



Operational plan for the engagement of CSOs and communities in national PPPR processes for Cameroon

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INTRODUCTION

Cameroon is implementing the COPPER CE project (Communities in Pandemic Preparedness and Response for Community engagement), which seeks to ensure that communities and civil society actors effectively engage in country-level processes and mechanisms related to pandemic preparedness and response (PPPR), ensuring that national PPR policies, strategies, and programs integrate health equity, human rights, and gender equality. This project has resulted in strengthening capacities for communities and CSOs in PPPR engagement, advocacy, learning and sharing. Also some key situational analysis deliverables have been developed such PPPR profile, report on community engagement in PPR and report of community engagement in the JEE/NAPHS and mpox response amongst others. This project has equally identified key gaps on community engagement in PPPR governance notable the absence, and sometimes figurative participation of CSOs in PPPR processes and coordination platform which could be attributed to weak collaboration between existing PPPR networks and coalitions, inadequate documentation of PPR activities led by communities and CSOs, inadequate knowledge on PPR national processes, absence of operational plans and limited capacity in operational research. A situation that has equally been identified and documented in the 2024 Universal Health and Preparedness Report (UHDR).

Consequently, it is important to enhance community and CSOs and vulnerable community capacities in a bid to foster their representativeness and the effective participation in PPPR processes and platforms.

COMMUNITY REPRESENTATIVENESS IN PPPR GOVERNANCE INSTANCES

CSOs are indispensable partners in public health emergencies as they have the ability to establish community trust and accessibility, possess resources for rapid response, have the capacity to support in providing support surveillance, risk communication and community engagement actions and are advocates for accountability for equitable and right-base service delivery.

For civil society to be able to effectively participate in PPPR processes and platforms, it is important for them to be represented in these instances. Results of the situational analysis on civil society in PPPR notable the JEE/NAPHS and mpox response reveal that CSOs involvement is not systematic and their participation is most often figurative. Consequently there is need for the building of their capacity PPPR processes and platform and the realization of high-level advocacy in favor of their inclusion and participation.

This plan provides a roadmap for CSOs to collaborate effectively in all phases of a pandemic. The plan focuses on establishing formal mechanisms for CSO participation, building their capacity, ensuring transparent communication, and allocating resources to support their critical functions. The ultimate goal is to create a resilient and inclusive pandemic preparedness and response architecture that leverages the unique strengths of civil society. This plan aims to address this gap by providing a structured approach to meaningful CSO integration.

OBJECTIVES

General Objectives

To contribute in PPPR decision making through the systematically and effectively integration of CSOs into all levels of PPR governance to ensure a more equitable, community-centered, and resilient public health system.

Specific Objectives

1. To develop guidance documents on civil society formal participation in PPR decision making processes
2. To build capacities of stakeholders on PPPR and advocacy for effective collaboration
3. To support the development of documentation on CSO activities
4. To improve CSO access to information on PPPR processes
5. To carry-out targeted advocacy for integration into PPPR platforms and processes
6. To secure dedicated funding and resources for CSO-led initiatives within the national pandemic response framework

OPERATIONAL PLAN MATRIX (strategic actions, tasks, indicators, budgetary elements and timeline)

No	Strategic Action	Task	Budgetary elements	Performance indicator	Means of verification	Timeline
1	Develop guidance documents on CSO participation in PPPR platforms and processes	Development and use of the terms of reference for civil society involvement and participation in PPPR platform and processes	-Two meeting to develop and validate document	Number of documents developed (terms of reference, agenda and roadmap)	-Meeting Report of reference available	Year 1
		Development and implementation of an agenda for consultation and provision of feedback to communities	Two meeting to develop and validate document		-Meeting Report available	Year 1
		Development and implementation of a roadmap for civil society involvement and participation in PPR platforms and processes	Three meeting to develop and validate document		-Meeting Report available	Year 1
2	Carryout capacity building of civil society	Development of training guides on PPPR for civil society actors and communities	Consultant to develop drafts	Number of CSO staff trained. - Pre- and post-training	-training manual available	Year 1

