

**Table 1: Budget Breakdown by Mechanism**  
**U.S. President's Malaria Initiative - Kenya**  
**Planned Malaria Obligations for FY 2020**  
*Revised November 3, 2023*

<b>Mechanism</b>	<b>Activity</b>	<b>Budget</b>	<b>%</b>
PMI VectorLink	Entomological monitoring; IRS implementation and insecticide procurement	\$7,950,000	24%
PMI Kinga Malaria	Entomological monitoring; net durability monitoring; and IRS implementation	\$967,000	3%
USAID Supply Chain Strengthening	Provide logistical support for LLIN distribution; support warehousing and distribution of PMI commodities (e.g. ACTs, RDTs, and severe malaria medications)	\$2,100,182	6%
Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria	Procurement of ITNs, RDTs, ACTs, SP, and severe malaria medicines	\$10,344,203	31%
Environmental Compliance Operational Support (ECOS)	Independent environmental monitoring	\$40,000	0%
Breakthrough ACTION	SBC activities at central and county level; Malaria Behavior Survey	\$1,650,000	5%
PMI Impact Malaria	Strengthening malaria diagnosis and appropriate treatment, including MIP; support to DNMP for MIP and case management	\$2,550,000	8%
Global Health Supply Chain Procurement and Supply Management (GHSC PSM) TO5 (Afya Ugavi)	Strengthen leadership and coordination with the DNMP and other supply chain partners; forecasting and quantification; support county pharmacists monitoring of commodity stock status; support net accountability	\$1,720,000	5%
Promoting the Quality of Medicines Plus (PQM+)	Antimalarial drug quality monitoring; support National Quality Control Lab	\$300,000	1%
Health IT	DHIS2 system support; development of malaria indicator, malaria commodity, and malaria EPR dashboards	\$300,000	1%
PMI Measure Malaria	Support DNMP SM&E activities: COEs, annual report, regional malaria epidemic threshold setting	\$1,909,820	6%
Country Health Information Systems and Data Use (CHISU)	Support EPR activities and Frontline FELTP training.	\$160,990	0%
Health Policy Plus (HP+)	Support in-depth costing for malaria control; Technical assistance to build NMP capacity with regard to program implementation, management, and leadership	\$600,000	2%
Tupime Kaunti (formerly CMLAP)	Program support to CHMTs and SCHMTs; support for roll out of scanable forms	\$505,682	2%

Malaria Data Integration and Visualization for Eradication (M-DIVE)	Support for PMI data analytics	\$251,250	1%
TBD Kenya Bilateral	Support local development organizations	\$0	0%
Frontier Health Markets (FHM) Engage	Support private sector malaria control activities	\$200,000	1%
WHO Umbrella	Support WHO NPO	\$177,000	1%
CDC IAA	Technical assistance visits for entomological monitoring, case management, SBC, and SM&E; FELTP; CDC staffing & administration costs	\$389,850	1%
USAID	Staffing and administration	\$1,384,023	4%
<b>TOTAL</b>		<b>\$33,500,000</b>	<b>100%</b>

**Table 2: Budget Breakdown by Activity**  
**President's Malaria Initiative - KENYA**  
**Planned Malaria Obligations for FY 2020**  
*Revised November 3, 2023*

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)	
<b>VECTOR CONTROL</b>					
<b>Entomological Monitoring</b>					
Support Entomologic Monitoring	PMI VectorLink	\$450,000	Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Turkana, Vihiga		Continue insecticide resistance monitoring (including resistance intensity) in endemic/epidemic counties in IRS and non-IRS areas. Support monthly monitoring of malaria vector distribution, bionomics, and insecticide resistance profiles in 10 sites. Additional collections will undertaken by community-based teams in Vihiga and Kakamega Counties. Monitoring of spray quality and decay rate in areas where spraying is done. Capacity building will primarily be through inclusion of county health officers in the entomological monitoring activities. For capacity building, PMI will provide transport and per diem for up to two members of the county health teams during mosquito collection periods in their respective counties.
Support Entomologic Monitoring	PMI Kinga Malaria	\$150,000	Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Turkana, Vihiga		Continue insecticide resistance monitoring (including resistance intensity) in endemic/epidemic counties in IRS and non-IRS areas. Support monthly monitoring of malaria vector distribution, bionomics, and insecticide resistance profiles in 10 sites. Additional collections will undertaken by community-based teams in Vihiga and Kakamega Counties. Monitoring of spray quality and decay rate in areas where spraying is done. Capacity building will primarily be through inclusion of county health officers in the entomological monitoring activities. For capacity building, PMI will provide transport and per diem for up to two members of the county health teams during mosquito collection periods in their respective counties.

