

Table 2
President's Malaria Initiative – Senegal
REVISED OCTOBER 2015

Planned Malaria Obligations for FY 2014, Breakdown by Activity

Proposed Activity	Mechanism	Budget		Geographic Area	Description
		Total \$	Commodity \$		
PREVENTIVE ACTIVITIES					
Insecticide-Treated Nets					
Procurement and distribution of LLINs for distribution through routine channels	DELIVER	4,000,000	4,000,000	Nationwide	1,100,000 LLINs primarily for distribution through routine channels. If more than required, will support 2016 national mass campaign.
Technical assistance for 2016 mass LLIN campaign	VectorWorks	190,000		Nationwide	Technical assistance for the planning and implementation of Senegal's first nationwide universal coverage LLIN campaign.
Distribution of LLINs via routine channels	USAID	145,000		Nationwide	Transportation of LLINs to routine distribution points and to support the 2016 campaign, as needed.
LLIN monitoring	HDS-Africa	160,000		Nationwide	Monitoring physical durability and insecticide concentration of LLINs
SUBTOTAL ITNs		4,495,000	4,000,000		
Indoor Residual Spraying					

Proposed Activity	Mechanism	Budget		Geographic Area	Description
		Total \$	Commodity \$		
IRS operations	IRS 2 TO6	4,032,065	2,000,000	4 districts	Technical assistance and commodities for indoor residual spraying activities in all four districts and IEC materials
Environmental compliance	GEMS II	30,000		4 districts	One visit to conduct required environmental compliance inspection.
Entomological monitoring	IRS 2 TO6	410,000		Nationwide	Entomologic monitoring post IRS implementation and following UC of LLINs, exact districts TBD
	CDC IAA	39,000		N/A	\$24,000 TA, \$15,000 supplies
Evaluation of in-country entomology capacity	IRS 2 TO6	21,444		N/A	One technical assistance visit to conduct an in-depth evaluation of Senegal's entomology capacity, which will inform the NMCP's next five-year strategic plan
SUBTOTAL IRS		4,532,509	2,000,000		
Malaria in Pregnancy					
Reinforce provision of effective MIP services in health facilities and in outreach strategies	Health Services Improvement Program Component	700,000		Nationwide	Monitoring and supportive supervision, update materials to reflect revised guidelines, training of new staff. Cups and water filters as needed for directly-observed treatment with SP.
SUBTOTAL MIP		700,000			

Proposed Activity	Mechanism	Budget		Geographic Area	Description
		Total \$	Commodity \$		
SUBTOTAL PREVENTIVE		9,727,509	6,000,000		
CASE MANAGEMENT					
Diagnosis					
Strengthening microscopic diagnosis of malaria	NMCP	200,000		Nationwide	Conduct supervision for quality assurance and quality control of microscopy and RDTs
Microscopes and lab consumables	DELIVER	50,000	50,000	Nationwide	15 microscopes
Procurement of RDTs	DELIVER	1,242,000	1,242,000	Nationwide	2.0 million RDTs to cover country's needs
SUBTOTAL DIAGNOSIS		1,492,000	1,292,000		
Treatment					
Improve case management of malaria	Health Services Improvement Program Component	600,000		Nationwide	Support for training and supervision of malaria case management at all levels of the health system, including the private sector
Community case management of malaria with ACTs and diagnosis with RDTs	Community Health Program Component	500,000		Nationwide	Community based case management of fever as part of an integrated package of services in more than 2,000 functional health huts. Includes training, supervision, and routine support.
Supervision of integrated PECADOM program	NMCP	350,000		Selected districts	Supervision of DSDOMs recently trained in integrated package

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Integrated PECADOM Plus	NMCP	300,000		Selected districts	Extension and continuation of program to identify and test fever cases by community workers
Procure ACTs	DELIVER	600,000	600,000	Nationwide	ASAQ for most of the country, AL for 4 SMC regions.
Implementation of SMC	NMCP	1,250,000		Kedougou, Sedhiou, Kolda, Tambacounda	Monthly doses of SP-AQ provided by community volunteers in campaigns for 3-4 months during transmission season. Will cover approx. 600,000 children 3-120 months of age.
Procurement of drugs for SMC	DELIVER	600,000	600,000		
Procurement of drugs for pre-referral treatment	DELIVER	40,000	40,000	Nationwide	Procure rectal artesunate for pre-referral treatment of severe malaria
Operational costs of scaling up pre-referral treatment at the community level	NMCP	200,000		Kedougou, Sedhiou, Kolda, Tambacounda	Based on results of pilot in 2 districts, roll out to health huts and DSDOM in 4 high-transmission regions
Injectable artesunate	DELIVER	70,000	70,000	Nationwide	First-line treatment for approximately 3,000 severe malaria cases
Therapeutic efficacy studies	UCAD-Parasitology	100,000		Selected sites	Includes monitoring resistance markers for SP-AQ in SMC regions. Rotation every 2 years among 4 sites (2 sites per year).
Technical assistance	CDC-IAA	12,000		N/A	Assistance with roll-out of parenteral artemisinins

