In November 2017, 117 national delegations adopted the Moscow Declaration to End TB at the first WHO Global Ministerial Conference on Ending TB: A Multisectoral Response. They committed to “supporting the development of a multisectoral accountability framework” to accelerate progress to end TB. They called on WHO to develop the framework, working in close cooperation with relevant partners.

At the 71st World Health Assembly (WHA) in May 2018, Member States welcomed the WHO draft multisectoral accountability framework (hereafter referred to as the MAF-TB). The WHA also requested the Director-General to continue to develop the MAF-TB, in consultation with Member States, and working in close collaboration with partners, as well as to provide technical support for national adaptation and use of the MAF-TB.

In the Political Declaration of the UN General Assembly High-Level Meeting on the fight against TB in September 2018, Member States committed to and called for the Director-General of WHO to finalize the MAF-TB and ensure its timely implementation in 2019.

WHO finalized the MAF-TB, building on contributions from Member States, partners, including from civil society. It was released in May 2019.

The MAF-TB aims to guide the strengthening of accountability by Member States, as well as multisectoral partners and stakeholders, at national, regional and global levels in order to accelerate progress to end the TB epidemic by 2030, including the meeting of commitments and targets set for 2022 and 2030 in the UN Sustainable Development Goals, the WHO End TB Strategy and in the Political Declaration of the 2018 UN General Assembly High-Level Meeting on the fight against TB.

The MAF-TB can help support the process of defining who is accountable, what they are accountable for, and how they will be held accountable, at country and local levels, as well as at regional and global levels. The four essential components of the MAF-TB are shown below in a cycle. These components are consistent with frameworks and measures in many other fields across sectors.
**MONITORING AND REPORTING**

Routine recording and reporting of tuberculosis cases, treatment outcomes and other End TB Strategy indicators via national information system consistent with WHO guidance and that meets WHO quality and coverage standards for tuberculosis surveillance.

Routine death registration, with coding of causes of death according to international standards, in national vital registration system that meets WHO quality and coverage standards.

National surveys and other special studies.

National tuberculosis report (annual), and associated products customized for particular audiences.

Annual reporting to WHO.

Civil society and nongovernmental organization reports, and associated products.

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**COMMITMENTS**

*a* Targets, milestones, pillars and principles are explained in the main text.

**REVIEW**

Periodic (e.g. annual) review of the tuberculosis response using a national-level review mechanism (e.g. inter-ministerial commission), with:

- high-level leadership – preferably under the direction of the head of government or head of state, especially in countries with a high tuberculosis burden
- a multisectoral perspective
- engagement of key stakeholders such as civil society and tuberculosis-affected communities, parliamentarians, local governments, the private sector, universities, research institutes, professional associations and other constituencies, as appropriate

Periodic review of the national tuberculosis programme (or equivalent) including independent experts, either specific to tuberculosis or as part of health sector reviews.

Other reviews, such as those on specific topics.

**ACTIONS (examples)**

National (and local) strategic and operational plans to end (or eliminate) tuberculosis, with a multisectoral perspective and covering government and partners, consistent with End TB Strategy and other WHO guidance: development, funding and implementation.

Development and use of a national MAF-TB.

Establishment, strengthening or maintenance of a national multisectoral mechanism (e.g. inter-ministerial commission) tasked with providing oversight, coordination and periodic review of the national tuberculosis response.

Revisions to plans and policies, and associated activities, based on monitoring, reporting and recommendations from reviews.

Engagement with private sector, professional societies, civil society and tuberculosis-affected communities and patient groups.

Activities undertaken by civil society, tuberculosis-affected communities and patient groups, parliamentarians and the private sector.

Delivery of tuberculosis prevention, diagnosis, treatment and care services.

Development and enforcement of relevant legislation.

Universal health coverage policy – development and implementation.

Multisectoral actions on social determinants of tuberculosis.

Maintenance or strengthening of national health information and vital registration systems.

Media campaigns and social mobilization.

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**Multisectoral accountability framework for tuberculosis (MAF-TB):**

National (including local) level – for individual countries, with adaptation according to national constitutional, legal and regulatory frameworks and other relevant factors.

Italicized text indicates elements that do not yet exist or are not yet in place in many countries, including those with a high burden of tuberculosis. Other elements (especially those listed under actions) also need strengthening in many countries.
Global and regional levels – countries collectively

Italicized text indicates elements that do not yet exist, or are not yet in place in all regions

**COMMITMENTS**

- **Sustainable Development Goals for 2030 (adopted in 2015)**
  - Target 3.3 to end the tuberculosis epidemic, and other relevant targets

- **WHO's End TB Strategy (adopted in 2014) and associated WHA resolutions**
  - Targets (2030, 2035), milestones (2020, 2025), pillars, principles

- **Political Declaration of the United Nations General Assembly high-level meeting on Ending AIDS (2016)**
- **Moscow Declaration at WHO Global Ministerial Conference on ending tuberculosis (2017)**
- **Political Declaration of the United Nations General Assembly high-level meeting on tuberculosis (2018)**
- **Other global or regional commitments relevant to tuberculosis**

