



LESSONS LEARNED ON MULTISECTORIAL ACCOUNTABILITY FOR TB RESPONSE IN TANZANIA



Tanzania Stop TB Partnership (Tanzania STP), June 2024.

Dodoma, June 2024

Dodoma, June 2024

Dodoma, June 2024

Table of Contents:

Table of Contents	2
ACKNOWLEDGEMENT	3
1.0 INTRODUCTION	4-6
1.1 :Historical Framework	4-5
1.2 : Implementation Modality within the SDG Framework	5-6
1.3 : About Tanzania Stop TB Partnership	6-7
2.0 THE JOURNEY FOR LAUNCHING OF MAF-TB	7
2.1 : The Journey summarized	7-8
2.2 : The Launch	8-11
2.3 : Key Stakeholder Commitments	11-12
2.4 : The coordination	12-14
2.5 : Experience in establishing MAF_TB Tanzania	14
3.0 MAF-TB at one year	14-15
4:0 What other countries can learn from Tanzania	15-17
4.1 : Innovative ideas	16
4.2 : Strategic advocacy requires a significant investment of funds and sustained engagement rather than one-off action to succeed	16
4.3 : There are many drawbacks to high-level (National) Advocacy	16
4.4 : Inter-sectoral Collaboration is Key	16
4.5 : Political Commitment is Essential.....	16
4.6 : Resource Mobilization Requires Diverse Strategies	16
4.7 : Adaptability and Flexibility are Key.....	17
4.8 : Persistence and Sustained Commitment among Tanzania STP, the MOH/NTLP, the Prime Minister’s Office, and other Stop TB members and Allies was necessary	17
4.9 : Teamwork	17
5:0 Challenges and how to navigate through them	17-19
6:0 Conclusion.....	19

Acknowledgement:

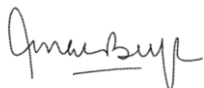
This Lesson Learned has been developed from the multiple efforts of the partners of the Stop TB who were involved thoroughly during the time of development of the MAF-TB in Tanzania. Equally important are also other members who have been involved in preparing this lesson learned. It is my duty to express my gratitude to all whose contributions is undeniable in making this particular learning document for the overall process and benefit of the Multisectoral framework which was launched with a high audience from the Government, Civil Society Organizations, Private Sectors, development Agencies, donors, Local Government authorities and thousands of community members witnessed with high expectation of bringing sectorial actors in ending the TB epidemic by 2030. Special thanks go to Stop TB Partnership in Geneva who provided significant part of funding to Tanzania STP as part of making this successful.

I would first like to appreciate the efforts of the Ministry of Health through National TB and Leprosy Program (MOH-NTLP) for hosting the agenda of Multisectoral Accountability Framework for TB response in TB until its launch, Furthermore, I would like to appreciate efforts of the Prime Minister's Office (PMO) for performing coordination roles and bringing together all Ministries until their endorsement of the framework and all other processes which were involving high level Government and Political decision makers advocacy engagement.

I then sincerely express my gratitude to all key stakeholders who participated in giving their input, development and review of the lesson learned. I sincerely appreciate their technical support, experience on MAF-TB development processes, I appreciate the expertise from USAID Tanzania specifically for Dr. Bhavin Jan, AMREF Tanzania Mostly for Mr. Josiah Otege, Mr. Rodrick Mugishwage from TTCN, Dr. Johnson Lyimo of the World Health Organization. Ms. Suhair Talab and Nnedimma of Stop TB Partnership Geneva are acknowledged for their support in reviewing this document. It is my duty to appreciate other members from outside the country who gave their inputs including Halima Nsangou from ACTION Africa Partnership, Eunice Moturi who is a Public Health Practitioner at KNCV Tanzania and Mr. Julius Mtemahanji the former ACSM Coordinator of the NTLP.

I finally appreciate the Tanzania STP Secretariat specifically for Mr. Nelson Telekela, and Health Promotion Tanzania for hosting the secretariat, and efforts from its staff including Ms. Hilda Kwezi who devoted her time contributing her views on the development of the lesson learned.

Dr. Peter Bujari



The Chairperson of the Tanzania Stop TB Partnership

1.0 INTRODUCTIONS:

1.1. Historical Framework

The fight against tuberculosis (TB) demands a comprehensive and coordinated-multisectoral approach that transcends traditional health sector boundaries. This document narrates the Tanzania's experience in implementing a multi-sectoral accountability framework. It offers valuable insights and tools into how countries can launch a well-coordinated framework hosted by the Head of Government. This introduction sets the stage by highlighting the significance of multi-sectoral collaboration in addressing TB, outlines Tanzania's approach, and provides an overview of the lessons learned during the process of adopting and launching the framework that brings together Ministries/sectors and partners committed to ending epidemics in the country.

Tuberculosis remains a global health threat, with millions of lives affected annually. Tanzania is among the 30 TB high-burden countries contributing to 87% of all TB cases in the world, in 2022 NTLF indicated that at least 50 Tanzanians die of TB each day and many TB Patients (22%) are Missed by the healthcare system implying a continued spread of infection in the communities, which is exorbitantly worse. Despite significant progress in TB control efforts, challenges persist, necessitating innovative and integrated approaches. In response, Tanzania embarked on a journey to develop and implement a multi-sectoral accountability framework aimed at ending TB by 2030. This report examines the adopted World Health Organization's (WHO) Multi-sectoral Accountability Framework for TB (MAF-TB) response in Tanzania to combat TB and highlights key lessons learned.

