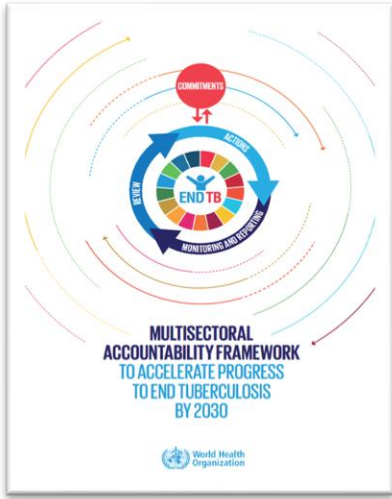


Monitoring regional committee resolutions: **addressing challenges in implementing long-standing resolutions**

Dr Nevin Wilson

Department of Health Promotion, Disease Prevention and Control
WHO Regional Office for the Eastern Mediterranean

What is the Multisectoral Accountability Framework for Tuberculosis (MAF-TB)?

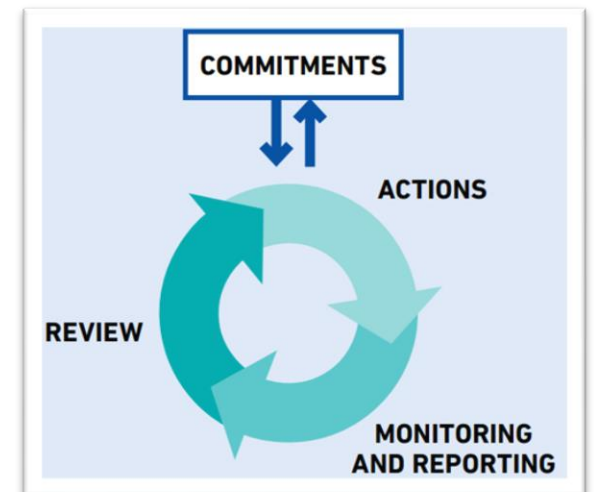


Overview

- Developed by WHO to accelerate ending TB by 2030 aligning with global goals.
- Promotes multisectoral collaboration and accountability.
- Supports monitoring, reporting and review of TB-related actions by national leadership.

Essential components

- Commitments: political declarations, strategic plans.
- Actions: multisectoral coordination, civil society engagement.
- Monitoring and reporting: data systems, national reports, integrated disease surveillance.
- Review: evaluation mechanisms, stakeholder feedback and periodic assessments.



MAF-TB planning in the Region: Status

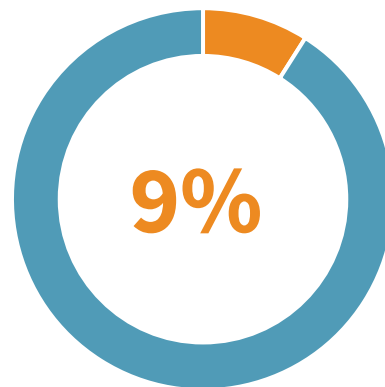


Baseline and follow-up survey

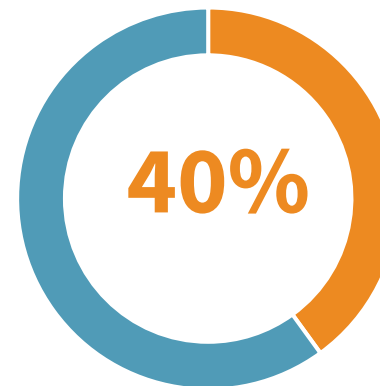
conducted in
2021 and 2023



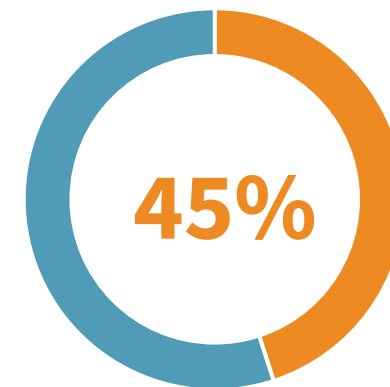
11/22 (50%) countries
participated in both
surveys



