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#### **Abbreviations**

**CCM** Country Coordination Mechanism

**CSO** Civil society organization

**EECA** East Europe and Central Asia

MAF-TB Multisectoral accountability framework

to accelerate progress to end TB

MOH Ministry of Health

NTP National TB Program

**SDG** Sustainable Development Goals

**TB** Tuberculosis

**UN** United Nations

**UN GA HLM on TB** United Nations General Assembly High-Level

Meeting on Tuberculosis

WHO World Health Organization

#### **GLOSSARY**

Multisectoral accountability framework to accelerate progress to end TB (MAF-TB) is a tool for achieving and assessing progress towards the implementation of political commitments and agreed targets to end TB.

Health inequities are the differences in the health status (for example, the prevalence of a disease) or in distribution of healthcare resources between various populations depending on the social conditions in which people are born, grow, live, work and age. Health inequities are unfair and should be reduced by government policy.1

The social determinants of health are defined as the structural determinants and conditions of daily life responsible for a major part of health inequities between and within countries. They include the distribution of power, income, goods and services, and the circumstances of people's lives, such as their access to health care, schools and education; their conditions of work and leisure; and the state of their housing and environment. The term "social determinants" is thus shorthand for the social, political, economic, environmental and cultural factors that greatly affect health status.2

Civil society organizations are non-profit organizations acting independently from the government and the private sector, including, for example, interest groups, religious, community and community-led organizations, networks of people living with diseases, and other non-governmental organizations.

**People affected by TB** - according to the Declaration of the Rights of People Affected by Tuberculosis, this term refers to any person with tuberculosis disease or who previously had tuberculosis disease, as well as their care givers and immediate family members, and members of tuberculosis key and vulnerable populations, such as children, health care workers, indigenous peoples, people living with HIV, people who use drugs, prisoners, miners, mobile and migrant populations, women, and the urban and rural poor.

National TB Program (NTP) is the national program ensuring technical and managerial leadership in TB response. The structures within NTP differ by country: from individual TB control programs to programs fully integrated with ministries of health. Most NTPs report to the Ministry of Health.

Country coordination mechanism - according to the Global Fund requirements, the stakeholders representing governmental and non-governmental sectors at the country, regional and subnational levels must identify a clear mechanism of coordinating their joint efforts to access and use the Global Fund funding

**People-centred care** is the approach aiming to ensure that the delivery of care is as close and as conveniently available to the individual as it is safe and cost-effective. It is implemented within the context of local social, structural and cultural factors. One important angle of people-centred care is the focus on the overall wellbeing, choices, convenience and safety of the individual patient. Thus, it takes account of the social and personal circumstances of the person, not just the immediate requirements of medical treatment. People-centered care includes supportive services, peer-to-peer support, social protection, including mental care, legal support, social welfare benefits, assistance in provision of housing / meals, and takes into account the aspects related to gender, age and the needs of key populations.

https://www.who.int/news-room/facts-in-pictures/detail/health-inequities-and-their-ca

https://www.who.int/europe/ru/publications/i/item/WHO-EURO-2022-4871-44634-63333 

https://apps.who.int/gb/ebwha/pdf\_files/A62/A62\_9-en.pdf

**Accountability** is the obligation of the authorities to be answerable for their actions. This term describes the rights and liabilities existing between people and institutions (including the governments, the civil society and private sector) impacting their lives. In democratic states, accountability relationships help ensuring meeting the universal standards, norms and goals by decisions-makers.

**Communication** is a socially conditioned process of transmitting and perceiving information in mass and interpersonal communications through various channels and using various communication tools.

**Communication tools** are the means enabling communication.

**Target audience** is a group of people having common characteristics or a common goal or task, targeted by communication.

**Key message** is the knowledge that the target audience will develop as a result of the information influence.

**Call to action** is an element of communication calling the message recipient to collaboration.

**Communication channel** is a tool used by the source of information to transmit the messages to the target audience.

#### 1. INTRODUCTION

Tuberculosis (TB) is a disease strongly influenced by social and economic development and health-related risk factors such as undernutrition, diabetes, HIV infection, alcohol use disorders and smoking.<sup>3</sup>

Increased risk of infection with TB mycobacteria and active disease development is often caused by social disparities and health-related risk factors. Poverty and associated with it crowded and poorly ventilated living and working environments lead to increased vulnerability to infection; undernutrition is association with active disease development.4 Chronic stress weakens the defenses of the immune system, thus increasing the risk of activating the latent TB infection.

The political commitment of countries to prioritize health issues in public policies and engagement of governmental and non-governmental actors and sectors beyond healthcare to combating TB are essential to ensure comprehensive response to social determinants of health and eliminate health inequities resulting in dissemination of TB.

Multisectoral accountability framework to accelerate progress to end TB (MAF-TB) is a tool for strengthening multisectoral collaboration between the government and stakeholders in ending TB.<sup>5</sup>

The civil society and communities affected by TB, are important partners to initiate and launch MAF-TB both in their countries and at the regional and global levels.

The reason for this is that MAF-TB plays a critical role in implementation of people-centered TB care focusing on the comprehensive needs of people affected by TB. As MAF-TB takes into account the essential aspects other than the biomedical factors (social, economic, etc.), it ensures multisectoral engagement in addressing of TB-related issues.

This mechanism is designated to remove the key barriers in accessing TB services, to reduce stigma towards people affected by TB, and to facilitate protection of the rights and interests of key and vulnerable populations.

In addition, MAF-TB implementation is the basis for achieving goals and fulfillment of the commitments taken by the countries upon signing the Political Declaration of the UN General Assembly High-Level Meeting in TB, and the commitments set earlier by the Sustainable Development Goals and the WHO End TB Strategy.

Based on this, CSOs and communities affected by TB should intensify their advocacy and communication efforts to promote MAF-TB.

Raising awareness of decision-makers and other stakeholders about the importance of launching and/or strengthening MAF-TB, galvanizing their political will in this context and ensuring the highest and broadest representation of all stakeholders possible, are the priority tasks at each stage of MAF-TB initiation and launching. Thus, the success of consolidated efforts aimed at MAF-TB initiating and launching at the country level will depend on correctly designed advocacy and communication activities of the civil society, communities affected by TB and other stakeholders.

<sup>3</sup> WHO Global TB Report 2022; https://www.who.int/publications/digital/global-tuberculosis-report-2021/uhc-tb-determinants/determinants#fig--6-3-3

<sup>4</sup> https://www.who.int/teams/global-tuberculosis-programme/populations-comorbidities/social-determinants 5 https://apps.who.int/iris/handle/10665/342324

#### 1.1 About MAF-TB

It is well-know that tuberculosis which has many social and economic determinants (reasons) and factors increasing the risk of contracting the infection and disease development and dissemination, is not merely a medical problem. Unfavorable determinants and risk factors affect treatment outcomes and can become the reason for treatment interruption. In addition to quality healthcare, people affected by TB need psychosocial support and protection, including assistance in obtaining personal ID documents, receiving education, employment, mobility, living conditions, nutrition, performing parental duties, etc., for TB successful diagnostics, timely initiation of treatment and its successful completion.