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Support ITN Durability Monitoring	PMI Kinga Malaria	\$150,000		To Be Determined	Support for prospective ITN monitoring to follow ITNs distributed during the 2020/21 universal coverage campaign, and will provide data on: 1) net survivorship and physical integrity; 2) bioefficacy of insecticides; and 3) insecticidal content. Support will be for two sites that received nets during the 2020/21 mass campaign, and will include PBO nets in at least one site. Sites to be determined.
<b>Subtotal : \$750,000</b>					
<b>Insecticide-Treated Nets</b>					
Procure ITNs for Continuous Distribution Channels	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria	\$4,860,000		Nationwide	Fill the ITN gap for routine distribution by purchasing ~1.8 million ITNs for routine distribution through ANC and child welfare clinics (CWC) in endemic and epidemic counties. (Additional 336,000 nets procured with prior year funding).
Procure ITNs for Continuous Distribution Channels	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria	\$0		Homa Bay, Migori	Procure 336,224 PBO ITNs for continuous community net distribution (CCND) following the routine campaign in Migori and Homa Bay Counties.
Distribute ITNs for Continuous Distribution Channels	USAID Supply Chain Strengthening	\$1,557,322		Nationwide	Provide logistical support, including transportation and storage of ITNs, for distribution of the 2.04 million ITNs within the national routine distribution system.
Distribute ITNs for Mass Campaigns	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria	\$272,116		Bungoma	Support distribution of the 2021 mass campaign nets in Bungoma County.
Distribute ITNs for Continuous Distribution Channels	TBD Kenya Bilateral	\$0		Homa Bay, Migori	Provide logistical support, including transportation and storage of ITNs, for distribution of the 336,224 ITNs within the CCND system.
Other ITN Implementation	PMI VectorLink	\$0		Homa Bay, Migori	Continued oversight of the new continuous community net distribution (CCND) system.

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			If coverage is focused by region(s), name(s) of region(s)	If coverage is focused by district(s), name(s) of district(s)	
Other ITN Implementation	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) TO5 (Afya Ugavi)	\$570,000	Nationwide		Support management, accountability, and supply chain data integration for routine nets in 28 counties in Kenya. The additional 8 counties (for a total of 36) are covered under pharmaceutical systems strengthening activities below. Support oversight of net distribution for the 2023/24 mass campaign.
Other ITN Implementation	PMI Kinga Malaria	\$467,000	Nationwide		Support NMP to undertake a post-mass LLIN campaign (PMLLIN) survey to assess net coverage and use.
<b>Subtotal : \$7,726,438</b>					
<b>Indoor Residual Spraying</b>					
IRS Implementation	PMI VectorLink	\$5,900,000	Homa Bay, Migori		Support IRS in up to two endemic counties (estimated to reach up to 500,000 structures and up to 2 million people) with at least 85% coverage in all targeted areas. Support training and IRS planning. Counties/sub-counties for spraying will be determined in consultation with the NMP Vector Control Team.
IRS Implementation	PMI Kinga Malaria	\$200,000	Homa Bay, Migori		Establish structures to conduct IRS activities in 2022.
Procure Insecticides for IRS	PMI VectorLink	\$1,600,000	Homa Bay, Migori		Procure insecticide for 2021 spraying.
Support Independent Environmental Monitoring	Environmental Compliance Operational Support (ECOS)	\$40,000	To Be Determined		Support for an independent environmental monitoring compliance visit to ensure that the IRS program is being implemented in accordance with best environmental practices.
<b>Subtotal : \$7,740,000</b>					

