Global NCD Alliance Forum 2020

## **Bridging the Gap**

9-11 FEBRUARY 2020

Sharjah, United Arab Emirates (UAE)





# POST-FORUM REPORT





This report was prepared by Katy Cooper (Forum lead rapporteur), Kate Sheffer (Forum Programme Manager) and Cristina Parsons Perez (Capacity Development Director, NCD Alliance).

Sincere thanks to the following rapporteurs for their assistance in recording the workshop sessions: Pierre Cooke, Margianta Surahman Juhanda Dinata, Apoorva Gomber, Daniel Hunt, Louise Johanssen, Nimal Mohamed, Busiso Moyo, Edith Mukantwari, Omnia el Omrani, Gajarishiyan Rasalingam, Bonita Sharma, Andrej Martin Vujkovac and Stephanie Whiteman. Sincere thanks to the team at FoCP for their report inputs and feedback.





Edited by NCD Alliance, 2020

Photos: © Gilberto Lontro

Editorial coordination: Jimena Márquez

Design and layout: Mar Nieto



NCD Alliance 31-33 Avenue Giuseppe Motta 1202 Geneva, Switzerland

www.ncdalliance.org

### Global NCD Alliance Forum 2020

## **Bridging the Gap**



## **POST-FORUM REPORT**

9-11 February 2020

Sharjah, United Arab Emirates





#### 66

## Thank you for building the ship that we can all row together."

Ms Lea Kilenga, Our Views, Our Voices Global Advisory Committee, Africa Sickle Cell Organisation, NCD Alliance Kenya



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## **EXECUTIVE SUMMARY**





The NCD Alliance, in partnership with local host organisation Friends of Cancer Patients (FoCP), convened the third Global NCD Alliance Forum from 9-11 February 2020, in Sharjah, United Arab Emirates (UAE), under the patronage of Her Highness Sheikha Jawaher Bint Mohammed Al-Qasimi, wife of the Ruler of Sharjah, Founder and Royal Patron of FoCP, International Ambassador of the World Cancer Declaration for the Union for International Cancer Control (UICC), International Ambassador for Childhood Cancer for UICC.

The Forum was organised under the banner theme of **Bridging the Gap**, with a view to accelerating global efforts to translate political commitments and rhetoric, into action and implementation at national and local levels. The Forum focussed on three key catalysts for change to bridge the gaps in the NCD response: accelerating transformative policies and solutions, building demand for action through social movements and voices of change, and enhancing accountability through transformative and inclusive governance.

The Global NCD Alliance Forum 2020 mobilised almost 400 delegates from 80 countries. A rich programme, including five plenaries and eighteen interactive workshops, offered delegates an opportunity to learn best practices, hear experiences of fellow advocates, and share knowledge through group activities and discussion. Taking place shortly after COVID-19 was declared a global health emergency by WHO, many Forum discussions began highlighting intersections between NCDs and COVID-19.

Across three days, the Forum engaged over 140 speakers across 32 sessions. Plenaries and workshops were enriched by perspectives from youth leaders and delegates with lived NCD experience.





The Forum hosted the inaugural digital poster exhibition, entitled: Community in Action. Delegates were invited to explore 38 posters from members of the NCD Alliance and UAE-based organisations, showcasing initiatives working to bridge the gaps in the NCD response.

A number of key knowledge resources were launched at the Forum, including the background brief, Bridging the Gap on NCDs: From global promises to local progress, with the instructive companion document, NCD Civil Society Compass, as well as the latest NCD Atlas showcasing national and regional alliance action, and accountability toolkit. The NCD Civil Society Compass provided a framework for advocate discussions onsite to shape regional action going forward.

The Forum hosted the launch of the latest and third World Health Organization (WHO) NCDs Progress Monitor, with a plenary intervention by Dr Ren Minghui (Assistant Director-General UHC/Communicable & Noncommunicable diseases, WHO) who reported the alobal progress in implementation of national NCD commitments. The Forum also hosted the launch of the series "Turning the Tide" produced by BBC StoryWorks in collaboration with the NCD Alliance, containing 26 short films depicting the impact of, and action against, the NCD epidemic across the globe. Civil society good practice was highlighted through the Sharjah Awards for Excellence in NCD Civil Society Action with awards presented to the Vietnam Prevention and Control Alliance, the Slovenian NCD Alliance and the Healthy Caribbean Coalition.

Building on the success of the Forums which took place in 2015 and 2017, the third Global NCD Alliance Forum strengthened knowledge on the gaps in NCD prevention and control and civil society actions to accelerate progress. As a result of the Forum, delegates planned to engage with people living with NCDs and youth, work collaboratively with new connections, build demand for action through media engagement, increase collaboration with regional colleagues, and assess national progress against identified NCD response gaps. The Global NCD Alliance Forum 2020 was very well-received, with 94% of delegates rating their overall experience at the Forum as outstanding or very good, and 99% of delegates saying they would recommend the Forum to a collegaue.

### **FORUM AT A GLANCE**



Almost **400** delegates



from **80** countries



**53** national & regional alliances represented

**OVER** 









140 SPEAKERS across 32 SESSIONS







- + Pre-events
- + Satellite sessions
- + Community in Action exhibition





99%
of DELEGATES would
RECOMMEND THE
FORUM to a colleague

94%

DELEGATES rated their overall FORUM EXPERIENCE AS OUTSTANDING or VERY GOOD

On twitter, the Forum hashtag #NCDAF2020 had

22 MILLION IMPRESSIONS 83 COUNTRIES REACHED

942 CONTRIBUTORS ENGAGED



As a result of the Forum...

89%



of delegates have greater knowledge on the gaps in NCD prevention and control and how civil society can act to address these. 84%



delegates are better equipped to plan and deliver advocacy activities to bridge the gaps in the NCD response. **95**%



of delegates are better connected with other advocates to collectively scale up NCD action.

## **OVERVIEW**

The third Global NCD Alliance Forum was strategically timed to take place in 2020, to reflect on the global progress achieved and discuss what is needed to accelerate action, five years away from the 2025 date for the global NCD targets, and ten years away from the 2030 target date of the Sustainable Development Goals.

Data from the World Health Organization show that progress on NCDs has been insufficient and highly uneven, and that globally, countries are off-track in implementing national commitments to achieve these targets. In response to the concerning lack of progress, the Forum was organised under the theme of **Bridging the Gap**, with a view to accelerating global efforts to translate political commitments and rhetoric, into needed action and implementation at national and local levels.

#### The Global NCD Alliance Forum 2020 aimed to:

- Build on 2018 UN HLM outcomes and strengthen the capacity of the network of national/regional NCD alliances, to accelerate national and regional action to bridge the gap and meet the global targets.
- Further the 2015 Sharjah Declaration by showcasing NCD civil society best practice, sharing tools and resources, and strengthening the skills of national and regional advocates.
- Convene the civil society network of national/regional NCD alliances to share experiences, lessons learnt and to engage with key stakeholders to ensure whole-of-society and whole-of-government approach.
- · Promote the meaningful involvement of people living with NCDs and youth in the NCD movement.
- Produce a bold call to action that inspires national action and campaigns for governments to Bridge the Gap in rhetoric to action and meet the global NCD targets.

The Forum featured three sub-themes under the banner theme of Bridging the Gap. This focused the discussion on action enablers and the key catalyst for change, from a civil society perspective, that can bridge the gaps in the NCD response.







## **ORGANISATION**

The Forum was organised by the NCD Alliance (NCDA) in partnership with local host organisation, Friends of Cancer Patients (FoCP), under the patronage of Her Highness Sheikha Jawaher Bint Mohammed Al-Qasimi, wife of the Ruler of Sharjah, Founder and Royal Patron of FoCP, International Ambassador of the World Cancer Declaration for the Union for International Cancer Control (UICC), International Ambassador for Childhood Cancer for UICC.

#### Planning Committee for the Global NCD Alliance Forum 2020

The development of the third Global NCD Alliance Forum was supported by an outstanding Planning Committee, made up of subject-experts, leading advocates, youth leaders and people living with NCDs, including representation from national and regional alliances and the NCD Alliance Supporters Group. Sincere thanks to HE Mrs Sawsan Jafar, Dr Sawsan Al Madhi, Professor Sani Malami, Mr Stefan Islandi, Dr Douglas Webb, Dr Jean Luc Eisele, Ms Maisha Hutton, Dr Tara Singh Bam, Dr Ibtihal Fadhil, Ms Helen Seibel, Dr Marie Hauerslev, Ms Cajsa Lindberg and Mr Todd Harper.



