ACKNOWLEDGEMENTS

This NCD Alliance report on the Advocacy Institute 2017-2019 is based on the contributions from the 14 national NCD alliances who participated in the Seed and Accelerator programmes during this period. Thank you to all the alliance representatives who responded to the online evaluation survey and shared information for the case studies showcased in this report. This report was conceptualised, managed and edited by NCD Alliance’s Luis Manuel Encarnacion, Cristina Parsons Perez and Katie Dain. Alena Matzke (an external consultant) analysed the survey data, developed the case studies and wrote the report. Editorial coordination was done by Jimena Márquez and graphic design and production was done by Mar Nieto.
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SECTION I
The NCD Alliance’s Advocacy Institute

Introduction

Reducing the burden of non-communicable diseases (NCDs) is essential to ending extreme poverty, reducing inequality, and improving health and wellbeing. Over the last 10 years, significant global traction has been achieved. This includes political commitments resulting from the 2011, 2014 and 2018 United Nations (UN) High-Level Meetings on NCDs, the inclusion of NCDs in the 2030 Agenda for Sustainable Development, the 2025 and 2030 global targets for NCDs, and the World Health Organization (WHO) Global NCD Action Plan 2013-2020 with its associated recommended best-buys and cost-effective policy interventions. However, progress at the local level has been slow. A whole of society approach is needed to address the sizable challenge posed by NCDs and to step up and translate global commitments to national action. A vibrant and strong civil society capable of delivering on its main roles (advocacy, awareness, access and accountability) is an essential component of this approach.

NCD alliances of civil society organisations at national and regional levels have emerged over the last decade, bringing together disease and risk factor groups for joint advocacy action and coalescing around a shared NCD agenda. These alliances are conducting policy advocacy, raising awareness and public demand, and holding decision makers and key stakeholders to account. In 2019, there were 65 national and regional NCD alliances across the world. They serve as platforms for coordinated civil society action and it is the NCD Alliance’s (NCDA) belief that they are a fundamental element in fast-tracking the NCD response at national and regional levels.

NCDA’s strategic plan includes a capacity development strategic pillar with a view to strengthen the capacity of NCD civil society organisations and alliances at the national and regional levels. The NCDA launched the Advocacy Institute in 2017, as its flagship capacity development initiative to support civil society coalition building and advocacy in low-and-middle income countries (LMICs). This report shares results achieved during the first phase of the Institute spanning from 2017 to 2019.

The Advocacy Institute

NCDA’s Advocacy Institute supports and strengthens national and regional NCD civil society. The NCD Advocacy Institute Seed Programme supports the establishment of NCD civil society networks in countries/regions where these are non-existent or nascent and the Accelerator Programme works with established NCD alliances in countries/regions to strengthen advocacy efforts where there are windows of opportunity for specific policy change.

The Advocacy Institute’s first phase consisted of a three-year cycle, starting in 2017 and ending in 2019. During this first phase, nine NCD alliances participated in the Seed Programme and other five participated in the Accelerator Programme. NCDA supported the Advocacy Institute first phase via core funding and over the years sought to engage additional partners to increase programme investment.

The Advocacy Institute promotes a people-centred approach to affect policy change, in support of healthier environments and equitable health systems. Its programmes are based on evidence and global best practice, and focus on both process and outcomes, to support coalition building and context-specific, impact-driven advocacy campaigns. The Institute offers a platform for specific NCD alliances to increase their engagement in regional and global advocacy processes, such as the UN High-Level Meetings and World Health Assembly, thus furthering alliances’ own efforts at the national levels.

1 Grant funding for ACT Health Promotion (2017), South Africa NCDs Alliance (2017), and the Healthy India Alliance (2017 and 2018) was possible thanks to NCDA Alliance’s partnership with Medtronic Foundation. Participation of the Ghana NCD Alliance at the Advocacy Institute Workshop in 2018 was possible thanks to NCDA Alliance’s partnership with Access Accelerated.
The Seed Programme

The NCDA’s Advocacy Institute Seed Programme promotes and supports coalition building and establishes the foundations for effective NCD advocacy through in-person trainings around major global milestones, webinars, tailored technical assistance, peer support, as well as annual seed grants.

**The Seed Programme aims to achieve:**

→ Functional NCD alliances with effective and sustainable organisational design and governance, and basic strategic plans;

→ NCD alliances that include advocacy in their mission, demonstrate an understanding of national policy gaps and advocacy opportunities, and engage in advocacy activities;

→ NCD alliances that are knowledgeable of global, regional and national NCD policy processes.

The Accelerator Programme

The NCDA’s Advocacy Institute Accelerator Programme seeks to increase the capacity of established NCD alliances to drive effective in-country NCD advocacy. It does this through in-person workshops around major global milestones, webinars, tailored technical assistance, tailored capacity building based on an alliance capacity assessment, expert and peer support, as well as annual accelerator grants.

**The Accelerator Programme aims to achieve:**

→ Advocacy successes and early policy wins, including raised visibility of NCDs, constructive relationships with policy makers, and incremental gains in policy development;

→ NCD alliances with increased legitimacy and relevance, including increased advocacy capacity, involvement of non-health actors and grassroots mobilisation (including people living with NCDs and youth), and ability to quickly respond to opportunities/threats;

→ NCD alliances that are knowledgeable of and actively involved in global and regional NCD policy processes;

→ NCD alliances that are actively involved with the broader community of national and regional alliances.

“The Advocacy Institute Accelerator Programme is true to its name [...]. Before, many had the vision of a coalition to advocate for NCDs: we talked about it, and that is where it stopped. By providing a framework and structure through financial and technical support, our mission became coherent and robust. Our fledgling plans were skilfully shaped and became concrete. People-centred NCD prevention and care is on the South African health policy agenda through this Advocacy Institute’s work”.