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SUBTOTAL TREATMENT		4,622,000	1,240,000		
SUBTOTAL CASE MANAGEMENT		6,114,000	2,532,000		
MONITORING AND EVALUATION/OPERATIONS RESEARCH					
Support to malaria module in continuous demographic and health survey	Measure DHS	450,000		Nationwide	Technical assistance for sampling and analysis
Development and implementation of malaria pre-elimination course	ICF/Measure Evaluation	135,000		N/A	Technical assistance to develop and conduct a course on pre-elimination of malaria to train regional and district-level health staff (e.g. new surveillance protocols, rollout of new technologies, etc)
Strengthening malaria surveillance and response	NMCP	375,000		Nationwide	Strengthening notification, particularly using mobile communication. Perhaps addition of sites. Funds reserved for potential response to epidemics (\$75,000).
Integrating mHealth reporting into the DHIS2 platform	TASC4 ICT	308,556		Nationwide	Improve collection of malaria indicator data via the DHIS2 platform. Includes: development of a workplan for the DHIS2 expansion, procurement of software and hardware (e.g. smartphones, tablets), TA to upgrade existing IT platform,

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					training and supervision to implement DHIS2 at health posts.
Extend active case investigation to priority districts with incidence < 5/1000	NMCP	400,000		Low incidence districts	Investigate and test close contacts of index cases in low incidence districts, primarily in the north
Monitoring and evaluation for seasonal malaria chemoprevention	NMCP	150,000		Kedougou, Sedhiou, Kolda, Tambacounda	Includes monitoring of molecular markers and post-season coverage survey, process monitoring
Situational analysis on high malaria burden in southeastern regions	TBD	100,000		Kedougou, Sedhiou, Kolda, Tambacounda	In-depth assessment of existing data and information to determine causes of increased incidence
Implementation of specific actions to lower malaria incidence in southeast regions	TBD	750,000		Kedougou, Sedhiou, Kolda, Tambacounda	Appropriate interventions to be determined based on results of situational analysis
Support for evaluation of 2010-2015 National Strategic Plan (including M&E system/data quality) and development of next strategy	NMCP	50,000		Nationwide	Evaluation of 2011-2015 plan and development of 2016-2020 plan
Training/TA for mapping; purchase necessary software	TBD	20,000		N/A	To aid decision making, documentation. Better visibility of "hot spots".
SUBTOTAL M&E / OR		2,738,556	0		
BEHAVIOR CHANGE COMMUNICATION					

Proposed Activity	Mechanism	Budget		Geographic Area	Description
		Total \$	Commodity \$		
Development, implementation and evaluation of BCC activities	Health Communications and Promotion	1,150,000		Nationwide	Includes capacity building activities for National Health Information and Education Service and social marketing of LLINs
Sustaining community mobilization activities	Community Health Program Component	500,000		Nationwide	Comprehensive malaria community mobilization activities including IEC/BCC, support for MIP, case management, ITNs
Support to Peace Corps malaria related activities	Small Project Assistance Peace Corps	25,000		Peace Corps Volunteer communities	Education and demonstration events, community mobilization
Community sensitization and mobilization for IRS	NMCP	217,935		4 districts	Communications to increase cooperation with IRS activities
SUBTOTAL BCC		1,892,935	0		
HEALTH SYSTEM STRENGTHENING / CAPACITY BUILDING					
Support to NMCP to enable program supervision	NMCP	175,000		Nationwide	Support visits by national staff to regional and district levels, particularly in high transmission zones
Implementation of recommendations from NMCP organizational assessment	Health System Strengthening Program Component	100,000		N/A	May include short-term coaching and/or training, workshops, small equipment

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Direct funding to regions and pilot higher-level central mechanism	Health System Strengthening Program Component	680,000		Thies, Kaolack, Kolda, Diourbel, Ziguinchor, Sedhiou	Contribution for cross-cutting activities including supervision, outreach to health huts, coordination
	MOH Direction for Administration and Equipment (DAGE)	100,000		Nationwide	Support to National Health Information Service using host-country financial system; test direct funding to one region
Participation in international technical / professional / scientific meetings to learn best practices and share experience	NMCP	20,000		N/A	ASTMH, MIM. 2 trips, 2 people each.
Support for malariology course of the NMCP	NMCP	200,000		N/A	Malariology course for district and regional staff, content adapted for pre-elimination context. Co-funding from Global Fund under Phase 2. 1 mid-level, 1 senior course. 25 people per session.
Supply chain management and drug management strengthening at the central level	Health System Strengthening Program Component	600,000		Nationwide	Support reforms being instituted by the Central Medical Stores; TA, training and supervision
Supply chain management and drug management strengthening at the peripheral level	Health Services Improvement Program	200,000		Nationwide	TA, training and supervision at district level and below; end-use verification

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	Component				
Support for planning and policy reforms related to malaria	Health System Strengthening Program Component	75,000		Nationwide	Support to NMCP for work planning, policy changes, advocacy with MOH and national authorities
Drug quality monitoring and advocacy	USP	250,000		Selected sites	Sampling and testing antimalarials from 9 sites nationwide; maintenance and repair of lab equipment. TA for drug quality monitoring and accreditation.
SUBTOTAL HSS & CAPACITY BUILDING		2,400,000	0		
IN-COUNTRY STAFFING AND ADMINISTRATION					
In-country staff Administrative expenses	CDC/USAID	1,127,000		Nationwide	Coordination of all in-country PMI activities
SUBTOTAL IN-COUNTRY STAFFING		1,127,000	0		
GRAND TOTAL		24,000,000	8,532,000		