**2 countries with
MAF-TB plans**



**9 countries with
MAF-TB plans**



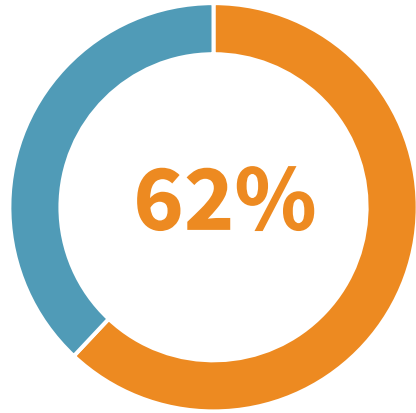
**10 countries with
MAF-TB plans**



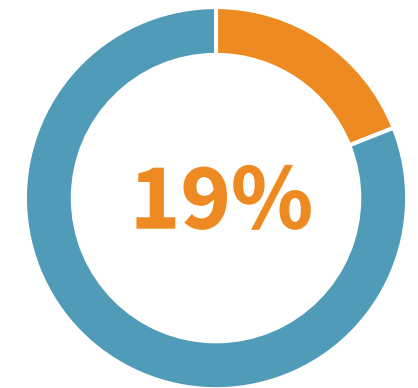
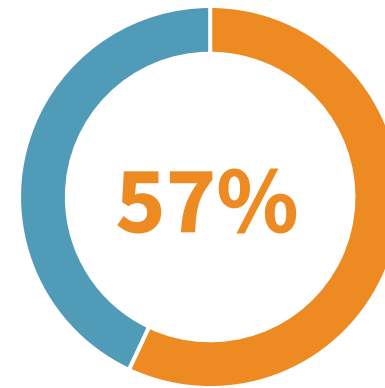
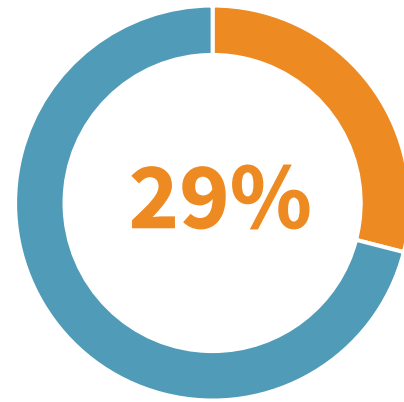
Progress report published in 2024

Implementation of core components of MAF-TB: Status

MAF-TB review mechanism
under high-level leadership
in **13 countries**



Publicly-available annual
national TB programme progress
reports in **12 countries**



Participation of civil society
and TB-affected communities
in MAF-TB review mechanism
in **6 countries**

All 3 core components of
MAF-TB in **4 countries**

Challenges to progress in implementing resolution EM/RC65/R.1



Delayed
operationalization of
resolution (13)



Systematic monitoring by high-level
leadership and stakeholder feedback
remains limited



Participation of communities
remains weak constraining
national efforts



TB remains low in domestic
priorities and continues to be
reliant on external funding

WHO End TB Strategy (2016–2035): Status

Indicators	2020 Milestone	2025 Milestone	Eastern Mediterranean Region status (2023)
1. Reduction in TB incidence rate compared with 2015 (%)	20%	50%	3.4%
2. Reduction in number of TB deaths compared with 2015 (%)	35%	75%	7%
3. % of TB patients and their households facing catastrophic costs due to TB	Zero	Zero	49%*

*Modelled aggregate

Fully implementing **EM/RC65/R.1** will accelerate ending TB in the Eastern Mediterranean Region



World Health
Organization

Eastern Mediterranean Region



Together for a
healthier future
Action. Access. Equity.

RC72



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Action. Access. Equity.

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Monitoring Regional Committee resolutions: Addressing challenges in implementing long standing resolutions

Dr Hamid Ravaghi

Regional Advisor

Hospital Care Management

Department of Universal Health Coverage/Health Systems

WHO Regional Office for the Eastern Mediterranean

Regional framework for action for the hospital sector

Resolution EM/RC66/R.4

The resolution urged Member States to
develop and implement national
hospital sector strategies using the
regional framework for action



Resolution: EM/RC66/R.4 (October 2019)

Progress timeline



Seven countries **adopted selected strategic interventions** from the regional framework as entry points/quick wins, rather than fully implementing the resolution

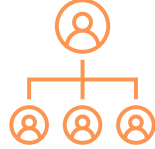
Health system maturity levels

Improvement → Reform → Transformation

Enablers of implementation



Strong **political commitment** and linkage to universal health coverage



Designated **Ministry of Health lead** with clear responsibilities



Strategic policy dialogue and **advocacy** facilitated by WHO



Effective **stakeholder engagement**



Local ownership of resolution follow-up



Regular **review** and **monitoring** mechanisms organized by WHO



Knowledge sharing and cross-country exchange



WHO **technical support** and expert missions

Challenges for implementation



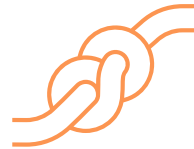
Governance and
political context



Resources and
capacity



Implementation
and adaptation



External and
contextual challenges



WHO-related
matters

Lessons learnt



Political will is paramount and backed by institutional action



Capacity-building fosters ownership



Vague or overambitious resolutions risk inaction



Integration with **broader reforms** creates sustainability



Partnerships and peer learning multiply impact



Resource gaps create barriers



Accountability drives implementation



Monitoring and learning sustain adaptation and progress



Weak **coordination** causes fragmentation



External shocks disrupt progress

Hospitals at the heart of resilient, primary health care-oriented and people-centred health systems



Eastern Mediterranean Region



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