— South African NCD Alliance
### Meet the alliances

The Seed and Accelerator Programmes 2017-2019 supported a total of 14 national NCD alliances, selected based on a set of criteria, including countries from LMI settings, a high NCD burden, civil society readiness, and opportunities for policy change and/or coalition building.

The alliances come from four continents, and have diverse memberships ranging from smaller alliances of just four members to networks of more than 50 members. A total of nine NCD alliances were supported via the Seed Programme, of which six alliances were founded during the programme. The Accelerator Programme supported five established alliances. At the core of the alliances’ activities is the coordination of civil society action, the promotion of meaningful involvement of people living with NCDs (PLWNCDs), and direct policy advocacy with government agencies, legislators and/or parliamentarians.

### SEED PROGRAMME

#### Egyptian NCD Alliance

<table>
<thead>
<tr>
<th>Country</th>
<th>Egypt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year formed</td>
<td>2018</td>
</tr>
<tr>
<td>Number of members</td>
<td>19</td>
</tr>
</tbody>
</table>

**Main focus areas**

Coordinating civil society action; Capacity building of NGOs; Direct policy advocacy with government agencies, legislators and/or parliamentarians

#### Ghana NCD Alliance

<table>
<thead>
<tr>
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<th>Ghana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year formed</td>
<td>2017</td>
</tr>
<tr>
<td>Number of members</td>
<td>12</td>
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</table>

**Main focus areas**

Public education and awareness on NCDs and risk factors; Direct policy advocacy with government agencies, legislators and/or parliamentarians

#### Ghana NCD Alliance

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Year formed</td>
<td>2017</td>
</tr>
<tr>
<td>Number of members</td>
<td>12</td>
</tr>
</tbody>
</table>

**Main focus areas**

Public education and awareness on NCDs and risk factors; Promoting meaningful involvement of people living with NCDs; Direct policy advocacy with government agencies, legislators and/or parliamentarians

#### Healthy Philippines Alliance

<table>
<thead>
<tr>
<th>Country</th>
<th>Philippines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year formed</td>
<td>2018</td>
</tr>
<tr>
<td>Number of members</td>
<td>15</td>
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**Main focus areas**

Coordinating civil society action; Promoting meaningful involvement of people living with NCDs; Direct policy advocacy with government agencies, legislators and/or parliamentarians

#### NCD Alliance Indonesia

<table>
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<tr>
<th>Country</th>
<th>Indonesia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year formed</td>
<td>2010</td>
</tr>
<tr>
<td>Number of members</td>
<td>18</td>
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</table>

**Main focus areas**

Coordinating civil society action; Public education and awareness on NCDs and risk factors; Direct policy advocacy with government agencies, legislators and/or parliamentarians

#### NCD Alliance Myanmar

<table>
<thead>
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<tbody>
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<tr>
<td>Number of members</td>
<td>18</td>
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</tbody>
</table>

**Main focus areas**

Public education and awareness on NCDs and risk factors; Direct policy advocacy with government agencies, legislators and/or parliamentarians; Promoting meaningful involvement of people living with NCDs

#### NCD Alliance Nigeria

<table>
<thead>
<tr>
<th>Country</th>
<th>Nigeria</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
<tr>
<td>Number of members</td>
<td>30</td>
</tr>
</tbody>
</table>

**Main focus areas**

Coordinating civil society action; NCD-related research and knowledge generation; Public education and awareness on NCDs and risk factors
<table>
<thead>
<tr>
<th><strong>Malaysian NCD Alliance</strong></th>
<th><strong>Healthy India Alliance</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Country</strong></td>
<td>Malaysia</td>
</tr>
<tr>
<td><strong>Year formed</strong></td>
<td>2017</td>
</tr>
<tr>
<td><strong>Number of members</strong></td>
<td>23</td>
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<tr>
<td><strong>Main focus areas</strong></td>
<td>Coordinating civil society action; Promoting meaningful involvement of youth; Capacity building of NGOs</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th><strong>Mozambican Alliance for the Fight Against NCDs (Aliança Moçambicana de Luta Contra Doenças Não Transmissíveis)</strong></th>
<th><strong>Colombian Table for Advocacy on NCDs (Mesa Colombiana de Incidencia por las Enfermedades Crónicas)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Country</strong></td>
<td>Mozambique</td>
</tr>
<tr>
<td><strong>Year formed</strong></td>
<td>2018</td>
</tr>
<tr>
<td><strong>Number of members</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>Main focus areas</strong></td>
<td>Coordinating civil society action; Public education and awareness on NCDs and risk factors; Direct policy advocacy with government agencies, legislators and/or parliamentarians</td>
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<table>
<thead>
<tr>
<th><strong>Vietnam Non-communicable Diseases Prevention and Control Alliance (NCDs-VN)</strong></th>
<th><strong>Mexico Salud-Hable Coalition (Coalición México Salud-Hable)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Country</strong></td>
<td>Vietnam</td>
</tr>
<tr>
<td><strong>Year formed</strong></td>
<td>2015</td>
</tr>
<tr>
<td><strong>Number of members</strong></td>
<td>18</td>
</tr>
<tr>
<td><strong>Main focus areas</strong></td>
<td>Capacity building of NGOs; Promoting meaningful involvement of people living with NCDs; Advocacy using media (e.g. press conferences/ releases/ media trainings)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>ACCELERATOR PROGRAMME</strong></th>
<th><strong>South African NCDs Alliance</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ACT Health Promotion (ACT Promoção da Saúde)</strong></td>
<td><strong>Country</strong></td>
</tr>
<tr>
<td><strong>Country</strong></td>
<td>Brazil</td>
</tr>
<tr>
<td><strong>Year formed</strong></td>
<td>2006</td>
</tr>
<tr>
<td><strong>Number of members</strong></td>
<td>More than 50</td>
</tr>
<tr>
<td><strong>Main focus areas</strong></td>
<td>Coordinating civil society action; Advocacy using media; Monitoring government’s NCD commitments</td>
</tr>
</tbody>
</table>
The Advocacy Institute Seed and Accelerator Programmes 2017-2019 have proven to be effective in the formation of new NCD alliances, the strengthening of existing ones, the development of strategic advocacy campaigns and the achievement of relevant policy wins. To help assess its impact, the NCD Alliance has documented key activities from the first phase, as well as conducted an evaluation in October 2019 based on survey responses collected from 13 of the 14 participating alliances. A summary of key results from this first phase are presented in this section.

