Mechanisms and Proposed Activities	Sum	of Budget (in \$)
BSSR	\$	719,921
Other Health Systems Strengthening Implementation	\$	10,000
Supply Chain and Pharmaceutical Management	\$	300,000
Support Routine Surveillance	\$	100,000
Warehousing and Distribution	\$	309,921
CDC IAA	\$	344,500
Case Management-Related CDC TDY	\$	10,000
CDC In-Country Staffing and Administration	\$	320,000
Vector Control - CDC Entomology Lead TDY	\$	14,500
DHS Program (DHS-9)	\$	300,000
Support Surveys	\$	300,000
G2GOps	\$	570,000
Other Health Systems Strengthening Implementation	\$	570,000
OWOD	\$	5,567,000
Community-based Case Management	\$	1,700,000
Facility-based Case Management	\$	200,000
MIP Implementation	\$	350,000
Other Drug Based Prevention- Implementation	\$	200,000
SBC Implementation	\$	467,000
SMC Implementation	\$	2,500,000
Support Routine Surveillance	\$	150,000
Peace Corps	\$	2,000
Support to Peace Corps	\$	2,000
PMI Evolve	\$	1,390,603
Distribute ITNs for Continuous Distribution Channels	\$	690,603
Support Entomological Monitoring	\$	700,000
Senegal Health FARA	\$	2,712,545
Community-based Case Management	\$	760,000
Facility-based Case Management	\$	110,000
MIP Implementation	\$	80,000
Other Case Management Implementation	\$	190,000
Other Health Systems Strengthening Implementation	\$	455,000
Other SM&E Implementation	\$	134,545
Private Sector Case Management	\$	150,000
SBC Implementation	\$	163,000
SMC Implementation	\$	340,000
Support Routine Surveillance	\$	160,000
Support Therapeutic Efficacy Study	\$	170,000
TBD Bilateral Mechanism	\$	500,000
SM&E for Elimination	\$	300,000
Strengthen Medical Product Quality Assurance	\$	200,000
USAID	\$	1,338,381
USAID In-Country Staffing and Administration: Administration	\$	450,000
USAID In-Country Staffing and Administration: Staffing	\$	888,381
Working Capital Fund, Commodity Procurement	\$	9,055,050

Procure ACTs	\$ 525,018
Procure Drugs for Severe Malaria	\$ 359,640
Procure ITNs for Continuous Distribution Channels	\$ 2,856,624
Procure Other Drug Based Prevention-Related Commodities	\$ 1,119,033
Procure Other Treatment Related Commodities	\$ 11,400
Procure RDTs	\$ 1,535,023
Procure SMC-Related Commodities	\$ 2,648,312
Grand Total	\$ 22,500,000

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
Vector Control	Entomological Monitoring	Support Entomological Monitoring	PMI Evolve	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$700,000	Support for vector bionomics and entomological surveillance of insecticide resistance. This includes monthly field collections at 25 sites in 14 districts, a reduction from 34 sites and 19 districts in the FY22 MOP, resulting in cost savings. This budget also includes laboratory support to assess critical entomological indicators for vector control, including: vector density and species composition (through morphological and molecular species identification), vector behavior (biting rates, resting densities, and blood meal indices), entomological inoculation rates (sporozoite rates), and parity rates. Community- based entomological monitoring will be maintained in five of these districts to determine its feasibility. Insecticide resistance will be be monitored in all 14 districts by assessing phenotypic (bioassays), genetic (PCR assays) and metabolic (biochemical assays) markers of resistance. Entomological training will include a review of standard operating procedures for all field team members and harmonization of methods used in the country. Funding will also be used to organize an annual entomological review and support entomological studies of UCAD postgraduate students. Larval surveillance for An. stephensi in urban areas will also be supported as Senegal is considered a high risk country for invasion.
Vector Control	Insecticide Treated Nets	Procure ITNs for Continuous Distribution Channels	Working Capital Fund, Commodity Procurement	To be determined	\$2,856,624	Procurement of 676,925 Dual AI ITNs for routine distribution.