Thus, besides the healthcare measures, the engagement of many other stakeholders from governmental and non-governmental sectors, their coordinated efforts in ending TB and relevant accountability are required to ensure effective TB response.

In response to the request of its member states and acknowledging that the end of TB epidemic can be achieved only by consolidated multisectoral efforts, the WHO developed a framework to strengthen multisectoral coordination and improve accountability to accelerate progress to end TB (MAF-TB). By promoting the expansion of people-centered care, MAF-TB brings together the efforts of all sectors and stakeholders related to TB response. As a result, people affected by TB, will receive the necessary support and assistance in addressing TB-related psychological and social issues, in addition to medical care.

The importance of multisectoral and multidisciplinary approach to TB response for facilitating coordination, collaboration and mutual responsibility within the healthcare system and among various sectors and stakeholders was an integral component of all political commitments based on the key documents in this field. The need of implementing such an approach was defined in the WHO End TB Strategy, aligned with the Sustainable Development Goals (SDG) and the Political Declaration of the 2018 UN GA HLM on TB.

Serving as the basis for fulfilment of the political commitments taken by governments in the field of TB, MAF-TB aims to ensure that the political commitments made by the Member States to end TB are implemented into practice through specific actions resulting in reaching the targets and achieving results in TB prevention, treatment, care and support to people affected by TB. Therefore, MAF-TB must be comprised of four main components at the country (and local) level:

- · commitments;
- actions;
- monitoring and reporting;
- review.

Upon determination of the national **commitments** and measures in response to the relevant global and regional commitments and goals to end TB, countries identify specific **actions** required to fulfil the national obligations. The efficiency of such actions is measured through achievements of certain targets (indicators) set in the National strategic plans on TB and, ideally, in the sectoral plans of other stakeholders involved. Subsequent **monitoring and reporting**, along with the recommendations based on the **review** of the achieved results at the national and local levels, support and reinforce effective measures and/or stop ineffective measures and/or encourage development and implementation of additional

measures necessary to achieve the commitments. Implementation of each of the four components is essential for effective functioning of MAF-TB.

For MAF-TB initiation and launching at the country level, it is necessary to take the key measures, and their sequence may depend on the country's context:

- Creating an enabling environment for MAF-TB initiation.
- Conducting a baseline assessment using MAF-TB Baseline Assessment Checklist.
- Establishment and/or strengthening of the National Mechanism for multisectoral coordination and review of TB response measures.

For each of these steps, the adherence of decision-makers and broad stakeholder participation is crucial. Therefore, communication aimed at raising their awareness and enhancing their involvement in the processes of MAF-TB initiation and implementation, is extremely important for launch and further functioning of MAF-TB in the country. This Guide outlines the ways of such communication by CSOs and TB communities.

#### 1.2 The goals and objectives of the Guide

Facilitate development and implementation of effective communication of CSOs and communities affected by TB, with decision-makers and other stakeholders at each stage of MAF-TB initiation and launch at the national and local levels to ensure political and organizational adherence to applying MAF-TB to end TB in the EECA countries.

#### 1.3 The target audience of the Guide

This Guide is designated to be used, primarily, by CSOs, communities affected by TB, and other stakeholders, including National TB program, representatives of the Country Coordination Mechanism, etc., for shaping and carrying out communication with decision-makers on initiating and launching MAF-TB at the national (and local) level in the EECA countries.

#### 1.4 Guide development process

This Guide was developed by TB Europe Coalition, in coordination with the WHO Regional Office for Europe. In preparation of the Guide, theoretical and factual data, including data from the existing literature, working documents covering various aspects related to MAF-TB initiation and launch, were collected. Recommendations formulated in consultations with civil society and/or TB community representatives from five EECA countries which in 2020–2021 conducted the Baseline Assessment using MAF-TB Checklist and communication campaigns to raise awareness of decision-makers and involve them in multisectoral collaboration and accountability processes to fulfil the country's political commitments, were also incorporated in the Guide.

This Guide contains comprehensive information about the basic components of the communication process (communication goals, the key messages, calls to action, communication channels) and relevant recommendations about their choices, optimal application and content in context of MAF-TB initiation and launch for each target audience from among decision-makers and the stakeholders engaged in

national TB response, at each stage of MAF-TB initiation / launch in EECA countries.

#### 1.5 References

Unpacking multisectoral collaboration & accountability in the end TB response: Reference guide for civil society and TB affected communities

Multisectoral accountability framework to accelerate progress to end TB (MAF-TB). The political will at the national level is the key to fulfilling the global commitments

Regional Summary on the key findings of the Baseline assessment with the use of the Annex 2 of the Multisectoral Accountability Framework to Accelerate Progress to End TB (MAF-TB) in Belarus, Kazakhstan, Moldova, Tajikistan, and Ukraine

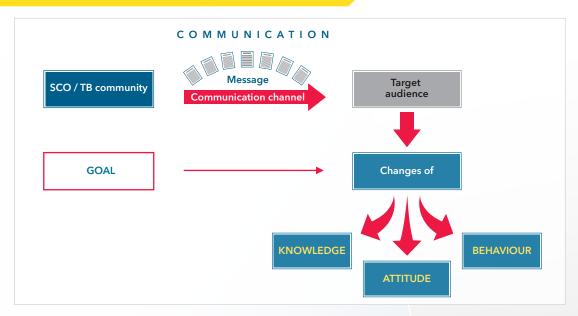
Global Tuberculosis Report 2022

Adaptation and implementation of WHO's multisectoral accountability framework to end TB (MAF-TB): Best practices

## 2. EFFECTIVE COMMUNICATION: FROM THEORY TO PRACTICE

**The term "communication"** usually refers to the socially conditioned process of transmitting and perceiving information in mass and interpersonal communication through various channels with the help of various means of communication. In context of this Guide, to structure the ideas of the communication process and to simplify the use of the practical information, we propose to use the communication framework presented on **Fig. 1**.

Fig. 1. Standard communication framework



According to the framework, the transmitter (in our case, a CSO or a community affected by TB) communicates the key message through selected communication channel(s) to the recipient, i.e. target audience representative(s). As a result of well-planned, organized and carried out communication process and depending on its specific goal, after receiving the message recipients can make or change:

- their idea and the level of knowledge about the theme of communication (in context of this Guide, the target audience will raise their awareness about some MAF-TB aspects or the framework overall):
- their attitude towards the theme of communication (in context of this Guide, the target audience may commit itself to initiating or launching MAF-TB, develop the political will for further support and/or actions);
- their behavior, i.e., take the required actions (in context of this Guide, these can include managerial decision-making, development and endorsement of documents, conducting meetings, including intersectoral, etc).

To achieve such results and for communication to be successful, its every component must be carefully considered and planned.

Firstly, the CSOs or communities affected by TB should identify the target audience to communicate to. For the purposes of this Guide covering communication aiming at initiation and launching of MAF-TB, it is suggested to focus on the following target audiences:

- The Ministry of Health.
- The National TB Programs (or their equivalents in the ministries of health).
- Country coordination mechanism.
- Non-core (non-medical) public ministries and institutions.
- Members of parliament.
- The head of the state / the head of the government.
- Local authorities and self-governments.
- International organizations and technical assistance agencies.
- Civil society organizations and communities affected by TB.
- Representatives of academic and professional circles.
- Mass media.
- Opinion leaders, including religious leaders.
- Private sector.