The Advocacy Institute achieves core objectives

“NCDA’s Advocacy Institute has been extremely valuable for HIA. It has enabled us to spread our wings as a national NCD alliance, given us a strong platform to engage with multiple government and non-government partners, and be a unified voice for [civil society organisation], [people living with NCDs] and young people, on key NCD issues, at the national and sub-national levels”.
– Healthy India Alliance

The majority of Seed and Accelerator Programme alliances (92%) indicated that the programmes have effectively encouraged civil society coalition building. The same percentage of alliances reported that the Advocacy Institute helped them achieve advocacy wins or strengthen advocacy efforts in their countries, suggesting that the Institute was able to fulfil its key objectives.

Almost all alliances (85%) now have a clear and strategic advocacy agenda, and all have a clear understanding of NCD policies and processes in their country. The majority of alliances (85%) indicated that they were able to increase their knowledge base and ability to promote relevant NCD prevention and/or control policies, and 85% of alliances indicated they had strengthened strategic multisectoral relationships, including with decision-makers.

During the Institute’s first phase, the NCDA supported and offered technical assistance for the development of exemplary advocacy and community building campaigns, some leading to advocacy wins. In terms of campaigns, the Mexico Salud-Hable Coalition carried out the #VotoSaludable (#HealthyVote) digital campaign positioning the lack of NCD and health-focus in the 2018 presidential election campaign; and the Healthy India Alliance carried out a regional strategy to convene, mobilise and meaningfully involve people living with NCDs and youth from the country’s different regions in its strategic planning. In terms of policy wins, two Seed alliances achieved important advocacy successes. The NCDs-Vietnam successfully advocated for a national alcohol control law that was approved by the National Assembly in June 2019, and the Healthy Philippines Alliance advocated for a national UHC law that was approved in April 2019 supported by the President. More information about these efforts are presented in the case studies in Section III of this report.

The Advocacy Institute strengthens alliances’ coalition building efforts

“The Advocacy Institute kick-started the formation of the Malaysian NCD Alliance, enabled us to unite civil society organisations across the country, and empowered us to carry out more effective and impactful work in advocacy”.
– Malaysian NCD Alliance

The Seed Programme saw the maturation of the nascent alliance in Vietnam, the relaunch of NCD Alliance Indonesia and saw the founding of 6 alliances (Ghana NCD Alliance, Malaysian NCD Alliance, Egyptian NCD Alliance, Healthy Philippines Alliance,
Among alliances participating in the Seed Programme, the formation of the alliance was rated as the number one achievement, closely followed by the expansion and mobilisation of their networks, which were core objectives of the Programme. Alliances also cited increased media coverage of NCDs and improved human, technical and financial capacity among their top achievements.

“The Seed Programme was fundamental for the creation and dissemination of our alliance, we get technical support when we reach for help and encouragement when needed.” – Mozambican Alliance for the Fight Against NCDs

Seed Programme alliances highlighted that the Advocacy Institute empowered and accelerated the formation and/or expansion of their alliance, and equipped them with tools and best practice to effectively coordinate alliances and increase commitment and synergistic action across the alliances’ membership. Alliances also emphasised the value of the convening power of the Institute, in terms of facilitating opportunities to engage and collaborate with a variety of actors at the national level, including government, media, research institutes and academia, the WHO and UN agencies, and legislators at state and federal governing bodies.

Alliances participating in the Accelerator Programme emphasised the usefulness of the Advocacy Institute’s capacity assessment process supported by the NCDA to help them identify specific capacity development needs and areas for action. Alliances also highlighted the formalising of their work through grant support, acquiring an increased focus through annual strategic planning, and building partnerships with a long term view. Alliances valued the safe space that the institute has provided, in order to work out organisational priorities within their country’s NCD response, as well as the 2030 Agenda for Sustainable Development.

The Advocacy Institute scales up alliances’ advocacy efforts

“The Advocacy Institute arrived to fill a large gap of human, technical and economic resources [...]. We managed to project ourselves in front of the Congress of the Republic and the Ministry of Health with stronger political advocacy proposals. We managed to mobilise in particular the most organised and influential patient association in the country. We managed to initiate a research process on the mechanisms that the industry uses to prevent public health policies in preventing NCDs from being approved.” – Colombian Table for Advocacy on NCDs

Both Seed and Accelerator Programme alliances highlighted that their participation in the NCD Advocacy Institute helped them position themselves as legitimate, respected, credible and a strong civil society voice on NCDs.

Alliances in the Accelerator Programme highlighted enhanced public involvement in NCD issues (including PLWNCDS and youth), increased awareness and readiness among policy makers to act on NCDs, and improved civil society involvement in NCD policy development and decision making, among their top achievements.
Through its training, resources and technical assistance, the Advocacy Institute equipped alliances with increased knowledge and skills that they could apply to their advocacy and policy work, including how to organise and execute a campaign, how to strategically engage other health and non-health civil society organisation (CSOs), and how to leverage social and traditional media. In particular, alliances highlighted the value of the Institute’s support in widely consulting PLWNCDS and their communities, and consequently using this data as the basis of their advocacy and policy work.

