Mechanisms and Proposed Activities	Sum of Budget (in \$)		
CDC IAA	\$	449,000.00	
Case Management-Related CDC TDY	\$	10,000.00	
CDC In-Country Staffing and Administration	\$	400,000.00	
SM&E - Related CDC TDY	\$	10,000.00	
Vector Control - CDC Entomology Lead TDY	\$	29,000.00	
Peace Corps	\$	40,000.00	
Support to Peace Corps	\$	40,000.00	
PMI Evolve	\$	1,450,000.00	
Support Entomological Monitoring	\$	1,200,000.00	
Support ITN Durability Monitoring	\$	250,000.00	
Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	\$	3,510,000.00	
Community-based Case Management	\$	700,000.00	
Facility-based Case Management	\$	200,000.00	
MIP Implementation	\$	150,000.00	
National Level Support for Case Management	\$	20,000.00	
Other Case Management Implementation	\$	50,000.00	
Private Sector Case Management	\$	25,000.00	
SBC Implementation	\$	200,000.00	
SMC Implementation	\$	1,600,000.00	
Support Routine Surveillance	\$	400,000.00	
Support Therapeutic Efficacy Study	\$	90,000.00	
Support to FETP	\$	75,000.00	
Systems to End Malaria Burden through meaningful Engagement (SEMBE - I)	\$	4,750,000.00	
Community-based Case Management	\$	800,000.00	
Facility-based Case Management	\$	300,000.00	
MIP Implementation	\$	250,000.00	
SBC Implementation	\$	300,000.00	
SMC Implementation	\$	2,600,000.00	
Support Routine Surveillance	\$	400,000.00	
Support to FETP	\$	100,000.00	
TBD Bilateral Mechanism	\$	200,000.00	
Other Case Management Implementation	\$	200,000.00	
TBD Central Mechanism	\$	300,000.00	
SBC Implementation	\$	300,000.00	
USAID	\$	1,978,805.00	
USAID In-Country Staffing and Administration: Administration	\$	440,000.00	
USAID In-Country Staffing and Administration: Staffing	\$	1,538,805.00	

Mechanisms and Proposed Activities	Sum	of Budget (in \$)
Working Capital Fund, Commodity Procurement	\$	7,372,195.00
Procure ACTs	\$	876,554.00
Procure Drugs for Severe Malaria	\$	1,256,860.00
Procure IPTp Related Commodities	\$	533,587.00
Procure RDTs	\$	747,524.00
Procure Reagents and Other TES Specific Commodities	\$	10,000.00
Procure SMC-Related Commodities	\$	3,947,670.00
Working Capital Fund, Supply Chain Technical Assistance	\$	1,150,000.00
Supply Chain and Pharmaceutical Management	\$	1,150,000.00
Working Capital Fund, Warehousing & Distribution	\$	800,000.00
Distribute ITNs for Mass Campaigns	\$	400,000.00
Warehousing and Distribution	\$	400,000.00
Grand Total	\$	22,000,000.00

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	No-this activity will not be implemented by Local Partners	\$1,200,000	Support for entomological monitoring, including insecticide resistance in 15 sites, and vector control bionomics in 5 of the sites spread across the ecological zones, as well as support for advance molecular analysis of specimens. Budget includes support for transport and analysis of samples, capacity building for entomologists, and support for NMCP staff supervision. The specific sites will be selected based on cordination with the NMCP and the Global Fund who is supporting entomological monitoring in a subset of the prioritized sites.
Vector Control	Insecticide Treated Nets	Distribute ITNs for Mass Campaigns	Working Capital Fund, Warehousing & Distribution	No-this activity will not be implemented by Local Partners	\$400,000	Support for distributions of ITNs for the 2025 mass campaign. Since these will be AMF-procured ITNs, there may be increased costs to meet donor requirements.
Vector Control	Insecticide Treated Nets	Support ITN Durability Monitoring	PMI Evolve	No-this activity will not be implemented by Local Partners	\$250,000	Support for Year 3 of ITN durability monitoring of nets distributed during the 2022 mass campaign. Durability monitoring will provide data on: 1) net survivorship and physical integrity; 2) bio-efficacy of insecticides; and 3) insecticidal content.
Drug Based Prevention	Prevention of Malaria in Pregnancy	MIP Implementation	Systems to End Malaria Burden through meaningful Engagement (SEMBE - I)	Local Partner for PMI	\$250,000	Training and supervision for ANC and other health service providers at public and non-profit health facilities in the Far North region to effectively deliver IPTp and routine case management services for pregnant women. Activities will include refresher training for new staff, in-service training, and supportive supervision, and will be integrated with the case management training and supervision package.