The adopted framework recognizes that TB control extends beyond the realm of healthcare delivery alone. It acknowledges the interconnectedness of social, economic, and environmental factors that influence TB transmission and treatment outcomes. By engaging multiple sectors such as education, transportation, mining, uniformed forces and social services, Tanzania aims to address the root causes of TB and strengthen its overall response. The partnership is between Ministries, Agencies, Departments, Non-governmental Organizations (NGOs), Private Sectors, and community stakeholders. Tanzania mobilized resources and expertise from diverse sectors to harness and leverage every comparative advantage sector has.

This MAF-TB was first endorsed during the first World Health Organization (WHO) Global Ministerial Conference on ending TB in Moscow in 2017 and 117 national delegations adopted the Declaration. At the 71st World Health Assembly (WHA) (resolution WHA 71.3) in May 2018, member states welcomed the WHO draft multi-sectoral accountability framework (MAF-TB). The WHA also requested the WHO Director-General to continue developing 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/formation and use of the MAF-TB.

Thereafter, in the political declaration of the UN General Assembly High-Level Meeting Resolution A/RES/73.3 (8); on September 2018, member states committed to “supporting the development of a multisectoral accountability framework” to accelerate progress to end TB and called for the Director-General of WHO to finalize the MAF-TB and ensure its timely implementation. WHO finalized the MAF-TB guideline, building on contributions from member states, and partners, including civil society organizations. The UN Secretary-General’s 2020 report on progress towards achieving Global TB targets and implementation of the UN political declaration on TB, once more reinforced the importance of multisectoral engagement for progress toward ending TB. The World Health Organization (WHO) has been working with partners and civil society organizations to support countries to establish MAF TB structures, MAF TB is aligned to the UN SDG 2030 goals and WHO end TB strategy.

1.2 Implementation Modality within the SDG Framework

Establishing inter-sectoral collaboration. The MAF-TB therefore has built on long-established collaboration between the Ministry of Health and other sectoral ministries through the coordination of the Prime Minister's Office, effective engagements of civil society organizations such as the National Network of Former TB Patients (MKUTA) and the Tanzania TB Community Network (TTCN), the Tanzania Stop TB Partnership which coordinates TB Non-State Actors, the Private Sector and the Parliamentary TB Caucus. The MAF-TB approach has been grounded on; the identification of firm commitments and actions from Multisectoral partners, the establishment of effective governance structures to ensure a strong accountability mechanism among all engaged partners. It is therefore the responsibility of all the duty bearers and collaborators to ensure full execution of their mandates and roles in a bid to end TB in Tanzania by 2030.

Strengthening Health Systems: Establishing a resilient health system entail improving infrastructure, augmenting the number of trained healthcare professionals, guaranteeing the availability of essential drugs and diagnostic tools, fostering community-based care, undertaking Community Engagement in TB prevention and control efforts, raising awareness about the disease, its symptoms, and the importance of seeking timely healthcare,

The adoption of MAF-TB in Tanzania has advocated for the integration of TB with other health services, ensuring that TB diagnosis and treatment are readily available alongside other essential health services. This has improved joint TB services for easy access to TB care.

Advocating for political commitment and Resource Mobilization: Advocating for political commitment and resource mobilization is an essential component of the Tanzania Stop TB Partnership's efforts which has worked collaboratively with the MOH/NTLP guided by the WHO Multi-sectoral Accountability Framework.

At the policy level, the advocacy efforts to influence policymakers and government officials to prioritize TB beyond the health agenda included advocating for the integration of TB with AIDS

at the policy for joint planning and budgeting that aligns with global TB control targets and best practices. Advocacy activities involved meetings with policymakers, submission of policy briefs, participation in policy dialogues, and drafting of advocacy statements and directives.

Budget and Resources Mobilization Advocacy, the partnership advocates for increased allocation of financial resources for TB prevention, diagnosis, treatment, and research activities, as well as for strengthening health systems and addressing social determinants of TB. Which involved engaging with the Government Ministry of Finance, the parliamentary TB Caucus, and other additional resources for TB control from diverse funding sources, including visiting Ministries to build internal capacity on identifying funding sources within Ministerial available opportunities to accommodate TB control initiatives as well as secure in-kind support for TB programs.

Advancing Social Protection: Acknowledging poverty and social inequality as substantial contributors to TB, initiatives in social protection, encompassing cash transfers, food subsidies, and social insurance, play a crucial role in alleviating the financial burden of TB on affected households and preventing overwhelming health-related expenditures

Empowering Education and Awareness: Essential for dispelling misconceptions about TB, reducing stigma and discrimination, and promoting early diagnosis and treatment, education and awareness campaigns play a pivotal role in empowering communities to actively engage in TB prevention and management.