**HE Mrs Sawsan Jafar** Chairman of the Board of Directors, Friends of Cancer Patients, United Arab Emirates



**Dr Sawsan Al Madhi**Director General, Friends of Cancer Patients,
United Arab Emirates



Mr Todd Harper Chief Executive Officer, Cancer Council Victoria, Australia; President, NCD Alliance



Ms Katie Dain Chief Executive Officer, NCD Alliance, United Kingdom



**Prof Sani Malami** Executive Director, NCD Alliance Nigeria, Nigeria



**Mr Stefan Islandi** Director of Development, Danish NCD Alliance, Denmark



Dr Douglas Webb
Team Leader, Health and Innovative
Financing at the HIV, Health and
Development Group, United Nations
Development Programme, United States



Dr Jean Luc Eisele Chief Executive Officer, World Heart Federation, Switzerland; Board member, NCD Alliance



Ms Maisha Hutton Executive Director, Healthy Caribbean Coalition, Barbados



**Dr Tara Singh Bam**Deputy Regional Director, International
Union Against Tuberculosis and Lung
Disease; Singapore



Dr Ibtihal Fadhil President, Eastern Mediterranean NCD Alliance, Bahrain; Board member, NCD Alliance



Ms Helen Seibel Global Head, Community Investment & Philanthropy, AstraZeneca, Canada; Member of the NCD Alliance Supporters Group



**Dr Marie Hauerslev** Chair, NCD Child, Denmark



Ms Cajsa Lindberg President of Swedish Diabetes Association, Sweden; Member of Our Views, Our Voices Global Advisory Committee



**Ms Ana Larrañaga** Director, Salud Critica, Mexico

## **DELEGATES**

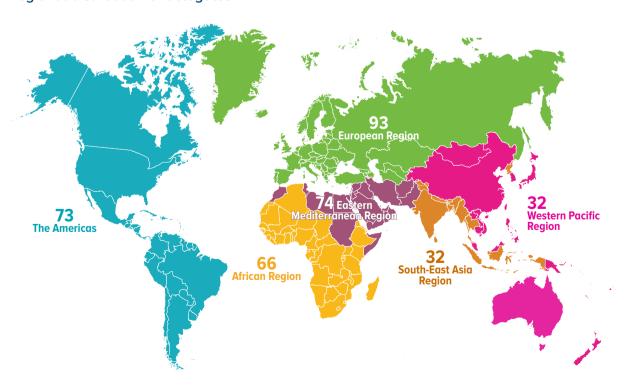


Almost 400 delegates from 80 countries convened in Sharjah for the Global NCD Alliance Forum 2020. The Forum was attended by leading experts, national and regional alliance representatives, youth leaders, people living with NCDs, local stakeholders, and global health and development civil society.

NCD Alliance's full and associate members as well as representatives of the NCD Alliance Supporters Consultation Group were in attendance.



#### Regional distribution of delegates



### **DELEGATE EXPERIENCE**

## Delegate rating of experience at the Global NCD Alliance Forum 2020

The third Global NCD Alliance Forum received an excellent response, with 94% of delegates rating their overall experience at the Forum as outstanding or very good. 99% of delegates would recommend the Forum to a colleague.

Delegates highly appreciated the organisation of the Forum, with 93% of participants rating the organisation as outstanding or very good. Delegates also appreciated the networking opportunities afforded by the Forum, with 87% of participants rating these as outstanding or very good. 27% of delegates rated the theme of — Bridging the Gap - and Forum sub-themes as outstanding, a further 60% gave a rating of very good. Also highly rated: the publications launched at the Forum, and online registration.



**Figure 1:** Delegate rating of overall experience at the Global NCD Alliance Forum 2020

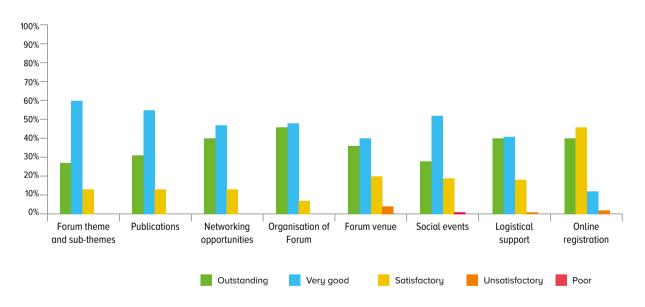


Figure 2: Delegate rating of aspects of the Global NCD Alliance Forum 2020

#### **Delegate rating of Forum communications**

With regards to Forum communications, delegates greatly enjoyed the addition of an event application. 91% rated the app as outstanding or very good. The vast majority of delegates who used the app told us it was easy or very use to use. The daily updates and blogs were greatly appreciated, as were the commitment and blackboard walls, videos and screens and social media activity.

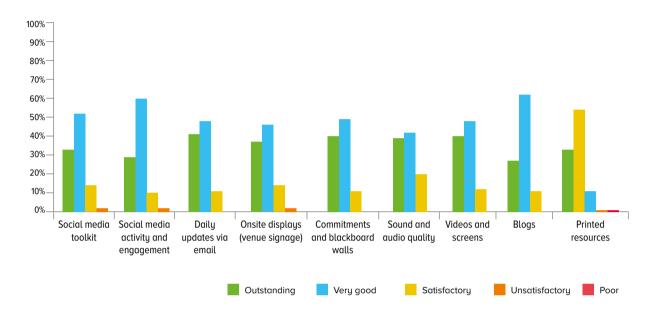


Figure 3: Delegate rating of communication aspects of the Global NCD Alliance Forum 2020



**Figure 4:** Delegate rating of the Forum event app

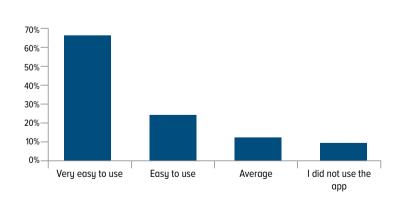


Figure 5: Delegate rating of the Forum event app ease of use

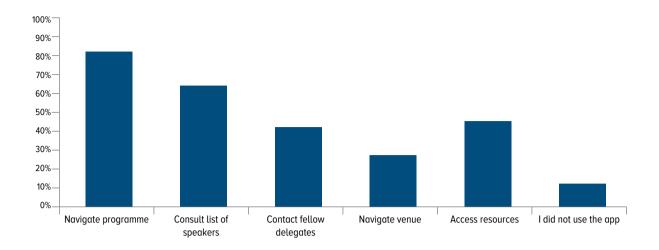


Figure 6: Delegate usage of the Forum event app

#### Delegate rating of plenary sessions

According to feedback, delegates found the plenary sessions to be energising and rich in content. Delegates highly valued the quality of speakers, with an average rating of 4.29 (1 is poor, 5 is outstanding). Plenary session content and relevance to Forum theme and sub-themes were also rated highly, 82% and 85% of delegates gave rating of outstanding or very good, respectively. Delegates rated the format of the plenary sessions less highly, with recommendations to have shorter plenaries, with increased interactivity and discussion.

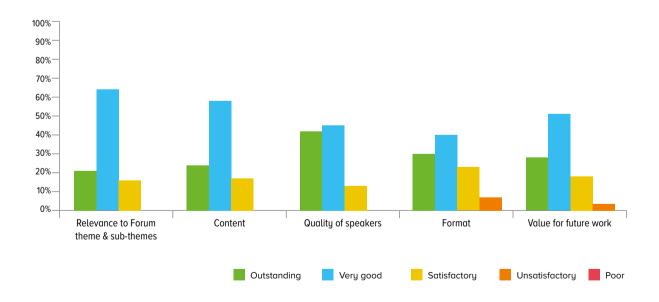


Figure 7: Delegate rating of plenary sessions aspects

#### Delegate rating of workshop sessions

When asked for the most useful part of the Forum, the vast majority of delegates responded with workshops. Similar to the plenaries, workshop sessions were highly appreciated for the quality of speakers, with an average rating of 4.24. 89% of delegates rated the relevance of workshops to Forum theme or sub-theme as outstanding or very good. Workshops were also highly rated for their content and value to future work.