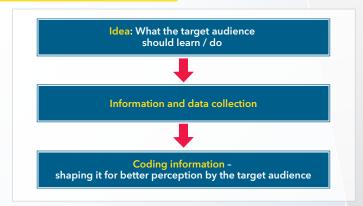
**It is important to identify the exact goal of communication** for the specific stage of MAF-TB initiation or launch based on the area of activity and the level of authority of the target audience and shape the key message accordingly.

**The key message** is the knowledge that the target audience will develop as a result of the information influence. **One of the most important objectives of communication** (ad-hoc or complex and long-term) is ensuring that the key message (idea) is not merely transmitted, but **delivered** to the recipient and, what is more important, **received** by the recipient.

Traditionally, the message is formed step by step, as illustrated in Figure 2.

Problem description - outlining the existing problem which we want to address with

Fig. 2. Message: Steps of formation



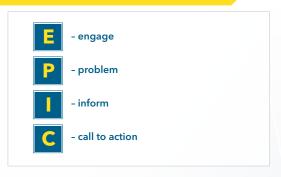
To have an influence on the target audience, the key message must be as concise, clear, and convincing (evidence-based) as possible. It must also be motivating and useful for the target audience. An effective way of shaping a key message is the "EPIC" format demonstrated on Fig. 3. The format suggests the following sequence of message elements:

 Engagement - updating on the topic of interest. For example, for the purposes of this Guide, it will be updating on the theme of TB. target audience engagement. For example, for the purposes of this Guide it can be the outline of the existing social determinants, statistics, etc.

- Informing sharing information about possible solutions to address the problems outlined above. For example, for the purposes of this Guide, this can be explaining the importance of multisectoral approach in addressing TB, the insights that TB is not merely a healthcare issue and other sectors need to be involved in addressing this problem, etc.
- Call to action suggesting or asking the target audience to take specific actions that
  may help to solve the problem. For example, for the purposes of this Guide, it can be a
  request about development of documents, launching intersectoral dialogues,
  participation in certain activities, etc.

Alongside shaping the key message, it is important to identify the most effective

#### Fig. 3. EPIC format of information delivery



communication channel for the selected target audience. These can include one or more traditional (official correspondence, events with broad stakeholder participation, informational materials, etc.) or alternative (vertical authority resource, international partner engagement, personal meetings, etc.) communication channels. This Guide proposes a model list of possible communication channels for each target audience at every stage of MAF-TB initiation or launch. However, it can be expanded/shortened based on the country context and the practices of CSOs and affected communities.

Section 3 of this Guide contains practical recommendations regarding the content of the basic components of the communication process in context of MAF-TB initiation and launch for each target audience, including the decision-makers and the stakeholders of the national TB response.

# 3. COMMUNICATION ON MAF-TB INITIATION AND LAUNCH AT THE COUNTRY LEVEL: PRACTICAL RECOMMENDATIONS FOR CSOs AND COMMUNITIES AFFECTED BY TB

It is well-known that communication effectiveness (the likelihood that the message is received, understood and yields anticipated results) is directly associated with a clear definition of the target audience and awareness of its unique characteristics and a proper choice of the communication scheme.

This Guide defines the key target audiences participating in planning, implementation, monitoring and evaluation and review of TB response measures for each stage of MAF-TB initiation and launch at the country level. The stakeholders may vary from country to country and depending on such factors as epidemiology, TB determinants, institutional mechanisms of TB prevention, treatment and care/support service delivery, and the governance structure of the political and healthcare systems.

The Guide describes the roles and goals of communication for each of the three stages of MAF-TB initiation and launch and proposes a set of key components of the communication process for each key target audience. Thus, the Guide recommends which key messages can be used and which calls to action can be promoted by CSOs and TB communities to ensure MAF-TB initiation and launch at the country level. **Such key messages and calls to action are frameworks which can be adapted to the country context by adding or removing any messages or calls for action based on the relevance of such messages or actions for the country.** In addition, the Guide suggests some optimal communication channels for each target audience; the list of such channels is not exhaustive, and they can be used based on their accessibility and with consideration of national (local) circumstances.

For effective use of recommendations offered in this Guide, the CSO or TB community representative responsible for communications on MAF-TB, must identify:

- one of the three key steps of MAF-TB initiation and launch the national (local) system of TB response measures is currently on,
- the target audience with which there is a possibility / reason for communication (a perspective of joint participation in an event, a possibility of a personal meeting, a good informational occasion for communication or publication, etc.),
- the accessible communication channels optimal for this target audience.

Using the three tables corresponding to a specific step of MAF-TB initiation and launch at the country level, choose one or several target audiences preferrable for communication, along with the suggested key messages and calls to action to be communicated via the accessible communication channels.

## 3.1 Establishing an enabling environment for MAF-TB initiation

The main goal of communication at this stage – is to inform and raise awareness of the stakeholders about MAF-TB concepts and other advantages of multisectoral collaboration and accountability in TB response for further development of sustainable political will to establish and strengthen the enabling environment for MAF-TB launch at the country level.

**Potential barriers at this stage:** lack of clear and user-friendly information about the practical goals, advantages and MAF-TB concept operationalization mechanisms in the national context; lack of motivation to fulfil the country's commitments taken in accordance with the Political Declaration on TB and other international documents, and to recognize the role of MAF-TB in fulfilling such commitments; lack of information and data required for MAF-TB launch and implementation; lack of human and financial resources.

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
	in reducing TB burden through ensuring comprehensive support in addressing psychosocial needs of people living with TB and preventing TB dissemination.  To ensure successful TB diagnostics, initiation and completion of treatment, people affected by TB, besides medical care, need psychosocial support; in addition, they may need to address issues related to obtaining documents, receiving social assistance, education, employment, travel, nutrition, performing parental duties, etc. Therefore, the healthcare system needs support of other sectors in addressing TB-related issues, including preventing TB dissemination.	of multisectoral approach to ending TB and promoting their engagement in TB response measures.  • Ensure alignment of the National Strategic Plan on TB with the WHO End TB Strategy, Tuberculosis Action Plan for the WHO European Region 2023-2030, and the Political Declaration of the UN GA HLM on TB, in term of implementation of multisectoral approaches to TB response.  • Apply to donors for support in MAF-TB launch and implementation.  • Conduct multisectoral consultations to discuss the launch of MAF-TB at the country level (in accordance with the recommendations of the materials on MAF-TB in-country adaptation and implementation), including its practical value to end TB, the expected measures and roles of the stakeholders in its operationalization, harmonization of approaches of conducting the baseline assessment and MAF-TB strategic vision development (the national concept or the national roadmap) on improving multisectoral coordination and strengthening accountability.	
Country coordination mechanism	The launch of MAF-TB and coordination of its implementation play an important role in pulling together the efforts of various sectors and stakeholders for coordinated national TB response and strengthening their accountability to address the reasons and mitigate the consequences of the social determinants of health and TB risk factors.  The Global Fund Strategy (2023–2028), alongside with the key global and regional strategies and commitments call to strengthening partnerships in all sectors, including those for joint treatment of the existing conditions and concomitant diseases, i.e. HIV, COVID-19 and diabetes, in collaboration with other stakeholders. The Strategy envisages working with various diseases and relevant sectors beyond healthcare to address the social determinants of TB.	<ul> <li>Inform non-core public authorities and other stakeholders about the importance and the goals of multisectoral approach to ending TB, including SDG fulfilment, and promoting their engagement in TB response measures.</li> <li>Include the themes of MAF-TB adaptation and launch, in CCM meetings agenda.</li> <li>Initiate the development of MAF-TB Country Strategy or Vision and taking leadership in these activities.</li> <li>Initiate high-level progress review of TB response measures with broad multisectoral stakeholder participation.</li> <li>Initiate MAF-TB baseline assessment, mapping of other sector and stakeholder engagement in the national TB response to review the CCM composition.</li> </ul>	