Fostering Research and Innovation: Critical for advancing TB diagnostics, drugs, vaccines, and pioneering approaches to prevention and control, investments in research and innovation form the cornerstone for progress in effectively tackling TB

1.3 About Tanzania Stop TB Partnership

The Tanzania Stop TB Partnership (Tanzania STP) is an autonomous coalition of TB implementing partners registered as a non-government organization established in September 2021 to coordinate and harness multi-sectoral partnerships toward ending TB by 2030. It is a national platform supported by global platform Stop TB Partnership Geneva by both funding and technical support. The formation of the coalition was the result of the United Nations Political Declaration of the member heads of state and CSOs to formulate a multisectoral coordinating organ to spearhead and coordinate partnerships among partners to fight and end the TB epidemic by 2030. This includes creating and maintaining platforms where the TB control interventions by different sectors and ministries, as well as their magnitude, consistency, and impact on TB control, become and remain actively known.

The role of the Tanzania Stop TB Partnership includes (a) raising the TB agenda at national and sub-national levels through advocacy, dialogue, and meaningful partnerships (b) improving multi-sectoral partnerships and coordination of all actors to enhance efforts to reduce TB burden in

Tanzania, (c) empower the vulnerable groups in areas such as community development, access to TB services, (d) advocacy and activism to garner political support and catalyze implementation of TB control strategies. Finally (e) Mobilize and leverage resources to address the funding gap in TB control interventions and to Intensify partnerships with the private health service providers increasing their role in TB programs and improving access to TB care and treatment services.

Thus, by the nature and mandate of the Tanzania Stop TB Partnership, played the key role in the formation and inaugural of MAF-TB. MAF-TB Tanzania is synchronized with the Government planning cycle and will be implemented from 2023 to 2030 with thorough annual progress reviews being made.

THE JOURNEY FOR LAUNCHING OF MAF-TB

2.1. The Journey summarized

In 2018 during the Union conference at The Hague - the Deputy Permanent Secretary (MoH) discussed with the technical team on what to embrace from WHO guidance. In 2019, WHO disseminated MAF - TB guidance at the national level, but it was not very clear how to get high-level leadership involved. In early 2020, there were internal discussions within stakeholders that MAF TB structure would include the Tanzania Commission for AIDS- TACAIDS. The Minister of Health was very positive about the country's effort to establish MAF-TB; however, COVID-19 led to slow progress between 2020 and 2021. With Tanzania Stop TB Partnership establishment in September 2021, MAF-TB discussions were deepened during the 2022 annual TB conference.

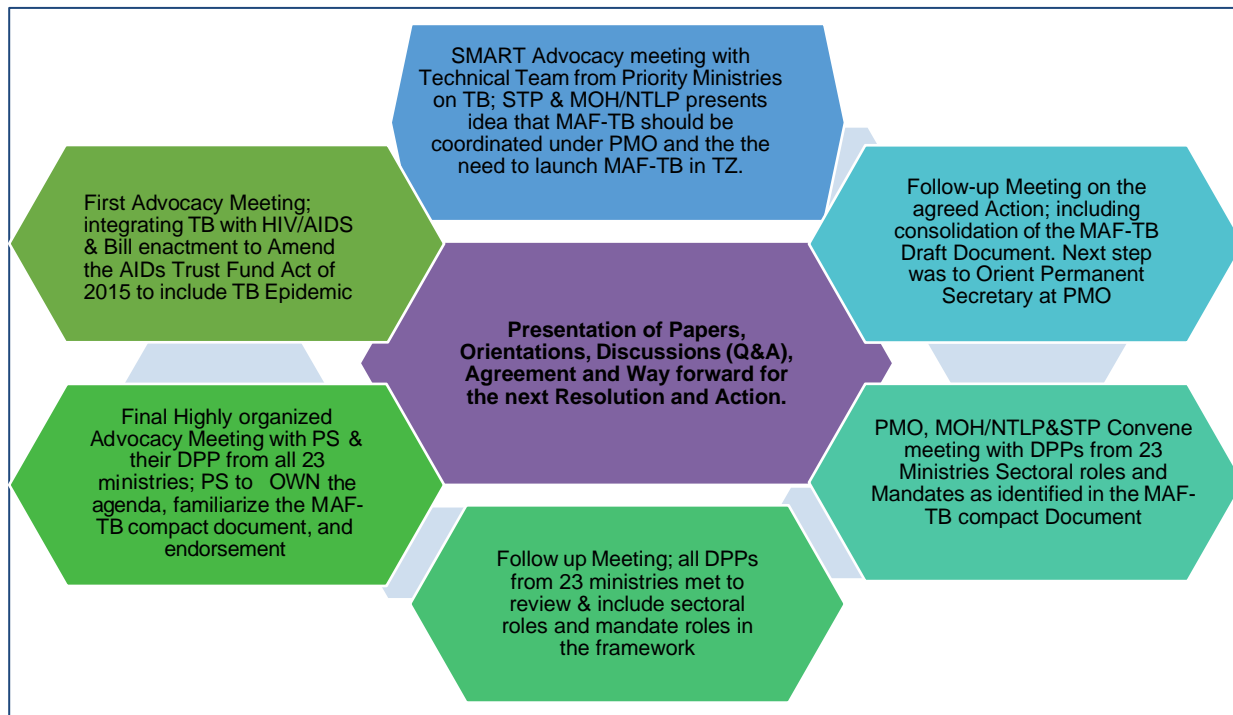
Despite the effort devoted by the Ministry of Health, the agenda was not successful due to multiple factors including that non-health ministries perceived that it was the role of the Ministry of Health to control TB. Albeit the Ministry of Health did not have a mandate to coordinate other ministries.