	actors on PPPR framework, advocacy and resource mobilization		Two day validation meeting	assessment scores.		
		Organization of online and face to face capacity building sessions for civil society actors and communities	Two face to face training sessions			-Training reports and attendance sheets. - Post-training surveys
3	Develop reports on CSO PPPR activities and priorities	Support of the creation and functioning of thematic technical PPPR working groups	-Consultation to create terms of reference of groups -one day meeting to create groups	-Number of thematic group and community-led monitoring reports produced and acted upon	Terms of reference of thematic groups produced	Year 1
		Development validation and dissemination of reports of these technical working groups	Organization of 4 trimestral validation meetings		Report of validation meeting	Year 1
		Establishment and support of community-led monitoring (CLM) initiatives where CSOs systematically gather and analyze community feedback on the accessibility and quality of pandemic response services.	-Consultation to develop project and indicators -training of CSO on CLM -Production of CLM reports		-reports of meetings	Year 1
					-Guide on CLM produced -training reports and pre and posttest assessment scores -CLM reports	Year 1

		Create formal feedback loops to ensure that CLM data informs decision-making and course correction.	One day meeting to present report to decision makers		Meeting reports and attendance list	Year 2
4	Improve access to information on national PPPR activities	Advocacy for the integration of mailing list of key departments of the ministry of public health involved in PPPR activities	-Lobbying meeting	-Number of meetings organized with decision makers -Number of meetings attended	Meeting reports and attendance sheets	Year 1
		Regular participation in PPPR meetings organized by key department of the ministry of public health	Transportation cost	-number of forums attended -number of restitution meetings organized		Year 1
		Participation in forums and conferences organized by these departments	Participation fees			Year 1
		Organization of restitution meetings with communities to inform them on PPPR priorities	One day meeting with community members			Year 1 and 2
5	Carry-out targeted advocacy for integration in	Finalization and validation of PPPR country profile and advocacy strategy	One day meeting to validate documents	Advocacy strategy	Document available	

	PPPR platforms and processes	Implementation of PPPR advocacy strategy developed during this project	Continuous lobbying (cost of meetings and transportation)	Number of meetings organized with decision makers	Meeting reports and attendance sheets	Year 1 and 2
	To secure dedicated funding and resources for CSO-led initiatives within the national pandemic response framework.	Advocate for funding of CSO led pandemic activities in emergency budget lines	Continuous lobbying (cost of meetings and transportation)	Number of meetings organized with decision makers	Meeting reports and attendance sheets	Year 1 and 2
		Collaborate with international donors and philanthropic organizations to create pooled funding mechanisms to support a diverse range of CSOs.	Continuous lobbying (cost of meetings and transportation)	Number of meetings organized with decision makers	Meeting reports and attendance sheets	Year 1 and 2

ANNEXES

This section presents a summary of some relevant platforms and PPR strategic planning processes to be targeted by CSOs

Annex 1: Table 1: Situation of CSOs and community involvement PPR platforms

No	Name of platform	Institution hosting platform	CSO involved	Duration of mandate	Comments (proof of involvement in platform)
01	National Program for the fight against Emerging and Reemerging Zoonosis	Zoonosis Program	ROOHCAM	Indefinite	Decision No 2935 of 21/09/2021
02	International Health Regulation – National Focal Point	National Public health Observatory	none	Every year	
04	Working group CREC	Zoonosis Program	AFROHUN		Service note: 000108 of 12/05/2021
05	Universal Health coverage technical working group (GT-CSU)	National Coordination Center	COFIS-CSU		
07	Inter-agency Coordination Committee (CCIA)	Expanded Program on Immunization	PROVARESSC		
08	Global fund Country Coordination mechanism	Global Fund	OFIF, POWER, NOLFORWOP, RECAJ,	Thre years	

			AJEESEY, RELESS, NSONGON		
	Ethics committee of the Yaounde Central Hospital	MOH	RESIPAT, MEJ	Indefinite	NO 198/MINSANTE/DHCY/CM/UMIJ C du 02 Juillet 2025

A PPPR profile has been developed with reveal that CSOs are not represented in some of the existing platforms. This could be attributed to the absence of criteria for involvement of these actors and community consultation and poor knowledge of civil society actors on PPPR activities. Also, this brings to question the unclear structure of CSOs and coordination of CSOs.

