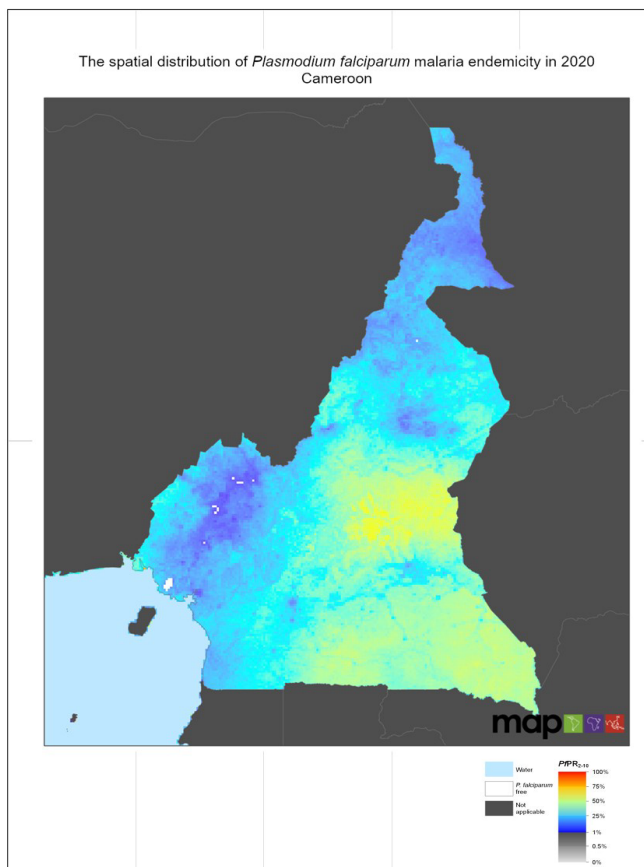


## Scorecard for Accountability and Action



### Metrics

Policy	
Signed, ratified and deposited the AMA instrument at the AUC	
Malaria activities targeting refugees in Malaria Strategic Plan	
Malaria activities targeting IDPs in Malaria Strategic Plan	
Zero Malaria Starts With Me Launched	
End Malaria Council and Fund Launched	
Resistance Monitoring, Implementation and Impact	
Drug efficacy studies conducted since 2019 and data reported to WHO	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	5
Insecticide resistance monitored since 2020 and data reported to WHO	
% of vector control in the last year with next generation materials	98
ACTs in stock (>6 months stock)	▲
RDTs in stock (>6 months stock)	▲
On track to reduce malaria incidence by at least 75% by 2025 (vs 2015)	
On track to reduce malaria mortality by at least 75% by 2025 (vs 2015)	
Tracer Indicators for Maternal and Child Health and NTDs	
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2024)	21
% of Neglected Tropical Disease MDAs Achieving WHO Targets	60
National Budget Allocated to NTDs	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2024)	54
DPT3 coverage 2024 (vaccination among 0-11 month olds)	77
Climate Change and VBDs in NDCs	

Malaria transmission occurs year-round in Cameroon and is most intense in the south of the country. The annual reported number of malaria cases in 2024 was 3,008,291 with 2,016 deaths.

### Key

	Target achieved or on track
	Progress but more effort required
	Not on track
	No data
	Not applicable

<p><b>Cameroon ALMA Quarterly Report</b> <b>Quarter One, 2026</b></p>	 <p>AFRICAN LEADERS MALARIA ALLIANCE</p>
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## Malaria - The Big Push towards 2030

Africa is at the centre of a perfect storm that threatens to disrupt malaria services and undo decades of progress. Countries must act urgently to both prevent and mitigate the adverse effects of the ongoing global financial crisis, decreasing ODA, increasing biological threats, climate change, and humanitarian crises. These threats represent the most serious emergency facing malaria in 20 years and will lead to malaria upsurges and epidemics if not addressed. To get back on track and eliminate malaria, US\$5.2 billion is needed annually to fully finance country national malaria plans, and urgently fill gaps created by the recent reductions in ODA. Extreme weather events and climate change present a significant threat. By the 2030s, 150 million additional people will be at risk of malaria because of warmer temperatures and increased rainfall. Countries must also take action to confront the threats of insecticide and drug resistance, reduced efficacy of rapid diagnostic tests, and the invasive *Anopheles stephensi* mosquito which spreads malaria in both urban and rural areas. The malaria toolkit continues to expand. WHO has approved the use of dual-insecticide mosquito nets that are 43% more effective than traditional mosquito nets and will address the impact of insecticide-resistance. WHO have also recently approved the use of Spatial Repellents. New medicines for treating malaria and two malaria vaccines for children have also been approved with an increasing number of countries deploying these new tools. Malaria can serve as a pathfinder for primary health care strengthening, climate change and health, and Universal Health Coverage. Countries must work to sustain and increase domestic resource commitments including through multisectoral End Malaria and NTD Councils and Funds, which have raised over US\$218 million to date.