What challenges did alliances face?

Although much progress has been achieved, it’s important to highlight the challenges that alliances faced. These include administrative hurdles to becoming legal entities (where required by national regulations), industry interference with policymaking, or sustaining meaningful involvement and managing the diverse interests of alliance members.

A remaining area of opportunity is addressing alliances’ financial sustainability. Only one third of all alliances indicated being financially sustainable beyond its participation in the Advocacy Institute. Encouragingly, one alliance described being able to capitalise on the Institute’s training and resources to attract development funding to train other civil society organisations in their country.

Across both Seed and Accelerator Programmes, the financial resources provided in the form of grants were a critical factor for most alliances in actualising and maintaining the work of their coalitions.

Trainings & technical assistance address capacity needs and facilitate direct advocacy experience

The Institute organised a total of four in-person trainings on the sidelines of major global advocacy moments. These in-person trainings were highly valued by participating alliances. Alliances learnt from the experiences and best practices of other alliances and gained a better understanding of the connections between global and national advocacy opportunities. The trainings honed alliances’ skills and abilities in both advocacy and campaign planning, as well as coalition building.

Through the course of its first phase, the Institute convened two Seed Programme trainings, one in Jakarta, Indonesia in July 2017 in preparation to the 2018 UN High-Level Meeting on NCDs, and the second one in Geneva, Switzerland in May 2018 around the World Health Assembly, promoting greater civil society efforts and presence at the global level. Alliances’ representatives were able to learn more about the global NCD landscape, and strengthen their skills and knowledge on coalition building, strategic planning and campaign planning. Through these trainings participating alliances also benefitted from NCDA’s expertise on civil society development and advocacy, as well as from the convening power of NCDA’s network by increasing peer-to-peer knowledge sharing.

The Institute convened two Accelerator Programme trainings aimed at promoting the increased involvement of national advocates in global NCD policy processes and strengthening links between global and
The Advocacy Institute 2017-2019: Our impact

National advocacy. The first one took place in Geneva on the margins of the World Health Assembly in May 2017, and the second one in New York City, United States in July 2018 enabling alliances to participate in the UN Interactive Hearing in preparation for the 2018 UN High-Level Meeting on NCDs. These two trainings allowed alliances to benefit from the content of the workshops (which covered the relevant UN/WHO processes), and to experience global fora, related side events and even interact with country missions. For example, as a result of this interaction, the Mexico Salud-Hable Coalition was invited to join the country delegation to the 2018 UN High-Level Meeting on NCDs.

In addition to in-person trainings, alliances in the Seed and Accelerator Programmes, as well as the broader network of alliances, have accessed technical assistance on specific capacity needs, which has proven to be a critical component of the Institute. Seed and Accelerator alliances highly valued tailored assistance, with a particular highlight for the accelerator alliance capacity assessments and corresponding capacity development support. Both Seed and Accelerator alliances acknowledged receiving timely, strategic and useful technical assistance from the NCD Alliance when requested.

**Tailored capacity assessment of NCD alliances**

Starting in 2017, NCDA developed with the support of Global Health Visions a tailored capacity assessment tool for NCD alliances, measuring key advocacy coalition functions to identify strengths and weaknesses and assisting alliances in developing a plan of action to build on its assets and address gaps in capacity. The process involves a self-assessment by alliance leadership, a member survey, a review of key alliance documents, a facilitated discussion of results with an external consultant and a final summary report with recommendations and action plan, as well as a small seed grant to address priority actions. NCDA supported the five Accelerator alliances to implement the tool.

Key coalition functions measured in the capacity assessment tool are: Alliance Functioning and Structure (leadership and governance, membership, involvement, and reciprocity, sustainability and resource mobilization), Policy Advocacy (objectives, allies, and access, alliance expertise, advocacy planning and activities), Communications, Messaging, and Public Visibility (communications strategy, messaging and messengers, public visibility), Monitoring, Learning, and Evaluation.

Additionally, in an effort to expand the reach of NCDA’s expertise and provide a platform for knowledge sharing between alliances, and as a benefit for its members, the NCDA launched the Advocacy Institute Webinar Series in 2019, with three webinars on strategic planning, communication strategies and sustainability. For these webinars, representatives from alliances across the network were invited to share their experiences, successes and lessons learnt, becoming an attractive resource for alliances to learn about others’ work and to connect with them more directly.

"Overall, the Advocacy Institute programmes are an incredible learning array of engaging learning experiences that broaden the participants skills and knowledge to advocate for NCDs prevention and care."– Advocacy Institute alliance representative
SECTION III
Case studies from Advocacy Institute alliances

This section presents exemplary case studies illustrating the work and impact of six alliances that were supported by the Advocacy Institute in 2017-2019.

SEED PROGRAMME

CASE STUDY 1

Healthy Philippines Alliances
Putting health promotion at the heart of the national Universal Health Care Act

The Healthy Philippines Alliance (HPA) was founded in 2018 through the initiative of Health Justice Philippines. The alliance brings together 15 members and has been focusing on joint advocacy for health-promoting public and fiscal policies. HPA was supported by the Seed Programme.
SECTION III
Case studies from Advocacy Institute alliances

THE ISSUE
Universal Health Care (UHC) was first proposed for inclusion in the national agenda of the Filipino government in 2009. Discussions to legislate began in 2017, and after two years of dedicated political and technical work, the national UHC Act was passed in 2019. It is the first of its kind in the Western Pacific region.

