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Acknowledgements

This practical guide aims to support the establishment of national and regional NCD alliances by offering a variety of tools, samples and resources that can be adapted and used to meet local needs. It was developed based on numerous inputs from several national and regional NCD alliances from across the world and from networks addressing nutrition and HIV/AIDS. It has also drawn on resources developed by various development partners that are relevant to civil society coalitions. Special thanks to the reviewers who enriched the guide with their valuable feedback.

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Practical guide on how to build effective national and regional NCD alliances



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Noncommunicable diseases (NCDs) constitute a major global health and development challenge, accounting for 68% of the 56 million global deaths in 2012. These include cancers, diabetes, cardiovascular diseases, chronic respiratory diseases and dementia among others. The four modifiable risk factors common to the first four NCDs are tobacco use, harmful use of alcohol, unhealthy diet and lack of physical activity. Action on NCDs and their risk factors call for a multisectoral approach and collective action by civil society organisations (CSOs).

Role of civil society in NCD prevention and control

Civil society plays a key role in four major areas in the prevention and control of NCDs (the four As):



AWARENESS



ADVOCACY



ACCESS



ACCOUNTABILITY

With its diverse roles, NCD civil society can engage and empower people living with NCDs and promote a whole of society response. Coalition building is an integral part in mobilising civil society on NCDs. Following the establishment of the global NCD Alliance, recent years have seen the organic emergence of national and regional NCD alliances across the world.

The NCD Alliance's Situational Analysis of National and Regional NCD Alliances published in November 2015¹ surveyed and interviewed national and regional NCD alliances to provide a snapshot of the current status of NCD civil society. The situational analysis revealed the capacity building need for guidance on building effective alliances.

The NCD Alliance has prioritised capacity development in its Strategic Plan of 2016-2020 to help drive regional and national action on NCDs by supporting the development and growth of effective and sustainable NCD civil society. To this end, the NCD Alliance has developed this practical guide on How to Build Effective National and Regional NCD alliances to support new alliances throughout their establishment phase.



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This guide offers practical steps and tools to build and establish effective national and regional NCD alliances. It has been built on the experiences of coalition building for health and non-health goals. In particular, it has drawn on inputs from coalitions working on NCDs, nutrition and HIV/AIDS. The guidance provided in this document, including the diverse tools and samples, is meant to facilitate discussions and decisions by national and regional NCD alliances and does not imply NCD Alliance endorsement of any specific approach or model. It is strongly recommended that the guidance in this guide is adapted to suit local context and capacities.

Objectives of the guide

The guide aims to:

DESCRIBE ALLIANCES,
their types, purposes,
benefits and challenges
for NCD prevention and
control

PRESENT KEY
Steps in building effective
national and regional
NCD alliances

**PROVIDE PRACTICAL
TOOLS** and templates
that can aid alliance
building

**IDENTIFY CONCRETE
MEASURES** that
improve the efficiency
and outcomes of NCD
alliances

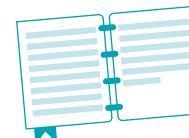
Alliances/Coalitions

An alliance or a coalition can be broadly defined as a group of people or organisations that has a goal to pursue common policies, while each organisation maintains its autonomy. In the case of NCD alliances, the shared goal would mobilise the members to collectively act on specific policies that prevent and control NCDs.

By the definition above, an alliance would have:



Constituent members



Shared agenda



Target audience



Values

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Rationale for working in alliances

The efforts of individual entities may often be limited, isolated or dissipated. Working in alliances can:

- bring greater strength in numbers and visibility to NCD concerns
- secure better access to policy and power centers
- help achieve goals individual organisations could not accomplish on their own
- pool diverse skills, experiences and resources to overcome individual deficiencies in addressing NCDs

Members of the Richmond Group of Charities in London were initially working independently with the UK Department of Health (housed in Richmond House and hence the coalition name) on long term health issues. They recognised the value of collective action and formed the joint Charity to better influence health and social care policy and practice for each of the groups of people living with long term conditions they represented.

Meanwhile in Colombia, two groups of organisations were working separately on tobacco control and health rights. They were united by their common interest to challenge vested private interest in public health leading to the creation of the National Table for Health.

In Ethiopia, organisations working on the major NCDs wanted to build on the experience of securing a National Strategic Action Framework for Cancer and help the government develop a National Strategic Action Framework for each of the NCDs. They formed the Consortium of Ethiopian NCD Associations.

If not addressed carefully, alliances may run the risk of:

- compromising on priorities and positions
- competition for control, credits, visibility and resources
- lack of transparency and accountability to members and the public
- tarnishing the image of member organisations
- trespassing into members work or diluting their missions

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Alliances are often divided on the question of whether they should focus prevention or treatment; a specific disease or a risk factor; advocacy or service delivery. Such concerns need to be resolved early on through strategic planning, taking into account the strengths and priorities of diverse organisations, the political opportunities and finding a shared agenda that is relevant to the membership. For instance, the NCD Alliance Argentina consists of groups working on tobacco control, healthy eating, women's rights, consumers rights, cancer, diabetes, human rights and the right to water. Following discussions, they unanimously decided to exclusively focus on NCD prevention, while patient groups and medical professional bodies outside the alliance attend to NCD treatment aspects.

There could also be concerns regarding whether the mission and priorities of member organisations will be diluted or displaced by the alliance. It is important that alliances include activities that support and add value to member organisations through capacity building and by sharing resources.

Limited resources often create difficulties in alliances. Fundraising efforts of the alliance could encroach into funding sources of members. Healthy Caribbean Coalition (HCC) addresses this by consciously avoiding fundraising from national donors and instead raising its resources from global and regional donors who are less likely to fund in-country CSOs. It also avoids implementation projects, which the members are supported to undertake through onward granting. Transparency and open discussions about fundraising are critical to avoid unhealthy competition.

The South Africa NCD Alliance found the insights from Bruce Tuckman's Model of Group Development into the stages an alliance might pass through useful in addressing its associated challenges. **The tools** to address these challenges can help alliances anticipate, address and navigate these challenges.



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Steps to building effective national and regional NCD alliances

While national and regional NCD alliances often have organic beginnings, a strategic approach to building them can help streamline the efforts and improve outcomes. Key steps to NCD alliance building are discussed in this section:

- 1. Assess and define** the need for an alliance
- 2. Scope** the landscape and identify potential partners
- 3. Make** the case for partnership
- 4. Develop** a shared agenda through strategic planning
- 5. Determine** organisational design and governance

Assess and define the need for an alliance

The first step to building an alliance is to check if there is need for one! While the idea of forming an alliance might originate from an organisation or be inspired by an individual, it is good to get a handful of like-minded entities to examine the need in detail. Some questions to ask include:

- 1** Are there NCD goals that are better realised through collective action?
- 2** Are there NCD concerns that are not addressed by existing organisations?
- 3** Are there cross-cutting issues that are sensible for organisations to address together?
- 4** Are there challenges to NCD action that require coordinated response?
- 5** Are there opportunities that are better explored as a coalition?
- 6** Are there partners with likely interest in collective action?