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
Drug Based Prevention	Prevention of Malaria in Pregnancy	MIP Implementation	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	n To be determined	\$150,000	Training and supervision for ANC and other health service providers at public and non-profit health facilities in the North regionto effectively deliver IPTp and routine case management services for pregnant women. Activities will include refresher training for new staff, inservice training, and supportive supervision, and will be integrated with the case management training and supervision package. Additionnal activities will include central level support to improve ANC services and coordination with other MCH programs.
Drug Based Prevention	Prevention of Malaria in Pregnancy	Procure IPTp Related Commodities	Working Capital Fund, Commodity Procurement	No-this activity will not be implemented by Local Partners	\$533,587	Procure 1,270,445 50-count 3-pill blisters of SP to ensure an adequate supply for pregnant women to receive IPTp throughout their pregnancy.
Drug Based Prevention	SMC	Procure SMC-Related Commodities	Working Capital Fund, Commodity Procurement	No-this activity will not be implemented by Local Partners	\$3,947,670	Procure 9,869,174 doses of co-blistered SP+AQ, representing monthly SMC doses for approximately 797,618 children (ages 3-11 months) and 1,301,376 children ages 12-59 months in all 47 districts in the North and Far North. This will cover for four rounds in 33 districts and five rounds in 14 districts.
Drug Based Prevention	SMC	SMC Implementation	Systems to End Malaria Burden through meaningful Engagement (SEMBE - I)	Local Partner for PMI	\$2,600,000	Implement SMC in all 32 health districts in the Far North Region (a mix of 4 and 5 cycles by district). Budget includes all elements of the campaign including planning, training, implementation, supervision, monitioring and SBC. The implementation modality will be a routine activity using the CHW platform for doorto-door distribution. Implementation costs are estimated at \$2 per child.
Drug Based Prevention	SMC	SMC Implementation	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	n To be determined	\$1,600,000	Implement SMC in all 15 health districts in the North Region (a mix of 4 and 5 cycles by district). Budget includes all elements of the campaign including planning, training, implementation, supervision, monitioring and SBC. The implementation modality will be a routine activity using the CHW platform for door-to-door distribution. Implementation costs are estimated at \$2 per child.

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	No-this activity will not be implemented by Local Partners	\$747,524	Procure approximately 1,836,299 RDTs for use in communities and health facilities (20% single tests).
Case Management	Procure Case Management- Related Commodities	Procure ACTs	Working Capital Fund, Commodity Procurement	No-this activity will not be implemented by Local Partners	\$876,554	Procure approximately 1,234,583 treatments of AL for use in communities and health facilities.
Case Management	Procure Case Management- Related Commodities	Procure Drugs for Severe Malaria	Working Capital Fund, a Commodity Procurement	No-this activity will not be implemented by Local Partners	\$1,256,860	Procure 606,079 vials of injectable artesunate for use in health facilities. Treatments will be prioritized for children under five years and pregnant women and are estimated at 15% of all malaria cases. Procure 47,217 of rectal Artesunate for use in communities
Case Management	Case Management Implementation	Community-based Case Management	Systems to End Malaria Burden through meaningful Engagement (SEMBE I)	Local Partner for PMI	\$800,000	Support for supervision and training for the CHW program in districts in the Far North regions to effectively deliver routine case management services to hard-to-reach populations. Activities will be integrated with the MIP training and supervision package targeting CHWs and will be incrementally expanded to increase coverage of the CHW program to additional districts in both regions. This support also includes travel stipends for when CHWs travel to report data and resupply commodities.
Case Management	Case Management Implementation	Community-based Case Management	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	n To be determined	\$700,000	Support for supervision and training for the CHW program in districts in the North region to effectively deliver routine case management services to hard-to-reach populations. Activities will be integrated with the MIP training and supervision package targeting CHWs and will be incrementally expanded to increase coverage of the CHW program to additional districts in both regions. This support also includes travel stipends for when CHWs travel to report data and resupply commodities. SEMBE I will also provide central level support in the developement/revision of national policies and training manuals such as the community IPTp strategy.