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Workshops [were the most useful part of the Forum], I got a bigger picture of what's happening globally. I was able to learn from experts and make relevant connections."

Forum delegate

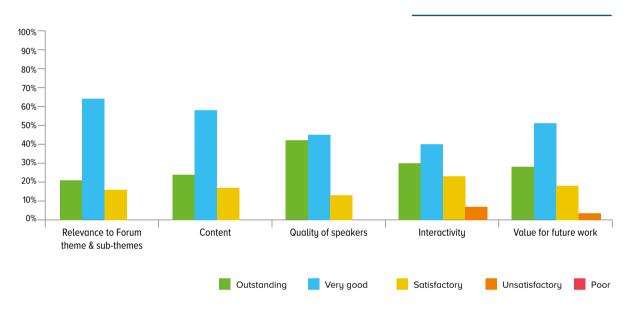


Figure 8: Delegate rating of workshop aspects

TOP REASONS

DELEGATES

ATTENDED THE
FORUM

1 Networking opportunities
2 Strengthen knowledge and skills for NCD advocacy
3 Listen to experts

87% rated Forum networking opportunities as outstanding or very good

Sincere thanks to the following rapporteurs for their assistance in recording the Forum workshop sessions: Pierre Cooke, Margianta Surahman Juhanda Dinata, Apoorva Gomber, Daniel Hunt, Louise Johanssen, Nimal Mohamed, Busiso Moyo, Edith Mukantwari, Omnia el Omrani, Gajarishiyan Rasalingam, Bonita Sharma, Andrej Martin Vujkovac and Stephanie Whiteman. Thanks to Katy Cooper for her lead rapporteuring role at the Forum and to Kate Sheffer for supporting the preparation of this grant report and processing Forum evaluation results.

#### PARTNERING WITH YOUTH LEADERS

15 outstanding youth leaders were supported to attend the Global NCD Alliance Forum. The Forum benefitted richly from their presence. Many youth leaders took on speaking roles, enthusing and challenging delegates with accounts of their experience and passionate calls to action.

Youth delegates attended a pre-Forum session, organised by NCD Child and the NCD Alliance (see page 35) and sponsored by AstraZeneca. They discussed elevating the youth NCD agenda to high-level stakeholders and build skills in communicating with decision makers. Delegates worked collaboratively drawing from their unique background and expertise and formed new connections for future synergistic NCD action.

During the Forum, Friends of Cancer Patients (FoCP) showed their firm commitment to partner with and support youth leaders, with an announcement of an NCD Young Leaders programme in collaboration with NCD Child.



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If you are trying to create a future in which young people will thrive, then include them and actually listen to them ... include them in any and every discussion; ask them and take into consideration what they say"

Ms Grace Gatera, Communications Coordinator, Partners in Health Rwanda/ Inshuti Mu Buzima; Young Leader, My Mind Our Humanity, The Lancet Commission on Global Mental Health and Sustainable Development

#### 66

Young people are stubborn
– and we will raise our voice
and our heads and keep
fighting and working until
we are recognised not only
by age group but for the
knowledge and experience
we can add to this fight'

Mr Bruno Helman, Our Views, Our Voices advocate, Brazil

#### 66

Ask ourselves: 'Who is not here? Who should be here? And how do I make that happen?'

**Mr Fale Andrew Lesa**, Policy Consultant, Asia Development Bank Aotearoa Representative, UNESCO

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I was very impressed by the diversity of delegates, especially youth and from the AFRO region. This was a real feat and inspired me to go back to my organisation and attempt to engage in advocacy with a broader range of voices."

Forum Delegate

## PUTTING PEOPLE LIVING WITH NCDs AT THE CENTRE

Recognising the vital importance of the voice of lived experience, 22 people living with NCDs were supported to attend the Forum. Their personal stories across the programme enlightened, inspired, and charged delegates to increase the meaningful involvement of people with lived experience upon returning home.

The Our Voices, Our Voices event, ImPatient for Change: The power of lived experiences in Bridging the Gap for NCDs, was a Forum highlight and a welcome dedication to advocating for engagement of voices of change (see page 36).

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We all have stories that are worth sharing and that can impact change"

**Ms Zoleka Mandela,** Child Health Global Ambassador, FIA Foundation



Among delegates there was a resounding sense that the third Global NCD Alliance Forum was reflective of a shift in the NCD movement towards actioning the call for involving people living with NCDs and realising the leadership of those with lived experience.

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[As a result of the Forum, I'm planning to] invite more patients with NCDs to raise their voices from their lived experience in favor of the prevention and attention of NCDs and in search of universal health"

Forum delegate

## LAUNCH OF KEY NCD ADVOCACY RESOURCES

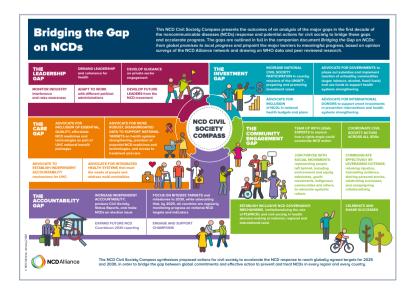
The Global NCD Alliance Forum 2020 witnessed the launch of a number of key publications and a landmark short documentary series. These advocacy resources will be used to support the NCD network in accelerating action to bridge the gaps towards 2025 and 2030 global NCD targets.

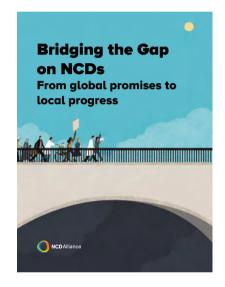
## Bridging the Gap on NCDs: From global promises to local progress

As a background brief to the Forum, <u>Bridging the Gap on NCDs: From global promises to local progress</u> outlines the gaps in the first decade of the NCD response. Calling on the experience of the NCD Alliance's global network of people living with NCDs, advocates, campaigners and experts collected via several surveys, as well as the latest data from the World Health Organization and peer reviewed literature, the policy brief identifies what has been lost in translation of the global targets for NCD reduction and describes the major barriers to meaningful progress.

#### **NCD Civil Society Compass**

As a companion document to <u>Bridging the Gap on NCDs: from global promises to local progress</u>, the <u>NCD Civil Society Compass</u> presents the outcomes of an analysis of the major gaps in the first decade of the NCD response and potential actions for civil society to bridge these gaps and accelerate progress. The pocket document focuses on each of the five gaps identified as priority areas of action: Leadership, Accountability, Investment, Care, and Community Engagement. The Compass serves as a model for the development of regional NCD Civil Society Compasses.





#### NCD Atlas: Bridging the Gap on NCDs through Civil **Society Action**

To showcase NCD civil society efforts in bridging the gap on NCDs, the NCD Alliance developed the NCD Atlas - Bridging the Gap on NCDs through Civil Society Action: Initiatives of National and Regional NCD Alliances. This new NCD Atlas provides updated information on NCD alliances by presenting the results of an online survey, and offering a snapshot of their current status and arowth. It also assesses alliances' views and perspectives on the enablers and barriers for governments and civil society to achieve global NCD targets, as well as their key priorities and recommendations to bridge the gap on NCDs.

#### Pushing for Progress - Accountability Toolkit

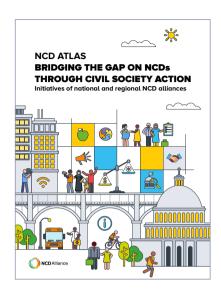
The Pushing for Progress – Accountability Toolkit provides background on the concept of accountability to the NCD civil society community, and resources to support civil society monitoring initiatives. The 2020 Toolkit is an update from a previous version from 2013, which included a benchmarking tool that was used by several national and regional alliances to produce civil society status reports in the lead up the 2014 UN High-Level Review.