A civil society mapping that explores the profile, current activities and needs of organisations whose work is relevant to NCD prevention and control could provide meaningful insights in this regard. For instance, the mapping could throw light on the gaps in the civil society response, approaches to address them, including interest and scope to build an alliance. On identifying the specific need(s), define it and articulate its rationale to see if there is interest for collective action among key stakeholders. [Here](#) is a sample mapping that could be adapted to include all CSOs whose work is relevant to NCD prevention and control in the country and regional contexts.

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Scope the landscape and identify potential partners

Once the need for an alliance is identified, it is time to determine who would need to be part of it. The partners need to be like-minded organisations/entities that share an interest in, and some common linkages with, NCDs and/or their risk factors. As Figure 1 indicates, an NCD alliance needs to consider CSOs and other relevant stakeholders who are:

- already addressing NCDs and their risk factors actively in the country
- those who may or may not be active but are critical to accelerate the response
- those who work on other issues that are relevant to the NCD response
- those who share an interest to partner on the issue



Fig 1. Potential stakeholders for partnership

Given that actions in the non-health sectors such as trade and agriculture often contribute to the NCD epidemic, it is strategic to partner with civil society actors addressing these issues. The newly adopted UN Sustainable Development Goals present a broad, new avenue to explore potential partners from the development community to join the alliance. As Figure 2 (page 8) outlines, this could include those working on maternal and child health, nutrition, communicable diseases, rights of various vulnerable groups, water, environmental concerns and rural and urban concerns among others.

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NCDs across the SDGs

A call for an integrated approach



Fig 2. NCDs across the SDGs. Click on the + for more information



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The results of the civil society mapping described in the previous section offer a good place to start the search for partners. Further, use the Stakeholder Assessment Tool to develop a matrix of CSOs of relevance to various NCD issues listed against their interest and influence to identify those who could be invited to be members of the alliance and those likely to offer **external support**. [T2](#)

Fill in the matrix by listing specific organisations/individuals, consider why they may be interested in NCDs and whether they may be a good fit for your NCD alliance. Include those outside the health sector whose work is relevant for NCD prevention and control. Some examples of potential partners are given in [this sample](#) [S2](#). It also provides links to some of the international civil society networks of relevance to NCDs, whose in-country members could be included in the civil society mapping, stakeholder assessment and eventually invited to join your alliance. Some alliances choose to be multisectoral and include academia, research agencies and relevant private sector. The obvious exclusion for any NCD alliance would be entities such as the tobacco and alcohol industry or food and beverage companies whose core business undermines the achievement of the global NCD targets.

Hear are some broad criteria to identify partners to be approached to join the alliance:

- well placed to address the identified need for establishing the alliance
- willingness to contribute to the alliance
- suitability of organisational design
- match in core values, principles
- access to advocacy targets and influencers
- outreach to the community being serviced
- reputation of work

Membership recruitment drives seem to have helped the formation of some NCD alliances. In Brazil, ACT Brazil organised a series of regional tobacco control advocacy workshops with women's groups that led to the country's tobacco control network that eventually expanded to become its NCD coalition (Aliança de Controle do Tabagismo + Saúde ACT+). Similarly, several of the NCD alliances in East Africa conducted workshops specifically to recruit and equip members. A sample programme of the workshop by Zanzibar NCD Alliance can be found [here](#) [S3](#).

The NCD Alliance followed certain criteria when it was formed in 2009. It decided to invite only global federations that are like-minded and with similar structure to have the greatest impact and legitimacy. Given that the Alliance aimed to influence global platforms, it required its members to have international reputation and official relations with WHO, with members on the ground who would bring legitimacy to its work.



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Making the case for partnership

Once you have a preliminary list of potential partners, it is time to approach them and make the case for starting an NCD alliance or joining an existing one. Some may be already convinced of the need for collective action, whereas others might need some convincing. In other cases, the linkages between the CSO's work and NCDs may not be evident and need to be demonstrated.

Top tips to bring stakeholders on board the alliance

- Develop the alliance vision, mission and branding broad enough to appeal to a wide range of stakeholders
- Develop and convey clear added value of the alliance, ensuring that it does not duplicate the work of its members
- Engage leadership of organisations at early stage to ensure their commitment
- Build relationship and trust with individuals representing the organisations
- Clarify roles and responsibilities from the outset
- Create space in the alliance structure for different levels of association for various stakeholders
- Participate in meetings/networks addressing issues of relevance to NCDs and explore linkages
- Run pilot interventions with CSOs from other sectors and share learning
- Generate and present evidence on the co-benefits of co-interventions on NCDs and other issues
- Frame NCDs and their response as aligned to the goals of potential partners
- Develop joint position papers

For example, the NCD alliance in India intends to reach out to an audience beyond NCD-related organisations, and has therefore branded itself as the "Healthy India Alliance" with a stated vision to "catalyse multisectoral action to enhance health and quality of life." Meanwhile, Brazil's NCD coalition has set itself up as a core group that consults on governance and strategic matters, with a larger open, informal network of nearly 1000 CSOs who receive information on NCD concerns and lend support to the alliance campaigns. The NCD Forum Bangladesh reached out to networks working on nutrition, urban health and environmental issues and made the case for joint responses on NCD concerns at their meetings.

The third column (reason they would be interested) in the Stakeholder Assessment Matrix (see Tool 1) provides the starting point for making the case for the establishment of an NCD alliance. Building on that information, fill in the "["Making the Case" tool](#)  T3" that would help identify how to position NCDs in the stakeholder's context and language.

Framing the issue for potential partners is critical. For example, an environmental NGO may be focused on reducing air pollution by promoting public transport. However, it would not take them much to sign on to a petition demanding walking and bicycle lanes that promote physical activity (an NCD intervention), if it could be shown to provide last mile connectivity that would increase the use of public transport that they are championing.

It is important to create spaces for senior leadership of member organisations to ensure commitment and active contributions. This could include inviting them to special events of the alliance or involving them in governance. For instance, the Norwegian NCD Alliance has set up a steering group that brings together the Chief Executive Officers of its member federations who decided on its priorities. The staff from the member organisations follows these decisions through to implementation.