Tanzania Stop TB Partnership Spearheaded changing advocacy strategy, to engage the prime minister's office which has a mandate to coordinate government business. Tanzania Stop TB worked in collaboration with MOH/NLTP and held a meeting with the Minister of State in the Prime Minister's office Hon George Simbachawene (by then) to introduce the agenda. There was an agreement that it was the mandate of the Prime minister to coordinate a multi-sectoral agenda. In October 2022, the Prime minister's office organized high-level Advocacy Meetings to fast-track the development and launching of MAF-TB in Tanzania. The Prime Minister's Office (PMO) performed pivotal roles of convening and coordinating a series of meetings that involved different levels of decision-makers from all 26 Ministries; Permanent Secretaries (PSs), the Directors of Policy and Planning (DPPs) and TB Technical Team for a briefing and buy-in. In response to global initiatives and advocacy strategies championed by the Tanzania STP.

The MAF TB document was developed by the technical team from ministries in collaboration with TB Partners complying with the WHO Multisectoral Accountability Framework for TB guideline. It was reviewed by the Director of Policy and Planning and finally reviewed and endorsed by Permanent Secretaries. The launching process was also planned and coordinated in the PMO in

collaboration with the Ministry of Health through the National TB and Leprosy Program (MOH/NTLP) and Tanzania Stop TB Partnership (Tanzania STP), and the Minister of Health played a pivotal role in getting the Prime Minister to be the guest of honor. The framework's overarching aim is to adopt a multisectoral approach, backed by high-level political commitments and strategic interventions, to achieve national targets of ending the TB epidemic by 2030.

Figure 1; levels of advocacy meetings organized by Tanzania STP and MOH/NTLP coordinated under the Prime Minister’s Office (PMO)



The Launch:

The launching of the Multi-sectoral Accountability Framework for Tuberculosis (MAF-TB) in Tanzania marked a significant milestone in the country's efforts to combat tuberculosis comprehensively. The event, held on 24th March 2023 during World TB Day, was preceded by the signing of the MAF_TB compact by Permanent Secretaries of 23 ministries. It brought together key stakeholders from government agencies, non-governmental organizations, civil society, academia, and the private sector to officially commit to implementing the MAF-TB.



JAMHURI YA
MUUNGANO
WA TANZANIA

OFISI YA WAZIRI
MKUU SERA, BUNGE
NA URATIBU



Katibu Mkuu Ofisi ya Waziri Mkuu (SBU) Dkt. Jim Yonazi akitia saini Mkakati wa Kisekta wa Kuratibu Uwajibikaji wa Mapambano dhidi ya Kifua Kikuu (TB) Nchini katika Ukumbi wa Ofisi ya Waziri Mkuu Machi 21, 2023 Jijini Dodoma.

KATIBU MKUU,
OFISI YA WAZIRI MKUU, SERA, BUNGE NA URATIBU,
2 BARABARA YA POSTA, 40412 DODOMA, TANZANIA


Ofisi ya Waziri Mkuu S.B.U

Permanent Secretary from the Prime Minister's Office signed the MAF-TB Compact during the meeting with Permanent Secretaries from all Ministries indicating the Government endorsement and ownership of the commitments to end TB in Tanzania.

The launch event featured speeches from the Ministry of Health, Tanzania STP, USAID, CDC, WHO highlighting the importance of multi-sectoral collaboration in ending the TB epidemic. Nearly all speeches emphasized a need to adopt innovative approaches to TB control and the importance of partnership and accountability in achieving tangible results.

The launch was graced by Prime Minister Hon. Kassim Majaliwa MP, who issued Nine (9) Directives that go together with MAF-TB implementation. He highlighted the need for collective strategies to break the chain of TB infections and prevent TB deaths, and meaningful engagement of Stakeholders. WHO Tanzania's Country Representative, Dr. Zabulon Yoti, commended Tanzania's commitment and the establishment of this vital structure, aligning with UN SDG 2030

goals and WHO's end TB strategy. Since WHO's endorsement in 2017, efforts have been ongoing to establish MAF TB structures, emphasizing its alignment with global goals and strategies.



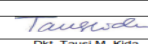















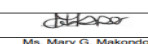



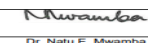




<p>The Nine Directives Given by the Prime Minister H.E Kassim Majaliwa Kassim during the launch of MAF-TB in Tanzania.</p> 	
<p>1. Ministries, Sectors, and all Government institutions should include TB activities in their work plans in order to reach Tanzanian citizens who are the target, can be reached and empowered on the matter.</p>	<p>2. All strategies regarding AIDS interventions should be integrated with TB services to ensure that these diseases are mitigated together.</p>
<p>3. The Ministry of Health (MoH) and President's Office Regional Government and Local Government (PO-RALG) should improve and strengthen their systems of registering traditional healers so that they can identify TB patients and refer them to health services.</p>	<p>4. All ministries, departments, and institutions should develop a monitoring and evaluation plan with goals aligned with the global strategy, aiming to eradicate TB in the country by 2030, and ensure that the strategy is implemented with daily monitoring and evaluated every six months to assess progress.</p>
<p>5. Increase the participation of stakeholders from the private sector and civil organizations, as well as individuals, in this program to coordinate TB issues and other health services, with the goal of eradicating TB in the country.</p>	<p>6. The Ministry of Minerals, should develop and implement strategies to control the dust that harms small scale miners as this dust usually results in TB.</p>
<p>7. The land, housing development and the Ministry of home affairs should give good advice on the better housing and improving workplaces, to reduce the triggers of TB infection.</p>	<p>8. All Councils should set aside areas in cities that will be used as open spaces for citizens to rest, and prepare areas for sports and getting fresh <u>air</u>.</p>
<p>9. The leaders of the relevant ministries should convene a meeting and sit down to discuss and create a feasibility study, as well as advise on the best way to expand the scope of this strategy to connect with other health services in order to improve the provision of health services.</p>	

