counseling and interpersonal communication skills. Support will continue for ANC outreach activities at health huts. Activities will follow district-level priorities as described in regional and district action plans. |
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Subtotal : \$350,000

SMC

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|---------------------------------|---|-------------|--|---|---|
| Procure SMC-Related Commodities | Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria | \$1,535,219 | DIORBEL, KAOLACK, KEDOUGOU, KOLDA, TAMBACOUNDA | BAKEL, DIANKE MAKHAN, DIORBEL, GOUDIRY, KAOLACK, KEDOUGOU, KIDIRA, KOLDA, KOUMPENTOUM, MAKA COLIBANTANG, MYF, SALEMATA, SARAYA, TAMBACOUNDA, TOUBA, VELINGARA | Purchase of 3,936,459 doses of co-blister SP-AQ for SMC implementation with a target of 833,379 children, targeting the entire regions of Kedougou, Tambacounda, and Kolda, and districts with higher incidence in Touba, Diourbel and Kaolack. There will be 3 rounds of distribution in all targeted areas aside from Kedougou, which will have 4 rounds. |
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|-----------------------------------|---|-------------|---|--|--|
| SMC Implementation | Integrated Service Delivery and Health Behaviors (ISD-HB) | \$1,500,000 | DIOURBEL, KEDOUGOU, KOLDA, TAMBACOUNDA | BAKEL, DIANKE MAKHAN, DIOURBEL, GOUDIRY, KAOLACK, KEDOUGOU, KIDIRA, KOLDA, KOUMPENTOUM, MAKA COLIBANTANG, MYF, SALEMATA, SARAYA, TAMBACOUNDA, TOUBA, VELINGARA | Operational costs for SMC implementation at the operational level, budget includes planning, training, implementation, supervision, monitoring, direct observation of treatment doses on all 3 days, transportation, materials, equipment, and campaign evaluation. |
| SMC Implementation | Senegal Health FARA | \$300,000 | SEDHIOU | | Support for a second year of a comprehensive exit strategy for the region of Sedhiou, including increasing the coverage of DSDOM and implementing year round PECADOM+, SBC interventions, and enhanced surveillance. For the operational level activities, the NMCP will transfer funds to the regions/districts to support implementation of their local plans. |
| Subtotal : \$3,335,219 | | | | | |
| SBC | | | | | |
| SBC Implementation for Prevention | Senegal Health FARA | \$100,000 | DIOURBEL, KAOLACK, KEDOUGOU, KOLDA, TAMBACOUNDA | | Promotion of SMC through radio spots, community meetings, and house-to-house visits in the four regions targeted for SMC, including the campaign launch. Messaging will prioritize SBC refusal reasons that vary by region including but not limited to: concerns about side effects, intervention fatigue, scheduling, etc. For the operational level activities, the NMCP will transfer funds to the regions/districts to support implementation of their local plans. |
| SBC Implementation for Prevention | Integrated Service Delivery and Health Behaviors (ISD-HB) | \$75,000 | | | Procurement of SBC materials for SMC. |
| SBC Implementation for Prevention | Senegal Health FARA | \$150,000 | KEDOUGOU, KOLDA, SEDHIOU, TAMBACOUNDA | | Support SBCC interventions focusing on IPTp uptake. Activities will be focused on districts in the regions of Kedougou, Tambacounda, Sedhiou and Kolda according to national policies and in coordination with SBCC activities related to other technical areas. For the operational level activities, the NMCP will transfer funds to the regions/districts to support implementation of their local plans. |
| Subtotal : \$325,000 | | | | | |
| Total : \$4,010,219 | | | | | |

CASE MANAGEMENT**Procure Case Management-Related Commodities**

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|----------------------------------|---|-----------|------------|---|
| Procure RDTs | Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria | \$920,000 | Nationwide | Procurement of 2,000,000 monospecies RDTs (<i>P. falciparum</i>) |
| Procure ACTs | Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria | \$520,000 | Nationwide | Procurement of a total of 800,000 ACT, 60% AL to be deployed mostly in the high-burden regions where SMC is implemented, and 40% ASAQ for the remaining areas |
| Procure Drugs for Severe Malaria | Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria | \$21,350 | Nationwide | Procurement of 42,700 rectal artesunate suppositories for community health workers and remote health posts for pre-transfer treatment of severe malaria cases, targeting 6000 sites: 2000 health huts, 2000 PECADOM villages, and 2000 health posts |
| Procure Drugs for Severe Malaria | Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria | \$121,000 | Nationwide | Procurement of 50,000 doses of injectable artesunate |

