

# **NCD Alliance Independent Review**

## Stakeholder Report

Produced by Global Health Visions (GHV)  
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## TABLE OF CONTENTS

Executive Summary.....	3
I. Introduction.....	6
II. Looking Back: Delivery of the Strategic Plan.....	9
III. Looking Forward: Defining the Alliance’s Role for 2016 and Beyond .....	15
IV. Strategic Recommendations .....	20
V. Annexes	
A. SWOT Analysis .....	27
B. Key Informant Interviews .....	29
C. Survey Results .....	31

## EXECUTIVE SUMMARY

With the global Non-Communicable Disease (NCD) architecture in place and the Sustainable Development Goals (SDGs) on the eve of being solidified, this is a moment full of promise for the NCD community to translate hard-won gains into improvements in the lives and health of those most effected by NCDs. Progress in advancing the NCD agenda will require sustained global momentum, together with expanded efforts and resources at the country level. As we enter this new era, the NCD community has an important opportunity to shape a strategic and collaborative approach to achieving our global goals by 2025, with the ultimate aim of making attention to NCDs commonplace in all countries.

Within this emerging landscape, the NCD Alliance's 2012-2015 Strategic Plan is drawing to a close, making this a critical moment for the Alliance to reflect on its greatest achievements and challenges, and thoughtfully evaluate how to best ensure its relevance, sustainability and potential for impact going forward. This independent review of the Alliance's performance, as well as its governance and organizational arrangements, aims to inform strategic next steps and to ensure its governance is cohesive and fit for purpose to effectively achieve its aspirations.

### Looking Back: 2012-2015

In taking stock of how successfully the Alliance delivered on the current strategic plan, our review revealed that its global advocacy work is seen as its most valuable contribution to date. In particular, its involvement in the development of the Global Monitoring Framework (GMF), the WHO Global NCD Action Plan (GAP) and the Global Coordinating Mechanism (GCM), and its instrumental role in ensuring the inclusion of NCDs in the post-2015 development agenda are seen as key achievements.

While there are clear opportunities to strengthen its global advocacy going forward, it is important to acknowledge these tremendously valuable and substantial achievements of the Alliance. As a result of this work, the Alliance has positioned itself as a valued thought partner at the UN level and is widely viewed as the global voice of civil society on NCDs, which will serve as a springboard for its future work.

The Alliance has demonstrated significantly less traction at the national and regional levels. While the dissemination of information, tools and resources has helped to bridge a gap between the global arena and regional and national stakeholders, the Alliance is not seen to have been highly influential beyond the global level to date. This review revealed that many see a clear need for the Alliance to expand its role in mobilizing national action in the next phase of work.

Lastly, this report examines progress on building the Alliance over the last three years, including a review of its current governance processes and structures, and analysis on what has worked well and key areas that could potentially be evolved. While the review identified that the Alliance's leadership and core team are key assets to its work, as was the recent step to expand its governance membership, significant concerns were identified in relation to governance and fundraising for the Alliance that will be critical to address.

## Looking Ahead: 2016-2018

### Maintaining a Strong and Sustainable Alliance

As the Alliance continues to mature and seeks to effectively respond to emerging needs—both within the global architecture and on the ground—there may be a need to evolve aspects of the current structure and governance. Overall, in order to safeguard the reputation of the Alliance and to maintain cohesion, there is a clear need for increased transparency—internally and with external stakeholders—particularly on the distinct roles and responsibilities of each governance structure, as well as decision-making powers and processes. We have identified several key decision points that warrant deliberate, measured discussion and consensus.

### Planning for 2016-2018

The Alliance is in the process of thoughtfully developing a roadmap for its next strategic plan. Building on its strengths and proven successes, the most important priorities for the Alliance to focus on in the next phase include **advocacy, accountability, capacity building and information dissemination**. Key opportunities for leveraging these roles at the global, regional, and national levels (outlined in further detail in the “Strategic Recommendations” section of this report) include:

1. **Advocacy:** At the global level, the Alliance is poised to reinvigorate global momentum and sustain a focus on NCDs. While it will be crucial for the Alliance to keep up the drumbeat leading up the finalization of the SDGs, it will be equally important to maintain and expand on the momentum as adoption and implementation of the SDGs takes off. Identifying key moments and messages to rally around beyond September will be critical for encouraging and preserving the prioritization of NCDs. For the Alliance to maintain its relevance, it will be essential for its advocacy work to include new efforts to make the case for financing and action on NCDs at the global, regional and national levels. It will be equally important to highlight the linkages, co-benefits and opportunities for integration with other health agendas (i.e. nutrition) and non-health agendas (i.e. climate change).
2. **Accountability:** One of the greatest challenges on the horizon for the NCD community will be to monitor progress toward global plans and targets and hold both national governments and global stakeholders accountable for their commitments. The Alliance has an important role to play in providing an independent voice at the global level to pressure multilaterals to fulfill their commitments for advancing the global frameworks, as well as working with organizations at the national level to hold national governments to task.
3. **Capacity building for civil society:** At the national and regional levels, there will likely be a considerable appetite for capacity building support among civil society to design, finance and implement national NCD plans and programs. As the Alliance seeks to leverage its strengths and maximize the impact of its investments, it will be prudent to be selective in where and how it invests at the country level. In determining next steps, the Alliance is urged to consider whether or not national action is critical to fulfilling its long-term vision, and to define realistically what success would look like and what the Alliance’s resources can bear, without diluting its broader efforts. One of our key recommendations is for the Alliance to respond to the extensive capacity building needs at the country level by

identifying opportunities for selective support to NCD alliances in priority countries and regions.

4. Information dissemination: One of the Alliance's greatest strengths is its ability to share information with partners around the world, linking global efforts with regional and national stakeholders. The Alliance should continue to utilize opportunities to expand its reach; to strengthen South-to-South communication and lesson sharing; and to develop case studies of countries that are effectively developing, financing and implementing national NCD plans and of national and regional NCD alliances that are successfully advocating to ensure this progress.

The NCD Alliance has established itself as a central and valuable contributor to global, regional and national efforts to tackle the growing NCD burden. Going forward, the Alliance is poised to build on its substantial contributions at the global level and to expand its efforts and impact at the regional and national levels. Maintaining a strong and cohesive Alliance, despite any transitions on the horizon, will be critical to ensuring its potential for impact is fully realized.

## I. INTRODUCTION

Global Health Visions (GHV) was commissioned to conduct an independent review of the NCD Alliance’s efforts to achieve its aims and objectives as set out in the strategic plan 2012-2015, and to provide recommendations on future strategic priorities and organizational arrangements to inform the Alliance’s strategic planning process for 2016-2018. On the GHV team, Aubrey Cody and Susan Fox conducted the independent review and authored both the Steering Group and Stakeholder reports. Additionally, Susannah Hurd facilitated portions of the NCD Alliance strategic planning retreat.

The GHV team produced two versions of the final report.

- **Steering Group Report:** The Steering Group report includes a comprehensive, in-depth review and analysis of the Alliance’s governance and organizational arrangements and specific recommendations for issues to address internally and opportunities to strengthen the Alliance’s current team and governance—both the structures and processes that guide how the Alliance functions—to ensure they remain fit for purpose and the Alliance successfully achieves its objectives.
- **Stakeholder Report:** The Stakeholder report is an abbreviated version of the final report, aimed at the Alliance’s broader constituency and thus does not include the detailed findings and recommendations specific to the governance of the Alliance.

### Methodology

GHV’s review included the following components:

1. **Desk research:** GHV completed a thorough review of key NCD Alliance documents and relevant reports and resources from the broader NCD community.
2. **Online survey:** An electronic survey was sent to the NCD Alliance network via e-alert, the NCD Alliance Campaigns Group, the NCD Alliance focal points for regional and national NCD alliances, NCD Roundtable members, and was promoted by the federations to their member associations. The survey was made available between April 23<sup>rd</sup> and May 28<sup>th</sup>, 2015. In total, 91 survey responses were included in the analysis. Annex C provides a breakdown of survey questions and responses.
3. **Key informant interviews:** In March and April of 2015, 47 in-depth, confidential interviews were conducted by phone with key informants, selected by the Executive Director of the Alliance, including:

Key Informants <sup>1</sup>	
Steering Group (SG)	7
President Oversight Committee (POC)	7
NCD Alliance Core Team	3

<sup>1</sup> A full list of interviewees can be found in Annex B.

Supporters Consultation Group (SCG)	10
Expert Advisory Council (EAC)	6
National and Regional Representatives	3
Global Stakeholders	11
<b>TOTAL</b>	<b>47</b>

4. NCD Alliance strategic planning retreat: The Alliance strategic planning retreat (referred to as the “retreat”) was held in Geneva on May 15-16<sup>th</sup>, 2015 and was primarily attended by the NCD Alliance Steering Group and Expert Advisory Council. This was an opportunity to gain additional insight on both the delivery of the current strategic plan and future strategic directions. GHV produced a high-level findings report for this retreat and facilitated several sessions; participants provided feedback on the interim report and the discussions further informed our findings and recommendations. Additionally, three Alliance task teams - Global Advocacy, Organizational Development and National Action – provided analysis and recommendations on these key issues; their summary reports were circulated in advance of the retreat and were presented for discussion there. Key concepts, ideas and recommendations from the retreat have been incorporated in this final report.