Vector Control	Insecticide Treated Nets	Distribute ITNs for Continuous Distribution Channels	PMI Evolve	No-this activity will not be implemented by Local Partners	\$690,603	Support distribution of 1,676,925 ITNs (procured by PMI and IDB) through continuous distribution channels (cost of \$0.4 per net) nationwide.
Drug Based Prevention	Prevention of Malaria in Pregnancy	MIP Implementation	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$350,000	Support includes training new providers at the health facility and community level, as needed, on the prevention and treatment of malaria during pregnancy. This includes topics such as the importance of ITN use during pregnancy, malaria diagnosis and management, counseling, and interpersonal communication skills. Support for antenatal care outreach activities in the health huts will continue. Activities will follow district priorities as outlined in the regional and district action plans. Support for community IPTp is also included here.
Drug Based Prevention	Prevention of Malaria in Pregnancy	MIP Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$80,000	Support includes training new providers at the health facility level, as needed, on the prevention and treatment of malaria during pregnancy. This includes topics such as the importance of ITN use during pregnancy, malaria diagnosis and management, counseling, and interpersonal communication skills. Support for antenatal care outreach activities in the health huts will continue, along with support for community IPTp. Activities will follow district priorities as outlined in the regional and district action plans (\$60,000 for Kaolack, \$10,000 for Kaffrine and \$10,000 for Ziguinchor).
Drug Based Prevention	SMC	Procure SMC-Related Commodities	Working Capital Fund, Commodity Procurement	To be determined	\$2,648,312	Procurement of 6,752,961 doses of SPAQ co-blister for the implementation of the SMC with a target of 968,822 children, targeting the entire regions of Kedougou, Tambacounda, and Kolda (except Bakel), and health posts with a higher incidence in the districts of Touba, Diourbel and Kaolack. There will be 3 rounds of distribution in Kaolack, Diourbel, Touba, Koumpentourm, Maka, and Tambacounda. 4 rounds in the Kolda Region and Kidira and Goudiny districts. 5 rounds in the Kedougou region and Diankhe Makhan district. 91,696 children in the 3-11 month age group, 482,739 in the 12-59 month age group, and 394,387 in the 60-120 age group will be targeted.
Drug Based Prevention	SMC	SMC Implementation	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$2,500,000	Operational costs for implementing SMC at the operational level, the budget includes planning, training, implementation, decentralized supervision, monitoring, direct observation of treatment doses over the 3 days, transportation, materials, communication aids, equipment, and campaign evaluation. There will be 3 rounds in Kaolack, Diourbel, Touba, Koumpentoum, Maka, and Tambacounda; 4 rounds in the Kolda region and the Kidira and Goudiry districts; 5 rounds in the Kedougou region and the Dianke Makhan districts. SMC has been removed from Bakel since MDA will be supported in that district.
Drug Based Prevention	SMC	SMC Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$340,000	Operational costs for SMC implementation at the central level (\$160,000) and at the district level for Kaolack (\$180,000). At the central level, the budget includes planning, technical assistance at the operational level, supervision, monitoring and evaluation of the campaign. In Kaolack, only the higher incidence health posts will be engaged. Operational costs for implementing the SMC in Kaolack include planning, training, implementation, decentralized supervision, monitoring, direct observation of treatment doses over the 3 days, transportation, and evaluation of the local campaign.
Drug Based Prevention	Other Drug Based Prevention	Procure Other Drug Based Prevention- Related Commodities	Working Capital Fund, Commodity Procurement	To be determined	\$1,119,033	Commodities for MDA in Bakel district. Total quantity of DHAPQ for 3 rounds of MDA to cover 20,315 small children (1-5 years), 32,506 large children (6-13 years), and 70,542 adults (14+ years), taking into account a10% security stock. Total quantity of primaquine 330,152 tablets (large child and adult) for the 3 rounds.
Drug Based Prevention	Other Drug Based Prevention	Other Drug Based Prevention- Implementation	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$200,000	Operational costs for MDA in Bakel district.