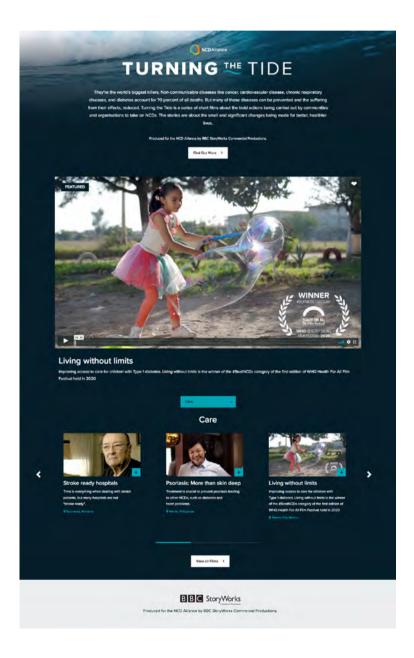
#### WHO NCDs Progress Monitor 2020

The latest and third World Health Organization NCDs Progress Monitor, launched at the Global NCD Alliance Forum on 10 February 2020, reports the latest data on the efforts at national level to reduce NCD burden. With a report card for every WHO Member State, the Progress Monitor presents where there has been progress in national NCD responses and where there are challenges to fulfilling commitments made since the first UN High-Level Meeting on NCDs in 2011. Data on 19 indicators are presented, including: setting time-bound targets to reduce NCD deaths; developing all-of-government policies to address NCDs; implementing key tobacco demand reduction measures, measures to reduce harmful use of alcohol and unhealthy diets and promote physical activity; and strengthening health systems through primary health care and universal health coverage.



#### **Turning the Tide**

The Forum saw the launch of the striking short documentary series, Turning the Tide. Produced by BBC StoryWorks in collaboration with the NCD Alliance, the series contains 26 short films depicting the impact of the NCD epidemic across the globe, including: diabetes in Mexico, mental health conditions in Ghana and South Africa, stroke in Romania, hypertension in Myanmar and psoriasis in the Philippines. The series aims to give voice to people living with and affected by NCDs, and shine a spotlight on the crucial efforts of those around the world who are dedicated to confronting the NCD epidemic and making prevention and control a global priority.



### **PROGRAMME**

#### **OPENING CEREMONY**

The Opening Ceremony highlighted both the progress that has been made since the first Global NCD Alliance Forum in Sharjah in 2015 – which culminated in the Sharjah Declaration – and the effort that is still urgently needed to make a difference to the lives of the millions of people living with or at risk of NCDs.

His Royal Highness Sheikh Dr Sultan Bin Muhammad Al Qasimi, Member of the Supreme Council and Ruler of Sharjah, United Arab Emirates, opened the Forum with a statement calling for continued progress towards treatment and prevention of NCDs.

His Highness was followed by an address from Her Excellency Mrs Sawsan Jafar, Chair of the Board of Directors of Friends of Cancer Patients, the local host organisation of the Global NCD Alliance Forum. HE Jafar noted that hosting the Forum is an example of Sharjah's recognition of health as a top priority, and stressed that the Forum is an important step in continuing action towards the achievement of the Sustainable Development Goals.

HE Jafar was presented with the *Sheikha Jawaher Medal for Contribution and Excellence* by **Her Highness Sheikha Jawaher Bint Mohammed Al Qasimi**, Wife of the Ruler of Sharjah (UAE) and Patron of the Forum.

**Mr Todd Harper**, President of the NCD Alliance and Chief Executive Officer of Cancer Council Victoria, highlighted the important gaps that are slowing progress towards the NCD targets to which governments are committed.

His Excellency Abdul Rahman Bin Mohammad Al Owais, Minister of Health and Prevention, UAE, highlighted the need to put individuals at the centre of the response to NCDs – a theme that was strongly echoed by Ms Katie Dain, Chief Executive Officer of the NCD Alliance. Ms Dain highlighted the NCD Alliance's 'transformative shift' to meaningful engagement of people living with NCDs, and also noted the importance of working with advocates beyond NCDs to identify the clear win—wins that will further sustainable human development.



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I am confident that the next few days will show a clear path and renewed optimism to bridge the gaps"

**Mr Todd Harper**, President of the NCD Alliance and Chief Executive Officer of Cancer Council Victoria

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We have had enough with the lack of progress and are impatient for change"

**Ms Katie Dain,** Chief Executive Officer, NCD Alliance

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We will continue what we achieved in 2017!"

**Her Excellency Mrs Sawsan Jafar,** Chair of the Board of Directors, Friends of Cancer Patients

#### **OPENING PLENARY**

## Bridging the gaps, seizing the moment for NCD prevention and control

The Opening Plenary highlighted the urgency of catalysing local and regional action on NCDs, to bridge the gaps in the NCD response. It recognised NCDs as a social justice issue and set the scene for the Forum by placing people at its heart.

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We all have stories that are worth sharing and that can impact change"

**Ms Zoleka Mandela,** Child Health Global Ambassador, FIA Foundation

Chair	Sir Trevor Hassell President, Healthy Caribbean Coalition; Board Member, NCD Alliance, Barbados
Fireside Chat	Dr Apoorva Gomber Community Manager/Co-founder, Diabetes India Youth in Action; Member of Young Leaders in Diabetes, International Diabetes Federation, India
	Ms Grace Gatera Communications Coordinator, Partners In Health Rwanda/Inshuti Mu Buzima; Young Leader, My Mind Our Humanity, The Lancet Commission on Global Mental Health and Sustainable Development, Rwanda
Кеупоте	Dr Colin Tukuitonga Former Director-General, Secretariat of the Pacific Community, New Caledonia
PANELLISTS	Dr Githinji Gitahi, MBS Group Chief Executive Officer, Amref Health Africa; Co-chair, UHC2030, Kenya
	Dr Apoorva Gomber Community Manager/Co-founder, Diabetes India Youth in Action; Member of Young Leaders in Diabetes, International Diabetes Federation, India
	Dr Ren Minghui Assistant Director General for UHC/Communicable & Noncommunicable Diseases, World Health Organization, Switzerland
	Ms Zoleka Mandela Child Health Initiative Global Ambassador, FIA Foundation, South Africa
	Ms Florence Bulte Group Head of Sustainability, Chalhoub Group, United Arab Emirates



#### The power of lived experience

The plenary began with a fireside chat between Sir Trevor Hassell and two leading youth advocates. Ms Grace Gatera and Dr Apoorva Gomber candidly and movingly recounted their personal experiences of being diagnosed and living with NCDs, answering questions on how they have used this knowledge and understanding to act as agents of change in their home countries of Rwanda and India.

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Everyone's story is important
– and learning from stories
will always be the right way
to approach care"

Ms Grace Gatera

#### Discussion highlights:

- Personal stories are memorable and impactful and are a reminder to leaders that there are real people behind the statistics
- Accountability mechanisms are key and should be established internationally but also at local level, so that they can be owned by those expected to deliver on it (for example, through the active involvement of in-country NGOs).
- A pressing challenge is how to translate global commitments on NCDs into sub-regional and local action, particularly where the threat of NCDs is exacerbated by climate change, as in small island developing states.
- Investing in NCDs is an investment for future generations.
   NCDs should be a core part of the provision of universal health
   coverage but funding of NCDs (both nationally and through
   international aid) does not reflect the realities of the disease
   burden, which too often leads to significant out-of-pocket
   expenditure and poverty.
- There is much to learn from the experience of other sectors and movement, and much to be gained by working with them – for example, working with youth movements, with the universal health coverage movement, and with the private sector (with appropriate safeguards to ensure that the private sector is involved only in implementation, not in policy development).

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There is a tyranny of urgency that directs all the resources into communicable diseases"

**Dr Githinji Gitahi**, MBS, Group CEO, Amref Health Africa; Co-chair, UHC2030



**Figure 9:** Delegate rating of opening plenary





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If you are trying to create a future in which young people will thrive, then include them in any and each conversation, and actually listen to them... and take into consideration what they say"

Ms Grace Gatera, Communications Coordinator, Partners in Health Rwanda/Inshuti Mu Buzima; Young Leader, My Mind Our Humanity, The Lancet Commission on Global Mental Health and Sustainable Development

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Create a better world, a healthier world, a more just world"

Sir Trevor Hassell, President, Healthy Caribbean Coalition

#### **PLENARY SESSIONS**

The Forum programme included three diverse plenaries based on the overarching theme of Bridging the Gap towards the 2025 and 2030 global NCD targets. Each plenary session addressed one of the following three sub-themes of the Forum, focusing the discussion on the key civil society catalysts for progress.