## Limitations

Key limitations of this report include:

- Regional/national level input: Only three of the 47 interviewees were national or regional stakeholders. Therefore, the national and regional perspectives captured in this report are limited. Apart from the survey results, this report largely provides insights from individuals operating at the global level. The NCD Alliance plans to further examine national and regional NCD alliance needs via a comprehensive situational analysis, but as this situational analysis will be conducted in June (in parallel to GHV’s review), the results are not incorporated in this report.
- Number of survey respondents: Despite several reminders and individualized follow-up by the Alliance, there were only 115 survey responses – 91 of which were utilized in the analysis (the results from 24 respondents were not included because they only answered the questions on demographic and background information). Further, only 83 respondents completed the entire survey (28% of respondents skipped the section on “Looking Ahead”). As the Alliance network consists of more than 2,000 organizations, the small number of survey respondents limits the weight of the results and makes it challenging to draw broad conclusions from the findings.
- Strategic recommendations: Several fundamental, high-level questions were raised throughout the review process (i.e. the identity of the Alliance, potential evolution of governance structures etc.). These unresolved issues are central to the future direction of the Alliance. Given that these outstanding issues will require further discussion by the Steering Group—and perhaps further external analysis to help inform decisions—the “Strategic Recommendations” section of this report includes key decision points requiring consensus as well as recommended priorities for the next strategic phase. As noted above,

the strategic recommendations relevant to the internal governance of the Alliance are expanded on in the Steering Group report.



## II. LOOKING BACK: DELIVERY OF THE STRATEGIC PLAN

As outlined in the 2012-2015 Strategic Plan, the Alliance's goal to *put NCDs at the heart of national health and development planning, in the mainstream of the post-2015 development framework, and to increase resource mobilization at all levels*, has been addressed through four key strategies: supporting global action; supporting national action; building the demand; and building the Alliance. Our review aimed to capture a broad range of perspectives on the overall performance, most notable achievements and key challenges under each of the four pillars in the last three years. Key findings in these areas are outlined below.

### 1. Supporting Global Action

The NCD Alliance's efforts and achievements at the global level are widely perceived as being tremendously effective, successful and substantial, particularly given the Alliance's short history.

#### Strengths and Key Contributions

The Alliance's global advocacy work is seen as its most valuable contribution to date. It is viewed as being instrumental in positioning NCDs in the global agenda and shaping global thought on NCDs, particularly its involvement in the development of the Global Monitoring Framework (GMF), WHO Global NCD Action Plan (GAP) and the Global Coordinating Mechanism (GCM), and its influential role in ensuring the inclusion of NCDs in the post-2015 development agenda.

The Alliance is seen as an established thought partner at the UN level and as the global voice of civil society on NCDs. There is broad consensus that the Alliance has filled critical gaps in the global architecture by serving as an effective and neutral convener across diseases and scattered agendas as well as gathering and disseminating valuable tools and resources. Many of the efforts the Alliance has taken on are seen as roles that should have been carried out by the World Health Organization (WHO), but would have been unfulfilled had the Alliance not stepped in.

The NCD Alliance's success in influencing UN level discussions and processes is credited to a variety of factors, primarily its abilities: to mobilize a broad range partners under unified advocacy positions; to effectively solicit diverse input from a network of technical experts; and to continually inform and engage the Alliance network and partners in these processes. Policy briefs, weekly e-alerts and webinars were noted as examples of particularly valuable resources that have helped partners and network members at both global and national levels keep their fingers on the pulse of dialogues and decisions.

The majority of interviewees credited the Alliance for working collaboratively with key global stakeholders, particularly the WHO, on establishing the global targets. As a result of this relationship, several interviewees noted that the WHO now comes to the Alliance for technical support and input on civil society.

## Weaknesses and Missed Opportunities

While the majority of feedback on the Alliance's performance at the global level was very positive, interviewees flagged a number of weaknesses and missed opportunities, including:

- Partnerships beyond the UN: While the WHO relationship is viewed as being critical to the success of the Alliance to date, several interviewees emphasized the need to now expand the Alliance's portfolio of partnerships. The complexities of the Alliance's relationship with the WHO, and opportunities to engage with a broader range of stakeholders, is expanded on in the "Looking Ahead" section of the report.
- Linkages with key stakeholders: The Alliance is widely perceived as being weak at creating linkages and communicating co-benefits with stakeholders from other health agendas (i.e. RMNCH, nutrition, HIV/AIDS) and ineffective at bridging NCDs with broader development agendas that do not classically fall under the health domain (i.e. climate change, food security).
- Consultation of country level stakeholders: A number of interviewees noted that there was insufficient consultation of country level stakeholders and organizations feeding into the Alliance's global advocacy positions. Interviewees recommended implementing a more effective "*bottom-up*" process for consulting with country level civil society going forward. As one global stakeholder noted, "*Perspectives from the South are a critical gap both in the NCD community overall and in the NCD Alliance.*"
- Resource mobilization: Although advocacy for increased investment in NCDs from bilateral aid agencies is a key component of this pillar, interviewees and survey respondents identified a lack of progress in this area. However, several interviewees noted that this might not have been a feasible goal while funding is still largely focused on achieving the Millennium Development Goals (MDGs).
- Making the economic case: A number of interviewees indicated that the Alliance should more effectively articulate the economic impact of NCDs on countries (i.e. the cost of inaction) as well as costing what resources would be required to effectively address the NCD burden at scale in low- and middle-income countries (LMICs).
- Timeliness of input solicitation: While many interviewees expressed appreciation for the opportunity to provide input into the Alliance's positions on key issues, they also noted that they are frequently given very little notice or turn-around time to respond to a request, which limits the amount and quality of feedback they can provide and has occasionally resulted in missed opportunities to weigh in on key issues.
- Measuring impact: While the Alliance has clearly played a central role in global advocacy on NCDs, without a system or metrics in place to evaluate these efforts, it is not possible to measure impact. Further, several interviewees noted the need for the Alliance to disaggregate the achievements of the Alliance itself from those of its federation partners.

## 2. Supporting National Action

The Alliance's role in gathering and disseminating information on global discussions and processes through key resources and tools (i.e. webinars, policy briefs) to help inform national stakeholders of global discussions and processes was repeatedly highlighted as the Alliance's most valuable contribution under this pillar.

### Strengths and Key Contributions

- **Advocacy tools:** Many interviewees identified the benchmarking tool and advocacy toolkit as valuable resources. However, survey respondents did not rank these tools as a particular strength of the Alliance. As noted above, the use and impact of these tools has yet to be determined, as there is currently no system for monitoring and evaluation. Going forward, systematic evaluation of these tools would be valuable for the Alliance to determine how they are used and what adjustments should be made to increase their impact and use.
- **NCD Café:** A number of interviewees highlighted the NCD Café—featured at the 2014 World Cancer Congress—as one of the Alliance's most effective advocacy activities supporting national action, and recommended that the Alliance identify strategic opportunities and events to expand on this model.
- **In-country programs:** The Alliance's in-country programs in Brazil, South Africa and the Caribbean were broadly spoken about as a positive first step at providing increased support at the regional and national levels. However, the majority of interviewees were not aware of program plans, details or anticipated impact of this work. Interviewees repeatedly questioned whether the Alliance is well suited for this role going forward.

### Weaknesses and Missed Opportunities

Overall, there is a fairly wide perception that the Alliance has not been highly visible or influential at the national level and has yet to play a significant role in nurturing regional and national alliances. A number of interviewees, both internal and external, noted that the Alliance's efforts at the global level have not translated into national level change. While there have been gains at the national level, interviewees pointed out that this progress occurred "*organically*," independent of the Alliance. While the Alliance's perceived under-performance in this area was attributed to a variety of reasons, the common theme was that the Alliance is not sufficiently resourced to be effective at the national level.

Most regional and national NCD alliance survey respondents said the most valuable support they have received from the Alliance has been the dissemination of knowledge and information. However, it was also noted that the Alliance resources (i.e. webinar presentations) would be more widely utilized if they were translated into additional languages and if the wording was more accessible to the masses (i.e. less UN language).

Finally, the Alliance is not perceived to have effectively stimulated research or investment in national policies and plans, one of the key objectives under this pillar. However, a number of interviewees noted that the potential for progress in this area is limited until after 2015, as the majority of overseas development funds remain embedded in the MDGs.