**REVIEW**

Periodic high-level reviews of the tuberculosis response at global and/or regional level, with multisectoral perspective and engagement of key stakeholders, including civil society and tuberculosis-affected communities, the private sector, and others. Existing examples are:

- United Nations General Assembly high-level meeting on tuberculosis (2018, 2023)
- United Nations General Assembly high-level political forum for Sustainable Development Goal review
- United Nations General Assembly reviews of Sustainable Development Goals (next in 2023)
- WHO Executive Board and World Health Assembly review of progress reports on tuberculosis (including 2018, 2019, 2020) and WHO Regional Committee review of progress reports on tuberculosis

High-level reviews by regional entities and country blocs (or equivalent)

Other reviews requested and approved by countries collectively, at either global or regional level

**ACTIONS (examples)**

Development, funding and implementation of the strategic and operational plans of global agencies and regional entities, including joint initiatives across agencies, strategic alliances across sectors, linkages with other global health priorities and initiatives, engagement of civil society and tuberculosis-affected communities, and regional targets and milestones as appropriate.

- Resource mobilization and allocation of funding by global financing agencies
- WHO global tuberculosis strategy and associated WHO guidance, norms and standards – development, dissemination and implementation support
- Global and regional advocacy and communication, including for financing, engagement of multiple sectors, civil society and tuberculosis-affected communities, and human rights
- Strategic and technical support to countries by global and regional agencies
- Global strategy for tuberculosis research and innovation, and related convening of international tuberculosis research networks

**MONITORING AND REPORTING**

- WHO framework for tuberculosis recording and reporting (cases, treatment outcomes)
- WHO tuberculosis-Sustainable Development Goal monitoring framework
- WHO global tuberculosis data collection (annual) and online database
- WHO Global tuberculosis report (annual) and associated products
- WHO progress reports on End TB Strategy and actions in follow-up to high-level meetings, to Executive Board and World Health Assembly
- Report in 2020 on global and national progress in the tuberculosis response, prepared by the United Nations Secretary-General with WHO support
- WHO Regional reports and associated products
- United Nations data collection and reports on Sustainable Development Goals
- Treatment Action Group/Stop TB Partnership and G-Finder annual reports on trends in funding for tuberculosis research and product development, and periodic Médecins Sans Frontières/Stop TB Partnership reports on uptake of WHO policies
- Other civil society and nongovernmental organization audits and reports, and associated products (e.g. scorecards)

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*a, b, c, d* Targets, milestones, pillars and principles are explained in the main text.

*b* Examples include political declarations of the United Nations General Assembly high-level meetings on antimicrobial resistance and noncommunicable diseases, and the Delhi Call to Action (signed by WHO Member States in the South-East Asia Region).

*c* It is not possible to list all relevant actions, but major examples are provided.

*d* For example, with agencies working on poverty alleviation, social protection, housing, labour, justice, and migration.
MEMBER STATE ACTIONS: ADAPT, ADOPT, AND IMPLEMENT THE MAF-TB

✓ **ASSESS** the baseline status of elements under each component. There will be differences among countries in the extent to which elements already exist, need strengthening or are relevant, and how they are put into practice. There may also be elements not shown in here that should be added.

✓ **RECOGNIZE** that country MAF-TB will vary given factors such as: the level and characteristics of the TB burden, existing constitutional, legal, regulatory and administrative frameworks and systems, the nature of nongovernmental, civil society and private sector institutions and engagement, and the status of social and economic development.

✓ **INVOLVE** officials across government sectors, nongovernmental organizations, civil society and tuberculosis-affected communities, United Nations and other multilateral and bilateral agencies operating at country level, parliamentarians, professional associations, public-private partnerships and the private sector.

✓ **ADOPT AND IMPLEMENT A NATIONAL MAF-TB IN 2019**, including new/strengthened commitments, actions, monitoring and reporting, and review mechanisms.

✓ **MONITOR AND REVIEW** the MAF-TB itself for robust accountability.

WHO ROLES AND ACTIONS

To ensure the effective implementation of the MAF-TB at national and global and regional level, WHO will build on its mission and core functions. WHO has a unique status as a science- and evidence-based organization that sets globally-applicable norms and standards, and provides other global public goods that help to ensure health for all people. WHO’s ongoing efforts in fostering partnerships with global, regional and national stakeholders in supporting Member States and promoting engagement of civil society and other non-State actors also will be essential. Specifically, WHO will:

✓ **PROMOTE COLLABORATION**, in close collaboration with the UN Secretary-General, among all stakeholders to end the tuberculosis epidemic and to implement the political declaration of the UN high-level meeting, with Member States and relevant entities, as requested in the Political Declaration of the UN high-level meeting on the fight against TB.

✓ **GUIDE AND SUPPORT** Member States and partners, as appropriate, for national adaptation and use of the MAF-TB, as requested by the WHA.

✓ **COORDINATE AND SUPPORT** adaptation and use at regional/global level, working with Member States, partners, including civil society and affected communities, and multisectoral stakeholders.

In 2018, WHO began its work with Member States, and partners, for the adaptation and use of the MAF-TB, through country-based work and through consultations at regional and global levels.