Figure 2; The nine-directive given by the Prime Minister H.E Kassim Majaliwa Kassim during the launch of MAF -TB in Tanzania

Permanent Secretaries endorsement page

 Mr. Mululi M. Mahendeka Permanent Secretary, President Office – State House	 Dkt. Tausi M. Kida Permanent Secretary, President Office – Investment	 Eng. Anthony D. Sanga Permanent Secretary, Ministry of Lands, Housing and Human Settlements Development	 Ambassador Eng. Aisha Amour Permanent Secretary, Ministry of Works and Transport (Works)
 Mr. Juma S. Mkomi Permanent Secretary, President Office-Public Service Management and Good Governance	 Mr. Adolf H. Ndunguru Permanent Secretary, President's Office, Regional Administration and Local Governments	 Mr. Gabriel J. Migire Permanent Secretary, Ministry of Works and Transport (Transport)	 Prof. Carolyne I. Nombo Permanent Secretary, Ministry of Education, Science and Technology
 Ms. Mary N. Maganga Permanent Secretary, Vice President Office, Union Affairs and Environment	 Dr. Jim J. Yonazi Permanent Secretary, Prime Minister's Office (Policy, Parliament and Coordination)	 Mr. Kaspar K. Mmuya Permanent Secretary, Ministry of Home Affairs	 Dr. Hashil T. Abdallah Permanent Secretary, Ministry of Industry and Trade
 Prof. Jamal A. Katundu Permanent Secretary, Prime Minister's Office - Labour, Employment, Youth and People with Disabilities	 Dr. Seif A. Shekalaghe Permanent Secretary, Ministry of Health	 Mr. Kheri A. Mahimbal Permanent Secretary, Ministry of Minerals	 Mr. Saidi O. Yakubu Permanent Secretary, Ministry of Culture, Arts and Sports
 Dr. Faraji K. Mnyepe Permanent Secretary, Ministry of Defence and National Services	 Ms. Mary G. Makondo Permanent Secretary, Ministry of Constitutional and Legal Affairs	 Prof. Riziki S. Shemdoe Permanent Secretary, Ministry of Livestock and Fisheries	 Mr. Gerald G. Mweili Permanent Secretary, Ministry of Agriculture
 Eng. Nadhifa S. Kemikimba Permanent Secretary, Ministry of Water	 Dr. Natu E. Mwamba Permanent Secretary, Ministry of Finance and Planning	 Mr. Mohamed K. Abdulla Permanent Secretary, Ministry of Information, Communication and Information Technology	 Dr. John A. Jingu Permanent Secretary, Ministry of Community Development, Gender, Women and Special Groups

 Dr. Hassan S. Abbasi Permanent Secretary, Ministry of Natural Resource and Tourism	 Eng. Felicheem J. Mamba Permanent Secretary, Ministry of Energy
--	---

Key Stakeholder Commitments

Tanzania's fight against tuberculosis (TB), including stakeholders such as Civil societies, TB-affected individuals, parliamentarians, local governments, the private sector, universities, research institutes, and professional associations who actively contributed to the intricate strategy. The roles of stakeholders are summarized below:

NAME OF PARTNERS	ROLE PLAYED
The Prime Minister's Office-Parliament, and Coordination of Government Affairs (PMO-PPCGA).	Convening meetings for the 23 ministries, STP, and other TB IPs
	Directing the attendees on revising/improving the MAF-TB compact document
	Providing government protocols & layout of the document
	Communicating with the Prime Minister as the Guest of Honor during the launch of the compact document
	Enabling environment for launching of the compact
	Providing technical and administrative support

The Ministry of Health under National TB & Leprosy Program (MOH-NTLP)	Coordinating the launching ceremony for the Compact Document
	Reviewing and aligning the MAF-TB compact document
Tanzania Stop TB Partnership & Health Promotion Tanzania	Mobilizing resources to finance advocacy activities toward of launching of MAF- TB in Tanzania
	Work with MOH-NTLP and PMO to prepare rationale papers, presentations, and other documents
	Organized the TB Implementing Partners during the High-level meetings
	Contributing to the preparation and launching the MAF-TB compact document
	Provided TB advocacy messages and key asks
World Health Organization – WHO	Inputs on technical guidelines for the formation of the compact document
	Provision of MAF-TB Framework guideline
USAID/CDC	Providing technical insights, conducting the final review and alignment of the MAF-TB compact document
Key players such as (AMREF Health, Management and Development for Health - MDH Tanzania TB Community Network	Providing financial support
	Offering technical support
	Providing targeted financial support
MKUTA	Representing TB survivors
NACOPHA	Representing TB/HIV survivors and their views

2.4: The Coordination of MAF-TB in Tanzania

National multisectoral coordination for TB ensures that efforts to prevent, diagnose, and treat TB are integrated and effective. Coordination between all sectors such as health, social welfare, Mining, Settlements, Civil Society and economic development develops a comprehensive response to TB. TB, and all this process of Coordination is under the Prime Minister's Office while the Ministry of Health performs Secretarial and Technical roles.