### 3. Building the Demand

This pillar is widely viewed as having the least traction under the current strategic plan. The Alliance’s annual reports highlight progress on brokering knowledge, shifting attitudes and catalyzing debate. Interview and survey respondents identified the Alliance’s policy briefs, e-alerts, webinars and website as being particularly valuable at national and regional levels. Yet, there appears to be real ambivalence about the inclusion of this pillar among the Alliance’s strategic priorities, and whether or not this was even a realistic strategy for the Alliance given the limited ground presence and nascent relationships with regional and national NCD alliances.

#### Weaknesses and Missed Opportunities

The engagement of people living with NCDs was identified as the most significant unmet objective by many interviewees. A number of interviewees noted the absence of representing *“the voice of people living with NCDs”* and recommended that the Alliance draw on how the women’s health and HIV communities have effectively brought a face to their issues in compelling ways.

### 4. Building the Alliance

Overall, this pillar of the strategy generated the most discussion in interviews and at the Geneva retreat. While the Alliance has taken concrete steps toward maturing, expanding and strengthening over the last three years, the most significant threats to the Alliance’s future—identified internally and externally—are also concentrated in this area. The key lesson that emerged from this review is the critical and urgent need to take stock of the challenges and lessons from the last several years related to organizational structure and sustainability, to deliberately address threats to the Alliance, and determine and explicitly communicate a clear path forward.

#### Strengths and Key Contributions

- Leadership and NCD Alliance team: The Alliance’s leadership and team were overwhelmingly seen as key assets to the Alliance. There was widespread consensus among interviewees that the management and leadership of the Alliance have been increasingly effective and professional over the last several years. Cary Adams, Chair of the Alliance, and Katie Dain, Executive Director, are both credited by many as being highly effective in their respective roles. While a few interviewees noted that Cary Adams has a *“closed door”* management style, the majority of interviewees praised Cary for doing a *“remarkable job”* in providing strategic guidance and direction for the Alliance. As one interviewee noted, *“Cary is the only person who could have pulled this all together.”*

Katie Dain is widely viewed as a highly productive and capable Executive Director and her team is given a great deal of credit for working very efficiently, particularly given its size. Both internally and externally, there was a clear consensus that what Katie and the core team have achieved has been extremely impressive. Given the team’s responsiveness and level of activities and communications, they appear far larger than just six people, spread across four countries. As one interviewee said, the team *“punches above their weight limit.”*

- Expansion of governance membership: The recent expansion of the Steering Group (SG) to include three new NGO partners is widely, though not unanimously, viewed as a necessary and highly valuable evolution of the Alliance. This development, deemed overdue by some, has gone far to increase the perception that the Alliance is inclusive and taking a more comprehensive approach to achieving its mission. Overall, the move to expand beyond the founding four federations was broadly perceived as a critical step toward building a strong and sustainable Alliance.

## **Weaknesses and Key Missed Opportunities**

### ***Governance***

Across external and internal stakeholder groups, interviewees raised several concerns regarding the governance of the Alliance over the last three years, including:

- Transparency: The lack of transparency around decision-making processes is widely identified as one of the greatest weaknesses and threats to the reputation and internal cohesion of the Alliance. A global stakeholder said that going forward, ensuring decision-making is more democratic and transparent *“is absolutely critical to keep the respect and enthusiasm of people on the outside.”*
- Clarity on new members: There is a lack of clarity, even among high levels of the Alliance, on whether the three new members of the SG are permanent and if they are equal members with equal voting rights. At the retreat, SG members clarified that the Alliance’s guiding MOU answers these questions: there is an explicit distinction between the founding four federations and the three new members in terms of voting, and an implicit indication that the governance is subject to change at the end of the two-year MOU. This issue will need to be clearly addressed and widely communicated in the near-term.
- Governance structure: The sheer number of groups – Steering Group (SG), Presidential Oversight Committee (POC), Supporters Consultation Group (SCG), Expert Advisory Council (EAC) – and their distinct roles and responsibilities, and processes for influencing and ultimately making decisions, are not widely understood. Further, a number of interviewees described the Alliance as *“over-governed”* and indicated that there are too many structures in place for it to run optimally. The relevance, value and distinct functions of the current structures have been assessed in the internal final report.

### ***Fundraising for the Alliance***

- Absence of a fundraising strategy: The absence of a robust plan for fundraising for the Alliance was frequently identified as a threat to its sustainability. Going forward, the development of a comprehensive fundraising strategy will be critical for the Alliance to secure its financial future.

- Capacity of the Alliance: Not only did interviewees cite concerns that the Alliance does not have a long-term vision for funding, they raised specific concerns about its capacity for fundraising, including: the absence of an experienced and dedicated fundraiser on the Alliance's core team; limitations in funding options without becoming a legal entity; and the threat that an increasingly constrained funding environment could erode cohesion between Alliance members.
- Private sector funding: While some interviewees see the involvement of the private sector within the Alliance's structure as an asset to its work and a model for public-private collaboration, others were less certain on both the added value and the role and influence of donors within the organization. Specifically, there were concerns about the acceptance of funding from certain sources in the private sector (i.e. pharmaceutical industry) and the implications of this both 1) for the reputation of the Alliance 2) on internal solidarity of the federations and 3) on limiting the potential of certain organizations to work collaboratively with the Alliance (i.e. limitations on the Alliance's relationship with the WHO).

Suggestions for the Alliance to address private sector funding concerns include:

- Develop and communicate a unified position on private sector funding, including a stronger and more visible conflict of interest policy, in order to increase transparency and consistency across federations.
- Define a process for identifying and managing conflicts of interest when they arise.
- Develop a clear, forward-thinking strategy on fundraising that aims to diversify funding sources and reduce reliance on the private sector (particularly pharma).

### III. LOOKING FORWARD: DEFINING THE ALLIANCE'S ROLE FOR 2016 AND BEYOND

Discussions on the next strategic phase (2016-2018) yielded a range of perspectives and recommendations on the most valuable roles for the Alliance going forward. In determining next steps, it is important to note that one of the greatest concerns raised by interviewees is for the Alliance to remain focused and be selective about its next strategic priorities. It is widely understood that the impact and success of the Alliance will be diluted if the organization is unfocused or tries to take on more than the structure can bear or resources enable it to successfully achieve.

Strategic priorities for 2016-2018, as identified by interviewees, survey respondents and retreat participants fall within the following five areas:

#### 1. Supporting National and Regional Action

With the global NCD architecture in place and the SDGs soon to be solidified, there was broad consensus among interviewees that the focus of the global development community will expand to include a larger focus on country level implementation and accountability. Most interviewees and retreat participants agreed that broadening the Alliance's work in support of national level progress is a necessary next step in advancing the global NCD agenda.

While it is clear that considerable support will be needed in order for country level efforts to be successful, there is not a unified vision on how and to what degree the NCD Alliance should play a role. Several interviewees expressed strong concern that the Alliance is not sufficiently resourced for regional or national work, and that a shift in this direction would require extensive investment and would potentially weaken its core global advocacy role. As one interviewee noted, *"diverting resources to strengthen country work could end up being the worst of both possibilities."*

However, the majority of interviewees see proactively positioning the Alliance to support the mobilization of national action as an urgent priority. A number of interviewees noted the importance of the Alliance playing a role in ensuring NCDs stay on the agenda of LMICs; this is seen as a *"golden opportunity"* to ensure the Global NCD Action Plan (GAP) is successful.

The majority view is that regional and national level work does not need to be at the expense of ongoing efforts at the global level. Rather, there is an opportunity for the Alliance to have an impact at both levels and for these efforts to be complimentary, enabling the Alliance to respond to critical needs on the ground; better inform and strengthen its global advocacy; open up new funding opportunities; and ensure the Alliance's continued relevance going forward. In order to do this effectively, and within the limits of the Alliance's capacity, respondents underscored the importance of working through existing local structures and champions and to leverage their expertise. Where possible, the federation's national level membership and partners should be leveraged as well.

Further, interviewees emphasized that country level work should not be approached as *"one-size-fits-all."* Engagement should be customized based on the needs of the country and efforts

already underway by national level federations and other network members. In terms of what the Alliance's priorities should be at the national level in the next phase, interviewees presented a variety of perspectives.

### Priority Areas of Focus

This review identified several areas for the Alliance to prioritize at the regional and national level, specifically:

- **Support to regional and national NCD alliances:** Many interviewees agreed that the Alliance should play a central role in supporting the growing network of regional and national NCD alliances under the next strategic plan. There is a clear demand from the local alliances themselves for the Alliance to support, coordinate, and build capacity. However, there are varying opinions on the appropriate strategy, role and extent of engagement. Going forward, key roles for regional and national NCD alliances will likely include advocacy and promoting national accountability. It will be important for the Alliance to consider the best approaches for supporting and capacitating emerging NCD alliances to be effective, particularly in these areas. One global stakeholder emphasized the importance of the Alliance *“positioning itself as a technical support mechanism and knowledge base for local alliances.”*

One opportunity identified for the Alliance to strengthen its support of regional and national alliances is to develop a formal affiliation scheme with criteria and benefits. On the other hand, a recognized challenge to this approach is that it will require significant investment and attention as capacities and needs vary greatly from region to region, and country to country. Ultimately, should the Alliance's regional and national level success be too dependent on the performance of local partners, this could pose a risk to the reputation of the Alliance, particularly in instances where these partners prove ineffective.