THE CHALLENGE
For many years the UHC debate had been focused on curative services and risk protection alone, while NCD prevention and health promotion was largely overlooked. As a separate but related matter, while deemed too low from a public health perspective, there was little public support to increase the country’s ‘sin tax’, which taxes tobacco and alcohol products.

THE OPPORTUNITY
The Advocacy Institute supported the initiative to consolidate different NCD groups in the Philippines resulting in the formation of the Healthy Philippines Alliance in 2018. With the formation of the Alliance, its members decided to focus their joint advocacy toward reorienting the national debate on UHC toward NCD prevention and health promotion.

STRATEGY
Invest in strategic partnerships
As in many countries around the world, NCD civil society in the Philippines had long worked alongside but separately from each other. Coming together to form the Healthy Philippines Alliance required an intensive process of finding common ground and re-negotiating priorities among organisations of different sizes, constituencies, and thematic priority areas.

Many voices, one message
Joining forces under the umbrella of the HPA, member organisations focused on getting across one clear message to members of the congress and the public: place NCD prevention and health promotion at the heart of the new UHC scheme, and utilise revenue from an increase on taxes on tobacco products and alcoholic beverages to fund implementation.

Mobilise people living with NCDs
HPA was able to capitalise on greater awareness of the importance of health promotion among patient groups, which traditionally have focused more on care. Bringing the voice of PLWNCDs to policy discussions helped significantly to re-orient UHC discussions.

Engage the media
While support for tax reforms was initially low in 2016, the HPA and other health advocates took advantage of official budget projections indicating a shortage in funding UHC. Capitalising on the strong popular support for UHC, HPA strategically engaged the media to put forward the argument that if politicians were supporting UHC, they had to have realistic strategies for financing it.

Cultivate political champions
Equipped with evidence-based advocacy asks, HPA set out to cultivate a network of trusted congressmen and senators to become health promotion and NCD prevention champions. HPA was also able to utilise their existing close relationship with the Ministry of Finance, in order to advocate for the tax increase.

OUTCOMES
Approval of the law
On 20 February 2019, President Rodrigo Duterte signed the UHC Act into law. The act automatically enrols all Filipino citizens in the National Health Insurance Program and prescribes complementary health system reforms. This gives citizens access to the full continuum of health services, while protecting them from enduring financial hardship.

NCD-friendly fiscal policies
In June 2019, the President approved a gradual yearly increase of the tax on tobacco and e-cigarettes beginning January 2020, to help finance the implementation of UHC. This is an important win for NCD prevention, the taxes’ main purpose being reduction of NCD risk.

Further tax increases
HPA will continue to advocate for a further increase of the tax rate on tobacco and alcohol products, as current budget projections for the implementation of the UHC Act demonstrate that the gradual increase will lead to an initial shortage of funding.
CASE STUDY 2

NCD Alliance Nigeria

Creating a national civil society plan of action on NCDs

The NCD Alliance Nigeria was established in 2016 by four founding members to harness the power of civil society for NCD prevention and control in Nigeria. It has since grown its network to include over 30 civil society organisations. The NCD Alliance Nigeria was supported by the Seed Programme.

THE CHALLENGE

Given the lack of concerted and cohesive civil society action in the country, the NCD Alliance Nigeria saw the need to create a common platform for civil society action on NCDs.

THE OPPORTUNITY

The Advocacy Institute supported the alliance to develop a civil society plan of action to mobilise a more diverse network of civil society organisations around a set of common objectives.

STRATEGY

Peer-to-peer exchange

Before embarking on the development of the plan, the NCD Alliance Nigeria benefitted from peer-to-peer exchange with the Healthy Caribbean Coalition and the Eastern Mediterranean NCD Alliance learning about civil society action plans and coalition building in other regions.

Identifying priorities

A technical working group, supported by academic partners, developed and widely distributed a questionnaire to CSOs across the country to survey priority areas for synergistic action. The alliance convened two national workshops, including a two-day collaborative workshop with civil society and government representatives in April 2018. Despite the size of the country and resource constraints posing challenges, a total of 24 CSOs from across the country were brought to the drafting process, many of which are still actively engaged in the implementation of the plan.

Identifying areas for action

The meeting recommended the creation of a mechanism for cascading strategies that CSOs can use in planning NCD prevention and control activities: from the national level to the state and local government levels. Additionally, a National NCDs Week dedicated to NCD awareness and advocacy was proposed, and will be launched in 2020. Another focus area is advocacy.
for inclusion of NCDs in UHC benefit packages, as many states in Nigeria are making efforts to establish public health insurance. At the moment, 29 states have passed social health insurance bills.

OUTCOMES

Launching the plan

The Civil Societies Plan of Action for NCDs in Nigeria 2018-2022 was launched on 30 October 2018. The plan aims to accompany the government’s National Strategic Plan on NCDs by delineating a route of activities and actions to strengthen NCD prevention and control through multistakeholder partnerships. It is structured along the four pillars of civil society action of the NCD Alliance’s Strategic Plan of Action 2016-2020 (advocacy, access, awareness and accountability), and matches each with specific goals and expected outcomes.

Expanded network, increased activity

Since the publication of the plan, the alliance has reported increased activity and collaboration among its network and more media attention around specific advocacy opportunities, such as World Health Days and the 2018 UN High-Level Meeting on NCDs. Several high-level officials, including Senior Special Assistant to the President on the Sustainable Development Goals (SDGs), Princess Adejoke Orelope-Adefulire, have pledged their support to the issue of NCDs.

Greater traction at the state level

Due in part to the alliance’s advocacy efforts, Osun state in south-west Nigeria established an NCD department, and the Speaker of the House of Assembly of Osun state pledged his full support to the implementation of the state’s NCD plan. With state and local governments managing secondary and primary health care in Nigeria, this is an important win for the alliance, especially as state governments have not been very active on NCDs.