- 1. Saving lives through transformative policies and solutions
- 2. Building demand for action through transformative social movements and voices of change
- 3. Enhancing accountability through transformative and inclusive governance

At the third Global NCD Alliance Forum, great emphasis was placed on learning from the perspectives and experience of fresh voices, including those from outside of the NCD network. Panel sessions were further enriched with powerful addresses from youth leaders and leading advocates living with NCDs.



#### **PLENARY 1**

## Saving lives and protecting communities through transformative NCD policies and solutions



CHAIR Ambassador Sally Cowal

Senior Vice President, Global Cancer Control, American Cancer Society, United States

KEYNOTE Dr Ren Minghui

Assistant Director General for UHC/Communicable & Noncommunicable Diseases, World Health Organization, Switzerland

PANELLISTS I

Dr Mamka Anyona

Health Specialist, Noncommunicable diseases, United Nations Children's Fund (UNICEF), United States

Senator Guido Girardi

Physician and Chilean Senator, Chile

Dr Nooshin Mohamad Bazargani

Consultant cardiologist, Dubai Health Authority; Vice President, World Heart Federation; Chair, CVD prevention working group of Emirates Cardiac Society, United Arab Emirates

Dr Batool Al-wahdani

Medical doctor; President 2018-2019, International Federation of Medical Students' Associations (IFMSA), Jordan

Mr Tara Singh Bam

Deputy Regional Director, International Union Against Tuberculosis and Lung Disease (The Union), Asia Pacific, Singapore

Ms Kristina Sperkova

International President, Movendi International, Sweden

#### PROGRAMME

The first plenary focused on the policies and solutions needed to tackle NCDs successfully, such as the Best Buys in NCDs developed by the World Health Organization. We know what works and goals have been set with timelines to achieve them — so how can civil society facilitate the attainment of these targets at global, national and local level?

#### Discussion highlights:

- Good data is essential to understanding the global NCD response. WHO's NCD Progress Monitor provides the latest information on NCDs, which demonstrates both progress to date and the extent of the challenge that lies ahead.
- The whole health system needs to be appraised and strengthened to better deliver on NCD care. This includes engaging the health workforce in different ways such as taskshifting/task-sharing as part of a more multidisciplinary approach to delivering care.
- Local political leaders such as mayors are well placed to make the changes called for in the Best Buys at city level, filling the gap between global commitments and community-level action.
- Using a child health lens can significantly strengthen NCD advocacy, bringing in many new voices from (for example) education and child protection. NCDs do not just affect older people – and behaviour begun in childhood can have lifelong repercussions.
- Building a common understanding across stakeholder groups can greatly facilitate progress. For example, using the right language about alcohol control can help to foster alliances with other areas such as child rights.
- Front-of-pack food labelling was highlighted as a response to the communicability of NCDs through social behaviour (in this case, children's attachment to unhealthy food brands).



#### 66

We see the commitment at global level, but we need to translate it into real action on the ground"

**Dr Ren Minghui**, Assistant Director General for UHC/Communicable & Noncommunicable Diseases, WHO

#### 66

We need regional and gender representation – now let's include age representation!"

**Dr Batool Al-Wahdani,** Medical Doctor, 2018–2019 President, International Federation of Medical Students



Figure 10: Delegate rating of plenary one

#### 66

We need more passion and anger – we won't achieve as a movement until we do"

Ambassador Sally Cowal, Senior Vice President, Global Cancer Control, American Cancer Society



#### 66

People care about this topic [alcohol] – they just don't know they care about it until we translate it into their language"

**Ms Kristina Sperkova,** International President, IOGT International



#### 66

The mayors are the ones who can really deliver the WHO Best Buys and implement national policy on the ground"

**Mr Tara Singh Bam**, Deputy Regional Director, International Union Against Tuberculosis and Lung Disease



#### **PLENARY 2**

#### Building the demand for collective action on NCDs through transformative social movements and voices for change



#### CHAIR Ms Kwanele Asante

Secretary General, African Organization for Research and Training in Cancer (AORTIC); Global Advisory Committee Member, Our Views, Our Voices, NCD Alliance, South Africa

#### KEYNOTE

#### Dr Adeeba Kamarulzaman

International AIDS Society President-Elect; Dean of the Faculty of Medicine and Professor of Medicine and Infectious Diseases at the University of Malaya, Malaysia

#### PANELLISTS

#### Dr Aparajita Gogoi

Executive Director, Centre for Catalyzing Change; Co-Chair, What Women Want steering committee, India

#### Mr Fale Andrew Lesa

Youth Programme Advisor, NCD Child; Policy Consultant, Asia Development Bank Aotearoa Representative; UNESCO Asia Pacific Youth Advisory Board, New Zealand

#### Dr Esperanza Cerón Villaguirán

Director, Educar Consumidores; Coordinator, Mesa Colombiana de Incidencia por las Enfermedades Crónicas (MECIEC), Colombia

#### Mr Joshua Makubu

Advocacy Committee Member, Ghana Society of the Physically Disabled; Our Views, Our Voices advocate, Ghana NCD Alliance, Ghana

#### Dr Cristina Parsons Perez

Capacity Development Director, NCD Alliance, United Kingdom

#### Dr Shible Sahbani

Regional Advisor on Reproductive Health, United Nations Population Fund (UNFPA), Arab States Regional Office, Egypt The second plenary explored enablers and lessons learned from other areas of global health, particularly the HIV and women's health movements, focusing on the many ways in which advocates and people living with NCDs can be catalysts for change.

#### **Discussion highlights:**

- Be aware of potential barriers to meaningful engagement of people living with NCDs: take into account their skills and provide capacity-building where needed; ensure accessibility (for example, providing sign language as appropriate); and actively create space within which people living with NCDs can feel able to take up opportunities to be involved.
- Consider how to ensure that no one is left behind, taking whatever lens is most appropriate (vulnerability, gender, disability, human rights) and using it in programme development, design, implementation and monitoring of NCDs.
- A strengths-based approach will draw out existing knowledge, strategies and abilities to address NCDs from within indigenous communities themselves, giving these communities the confidence and capacity to make positive change.
- Successful social movements are aspirational as the women's rights and health movement has always been.
- NCD alliances are actively contributing to enhancing the NCD response at regional and national levels. Stated achievements include mobilising civil society, increasing government attention and priority to NCDs, enhancing public involvement in NCD issues, including PLWNCDs and youth.
- There is much that the NCD movement can learn from the enormous progress made to tackle HIV over the last 40 years. Embedding human rights has been essential to this success, with the movement led by the HIV community itself, which has taken a very proactive and vocal role in advocacy and involvement in policymaking and implementation.

#### 66

#### It is absurd that we still have to be fighting to realise the right to health as a human right"

Ms Kwanele Asante, Advocate, Chair of South Africa Ministerial Advisory Committee on Cancer Prevention and Control and NCDA Our Views, Our Voices champion

#### 66

## You don't "establish" a movement: they are organic!"

**Dr Aparajita Gogoi**, Co-Chair, Global What Women Want, Executive Director, Centre for Catalyzing Change

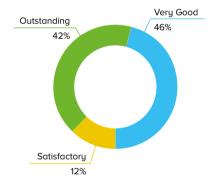


Figure 11: Delegate rating of plenary two





66

Ask ourselves: 'Who is not here? Who should be here? And how do I make that happen?'

**Mr Fale Andrew Lesa**, Policy Consultant, Asia Development Bank Aotearoa Representative, UNESCO





#### 66

Commit yourself to being the change we need to see. We won't get where we want by being polite... We need to be catalysts of change"

Ms Kwanele Asante, Advocate, Chair of South Africa Ministerial Advisory Committee on Cancer Prevention and Control and NCDA Our Views, Our Voices champion

#### **PLENARY 3**

## Enhancing accountability for all people with NCDs everywhere through transformative and inclusive governance



CHAIR Ms Paula Johns

Executive Director, ACT Promoção da Saúde; Board Member, NCD Alliance, Brazil

KEYNOTE Ms Brenda Killen

Member of the Independent Accountability Panel for Every Woman, Every Child, Every Adolescent (IAP); Director of the Scaling Up Nutrition (SUN) Movement Secretariat,

Switzerland

Panellists Dr Beatriz Champagne

Director of Advocacy, InterAmerican Heart Foundation; Coordinator, Healthy Latin America Coalition; Chair, Advocacy Committee, World Heart Federation, United States

Professor Adnan Hyder

Senior Associate Dean for Research, Professor of Global Health, Milken Institute School of Public Health, George Washington University, United States

Mr Pierre Cooke Jnr

Youth Technical Adviser, Healthy Caribbean Coalition; Barbados National Youth Parliament, Barbados

Dr Jayasree K Iyer

Executive Director, Access to Medicines Foundation, Netherlands

Dr Somaya Al Jowder

Former Member of Parliament, Bahrain; Member of Bahrain Women Development Society; Consultant family physician, Bahrain

#### PROGRAMME

The third plenary highlighted the importance of good governance and clear accountability frameworks in the achievement of global and national commitments on NCDs. Examples were provided of successful accountability mechanisms, showing that civil society organisations, young people and people living with NCDs are all important partners in holding governments and the private sector to account.