- **Support the development of national plans:** In order to reach the 2025 targets, many national governments are likely to need a push to move forward on their global commitments and support in the development of national NCD plans and targets. A number of interviewees suggested that the Alliance is well positioned to play a role in addressing these needs, particularly in capacitating civil society to advocate for the integration of NCDs into national plans (thereby helping to unlock bilateral development aid) and for national financing for these plans in LMICs. It was noted that the Alliance should be poised to respond to a *“huge appetite for Alliance support”* in these areas.
- **Provide seed funding for regional and national advocacy and accountability efforts:** Two of the key barriers to civil society advocacy and accountability on NCDs are the lack of capacity in LMICs and the lack of sustainable funding. A number of interviewees and retreat participants suggested that the Alliance should establish and administer a civil society fund to enable regional and country level partners to advance their advocacy goals and hold governments accountable to NCD commitments and targets. However, it was highlighted that if this was a future priority for the Alliance, its own capacity would need to be assessed and potentially expanded to effectively administer such a mechanism.



## 2. Maintaining Global Momentum

While mobilizing national action is a clear priority in the next phase, interviewees also highlighted the importance of the Alliance preserving its role as a global leader on NCDs and maintaining momentum at the global level. It will be critical to keep NCD prevention and treatment front and center after the SDGs have been launched to safeguard recent gains and take care of “*unfinished business.*”

### Priority Areas of Focus

In the near term, it will be particularly important to maintain strong involvement in the solidification of the post-2015 indicators to ensure the positioning of NCDs. Other short-term priorities could include advocacy on implementation of the GAP, and the development of a midterm progress report ahead of the 2018 review. Several interviewees suggested the importance of identifying or developing a number of key “*rallying moments*” between 2015-2025 to keep energy up and attention focused on NCDs.

A significant number of interviewees stressed the need to adapt the focus of the Alliance’s messaging and communications going forward and to frame NCDs as equity and social justice issues. As one interviewee noted, “*people have ears for this narrative right now.*” Several interviewees also emphasized that the Alliance should be at the forefront of global discussions on prevention and risk factors and on addressing the intersections of infectious and chronic conditions, as well as positioning NCDs within other non-health focused movements (i.e. the G7+, G20).

## 3. Mobilizing Resources for NCDs

While the UN has signaled that NCDs are a priority, funding streams have yet to reflect this. One of the key priorities for the Alliance, identified by interviewees and survey respondents, is expanding its role in advocating for resource mobilization for NCDs at global, regional and national levels. As financing for NCDs remains one of the greatest challenges, a number of interviewees suggested that the Alliance consider reinventing itself to operate as a Global Fund for NCDs and focus primarily on resource mobilization. However, this was not the majority view; most agreed that the Alliance’s role should be advocating for resource mobilization at the global level or building the capacity of regional and national partners to advocate effectively for national funding allocation.

### Priority Areas of Focus

A common theme that emerged during interviews was that the Alliance should approach resource mobilization through the angle of universal health coverage (UHC). Several interviewees identified UHC as a mechanism for addressing NCDs alongside broader efforts to address other pressing health challenges. Positioning NCDs within an integrated approach may be more palatable for donors who are resistant to investing in new vertical programs.

It will also be increasingly important—to encourage both global and national investment in addressing NCDs—to clearly articulate the economic case, demonstrating the growing financial burden and cost of inaction, should NCDs remain a neglected issue.

#### 4. Engaging Key Stakeholders

Expanding stakeholder engagement and building key partnerships is seen as an important priority for the Alliance going forward, both with current supporters and partners as well as other stakeholders with new or untapped potential for engagement. There was fairly broad agreement among interviewees that stakeholder engagement has been more opportunistic than strategic or structured and now needs to expand beyond the “usual suspects.” However, the Alliance will need to be thoughtful in its approach to ensure its mandate and messages do not become splintered or too broad.

##### Priority Areas of Focus

- Evolving the relationship with the WHO: There was significant, varied input from interviewees on how the Alliance should engage with the WHO going forward. While there was clear consensus that maintaining a strong relationship with the WHO is critically important, there was also resounding feedback that the Alliance has to maintain an identity and agenda that is distinct from the WHO. As one interviewee noted, “*The NCD response must be way beyond the imaginations of the WHO.*”

Interviewees also articulated the conflict of the Alliance trying to simultaneously be in close partnership with the WHO, while also trying to challenge and hold it to account. A member of the SG emphasized that the Alliance is uniquely positioned to “*apply considerable leverage to get the WHO moving.*” Going forward, if the Alliance seeks to take on a “*watchdog*” role and challenge the WHO, it will likely not be possible or effective to also focus on fostering a close partnership. Further, as one interviewee noted, “*If you are viewed as the whisper in the ear of the UN, then it limits what you can do everywhere else.*”

- New partnerships and linkages: A number of interviewees emphasized that while it was essential for the Alliance to focus on advocacy at the UN level up until this point, it is now important for the Alliance to move beyond this focus, form new partnerships and engage in true multi-sectoral collaboration. One SCG interviewee said “*it is now time to turn the page and approach things from a different vantage point, through collaboration.*” The “Strategic Recommendations” section of this report highlights key opportunities to engage and create linkages with a diverse range of stakeholder groups.

#### 5. Accountability

One of the greatest challenges for the NCD community going forward, according to the majority of interviewees and retreat participants, is monitoring and surveillance and holding both national governments and global stakeholders accountable. Survey respondents also identified this as a key role and priority policy area for the Alliance going ahead. Many interviewees raised the concern that without a serious effort to monitor and report progress on 2025 targets,

governments are unlikely to take them seriously. The Alliance's Global Advocacy Task Team emphasized the importance of supporting the GAP as the platform for countries to address their NCD burdens.

### **Priority Areas of Focus**

- Advocating for accountability at the global level: At a minimum, there appears to be consensus that the Alliance should play a key role in holding multilaterals (i.e. WHO/UN) accountable for advancing global frameworks.
- Building the capacity of regional and national partners to advocate for accountability: Respondents also view the Alliance as being well positioned to support country level advocates to track progress and hold their governments accountable. One interviewee noted civil society will need the support of the Alliance to *“hold the feet of their governments to the fire to deliver on targets.”*

## IV. STRATEGIC RECOMMENDATIONS

With the new global NCD architecture in place and the inclusion of NCDs in the SDGs soon to be solidified, there is new potential for these hard-won gains to translate into renewed global momentum and country-level implementation, and ultimately, lives saved. This new era signals an important turning point, for the NCD community broadly as well as for the Alliance.

While there are numerous valuable recommendations woven throughout this report, those with the highest priority are outlined here. The first point below is an abbreviated set of recommendations and decision-points for the Alliance to address internally to ensure the Alliance is sustainable, cohesive and fit for purpose going forward. In the Steering Group report, these recommendations are expanded on in greater detail. The second set of recommendations aims to inform the next strategic phase for the Alliance, to shape priorities that will ensure its future relevance and impact.

### 1. Maintaining a Strong and Sustainable Alliance

During the independent review process and the discussions that took place during the strategic planning retreat, a number of fundamental, interconnected questions emerged for the Alliance to address internally. The answers to these questions will have a significant impact on the direction, functioning and sustainability of the Alliance going forward. We recommend addressing these key decision points in the near-term, as it will be challenging to determine priorities for the next strategic phase (2016-2018) without resolving these issues, and determining the structure and processes that will make the Alliance most fit for purpose to successfully achieve its aspirations.

#### Critical Steering Group (SG) Decision Points

- **Identity: What is the identity of the Alliance?**

A core issue, central to each of the questions included here and the strategic planning process, is determining the identity of the Alliance. It will be critical for the Steering Group to reach consensus on the Alliance's identity, answering the key questions, including: *"Is the Alliance intended to be the voice of the federations or the broader voice of civil society on NCDs?"* We view answering fundamental questions on the identity of the Alliance as the first order of business for the SG to address, as it has direct bearing on the transitions under consideration that are raised below and will serve as a foundation for the strategic planning process. There is a clear need to maintain cohesion among the core Alliance members on this issue, while also being responsive to how the Alliance will be best positioned in the NCD community going forward.

- **Governance Structure: How should the governance structure evolve?**

After an assessment of the distinct roles and responsibilities of each of the current Alliance structures, and considerable discussion on the subject both during interviews and at the retreat, it is our recommendation that the Alliance should largely maintain the existing organizational structure, with the exception of transitioning the President Oversight Committee into a governing board. It is our view that a governing board, with external

representation beyond the member organizations, is a necessary next step toward organizational maturity and sustainability, as well as a move toward increasing inclusivity, democratization and transparency.