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
Case Management	Procure Case Management-Related Commodities	Procure RDTs	Working Capital Fund, Commodity Procurement	To be determined	\$1,535,023	Procurement of 4,039,535 RDTs.
Case Management	Procure Case Management-Related Commodities	Procure ACTs	Working Capital Fund, Commodity Procurement	To be determined	\$474,964	Procurement of 690,355 ACTs, with 60% AL to be deployed primarily in high-burden areas where SMC is being implemented, and 40% ASAQ for other areas.
Case Management	Procure Case Management-Related Commodities	Procure ACTs	Working Capital Fund, Commodity Procurement	To be determined	\$50,054	Procurement of 62,568 ACTs (AL) for use in reactive case investigations in low-burden areas.
Case Management	Procure Case Management-Related Commodities	Procure Other Treatment Related Commodities	Working Capital Fund, Commodity Procurement	To be determined	\$11,400	Procurement of 95,000 tablets of primaquine.
Case Management	Procure Case Management-Related Commodities	Procure Drugs for Severe Malaria	Working Capital Fund, Commodity Procurement	To be determined	\$339,147	Procurement of 133,000 vials of injectable artesunate,
Case Management	Procure Case Management-Related Commodities	Procure Drugs for Severe Malaria	Working Capital Fund, Commodity Procurement	To be determined	\$20,493	Procurement of 29,700 rectal artesunate suppositories.
Case Management	Case Management Implementation	Facility-based Case Management	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$200,000	Support for training and supervision of malaria case management at all levels of the public health system (\$10,000 per district). There will be approximately 20 districts supported in Diourbel, Kedougou, Kolda, Tambacounda and Sedhiou.
Case Management	Case Management Implementation	Community-based Case Management	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$300,000	Support for community-based case management of malaria in health huts by community health workers, including training, supervision and monitoring of community health workers. (\$15,000 per district covering approximately 20 districts in Diourbel, Kolda, Tambacounda and Sedhiou).
Case Management	Case Management Implementation	Facility-based Case Management	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$110,000	Support for training and supervision of malaria case management in health facilities at all levels of the public health system (\$15,000 per district in Kaolack region; \$25,000 per region for Kaffrine and Ziguinchor)
Case Management	Case Management Implementation	Community-based Case Management	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$130,000	Support for the community management of malaria in health huts by community health workers, including training, supervision and monitoring of CHWs. (\$20,000 per district in Kaolack region; \$25,000 per region for Kaffrine and Ziguinchor)
Case Management	Case Management Implementation	Community-based Case Management	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$230,000	Purchase of data collection equipment and tools for DSDOMS to conduct passive and active scans. Equipment should include T-shirts, bibs, logbooks, data collection tools, bags, storage boxes, thermometers. All equipment and tools must be provided to the NMCP who will oversee and coordinate the distribution of the materials.
Case Management	Case Management Implementation	Community-based Case Management	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$630,000	Training and refresher training of existing and new community health workers (DSDOMs) and logistics to support 16 districts for the implementation of PECADOM+, PECADaara, and PECAEcole, including transportation, supervision, and the payment of incentives. For 2024, we anticipate a total of about 5,500 DSDOMs with 2,612 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. Resources at the cental level will support coordination, central-level supervision and national evaluation of PECADOM interventions.
Case Management	Case Management Implementation	Community-based Case Management	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$1,170,000	Training and refresher training of existing and new community health workers (DSDOMs) and logistics to support 19 districts for the implementation of PECADOM+, PECADaara, and PECAEcole, including transportation and district-level supervision. Also includes year-long implementation of PECADOM+ in Kedougou and the districts of Diankemakha and Tambacounda in the region of Tambacounda, including the payment of incentives. For 2024, we anticipate about 5,500 DSDOMs with 2,612 DSDOMs who implement PECADOM+ activities. For the operational level activities, the implementing partner will transfer funds to the regions/districts to support implementation of their local plans through subagreements/grants.
Case Management	Case Management Implementation	Private Sector Case Management	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$150,000	Support for national private sector strategy, including training and supervision of malaria case management in the private sector and data reporting.