#### Discussion highlights:

- The custodians of accountability include parliament, an independent media, academia, legal institutions, civil society organisations, communities and individuals (Ms Brenda Killen).
- Individuals can use online tools to hold companies or policymakers to account, leverage our experiences as people living with NCDs, or make our views known as shareholders or employees in private companies. Academics can educate and inspire the next generation of advocates and provide independent, quality data. And civil society (including NCD alliances) can undertake 'shadow reporting' of government initiatives, work to use human rights treaties in tackling NCDs, or seek accountability at global/regional political gatherings (such as the G20 or the Summit of the Americas).
- Involvement of young people adds a crucial layer to accountability. They have specific interests and experiences; they are the leaders of the future, so building capacity now will pay dividends in the long run: 'we have to live in the future you create' (Mr Pierre K. Cooke Jr) so are particularly invested.
- Good data and monitoring are important, but on their own will not deliver accountability. The evidence must be regularly reviewed to ensure that progress is being made, with remedial action then being taken where more can be done.
- Ways in which civil society can hold the private sector to account include involvement at annual meetings, or through developing and publicising rankings of companies' social impacts. Investors are also increasingly turning their attention to outcomes other than profit.

#### 66

There is an army of investors who are extremely powerful – they are no longer investing only in the companies that make the highest profit"

**Dr Jayasree K. Iyer,** Executive Director, Access to Medicine Foundation

#### 66

We have the passion, you have the resources – and when these come together, we can have beautiful collaboration!"

Pierre K. Cooke Jr, Healthy Caribbean Coalition, Youth Technical Advisor, Member of Youth Coalition against NCDs, and National Youth Parliament, Barbados



**Figure 12:** Delegate rating of plenary

66

The NCD Alliance is powerful! You are voters, shareholders and consumers – and you can use this to strengthen accountability"

**Ms Brenda Killen,** Member of the Independent Accountability Panel (IAP) of Every Women Every Child Every Adolescent, Director of the Scaling Up Nutrition (SUN) Movement Secretariat



#### **PRE-FORUM EVENTS**

#### Elevating the youth NCD agenda to high-level stakeholders

Convened by NCD Child and the NCD Alliance; sponsored by AstraZeneca

Moderator	Dr Marie Hauerslev Chair, NCD Child, Denmark
Speakers	Mr Luis Manuel Encarnacion Cruz Senior Capacity Development Officer, NCD Alliance; Member of the Governing Council, NCD Child, Mexico
	Ms Nicola Gray Member of the Governing Council, NCD Child, United Kingdom
Practical SESSION LEADS	Mr Pierre Cooke Jnr Youth Technical Adviser, Healthy Caribbean Coalition; Barbados National Youth Parliament, Barbados
	Dr George Msengi Executive Committee Member, Youth Leader, NCD Child, Tanzania

30 young leaders from 25 countries attended this invitation-only, youth-only session, held prior to the opening of the Global NCD Alliance Forum. It began with introductions to the extent of the NCD burden globally and to NCD Child's activities. The NCD Alliance set out the five major gaps in NCD action at the global level (as identified in NCDA's background brief 'Bridging the Gap on NCDs') – building advocacy skills to tackle these gaps was at the heart of the practical aspect of this session.

The main objective of the session was to help participants to promote solutions to address NCD policy gaps through stronger communication skills. To do so, participants worked in small groups to develop an 'elevator pitch' on NCDs: a concise, attentiongrabbing policy message that can be quickly delivered to policymakers or other high-level decision-makers. A successful pitch should have a clear 'ask' and be evidence-based — and is most likely to be heard and acted upon during windows of opportunity such as before an election.

Participants performed their pitch in front of their peers to hone the content and delivery of the message. A wide range of issues was covered, including tobacco control, obesity, HPV-linked cancer and meaningful involvement of youth in decision-making.

Feedback from the session suggests that the opportunity to develop and practise 'pitching' was welcomed - and that the chance to meet, connect and build a network with other young leaders was empowering and valuable.

#### 66

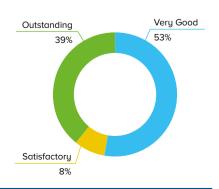
While you want to elaborate your side of the agenda, you have to recognise what the world wants"

**Dr George Msengi,** NCD Child Governing Council Member, Tanzania

#### 66

No matter how many pitches you've done, you can always practise and get better!"

**Dr Andrej M. Vujkovac,** Slovenian NCD Alliance, Slovenia



**Figure 13:** Delegate rating: Elevating the youth NCD agenda to high-level stakeholders

## ImPatient for Change: The power of lived experiences in Bridging the Gap for NCDs

Sponsored by Access Accelerated, the Leona M. and Harry B. Helmsley Charitable Trust and Upjohn-Pfizer

Chair	Ms Anne Lise Ryel Secretary General, Norwegian Cancer Society; Board member, NCD Alliance, Norway
Keynote Speaker	Ms Zoleka Mandela Child Health Initiative Global Ambassador, FIA Foundation, South Africa
Moderator	Ms Johanna Ralston Chief Executive Officer, World Obesity Federation, United Kingdom
Session 1 speakers	Ms Jyotsna Govil Our Views, Our Voices advocate, Healthy India Alliance & Indian Cancer Society, India
	Ms Charity Muturi Our Views, Our Voices advocate, NCD Alliance of Kenya, Kenya
	Mr Christopher Agbega Our Views, Our Voices advocate, Ghana NCD Alliance, Ghana
Session 2 PANELLISTS	Ms Kwanele Asante Global Advisory Committee Member, Our Views, Our Voices, NCD Alliance, South Africa
	Mr Bruno Helman Our Views, Our Voices advocate, Brazil
	Dr Karen Sealey Founder, Trinidad and Tobago NCD Alliance
	Dr Guy Fones Advisor, Global NCD Platform; Team Lead, Secretariat of the Global Coordination Mechanism on NCDs (GCM/NCD), Switzerland
Closing session speaker	Ms Lea Kilenga Our Views, Our Voices Global Advisory Committee, NCD Alliance of Kenya, Kenya

The Our Views, Our Voices event resounded with personal experiences of people living with NCDs, including from some who had not, until recently, felt confident about sharing their stories publicly. The session built on the NCD Alliance's Advocacy Agenda of People Living with NCDs, launched two years ago as a compass of action for the NCD community and aimed to explore a 'whole of society' approach to meaningful involvement of people living with NCDs in the NCD response. The event looked to highlight the leadership of people living with NCDs in helping to bridge the gap for NCDs, take stock of progress on meaningful involvement of people living with and affected by NCDs in the NCD response and promote community-led solutions, good practice and mechanisms for engaging people living with NCDs as equal partners in the NCD response.

The three-session event heard about lived experience from a diverse range of NCD conditions. All participants were called on to consider how people living with NCDs can be more meaningfully involved in the NCD response — moving from tokenistic engagement to taking a full and active role in decision-making processes.



Young people are stubborn
– and we will raise our voice
and our heads and keep
fighting and working until
we are recognised not only
by age group but for the
knowledge and experience
we can add to this fight"

**Mr Bruno Helman,** Our Views, Our Voices advocate, Brazil

## Discussion highlights:

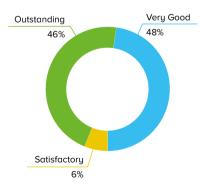
- People living with NCDs often live with multi-morbidities including mental health conditions. This reality strengthens the call to look beyond individual disease silos to a broader and unified NCD approach.
- Meaningful involvement should never be an afterthought: it is a human rights issue. It confers legitimacy on policymaking and research and helps to translate commitments into real impact for those most affected.
- It is critical to draw from other health and social movements, that have championed the call for putting people first.

