The Regional Committee,

Having examined the document entitled Strengthening Community Protection and Resilience: Regional Strategy for Community Engagement, 2023-2032 in the WHO African Region;

Recalling, the Astana Declaration on Primary Health Care, the UHC framework for action and Regional Strategy for Health Security and Emergencies 2022-2030 (AFR/RC72/8);

Deeply concerned about the threat of pandemics, humanitarian crises, and other public events on people’s health and well-being and on social, economic, and political stability and their impact on primary health care and universal health coverage;

Reflecting on lessons from past community engagement efforts and recent disease outbreaks, and with a view to addressing gaps and improving future prevention, preparedness, response, and recovery interventions;

Reaffirming the important role of community and civil society engagement to the ongoing efforts aimed at developing more responsive, equitable and effective health policies to accelerate progress towards universal health coverage and health security goals;

Recognizing the need for people-centred, whole-of-society and whole-of-government, approaches in primary health care, health promotion and health and social service delivery, ; and the community’s central role in reducing personal and community vulnerabilities and managing the effects of public health events;

1. ADOPTS the Strengthening Community Protection and Resilience: Regional Strategy for Community Engagement, 2023-2030 in the WHO African Region and
2. **URGES Member States to:**
   
   (a) Provide leadership in adapting priority actions and interventions into the local contexts and implementing activities;
   
   (b) Provide leadership and governance to establish partnerships, including with community engagement structures;
   
   (c) Conduct high-level advocacy and leadership at all levels for integrating community engagement within primary health care and other sectors; and
   
   (d) Encourage cross-border cooperation and international stakeholder dialogues.

3. **REQUESTS the Regional Director to:**
   
   (a) Build awareness and advocate for community engagement by developing an evidence-based narrative and foster a common understanding and shared vision for the scope and function of community engagement across all government services within Member States and WHO, with health leading the way.
   
   (b) Promote harmonization of primary health care, health promotion, health and social service as well as hazard-specific technical guidelines and tools and sensitize stakeholders on their use to support strategy implementation;
   
   (c) Based on the experiences of country-level implementation of the strategy, develop a set of generic indicators of community engagement to be proposed for inclusion in routine health service data collection, such as intra and after-action reviews and possibly the joint external evaluation and tool for analysis of risk;
   
   (d) Provide technical support to Member States for the adaptation and assessment of the regional strategy and implementation of priority interventions, including cross-border actions;
   
   (e) Mobilize partners and donors to support the implementation of the strategy and advocate for an investment case for community engagement in primary health care, health promotion and disease prevention; and
   
   (f) Promote and support multisectoral and multistakeholder collaboration and ensure accountability to local populations.