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Develop a shared agenda through strategic planning

The first order of business for a new NCD alliance should be to identify a shared agenda that fits the mandate and interests of its members, while helping them to pursue certain common goals. Envisioning and agreeing to common goals are an important part of forming an NCD alliance. This process benefits from being done in a systematic way through strategic planning that involves its members and other key stakeholders in the external environment.

The process of strategic planning is as important as the plan itself. The key steps in NCD Alliance's (Global) strategic planning process showcases the steps involved and could help inform this [process](#). Here are a few things to keep in mind as alliances embark on strategic planning:

- Engage a broad range of stakeholders internal and external to the alliance
- Create space for a consultative process that allows expression of diverse ideas and views
- Discuss how views of external stakeholders (e.g.: government, private sector) would be addressed in the planning
- Set clear timelines to avoid protracted planning, losing opportunities and delay implementation
- Develop a realistic plan matching alliance capacity, opportunities and timeframe

The South African NCD Alliance adopted an inclusive, bottom-up and participatory process to developing its strategic priorities through a meeting of key stakeholders. Over 100 participants from CSOs, government agencies, research and academic institutions and the private sector undertook a SWOT analysis of the sectors (identifying Strengths, Weaknesses, Opportunities and Threats) and developed a national NCD Action Plan identifying priority areas for collective action. The meeting [report](#) presents the national plan and provides insights to galvanise diverse stakeholders to contribute to alliance planning and action.

Figure 3 shows a strategic planning framework that helps alliances to develop/refine their vision, mission, set goals, assess alliance capacity, develop strategic objectives and activities, as well as indicators to determine if their actions are working. In addition to setting the direction for work, a strategic plan is critical to attract resources to the alliance.



Fig 3. Strategic Planning Framework

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All alliances might not be in a position to undertake the strategic planning as detailed in the figure above, or hire services towards it. The simple strategic planning tool [X14](#) may be used by an alliance, engaging a relatively neutral and well-respected facilitator from within the group with limited resources. If resources permit, the help of a professional strategic planner can be hired to guide the alliance through its planning. A step by step guide to [strategic planning](#) [S6](#) developed by International HIV/AIDS Alliance is referenced among the resources². The draft strategic plan of Uganda NCD Alliance presents the core contents of a plan. See the NCD Alliance Advocacy Toolkit for some great tips and case studies from the field on building consensus-based alliances for NCD advocacy³.

Determine organisational design and governance

These are often considered two of the more daunting tasks in the early days of an alliance. The challenge arises partly from the varying notions members may have about the structure an alliance needs to have and how it is to be governed. It is important that alliances are not overwhelmed by protracted discussions on design and legal status in the initial phase. Instead they could devote the early days to explore diverse partnerships and methods of work through short term goals and campaigns and evolve a shared agenda. On realising some early experience at working together and developing a shared agenda, alliances tend to be in a better place to firm up the overall alliance design and discuss a legal framework. Bearing this in mind, this sub section explores the various components of organisational design and governance that alliances could consider as its members begin to work together.

Organisational design refers to the institutional framework that holds the alliance together and distinguishes it from its environment in which it operates. Governance determines who has power, who makes decisions, how other players make their voice heard and how account is rendered (Institute on Governance, Canada).

Once a shared agenda is developed through strategic planning, the next step is to agree on the kind of organisational design that would help realise it. The mantra to follow is "Form Follows Function"! Figure 4 suggests that the organisational design of alliances usually comprises of:

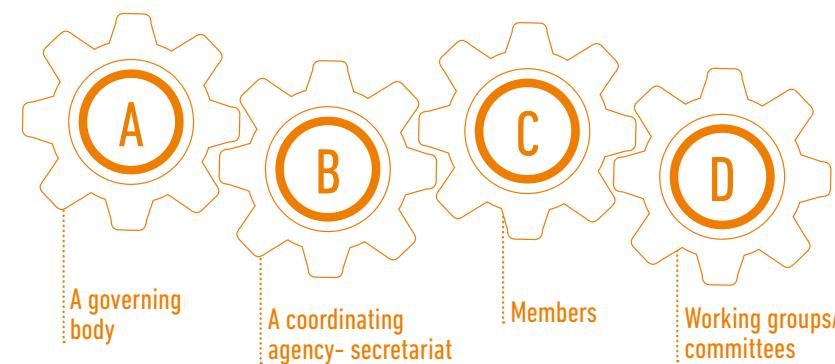


Fig 4. Organisational framework

2 How to develop a Strategic Plan. A tool for NGOs and CBOs. International HIV/AIDS Alliance.

https://www.k4health.org/sites/default/files/Developin_a_strategic_plan.pdf

3 NCD Alliance Advocacy Toolkit. http://www.uicc.org/sites/main/files/atoms/files/NCD_Alliance_Toolkit.pdf



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A. Governing body

Each alliance needs to have a transparent decision making body that offers core governance. Individuals undertake this task in a voluntary capacity, to ensure sustainability. Alliances set up different kinds of decision-making bodies to manage their work. Some have an all-inclusive, flat structure such as a coordination committee, while others have executive committees/steering groups/boards that are either nominated or elected from among the members. This body can comprise of only organisational members of the alliance, only individual members, or both. Some of the commonly found structural models have been described [here](#).

A governing body should:

- Know how well the organisation is meeting its aims
- Recognise and meet legal requirements
- Make strategic and timely decisions
- Explain where, why and how money has been spent
- Provide strong leadership to the alliance
- Treat members fairly and equally

Previous experience has shown the following to be important when determining the alliance decision-making body.

Six questions to help determine the governing body format

What kind of body can:

- 1 Help realise your shared agenda/strategic plan?
- 2 Facilitate swift and effective decision-making in the alliance?
- 3 Leverage contributions and commitments from members?
- 4 Represent key interest groups within the alliance?
- 5 Facilitate access to your external audience?
- 6 Manage the power equations within the alliance?

For example, the Australian Chronic Diseases Prevention Alliance (ACDPA) has a steering group consisting of the Chief Executive Officers (CEOs) of its five constituting members. While ACDPA is not legally registered, its constituent members are all legal associations. The chair is rotated among the members every two years. The member CEOs hold quarterly meetings of the steering group to decide on the strategic matters of the alliance. They also try to help connect the work of their respective membership base with that of ACDPA, where as the government relations officers of these organisations coordinate with ACDPA Executive Officer to implement alliance's advocacy efforts. The members pay fees. Additionally, the chair's organisation houses the alliance and provides operational support.