While there are numerous potential configurations of a governing board, our key recommendations are to have an external chair and to have more diverse, external representation (on a rotating basis). The external, rotating governing board members should represent NCD thought leaders and stakeholders, with a commitment to shaping and driving the Alliance's mission and goals as well as advancing the global NCD agenda.

- **Type of Entity: Should the Alliance become a legal entity?**

Both interviewees and retreat participants discussed the merits and challenges of transforming the Alliance from an informal alliance governed by a MOU into an independent legal entity. The majority perspective was that the Alliance is due to make a "*sensitive evolution*" toward a formalized entity.

It is our view that the Alliance should ultimately transition into a legal entity, which we believe will increase its sustainability by optimally positioning it for increased funding and expanded partnerships, and establishing it as a sovereign voice. While the founding federations might continue to play a central role in decision making under this new body, we believe the eventual democratization of the governing voice could go far to maintain the credibility of the Alliance. We recommend a deliberate and strategic discussion by the SG on this issue to reach a consensus, and to determine what model and timeline would be appropriate, if this is the direction the Alliance decides to pursue.

We recommend that the SG prioritize reaching a consensus on these critical decision points with urgency, as the current MOU is set to expire at the end of 2015. Our recommendation is to outline any planned ratifications to the current governance structure and process in the next MOU, even if the changes will not be implemented right away.

Further, we recommend the new MOU should include a 2-year workplan for operationalizing these decisions and/or a clear timeline for any transitions. It is our recommendation that the process of planned transitions should begin at the start of 2016.

Regardless of what decisions are reached by the SG, it will be critical to communicate openly what the decisions, next steps and timeline are for enacting changes to governance processes or organizational arrangements. Increasing transparency, both within the Alliance and externally is crucial to the reputation and functioning of the Alliance.

## 2. Planning for 2016-2018

As this report highlights, progress in advancing the NCD agenda will require both sustained momentum at the global level and expanded efforts and resources at the national and regional levels. At the national level in particular, the need for support to develop, finance and implement NCD plans, policies and programs is immense and the opportunities for the Alliance to provide support are diverse.

That said, it is crucial for the Alliance to remain focused and selective about its strategic priorities in the next phase. It is widely understood that the impact and success of the Alliance will be diluted if it is unfocused or takes on more than the structure can bear or resources permit.

To date, the Alliance has demonstrated tremendous success as an advocate, convener and thought partner at the global level. While it has demonstrated less traction at the national and regional levels, many see a need and capacity for the Alliance to expand its role in national action going forward.

### Strategic Priorities

In planning the Alliance's future pillars of work, it is essential to consider where there are persistent gaps in the global architecture and NCD response, what the Alliance is uniquely positioned to do, and where it can add distinct value. To both sustain global momentum and mobilize national action, it is our recommendation that the Alliance concentrate its efforts on four primary roles for the next strategic phase: advocacy, accountability, capacity building and information dissemination.

**1. Advocacy:** Many of the Alliance's most significant achievements over the last three years have been attributed to the demonstrated success and reach of its targeted advocacy approach at the global level. Going forward, it will be important for the Alliance to leverage its advocacy capacity in a number of new ways at the global level, including:

- Making the economic case: Going forward, it will be increasingly important—both in terms of global resource mobilization and encouraging national level investment in addressing NCDs—to articulate the growing financial burden and cost of inaction for countries, including loss of productivity, burden on health systems and the rising cost of healthcare. In order to mobilize national investment, it will be critical to empower advocates with the economic case, demonstrating the cost of not addressing NCDs.

We recommend that the Alliance expand its global advocacy focus to include resource mobilization for addressing NCDs. Additionally, we recommend the Alliance develop and disseminate messages and resources to support making the economic case in its capacity building efforts with national and regional civil society advocates. This might include supporting costing studies, in priority countries, to build the case and arm national and regional advocates with the ammunition they will require to generate political will and mobilize national action.

- Expanding stakeholder engagement and fostering integration: For the Alliance to maintain its relevance and to effectively position NCDs as a core component of any

multi-sectoral approach to improving health, it will be critical to strategically expand its stakeholder engagement going forward. Communicating the linkages, co-benefits and opportunities for integration with related health agendas (i.e. nutrition), as well as broader development agendas (i.e. climate change), should be included in the Alliance’s advocacy priorities in the next phase. As the MDGs draw to a close, the Alliance should leverage opportunities to tap new funding streams and form integrated partnerships. The chart below identifies key opportunities for the Alliance to consider, within a diverse set of stakeholder groups.

Stakeholder	Opportunity
Health partners	<ul style="list-style-type: none"> <li>• Develop linkages with other related health issues (i.e. nutrition).</li> <li>• Create stronger bridges with organizations and initiatives interested in NCDs but it is not their primary focus (i.e. women’s and children’s health, HIV/AIDS, the SUN Movement).</li> </ul>
Non-health development partners	<ul style="list-style-type: none"> <li>• Develop the narrative that NCDs is a development, social justice and equity issue.</li> <li>• Create linkages with non-health development NGOs and initiatives (i.e. Women Deliver, the Clinton Global Initiative).</li> <li>• Harness different agendas around sustainable development; make the case for co-benefits and strategically engage with these partners. In particular, expand engagement with climate change and nutrition (i.e. SUN movement, ICN2).</li> <li>• Critically think through the relationship between NCDs and sustainable development and leverage opportunities and linkages more strategically.</li> </ul>
NCD partners	<ul style="list-style-type: none"> <li>• Broaden the definition of NCDs.</li> <li>• Serve as a platform for policy on other risk factors outside of tobacco (i.e. obesity).</li> <li>• Increase engagement and cross-fertilization with other NCD-focused organizations (i.e. NCD Child).</li> </ul>
Regional and national partners	<ul style="list-style-type: none"> <li>• Develop a more deliberate strategy for outreach to national governments, emphasizing the “best buys” approach.</li> <li>• Leverage the emerging emphasis on universal health coverage and engage national programs, institutions and health insurance schemes—those stakeholders who have a vested interest in tackling chronic disease.</li> <li>• Ensure regional and national voices are heard at the global level to further legitimize the Alliance’s advocacy efforts as well as build the capacity and engagement of NCD champions from the global South.</li> <li>• Encourage participation of civil society in national discussions.</li> </ul>
Private sector	<ul style="list-style-type: none"> <li>• Selective and strategic engagement with private sector partners.</li> <li>• Explore successful models of public-private sector collaboration (i.e. Women Deliver’s C-Exchange).</li> </ul>
NCD Alliance	<ul style="list-style-type: none"> <li>• Strategically engage and leverage key Alliance stakeholders (i.e.</li> </ul>

stakeholders	members of the SCG). For example, by forming working groups or committees to address key areas in need of attention (i.e. developing a fundraising strategy, conducting due diligence on governing board models etc.).
Funding institutions	<ul style="list-style-type: none"> <li>Engage key donors who have previously been largely committed to funding the achievement of the MDGs, and make the case for inclusion of NCDs among their future funding priorities and portfolios.</li> <li>Strategically engaging a wide range and combination of funding sources will be critical, including philanthropic (i.e. the Bill and Melinda Gates Foundation) and bilateral donors (i.e. USAID, DFID).</li> </ul>
Donor Countries	<ul style="list-style-type: none"> <li>Structured, deliberate outreach to donor countries that include NCDs within their donor portfolios or those with demonstrated potential to expand investment priorities to include tackling the global NCD burden (i.e. Canada, Norway, Denmark).</li> </ul>

**2. Accountability:** One of the greatest emerging challenges in the post-2015 era will be holding governments accountable for their global commitments on NCDs and compelling multilateral organizations to fulfill their commitments to advancing the global frameworks. While it is unlikely the Alliance will take on monitoring and surveillance itself, providing an independent voice and generating pressure can add significant value toward fostering accountability. This could be achieved in a variety of ways, including:

- Capacity building at the national level: Scaling up the use of Alliance tools for national and regional benchmarking and shadow reporting; developing new tools to meet critical gaps; packaging data produced by the WHO, academics and others in meaningful and accessible ways for governments and civil society to effectively utilize.
- Advocacy at the global level: Supporting, and potentially expanding, the development of NCD Countdown 2025 alongside the Lancet NCD Action Group and the WHO; publishing an annual “State of the World’s NCDs” report to track progress and create positive peer pressure between countries.

**3. Capacity Building for National and Regional Alliances:** As outlined in this report, the main point of divergence regarding the future role of the Alliance was on its level of engagement at the national level. While it is our recommendation that the Alliance does invest in building the capacity of national and regional civil society, we also propose that the Alliance does so selectively, leveraging its strengths without overextending or incurring significant reputational risks. For instance:

- Invest in a select number of local alliances: Rather than seeking to support NCD alliances in all countries, the Alliance might consider investing in a select number of local alliances, in priority countries and regions. Targeted country level support has the potential for measurable impact in priority countries as well as a basis for developing case studies and modeling best practices. This could go far to pave the way for nascent NCD alliances around the world, while also expanding the Alliance’s roles as both a capacity builder and information broker.