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
	TB epidemic can be ended only as a result of coordinated efforts of various sectors and strengthened accountability.	Conduct multisectoral consultations to discuss the launch of MAF-TB at the country level (in accordance with the recommendations of the materials on MAF-TB in-country adaptation and implementation), in particular, its practical value to end TB, the expected measures and roles of the stakeholders in its operationalization, harmonization of approaches of conducting the baseline assessment and development of the key document on MAF-TB.  Consider the need of multisectoral TB response in preparation of the country funding request for the Global Fund. Include the activities (for example, assessment and monitoring of the impact of social determinants of health and TB risk factors of TB incidence among various populations, provision of psychosocial support and ensuring social protection, establishing / strengthening MAF-TB coordination mechanisms, establishing / strengthening high-level review mechanisms of TB response, etc.) in the Global Fund funding requests.	
Non-core (non-healthcare) public ministries and institutions	Tuberculosis is not merely a medical problem. Engagement of non-core ministries and public institutions in MAF-TB initiation, launch and implementation will facilitate pulling together the efforts of various sectors and stakeholders to reduce TB burden and eliminate TB by addressing all social and economic determinants of TB and the needs of people affected by TB.  To ensure successful TB diagnostics, initiation and completion of treatment, people affected by TB, besides medical care, need psychosocial support; in addition, they may need to address issues related to obtaining documents, receiving social assistance, education, employment, travel, living conditions, other household issues, performing parental duties, etc.  The engagement of non-core public bodies, depending on their mandate, is essential for:	<ul> <li>Support MAF-TB launch and commitment of the ministry / institution to participate in its operationalization (in accordance with the functions covered by the mandate of the ministry / institution).</li> <li>Participate in the multisectoral consultation to discuss the role of the ministry / institution in MAF-TB implementation.</li> </ul>	<ul> <li>Official letters.</li> <li>Intersectoral meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Printed / electronic informational materials.</li> <li>International partner engagement.</li> <li>Hierarchy of power.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
	<ul> <li>to prevent TB and ensure infection control measures in public places and congested areas (transport, schools, penitentiary facilities, the army, etc.);</li> <li>o reduce poverty and undernutrition as one of TB determinants;</li> <li>to reduce such TB risk factors and tobacco smoking and alcohol abuse (e.g., by increasing taxes for tobacco and alcohol products, etc.);</li> <li>to eliminate legal barriers in accessing quality services, including internal and external mobile populations and homeless people.</li> </ul>		
Members of parliament	MAF-TB is a tool for achieving and evaluating the country's progress in fulfillment of its political commitments and set targets to end TB.  By signing the Political Declaration of the UN GA HLM on TB, the country committed itself to making effort to achieving goals and fulfilling obligations aiming at ending TB, including through multisectoral approach in TB response. The national political will is the key to fulfillment of global commitments, while parliamentary control over adherence to the country's commitments, ensuring sustainable governmental funding of TB response, establishing enabling legislative environment based on human rights (including gender rights) and preventing stigma and discrimination, may significantly accelerate their realization.	<ul> <li>Ensure public support of MAF-TB initiation as an important component of fulfillment of the country's political commitments towards ending TB, and achievement of broad spectrum of SDGs and related targets in accordance with the country's commitments to achieve Sustainable Development Agenda by 2030. The following SDGs and relevant indicators are associated with the spread of TB: no poverty (SDG 1), zero hunger (SDG 2), ensuring good health and well-being (SDG 3), ensuring access to affordable, reliable, sustainable and modern energy for all (SDG 7), ensuring decent work and economic growth for all (SDG 8), reduced inequalities (SDG 10), making cities and communities resilient (SDG 11).<sup>6</sup></li> <li>Appeal to the head of the state / the head of the government (and to the MOH) with a request to facilitate soonest MAF-TB launch and identify the public body responsible for MAF-TB development and implementation (in accordance with the recommendations of the guidance on MAF-TB adaptation and implementation at the country level).</li> <li>Present the concept of MAF-TB to fellow members of parliament in the country and in the region to ensure further support of its implementation.</li> <li>Ensure parliamentary control over timely launch of MAF-TB processes in the country.</li> </ul>	<ul> <li>Official letters.</li> <li>Intersectoral meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Printed / electronic informational materials.</li> <li>International partner engagement, in particular, to discuss MAF-TB issues in the framework of international events.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
		<ul> <li>Ensure inclusion of TB-related issues in all strategies (disease prevention, impact on social determinants of health, guaranteed sick leave, protection against unemployment and loss of income, etc.).</li> <li>Ensure sustainable and sufficient budget for multisectoral national TB response.</li> </ul>	
Head of state / Head of government	Protection of population from communicable diseases, including TB, is an integral component of care and accountability of the state to its citizens, indicating the progress in the country's social and economic development.  The approach to promote coordination, collaboration, and mutual accountability both within the health sector and between different sectors and stakeholders in TB response is essential for ending TB. MAF-TB implementation will facilitate fulfillment of the country's political commitments on TB, reducing health inequalities and ensuring equity for all.  Strengthening multisectoral collaboration and accountability will result in ensuring that people affected by TB receive the necessary support and assistance in addressing the psychosocial issues accompanying the disease (psychological support, addressing issues related to education, employment, mobility, living conditions, nutrition, etc.), in addition to medical care. Such an approach is possible only with coordination of multisectoral collaboration and accountability processes at the central level.	<ul> <li>Ensure public support to the idea of MAF-TB as an important component of fulfillment of the country's political obligations on ending TB.</li> <li>Task relevant state authorities to ensure MAF-TB development and operationalization (in line with the recommendations of the materials on MAF-TB incountry adaptation and implementation) in order to fulfil the country's international commitments and accelerate progress to end TB.</li> <li>Consider national ratification of relevant UN declarations and other international declarations signed by the country, to strengthen their implementation and meet the commitments undertaken by the governments.</li> </ul>	<ul> <li>Official letters, primarily on high official representatives of the stakeholders.</li> <li>Involvement of high official representatives of stakeholders to promote the idea of MAF-TB during events or personal meetings.</li> <li>Involvement of international partners to raise the issues of MAF-TB at high-level events.</li> </ul>
Local authorities and self-governments.	Tuberculosis is not only a medical issue.  TB dissemination is associated with social and economic development of the territory, and mobilizing multisectoral collaboration and coordination in TB response is key in ensuring health and well-being of your citizens.  TB is a disease that deprives people of opportunities to lead productive and independent lives. To eliminate it, it is important to initiate and implement MAF-TB at all levels, including community level.	<ul> <li>Ensure public support, initiation and implementation of multisectoral approach to TB response at the local level.</li> <li>Include addressing social determinants of TB in local sectoral plans and allocate relevant budget.</li> <li>Include the TB theme (review of achievements and gaps) in meetings held with participation of all sectors, CSOs and people affected by TB, resulting in adoption of intersectoral decisions.</li> </ul>	<ul> <li>Official letters.</li> <li>Meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Printed / electronic informational materials.</li> <li>International partner engagement.</li> <li>Hierarchy of power.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