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On the other hand, most alliances in East Africa are legal entities and consisting of member organisations that are themselves registered. They have formal Boards/Executive committees. For example, Zanzibar NCD Alliance consists of three member organisations (each working on diabetes, cancer and heart associations). Its general body comprising of 10 members from each of the member organisations elects the Chair, vice chair, general secretary and treasurer to its executive committee. Additionally, this committee includes 2 representatives from the member organisations. While the Constitution requires the committee to meet every 3 months, it meets more frequently to provide close oversight over the projects. The general Secretary is involved in the daily functioning of the alliance, and the project manager reports to this position.

The alliances in Latin America have all chosen to remain non-legal, informal coalitions. For example, the Healthy Latin America Alliance has a working group with representatives of those working on tobacco control, consumers rights, cancer and heart issues. The working group functions as an informal group, where in members with advocacy experience across the region come together to assist any country that needs help in their NCD initiatives and work on shared goals. The group recently supported Chile to develop a strategy to counter industry influence on its food policy.

Roles and responsibilities

The governing body will:

- Set and safeguard the vision, values and reputation of the alliance
- Provide strategic, long-term direction to the alliance
- Oversee the performance and integrity of the organisation
- Approve the budget and annual accounts
- Appoint and dismiss the secretariat/chief executive
- Approve and dismiss members following due process
- Establish and dismantle working groups/committees
- Ensure that the alliance meets all its regulatory and statutory obligations
- Manage and support staff and volunteers where applicable

Selection process

Some alliances elect members to their governing body. Others have nominated members. For instance, the Healthy Caribbean Coalition has an elected board, whereas the steering group of the NCD Alliance (Global) selects its own members. The alliances will need to develop a transparent selection process to the governing body. Some good practices in this regard include:

- Define clear criteria and process for representation on the governing body
- Advance announcements about positions and process to join the governing body to all stakeholders
- Equal opportunity for all competent members to be considered for the position
- Clear communication to the candidates and the alliance about the outcomes of the selection
- Mechanism to address concerns about the selection processes



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The governing body sets the long term vision and protect the reputation and values of the alliance. To make a difference, it needs to have proper procedures and policies in place but it also needs to work well as a team and have good internal relationships. An effective governing body will provide good governance and leadership by:

- Understanding their role
- Ensuring delivery of organisational goals
- Work effectively both as individuals and as a team
- Exercising effective control
- Behaving with integrity
- Being open and accountable

Governance

As mentioned above, governance helps determine who has power, who makes decisions, how other players make their voice heard and how account is rendered. Robust alliance governance is essential for legitimacy.

Clear decision making process

As a first step, the governing bodies need to determine the roles and responsibilities of various parts of the alliance. For example, a governing body might decide to promote physical activity through urban planning among its strategic priorities, while it would delegate the campaign details to be worked out by the secretariat and the relevant working group of members.

The decision making processes, for instance, require to clarify the kind of decisions that would be taken at the level of the governing body, what it would need from the secretariat to make these decisions, who would be consulted on its decisions, how consensus be sought and strategic decisions made, the boundaries for compromises and how its decisions would be conveyed to key stakeholders.

The RACI framework (Figure 5) provides a useful tool to determine who will be responsible, accountable, consulted and informed about the governance decisions of an alliance.



Fig 5. RACI Responsibility Chart



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Decision making

Alliances are geared to undertake joint action and to enable this, different options exist for making decisions. Some seek consensual decision-making, whereas others seek majority votes within the governing body and among the members. The voting rules are to be included in the terms of reference for the governing body.

Six steps to building consensus in an alliance

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Governance leadership

NCD alliances follow different approaches to select the leaders of their governing bodies. Some alliances go by seniority and experience, others rotate the leadership at fixed intervals, and still others elect their leaders through ballot. For example, a well-respected, senior medical professional chairs the Nigerian NCD Alliance, whereas the position of chairperson rotates among the founding members of the Uganda NCD Alliance. HCC has provisions to elect its chair and European Chronic Diseases Alliance has the representative of the host organisation serving as its chair.

The Chair of an NCD alliance needs to:

- Enjoy the trust of the governing body, members, secretariat and other stakeholders
- Provide visionary leadership in setting the direction of the alliance
- Facilitate objective and transparent decision making
- Steer all stakeholders towards agreed goals
- Assist and advise the head of the secretariat to ensure smooth running of the organisation

Some good practices in leading governing bodies

Rotational leadership

Where the head/chair of the governing body is changed at fixed terms. This positions the alliance to benefit from the strengths and interests of different members. The Nepal NCD Alliance, for example, rotates its coordinator's position among its members every 2 years. The rotational leadership gains importance particularly in alliances where the governing body is nominated/selected (and not elected). This would help avoid stagnation in leadership as well as potential resentment among members. The alliances with elected governing bodies, might include term limits to the chair's position to encourage diverse leadership.

Co-leadership

Alliances often have co-chairs/co-facilitators instead of a single leader in their effort to keep the structure less hierarchical and more democratic. For instance, both Mexico Salud-Hable and the Uruguay NCD alliance have facilitators steering their work, instead of a single leader.

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United Nations Economic and Social Commission for the Asia and Pacific (UNESCAP) suggests nine characteristics of good governance that can be applied to your alliance (Figure 6).

