NEWSLETTER

CS4ME

CIVIL SOCIETY FOR MALARIA ELIMINATION

HIGHLIGHTS

JULY - SEPTEMBER 2026

ABOUT CS4ME

CS4ME is a global network of civil society organisations (CSOs) local networks committed to eliminating malaria. It brings together more than **1,000** members, including CSOs and local networks, primarily in **55** countries across Africa and South Asia. Since its establishment in 2019, CS4ME has been helping to build its members capacity and bringing civil society organisations together so that they can make a real impact and achieve the goal of eliminating malaria.

Join the movement and become a CS4ME member by clicking **here!**

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SPOTLIGHT

Esther Emmanuel EKANEM : promoting leadership and the inclusion of adolescent girls and young women in malaria-related decision-making



A prominent figure in Nigerian civil society, Esther Emmanuel Ekanem embodies the transformative power of community leadership, mentoring, and social innovation. A certified teacher with a bachelor's degree in physics education (with honors) from the University of Uyo, she combines academic rigor with field expertise in program management, strategic advocacy, gender equality, and social inclusion (GESI).

Her journey reflects a remarkable progression: starting as a volunteer at the Brokline Foundation to support vulnerable households, she is now the Deputy Executive Director and Project Manager for the Gender Equality Fund (GEF). Simultaneously, as coordinator of the NYNETHA network in Akwa Ibom State, she works closely with governmental institutions and key partners such as ACOMIN to promote public health and enhance girls' engagement.

Deeply convinced that sustainable solutions arise from citizen participation, she has made youth development her flagship cause. Through her mentoring initiatives, she has supported over 80 adolescent girls and young women



(AGYW), enabling more than 30 of them to take leadership roles in projects and to actively advocate for their rights. To ensure the long-term impact of these efforts, she is currently leading the creation of a regional network dedicated to AGYW, thereby providing a sustainable framework for mutual support, collective advocacy, and access to decision-making bodies.

This commitment to inclusive governance is strongly manifested in the fight against malaria through the initiative she leads within the Brokline Foundation, with the support of CS4ME. There, she conducts strategic dialogues to integrate young women, including those with disabilities, into decision-making bodies. She achieved a significant milestone in September 2026 with the official integration of two representatives of AGYW into the State of Akwa Ibom Malaria Technical Working Group.

Through her work with Brokline Foundation and NYNETHA, Esther Emmanuel Ekanem continues to build essential bridges between community realities, field research, and policy decision-making. Her journey underscores a fundamental truth: young people are not merely beneficiaries of health programs, but the true partners and drivers of their own future.

Thanks to Esther Emmanuel Ekanem for her inspiring leadership, dedication, and contribution to an Africa where every young woman has the power and opportunities necessary to shape her destiny.

REGIONAL NEWS FROM THE NETWORK

30 community leaders trained in Kasaï for a fight against malaria integrating a gender approach



Family picture of the community leaders trained in Kamuesha

Thirty community leaders from the Kamuesha Health Zone in the Democratic Republic of the Congo (DRC), including 16 women and 14 men, took part on Friday, September 4, 2026, in a training session organized by the Kasaï Provincial Coordination of the Youth Corps Against Malaria (CJP-RDC/ASBL). This activity is part of the implementation of the Gender Equality Fund (GEF) project in the Fight Against Malaria in the DRC .

Funded by the Global Fund and implemented with the technical support of the African Leaders Malaria Alliance (ALMA), this project aims to strengthen the capacities of community advocates. The training focused on the strategic guidelines of the GEF Project; the role and responsibilities of community advocates in the fight against malaria and in health; harmful gender-related practices that increase vulnerability to malaria.

The session was held in the presence of the health authorities of the zone, as well as the authorities from the education sector, elements of the Congolese National Police, as well as representatives of religious denominations and the educational sector. Through this initiative, CJP-RDC/ASBL intends to establish a network of community relays at the household, school, and community levels, in order to contribute to the sustainable reduction of malaria in the Kamuesha Health Zone, while ensuring the effective integration of the gender approach.