Cultivating NCD champions

The Alliance has won over former captain of the national soccer team and prominent sports administrator, Segun Odegbami, as NCD Ambassador. Odegbami has been raising awareness on NCDs via television appearances and initiatives such as “JUST MOVE - LIVE LONGER”.

CASE STUDY 3

NCDs-VN

Campaigning for a national law to address alcohol-related harm

The Vietnam Non-communicable Diseases Prevention Alliance (NCDs-VN) was formed in 2015 and counts 12 organisational and 6 individual members. NCDs-VN is a respected partner to the Ministry of Health with a track-record for evidence-based advocacy. It focuses on engaging communities and the media, in order to successfully communicate NCD priorities. NCDs-VN was supported by the Seed Programme.

THE ISSUE

Between 2002 and 2016, alcohol consumption in Vietnam increased by 50%; the proportion of adults consuming alcohol rose from 46% to 77% among men and 2% to 11% among women. Under a business-as-usual scenario, projections show, alcohol consumption and related harm will further rise.

THE OPPORTUNITY

A draft law to curb alcohol consumption through proven interventions had been under development since 2008 and was released to the public in April 2018, opening an important advocacy window.

THE CHALLENGE

Due to lack of public awareness and strategic industry interference targeting the National Assembly information mechanism, the Ministry of Health struggled to defend the technically sound draft law.

SECTION III
Case studies from Advocacy Institute alliances

STRATEGY

Building the coalition
Having been a close technical partner to the Ministry of Health throughout the development of the law since 2015, NCDs-VN members realised that, in order for the law to be approved by the National Assembly, their role as independent civil society voice was critical. Supported by the Advocacy Institute, NCDs-VN focused on building a strong civil society coalition to raise public awareness, refocus the debate on scientific evidence, and help National Assembly delegates see through the web of misinformation the alcohol industry had spun to delay and weaken the law.

Raising public awareness
NCDs-VN leveraged community-based evidence, thereby expanding its evidence base beyond the scientific literature and producing relatable narratives, to educate the public and policymakers on why the law mattered. Inviting reporters to workshops with victims of alcohol-related harm and their families ensured their stories were told by official and social media.

Promoting accountability
Following the discussions of the law in the National Assembly closely, NCDs-VN provided continuous updates on social media, responded to misinformation and attempts to derail or weaken the law with public letters to decision-makers and industry spokespeople, and linked their advocacy efforts to an anti-corruption campaign run by the Ministry of Politics.

Leveraging evidence-based advocacy
NCDs-VN hosted workshops for National Assembly delegates, promoting scientific and community evidence for the law. It succeeded in turning the tide of opinion in the Assembly, thanks to persistent efforts to unmask and counter industry-influenced opinions.

OUTCOMES

National assembly approves the law
On 14 June 2019, the law was approved, coming into effect on 1 January 2020. Although it was significantly weakened throughout the drafting process with many of the WHO Best Buy policy measures removed, the law is considered a critical milestone. NCDs-VN increased public awareness of the disastrous impact of alcohol-related harm, as well as of the extent to which the alcohol industry had manipulated the policy development process. The focus of the law on alcohol-related harm, as well as a ban on alcohol when driving, which had previously been opposed by 50% of National Assembly delegates, are celebrated as important achievements.

Citizens have a voice
NCDs-VN’s campaign has been officially recognised by the Vietnam government and National Assembly. It has demonstrated that public monitoring and reporting allows citizens to have a voice. The campaign paved the way for other NCD-related issues to be treated by the National Assembly based on scientific evidence and in the interest of the public.

Monitoring implementation
NCDs-VN closely monitors the implementation of the law. A review workshop with high-level stakeholders from Ministry of Health, National Assembly, and members of the Communist Party has already been held. Communications to the highest level of government are underway, highlighting that the current implementation plan is not meeting expert recommendations.

Increasing excise taxes
NCDs-VN is also advocating to increase the excise tax on alcohol, which is half of those applied in other countries, including Australia, New Zealand and Thailand. Resources collected from a tax increase could be allocated to Vietnam’s Health Promotion Fund.

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SECTION III
Case studies from Advocacy Institute alliances

ACCELERATOR PROGRAMME

CASE STUDY 1

ACT Health Promotion
Producing Brazil’s Fourth Civil Society Status Report on NCDs

ACT Health Promotion was founded in 2006, under the name Aliança de Controle do Tabagismo, and established an impressive track record in tobacco control advocacy. In 2014, ACT began to work on other NCD risk factors. Today, the alliance unites over 50 members under the name ACT Health Promotion, and focuses its advocacy on public policies in support of healthy environments. ACT was supported by the Accelerator Programme.

THE ISSUE
While the proportion of smokers in the population is declining due to past successful tobacco control measures, latest legislative and fiscal developments have been unfavourable. Worrying trends for overweight and obesity, as well as harmful use of alcohol equally warrant decisive policy action.

THE CHALLENGE
Civil society monitoring in Brazil has perhaps never been more relevant than in current times of economic crisis, political instability and ensuing threats to the progressive health policies of previous decades. It helps safeguard existing policy infrastructure, and advance evidence-based policies.

THE OPPORTUNITY
ACT Health Promotion launched its latest Civil Society NCD Status Report for Brazil at the 4th Intersectoral Forum on the Fight Against NCDs, organised by the Brazilian Public Health Institute in April 2019. The report follows similar reports in 2014, 2015, and 2017. Taking a magnifying glass to the state of NCD prevention in Brazil, the report strengthens the evidence base for ACT’s policy advocacy with federal and state governments.