	For proper MAF-TB implementation at the local level, it is important to lay the groundwork for pulling together the efforts of all stakeholders, sectors and counterparts (including CSOs and people affected by TB) on the territory under the jurisdiction of the authority and/pr local selfgovernment, to address the TB problem.		
International organizations / Technical assistance agencies	Coordinated efforts to end TB include active engagement and participation of international organizations as equal (technical) partners in the national TB response.  To end TB globally, it is essential to implement MAF-TB in each country, including with the support of international partners providing financial and technical assistance. Serving as the basis for fulfillment of the political commitments taken by governments in the field of TB, MAF-TB aims to ensure that the political commitments made by the Member States to end TB are implemented into practice through specific actions, which are monitored, reviewed, and reported on.	<ul> <li>Support MAF-TB initiation and launch in the country (in line with the recommendations provided in the materials of MAF-TB in-country adaptation and implementation), including by means of providing technical and financial assistance (for example, in conducting baseline assessment of multisectoral collaboration and accountability, developing mechanisms of monitoring and evaluating the impact of the social determinants of health on various populations, building capacity and resources of MAF-TB coordination mechanisms, developing sectoral action plans and analyzing the results, conducting high-level progress review, etc.).</li> <li>Support and bring up the issues of MAF-TB implementation and launch on international platforms in line with implementation of the Sustainable Development Agenda and global accountability obligations relevant to the partners' mandate.</li> <li>Inform decision-makers and other stakeholders on various national platforms, including CCM, about the role of MAF-TB in fulfillment of the political commitments undertaken by the state, and in accelerating progress to end TB (in line with the recommendations provided in the materials of MAF-TB adaptation and implementation in the country).</li> <li>Inform decision-makers and other stakeholders about successful practices of MAF-TB launch in other countries.</li> </ul>	<ul> <li>Official letters.</li> <li>Meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Engagement of other international partners, in particular, to discuss MAF-TB issues in international events.</li> <li>Printed / electronic informational materials.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
Coalitions of civil society organizations and communities affected by TB	By pulling together the efforts of all sectors and partners engaged in TB response and broader health and well-being, MAF-TB will facilitate promoting peoplecentered care, overcoming barriers in access to the required medical and non-medical services, reducing stigma and discrimination towards people affected by TB.  In addition to medical care, people affected by TB will receive the necessary support and assistance in addressing problems associated with the disease. Besides, civil society organizations and communities affected by TB will strengthen their meaningful engagement in TB response.	<ul> <li>Support and facilitate MAF-TB development and implementation at the country level (in line with the recommendations provided in the materials on MAF-TB in-country adaptation and implementation) by comprehensive informing of the stakeholders and relevant authorities (including non-core bodies) about the goals and advantages of MAF-TB through:</li> <li>preparation of advocacy and informational materials,</li> <li>organization of cross-sectoral events (in particular, the national dialogues) and participation in such events,</li> <li>promoting inclusion of the need of MAF-TB development and operationalization in the agenda of as many TB-related events as possible,</li> <li>bringing up the issue of MAF-TB in personal meetings with decision-makers,</li> <li>mainstreaming MAF-TB issues in publications, videos and other informational materials with their broad dissemination,</li> <li>preparation of official letters, including collective letters, to decision-makers and international partners, etc.</li> <li>Prepare informational materials for participatory discussion of MAF-TB launch at the country level and its practical value to end TB, the expected measures and roles of the stakeholders in its operationalization, harmonization of approaches of conducting the baseline assessment and development of the key document on MAF-TB in-country adaptation and implementation).</li> </ul>	<ul> <li>Working meetings and other thematic events.</li> <li>Personal meetings.</li> <li>Training events.</li> <li>Newsletters, posts in social networks and other online tools.</li> <li>Official letters.</li> <li>Printed / electronic informational and advocacy materials.</li> </ul>
Representatives of academic and professional circles	Conducting research of the theme of tuberculosis in the field of social sciences will enable to expand the evidence base for the impact of social determinants and help to identify solutions to address health inequities and TB risk factors.	<ul> <li>Organize and conduct academic events to discuss the importance of addressing TB social determinants and risk factors and implementation of MAF-TB in TB response.</li> <li>Create / expand the evidence base received from social surveys for managerial</li> </ul>	<ul> <li>Official letters.</li> <li>Personal meetings.</li> <li>Publications in academic printed / online journals.</li> <li>Working meetings and other thematic events.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
	<b>Tuberculosis</b> - is not merely a medical issue. This disease is conditioned by a number of social determinants and related risk factors. This is why engagement of many sectors and stakeholders through MAF-TB implementation is essential to end TB.	and programmatic decision- making in the field of TB response.	
Mass media	With the help of mass media, the general public needs to learn that tuberculosis is not merely a medical issue. Tuberculosis is conditioned by social health inequities, therefore equitable TB response must prevent and mitigate the consequence of social inequities by ensuring social protection, prevention, timely access to diagnostics and effective treatment for all people in need of it.  In the process of TB diagnostics and treatment people affected by TB, face various problems and needs beyond the healthcare system. The success of ending TB will depend on affected sectors' engagement in TB response.	Draw the attention of the general public (e.g. through personal stories of people affected by TB) to the importance of multisectoral approaches in TB response by raising awareness that tuberculosis is a disease conditioned be a number of social determinants and risk factors.	<ul> <li>Press-conferences and other events with the involvement of journalists.</li> <li>Distribution media materials, including the materials covering stories of people affected by TB.</li> <li>Personal meetings.</li> <li>Publications of stories of people affected by TB, illustrating the importance of multisectoral approach, in social networks and other online platforms.</li> <li>Training for journalists.</li> </ul>
Opinion leaders including religious figures	With the help of the opinion leaders the general public needs to learn that tuberculosis is not merely a medical issue, and people affected by TB need support beyond the healthcare system.  Tuberculosis is a preventable and curable disease; however, more than 10 million people contract the infection which carries away the lives of more than 1.5 million people annually. Tuberculosis brings people physical and mental suffering and heavy financial burden caused by long treatment and loss of ability to work. In the process of TB diagnostics and treatment people affected by TB, face various problems and needs beyond the healthcare system. The success of ending TB will depend on affected sectors' engagement in TB response.	<ul> <li>Draw the attention of the general public (e.g. through personal stories of people affected by TB) to the importance of multisectoral approaches in TB response by raising awareness that tuberculosis is a disease conditioned be a number of social determinants and risk factors.</li> <li>Appeal to decision-makers with a request to support MAF-TB initiation and launch.</li> </ul>	<ul> <li>Personal meetings and/or communication.</li> <li>Organization of joint social projects or participation in such projects.</li> </ul>