Such mechanisms involve intersectoral, intents to have a well-resourced National TB Program, to have regular review mechanisms, strengthen partnership and engagement with stakeholders, and support for research and innovation.

The outlined framework of activities intends to monitor, document, report, and share progress of TB activities implementation in a timely fashion. In monitoring disease control indicators, Tanzania intends to use routine reporting, surveys, and studies to analyze the progress of the country, region, or district based on its targets.

At the national level, the annual national TB report or substantive analysis during the Annual Health Sector Review will be done. Monitoring committees for Multisectoral TB response in Tanzania involves:

- **Working Group;** The Working Group comprises representatives from cross-sectoral and purposely formed to respond to the need raised during the course of the implementation of activities. It performs the roles pertaining to advocacy and communication needs, monitoring and evaluation, resource mobilization, response, and support service needs, this WG reports to the TWG. Meet quarterly, the responsible person in the Prime Minister's office (PMO) coordinates the WG meetings and the Ministry of Health performs secretarial roles.
- **MAF-TB Technical Working Group (TWG);** Comprises representatives from Ministries, Department and Agencies (MDAa), Civil society organizations, Private sectors who meet quarterly. The TWG holds quarterly monitoring meetings which are chaired by the PMO while the Ministry of health performs the secretarial roles.

The secretariat which is under the TWG receives plans and implementation reports from all MAF-TB Ministries. The Focal Persons for each Ministry/sector are responsible for developing implementation plans, and measurable indicators with clear baselines as well as producing relevant reports for the respective sectors. The TWG also prepares the bi-annual steering committee and Ministers forums.

- **National Steering Committee:** comprises all Permanent Secretaries from all MDAs, CSOs, and private sectors which meets bi-annually. The PMO coordinates this level while the Ministry of Health performs the secretarial roles.

The steering committee receives the MAF-TB activities implementation report of the first two quarters and reviews new commitments brought forward by the TWG. The agreements of these meetings are shared with the Ministers' forum for further discussion and news actions.

- **Ministers' Forum:** comprises all Ministers, and other members from Civil Society Organizations and private sectors meets annually. The Minister for State in the PMO -

Policy, Parliamentary and Government Coordination Affairs coordinate this level of Ministers' forum, while the Ministry of Health takes Secretarial roles and Implementation. The National Ministers' Forum receives the annual implementation report of the MAF-TB activities and revised commitments brought forward by the National Steering Committee.

2.5. Experience in establishing MAF_TB Tanzania.

Launching of MAF was an important milestone in the history of TB in Tanzania. During the documentation of lessons, some stakeholders were asked about their experience, and this is what they said.

Mr. Julius Mtemahanji NTL- Advocacy, Communication and Social Mobilization (ACSM) Coordinator said, *“The launch of MAF-TB in Tanzania with specific Mandates and roles for ministerial sectors, Partners including Civil Society Organizations and private sectors, has aligned and paved way to a coordinated response, hence ensuring success in the fight against TB in the country.”*

Hon. Dr. Oscar Mukasa -the Tanzania STP consultant said, *“The MAF-TB process has a greater benefit despite some challenges that need to be addressed to ensure a big result in Tanzania. MAF-TB Coordination under the PMO is the motherboard of the whole process. The Tanzania STP is the steering mechanism to shorten internal procedures in the government. There are a lot of ministerial internal opportunities that are not yet utilized in the fight against TB. Funding constraints, especially for MAF-TB coordination by PMO and Tanzania STP, limit the big result, however, the participation from the non-government sectors is lower than that of the government ministries.”*

Dr. Bhavin Jani, the USAID Tanzania focal person for TB said *“The MAF-TB initiative towards ending TB is everyone's business for meaningful involvement to end the epidemic.”*

3.0 MAF-TB at one year:

While a new song in Tanzania especially among TB stakeholders is MAF_TB; it was not a smooth ride as often health matters are preferred by health experts and non-health people feeling that it's not part of their bread. Therefore, the first uphill task was to demystify this fallacy for non-health experts and health experts to appreciate that transmission of most diseases occurs in communities, and even most care of patients occurs in communities and families. Therefore, its multisectoral approaches that can speed achievement of the desired impact. Below we summarize what MAF_TB was able to achieve in one year of operation.

1. Enhanced the accountability of Ministerial sectors in the fight against TB: After the launch of MAF TB in Tanzania, sectors beyond the Ministry of health have commitments which are set into the quarterly work plans towards TB control. This includes joint planning, resource-sharing, and implementation of cross-sectoral initiatives.