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SBC Implementation for Vector Control	Breakthrough ACTION	\$500,000	Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga		Support the implementation of the multi-channeled communications strategy for malaria through the dissemination of communication materials and mass media messages, in addition to the integration of community-level interpersonal communications aligned to mass media efforts. Support will be provided toward expansion of community-based SBC efforts by increasing outreach to priority populations in endemic counties through different strategies and channels of communication. Community barazas, dramas, and public gatherings will also be used to deliver malaria prevention and control messaging, including promotion of correct and consistent use of ITNs. SBC activities will be conducted in all eight counties, with the exception that an increased focus on community activities will be in 5 counties (Busia, Bungoma, Kisumu, Migori and Homabay). The activity will be carried out in five counties in malaria endemic zones, with a population of more than 5 million. Support SBC activities associated with the withdrawal of IRS in Homabay after 2023.
<b>Subtotal : \$500,000</b>					
<b>Total : \$16,716,438</b>					
<b>DRUG-BASED PREVENTION</b>					
<b>Prevention of Malaria in Pregnancy</b>					
MIP Implementation	PMI Impact Malaria	\$300,000	Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga		Sensitize and carry out refresher trainings for health workers and supervisors on MIP package of interventions, in addition to improving health facility reporting on IPT dosages. The trainings are expected to reach 1000 health workers in at least 340 facilities in the counties. Activities will include the re-orientation and training of facility in-charges and health service providers on the MIP package and ANC data collection, and implementation of a quality improvement framework.

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MIP Implementation	PMI Impact Malaria	\$400,000	Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga		Sensitize, orient, and supervise CHVs on MIP package of interventions and improve reporting. This activity will include the re-orientation, training, and supervision of CHVs to continue supporting early referral of pregnant women to attend ANC services, register all pregnancies for follow-up, and provide advice on case management and the use of ITNs. Previously trained CHVs will also undergo some refresher trainings on MIP-specific interventions they will be undertaking in the community. An estimated 2500 CHVs will be sensitized and oriented using the community strategy and other innovative approaches. The target is to reach approximately 100,000 women of reproductive age with specific messages on MIP interventions.
MIP Implementation	PMI Impact Malaria	\$50,000	Central		Strengthen the national and county policy and monitoring capacity by providing technical support at the national level for supportive supervision, policy guidelines review, and material production, as well as supporting cross-county learning.
<b>Subtotal : \$750,000</b>					

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<b>SBC</b>					
SBC Implementation for Prevention	Breakthrough ACTION	\$350,000	Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga		Support the implementation of the multi-channeled communications strategy for malaria through the dissemination of communication materials and mass media messages, in addition to the integration of community-level interpersonal communications aligned to mass media efforts. Support will be provided toward expansion of community-based SBC efforts by increasing outreach to priority populations in endemic counties through different strategies and channels of communication. Enhanced interpersonal communication delivered via the community approach will be one of the main channels of communication at the household level. In health facilities, particularly ANC clinics, women's groups, health talks, poster and information displays, and interpersonal communication during consultations will be used to deliver malaria messaging. Community barazas, dramas, and public gatherings will also be used to deliver malaria prevention and control messaging, including early and regular ANC attendance by pregnant women to increase the proportion of women receiving IPTp and nets. SBC activities will be conducted in all eight counties, with the exception that an increased focus on community activities will be in 5 counties (Busia, Bungoma, Kisumu, Migori and Homabay). The activity will be carried out in five counties in malaria endemic zones, with a population of more than 5 million.
<b>Subtotal : \$350,000</b>					
<b>Total : \$1,100,000</b>					
<b>CASE MANAGEMENT</b>					
<b>Procure Case Management-Related Commodities</b>					
Procure RDTs	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria	\$2,594,389	Nationwide		Procure up to 6 million Pf HRP2 RDTs to help fill the gap at level 2 and 3 health facilities (dispensaries and health centers) and to provide RDTs for the community case management strategy. (Procure up to an additional 3.5M RDTs with prior year funding)
Procure ACTs	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria	\$2,454,203	Nationwide		Procure ~5.2 million AL treatments to fill gaps in the public sector and community case management.