## 3.2 Baseline Assessment with the use of MAF-TB Checklist

Baseline Assessment conducted with the use of MAF-TB Checklist, is very important for MAF-TB implementation as it enables to assess the initial situation of multisectoral TB response at the country level and receive evidence across the four main MAF-TB components (commitments, actions, monitoring and reporting, review). MAF-TB Checklist is supplemented by three annexes to assess the engagement of ministries / institutions; the engagement of civil society organizations and TB communities; and adaptation and use of the WHO recommendations in TB response.<sup>7,8</sup>.

The main goal of communication at this stage is to contribute to the readiness of the Ministry of Health to conduct Baseline Assessment and enlist maximum support from the stakeholders (including non-core ministries and institutions) at each step of the Baseline Assessment to ensure collection of reliable data for MAF-TB main components, their effective analysis, preparation and multisectoral discussion of the Baseline Assessment, along with broad stakeholder agreement with the relevant recommendations and their implementation.

**Potential barriers at this stage:** lack of political will to initiate the Baseline Assessment; lack or insufficient organizational and/or financial resources to conduct the Baseline Assessment; lack of awareness of non-core ministries and institutions of their role in TB response and/or the objectives of the Baseline Assessment; lack of stakeholder engagement in the Baseline Assessment processes and discussion and approval of its findings.

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
audience Ministry of Health  National TB Programs (or their equivalents in the ministries of health)  Country coordination mechanism	the target audience  The Baseline Assessment conducted with the use of MAF-TB Checklist, is important for multisectoral approach implementation and is an integral component of MAF-TB launch at the country level.  The Baseline Assessment helps to assess the initial situation of multisectoral TB response at the country level and receive evidence across four main MAF-TB components (commitments, actions, monitoring and reporting, review), resulting in relevant	the target audience  Organize the Baseline Assessment and taking leadership of the process.  Apply to the WHO and partner organizations to request technical assistance.  Inform non-core ministries and institutions, along with other stakeholders, about the importance of their participation in the Baseline Assessment and further discussion / agreement of its recommendations.  Organize and conduct multisectoral meetings to	<ul> <li>with the target audience</li> <li>Official letters.</li> <li>Multisectoral meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Printed / electronic informational materials.</li> <li>International partner engagement, e.g. to raise MAF-TB issues in international meetings.</li> <li>The hierarchy of power.</li> </ul>
	recommendations for further MAF-TB implementation.  The Baseline Assessment helps to identify the mandate of various sectors and possible roles of governmental and nongovernmental partners in TB response. Its findings can be used to accelerate progress in achieving the national targets and increase liability and accountability of other sectors.	discuss the objectives of the Baseline Assessment, its operational plan, the participants and the parties responsible for each of the three Annexes, and the analysis of the findings / preparation of recommendations.  • After completion of the Baseline Assessment - organize multisectoral meetings to discuss the findings and agree upon the recommendations.  • Envisage the need of multisectoral TB response in preparation of the country	

<sup>7</sup> https://www.who.int/publications/m/item/who-multisectoral-accountability-framework-for-tb-(maf-tb)-baseline-assessment-checklist-for-country-use-in-pursuing-a-national-maf-tb

<sup>8</sup> https://www.paho.org/sites/default/files/2021-cde-maf-checklist-annexes-tb-en.pdf

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
		application and inclusion of relevant activities based on Baseline Assessment findings in the GF application.	
Non-core (non-medical) public ministries and institutions	Participation of your body / organization in the Baseline Assessment will help to obtain a more accurate assessment of the baseline situation regarding multisectoral TB response at the country level.  Baseline Assessment will provide the factual data across the four MAF-TB components (commitments, actions, monitoring and reporting, and review). This will facilitate development of effective recommendations and soonest implementation of multisectoral approach in TB response resulting in improvement of the situation with TB.  Ultimately, it will help to reduce the TB burden in the society through coordinated actions and sharing responsibility and accountability.	<ul> <li>Participate in MAF-TB Baseline         Assessment to collect most         accurate data on the main         MAF-TB components, and in         the discussion of its findigns.</li> <li>Participate in agreeing the         recommendations developed         as a result of the Baseline         Assessment, and undertake         commitments on fulfilling         them to ensure multisectoral         approach in TB response.</li> </ul>	<ul> <li>Official letters.</li> <li>Multisectoral meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Printed / electronic informational materials.</li> <li>International partner engagement.</li> <li>The hierarchy of power.</li> </ul>
Members of parliament	MAF-TB Baseline Assessment with the use of MAF-TB Checklist is necessary to evaluate multisectoral TB response at the country level and accelerate MAF-TB implementation.  Baseline Assessment is important for MAF-TB implementation, as it helps to obtain the factual data across the four main MAF-TB components (commitments, actions, monitoring and reporting, and review) for subsequent preparation of country-level recommendations on implementing the multisectoral approach to end TB.	<ul> <li>Support organization and implementation of MAF-TB Baseline Assessment by the Ministry of Health (NTP, CCM).</li> <li>Support participation of noncore ministries and institutions in MAF-TB Baseline Assessment and approval of the recommendations based on its findings for their further fulfilment.</li> </ul>	<ul> <li>Official letters.</li> <li>Multisectoral meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Printed / electronic informational materials.</li> <li>International partner engagement, e.g. to discuss MAF-TB issues in international events.</li> </ul>
Head of state / Head of government	MAF-TB Baseline Assessment with the use of MAF-TB Checklist is necessary to evaluate multisectoral TB response at the country level and accelerate MAF-TB implementation.  Baseline Assessment provides evidence base for further political and managerial decisions.  Baseline Assessment conducted with participation of all sectors and stakeholders engaged in TB response, plays an important role in MAF-TB implementation, as it helps to obtain the factual data	Promote organization and conducting of the Baseline Assessment by the Ministry of Health (NTP, CCM) with the participation of non-core ministries and institution and approval of recommendations based on the Assessment findings for their implementation.	<ul> <li>Official letters, primarily, on behalf of high-level representatives of the stakeholders.</li> <li>Involvement of high-level stakeholder representatives to present the concept of MAF-TB during events or personal meetings.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
	across the four main MAF-TB components (commitments, actions, monitoring and reporting, and review) for subsequent preparation of country-level recommendations on implementing the multisectoral approach to end TB.		International partner involvement in mainstreaming of MAF-TB issues at high-level meetings.
International organizations / technical assistance agencies	To end TB at the global level, MAF-TB implementation in each country is critical, while Baseline Assessment at the country level is its essential step.  Baseline Assessment conducted with participation of all sectors and stakeholders engaged in TB response, plays an important role in MAF-TB implementation, as it helps to obtain the factual data across the four main MAF-TB components (commitments, actions, monitoring and reporting, and review) for subsequent preparation of country-level recommendations on implementing the multisectoral approach to end TB. The assessment findings provide evidence base for strategic decision-making in the field of TB response.	<ul> <li>Actualize the need of Baseline Assessment with broad stakeholder participation, including non-core public authorities, to the Ministry of Health, the Government and other decision-makers (especially, representatives of non-core ministries and institutions).</li> <li>Support conducting Baseline Assessment or its components (stages) at the country level by providing advisory, organizational and/or financial assistance to the Ministry of Health and/or other stakeholders.</li> </ul>	<ul> <li>Official letters.</li> <li>Multisectoral meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Involvement of other international partners, e.g. to discuss the issues of MAF-TB in international events.</li> <li>Printed / electronic informational materials.</li> </ul>
Coalitions of civil society organizations and communities affected by TB	Baseline Assessment with broad stakeholder participation is an essential component of implementing multisectoral approach in TB response.  Baseline Assessment will provide the factual data across the four main MAF-TB components (commitments, actions, monitoring and reporting, and review) for preparation of relevant country-level recommendations on for further implementation of multisectoral approach to accelerate progress to end TB.	<ul> <li>Participate in the Baseline         Assessment across all         components of MAF-TB         Checklist and take leadership         in the collection and analysis         of data regarding civil society         and TB communities'         engagement in TB response         according to Annex 2 of MAF-TB         Checklist. Participate in the         discussion of the findings and         agreement of the Baseline         Assessment recommendations.</li> <li>Actualize the need of Baseline         Assessment with broad         participation of ministries and         institutions, to decision-makers,         primarily, to representatives         of the Ministry of Health (NTP,         CMM) and the Government.</li> <li>Actualize the need to participate         in the Baseline Assessment and         approve its recommendations         for further implementation to         representatives of non-core         public authorities.</li> <li>Provide technical assistance to         public authorities in conducting         the Baseline Assessment and         preparation of conclusions and         recommendations.</li> </ul>	<ul> <li>Working meetings and other thematic events</li> <li>Personal meetings</li> <li>Training activities</li> <li>Newsletters, publications in social networks and other online tools</li> <li>Official letters</li> <li>Printed / electronic informational and advocacy materials.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
Representatives of the academic and professional circles, including associations of health professionals	The Baseline Assessment is an important and essential component of multisectoral approach implementation in TB response at the country level, therefore it is critical that it is conducted at a highly professional level with involvement of the academic expertise.  Upon obtaining the necessary factual data across the four main MAF-TB components (commitments, actions, monitoring and reporting and review) from the Baseline Assessment, the responsible stakeholders will have an opportunity to prepare relevant country-level recommendations for further implementation of multisectoral approach to accelerate progress to end TB.	Provide consultative support to the public authorities in conducting the Baseline Assessment, collection and analysis of data, drawing the conclusions and recommendations.	<ul> <li>Official letters.</li> <li>Working meetings and other thematic events.</li> <li>Personal meetings.</li> <li>International / national partner involvement.</li> </ul>