Case Management	Case Management Implementation	Support Therapeutic Efficacy Study	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$170,000	Therapeutic efficacy monitoring of ACTs in 2 sentinel sites, including molecular testing of samples for resistance monitoring in Senegal reference laboratory (part of PARMA network)

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
Case Management	Case Management Implementation	Other Case Management Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$160,000	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.
Case Management	Case Management Implementation	Other Case Management Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$30,000	Support for the implementation of quality control programs for microscopy in conjunction with the NMCP and UCAD at all levels of the health system, including the private sector.
Supply Chain	In-Country Supply Chain	Warehousing and Distribution	BSSR	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$309,921	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.
Supply Chain	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	BSSR	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$300,000	Support for the NMCP to improve quantification through regular consumption data collection at the peripheral level, monitoring reporting and orders and support to reinforce the malaria commodities distribution thru the national system. Also includes support to capacity building to the NMCP and the national and regional pharmaceutical supply chain management.
Supply Chain	In-Country Supply Chain	Strengthen Medical Product Quality Assurance	TBD Bilateral Mechanism	To be determined	\$200,000	Technical assistance for accreditation of central laboratory for drug quality monitoring and sampling and testing of antimalarials at 9 sites across the country .
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Surveys	DHS Program (DHS-9)	No-this activity will not be implemented by Local Partners	\$300,000	Technical assistance for a 2025 MIS
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	BSSR	No-this activity will not be implemented by Local Partners	\$100,000	Support at the central level for the strengthening of HMIS.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$100,000	Support to the DPRS/DSISS/PNLP for health system data quality, retraining of health workers on the DHIS-2 platform, implementation of data quality assessments with a focus on malaria indicators, and training of health workers at health posts in the use of DHIS-2. Includes continued support for installation of the malaria module.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$150,000	Support for DHIS2 implementation with an emphasis on improving data collection, completeness, timeliness, quality at the district-level and health facility levels and use of the data at the operational level. Support will be provided directly at the operational and prioritization of districts with the most deficiencies and inconsistencies based on quartlery regional reviews.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$60,000	Support for DHIS2 implementation with an emphasis on improving data collection, completeness, timeliness, quality at the district-level and health facility levels, and use of the data at the operational level. Support will be provided directly at the operational and at the central level.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Other SM&E Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$134,545	Implementation of the malaria monitoring and evaluation course that includes surveillance in the context of elimination. This will include 2 sessions with 20 students per session. The overall goal is to train 400 people. To date, 188 people have been trained with PMI funds. The budget does not include the payment of fees for public service personnel.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	SM&E for Elimination	TBD Bilateral Mechanism	To be determined	\$300,000	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. For the operational level activities, the NMCP will transfer funds to the regions/districts to support implementation of their local plans. Support will be provided to all eligible districts (<5/1,000) in the regions of St Louis, Matam, Louga, and Ziguinchor.
SBC	SBC	SBC Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$60,000	Support for SBC messages on ITN use at the operational level, targeting the entire community but with a focus on pregnant women and children under five. Communication channels will include IPC using CHWs, as well as local, community radio, drama, etc. Emphasis will be placed on the high burden districts of Kaolack.

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
SBC	SBC	SBC Implementation	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$100,000	Support for SBC messages on ITN use at the operational level, targeting the entire community but with a focus on pregnant women and children under five. Communication channels will include IPC using CHWs, as well as local radio, theater, etc. Emphasis will be placed on districts in high-burden areas in southeastern Senegal.
SBC	SBC	SBC Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$33,000	Promotion of SMC through radio spots, community meetings and home visits in the Kaolack district targeted for SMC, including the launch of the regional campaign. Messages will focus on the reasons for refusing HPC, including, but not limited to, concerns about side effects, procedure fatigue, timing, etc. For operational activities, funds for regions/district to support the implementation of their local plans will be channeled through the regional FARA, in addition to resources for the central level that will be provided to support the launch of a national campaign and a national media communications campaign. (Note: the procurement of all SMC materials will be done through the bilateral FARA rather than through FARA Santé Sénégal).