Subtotal : \$1,582,350**Case Management Implementation**

| | | | | |
|---------------------------------|-----------------------|-----------|---|--|
| Facility-based case management | TBD Senegal Bilateral | \$340,000 | DIOURBEL, KEDOUGOU, KOLDA, TAMBACOUNDA | Support for training and supervision of malaria case management at all levels of the public health system. |
| Facility-based case management | Senegal Health FARA | \$60,000 | KAOLACK | Support for training and supervision of malaria case management at all levels of the public health system. |
| Community-based case management | TBD Senegal Bilateral | \$442,000 | DIOURBEL, KEDOUGOU, KOLDA, TAMBACOUNDA | Support for community case management of malaria at health huts by community health workers, includes training, supervision, and monitoring of CHWs. |
| Community-based case management | Senegal Health FARA | \$80,000 | KAOLACK | Support for community case management of malaria at health huts by community health workers, includes training, supervision, and monitoring of CHWs. |

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| Community-based case management | Senegal Health FARA | \$1,130,000 | Nationwide | <p>BAKEL, BIRKELANE, BOUNKILING, DIANKE MAKHAN, DIOFFIOR, DIOURBEL, GOUDIRY, GOUDOMP, GUNGUINEO, JOAL, KAFFRINE, KAOLACK, KEDOUGOU, KEUR MASSAR, KIDIRA, KOLDA, KOUMPENTOUM, KOUNGHEUL, MAKAL COLIBANTANG, MALEM, MBACKE, MYF, NDOFFANE, NIORO, PASSY, POUT, SALEMATA, SARAYA, SEDHIOU, SOKONE, TAMBACOUNDA, THIADIAYE, THIES, TIVAOUANE, TOUBA, VELINGARA</p> <p>DAKAR, DIOURBEL, FATICK, KAFFRINE, KAOLACK, KEDOUGOU, KOLDA, SEDHIOU, TAMBACOUNDA, THIES</p> | <p>Training and refresher training of existing and new community health workers (DSDOMs) and logistics to support 35 districts for the implementation of PECADOM+, PECADaara, and PECAEcole, including transportation and supervision. Also includes year-long implementation of PECADOM+ in Kedougou and the districts of Diankemakha and Tambacounda in the region of Tambacounda. For 2021, we anticipate a total of ~3,000 DSDOMs with ~2,000 DSDOMs who implement PECADOM+ activities. For the operational level activities, the NMCP will transfer funds to the regions/districts to support implementation of their local plans.</p> |
| Private sector case management | Senegal Health FARA | \$100,000 | Nationwide | | <p>Support for training and supervision of malaria case management in the private sector.</p> |
| Support Therapeutic Efficacy Study | Senegal Health FARA | \$170,000 | To Be Determined | | <p>Therapeutic efficacy monitoring of first-line ACTs in 2 sentinel sites , including molecular testing of samples for resistance monitoring in Senegal reference laboratory (part of PARMA network)</p> |
| Private sector case management | TBD Senegal Bilateral | \$100,000 | DAKAR | | <p>Development and testing of innovative approaches to improving malaria service provision in the private sector.</p> |
| Other Case Management Implementation | Senegal Health FARA | \$160,000 | Nationwide | | <p>Training and refresher training of 16 laboratory technicians from health facilities at the district level, military medical centers, and hospitals for microscopy (5 day training). Trainees are selected based on personnel needs and/or diagnostic performance recorded in previous supervisory reports. Annual supportive supervision of 140 laboratories from health facilities at the district level, military medical centers, and hospitals. Regional workshops with laboratory technicians to read thick smear slides from health facilities and a slide bank to ensure quality and improve performance of diagnosis with microscopy. Annual contract for maintenance of microscopes both at training facilities and health facilities at the district level, military medical centers, and hospitals.</p> |