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Procure Drugs for Severe Malaria	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria	\$0	Nationwide		Procure severe malaria drugs, including up to approximately 500,000 vials of injectable artesunate, as needed, for use in public facilities.
<b>Subtotal : \$5,048,592</b>					
<b>Case Management Implementation</b>					
Facility-based case management	PMI Impact Malaria	\$900,000		Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga	Capacity building for and strengthening malaria case management at county and health facility level. Strengthening capacity of existing health staff through ongoing refresher trainings, on-the-job training, and mentoring of county/sub-county/health facility staff to enable case management improvements at the health facility level. Strengthen the county reference labs.
Community-based case management	PMI Impact Malaria	\$300,000		Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga	Expand and improve capacities of CHVs in the identification and referral of uncomplicated and severe malaria. Maintain capacity of CHVs in the diagnosis and treatment of uncomplicated malaria in anticipation of regulatory support for CHV administration of RDTs and ACTs. Support orientation and training of CHVs in the counties with functional CHUs. Support supervision by CHAs; update mapping and identification of CHUs.
National-level support for case management	PMI Impact Malaria	\$300,000	Central		Capacity building for and support to the NMP for malaria case management and diagnostics. Support the NMP for oversight and mentorship of malaria case management and diagnostics. Support the National Reference Lab.
Support Therapeutic Efficacy Study	PMI Impact Malaria	\$300,000		To Be Determined	Support a therapeutic efficacy study at up to four sites to monitor first-line antimalarial drug efficacy.
<b>Subtotal : \$1,800,000</b>					
<b>SBC</b>					

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SBC Implementation for Case Management	Breakthrough ACTION	\$350,000	Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga		Support the implementation of the multi-channeled communications strategy for malaria through the dissemination of communication materials and mass media messages, in addition to the integration of community-level interpersonal communications aligned to mass media efforts. Explore determinants of provider behavior using existing tools and data. Support will be provided toward expansion of community-based SBC efforts by increasing outreach to priority populations in endemic counties through different strategies and channels of communication. Enhanced interpersonal communication delivered via the community approach will be one of the main channels of communication at the household level. Community barazas, dramas, and public gatherings will also be used to deliver malaria prevention and control messaging, including early and appropriate health-seeking behavior, and prompt diagnosis and treatment for all people with fever. SBC activities will be conducted in all eight counties, with the exception that an increased focus on community activities will be in 5 counties (Busia, Bungoma, Kisumu, Migori and Homabay). The activity will be carried out in five counties in malaria endemic zones, with a population of more than 5 million.
<b>Subtotal : \$350,000</b>					
<b>Total : \$7,198,592</b>					
<b>SUPPLY CHAIN</b>					
<b>In-Country Supply Chain</b>					
Warehousing and Distribution	USAID Supply Chain Strengthening	\$542,860	Nationwide		Continued support for management, oversight, warehousing, and physical distribution of PMI-procured ACTs, RDTs, and injectable artesunate. PMI support will leverage broader, cross-element USAID investments in warehousing and distribution in Kenya.

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Warehousing and Distribution	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria	\$83,279	Nationwide		Support for warehousing and distribution of PMI-procured ACTs, RDTs, and injectable artesunate. PMI support will leverage broader, cross-element USAID investments in warehousing and distribution in Kenya.
Pharmaceutical Management Systems Strengthening	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) TO5 (Afya Ugavi)	\$350,000	Central		Support the NMP to strengthen governance, coordination, and leadership structures for supply chain management and build capacity to ensure accurate forecasting and supply planning and monitoring for malaria commodity needs at the national level and upstream flow of logistics data through DHIS2 to inform the annual quantification process. Support regional and county pharmacist and laboratory personnel meetings. Biannual county pharmacist and lab technologists forums. Continue to support the establishment of national HMPTU, build capacity of warehousing and distribution partners, and capture malaria commodity usage in the private sector.
Pharmaceutical Management Systems Strengthening	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) TO5 (Afya Ugavi)	\$800,000		Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga	Support throughout the supply chain (county, sub-county, and health facility levels) to build capacity and structures for proper commodity management and to ensure that high-quality logistics data is available and used to inform county malaria commodity needs. Support redistribution of commodities as needed. Continue to support the establishment of county HMPTUs. Support accountability, monitoring, and supply chain data integration for routine LLIN distribution in 8 counties (additional 28 counties included under ITN section).
Pharmaceutical Management Systems Strengthening	Global Health Supply Chain Procurement and Supply Management (GHSC PSM) Malaria	\$80,216	Central		Technical support for warehousing and distribution of malaria commodities, including activity based costing of these operations.
Ensuring drug and other health product quality	Promoting the Quality of Medicines Plus (PQM+)	\$300,000	Central		Strengthen antimalarial drug quality monitoring through the provision of technical, strategic and operational support to the NMP and counties, Pharmacy and Poisons Board, and National Quality Control Laboratory. Activities will be conducted in collaboration with KEMSA and MEDS.