STRATEGY

Building the evidence
The report is based on health surveillance data collected 2011-2017 through VIGITEL, a telephone survey of risk factors and NCD prevention conducted annually by the Ministry of Health throughout Brazil. The data was analysed with the help of researchers from Rio de Janeiro State University and Federal University of Santa Catarina, and complemented with interviews with key NCD actors from government, academia, and civil society.

Connecting NCD and SDG priorities
The report’s findings have also informed ACT’s contribution to the chapter on SDG 3 on health in the Civil Society Spotlight Report on the 2030 Sustainable Development Agenda, which sheds light on Brazil’s progress against the UN Sustainable Development Goals. Copies of the report were distributed during the 2019 UN High Level Political Forum in New York, including to UN Secretary-General, Antonio Guterres, himself.

Moving from evidence to advocacy
The report’s findings underline the importance of ACT’s advocacy campaigns for health-promoting policies, such as the adoption of a law to establish soda-free schools (the campaign drew much public attention and its hashtag #EscolasSemRefrigerante trended on twitter in October 2019), the introduction of soda taxes, and labelling of ultra-processed foods.

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OUTCOMES

Supporting strong government relations

Following the publication of the 2019 Status Report, Eduardo Macário, Director of the Department of Health Surveillance, invited ACT to participate in an expert meeting to discuss the update of the National NCD Plan in 2022.

Getting the message out

The 2019 report’s findings were discussed in *Folha de S. Paulo*[^6], one of the country’s most influential newspapers. The article quoted ACT Health Promotion Director, Mônica Andreis, and discussed the status report’s findings extensively.

CASE STUDY 2

Healthy India Alliance

Positioning PLWNCDs at the centre of NCD advocacy efforts

The Healthy India Alliance (HIA) is a coalition of 13 civil society organisations that came together in 2015 to accelerate CSO action on NCD-related issues, focusing on meaningful involvement of people living with NCDs (PLWNCDs) and youth in India. HIA was supported by the Accelerator Programme.

THE NEED
HIA realised that any policy or programmatic action would be incomplete and inadequate unless it was directly informed by the priorities and challenges of PLWNCDs. Furthermore, India’s diverse socio-demographic make-up would require intensive engagement at the regional level, and activation of grassroots and youth demographics to drive sustainable policy change in the country.

THE OPPORTUNITY
Based on a needs assessment undertaken as part of the NCD Alliance Our Views, Our Voices initiative, the Advocacy Institute supported HIA to develop an inclusive Advocacy Agenda of PLWNCDs, presenting NCD priorities within the SDG and Universal Health Coverage (UHC) narratives.

STRATEGY
Organising regional consultations
In 2018, HIA held four regional consultations in Delhi, Kolkata, Chennai, and Mumbai. The consultations were led by HIA members based in the respective regions acting as lead organisations. They were tasked with mobilising participants, making logistical arrangements and overcoming language barriers. A conscious effort was made to involve young people, and to sustain participation beyond the consultations.

Engaging new partners
This large-scale project, to initiate state level grassroots discussions, has been a collaborative effort of HIA members and non-HIA CSOs from health and non-health sectors. The engagement with these new CSO partners has been an ongoing and mutual capacity building process with the intention for each partner to realise and apply their core strengths to take forward a common agenda for NCDs at national and sub-national levels.

Challenging assumptions, understanding different viewpoints
In order to secure buy-in from PLWNCDs, HIA learnt that sufficient time was needed to hear and understand their unique issues, challenges and priorities. Their lived experiences have provided a compelling and more comprehensive perspective and have shaped HIA’s overall advocacy strategy. Conversely, communicating complex policy priorities to PLWNCDs and youth, such as integration of NCD prevention and control with UHC and SDG implementation efforts, requires time and skilful engagement.

OUTCOMES
Building a synergistic platform for civil society action
Through the regional engagement process, HIA has had the opportunity to become a more diverse platform for CSOs, PLWNCDs and youth. As such, HIA continues to grow into a stronger and more active actor in the national NCD response.

Positioning PLWNCDs as key stakeholders
Through the initiative, PLWNCDs are being considered important stakeholders in NCD policy discussions. HIA has submitted a draft set of Guidelines for the Engagement of Civil Society Organisations in the National Response to Non-Communicable Diseases to the Ministry of Health and Family Welfare and the WHO Country Office for India that are currently being reviewed. These guidelines aim to provide a roadmap for synergistic action between the government and NCD civil society, including PLWNCDs and youth.

Developing the India Advocacy Agenda of PLWNCDs
The Agenda has been developed with the involvement of 131 PLWNCDs and 43 CSOs. The Agenda is currently being finalised and will be released during the Third National Civil Society Consultation on NCDs to be organised by HIA in late 2019. The agenda will be the reference point for HIA’s work moving forward, building a foundation for long term involvement of PLWNCDs utilizing the power of their lived experiences to impact national NCD action.
CASE STUDY 3

Mexico Salud-Hable Coalition

#VotoSaludable (#HealthyVote) elections platform

The Mexico Salud-Hable Coalition was founded in 2012 and unites over 50 civil society organisations. Among the coalition’s advocacy wins are the support to the successful campaign for a tax on sugar-sweetened beverages, reflecting the impressive advocacy power of its diverse and inclusive network. Mexico Salud-Hable was supported by the Accelerator Programme.

THE ISSUE

Nearly 80% of deaths in Mexico are caused by NCDs, with cardiovascular diseases and diabetes being the two most important causes of death. NCD risk factors are a growing concern for government and civil society, particularly tobacco and alcohol consumption, and unhealthy diets (more than 70% of the population is overweight or obese).  

THE OPPORTUNITY

Mexico Salud-Hable decided to use the 2018 presidential and municipal elections to harness greater commitment and action on NCDs at the highest political level.