#### 44

I'm going to ask you to stop being polite: the NCD movement has to be disruptive... "Nothing about us without us" must be more than a slogan"

Ms Kwanele Asante, Our Views, Our Voices Global Advisory Committee





**Figure 14:** Delegate rating: ImPatient for Change: The power of lived experiences in Bridging the Gap for NCDs

## 66

We need to put a face on NCDs and involve those we are talking about and on behalf of"

Ms Anne Lise Ryel, Secretary General, Norwegian Cancer Society

## 66

Thank you, NCD Alliance, for building the ship that we can all row together"

Ms Lea Kilenga, Our Views, Our Voices Global Advisory Committee, Africa Sickle Cell Organisation, Kenya

## Civil society coordination session: national, regional and global action

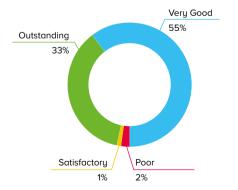
This event was exclusively for the civil society delegates attending the Forum.

The third Global NCD Alliance Forum followed the pattern of previous Forums in holding an advocacy planning meeting prior to the start of formal proceedings. The session aimed to facilitate coordination of advocates in their respective regions to leverage collective strengths, rally around shared opportunities for action, and identify region-specific solutions to help bridge the major gaps on NCD prevention and control. Discussions centred around the 'NCD Civil Society Compass' launched by NCD Alliance at the Forum to respond to relevant gaps identified.

In 2017 the discussion focused on the UN High-Level Meeting on NCDs and involved 43 national and regional NCD alliances. In 2020, discussion centred on the five major NCD gaps in the NCD responses, as identified in the NCD Alliance background briefing 'Bridging the Gaps on NCDs'—leadership, investment, community engagement, accountability and care—and there were 53 NCD alliances in attendance.

Delegates were invited to divide into groups as per the 6 WHO regions (AFRO, EMRO, EURO, SEARO, PAHO and WPRO), plus an individual group for the Caribbean and another for high-income/G7 nations. Delegates referred to suggested civil society actions to address the five major gaps as identified in the NCD Civil Society Compass, in order to prioritise them and discuss how these translated to their specific regions.

The plenary feedback following group discussions demonstrated both the commonalities between regions (including calls for stronger leadership and a clear role for civil society) and of the differences (for example, high-income countries' focus on NCDs as a donor priority). In some cases, regions summarised discussions into Regional Civil Society Compasses, providing guides for regional coordination and collective action.



**Figure 15:** Delegate rating: Civil society coordination session: national, regional and global action

## 66

Time and again, through the history of HIV, climate change etc., we have seen the power and impact that civil society can have to change the trajectory"

**Ms Katie Dain,** Executive Director, NCD Alliance

## 66

[The civil society coordination session was the most useful part of the Forum], it helped to unearth the gaps around NCDs and for the African region to develop strategies to address them"

Forum delegate

## **WORKSHOPS**

The Forum programme was enriched by 18 informative and highly interactive workshop sessions, each aligned with one of the three sub-themes of the Forum:

- 1. Saving lives through transformative policies and solutions
- 2. Building demand for action through transformative social movements and voices of change
- 3. Enhancing accountability through transformative and inclusive governance

A wide variety of topics were covered under the three sub-themes, from engaging with law and lawmakers, connecting the climate and NCD movements, building coalitions to address multi-morbidities, strategies for managing conflict of interest and countering industry interference in health policy to creating compelling stories and increase media attention for NCDs.

The workshops gave delegates the opportunity to learn from experts and hear experiences of fellow advocates. Sessions benefited from an interactive format of group activities and discussion, enabling knowledge exchange between participants. Workshops were a hotspot for networking, forming new connections and strengthening existing partnerships.

Workshop development and delivery were supported by the NCD Alliance network. Six of the eighteen workshops were curated by the Forum planning committee and developed by invited organisations from the global health and development network. Efforts were made to expand engagement and to learn from new voices and perspectives. Given the interest from members of the NCD Alliance in being more involved in programme development and the curation of workshop sessions, the third Global NCD Alliance Forum offered full NCD Alliance members the opportunity to submit a workshop proposal for one of six open sessions. A further six workshops were developed by the NCD Alliance Supporters Group.

## 66

The workshops were most helpful as they allowed for persons interested in the same topics to discuss deeply in the areas"

Forum delegate

## 66

Workshops [were the most useful part of the Forum], due to the engaging activities and opportunity to learn from case studies and participants in other countries"

Forum delegate

## 66

Workshops were most useful because we got to learn and get inspired from the speakers and also got to share ideas"

Forum delegate

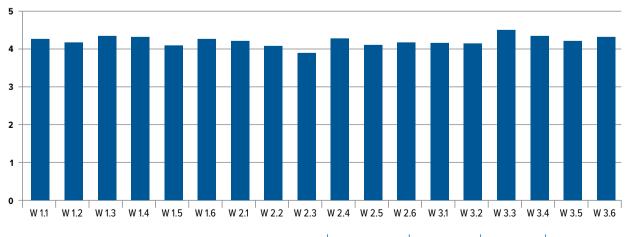


Figure 16: Delegate rating of each workshop

1 Poor 2 Unsatisfactory

**3** Satisfactory **4** Very good

**5** Outstanding



## Saving lives through transformative polices and solutions

## **WORKSHOP 1.1**

## Catalysing action on NCD 'best buys': challenges and enablers for policy progress

#### **LEADS**

Movendi International, Vital Strategies, World Cancer Research Fund International and Coalición México Salud-Hable

## **Emerging themes**

- The 16 WHO 'best buys' to support the Global Action Plan on NCDs are a set of cost-effective measures that will soon also be extended to another risk factor (air pollution) and NCD (mental health).
- Regulation of health-harming industries tobacco, alcohol and foods high in saturated fat, salt and sugar – is a best buy and a growing trend. However, implementation is slow and we are off track in meeting targets. Implementation is often compromised by industry interference.
- Advocate for a comprehensive package of measures that are harder for industry (such as the alcohol industry) to counteract, including marketing and labelling.
- A rights-based approach and particularly the rights of the child

   can be a strong and effective legislative tool.
- The group work focused on the four Ds of industry tactics: Delay (e.g. build your case and restrict the voice of industry), Divide (e.g. use a rights-based approach and avoid division in the health community), Deflect (e.g. speak the right language for each audience and involve influencers including celebrities, key politicians and scientists), and Deny (e.g. reframe the message in a simple and strong way, and include personal elements that support the evidence, such as the voice of lived experience).

## 66

You have no right to exploit our youth!" is the perfect message – who wouldn't want to defend their rights?"

Ms Kristina Sperkova, President, IOGT International



66

Policy coherence is key to preventing NCDs"

**Dr Nandita Murukutla**, Vice President, Global Policy and Research, Vital Strategies

## WORKSHOP 1.2

## Engaging with law and lawmakers to accelerate action on NCDs

#### **LEADS**

Union for International Cancer Control and the McCabe Centre for Law & Cancer

## **Emerging themes**

- Law is not just legislation, but also includes administrative instruments, treaties, decisions etc., made by national and local government, courts, regulatory agencies and international and regional bodies.
- The law impacts on NCD prevention and control at many points, with the potential to help to ensure that risk factors and social determinants are tackled effectively and that health services are equitable for all.
- Lawyers and politicians can create legitimate scope for legal action in public health – and will also greatly benefit from collaboration with the knowledge of scientists and the experiences of civil society.
- A 'needed, wanted, workable' framework can be beneficial: we need action, we want action, and it is possible by providing solutions.

## 66

These diseases are not non-communicable. They are the most communicable because they are widely transferred through industry advertising!"