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<b>Subtotal : \$2,156,355</b>					
<b>Total : \$2,156,355</b>					
<b>MONITORING, EVALUATION &amp; RESEARCH</b>					
<b>Surveillance, Monitoring, and Evaluation</b>					
Support Routine Surveillance	Health IT	\$300,000	Central		Routine maintenance and IT support for DHIS2. Support development and updating malaria dashboards (including the Malaria Commodities Dashboard) and revisions to the DHIS2/EMR platform to capture inpatient malaria data. Support development of the EPR dashboard within DHIS2 to enable pulling out of data for epidemic threshold setting from E-IDSR.
Support to FETP	CDC IAA	\$200,000	Nationwide		Provide support for two malaria-focused FELTP residents for the full two-year training program. PMI encourages the MoH to deploy FELTP graduates to the NMCP or endemic/epidemic counties to enhance the capacity of malaria control programs. The budget for each trainee includes tuition, stipend, laptop, materials, training, and travel for the two-year program.
SM&E for Elimination	PMI Measure Malaria	\$309,820	Central		Support NMP to establish surveillance structures for elimination, by conducting an assessment and planning a surveillance framework. Conduct consultations with low malaria risk counties. Support NMP to develop surveillance comprehensive guidelines, including pre-elimination areas.
Other SM&E Implementation	PMI Measure Malaria	\$800,000	Central		Continue support to the NMP for implementation of the national M&E plan by providing technical assistance to increase the capacity of M&E staff at the national level and to promote data use for decision-making. Activities include M&E COEs, monitoring program activities, GMP reporting, data analysis, and support to HIS division. Support counties in threshold setting for EPR through regional meetings. Support development and dissemination of county profiles based on the 2020 KMIS. Support the Midterm Review of the 2019-23 KMS.

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Other SM&E Implementation	PMI Measure Malaria	\$800,000	Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Samburu, Vihiga		Increase data demand and use of routine data for programmatic improvements at the county level. Support for M&E strengthening at the county level, working with the CHMT, SCHMT, and health facilities. Continue capacity building in counties for SM&E activities, mentorship, and reporting in line with county malaria control plans.
Other SM&E Implementation	Tupime Kaunti (formerly CMLAP)	\$175,000	Homa Bay, Migori		Continue to support roll out of the ScanForm activit in 93 health facilities in Migori and Homabay Counties. MOH outpatient registers will be converted to cell phone scannable formats that allow significantly increased routine (DHIS2) data entry timeliness and accuracy.
Other SM&E Implementation	Country Health Information Systems and Data Use (CHISU)	\$160,990	Central		Support counties in threshold setting for EPR through regional meetings and reporting on weekly surveillance data. Support Frontline FELTP training.
Data Analytics	Malaria Data Integration and Visualization for Eradication (M-DIVE)	\$251,250	Central		The new M-DIVE platform houses data from multiple sources for all PMI countries including Kenya This data is used to inform PMI programming.
<b>Subtotal : \$2,997,060</b>					
<b>Operational Research</b>					
OR Implementation	TBD - Central Mechanism	\$0	To Be Determined		Analyzing the effectiveness of behavior change interventions in different malaria transmission zones in order to understand the most appropriate behavior change approach for areas transitioning from high and moderate to low, very low and zero malaria transmission.
<b>Subtotal : \$0</b>					
<b>Total : \$2,997,060</b>					
<b>OTHER HEALTH SYSTEMS STRENGTHENING</b>					

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			If coverage is focused by region(s), name(s) of region(s)	If coverage is focused by district(s), name(s) of district(s)	
Other Health Systems Strengthening Implementation	Health Policy Plus (HP+)	\$300,000	Central		Provide technical assistance and capacity building to improve the NMP's capacity to fulfill the roles and responsibilities in line with the KMS. Improve the NMP's technical capacity with regard to program implementation, management, and leadership development through formal and informal training, courses and workshops, supportive supervision, on-the-job coaching, and mentoring. Provide assistance for NMP program management and technical team members and CMCCs from priority counties to attend key technical meetings (e.g., Multilateral Initiative on Malaria). Attendees will be expected to present on and share key technical updates with COEs, partners, and stakeholders. PMI will continue to support the Malaria Health Sector Working Committee and COEs as essential platforms for NMP policy; strategy; and guideline review, updating, and validation processes, and coordination of malaria partners.
Other Health Systems Strengthening Implementation	Tupime Kaunti (formerly CMLAP)	\$330,682		Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga	Programmatic support to staff in CHMTs and SCHMTs (CMCCs, SCMCCs, county pharmacists, county laboratory coordinator, disease surveillance coordinators, and health records and information officers) to increase supervision and management capacity for program implementation. Support emerging malaria control issues at the county level. Assist with inter-county coordination and advocacy and strengthen links with the NMP. Support the county malaria control programs to develop malaria-specific work plans consistent with each county's malaria profile and the revised KMS and M&E Plan. PMI will support CHMTs in collating and analyzing malaria-related information to be used in planning for the county's need in terms of carrying out quantification for drugs and laboratory supplies and planning for the training of more health workers in areas where capacity gaps have been identified. PMI will also support county teams in organizing review meetings with the sub-counties to assess progress made in implementing malaria control interventions, and support coordination for malaria partners in the counties. Support frontline FELTP training for CMCCs and SCMCCs.