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
Case Management	Case Management Implementation	Facility-based Case Managemen	Systems to End Malaria Burden through t meaningful Engagement (SEMBE - I)	Local Partner for PMI	\$300,000	Training and supervision for service providers at public and non-profit health facilities in the Far North region to effectively deliver malaria case management services. Activities will include refresher training for new staff, in-service training and supportive supervision, and will be integrated with the MIP training and supervision package. Supervision will include activities related to commodity verification and will integrate district focal points.
Case Management	Case Management Implementation	Facility-based Case Managemen	Systems to End Malaria Burden through t meaningful Engagement - II (SEMBE - II)	To be determined	\$200,000	Training and supervision for service providers at public and non-profit health facilities in the North region to effectively deliver malaria case management services. Activities will include refresher training for new staff, in-service training and supportive supervision, and will be integrated with the MIP training and supervision package. Supervision will include activities related to commodity verification and will integrate district focal points.
Case Management	Case Management Implementation	Private Sector Case Management	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	To be determined	\$25,000	Funding to implement activities identified as priority for private sector engagement using results from a private sector assessment funded with previous year's MOP.
Case Management	Case Management Implementation	Other Case Management Implementation	TBD Bilateral Mechanism	To be determined	\$200,000	Support for community-led monitoring (CLM). This approach is led by Civil Society Organizations and community networks to gather actionable information on the implementation and quality of service delivery activities at facility and community levels.
Case Management	Case Management Implementation	National Level Support for Case Management	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	To be determined	\$20,000	Support for NMCP supportive supervision activities (from central level and regional level) including field visit logistics and communication support, as well as annual refresher training for central level supervisors.

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
Case Management	Case Management Implementation	Support Therapeutic Efficacy Study	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	To be determined	\$90,000	Therapeutic efficacy monitoring of ACTs in 2 sites including molecular testing of samples for resistance monitoring at a local Cameroonian lab. This amount represents partial funding for the 2026 TES with the remainder to be funded in the FY25 MOP.
Case Management	Procure Case Management- Related Commodities	Procure Reagents and Other TES Specific Commodities	Working Capital Fund, Commodity Procurement	No-this activity will not be implemented by Local Partners	\$10,000	Procurement of lab reagentes and supplies to suppory TES lab analysis.
Case Management	Case Management Implementation	Other Case Management Implementation	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	To be determined	\$50,000	Support implementation of a comprehensive quality assurance/quality control plan for malaria diagnostics, including RDTs and microscopy, in public and non-profit health facilities in the North and Far North regions. Support will focus on parasite detection, species identification, parasite counting, and use of RDTs. Laboratory supervision teams will also use malaria slide proficiency testing panels.
Supply Chain	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	Working Capital Fund, Supply Chain Technica Assistance		\$1,050,000	Strengthening of the supply chain management system with a regional level focus on improving warehousing and logistics data availability, accuracy, and use in the North and Far North regions. Central level activities will include strengthening LMIS, annual quantification, quarterly supply plan, and other supply chain strengthening activities. Support includes supervision from district focal points to health facilities.
Supply Chain	In-Country Supply Chain	Warehousing and Distribution	Working Capital Fund, Warehousing & Distribution	No-this activity will not be implemented by Local Partners	\$400,000	Support warehousing and distribution of SP, RDTs, ACTs and severe malaria treatments through Regional Funds in the North and Far North regions.
Supply Chain	In-Country Supply Chain	Supply Chain and Pharmaceutical Management	Working Capital Fund, Supply Chain Technica Assistance	No-this activity will not l be implemented by Local Partners	\$100,000	Support biannual End User Verification survey to assess the availability and use of malaria comodities at the health facility level.

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Systems to End Malaria Burden through meaningful Engagement (SEMBE - I)	Local Partner for PMI	\$400,000	Provide continued support at regional, district and health facility levels in the Far Region for routine surveillance (ie, HMIS), including data review and analysis, through the continuation of quarterly review meetings, production and dissemination of malaria bulletins, and routine data quality monitoring performed by the district health offices. PMI support for this activity is part of a broader HMIS strengthening effort supported by USAID and Global Fund. Support for NSP 2024 -2028 digitization activities with electronic devices, training, data entry and internet connection to strengthen community health workers reporting and campaings.
Monitoring, Evaluation, & Research	Surveillance, Monitoring and Evaluation	Support Routine Surveillance	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	To be determined	\$400,000	Provide continued support at regional, district, health facility and national levels for routine surveillance (ie, HMIS), including data review and analysis, through the continuation of quarterly review meetings, production and dissemination of malaria bulletins, and routine data quality monitoring performed by the district health offices. PMI support for this activity is part of a broader HMIS strengthening effort supported by USAID and Global Fund. Support for NSP 2024 -2028 digitization activities with electronic devices, training, data entry and internet connection to strengthen comùunity health workers reporting and campaigns.
SBC	SBC	SBC Implementation	TBD Central Mechanism	To be determined	\$300,000	Provide SBC strategy development and technical assistance to support implementation and M&E of community- and facility-based SBC in the North and Far North. Support will also include SBC capacity strengthening, coordination, and management support at central level, as well as SBC technical support for vaccine implementation.