- Develop guiding principles and priorities for national and regional alliances: The Alliance may determine that developing a formal charter (affiliation process) of national and regional alliances either poses too high a reputational risk or will be too large an undertaking given current resources and staff bandwidth. An alternative would be for the Alliance to develop “guiding principals and priorities” for national and regional alliances, thereby clearly stating the Alliance’s position about what NCD alliances should embody and include, without the process of assessing and monitoring each group, or positioning them to have an official affiliation with the Alliance.

**4. Information Dissemination:** The Alliance’s role in disseminating knowledge and tools to its global network is well established and we recommend that this should be expanded in the future. We propose that this be operationalized in the following ways:

- Translation of materials: More systematic translation of Alliance resources so that they are accessible to diverse audiences.
- Create a platform for global, regional and national information sharing: The Alliance may consider building out its website to include a hub for information sharing and knowledge exchange.
- Document case studies: Further, we recommend the Alliance take the lead on developing and disseminating case studies on regional and national successes, including:
  - Effective regional or national NCD alliances, exploring what is working well, what key challenges were overcome and how, what could be done differently, etc.
  - Countries that have demonstrated success at developing and financing national NCD plans and/or programs. There are numerous directions to focus these case studies, including profiling a country that successfully operationalized a national NCD plan in line with UHC.

## Conclusion

This assessment of the Alliance’s key roles, achievements and challenges has been a valuable process to take stock of its impact and assets, as well as its limitations, and to start to shape its identity and priorities going ahead.

In reflecting on how effectively the Alliance’s governance has functioned over the last three years, key considerations have emerged that warrant deliberate evaluation and consensus to ensure the Alliance is strong, sustainable and fit for purpose going forward. With planned changes and potential transitions on the horizon, it will be critical to the success and reputation of the Alliance that any decisions and upcoming changes are a fluid process and that strong alignment among colleagues is maintained and displayed.

It is evident that the Alliance has an essential role to play in moving the NCD agenda forward. A clear path has been outlined for the Alliance’s work, which focuses on leveraging its global advocacy strengths, and strategically expanding its role in advancing NCDs at the national level.

Given the emerging opportunities in this new era for global development— with the global NCD architecture in place and the SDGs nearly solidified—and the growing recognition of the Alliance’s valuable contributions and role in this space, the Alliance is poised to make a substantial and lasting impact in the next strategic phase, and beyond.

## ANNEX A: SWOT ANALYSIS

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>• Targeted advocacy approach has been widely successful and global achievements substantial</li> <li>• Capacity to respond quickly and flexibly to emerging opportunities</li> <li>• Fills a critical gap in the global architecture by serving as an effective and neutral convener of civil society across diseases and scattered agendas</li> <li>• Viewed by many as the global voice of civil society on NCDs</li> <li>• A valued thought partner of the UN; demonstrated influence on UN level discussions and processes</li> <li>• Global advocacy campaigns have increased synergies with WHO</li> <li>• Outreach to key governments (i.e. Norwegian Government) has led to effective engagement and collaboration</li> <li>• Draws upon extensive expertise from a diverse range of partners and organizations</li> <li>• Rallies diverse groups around a unified set of advocacy messages at the global level</li> <li>• Effectively gathers and disseminates information on global discussions and processes; benefits the Alliance network and beyond</li> <li>• Produces valuable resources and tools (i.e. advocacy toolkit) to support national and regional advocacy</li> <li>• Secretariat is well-respected; a nimble team that works effectively and has made significant achievements despite its small size</li> </ul>	<ul style="list-style-type: none"> <li>• Limited role and influence beyond the global level; limited success in translating global advocacy to national level change</li> <li>• No system for monitoring and measuring impact of its work</li> <li>• Core team has limited bandwidth; expanding its scope of work will require additional resources</li> <li>• Absence of an internal fundraising strategy for the Alliance</li> <li>• Strategic outreach to stakeholders is limited; largely based on one-to-one relationships</li> <li>• Weak at creating linkages with other health sectors (i.e. nutrition, MNCH) and other sectors and issues (i.e. food security, urbanization, climate change)</li> <li>• Weak involvement of organizations from the global South and people living with NCDs in the structure and work of the Alliance</li> <li>• As an informal alliance governed by an MOU, it is a legally weak structure</li> <li>• Stability, communication and cohesion of the SG have been tested by the contentions around election of chair</li> <li>• Perceived lack of transparency on governance structures, decision-making and certain internal policies</li> <li>• Lack of clarity on private sector funding</li> </ul>

Opportunities	Threat
<ul style="list-style-type: none"> <li>• Maintain strong involvement in the solidification of the indicators to ensure the positioning of NCDs</li> <li>• Support and empower civil society advocates to hold governments accountable (i.e. through knowledge dissemination, local NCD alliances)</li> <li>• Maintain the global momentum; create a number of big "rallying moments" between 2015-2025</li> <li>• Catalyze funding for NCDs at the global level (i.e. bilaterals, private sector) and/or build national capacity for resource mobilization</li> <li>• Support "costing" activities to communicate the economic impact of NCDs as well as the cost of addressing the NCD burden</li> <li>• Leverage the momentum on SDG integration by providing leadership on inter-sectoral linkages with NCDs</li> <li>• Step out of the health box by framing NCDs as a poverty/equity/development issue; engage new partners across sectors (i.e. HIV/AIDS, women's and children's health)</li> <li>• Frame NCDs as a global economic challenge and promote NCD advocacy at key events (i.e. WEF, economic summits)</li> <li>• Take a lead on monitoring and accountability; track and raise visibility on progress made on global NCD targets</li> <li>• Continue the ongoing collaboration to develop NCD Countdown 2025 and work to secure WHO involvement</li> <li>• Strategically engage supporters and other key stakeholders to leverage the Alliance's capacity and reach, and maximize impact</li> <li>• Address private sector financing proactively; leverage the unique structure of the Alliance to model good practice on private sector engagement</li> <li>• Expand engagement of the media to expand their knowledge and awareness of NCD issues</li> </ul>	<ul style="list-style-type: none"> <li>• Without sustained effort to keep the drum beat up, NCDs may fall down the list of priorities</li> <li>• Lack of political will and resources to advance the global NCD agenda at the national level</li> <li>• Variable capacity of regional/national NCD alliances; if Alliance is overly dependent on performance of regional/national alliances and these alliances are weak, this could pose a reputational risk to the Alliance</li> <li>• Without a monitoring mechanism in place for 2025 goals, governments are unlikely to take them seriously</li> <li>• Widespread perception that addressing NCDs is complex and costly</li> <li>• Fragmentary nature of NCDs; current siloed approach at the national level may hamper collaboration</li> <li>• Donor fatigue and a constrained funding environment; interest in country level or disease specific work</li> <li>• External perception of the Alliance as a closed club; large and important groups feel alienated from the Alliance and are developing hostilities</li> <li>• Alliance may be perceived as "reductionist" if only addressing four major diseases</li> <li>• Contention around the Alliance's engagement with the private sector</li> </ul>

## **ANNEX B: Key Informant Interviews**

### **NCDAs Steering Group (SG) Members**

1. Cary Adams, CEO, Union for International Cancer Control (UICC)
2. Catharine Taylor, Vice President, Management Sciences for Health (MSH)
3. Johanna Ralston, CEO, World Heart Federation
4. Jose Castro, Executive Director, The Union
5. Laurent Huber, Executive Director, Framework Convention Alliance
6. Marc Wortmann, Executive Director, Alzheimer's Disease International
7. Petra Wilson, CEO, International Diabetes Federation (IDF)

### **NCDAs President Oversight Committee (POC)**

1. Jacob Roy, President, Alzheimer's Disease International
2. Jane Carter, President, The Union
3. Jono Quick, President, Management Sciences for Health
4. Michael Hirst, President, International Diabetes Federation
5. Salim Yusuf, President, World Heart Federation
6. Tezer Kutluk, President, Union for International Cancer Control
7. Ulysses Dorotheo, President, Framework Convention Alliance

### **NCDAs Staff**

1. Alena Matzke, Advocacy Specialist
2. Ariella Rojhani, Senior Advocacy Manager
3. Katie Dain, Executive Director

### **NCDAs Supporters Consultation Group (SCG) Members**

1. Anne Lise Ryel, CEO, Norwegian Cancer Society
2. Diana Vaca McGhie, Global Advocacy Manager, American Heart Association
3. Evan Lee, Vice President, Global Health Programs and Access, Eli Lilly and Company
4. Loyce Pace Bass, Director of Health Policy, Livestrong Foundation
5. Martin Bernhardt, Vice President International Institutions, Sanofi
6. Mia Bülow-Olsen, Senior Project Manager, Changing Diabetes Partnerships, Novo Nordisk
7. Neal Kovach, Director, International Affairs, American College of Cardiology
8. Paul E Schaper, Executive Director for Global Public Policy, Merck & Co
9. Paurvi Bhatt, Senior Director, Global Access, Medtronic Philanthropy
10. Sally Cowal, Senior Vice President Global Health, American Cancer Society