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Other Health Systems Strengthening Implementation	TBD Kenya Bilateral	\$0		Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga	Support Quality Improvement activities with CHMTs and SCHMTs.
Other Health Systems Strengthening Implementation	Breakthrough ACTION	\$450,000	Central		Support national-level development and dissemination of key SBC malaria policies and guidelines; donor coordination; and advocacy-related activities, including regular review meetings with malaria partners, donors, and stakeholders to monitor and evaluate uptake of malaria interventions to ensure effective SBC activity implementation. Activities will also provide capacity strengthening for the Division of Health Promotion. Support the DNMP to conduct a Malaria Behavior Survey to guide SBC activities.
Other Health Systems Strengthening Implementation	TBD Kenya Bilateral	\$0	Nationwide	Kakamega, Kisumu	Support to local development organizations to promote citizen advocacy at the community and facility level to increase demand for quality malaria services and enhanced accountability.
Other Health Systems Strengthening Implementation	Health Policy Plus (HP+)	\$300,000	Central	Bungoma, Busia, Homa Bay, Kakamega, Kisumu, Migori, Siaya, Vihiga	Support in-depth costing for malaria control and approaches for domestic resource mobilization at the national and county level. Support the NMP with the collection of malaria control cost data from county and sub-county levels. This information will be used to inform implementation of the domestic resource mobilization within the KMS 2019-2023. Advocate for availability, allocation, and absorption of these resources.

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Other Health Systems Strengthening Implementation	Frontier Health Markets (FHM) Engage	\$200,000		Homa Bay, Kisumu	Support improved malaria service delivery and data reporting in the private sector through strengthened digital malaria diagnostics among the lower tier private health providers with special emphasis on pregnant women and children.
Other Health Systems Strengthening Implementation	WHO Umbrella	\$177,000	Central		Support for a WHO National Program Officer, who will provide technical recommendations to the NMCP across malaria technical areas.
<b>Subtotal : \$1,757,682</b>					
<b>Total : \$1,757,682</b>					
<b>STAFFING &amp; ADMINISTRATION</b>					
Vector Control-Related CDC TDY	CDC IAA	\$29,000	Central		Support two visits from CDC to help develop entomological capacity at the national and county level with emphasis on coordination of vector monitoring efforts with partners and synergist/resistance intensity testing.
Case Management-Related CDC TDY	CDC IAA	\$10,000	Central		Support one CDC visit to provide technical assistance for malaria case management.
SBC-Related CDC TDY	CDC IAA	\$10,000	Central		Support one CDC visit to provide technical assistance for SBC.
SM&E-Related CDC TDY	CDC IAA	\$10,000	Central		Support one CDC TDYs to provide technical assistance for M&E activities.
USAID In-Country Staffing and Administration: Staffing	USAID	\$714,023	Central		Staffing and administration for one PMI/USAID Resident Advisor, and four 100% PMI-dedicated Foreign Service Nationals and half of one FSN focused on Western/Nyanza Region.
USAID In-Country Staffing and Administration: Administration	USAID	\$670,000	Central		USAID administrative and oversight costs. To include third party monitoring.
CDC In-Country Staffing and Administration	CDC IAA	\$130,850	Central		Staffing and administration for one PMI/CDC Resident Advisor.
<b>Subtotal : \$1,573,873</b>					
<b>Total : \$1,573,873</b>					
<b>GRAND TOTAL:</b>		<b>\$</b>	<b>33,500,000</b>		