The coalition set out to develop an advocacy agenda that would effectively make the linkages between urgent NCD objectives, sustainable development prerogatives and, most importantly, resonate with the wider public.

THE CHALLENGE

Presidential and mayoral candidates’ manifestos were very weak on health promoting environments and NCD prevention and control policies, and, despite escalating rates of NCDs, the issue was pushed to the margins by concerns such as national security.

STRATEGY

Developing a people centred advocacy agenda

The Advocacy Institute supported Mexico Salud-Hable to hold consultations with PLWNCDs and the coalition’s 50+ members to draft the advocacy agenda. The agenda also received inputs from PAHO Mexico, “My World Mexico” (an organisation dedicated to SDG implementation in Mexico), and the Instituto Belisario Dominguez (a public research institute). The outcome of is the Salud-Hable Agenda 2018: Public Policies of Health Protection to meet the 2030 goals, with comprehensive policy proposals to achieve national NCD and SDG goals.

7 WHO. Non-communicable Disease Country Profile 2018 (https://www.who.int/nmh/countries/mex_en.pdf?ua=1; accessed on 19/11/2019)
Building the platform
Mexico Salud-Hable developed a new website to serve as the virtual platform for the #VotoSaludable (#HealthyVote) campaign. The platform carefully documented candidates’ positions on the prevention and treatment of NCDs and housed the Salud-Hable Agenda, creating a direct and easy-to-reference link between the alliance’s policy proposals and candidates’ manifestos.

Engaging candidates on social media and the campaigning trail
On 4 April 2018, the coalition presented the virtual platform #VotoSaludable to the media. The launch of the platform was accompanied by an intensive social media campaign, questioning candidates on their NCD proposals and inviting them to subscribe to the Salud-Hable Agenda. In response, candidates started talking more about the need to address NCDs. The coalition held meetings with the heads of presidential candidates’ health teams, securing commitments by some to work on a comprehensive approach to NCDs.

Influencing public opinion
On social media, the #VotoSaludHable platform awakened the interest of voters to know more about the health proposals of their candidates.

Getting health and NCDs into televised presidential debates
Through strategic engagement, the coalition also achieved the inclusion of health as a topic in the third televised presidential debate.

OUTCOMES

Sensitised public, sensitised politicians
Mexico Salud-Hable was able to establish strong relationships with the incoming Under-Secretary of Health Promotion, who has been receptive to civil society concerns, and places great importance on protecting policy-making from industry interference. Recent policy wins include advances on nutritional front-of-pack labelling using warning labels. A civil society proposal was approved by both chambers of Congress in October 2019.

National recognition
Reflective of its impact, the #VotoSaludable platform was enlisted by Social TIC, an independent technology organisation, as one of the top 5 voting tools on relevant social issues, recognising it as an important citizen information tool.

International recognition
In September 2019, Mexico Salud-Hable received the UN Interagency Task Force on NCDs Award 2019, in recognition of #VotoSaludable’s outstanding contribution to multisectoral action in NCD prevention and control and the NCD-related Sustainable Development Goals.

Catalysing NCD Civil Society Alliances to Drive Change
Thanks to the successes of its first phase (2017-2019), the Advocacy Institute has become a flagship initiative of the NCDA’s capacity development work. The Institute has demonstrated its impact as a platform for the formation and strengthening of NCD alliances in priority LMICs, and for supporting local advocacy campaigns resulting in important policy wins and changes. It has also facilitated involvement of alliances in relevant global processes at the WHO and UN.

So far, the Institute has witnessed the creation of six new NCD alliances, equipped to deliver on ambitious strategic priorities. Already existing alliances have grown more diverse networks, including PLWNCDs and youth, and advanced advocacy efforts based on best practice and new skills and expertise.

From Brazil, Colombia, Mexico, and the Philippines, to South Africa and Vietnam, participating alliances have achieved significant policy wins, in particular in the area of NCD prevention, while other participating alliances have laid promising foundations for policy change in their countries.

Putting its approach and strategies to the test, this first phase of the Advocacy Institute has honed its capacity to deliver effective programmes, in support of coalition building and impactful advocacy campaigns. NCDA now looks to apply its fine tuned strategies to the Advocacy Institute second phase. Key lessons learnt include:

**COALITION BUILDING**
Building inclusive and diverse civil society coalitions that are sustainably resourced, is an essential strategy to support impactful advocacy campaigns and accelerate policy change.

**ADVOCACY**
Questioning assumptions and adapting global best practice to the national and local context is critical. Civil society relations with governments differ from country to country, and advocacy strategies and policy asks must respond to context-specific needs and/or windows of opportunity.

**COMMUNITY MOBILISATION**
Proactively engaging PLWNCDs and youth in identifying and effectively communicating advocacy and policy priorities is instrumental. Community-based evidence, in the form of the lived experience of PLWNCDs and their families, helps raise public and political awareness and supports the case for policy change.

**CAPACITY ASSESSMENTS**
Detailed capacity assessments of alliances are an important element of the Advocacy Institute Accelerator Programme and allow for tailored and impact-driven capacity development support.

**TRAINING & TECHNICAL SUPPORT**
In-person trainings are an invaluable opportunity to increase relevant knowledge and skills, and to facilitate peer-to-peer exchange. Hosting trainings on the sidelines of global or regional NCD decision-making fora, provides alliances with first-hand experience in health diplomacy, and helps contextualise national efforts within the global NCD and SDG responses. Direct technical and expert support help overcome specific challenges and accelerates action.

**PEER-TO-PEER LEARNING**
The lessons alliances have learnt by participating in the programmes are invaluable resources to nascent and established alliances around the world. Advocacy Institute alumni can be matched to mentor other alliances facing similar challenges and opportunities. The Advocacy Institute Webinar Series is just an example of how NCDA promotes this.