### **NCDAs Expert Advisory Council (EAC) Members**

1. Brenda Killen, Deputy Director, Development Cooperation, OECD
2. James Hospedales, Executive Director, CARPHA
3. Jeff Sturchio, CEO, Rabin Martin
4. Robert Beaglehole, Professor Emeritus, University of Auckland
5. Sania Nishtar, CEO/Founder, Heartfile
6. Sir George Alleyne, Director Emeritus, PAHO

### **NCDAs National and Regional Representatives**

1. Beatriz Champagne, CEO, Healthy Latin America Coalition

2. Susanne Volqvartz, CEO, Danish NCD Alliance
3. Trevor Hassell, President / Founder, Healthy Caribbean Coalition

#### **Global Stakeholders**

1. Colin McIff, Health Attaché, US Permanent Mission
2. Corinna Hawkes, Head of Policy and Public Affairs, WCRF
3. Derek Yach, Senior Vice President, Vitality Institute
4. Doug Webb, Health Cluster, UNDP
5. Jon Klein, Associate Director, NCD Child
6. Judith Watt, Consultant and former NCDA Executive Director
7. Nick Banatvala, Senior Advisor, WHO
8. Rebecca Perl, Director, Strategic Partnerships and Initiatives, World Lung Foundation
9. Richard Horton, Editor, The Lancet
10. Rob Moodie, Professor of Public Health and Director of Teaching and Learning, University of Melbourne
11. Vanessa Candeias, Associate Director, Healthy Living, World Economic Forum

## ANNEX C: Evaluation Survey Results

### Demographics & Background

1. What geographic region are you based in?		
Answer Options	Response Percent	Response Count
North America	22.0%	20
South America	1.1%	1
Central America or Caribbean	2.2%	2
<b>Europe</b>	31.9%	29
Asia	9.9%	9
The Western Pacific / Australasia	9.9%	9
Africa	23.1%	21
The Middle East	0.0%	0
<b>Answered question</b>		<b>91</b>
<b>Skipped question</b>		<b>0</b>

2. Which of the following best describes the type of your organization?		
Answer Options	Response Percent	Response Count
International NGO	31.9%	29
Regional NGO	6.6%	6
<b>National NGO</b>	37.4%	34
Multilateral organization (UN, World Bank, WHO)	1.1%	1
Government organization or department	4.4%	4
Academic institution	5.5%	5
Private sector	4.4%	4
Individual	5.5%	5
Other	3.3%	3
If other, please specify		6
<b>Answered question</b>		<b>91</b>
<b>Skipped question</b>		<b>0</b>

3. What is the main focus area(s) of your work on NCDs? (check all that apply)		
Answer Options	Response Percent	Response Count
Cardiovascular Disease	30.0%	27
Chronic Respiratory Disease	6.7%	6
Cancer	22.2%	20
Diabetes	22.2%	20
Mental Health / Neurological Disorders	11.1%	10
All NCDs	32.2%	29
Nutrition / Obesity / Food Policy	26.7%	24

Physical Activity	21.1%	19
Tobacco Control	30.0%	27
Alcohol Control	25.6%	23
All Risk Factors	27.8%	25
<b>Global Health</b>	36.7%	33
Other (please specify)		9
<b>Answered question</b>		<b>90</b>
<b>Skipped question</b>		<b>1</b>

#### 4. Which activities are your organization engaged in? (check all that apply)

Answer Options	Response Percent	Response Count
<b>Advocacy</b>	86.8%	79
Health service delivery	35.2%	32
Research	54.9%	50
Training	58.2%	53
Communications	69.2%	63
Provision of grants or funds	23.1%	21
Other (please specify)		10
<b>Answered question</b>		<b>91</b>
<b>Skipped question</b>		<b>0</b>

#### 5. Is your organization a member of the NCD Alliance Network?

Answer Options	Response Percent	Response Count
<b>Yes</b>	55.7%	49
No	44.3%	39
<b>Answered question</b>		<b>88</b>
<b>Skipped question</b>		<b>3</b>

#### 6. Is your organization a member of one or more of the following NCD Alliance Federations? (check all that apply)

Answer Options	Response Percent	Response Count
Alzheimer's Disease International (ADI)	2.4%	2
Management Sciences for Health (MSH)	0.0%	0
Framework Convention Alliance (FCA)	11.9%	10
International Diabetes Federation (IDF)	8.3%	7
International Union against Tuberculosis and Lung Disease (The Union)	7.1%	6
Union for International Cancer Control (UICC)	16.7%	14
World Heart Federation (WHF)	15.5%	13
<b>None of the above</b>	54.8%	46
<b>Answered question</b>		<b>84</b>
<b>Skipped question</b>		<b>7</b>



7. Is your organization a member of a national or regional NCD alliance?		
Answer Options	Response Percent	Response Count
No	68.5%	61
Yes	31.5%	28
If yes, please specify which		24
<b>Answered question</b>		<b>89</b>
<b>Skipped question</b>		<b>2</b>

### Looking Back (2012-2015)

8. How would you rate the NCD Alliance's overall performance in the following areas over the last three years?							
Answer Options	Excellent	Good	Satisfactory	Poor	Don't know	Rating Average	Response Count
Mobilising global resources for NCDs	12.4% (11)	21.3% (19)	32.6% (29)	14.6% (13)	19.1% (17)	2.39	89
Influencing a strong outcome from the 2014 UN High-Level Review on NCDs	29.2% (26)	37.1% (33)	16.9% (15)	4.5% (4)	12.4% (11)	3.04	89
Securing an ambitious WHO Global NCD Action Plan 2013-2020	31.5% (28)	36.0% (32)	16.9% (15)	4.5% (4)	11.2% (10)	3.06	89
Supporting the development and adoption of the Global NCD Monitoring Framework	36.0% (32)	43.8% (39)	10.1% (9)	3.4% (3)	6.7% (6)	3.20	89
Engaging with the Global Coordination Mechanism for NCDs	40.9% (36)	36.4% (32)	8.0% (7)	4.5% (4)	10.2% (9)	3.27	88
Influencing inclusion of NCDs in the post-2015 development agenda	43.3% (39)	36.7% (33)	11.1% (10)	0.0% (0)	8.9% (8)	3.35	90
<b>Answered question</b>							<b>90</b>
<b>Skipped question</b>							<b>1</b>

9. How would you rate the NCD Alliance's overall performance on the following global advocacy activities over the last three years?							
Answer Options	Excellent	Good	Satisfactory	Poor	Don't know	Rating Average	Response Count
Keeping the network informed of political processes and sharing knowledge	54.5% (48)	29.5% (26)	9.1% (8)	1.1% (1)	5.7% (5)	3.46	88
Raising awareness of NCDs	39.8% (35)	38.6% (34)	14.8% (13)	0.0% (0)	6.8% (6)	3.27	88

Developing policy positions and papers	38.2% (34)	42.7% (38)	9.0% (8)	3.4% (3)	6.7% (6)	3.24	89
Catalysing debate by organising side events and roundtables	40.5% (34)	31.0% (26)	13.1% (11)	3.6% (3)	11.9% (10)	3.23	84
Building strategic alliances with stakeholders across health and development sectors	25.8% (23)	29.2% (26)	25.8% (23)	4.5% (4)	14.6% (13)	2.89	89
Providing tools for national/regional advocacy efforts (i.e. template letters, toolkits, resources)	23.6% (21)	36.0% (32)	19.1% (17)	7.9% (7)	13.5% (12)	2.87	89
Coordinating advocacy with governments and multilateral agencies	20.7% (18)	35.6% (31)	17.2% (15)	9.2% (8)	17.2% (15)	2.82	87
<b>Answered question</b>							<b>89</b>
<b>Skipped question</b>							<b>2</b>

**10. How effective has the NCD Alliance been in supporting the following efforts in your country/region over the last three years?**

Answer Options	Very effective	Some-what effective	Not very effective	Support was not provide in this area	N/A	Rating Average	Response Count
Supporting the development of national NCD policies and plans	10.7% (9)	28.8% (24)	29.8% (25)	10.7% (9)	20.2% (17)	1.49	84
Convening stakeholders	16.3% (14)	29.1% (25)	25.6% (22)	7.0% (6)	22.1% (19)	1.70	86
Facilitating knowledge exchange on good practice in NCD policy and action	20.9% (18)	31.4% (27)	24.4% (21)	5.8% (5)	17.4% (15)	1.82	86
Increasing media coverage on NCDs	12.0% (10)	33.7% (28)	24.1% (20)	12.0% (10)	18.1% (15)	1.56	83
Raising the voice and rights of patients and people living with NCDs	15.1% (13)	30.2% (26)	22.1% (19)	12.8% (11)	19.8% (17)	1.59	86
Building national and regional advocacy capacity	12.8% (11)	44.2% (38)	16.3% (14)	7.0% (6)	19.8% (17)	1.78	86
Building the demand for NCD services (i.e. prevention, treatment and care)	9.5% (8)	39.3% (33)	16.7% (14)	11.9% (10)	22.6% (19)	1.60	84
Supporting the development of national/regional NCD alliances and coalitions	21.2% (18)	41.2% (35)	9.4% (8)	8.2% (7)	20.0% (17)	1.94	85