SBC	SBC	SBC Implementation	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$167,000	Promotion of SMC through regional launch, radio spots, community meetings, and house-to-house visits in the districts targeted for SMC, including the regional campaign launch. Messaging will prioritize SBC refusal reasons including but not limited to: concerns about side effects, intervention fatigue, scheduling, etc. For the operational level activities, the funds to the regions/districts to support implementation of their local plans will go through the regional subagreements.
SBC	SBC	SBC Implementation	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$100,000	Support SBCC interventions with a focus on IPTp adoption. Activities will be implemented in the districts of Kedougou, Tambacounda, Diourbel, and Kolda regions according to national policies and in coordination with SBC activities related to other technical areas. These four regions are the most affected by malaria and therefore our activities will be concentrated in these areas. In addition, the regions of Kedougou and Tambacounda have the lowest level of ANC use in the country.
SBC	SBC	SBC Implementation	OWOD	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$100,000	IPC, focus group discussion and mass media outreach in PMI priority regions to improve care seeking behaviors (\$50,000 per region)
SBC	SBC	SBC Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$70,000	IPC, focus group discussion and mass media outreach in PMI priority regions to improve care seeking behaviors. (\$30,000 for Kaolack region and \$20,000 each for Kaffrine and Ziguinchor)
Other Health Systems Strengthening	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$150,000	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. This is a semi-annual supervision that targets all PPS in the KKT regions starting in 2024.
Other Health Systems Strengthening	Other Health Systems Strengthening	Support to Peace Corps	Peace Corps	No-this activity will not be implemented by Local Partners	\$2,000	Support malaria-related Peace Corps small project assistance (SPA) grants. The budget for this activity is reduced, as there is signficant pipeline.
Other Health Systems Strengthening	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$100,000	Support for 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	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$165,000	Support to the management of FARA and support to central units such as NMCP, DAGE, DPRS, DLM and Internal Inspection.
Other Health Systems Strengthening	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$25,000	Support to the CCPLP (Malaria Partners Coordination Committee) to bring together NMCP, all technical and financial partners, advocacy groups, thematic groups and representatives from different regions to facilitate information sharing and ensure better coordination of malaria-related activities across the country.

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
Other Health Systems Strengthening	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	Senegal Health FARA	Yes- the Prime is a Local Partner for PMI (G2G)	\$15,000	Support for participation in international scientific and professional meetings to give NMCP staff (central staff) the opportunity 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 project includes support for 3 trips.
Other Health Systems Strengthening	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	BSSR	Yes- one or more of the Sub- partner(s) is/are Local Partners for PMI	\$10,000	Support for participation in international scientific and professional meetings to provide opportunities for MOH staff (field operational level staff including regional and district health offices) 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 position includes support for 3 trips and selection will be based on performance.
Other Health Systems Strengthening	Other Health Systems Strengthening	Other Health Systems Strengthening Implementation	G2GOps	N/A	\$570,000	Preparation and monitoring of the G2G agreement between PMI and NMCP and other MOH entities (Fixed Amount Reimbursement Agreement, FARA); technical assistance for data management and reporting. The activity takes place at both the central and regional levels.
Staffing & Administration	Staffing & Administration	Vector Control - CDC Entomology Lead TDY	CDC IAA	N/A	\$14,500	One TDY of entomologist to support in entomologic monitoring activities.
Staffing & Administration	Staffing & Administration	Case Management-Related CDC TDY	CDC IAA	N/A	\$10,000	An epidemiologist TDY to support case management or SME activities.
Staffing & Administration	Staffing & Administration	USAID In-Country Staffing and Administration: Staffing	USAID	N/A	\$888,381	Staffing cost for one PMI/USAID resident advisor and three 100% PMI-dedicated foreign service national staff, including one data specialist; in-country costs for CDC resident advisor.
Staffing & Administration	Staffing & Administration	USAID In-Country Staffing and Administration: Administration	USAID	N/A	\$450,000	Administration costs of 2%.
Staffing & Administration	Staffing & Administration	CDC In-Country Staffing and Administration	CDC IAA	N/A	\$320,000	Staffing costs for a PMI/CDC Resident Advisor.