Niger: DES-ICI launches the regional consultation frameworks of the Integrated CLM in Niamey and Zinder



In Niger, community monitoring is establishing itself as a lever to improve access to and the quality of health services. In this approach, the platform Healthcare Democracy and Citizen Engagement (DES-ICI) has launched regional frameworks for multi-sectoral coordination for Community-Led Integrated Monitoring (CLM), covering the first and second quarters of 2026.

The official launch ceremonies were held in Niamey and Zinder, under the presidency of representatives of regional authorities, in the presence of decentralized technical services and the various actors involved in the community response. These meetings brought together at the same table administrative authorities, local governments, health authorities, customary

and religious leaders, community and civil society representatives, as well as technical and financial partners.

The exchanges made it possible to share the main findings from community monitoring and to identify, for each of the two regions, recommendations and advocacy priorities. The participants also made concrete commitments to contribute to the improvement of access to services and the quality of care provided to populations.

These consultation frameworks strengthen the dialogue between communities and health system actors. The concerns expressed on the ground can thus be better taken into account in decisions and actions aimed at improving health services.



Family picture of the participants in the regional consultation frameworks of Integrated CLM 2026 in Niamey and Zinder

Malaria Youth Champions: Female Leadership at the Heart of Discussions

How can one take their place, make their voice heard, and assert oneself with confidence? This was the central focus of the session dedicated to female leadership, organized as part of the training of the Malaria Youth Champions of ALMA (African Leaders Malaria Alliance). Led by Rafiqah from UCAAM (United CBOs Against Malaria), the session encouraged participants to strengthen their self-confidence and their ability to exercise more assertive leadership.

The discussions highlighted several essential qualities for developing leadership: self-confidence, empathy, resilience, integrity, effective communication, and strategic vision. Beyond these qualities, autonomy, mentorship, inclusivity, and the development of professional networks were presented as important levers to promote women's access to decision-making spaces and positions of responsibility.

To move from confidence to action, the participants also discovered the PREP method, a simple tool for structuring a speech with clarity and impact. It involves presenting one's Point of view (P), explaining the Reason (R), supporting it with a concrete Example (E), and then restating the Point of view (P) in conclusion.

The session also emphasized the principles of effective communication: clarifying one's message, knowing the audience, adapting the speech, and specifying the expected action. It concluded with a strong message in favor of economic empowerment: **«The most persistent gender problem is money. Have money in your pocket.»** A call to strengthen knowledge, master data, and carry one's voice with confidence.



picture of the participants in the women leaders training

From capacity strengthening to Influence: AGYW Take Their Place in Malaria Decision-Making in Akwa Ibom



The journey towards meaningful adolescent girls and young women (AGYW) participation in malaria decision-making began with capacity strengthening. On March 18th 2026, Impact Santé Afrique (ISA), the CS4ME Secretariat, trained AGYW from 07 African countries: Cameroon, Kenya, Lesotho, Nigeria, Tanzania, Uganda and Zambia during the **"Empowered to Act: Capacity Building for AGYW to Lead Malaria Advocacy"** training. The session strengthened participants' knowledge, skills and confidence to engage in malaria advocacy and decision-making processes.

For AGYW in Akwa Ibom State, Nigeria, this capacity strengthening provided an important foundation for turning knowledge into action. With support from the Civil Society for Malaria Elimination (CS4ME), **Brokline Foundation (BLF)** subsequently implemented a project to strengthen the meaningful inclusion of AGYW, including young women with disabilities, in malaria decision-making spaces. Through sustained advocacy, the initiative is creating new opportunities for AGYW to have a voice and a meaningful role in shaping the malaria response in Akwa Ibom State.

Through its project, **"Establishing and Strengthening Meaningful Inclusion of AGYW in Malaria Decision-Making Spaces in Akwa Ibom State,"** Brokline Foundation , set out to secure the inclusion of five AGYW in the State Malaria Technical Working Group (mTWG) and other malaria governance spaces.