2. Addressed Social Determinants that contribute to the TB prevalence among groups of individuals: The MAF-TB facilitates inter-sectoral collaboration for surveyed social determinants of TB, such as housing conditions (study rooms, dormitories), Nutrition consciousness, Sanitation, and other national Health guidelines through targeted interventions. The survey which was conducted by the Ministry of Education Science and Technology provided answers to the decision makers about the existing policy and national guidelines to combat TB for primary schools' pupils, secondary schools students, teachers and non-teaching staff.

3. Increased Public Awareness and sensitization of TB: Education and awareness campaigns through the multisectoral approach raise public awareness about TB, its symptoms, prevention measures, and the importance of seeking timely diagnosis and treatment. Number of Ministerial sectors, Civil society organizations, development agencies and Media houses have increased in sensitizing TB in the country, this leads to increased knowledge and understanding of TB within communities, reducing stigma and promoting early TB screening and treatment.

4. Increased Political Commitments in the fight against TB in all ministries: Due to smart and strategic advocacy that was conducted by Tanzania STP and other partners, the Prime Minister of the United Republic of Tanzania issued nine directives that go together with the Implementation of MAF-TB activities. These directives are the driving forces for the Multisectoral engagement that go together with the implementation of the Multi Sectoral activities, whereby all permanent Secretaries endorse its implementation.

5. Nine directives which were issued by the Prime Minister of Tanzania: During the launch of the framework that hold accountable for all Ministries in the country to combat TB epidemic in their Ministerial sectors. The directives 1 & 2 (as shown in section 2.2 – Figure 2 above) are among the prominent derives that reinforce Ministries and partners to plan and implement TB, also at the policy level the integration of TB and HIV has been initiated for joint financing and implementation.

6. Increased involvement of TB Partners and Development agencies: A number of institutions are keenly engaged in implementing MAF-TB activities. Ministries and Agencies are implementing, and the parliament has developed its operational plan for oversight to the government functions. Engagement with President Office Regional Administration and Local Government is being pursued to ensure sub - national levels.

4.0 What other countries can learn from Tanzania

Launching the Multisectoral Accountability Frame for TB response in Tanzania has yielded several important lessons, provided valuable insights for guiding future TB control efforts and accelerating progress toward ending TB within the country and beyond:

4.1. **Innovative ideas:** such as the adoption of slogans such as “Fast Track Launching MAF-TB during the WTB Day” pushed the agenda as the ceremonies for World TB Day are well known as the famous national event for raising the TB agenda in the world, whereby Head of governments and State should showcase at country level with tangible strategies as committed during the UHLM TB 2018

4.2. **Strategic advocacy requires a significant investment of funds and sustained engagement rather than one-off action to succeed;** this was demonstrated/witnessed during the series of Sectoral Technical team members and high-level MAF-TB advocacy engagement/meetings with high level Political and Government leaders and decision makers for their buy in and understanding/ownership of the agenda in Tanzania.

4.3. **There are many drawbacks to high-level (National) Advocacy;** It was a tough moment, especially during logistic preparation for the launching of the MAF-TB compact framework during the commemoration of WTB Day on 24th March 2023. Therefore, **the Determination and Persistence** of the Tanzania STP Secretariat, Partners, MoH/NTLP staff, and those from PMO made this (launching of MAF-TB during the WTB Day) Possible.

4.4. **Inter-sectoral Collaboration is Key:** Engaging multiple sectors beyond health and its stakeholders, such as education, transportation, and social services, is essential for addressing the complex determinants of TB. Collaboration fosters synergy, resource mobilization, and holistic approaches to TB prevention and control. During project design, there was no full involvement of the private sector as a potential contributor to financial resource mobilization. Although mentioned in the MAF-TB compact document, their actual roles in the fight against TB were unclear. The STP should collaborate with MoH/NTLP Tanzania has started to engage the private sector more actively, as they can significantly contribute financially and materially to the TB eradication efforts

4.5. **Political Commitment is Essential:** Advocating for political commitment at all levels of government is crucial for prioritizing TB on the health agenda, mobilizing resources, and sustaining long-term investments in TB control. Building political will requires continuous advocacy efforts and persistence, evidence-based arguments, and multi-sectoral collaboration.

4.6. **Resource Mobilization Requires Diverse Strategies:** Mobilizing resources for TB control necessitates diverse strategies, including advocacy, partnerships, and innovative financing mechanisms. Tanzania after the launch of the MAF-TB has identified multiple strategies to mobilize funds from each Ministries by identifying and mapping possible sources of partners and existing programs that can contribute or integrate TB activities for Joint financing and/or joint

implementation. Private sector engagement and commitment enhances sustainable resource mobilization to combat TB in the country.

4.7. Adaptability and Flexibility are Key: Context-specific challenges and opportunities require adaptable and flexible approaches. During the process of launching the framework, the evaluation revealed that some members faced challenges in managing the workload associated with the overall process towards the launch of the framework, some were unaware of what to do and what it was intended as the result since the agenda was not well known. However, the Continuous learning, and adaptation of some guidelines mentioned in the World Health Organization MAF-TB framework was easy for the Tanzanian context to develop experiences and stability towards the launch of the framework.

