

# The Role of Civil Society Organizations in 'One Health' Public Policies in West Africa

## Synthesis of the Study

A study was conducted in 2025 by PREZODE, in collaboration with the regional platform RAME, on the role of Civil Society Organizations (CSOs) in shaping One Health public policies in West Africa. Below is a concise summary before the publication of the full report.

### 🎯 Objective and methodology

**The study aimed to** analyze the participation of CSOs in the formulation of public policies integrating the multisectoral *One Health* approach in West Africa.

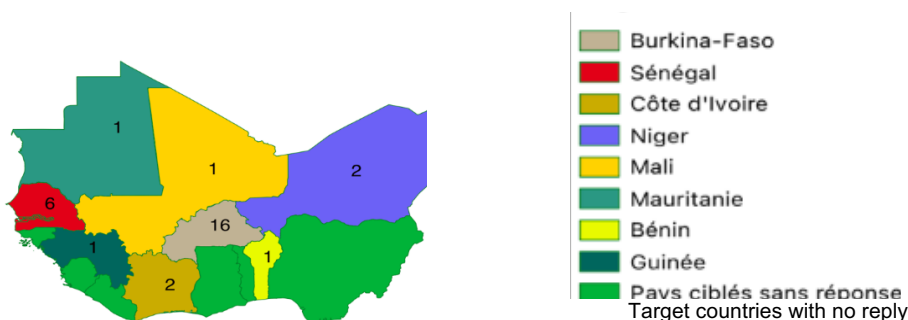
**The specific objectives** were to:

1. **Map** CSOs working within a multisectoral *One Health* approach in West Africa;
2. **Assess** the level of CSOs' participation across the various stages of public policy development within this framework;
3. **Identify** the challenges limiting such participation; and
4. **Propose** recommendations to policymakers for enhanced CSO engagement.

### 🔍 Methodology

The study used both **quantitative and qualitative tools**, including online questionnaires and semi-structured individual interviews. Organizations working within a multisectoral *One Health* framework were surveyed—both CSOs and key governmental institutions—to gather and cross-validate perspectives.

In total, **42 organizations** participated, including **30 CSOs** based in **8 Francophone West African countries**: Benin, Burkina Faso, Côte d'Ivoire, Guinea, Mali, Mauritania, Niger, and Senegal—out of 17 countries initially targeted.





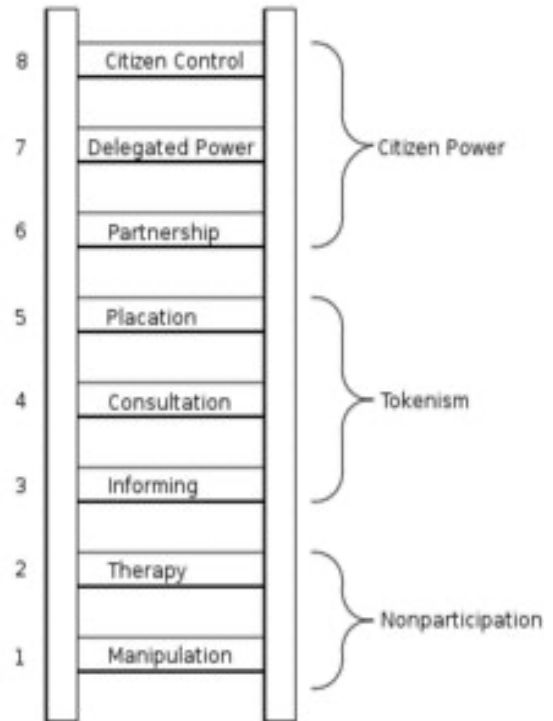
## Key Findings

- Although all 30 CSOs expressed willingness to participate in policy processes, only **17** (just over half) were **actually involved**.
- According to **Arnstein's ladder of participation**, **75%** of CSOs were at a *symbolic participation* level, while only **25%** achieved *real participation*.

### Identified barriers

- Weak institutional recognition of CSOs
- Lack of transparency and resistance from public actors toward participatory practices
- Limited technical capacities
- Insufficient access to data and decision-making spaces
- Financial dependence and limited resources
- Tensions or conflicts between CSOs and policymakers.

### Arnstein's ladder of participation



## Recommendations

### For CSOs

- Invest in collecting and capitalizing on community data **to build strong advocacy and inform national policies.**
- Develop institutionally grounded projects **to gain legitimacy.**
- Create or strengthen *One Health* CSO networks at national and regional levels **to increase influence.**
- **Strengthen capacities** in public policy analysis, advocacy, strategic communication, and multisectoral project management.

### ***For Institutional Actors***

- Ensure **meaningful and structured CSO engagement at every stage of the policy cycle**—from needs assessment to evaluation.
- Establish a **legal and political framework** formalizing CSO engagement in *One Health* governance processes.
- Create a **multi-stakeholder governance platform** bringing together CSOs, governments, the private sector, and other partners.
- Recognize and leverage CSO expertise—especially from grassroots actors—in steering committees, technical working groups, and multisectoral platforms.
- Adapt programmes and policies to actual country and community needs.
- Introduce a **budget line** dedicated to *One Health* themes to reduce dependence on external technical and financial partners.
- Allocate specific **financial resources** to support CSO participation, particularly small community-based groups.

These actions could draw inspiration from the **Global Fund’s participatory mechanisms** to ensure effective CSO engagement in funding requests and programme implementation.

### ***For All Stakeholders (CSOs, institutions, private sector, etc.)***

- Create frameworks for **knowledge-sharing and joint learning** between governments and CSOs to strengthen multisectoral *One Health* capacities.
- Develop **formal partnership agreements** between CSOs and public institutions to clarify roles and responsibilities.



## **Conclusion**

Despite strong commitment and active strategies, **CSO participation remains largely marginal**. To ensure the effectiveness of the *One Health* approach in West Africa, it is essential to move from **symbolic participation to genuinely shared governance**.

More detailed findings are available in the full study report.