Brokline Foundation began by mapping stakeholders and assessing AGYW participation in malaria governance. The assessment found that AGYW were not represented in key malaria decision-making and accountability structures. Stakeholders identified the absence of policy guidance, age and gender biases, financial and disability-related barriers, limited technical capacity and limited awareness as key challenges. These findings informed an advocacy brief, policy messages and targeted engagement with government, malaria programmes, civil society and partners. Advocacy was also amplified through two radio jingles and 10 IEC materials shared on social media, reaching **4,653 views and 495 engagements.**

A stakeholder roundtable held on **July 31st 2026** brought together 20 participants, including five AGYW. The engagement secured commitments from SMEP, the Directorate of Public Health, the Adolescent Health Coordinator and ACOMIN to create opportunities for AGYW participation in malaria and health coordination structures. Follow-up advocacy helped translate these commitments into concrete opportunities for participation.

On **September 10th 2026**, two AGYW representatives participated in the Akwa Ibom State Malaria Technical Working Group meeting and were formally inaugurated into the mTWG. They were also assigned to the Advocacy, Communication and Social Mobilization (ACSM) group.

Their participation went beyond attendance: one AGYW representative actively contributed to the proceedings by seconding the motion for adjournment.

This marks an important shift from no AGYW representation to formal representation and active participation in a key malaria governance structure.



Sustaining the Momentum

The Akwa Ibom experience demonstrates that meaningful AGYW inclusion requires more than a seat at the table. It requires evidence, sustained advocacy, stakeholder commitment, capacity strengthening and opportunities for AGYW to influence decisions. BLF and its partners will continue working to strengthen AGYW participation in malaria governance and expand their inclusion in other coordination and accountability structures.



Family picture AGYW (In purple t-shirt and purple hat) at the malaria Technical Working Group meeting held on September 10 2026, Akwa Ibom State Nigeria

MALARIA NEWS

WORLD MOSQUITO DAY 2026: LUALABA TAKES ACTION



Every August 20th, World Mosquito Day highlights one of the deadliest animals in the world. Since the discovery in 1897 by Sir Ronald Ross of the role of mosquitoes in the transmission of malaria, this disease remains a major threat, In 2024, there were 282 million cases and 610,000 deaths. ***(Sources: WHO report 2025)***

In Kolwezi, the Youth Corps Against Malaria (CJP), the Lualaba coordination, and member of the CS4ME platform, turned this commemoration into field action. On August 20, 2026, in the Manika commune, more than 200 women traders and 25 pharmacists were mobilized for an awareness-raising activity.

While malaria remains one of the leading causes of mortality among children under five in the DRC, the discussions focused on lifesaving measures: understanding transmission, correctly using insecticide-treated nets, cleaning the environment to eliminate breeding sites, and seeking prompt medical care.

This action illustrates the spirit of CS4ME: a civil society at the forefront, where the fight against malaria becomes everyone's concern, and where local engagement deserves to be further strengthened.

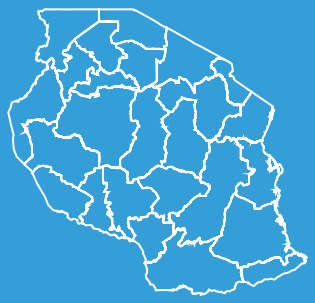


Family Picture of malaria awareness by the CJP/Lualaba at the Mwilu Market in Kolwezi.

SPEAKER ON

Civil society strengthens its role in the response to malaria in Tanzania, Cameroon, and Côte d'Ivoire

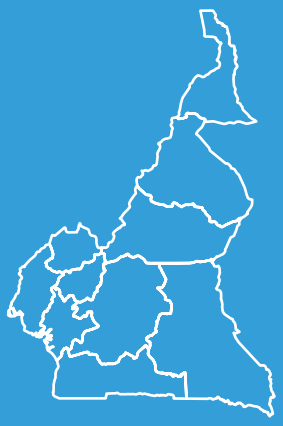
In July 2026, the NMCP–CS4ME Task Forces of Tanzania, Cameroon, and Côte d'Ivoire brought together the national malaria control programs (NMCPs) and civil society around a common challenge: maintaining the gains in malaria control despite limited resources. At the heart of the discussions was the essential role of community actors in bringing interventions closer to populations and enhancing the effectiveness of the response.