Annex 2: Priority pandemic preparedness and response activities

In keeping with the International Health Regulations monitoring and evaluation framework, and IHR benchmarks requirements for development of core capacities for preparedness and response to emergencies, the following PPPR processes carried out at country level have been identifies. The goal of this mapping is to guide CSOs on the appropriate timing and targets for advocacy to be included and to participate effectively. The table below presents a mapping of key IHR activities currently carried out and those planned.

Table 2: List of current and relevant pandemic preparedness and response activities in which CSOs and communities need to be involved

No	Activity	IHR technical Area	Lead Institution	Focal Point	Timeline for realization	Comments/ action to be taken
1	Pandemic Fund (3 rd submission)	Ministry of Public Health	Public Health emergency Coordination center	Director department for fight against Diseases,	March – June 2025	Planning on-going Every two years

2 3 4 5 6				Epidemics and Pandemics		
	All public major epidemics (Mpox, cholera, measles, yellow fever etc)	Ministry of Public Health	Public Health emergency Coordination center	Director department for fight against Diseases, Epidemics and Pandemics	indeterminate	CSOs should advocate for integration in the mail list group of the surveillance department of the ministry of public health
	JEE (joint external evaluation of International health Regulations core capacities)	Ministry of Public Health	National Public Health Observatory	Coordinator National Public Observatory	April to November 2025	5 yearly evaluation
	National Action Plan for Health Security (NAPHS) development	Ministry of Public Health	National Public Health Observatory	Coordinator National Public Observatory	December 2025- march 2026	Five yearly plan
	Auto-evaluation of International Health Regulations core capacities using the State Party Annual Review Tool (SPAR)	Ministry of Public Health	National Public Health Observatory	Coordinator National Public Observatory	October to February	Yearly evaluations
	National Risk Profile Report developed using the Strategies tool for Assessing Risk Tool (STAR)	Ministry of Public Health	National Public Health Observatory	Coordinator National Public Observatory	December 2025	Evaluations after 02 years

7	MULTI-HAZARD PLAN	Ministry of Public Health	Public Health emergency Coordination center	Director department for fight against Diseases, Epidemics and Pandemics	December 2026	Every Two years
8	Performance of Veterinary Services- International Health Regulations (PVS-IHR) ROADMAP	Ministry of Public Health	National Public Health Observatory	Coordinator National Public Health Observatory	December 2025	Bi-annual evaluations
9	SIMEX exercises	Ministry of Public Health	All actors concerned	Coordinator Public Health Emergency Coordination Center	As need be	Depends on availability of resources
10	After Action review	Ministry of Public Health	All actors concerned	Coordinator Public Health Emergency Coordination Center	As need e	In case of end of epidemic or any public health event
11	Universal Health and Preparedness Reviews	Ministry of Public Health	National Program for the Prevention and Control of Emerging and Reemerging Zoonosis	Permanent Secretary of the Zoonosis Program	December 2025	Evaluation every 5 years
12	Strategic plans of priority programs(HIV/AIDS,TB and Malaria)	Ministry of Public Health	National HIV/AIDS,TB and Malaria Control Programs	Permanent Secretaries of HIV/AIDS,TB and Malaria programs		
13	National Community Health Strategic Plan	Ministry of Public Health	Department for the Operationalization of Health and Technology	Head of Department	2026	Evaluation to be carried out at the end

14	Roadmap for the implementation of the Yaoundé Declaration on PHC and Community Health	Ministry of Public Health	Department for the Operationalization of Health and Technology	Head of Department	Contact institution for planning	Evaluation to be carried out at the end
15	Risk Communication and Community engagement Plans	Ministry of Health and partners	Public Health emergency Coordination center	Director department for fight against Diseases, Epidemics and Pandemics	As need be during an epidemic	