A recent report by ALMA and MNM UK, “The Price of Retreat,” highlights the expected impact of malaria between 2025-2030 on GDP, trade and key sectors for development in Africa. If Cameroon cannot sustain malaria prevention due to reductions in malaria financing, this would lead to an estimated 14,062,403 additional cases, 15,254 more deaths, and GDP loss of US\$2.1 billion between 2025 and 2030. However, if we mobilise the necessary resources and achieve a 90% reduction in malaria, in Cameroon there will be a US\$6.2 billion increase in GDP.

### Global Fund Allocation

The Global Fund allocation for Cameroon for Grant Cycle 8 is US\$236.8 million for HIV, tuberculosis, malaria, and health systems strengthening for 2027-2029. The malaria component has been allocated US\$91 million. The allocations to the individual disease components are not fixed, and can be adjusted at country level. Cameroon is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation, as well as from domestic resources, to sustain coverage as much as possible.

### Progress

Cameroon has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has completed the insecticide resistance monitoring and

management plan. In response to the identified insecticide resistance, the country has rolled out next generation mosquito nets. The national strategic plan includes activities targeting refugees and IDPs. Cameroon has launched the Zero Malaria Starts with me campaign.

In line with the priority agenda of the ALMA chair, President Advocate Duma Gideon Boko, Cameroon has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Control Scorecard. The country is also planning the launch of their End Malaria Council and Fund. The country has launched their ALMA youth corps.

### Impact

The annual reported number of malaria cases in 2024 was 3,008,291 with 2,016 deaths.

### Key Challenges

- Insecticide resistance.
- Insufficient resources to fully implement the national strategic plan including the impact of recent reductions in ODA

### Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Impact	Work to ensure that malaria elimination is prioritised in the America First Global Health Strategy Country Memorandum of Understanding, and that costed prioritised plans are developed	Q1 2026		The Government of Cameroon has signed the MOU with the USG. The NMP engaged in the discussions. US Government procured commodities continue to be delivered to the country
Resource Mobilisation	Work to fill key gaps in malaria funding	Q4 2024		Some key funding gaps are being considered in the 2026 State Budget for Cameroon which has been validated by the country's Parliament in early December 2025. The adopted budget is set to increase the domestic budget by 14% compared to 2025. The budget focuses on implementing the national development plan, supporting security, strengthening the health system, and creating a new special fund for the economic empowerment of women and youth employment. The NMCP in collaboration with ALMA, visited the Zambia EMC to understand the model established in the mobilisation of domestic resources
Impact	Work to address the increase in malaria incidence since 2015, and the lack of progress in reductions in malaria deaths which means that the country is	Q4 2026		Cameroon, in collaboration with partners, has finalised the Malaria Programme Review which assesses the achievements versus the planned targets. In collaboration with Bluesquare, Sub National Tailoring has been conducted to target interventions to maximise impact, and the results

	not on track to achieve the 2025 target of a 75% reduction in malaria incidence and deaths			were considered in the new MSP
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The country has responded positively to previous recommended action on drug resistance monitoring and is working to implement the actions.

## Neglected Tropical Diseases

### Progress

Progress in addressing Neglected Tropical Diseases (NTDs) in Cameroon is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage for lymphatic filariasis is 100% (disease under surveillance), 95% for schistosomiasis and 76% for onchocerciasis. It is low for soil transmitted helminthiasis (61%) and 0% for trachoma. Overall, the NTD preventive chemotherapy coverage index for Cameroon in 2024 is 21 and this represents a very substantial decrease compared with the 2023 index value (70). The country did not reach WHO MDA coverage targets for soil transmitted helminthiasis and for trachoma.





### Previous Key Recommended Actions

#### Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
NTDs	Work to implement Preventive Chemotherapy (PC) for trachoma and improve PC coverage for Soil Transmitted Helminthiasis	Q4 2026		Deliverable not yet due
Climate Change and health	Work to collate data on the impact of climate change on Vector Borne disease and incorporate into the next round on National Determined Contributions and National Climate Change Action Plans	Q4 2025		The country has included Vector-Borne diseases in the National Adaptation Plan

The country has responded positively to previous recommended action on submitting data to the AUC on a national budget line for NTDs.

### Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due