In Tanzania, strengthening coordination and resource mobilization

Gathered on July 10 in Morogoro, Tanzanian stakeholders particularly noted the difficulties faced by some civil society organizations: limited resources, prolonged periods without funding, and still insufficient participation in defining national strategies.

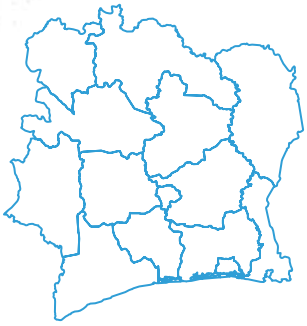
Among the approaches adopted are strengthening quarterly meetings, systematically integrating malaria into various health forums, as well as continuous training for stakeholders, notably through online sessions. The establishment of a group responsible for developing funding proposals also aims to diversify partnerships and support the continuity of interventions.



In Cameroon, field results argue for stronger involvement.

In Yaoundé, on July 8, discussions focused more on community interventions and future prospects. The first cycle of seasonal malaria chemoprevention (CPS) reached nearly two million children in the North and Far North regions. Home visits, announcements in markets and places of worship, as well as the use of community radios, helped bring the intervention closer to families. Attention is now turning to the Central region, where about three million long-lasting insecticidal nets are expected as part of a new campaign, after several years without a mass distribution campaign.

For civil society organizations, this dynamic must be accompanied by greater involvement in the planning, development, and dissemination of communication materials adapted to local languages, as well as in the monitoring of indicators that allow for better documentation of their contribution. The institutionalization of the Task Force through a charter and internal regulations approved by national health authorities also ranks among the most important recommendations from the latest meeting between the actors of the NMCP - CS4ME Cameroon collaboration platform.



In Côte d'Ivoire, consolidating achievements and better supporting community actors

In Côte d'Ivoire, civil society actors, the NMCP , and partners responsible for implementing malaria control programs financed by the Global Fund took advantage of a Task Force meeting held on July 21, 2026, to review the progress made in combating this scourge. Deaths related to the disease decreased from 3,222 in 2017 to 1,027 in 2025, reflecting the advances achieved over recent years. The discussions highlighted several major challenges, notably the situation of community health workers, with concerns related to their status, motivation, and integration into the public service. Breakdowns in screening equipment reported in the field were also addressed by the NMCP .

Among the proposed avenues are adequate support for community health workers through the provision of equipment and supplies to manage uncomplicated malaria at the community level, better supervision of women's groups, which play a role in identifying and directing children to health facilities, as well as advocacy for a community health service in each Region.

The same priority: better recognizing the role of civil society

Beyond the differences between the three countries, the same observation emerges: the fight against malaria also requires a civil society that is better involved, better recognized, and better supported. In a context of limited resources, community actors remain an essential link between national strategies and on-the-ground realities. Giving them a place in decision-making spaces also means strengthening the response closest to the populations.



Family picture of NMCP-CS4ME Cameroon

MEET THE NEW MEMBERS



Main d'Alliance pour le Développement ONG is officially a member of CS4ME .



Solidarité pour la Paix et Accompagnement des Veuves et Orphelins des Militaires ONG is officially a member of CS4ME



ONG unies pour Sauver des vies is officially a member of CS4ME



Save Life Concern is officially a member of CS4ME

WE ARE STILL TALKING ABOUT IT

CS4ME Webinar: GC8 Global Fund:How can we address and fill the gaps identified in the malaria country concept notes



In a context marked by increased financial constraints, reduced external funding, and the need to strengthen national ownership of health programs, Impact Santé Afrique, Secretariat of CS4ME, organized on Thursday, September 24, 2026, the third session of the CS4ME Malaria Civil Society Coffee Talk. This meeting, focused on the theme **«GC8 Global Fund:How can we address and fill the gaps identified in the malaria country concept notes ? »,** brought together 161 participants from 78 civil society organizations (CSOs). At the beginning of the session, the importance of this meeting was emphasized in a strategic context marked by changes in funding and governance in the fight against malaria.The objective was clear: to identify the main gaps observed in the country funding requests for malaria and to propose concrete ways to address and fill them within the framework of the Global Fund's GC8 cycle.