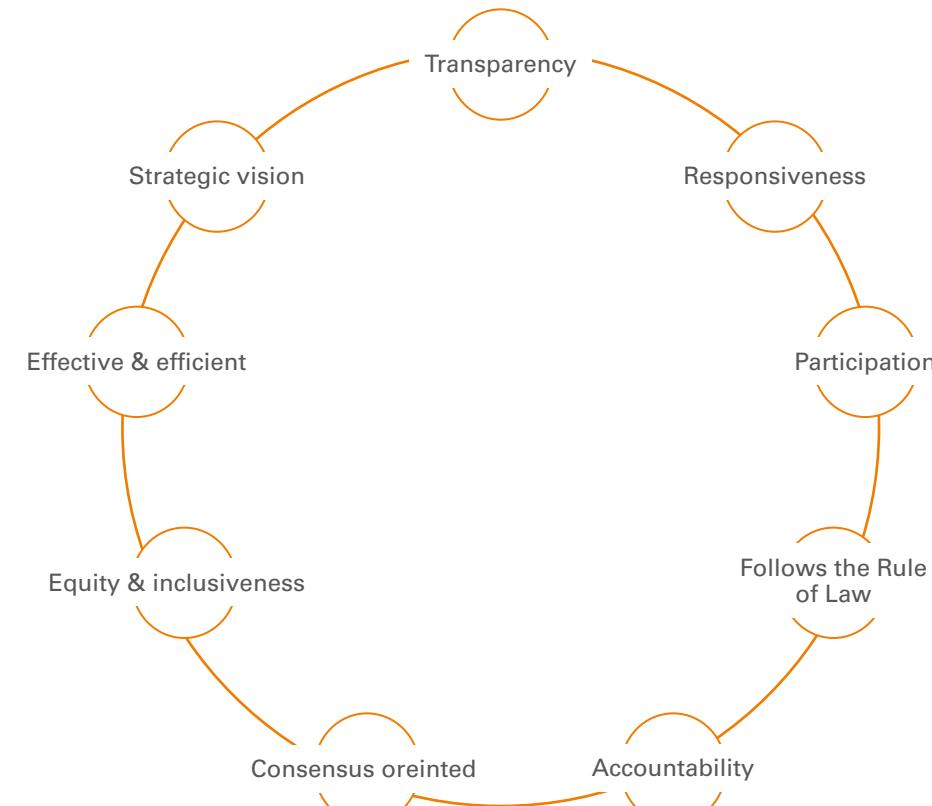


Fig 6. Nine Characteristics of Good Governance

Source: UNESCAP, 2005.



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B. Coordinating agency - secretariat

The work of the alliance and its governing body needs the support of a secretariat with qualified staff. The secretariat can be an independent entity separately located from its members, as in the case of the [South Africa NCD Alliance](#) ([s8](#)). Alternatively, any of the member organisations may offer to provide staff and facilities to serve as the secretariat. Thus, the German NCD Alliance receives secretarial support from the German Diabetes Association, one of its members; the Colombian NCD Alliance is serviced by its member organisation - Educar consumidores.

There are pros and cons to both the approaches. While an independent secretariat may be viewed as neutral and fair in its work with all members, it runs the risk of isolation, failing to understand the contexts of its members and requiring resources for its operation. On the other hand, a secretariat operated by a member organisation may find it challenging to retain its independence (or the perception of it) while benefitting from the host's resources and administrative, legal and staff support.

Alliances could have greater buy-in by having staff housed across key members at strategic locations. This distributed work model could help to keep constant flows of information between the members and the alliance secretariat. At the start of an alliance, the founding members could volunteer the staff time to the alliance. For example, in its early days, a number of organisations dedicated 30% of advocacy staff to the NCD Alliance (global). Currently, the Alliance has some staff housed in member organisations in New York and Geneva, which helps to reach its key target institutions such as the UN and WHO in addition to partnerships with the hosting members.

Irrespective of the nature and location of the secretariat, establish clear and direct lines of reporting from the secretariat to the governing body of the alliance. In most NCD alliances, the head of the secretariat reports to the chair or the general secretary of the governing body.

The Norwegian NCD Alliance and European Chronic Disease Alliance rotate their respective secretariats at fixed intervals. This practice presents equal opportunities to all members, thus helping develop a sense of ownership and contribution among member organisations. It also helps not to overburden the host organisation and avoid any undue influence. However, the practice of rotating secretariat needs to take into account the hosting capacity of members as well as the sustainability and continuity of the work.

Good secretariat practices

- The selection of the secretariat needs to be an informed choice through an open and transparent decision-making process involving as wide a number of participating CSOs
- The secretariat's location, number of years and terms for hosting by any member organisation, and rotation of hosting needs to be agreed upon and captured in the alliance MOU
- The secretariat needs skilled and qualified staff, who can provide managerial, technical, coordination and operational support to the alliance
- Any member organisation hosting the secretariat needs to provide it with an effective operational platform
- Irrespective of its location, the secretariat should work on behalf of all alliance members and be primarily accountable to the governing body of the alliance, and not the host organisation
- The host should not exert undue influence over the secretariat's work plan or mode of operation, or over the alliance as a whole



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- The secretariat should report regularly to the chair/facilitator of the governing body, while meeting administrative and financial requirements of the host organisation
- The secretariat is to share opportunities for resources, representation and collaboration with all alliance members and not be competing with its members

(Adapted from SUN Guide to Establishing A Civil Society Alliance In A SUN Country and experiences of Healthy Caribbean Coalition)⁴.

A sample Terms of Reference of the Secretariat that outlines the Secretariat's key roles and responsibilities can be [found here](#)

The fiscal management is an area where alliances need operational support. In the case of alliances that are not legal entities, the host organisation or a steering group member tend to serve as the fiscal agent. For instance, the financial matters of the European Chronic Disease Alliance are managed by the organisation hosting its secretariat. In the case of NCD Alliance (Global), one of its steering group members serves as its fiscal agent. When alliances are legally registered, fiscal management tends to be a function of the secretariat- either this can be outsourced to another org, or if the secretariat has the expertise it can be done by them. The fiscal role would include maintaining the books of accounts, handling all financial transactions (receipts and payments), preparing management accounts for the governing body and reporting to relevant government bodies.

C. Membership

Members form the core of any alliance, bringing the much needed legitimacy and expertise to meet its goals. Therefore membership considerations need to be an important factor in deciding organisational design and governance. The kind of members that alliances bring to their fold, how they are organised and their roles and responsibilities all need careful consideration.

An early task is to determine the best spaces that can be created for the potential members identified through the member scoping exercises discussed under Section II (2). Organise the members depending on their potential roles and their degree of contribution and association with the alliance (Figure 7). Alliances tend to have different categories of membership by stakeholder types or degree of association. Some may be full members, whereas others may be associate members.

The roles, privileges and responsibilities vary across categories and these should be clearly stated in the alliance MOU/bylaws. For example, a regular member would have full voting rights, whereas an associate member may be restricted from voting in the alliance or participating in its meetings. NCD alliances in high-income countries almost always have a membership fee. This usually goes towards meeting the core expenses of the alliances. On the other hand, those in low-income countries rarely have membership fees, or charge a minimal fee as it is found to place undue burden on member's limited resources.



Fig 7. Membership Circles by degree of association

⁴ SUN Guide to Establishing A Civil Society Alliance In A SUN Country.
<http://scalingupnutrition.org/wp-content/uploads/2013/01/SUN-CSN-Establishing-a-CSA.pdf>



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Role of full members usually include opportunity to:

- Contribute to the development and implementation of the strategic priorities of the alliance
- Elect responsible leadership to the governing body of the alliance
- Offer to facilitate, participate, contribute to the committees/working groups of the alliance
- Contribute to advocacy campaigns, position papers, media initiatives of the alliance
- Bring technical and financial resources to advance the alliance's work
- Ensure transparency and accountability in the alliance

D. Working groups/committees

Alliances, particularly those with a large membership or those intending to address a variety of issues, may set up committees and working groups on operational and thematic matters respectively. On the operational front, there could be committees that look into fundraising, membership matters and such. See how the Uganda NCD Alliance has organised its work through various sub-committees reporting to its [Board here](#)  .