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
SBC	SBC	SBC Implementation	Systems to End Malaria Burden through meaningful Engagement (SEMBE - I)	Local Partner for PMI	\$300,000	Support implementation of a coordinated SBC strategy to address priority behaviors including consistent net use and care throughout the year; prompt care-seeking for fever; early and regular ANC attendance and IPTp uptake; and quality service provision through adherence to case management and ANC policies. Activities will focus on community-based interpersonal communications (eg, community dialogues, CHW home visits) complemented by community radio. SBC emphasizes a prominent role for local leaders (municipal, religious, cultural) and civil society organizations, and focus on stronger linkages between community actors and service providers. In health facilities, training and supervision activities will incorporate an SBC focus on service communication and adherence to guidelines. Activities at both facility and community level will address rational use of commodities including overuse of severe malaria treatments. The SBC package will also include the annual SMC campaign with a focus on campaign awareness and acceptance/adherence to the drug regimen. As malaria vaccine implementation gets underway in Cameroon, PMI will also provide SBC support for demand generation as needed.

Broad Investment Area	Focused Investment Area	Proposed Activity	Mechanism	Local Partner	Budget (in \$)	Description of Proposed Activity
SBC	SBC	SBC Implementation	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	To be determined	\$200,000	Support implementation of a coordinated SBC strategy to address priority behaviors including consistent net use and care throughout the year; prompt care-seeking for fever; early and regular ANC attendance and IPTp uptake; and quality service provision through adherence to case management and ANC policies. Activities will focus on community-based interpersonal communications (eg, community dialogues, CHW home visits) complemented by community radio. SBC emphasizes a prominent role for local leaders (municipal, religious, cultural) and civil society organizations, and focus on stronger linkages between community actors and service providers. In health facilities, training and supervision activities will incorporate an SBC focus on service communication and adherence to guidelines. Activities at both facility and community level will address rational use of commodities including overuse of severe malaria treatments. The SBC package will also include the annual SMC campaign with a focus on campaign awareness and acceptance/adherence to the drug regimen. As malaria vaccine implementation gets underway in Cameroon, PMI will also provide SBC support for demand generation as needed.
	Other Health Systems Strengthening	Support to FETP	Systems to End Malaria Burden through meaningful Engagement (SEMBE - I)	Local Partner for PMI	\$100,000	Support to the Frontline and Intermediate FETP. Frontline support includes one cohort of trainees in the North and is targeted to malaria focal points at health facilities and hospitals. Support to the Intermediate program will expand the pool of trained public health professionals to serve as mentors to Frontline trainees.

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	Support to FETP	Systems to End Malaria Burden through meaningful Engagement - II (SEMBE - II)	n To be determined	\$75,000	Support to the Frontline and Intermediate FETP. Frontline support includes one cohort of trainees in the Far North, and is targeted to malaria focal points at health facilities and hospitals. Support to the Intermediate program will expand the pool of trained public health professionals to serve as mentors to Frontline trainees.
Other Health Systems Strengthening	Other Health Systems Strengthening	Support to Peace Corps	Peace Corps	No-this activity will not be implemented by Local Partners	\$40,000	Support to maintain two Peace Corps Malaria Volunteers to coordinate volunteers' malaria activities throughout the country; one volunteer may be embedded with a PMI implementing partner at national or regional level (\$20,000). Support small project grants (\$10,000) for which volunteers can submit applications.
Staffing & Administration	Staffing & Administration	Case Management-Related CDC TDY	CDC IAA	No-this activity will not be implemented by Local Partners	\$10,000	One technical assistance visit from CDC to support case management activities.
Staffing & Administration	Staffing & Administration	SM&E - Related CDC TDY	CDC IAA	No-this activity will not be implemented by Local Partners	\$10,000	One technical assistance visit from CDC to support surveillance, monitoring, and evaluation activities.
Staffing & Administration	Staffing & Administration	Vector Control - CDC Entomology Lead TDY	CDC IAA	No-this activity will not be implemented by Local Partners	\$29,000	Two technical assistance visits from CDC to help strengthen entomological capacity at the national and regional levels with emphasis on synergist/resistance intensity testing and coordination of entomological monitoring efforts with partners, including representative resistance and vector bionomics sampling.
Staffing & Administration	Staffing & Administration	USAID In-Country Staffing and Administration: Administration	USAID	No-this activity will not be implemented by Local Partners	\$440,000	Administrative and oversight costs
Staffing & Administration	Staffing & Administration	USAID In-Country Staffing and Administration: Staffing	USAID	No-this activity will not be implemented by Local Partners	\$1,538,805	Staffing costs including 1 PMI/USAID RA, 1 PMI/USAID malaria specialist (FSN) and 1 PMI data specialist (FSN).
Staffing & Administration	Staffing & Administration	CDC In-Country Staffing and Administration	CDC IAA	No-this activity will not be implemented by Local Partners	\$400,000	Staffing and administration for one PMI/CDC Resident Advisor.