Update on CRG and Community Engagement Strategy

The updated June 2026 report from the Community, Rights and Gender (CRG) department of the Global Fund presented the actions of this institution to strengthen local and national participation, leadership, and integrated health systems, as well as its new intervention strategy for GC8. Participants were invited to take ownership of the available tools and the achievements of CS4ME within the framework of the strategic community engagement initiative to better engage in the process of the next grant cycle.

Experience Sharing from Sierra Leone and Burkina Faso

The experience sharing from Sierra Leone presented the journey of civil society during the development of the malaria concept note. A journey initially marked by the exclusion of CSOs from the design of the National Strategic Plan (NSP), then subsequently adjusted thanks to advocacy work that allowed the integration of community priorities into the final version. The analysis highlighted five major gaps concerning the limited participation in the processes of the National Strategic Plan (NSP) and funding requests, the weak representation in the governance of the Country Coordinating Mechanism (CCM) , the insufficiency of resources for coordination at national, regional, and district levels, limited technical capacities in facing Global Fund procedures, and the difficulty in presenting a common community position.

At the same time, the experience of Burkina Faso has highlighted a structured mobilization around more than 11 constituent groups of the CCM , which collectively voiced the community priorities despite a context marked by security challenges and difficulties in accessing populations for healthcare. Three structural demands were put forward for sustainability, namely institutionalizing community practices, formalizing interventions through contracts, and sustainably mobilizing resources.

Another session focused on the analysis of the main gaps identified. The analysis highlighted eight major pitfalls: insufficient participation of civil society in the NSP processes and funding requests, low representation in CCM governance, poor coordination at all levels, limited resources for advocacy, restricted technical capacities in dealing with Global Fund procedures, inadequate use of CLM data in decision-making, low promotion of this data in the media, and strong dependence on external funding.

Several key action points were identified, namely:

- Ensure early involvement of civil society from the initial stages of developing the NSP and budgets;

- Strengthen the voice and influence within the CCM;

- Establish regular coordination and harmonize common positions;

- Mobilize specific resources for advocacy and technical support;

- Make the CLM a strategic tool by transforming collected data into evidence for decision-making;

- Intensify communication to increase the visibility of community priorities;

- Engage in early advocacy for sustainability and domestic resource mobilization.

In light of these priorities, CSOs were called upon to adapt their approaches, to shift from a grant-based logic to a performance-oriented logic, and to engage proactively in country dialogues to ensure that community priorities are taken into account in funding requests. Following these exchanges, the question and answer session allowed for clarification of practical aspects, notably the promotion of CLM data with the media as strategic partners and the need to anticipate the transition in the face of declining funding.

At the conclusion of this webinar, it was reaffirmed that civil society must position itself as a strategic actor throughout the national GC8 processes, strengthen its collaboration, and advocate collectively for sustainable malaria funding.

Strengthening the leadership of adolescent girls and young women (AGYW)



Thanks to the Gender Equality Fund (GEF), Impact Santé Afrique (ISA), the CS4ME secretariat has continued to strengthen the leadership and organizational capacities of adolescent girls and young women (AGYW) as well as of organizations working with and for them, in order to contribute more effectively to the fight against malaria.

As part of capacity-building activities for GEF beneficiaries, Impact Santé Afrique organized a series of three training sessions entitled **«Strengthening Adolescent and Young Women Leadership through Capacity Building in Strategic Planning, Resource Mobilization, and Proposal Development»** on June 30, July 1, and July 3, 2026. These sessions enabled adolescent girls and young women, as well as organizations working for adolescent girls and young women, to acquire practical skills to enhance strategic planning, mobilize resources, and develop stronger funding proposals.