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| Other Case Management Implementation | Senegal Health FARA | \$40,000 | Nationwide | | Support for the implementation of quality control programs for both microscopy and RDTs (both upon arrival in-country and in the field) in conjunction with the NMCP and UCAD at all levels of the health system, including the private sector. |
| Other Case Management Implementation | Senegal Health FARA | \$15,000 | | LOUGA, MATAM, ST LOUIS | Support for the implementation of low-dose primaquine in pre-elimination regions, including refresher training and adverse event surveillance. This is complimentary to the support IDB supports for this activity, including drug procurement. For the operational level activities, the NMCP will transfer funds to the regions/districts to support implementation of their local plans. |
| Subtotal : \$2,637,000 | | | | | |
| SBC | | | | | |
| SBC Implementation for Case Management | TBD Senegal Bilateral | \$200,000 | | DIOURBEL, KEDOUGOU, KOLDA, TAMBACOUNDA | IPC and mass media in PMI priority high burden regions to improve care seeking behaviors for suspected malaria (febrile illness) |
| SBC Implementation for Case Management | Senegal Health FARA | \$50,000 | | KAOLACK | IPC and mass media in PMI priority high burden regions to improve care seeking behaviors for suspected malaria (febrile illness) |
| Subtotal : \$250,000 | | | | | |
| Total : \$4,469,350 | | | | | |
| SUPPLY CHAIN | | | | | |
| In-Country Supply Chain | | | | | |
| Warehousing and Distribution | Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria | \$155,878 | Central | | PMI funds will be used to cover management and delivery fees for all PMI-procured malaria commodities (with the exception of ITNs as these do not transit through the CMS). This is calculated at 5% of the commodity costs and is applied to all partners that procure commodities for Senegal. |
| Pharmaceutical Management Systems Strengthening | TBD Senegal Bilateral | \$400,000 | Central | | Support for the NMCP to improve quantification through regular consumption data collection at the peripheral level, monitoring reporting and orders |
| Ensuring drug and other health product quality | Promoting the Quality of Medicines (PQM) | \$200,000 | Central | | Sampling and testing of antimalarials at 9 sites across the country, with technical assistance for accreditation of drug quality monitoring. |
| Subtotal : \$755,878 | | | | | |
| Total : \$755,878 | | | | | |

MONITORING, EVALUATION & RESEARCH**Surveillance, Monitoring, and Evaluation**

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|------------------------------|-----------------------|-----------|------------|------------------------------|---|
| Support surveys | MEASURE DHS | \$150,000 | Nationwide | | Technical assistance for the cDHS |
| Support Routine Surveillance | TBD Senegal Bilateral | \$250,000 | Nationwide | | Support for DHIS2 implementation with an emphasis on improving data quality at the district-level and health facility levels. |
| Support Routine Surveillance | Senegal Health FARA | \$180,000 | Nationwide | | Peer supervision at the regional and district levels. Supervision will be performed by malariologists (graduates from the NMCP-run malariology course) identified in the neighboring districts. Central-level staff will join in some of the supervisory visits, but not routinely in all visits. |
| SM&E for Elimination | Senegal Health FARA | \$300,000 | | LOUGA, MATAM, ST LOUIS | Support for operational costs of case investigations and training of health workers and CHWs to perform these investigations, including weekly reporting integrated into DHIS-2 in districts where incidence is <5 per 1,000 (with support from Path/MACEPA). For the operational level activities, the NMCP will transfer funds to the regions/districts to support implementation of their local plans. |
| Support Routine Surveillance | Digital Square | \$168,750 | | | Digital Community Health Initiative: ecosystem assessment and support for the design and implementation of digital health program at the community level |
| Support Routine Surveillance | Civis Analytics | \$168,750 | | | Support for the Malaria Data Integration and Visualization for Elimination (M-DIVE) platform |
| Support Routine Surveillance | TBD Senegal Bilateral | \$100,000 | Central | | Provide technical assistance to central level agencies of the MOH for reinforcement of the HMIS. |
| Other SM&E Implementation | Senegal Health FARA | \$95,000 | Central | | Implementation of the malaria monitoring and evaluation course that includes surveillance in the context of elimination. This cost will include 2 sessions with 25 students per session. Overall, the target is 400 individuals trained. To date, 115 have been trained. |