# 3.3 Establishment and strengthening of the National multisectoral coordination and review mechanism of TB response

The main goal of communication at this stage is engagement of the stakeholders involved in TB response, in the joint process of coordinating and optimizing the efforts to end TB and shaping sustainable high-level political adherence to conducting regular review of multisectoral TB response to measure progress towards achieving the political commitment and the national targets on TB.

**Possible barriers at this stage:** lack of political will for establishing and/or further strengthening of the National multisectoral coordination and review mechanism of TB response; low level of engagement of non-core ministries and institutions in coordination and optimization of efforts to end TB.

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
National TB Programs (or their equivalents in the ministries of health)  Country coordination mechanism	Establishing and/or strengthening of a National multisectoral mechanism of coordination and annual review of TB response will accelerate achievement of the national targets and commitments to end TB, including the SDG targets  By fulfillment of the global commitments undertaken by the state in accordance with the Political Declaration of the UN GA HLM on TB, MAF-TB implementation at the national level will pool together the efforts of various sectors and stakeholders ensuring comprehensive TB response.	<ul> <li>Initiate establishment and/or strengthening of the country multisectoral coordination mechanism on TB and embed it in the policy documents; conduct annual high-level review (with head of state / head of government involvement).</li> <li>Embed the concept of multisectoral approach to end TB in the national strategic documents.</li> <li>Call upon non-core ministries and institutions to ensure representation and function of public bodies within country multisectoral coordination mechanism on TB and annual high-level review of the progress towards the national TB-related targets.</li> <li>Call upon the Head of state / Head of government to lead the annual review of the progress towards the national TB-related targets.</li> <li>Approach the members of parliament, international and non-governmental organizations with a proposal to participate in the work of the National multisectoral coordination mechanism on TB and in the review of progress towards the national TB-related targets.</li> <li>Budget the cost of activities related to launching and functioning of the National multisectoral coordination and review mechanism of TB response measures, including</li> </ul>	<ul> <li>Official letters</li> <li>Multisectoral meetings with broad stakeholder participation.</li> <li>Personal meetings</li> <li>Printer / electronic informational materials.</li> <li>International partner involvement, e.g., to discuss MAF-TB issues in international events.</li> <li>The hierarchy of power.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
		preparation of the annual national multisectoral report on TB.  Consider the need of multisectoral response to TB challenges in preparation of the country's application to the Global Fund and include the required activities in the requests of all the stakeholders.  Conclude agreements and/or memorandum of understanding with other ministries or institutions involved to address the social determinants of TB.	
Non-core (non-medical) public	Participation of all involved ministries and institutions in the National multisectoral mechanism of TB response measures coordination and high-level progress review in achieving the targets on TB is key to end TB.  Since tuberculosis is not merely a medical problem but is conditioned by numerous social determinants and risk factors, a comprehensive approach with all stakeholder involvement is essential to end TB. MAF-TB pulls together the efforts of various sectors and stakeholders for decisive national response to TB challenges.	<ul> <li>Ensure representation of the public authority in the National multisectoral mechanism of TB response measures coordination and the review of progress towards the national TB-related targets.</li> <li>Include in the operational plan of the public authority the activities aiming at combating TB, including the activities identified in the recommendations informed by the Baseline Assessment findings.</li> <li>Envisage the costs to cover the activities aiming at combating TB, in the budget of the public authority, including the activities identified in the recommendations informed by the Baseline Assessment findings.</li> </ul>	<ul> <li>Official letters.</li> <li>Multisectoral meetings with broad stakeholder participation.</li> <li>Personal meetings</li> <li>Printed / electronic informational materials.</li> <li>International partner involvement</li> <li>The hierarchy of power.</li> </ul>
Members of parliament	Facilitating the launch of the National multisectoral mechanism of TB response measures coordination and highlevel progress review in achieving the targets on TB, along with participation of the members of parliament in the review, will ensure the necessary level of political support to fulfillment of the global commitments undertaken by the state.  To accelerate progress to end TB as an issue beyond the healthcare sector, multisectoral approach with all stakeholder engagement is critical.  Thus, the launch and functioning of the National multisectoral mechanism of TB response measures coordination and high-	<ul> <li>Call upon the ministry of health (NTP, CCM) / the Government to establish and/or strengthen the National multisectoral mechanism of TB response measures coordination and high-level progress review towards the national TB-related targets.</li> <li>Call upon the Head of State / Head of Government requesting to head the annual National high-level review of progress towards the national TB-related targets.</li> <li>Call upon non-core (non-medical) public authorities / Government to ensure representation of non-core ministries and institutions, alongside with CSOs and</li> </ul>	<ul> <li>Official letters.</li> <li>Multisectoral meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Printed / electronic informational materials.</li> <li>International partner involvement, e.g. to discuss MAF-TB issues in international events.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
	level progress review in achieving the targets on TB, pulling together the efforts of various sectors and stakeholders, will ensure a decisive national response to TB challenges. Conducting regular committee hearings in parliament may become a part of the review of progress towards achievement of the national targes on TB.  Official meetings on TB in the parliament can become an important component of the National multisectoral coordination mechanism.	communities affected by TB, in the National multisectoral mechanism of TB response measures coordination and high-level review of progress towards the TB-related targets.  Initiate development / revision (and parliamentary oversight of its adherence) of legislature governing TB control measures to include the provisions on multisectoral collaboration, and allocation of sufficient funding for effective multisectoral TB response.  Ensure parliamentary oversight of TB control measures with comprehensive application of multisectoral approach, in particular, engagement of CSOs, communities affected by TB, non-core public ministries and institutions in TB response.	