58 participants from 8 African countries: Cameroon, Eswatini, Ghana, Kenya, Mozambique, Nigeria, Tanzania, and Uganda, took part in this training.

From knowledge to practical application

The capacity-building initiative combined three The capacity-building initiative combined three complementary approaches: the development of a practical guide, interactive training webinars, and one-on-one mentoring sessions. The guide was developed following consultations with representatives of AGYW and was designed to provide practical tools, advice, best practices, and examples adapted to the realities of community-based organizations and those working with adolescent girls and young women. The training webinars then brought the guide to life through interactive exercises, recap surveys, and quizzes. These approaches allowed participants to test their understanding, ask questions, and reflect on how the concepts could be applied within their own organizations. This approach proved satisfactory, as a post-training evaluation demonstrated strong learning outcomes.To complement the webinars, a series of individual mentoring sessions was organized by Impact Santé Afrique, allowing participants to receive more targeted support based on their organizational priorities and challenges. Between July 15 and August 10, 2026, 18 mentoring sessions were conducted, involving 17 organizations and 27 individuals. Proposal development was the most requested area of support. The mentoring focused on developing clear, evidence-based problem statements, strengthening the links between objectives, outcomes, deliverables, and activities, and ensuring consistency between proposals, work plans, and budgets. The principle of «show, don't tell» became an important lesson throughout the mentoring process. Other areas addressed included strategic planning, resource mobilization, and monitoring and evaluation,as well as the management of sub-subventions.

The mentoring sessions revealed common challenges faced by the participating organizations. These included developing realistic project scopes and timelines, setting achievable objectives, identifying appropriate monitoring indicators, and preparing budgets that accurately reflect implementation costs.

For some recent, volunteer-led organizations, resource mobilization remained a significant concern. The discussions therefore explored donor mapping, developing relationships with potential funders, and diversifying funding sources. Participants also considered alternative approaches such as social enterprise, community fundraising, and in-kind contributions.

During strategic planning sessions, organizations received support to clarify their priorities, reduce overly broad ambitions, and establish realistic objectives that could be translated into operational plans, monitoring and evaluation frameworks, and resource mobilization strategies.

From Capacity Building to Stronger Leadership of Adolescent Girls and Young Women

The capacity-building initiative demonstrated the importance of combining knowledge sharing with practical support. While the webinars provided participants with fundamental knowledge and tools, the mentoring sessions created a space to apply these skills to real organizational challenges.

Through this approach, adolescent girls and young women and their organizations were better supported in strengthening their planning, identifying appropriate funding opportunities, developing stronger proposals, and mobilizing resources around priorities important to their communities.

The initiative has also strengthened the broader objective of the GEF to enhance the leadership and participation of adolescent girls and young women in health responses and malaria control. By investing in both individual skills and organizational capacity, ISA continues to support adolescent girls and young women, as well as organizations serving adolescent girls and young women, to move from participation to meaningful leadership and influence in health decision-making spaces.

STRONGER TOGETHER

PUTTING GC7 TO THE BENEFIT OF COMMUNITIES, THE CIVIL SOCIETY ROUNDTABLE REVIEWS THE OUTCOMES AND PREPARES FOR THE FUTURE



Impact Santé Afrique (ISA), Secretariat of CS4ME, organized on July 21, 2026, in Yaoundé, a roundtable of Civil Society Organizations (CSOs) engaged in the fight against malaria, HIV/AIDS, and tuberculosis. Held under the theme «Making GC7 Work for Communities,» the meeting brought together 23 participants, including members of the Country Coordinating Mechanism (CCM). of Cameroon, representatives of ONG, and CSOs active in combating the three diseases. This edition took place in a context marked by a reduction in international funding and uncertainties related to the preparation of the Global Fund's GC8 funding cycle. One objective was identified: to define the priority actions that civil society organizations (CSOs) engaged in the fight against malaria, HIV, and tuberculosis should implement under the GC7 grant, in order to anticipate the effects of the expected funding reduction within the framework of GC8 for community members. The day opened with a review of the December 2025 roundtable. Of nine recommendations, five have been implemented and two remain in progress, including advocacy for the appointment of a National Community Principal Recipient and the establishment of a common fund to support the participation of CSOs in decision-making processes.