A sample Terms of reference for committees can be accessed [here](#)  .

On the thematic front, there could be working groups, for instance, looking at the response to the individual diseases as distinct from those addressing risk factors. The [sample](#)   Terms of Reference of the Working Groups of the US Round Table drives the point home.

Sample Terms of Reference for working groups can be [found here](#)  .

Aligning organisational structures of members and the alliance

Apart from shared goals and functions, another factor to consider while determining the alliance structure is its match with that of its members. The Malaysian NCD Alliance, for instance, built on the commitment of its early individual supporters and constituted itself as an alliance of individual members. Alliances in Latin America are mostly not legally registered, thus allowing the inclusion of a wide variety of organisational structures and movements that may or may not be legal entities. On the other hand, several alliances in East Africa focused their initial efforts on building organisational structures and capacity of constituent/potential members so that they can interact and function seamlessly with the coalition's legal structure and ensure institutional alignment. This factor gains significance when establishing regional alliances that would need to accommodate the institutional framework of national alliances of varying structures.

The organisational design and the governance of an alliance can be captured in a Memorandum of Understanding (MOU) to be agreed among the members, or in the constitution/bylaws of the organisation. A sample MOU from European Chronic Diseases Alliance (non-legal entity) can be [accessed here](#)   . A sample by laws of Healthy Caribbean Alliance (with a legal entity) can be [found here](#)  .

As alliances think of seeking legal status, consider the points to ponder [here](#)  .



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Types of NCD alliances

No two NCD alliances are the same! As Figure 8 indicates, the alliances come in all shapes and sizes, and serve a wide variety of purposes. Thus, while some alliances have fixed members (e.g. The Norwegian NCD Alliance), others are open to new members (e.g. Uruguay NCD Alliance). Some consist of a handful of members (e.g. Danish NCD Alliance); others have membership running into hundreds of organisations (e.g. Brazil's NCD coalition). Some are meant exclusively for organisations, while others consist of individuals (e.g. Malaysian NCD Alliance) or admit them as well. Some include academic, research and international organisations (e.g. Healthy Caribbean Coalition), while others consist of medical societies (e.g. Chilean NCD Alliance), journalists (e.g. Nepal NCD Alliance) and still others have trade unions and rights-based movements on board (e.g. Mexico NCD Alliance). Some NCD alliances provide for government and/or political representation within their fold (e.g. Bangladesh NCD Forum); others remain strictly non-governmental. Some allow varying degrees of association with the private sector (e.g. NCD Round Table, USA), while many consciously exclude them (e.g. Healthy Latin America Coalition).

Alliances could be limited in purpose and short term in nature. For instance, there could be a campaign coalition working to get a soda tax for the duration of a government budget session. Most known NCD alliances work on a range of issues over several years.

Some alliances are legally registered (such as the Kenya NCD Alliance), almost all in Latin America are informal entities. As the Organogram [here](#) (S14) indicates, some such as the Healthy Caribbean Coalition (HCC) have a hybrid model with a legal entity managing governance, and a broader, informal member base. The NCD Alliance (Global) has a more elaborate structure. It is governed by a steering group, guided by an advisory group, supported by a supporters consultation group, with an extended, informal network of national and regional NCD alliances, a steering group member serving as its fiscal agent – all managed by an operational team spread across countries. The detailed structure of the NCD alliance can be found at: <https://ncdalliance.org/who-we-are/ncd-alliance-structure>

Refer to the recent NCD Civil Society Situational Analysis by the NCD Alliance for a detailed view of the unique features of each alliance, and trends and diversity within the movement⁵.

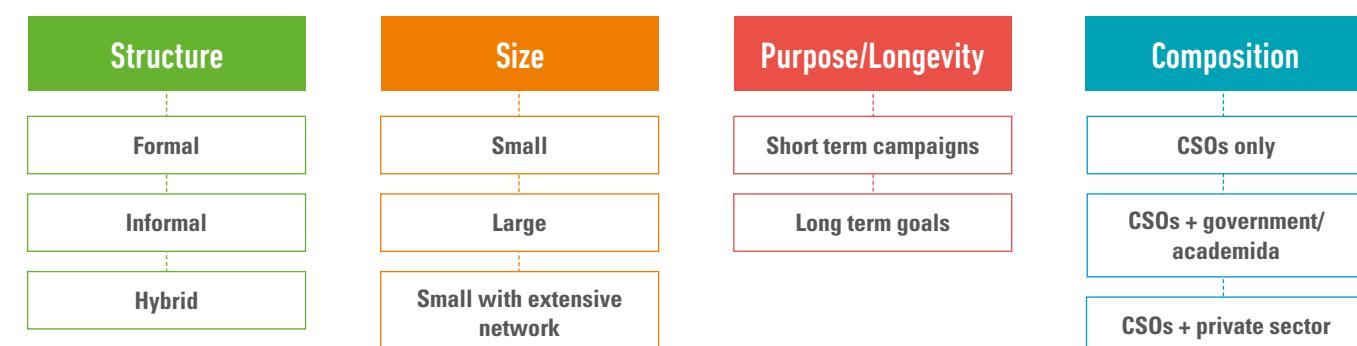


Fig 8. Types of alliances

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Once the basic building blocks of an alliance are put in place, it is time to consider the next steps that would help establish them.

Resource the work of the alliance

Resources are critical to build an effective alliance. As mentioned earlier, the strategic plan constitutes the stepping-stone to resource mobilisation helping to identify priorities for fundraising and indicating organisational intent and direction to potential donors. Figure 9 demonstrates the steps from strategic planning to resource mobilisation. A donor mapping can help identify donors whose funding priorities match with those of the alliance.

Based on the priorities in the resource mobilisation plan, prepare a brief on the potential business opportunities for the alliance and further a business case for openings you intend to pursue. Actively pursue competitive grants and submit proposals where you sense a funding possibility. A sample resource mobilisation plan template can be [accessed here](#)  19. The USAID Resource Mobilisation Implementation Kit provides useful guidance in this regard⁶.