Head of State / Head of Government	Establishing / strengthening of the National high-level progress review in achieving the national TB targets led by the Head of State / Head of Government is key to fulfillment of the country's global political commitments to end TB.  Serving as the basis for fulfilment of the political commitments taken by governments in the field of TB, MAF-TB aims to ensure that the political commitments made by the Member States to end TB are implemented into practice through specific actions, which are monitored, reviewed, and reported on. Promoting establishing / strengthening of the annual National progress review of achieving the national TB targets and leading it at the highest level will institutionalize enhanced collaboration, consolidated responsibility and liability in TB response.	<ul> <li>Lead the annual National progress review towards the national TB targets.</li> <li>Support participation of as many interested ministries and institutions as possible in the National high-level review of progress towards the national TB-related targets.</li> <li>Claim political support to the National high-level review of progress towards the national TB-related targets and call upon the potential review participants to recognize the importance of implementing and strengthening the systemic consolidated efforts to end TB.</li> </ul>	<ul> <li>Official letters, firstly, om behalf of high-level stakeholder representatives.</li> <li>Engaging high-level stakeholder representatives to present the concept of MAF-TB at events or personal meetings.</li> <li>International partner engagement to actualize the theme of MAF-TB at high-level events.</li> </ul>
Local authorities and local self- governments	Implementation of the multisectoral coordination and review mechanism of TB response both at the local and national levels is critical to end TB.  Consolidated efforts of various sectors and stakeholders at all levels of the administrativeterritorial structure are an integral part of the national	<ul> <li>Ensure public support of implementation of the multisectoral approach to addressing TB at the local level.</li> <li>Ensure regulatory and financial provision for the functioning of coordination mechanism of TB response and the mechanism of progress review towards TB-related targets at the local level.</li> </ul>	<ul> <li>Official letters.</li> <li>Meetings with broad stakeholder participation.</li> <li>Personal meetings</li> <li>Printed / electronic informational materials.</li> <li>International partner involvement.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
	coordination and review mechanism of TB response.	Support launch of the TB response coordination mechanism and the mechanism of progress review towards TGB-related targets at the local level (in accordance with the recommendations of the materials on MAF-TB country adaptation and implementation).	The hierarchy of power.
International organizations /technical assistance agencies	The support of the National multisectoral TB response coordination mechanism and high-level mechanism of progress review is a significant set towards reaching the global goals in ending TB.  MAF-TB, designated to ensure that the UN member states implement their commitments to end TB into practice through specific actions, is the basis for fulfillment of the countries' political obligations on TB. Therefore, supporting establishment / strengthening of the National multisectoral TB response coordination and review mechanism with international partner involvement play an important role in joint achievement of the global goals to end TB.	<ul> <li>Support establishment / strengthening of the National multisectoral mechanism of TB response coordination and high-level review of progress towards the national TB-related targets and provide the country the necessary assistance.</li> <li>Participate in the National multisectoral mechanism of TB response coordination and high-level review of progress towards national TB-related targets.</li> <li>Promote broad participation of the national stakeholders in the National multisectoral mechanisms of TB response coordination and high-level review of progress towards national TB-related targets.</li> </ul>	<ul> <li>Official letters.</li> <li>Meetings with broad stakeholder participation.</li> <li>Personal meetings.</li> <li>Other international partner involvement, e.g. to discuss MAF-TB theme at international events.</li> <li>Printed / electronic informational materials.</li> </ul>
Coalitions of civil society organizations and communities affected by TB	Civil society organizations and communities affected by TB, play an important role in establishment / strengthening of the National multisectoral TB response coordination and review mechanism.  Meaningful engagement of CSOs and communities affected by TB, in MAF-TB initiation and conducting Baseline Assessment paved the way for the launch of the National multisectoral mechanism of TB response coordination and high-level review of progress towards national TB-related targets.  The civil society and communities affected by TB should continue actively supporting multisectoral approach implementation and engage in it to accelerate progress to end TB.	<ul> <li>Call upon (including collective address on behalf of the civil society and affected communities) the Ministry of Health (NTP, CCM) / the Government to establish and/or strengthen the National multisectoral mechanism of TB response coordination and high-level review of progress towards the national TB-related targets.</li> <li>Call upon (including collective address on behalf of the civil society and affected communities) the Head of State / Head of Government to lead the multisectoral mechanism of high-level review of progress towards the national TB-related targets and ensure its annual holding.</li> <li>Call upon (including collective address on behalf of the civil society and affected communities) non-core (non-medical) public authorities / Government to ensure representation of non-core ministries and institutions in</li> </ul>	<ul> <li>Working meetings and other thematic events.</li> <li>Personal meetings.</li> <li>Training events.</li> <li>Newsletters, publications in social networks and other online tools.</li> <li>Official letters.</li> <li>Printed / electronic. informational and advocacy materials.</li> </ul>

Target audience	Key message for the target audience	Call to action for the target audience	Channels of communication with the target audience
		the National multisectoral mechanism of TB response coordination and high-level review of progress towards the national TB-related targets.  Participate in the National multisectoral mechanism of TB response coordination and high-level review of progress towards the national TB-related targets and support its work.	

#### CONCLUSION

This Guide prepared by TB Europe Coalition in coordination with the WHO Regional Office for Europe and financial support of STOP TB Partnership and the European Union, will be useful for civil society organizations, communities affected by TB and other stakeholders engaged in MAF-TB initiation and launch at the country (local) level.

This document is designated for shaping communication and communicating with decision-makers and other key stakeholders in the EECA countries at each stage of MAF-TB initiation and launch.

This Guide contains comprehensive information for CSOs and communities affected by TB, about the basic elements of the communication process (communication goals, key messages, calls to action, communication channels) and relevant practical recommendations on their choice, optimal use and content in context of MAF-TB initiation and launch for each key target audience from among decision-makers and the stakeholders of the national TB response.

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