The presentation of the CS4ME guide entitled «Global Fund: What I Need to Know as a Civil Society Organization Engaged in the Fight Against Malaria» highlighted that, although several steps of GC8 are already being implemented in Cameroon, civil society still has objectives to achieve in the implementation of Global Fund grants.

Subsequently, two panels structured the discussions. The first, dedicated to the achievements, challenges, and best practices of GC7, brought together the organizations SHEMKA Foundation, AFVIPO, For Impacts Social (FIS), and Affirmative Action. Despite facing recurring obstacles such as lack of funding, disbursement delays, stock shortages, and security constraints, these actors nevertheless developed innovative approaches. These include the creation

of solidarity funds for polyvalent community health workers (ASCP), strengthening advocacy with municipal authorities to mobilize their support in the fight against malaria, as well as transforming Drop-in Centers into one-stop shops integrating injectable PrEP in five regions of Cameroon.

The second panel, composed of RESIPAT, NOLFOWOP, RECAP+, and JAPSSO, focused on preparing for GC8. The discussions identified thirteen key lessons, highlighting three fundamental priorities: maintaining continuous advocacy, engaging in early and inclusive dialogue , and systematically documenting community needs.

The exchanges on sustainability, transition, and co-financing led to a shared vision and the definition of clear priorities. These include pooling resources among CSOs, developing income-generating activities, and preparing an anticipated transition plan. Emphasis was also placed on strengthening advocacy with key ministries, local councils, and the network of United Cities and Municipalities of Cameroon (UCMC).

At the end of the discussions, five major recommendations were formulated. They aim to strengthen the leadership of CSOs in the area of sustainability and to formalize their role in the processes of the Global Fund, in support of the CCM . They also advocate for the development of income-generating activities, the conduct of advocacy with the Government to support the transition, as well as the mobilization of Corporate Social Responsibility (CSR) as an alternative funding lever.

The meeting concluded with thanks from CS4ME and the distribution of awareness materials on malaria. The evaluation conducted among participants showed a satisfaction rate of 85 out of 100, with the panel and sustainability pathways being particularly appreciated, and the main needs expressed being capacity building, advocacy, and sustainability.



Family photo of the roundtable at the Yahoot Hotel in Yaoundé

SAVE THE DATE

November						
Mon	Tue	Wed	Thu	Fri	Sat	Sun
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30						

- **2nd–13th November 2026:** NMCP - CS4ME Task Force Field Oversight Visit and Resource Mobilization in Tanzania
- **5th November 2026:** Digital vs Traditional Malaria Interventions
- **9th November 2026:** Advocacy Meeting with the Private Sector (NMCP-CS4ME Task Force Niger / CCM)
- **11th November 2026 :** Roundtable in Côte d'Ivoire on Making GC7 Work for Us
- **18th November 2026:** Monthly Meeting of the NMCP-CS4ME Task Force Cameroon
- **19th November 2026:** Quarterly Meeting of the CS4ME Malaria Civil Society Coffee Talk
- **23rd–27th November 2026:** CS4ME Round Table «Making GC7 Works for Malaria Communities» in Tanzania
- **25th November 2026:** Webinar on leading the Change: Refresher on Key Skills for AGYW Leadership
- **26th November 2026:** Roundtable in Cameroon on Making GC7 Work for Us
- **26th–27th November 2026:** Virtual Meeting on CRG Country Partners Engagement Plan in Tanzania



CS4ME

CIVIL SOCIETY FOR MALARIA ELIMINATION

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