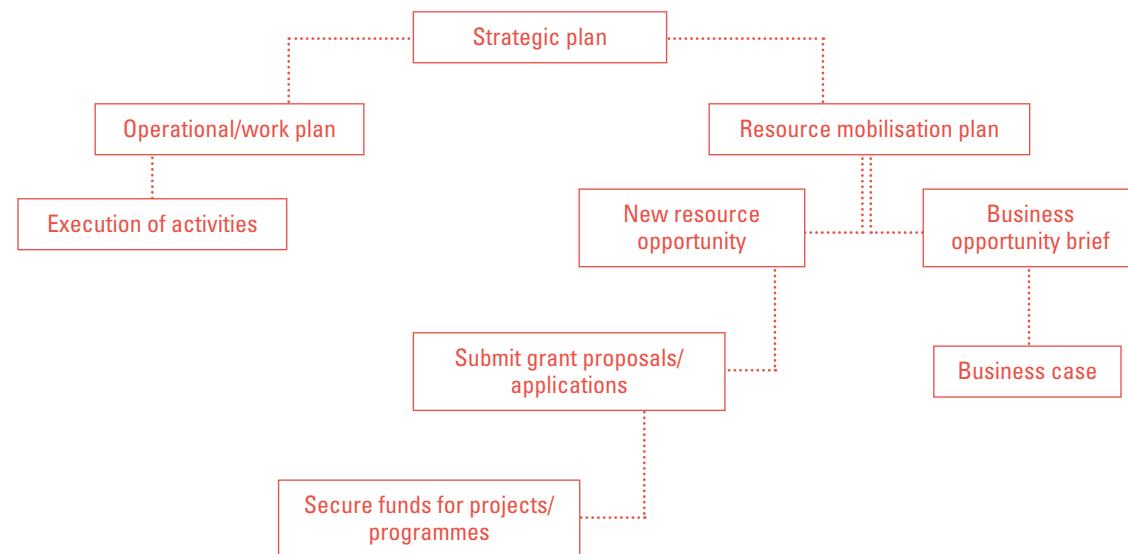


Fig 9. Strategic Plan to Resource Mobilisation

6 Resource Mobilisation Implementation Kit. Health Communication Capacity Collaborative.
<http://sbccimplementationkits.org/resource-mobilization>



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Six questions that can get you started on your resource mobilisation plan

- 1 What are you raising funds for?
- 2 Who in the alliance is responsible for resource mobilisation and are they clear about their roles and expectations?
- 3 Who are your priority donors?
- 4 How will you identify, approach, and cultivate your priority donors and who will do it?
- 5 When will you execute your action steps?
- 6 Systems - what kinds of practical systems do you need in place to support your RM efforts?

Here is a sample [🔗 S15](#) workplan from Healthy India Alliance that showcases its priorities for funding in the first year.

Build legitimacy and credibility

NCD alliances need to build credibility with the public they represent and legitimacy with the governments and other stakeholders they work with. Nothing works like “early wins” in building credibility with the various players in the external environment of an alliance. The “early wins” could be in terms of successful campaigns, organising an innovative event, building a functional partnership or even securing a grant.

The four pillars of credibility are captured in [Figure 10](#) [🔗 S16](#). While good governance ensures effective and accountable decision making, transparency brings in open processes and public disclosures, accountability places responsibility to act as per commitments and expectations and legitimacy ensures that activities and impact of the alliance relate to its core values. Refer to a PowerPoint presentation by the Danish NCD Alliance that elaborates upon these concepts.

The US NCD Round Table has a set of [principles](#) [🔗 S17](#) of transparency, accountability and integrity that its members comply with. Consider the Frequently Asked Questions on alliance transparency [here](#) [🔗 S18](#).



Fig 10. Pillars of Credibility



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Some key ways to build legitimacy and **credibility include:**

- **Clarity of vision** and unity in mission
- **Evidence-based** advocacy
- **Involvement** of people living with NCDs
- **Consistent, unified** messaging
- **Publishing** reports and accounts
- **Identify, monitor** and **address** conflict of **interests**

Managing conflict of interest

Of the measures that can affect civil society credibility, real or perceived conflicts of interest are particularly important for NCD alliances to manage and address. This is on account of the role private sector plays both in contributing and responding to the NCD epidemic.

Definition: Conflicts of interest are circumstances that create a risk that professional judgment or actions regarding a primary interest will be unduly influenced by a secondary interest. These occur when someone has multiple relationships or connections, which could keep them from being independent in thought, action, or opinion. This could happen at the level of the governing body, staff, members or the interactions, positions and partnerships of an alliance as a whole. A perception of a conflict of interest can be just as significant as an actual conflict of interest.

Implications of conflict of interest

- Compromises goals, agenda and positions
- Lowers trust among members that challenges joint action
- Causes an NCD Alliance to lose credibility with the public and scope to represent public interest
- Affects an NCD alliance's legitimacy with policy makers and blunts the advocacy edge



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Reducing risk of conflict of interest

NCD alliances can put systems in place to mitigate the risk of real or perceived conflict of interest. Alliances can require members to submit disclosure forms in line with the alliance conflict of interest policy. A membership can conduct due diligence of applications before admitting members. A disclosure form cum due diligence checklist [is available here](#) .

In the event of perceived or real [conflicts of interest](#) , here's a flow chart that demonstrates the process to address them.

How to prevent conflict of interest?

- Include transparency, accountability among organisational values and principles
- Develop and implement a conflict of interest policy
- Require due diligence and full disclosure of potential conflict of interest from all members and partnerships
- Institute a model code of conduct for members

Some of the issues a **Model Code of Conduct for the members** on interactions with the private sector could address are:

- Positions of the alliance, including about partnerships
- Meetings outside the public domain
- Resources for projects
- Sharing platforms
- Co-branding, co-publishing
- Using private sector research
- Staff recruitments
- Policy on acceptance of gifts

Detailed guidance and tools specific to conflict of interest will be available soon.



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Communicating internally and externally

The NCD alliance's communications need to address both internal and external audience.

The internal audience primarily involves the governing body and the members. All governing body communication needs to be held in confidence and duly recorded. It would typically comprise of governance and fiduciary matters, work of sub committees and working groups, operational updates from the secretariat, decisions taken, follow up actions and any other matter that its members find relevant to address. Communication to the members needs to include timely updates of the decisions and actions of the alliance, as well as alerts regarding opportunities for action and collaboration. Alliances often set up email lists, messaging groups and conference calls for internal communication.

External communication is meant to convey an alliance's message to stakeholders in the external environment. NCD alliances use a variety of media platforms to broadcast their messages. The South African NCD alliance updates its members of their activities through periodic newsletters. Mexico Salud-Hable uses Twitter to elicit support for its campaigns. Alliances regularly use print and television, sometimes as a way of responding to opposition to alliance positions.

A detailed communication plan in line with the alliance's strategic plan, that aligns its key messages with influential messengers in appropriate media platforms, needs to be developed to address both internal and external communication. A communication plan template can be found [here](#) X13.