4.8. Persistence and Sustained Commitment among Tanzania STP, the MOH/NTLP, the Prime Minister's Office, and other Stop TB members and Allies was necessary; Achieving high-level goals at the national level requires sustained commitment from all stakeholders, including governments, development Agencies including WHO country office, USAID Tanzania, TB Implementing Partners in this matter AMREF Tanzania, NACOPHA and other civil society organizations, are essential for achieving and maintaining progress towards MAF-TB Launch in Tanzania.

4.9. Teamwork: Despite challenges in high-level national advocacy, such as limited time and financial resources, the determination of the STP Secretariat, leaders from MoH/NTLP, PMO, and stakeholders actualized the launch of MAF-TB during World TB Day. Solidarity among teams naturally developed through participation in mini-activities, and the strategic use of smart advocacy and effective consultancy fostered strong buy-in and ownership from ministerial decision-makers and the government technical team, culminating in the successful launch of the framework.

5. Challenges and how to navigate through them

To ensure the effective execution of sectoral mandates and actions, the MAF-TB will continue to undergo vigilant monitoring, documentation, and timely reporting to relevant monitoring committees involving all identified sectoral actors. Progress tracking will be facilitated through the development of monitoring indicators to gauge advancements over time.

There will be a consolidated MAF-TB operation plan and M&E framework that will allow each implementing institution to formulate sector-specific monitoring and evaluation plans, encompassing interventions that align with the appropriate indicators. Nationally, the Monitoring and Evaluation working group, led by the PMO, will oversee all metric functions on the Multisectoral Accountability Framework for TB (MAF-TB) activities.

The sustainability of MAF-TB in Tanzania is structured to enforce accountability among stakeholders engaged in tuberculosis (TB) control, ensuring their commitment to sustaining TB control efforts. With clear objectives, defined roles and responsibilities, established indicators and metrics, effective monitoring and evaluation, resource allocation, and ongoing communication and engagement, MAF-TB is poised to sustain efforts toward TB control, contributing to a global reduction in TB burden.

The Multisectoral Accountability Framework for TB delineates the roles and responsibilities of various stakeholders in TB control, spanning government agencies, civil society, international organizations, and the private sector. It establishes indicators and metrics to measure progress toward TB control objectives, emphasizing the mobilization of adequate resources—financial, human, and technical—while ensuring equitable allocation, effectiveness, and efficiency in sustaining TB control efforts. Additionally, MAF-TB implementers will prioritize effective communication and engagement with stakeholders, fostering open dialogue and feedback from patients, healthcare providers, and community-based organizations.

While project challenges are inevitable, they can be minimized through a number of strategic approaches. This project was short-term therefore the intensity of project challenges was greater than the other projects, especially when the high-level decision-makers agreed that the launching of MAF-TB take place in March 2023 during the commemoration of World TB Day:

1. **The challenges in time/Advocacy management:** The most discussed challenge of the activities was the limited time towards the day of launching the MAF-TB compact. Especially the STP Members were of the view that the duration of available time had been designed in a way that was not feasible to complete promptly the MoH and PMO internal arrangement towards the launching of MAF-TB with greater worries of having the Hon. Prime Minister of Tanzania to be the Guest of Honor. In the mobilization events, most of the partners found it challenging to carry out planned activities due to the packed schedule.

There were two major planned national events to take place in one day, the commemoration of WTBD and the launching of Multisectoral Accountability Framework for TB (MAF-TB) response the remaining time allocated for preparation of all activities was not enough to carry out the activities in the most effective way. Having identified this challenge beforehand, intermediate strategies to overcome them were developed in between including the Tanzania STP secretariat organized one-on-one meeting with high level ministerial (MoH) and PMO to push the internal working protocol to meet the goal, the NTLP created MAF-TB launching Task Force to spearhead the agenda, the PMO Gatekeeper were well organized to support the MoH/NTLP and STP works especially in coordinating high level engagement to amplify the internal plans.

2. **The challenges in terms of limited fund allocation to carry out High level advocacy meetings and preparation for launching the MAF-TB:** scarcity of fund also affects

other health services, likewise, in TB service delivery. This year STP Tanzania mobilized fund from Stop TB Global to facilitate the national advocacy activities and raise TB agenda at national level. In between the series of the activities, the highly resources mobilization was arranged by the STP to members of the coalition to ensure that the planned activities are accomplished. Members were able to fund two meetings out of six major high-level meetings. And during the launching of MAF-TB some other members were able to support the mini-activities which were arranged/coordinated by the Ministry of Health.

6.0 Conclusion

The adoption of the WHO Multi-sectoral Accountability Framework for TB response in Tanzania is a historic event that has laid a strong foundation for accelerated progress to ending TB by 2030. By embracing multi-sectoral collaboration, community engagement, advocacy for political commitment and resource mobilization, data-driven decision-making, and sustained commitment, Tanzania is well-positioned to overcome the challenges of TB and achieve its goal of ending TB within the country. The framework can provide valuable insights for other countries facing similar challenges.

CONTACTS



Afya house, HDT road, Kisota, Kigamboni
Dar es salaam, Tanzania. P.O.BOX 65147

Email: secretariat@stoptbtanzania.org

Phone Number: +255 620 706 918

Website: www.stoptbtanzania.org

Social Media

@stoptbtanzania

[Facebook](#)

[Twitter/X](#)

[LinkedIn](#)

[Instagram](#)