Subtotal : \$1,412,500**Operational Research**

OR Implementation

NA

Subtotal : \$0**Total : \$1,412,500**

OTHER HEALTH SYSTEMS STRENGTHENING

| | | | | |
|---|---|-----------|------------|--|
| Support to Peace Corps | Peace Corps | \$10,000 | Nationwide | Support malaria-related Peace Corps small project assistance (SPA) grants |
| Other Health Systems Strengthening Implementation | Senegal Health FARA | \$100,000 | Nationwide | Funding will be provided for a 5th year to support a malariology course that will be offered to health staff at various levels to allow for in-country training opportunities. Since FY19, PMI resources have supported decentralized malariology courses using a training-of-the-trainer model. Regional level health officers (graduates from the Central level course) will implement this course. The final target is 1350 health post nurses. In FY19 period, 235 health post nurses in the regions of Sedhiou, Kedougou, Kolda, Tambacounda and Louga were trained. This course will target health post chief nurses and nurse-midwives. |
| Other Health Systems Strengthening Implementation | Senegal Health FARA | \$35,000 | Central | Support to the CCPLP (Malaria Partners Coordination Committee) to bring together NMCP staff, the Global Fund, Islamic Development Bank, and representatives from different regions and partners to facilitate information sharing and ensure better coordination of malaria-related activities across the country. |
| Other Health Systems Strengthening Implementation | Senegal Health FARA | \$18,000 | Central | Support for participation in international scientific and professional meetings to provide NMCP staff (central and field level) with opportunities to learn best practices, share experiences, and develop networks. Potential meetings include the American Society of Tropical Medicine and Hygiene and the Pan African Malaria conferences. This includes support for 2-4 trips. |
| Other Health Systems Strengthening Implementation | Governance for Local Development (GOLD) | \$150,000 | Nationwide | Support for the local government to include malaria and other health priorities in their local development plans and increase participation of communities in decision-making regarding health issues |
| Other Health Systems Strengthening Implementation | Senegal Health FARA | \$50,000 | Nationwide | Support for the NMCP to provide technical assistance from the central level, in conjunction with GOLD to include malaria in local development plans |
| Other Health Systems Strengthening Implementation | TBD Senegal Bilateral | \$450,000 | Central | Preparation and monitoring of the G2G agreement between PMI and the NMCP (fixed amount reimbursement agreement, FARA); technical assistance for management and data reporting. Activity is both at the central and regional levels. |

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| Other Health Systems Strengthening Implementation | New Partners Initiative | \$75,000 | 1) Support local Civil Society Organizations (CSOs) to advocate for a malaria line item in the national budget and for increased Government of Senegal funding of malaria; 2) Support local CSOs to advocate for timely procurement of SP to prevent stockouts and increase purchase of malaria commodities |
| Other Health Systems Strengthening Implementation | Senegal Health FARA | \$66,460 | Support for the DAGE to ensure the decentralisation of financial support via direct financing (FARA) across the health system is implemented according to the official procedures and building capacity of the central and operational level for financial tracking |
| Subtotal : \$954,460 | | | |
| Total : \$954,460 | | | |
| STAFFING & ADMINISTRATION | | | |
| Vector Control-Related CDC TDY | CDC IAA | \$29,000 | TDY of entomologist to support in entomologic monitoring activities |
| SM&E-Related CDC TDY | CDC IAA | \$10,000 | TDY of epidemiologist to support surveillance, SM&E activities with the NMCP |
| USAID In-Country Staffing and Administration: Staffing | USAID | \$933,844 | Personnel for one PMI/USAID resident advisor and 3 100% PMI-dedicated foreign service national staff, including one data specialist; in-country costs for the PMI/CDC Resident Advisor |
| USAID In-Country Staffing and Administration: Administration | USAID | \$450,000 | Administration costs of 2% |
| CDC In-Country Staffing and Administration | CDC IAA | \$277,669 | Staffing costs for one PMI/CDC Resident Advisor |
| Subtotal : \$1,700,513 | | | |
| Total : \$1,700,513 | | | |
| GRAND TOTAL: | \$ | 22,500,000 | |