Ensuring accountability

The public interest nature of the causes that NCD alliances espouse calls for accountability to the primary constituency they represent - the public. This can be done formally through annual reports. Social media and alliance website can also be used strategically to communicate its major activities and plans to the stakeholders.

The alliances would also want to monitor their own progress in implementing the strategic plan and evaluate progress. Additionally, they may have reporting requirements to the registration/licensing authorities in the country in which they operate and to donors. It is important that alliances monitor and communicate their work to the relevant stakeholders and regulators.

Internal Financial controls is a key means to ensuring accountability in alliances. The controls need to apply to the governing body to ensure accountability to its members or the general body. It also needs to apply to secretariat and/or fiscal agent to ensure accountability to the governing body.

Controls within the Board

Financial transparency demands the roles and responsibilities of the governing body and the secretariat are clearly delineated. For instance, it is not advisable for the treasurer of an alliance to double up as its accountant. In alliances with limited staff support, where governing body steps in to manage operations including resources, it is important to have co-signatories from the board approving expenses by the treasurer or any other member of the body. As the alliance represents the collective resources of its members held in trust, it is important that expenses by board members (if any) are discussed and decided by the governing body. For example, any travel of board members (including Chair and other office bearers) on behalf of the alliance need to be approved by the entire board. As such all expenses are to be within the approved budget of the alliance. The governing body therefore needs to approve annual budgets towards alliance expense.



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Controls over the secretariat

The Head of the secretariat may be delegated to make payments upto a certain threshold towards alliance operations as per approved budget. It is also a good practice to set thresholds for pre-approvals and signatures by the governing body for expenses and payments exceeding certain value. Where the secretariat is located within a member organisation, it will be good to involve the alliance treasurer or a member of the governing body in the oversight over alliance resources. It is strongly encouraged to maintain separate bank accounts for the alliance, irrespective of hosting arrangements.

The records of expenses along with their supporting documents be maintained as required by national audit laws. The secretariat needs to submit the alliance accounts for annual audits, which needs to be reviewed and adopted by the general body or the governing body as the case may be. Regular financial update from the secretariat is critical for the governing body to make informed and sound financial decisions on behalf of the alliance.

Some of **the areas** that require regular monitoring are:

Areas for monitoring	Relevant documents
Functioning of the governing body	MOU Minutes of meetings Strategic Plan
Work of the secretariat	Workplan Reports to governing body Reports to regulatory authorities
Efficiency of working groups/committees	Reports Plans Outcome documents
Advocacy campaigns and events	Campaign plans, event reports
Communication	Media releases Social media reports Newsletters
Strategic plan and operational plan	Annual report Financial report
Resource mobilisation plan	Fund raising report
Service delivery	Programme report Expenses report

A PowerPoint used by NCD alliances in East Africa to orient members on internal control procedures can be found [here](#) S18.



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Capacity building of members

An alliance is the sum of its parts! The greater the capacity of its members, the more effective the alliance will be in its efforts. The SWOT analysis recommended under strategic planning can help identify areas for strengthening member capacity. While extensive capacity building initiatives can evolve over a period of time, some areas for early orientation include:

- national/regional NCD action plans
- good governance practices for alliances
- organisational development of members
- resource mobilisation strategies

Several NCD alliances in East Africa undertook detailed capacity building initiatives with members in their early days of formation. In Uganda, the alliance members began by familiarising themselves with good governance practices and then proceeded to adjust their organisational structures to meet their collective focus on patient advocacy. For instance, the Heart Association, which formerly consisted solely of medical professionals, was reorganised as Heart Research Foundation to accommodate CSOs and undertake research and advocacy on patient issues. The Zanzibar NCD alliance conducted a three-day fund raising training for its members that helped them develop resource mobilisation plan.



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REGIONAL ALLIANCES

The East Africa NCD alliance (EANCDA), Healthy Caribbean Coalition (HCC), European Chronic Disease Alliance (ECDA) and Healthy Latin America Coalition (HLAC) are four active regional NCD alliances, with a fifth one emerging in the ASEAN region. Establishing and sustaining regional alliances present unique challenges and call for specific approaches. Some of these challenges and approaches are listed below.

Challenges

- 1 Identifying an alliance structure that can accommodate the organisational framework of country alliances
- 2 Determining the membership of regional alliance
- 3 Managing countries of varying population, size and power
- 4 Addressing diverse priorities, principles and practices
- 5 Sharing limited resources

Strategies

- | |
|--|
| EANCDA addresses this by building institutional framework and running capacity building workshops for country alliances. |
| HCC has health NGOs from 16 Caribbean countries as its voting members, with non-health NGOs, academia, private sector, individuals and international organisations accommodated in various membership categories. |
| ECDA exclusively permits European organisations related to chronic diseases with activities in Europe to be its members. |
| ASEAN NCD Alliance has been considering if it should recruit only regional members of the federations that constitute the global NCD Alliance or if it needs to additionally include alliances that are emerging in countries across the region. |
| Latin America has countries and NCD alliances of different size within its fold. HLAC addresses this by admitting CSOs and individuals working on NCDs in countries across the region. Its organising committee has representatives from heart, tobacco, cancer and consumer groups. |
| HCC addressed this by developing a strategic plan that represents the shared agenda of the country alliances. The plan was developed through survey among key stakeholders and a large consultation meeting with its members from 16 countries, consolidated by a drafting group. |
| ECDA members jointly develop and implement an advocacy strategy that is reviewed annually. |
| HCC runs competitive grants that provides equal opportunities for its members from different countries. It also works with country partners to identify funding opportunities specifically available to them. |



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**SAMPLE 2**

Potential Partners

**SAMPLE 3**

Membership recruitment workshop agenda of Zanzibar NCD Alliance.

**SAMPLE 4**

Strategic Planning Process of NCDA

**SAMPLE 5**

SANCDA National NCDs Stakeholders Meeting Report

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UNCDA draft strategic plan

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Hybrid Governance Structure of HCC

**SAMPLE 16**

DNCDA PowerPoint on Legitimacy- Transparency-Accountability

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US NCD Round Table Principles

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DNCDA PowerPoint on Internal control



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Group Development Stages and tools



TOOL 2

Stakeholder Assessment Matrix



TOOL 3

Make the Case Tool



TOOL 4

Strategic planning questions



TOOL 5

Steps to building consensus



TOOL 6

TOR Committees



TOOL 7

TOR Working Groups



TOOL 8

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TOOL 9

Resource Mobilisation Plan



TOOL 10

FAQs on transparency



TOOL 11

Disclosure Form cum Due Diligence checklist



TOOL 12

Conflict of Interest Management Flow Chart



TOOL 13

Communication plan template