<b>Answered question</b>	<b>86</b>
<b>Skipped question</b>	<b>5</b>

**11. If you are a member of a regional or national NCD alliance, what type of support did you receive from the NCD Alliance over the last three years and how valuable was it?**

Answer Options	Very valuable	Some-what valuable	Occasion-ally valuable	Not at all valuable	No support was provided in this area	N/A	Rating Average	Response Count
Information	25.7% (19)	10.8% (8)	5.4% (4)	0.0% (0)	5.4% (4)	52.7% (39)	3.09	74
Knowledge exchange	17.8% (13)	11.0% (8)	9.6% (7)	0.0% (0)	6.8% (5)	54.8% (40)	2.73	73
Technical support	9.9% (7)	7.0% (5)	4.2% (3)	2.8% (2)	12.7% (9)	63.4% (45)	1.96	71
Funding for advocacy efforts	5.5% (4)	2.7% (2)	1.4% (1)	6.8% (5)	16.4% (12)	67.1% (49)	1.21	73
Training on advocacy	4.2% (3)	2.8% (2)	4.2% (3)	2.8% (2)	16.7% (12)	69.4% (50)	1.18	72
Other	1.8% (1)	0.0% (0)	1.8% (1)	1.8% (1)	7.3% (4)	87.3% (48)	1.00	55
<b>Answered question</b>							<b>74</b>	
<b>Skipped question</b>							<b>17</b>	

**12. How useful were the following tools and resources from the NCD Alliance in supporting your advocacy efforts over the last three years?**

Answer Options	Very useful	Somewhat useful	Occasionally useful	Not at all useful	N/A	Rating Average	Response Count
NCD Alliance policy briefs	55.8% (48)	19.8% (17)	10.5% (9)	2.3% (2)	11.6% (10)	3.46	86
Weekly e-alerts	47.1% (40)	24.7% (21)	16.5% (14)	3.5% (3)	8.2% (7)	3.26	85
Webinars	45.8% (38)	13.3% (11)	9.6% (8)	7.2% (6)	24.1% (20)	3.29	83
NCD Alliance Advocacy Toolkit on NCDs in the Post-2015 Development Agenda	36.9% (31)	33.3% (28)	8.3% (7)	6.0% (5)	15.5% (13)	3.20	84
NCD Alliance website	33.3% (28)	32.1% (27)	21.4% (18)	4.8% (4)	8.3% (7)	3.03	84
NCD Alliance Advocacy Toolkit: Join the Fight Civil Society Capacity Building Toolkit	31.7% (26)	26.8% (22)	17.1% (14)	4.9% (4)	19.5% (16)	3.06	82

Civil Society Status Report template and benchmarking tool	19.3% (16)	24.1% (20)	12.0% (10)	16.9% (14)	27.7% (23)	2.63	83
Other	17.6% (6)	11.8% (4)	0.0% (0)	5.9% (2)	64.7% (22)	3.17	34
<b>answered question</b>							<b>86</b>
<b>skipped question</b>							<b>5</b>

**13. How would you rate the overall quality and usefulness of NCD Alliance communication channels?**

Answer Options	Very useful	Somewhat useful	Occasionally useful	Not at all useful	Don't know	Rating Average	Response Count
Weekly e-alert	55.8% (48)	25.6% (22)	9.3% (8)	2.3% (2)	7.0% (6)	3.45	86
Webinars	46.4% (39)	15.5% (13)	10.7% (9)	8.3% (7)	19.0% (16)	3.24	84
Publications	44.2% (38)	36.0% (31)	5.8% (5)	3.5% (3)	10.5% (9)	3.35	86
Website	41.9% (36)	29.1% (25)	19.8% (17)	2.3% (2)	7.0% (6)	3.19	86
Twitter	24.1% (19)	21.2% (17)	16.5% (13)	10.1% (8)	27.8% (22)	2.82	79
<b>answered question</b>							<b>86</b>
<b>skipped question</b>							<b>5</b>

**14. How many NCD Alliance webinars did you join over the last three years?**

Answer Options	Response Percent	Response Count
None	34.1%	29
1-3 webinars	30.6%	26
4-6 webinars	18.8%	16
7-10 webinars	9.4%	8
Over 10 webinars	7.1%	6
<b>Answered question</b>		<b>85</b>
<b>Skipped question</b>		<b>6</b>

**15. Which communications activities could have been done better and how?**

Answer Options	Response Count
	34
<b>answered question</b>	<b>34</b>
<b>skipped question</b>	<b>57</b>

## Looking Ahead (2016-2018)

16. How should the NCD Alliance prioritize the following roles or efforts in the next three years?						
Answer Options	High priority	Medium priority	Low priority	Not a priority	Rating Average	Response Count
Global advocacy campaigns	82.3% (65)	15.2% (12)	2.5% (2)	0.0% (0)	3.80	79
Tracking government action and improving accountability on NCDs	81.3% (65)	16.3% (13)	1.3% (1)	1.3% (1)	3.78	80
Stakeholder engagement	74.7% (59)	24.1% (19)	1.3% (1)	0.0% (0)	3.73	79
Policy development	63.3% (50)	31.6% (25)	3.8% (3)	1.3% (1)	3.57	79
Knowledge exchange of good practice	61.3% (49)	28.7% (23)	8.8% (7)	1.3% (1)	3.50	80
Communications campaigns	54.4% (43)	29.1% (23)	16.5% (13)	0.0% (0)	3.38	79
National/regional capacity building	53.9% (41)	36.8% (28)	7.9% (6)	1.3% (1)	3.43	76
In-country programs	36.3% (29)	31.3% (25)	23.8% (19)	8.8% (7)	2.95	80
<b>Answered question</b>						<b>80</b>
<b>Skipped question</b>						<b>11</b>

17. Which policy areas should the NCD Alliance prioritize over the next three years?						
Answer Options	Yes	No	Maybe	Don't know	N/A	Response Count
Prevention	82.1% (64)	7.7% (6)	10.3% (8)	0.0% (0)	0.0% (0)	78
Social determinants of health	71.3% (57)	8.8% (7)	16.3% (13)	3.8% (3)	0.0% (0)	80
Fiscal policies (i.e. taxation, bilateral aid for NCDs, etc.)	33.1% (57)	9.0% (7)	16.7% (13)	0.0% (0)	1.3% (1)	78
Governance (i.e. NCD plans, targets, commissions)	68.8% (55)	0.0% (0)	30.0% (24)	1.3% (1)	0.0% (0)	80
Surveillance and monitoring	70.5% (55)	5.1% (4)	24.4% (19)	0.0% (0)	0.0% (0)	78
Nutrition/food	65.3% (49)	6.7% (5)	25.3% (19)	2.7% (2)	0.0% (0)	75
Universal health coverage / health system strengthening	60.8% (48)	12.7% (10)	21.5% (17)	5.1% (4)	0.0% (0)	79

Access to essential medicines/technologies	55.7% (44)	16.5% (13)	22.8% (18)	3.8% (3)	1.3% (1)	79
Other (please explain)						4
<b>Answered question</b>						<b>81</b>
<b>Skipped question</b>						<b>10</b>

**18. In your country or region, how valuable would NCD Alliance support be in the following areas over the next three years?**

Answer Options	Very valuable	Valuable	Not at all valuable	N/A	Rating Average	Response Count
Mobilizing resources for national/regional civil society advocacy efforts	57.0% (45)	24.1% (19)	8.9% (7)	10.1% (8)	2.54	79
Building national and regional advocacy capacity	51.9% (41)	26.6% (21)	10.1% (8)	11.4% (9)	2.47	79
Facilitating engagement in global processes	50.0% (39)	33.3% (26)	6.4% (5)	10.3% (8)	2.49	78
Technical support in the development of national and regional NCD policies and plans	43.0% (34)	36.7% (29)	7.6% (6)	12.7% (10)	2.41	79
Supporting in-country advocacy campaigns	38.5% (30)	37.2% (29)	11.5% (9)	12.8% (10)	2.31	78
Other	16.7% (4)	16.7% (4)	0.0% (0)	66.7% (16)	2.50	24
<b>Answered question</b>						<b>79</b>
<b>Skipped question</b>						<b>12</b>

**19. Please suggest the top two ways the NCD Alliance could better support national advocacy efforts and activities in your country.**

Answer Options	Response Count
	46
<b>answered question</b>	
	46
<b>skipped question</b>	
	45