Senator Guido Girardi, Physician and Chilean Senator, Chile



## 66

Law intersects with cancer and NCD prevention and control at every stage - we work to ensure it is effective and equitable for everyone"

**Ms Suzanne Zhou,** Legal Policy Advisor, McCabe Centre for Law & Cancer, Australia

#### 66

There have been gaps in the laws that have been covered. [As civil society] we must work directly with lawyers to see what can be done"

Professor Kaushik Ramaiya, General Secretary, Tanzania NCD Alliance, Tanzania

## **WORKSHOP 2.1**

## Beyond the declaration: Maximising political momentum on UHC for NCDs and mental health

## **LEADS**

UHC2030, United for Global Mental Health and NCD Alliance Kenya

## **Emerging themes**

- Civil society can help governments to build appropriate structures and support the inclusion of NCDs within universal health coverage (UHC). There is a pressing need for this in mental health services, where there is a huge deficit of care: just 1% of health budgets in Africa go towards mental health.
- The inclusion of people living with mental health conditions in these discussions is essential – they are the most invested in the interventions and programmes, and patient-led models can be very beneficial.
- To meet SDG 3.4 on NCDs, we must leverage international finance, use catalytic funding to ensure that money going towards health budgets included mental health, train healthcare workers in all aspects of mental health, and fight stigma and discrimination against those with mental illness. Mental health services can also be integrated into pre-existing health systems to minimise costs of implementation.
- Challenges to advocacy in NCDs include relatively low prioritisation compared to infectious disease, lower funding, expensive and long-term medication, lack of insurance coverage, inadequate access to treatment even if screening takes place, and a scarcity of patient empowerment.
- Civil society should use the momentum of the UN High-Level Meeting on UHC to push for more funding for NCDs and mental health.



66

NCDs [such as obesity or cancer] are characterised by a high level of mental health conditions"

Dr Karen Sealey, International Health Consultant, Trinidad & Tobago

## 66

Mental health is important in the UHC conversation because there is no health without mental health"

**Ms Charity Muturi,** Founder, Tunawiri Community-based Organisation, Kenya

## 66

There is such a thing as political stigma around mental health. Politicians feel that they will lose votes from mentioning mental health to their constituents – but I think that mental health is a vote winner"

**Mr James Sale,** Policy and Advocacy Manager, United for Global Mental Health, UK

## 66

As patients, we can accept our conditions and support other patients to accept their conditions too. This is important because denial and lack of acceptance fosters lack of action. We should wear it with pride and share our stories"

**Ms Charity Muturi,** Founder, Tunawiri Community-based Organisation, Kenya

## **WORKSHOP 2.2**

## Win-win interventions: Leveraging policy to address NCDs and reduce gender inequities in health

## **LEADS**

The Taskforce on Women & NCDs

## **Emerging themes**

- Too often, women and girls are left behind in NCD prevention and treatment. It is important to collect and analyse disaggregated data to understand gender barriers to accessing health care and addressing social determinants, and to bring this knowledge to bear on interventions that provide safety and dignity, and are appropriate for local contexts.
- The Healthy Caribbean Coalition showed how civil society can help to fill gaps in public-sector provision of cervical cancer services, through assisting with screening, treatment services and HPV vaccination, and calling for its inclusion in universal health coverage.
- Risk factors should also be addressed through policy action seen through a gendered lens. For example, women are as easily addicted to tobacco as men, the rate of quitting is low, and the majority of deaths from second-hand smoke are among women; opportunities for physical activity for women and girls may be limited or unpopular in some cultures; and women may be discriminated against in their access to healthy food.
- It is particularly important to take a gendered approach to NCDs in humanitarian settings, where women are most susceptible due to a lack of finance, mobility and access to timely health services.



66

I believe there is no better time than now to promote health and gender equity, and to protect the rights, safety and dignity of women and girls in Nigeria"

Professor Sani Malami, Executive Director, NCD Alliance Nigeria, Nigeria

## 66

Government can't do it all alone! But it is possible for government to eliminate cervical cancer when there is civil society working together to support and fill the gap"

**Ms Maisha Hutton,** Executive Director, Healthy Caribbean Coalition, Barbados

#### 66

There is a lack of a gendersensitive approach in NCDs and we do not have enough gender-disaggregated data"

**Ms Helen McGuire**, Director, NCDs Programme, PATH, USA

## **WORKSHOP 3.1**

## Sustainable investment, smarter financing for NCDs: The power of civil society in driving change

## **LEADS**

Health Finance Institute, UNDP, Joep Lange Institute and the Framework Convention Alliance

## **Emerging themes**

- There is a very significant gap between the requirements for health funding and the reality. Sustainable financing is a crucial discussion – we have to start asking what is due for NCDs rather than just asking for additional resourcing.
- NCDs are major disease burdens that will not be solved by domestic financing alone in low-income countries, but they are still afforded only low priority in overseas development assistance (ODA).
- Donor countries are interested in looking at way sin which development aid investment can best be spent. Norway is a trailblazer in NCDs as a development issue, as it has recently introduced an ODA strategy for NCDs: 'Spending development money on NCDs is essentially future proofing health for all' – Mr Kjetil Bordvik (Ministry of Health and Care Services, Norway)
- Making the case for return on investment on NCDs is crucial and inexpensive but is still rarely done. The primary audience for the Rol case is ministries of finance and parliamentarians, and it needs to be based on national data and working in coalition with partners from government, private sector and civil society to ensure a sense of national ownership and understanding of the conclusions.

## 66

## Accountability discussions are not neutral"

**Dr Andrea Feigl,** Executive Director, Health Finance Institute, USA

#### 66

## CSOs are a voice for the voiceless"

**Mr Wondu Bekele**, Executive Director, Mathiwos Wondu YeEthiopia Cancer Society, Ethiopia

## 66

It is important how we frame the findings of investment cases, as this can be politically sensitive and often politicians emphasise the quickest gains"

**Dr Elfatih Abdelraheem,** Policy Specialist, HIV, Health and Development, UNDP

## **WORKSHOP 3.2**

## Partnering for Impact in the SDG era: Saving lives through equitable access to essential NCD medicines and technologies

## **LEADS**

NCD Alliance Supporters Group

## **Emerging themes**

- People must be at the centre of access to health care for example, a survey on the needs of people living with type 1 diabetes found a desire for involvement in improved policy and budget allocation, increased access to health professionals and resources (including a global support network) and innovative healthcare models.
- The private sector plays an important role in ensuring access to NCD care – and the establishment of specific procedures in humanitarian settings is key.
- Integrated data collection and data use, along with data literacy, are essential – including identifying needs and gaps in access to medication.
- Digital tools can help to deliver better prevention and care for example, a Myanmar training programme for community health workers on mental health, provided through an app.
- Partnerships can lead to sustainable solutions that avoid conflicts of interest – but there may be a lack of a coalition on NCDs and a lack of understanding on how challenging they are to address.

## 66

We have to use digital as a tool. Digital is not the final answer, and do not forget the face-to-face interactions in health care. But we need to put it as an ally"

Dr Catherine Levy, Global NCD Lead, Global Health, Sanofi, France



## 66

We have seen access to medicine, access to food and access to insulin as a privilege and not a right. We believe we need to strongly advocate for having a good life – and make it not just a privilege but a right!"

**Dr Gina Agiostratidou,** Program Director, Type 1 Diabetes, Helmsley Charitable Trust, USA

## 66

We know data is scarce – but data is also the key"

**Ms Rikke Fabienke**, Senior Global Access to Care Manager, Novo Nordisk, Denmark



# Building demand for action through social movements and voices of change

## **WORKSHOP 1.3**

## A people-powered movement: Unleashing the untapped potential of people living with NCDs to turbocharge the response

## **LEADS**

Eastern Mediterranean NCD Alliance, Ghana NCD Alliance, UNAIDS and Humanity & Inclusion

## **Emerging themes**

- People living with disability have a lived experience of NCDs and are best placed to identify solutions. Their voices must be heard, documented, and acted upon.
- Involvement must go beyond participation (where initiatives are 'done to' people living with NCDs) and collaboration ('done for' them) to genuine co-production ('done with' them).
- There are significant opportunities to learn from other social movements – such as the HIV movement or women's grassroots movements – as a blueprint to address access to treatment, stigma and successful advocacy.
- Challenge facing refugees living with NCDs include injustice, limited access to health services and insurance, a double burden of malnutrition (food insecurity is coupled with access only to foods high in fat and low in nutrients), and mental and physical health co-morbidities. However, given the opportunity, they can greatly contribute to their host communities and economy.
- To unleash the untapped potential of PLWNCDs we have to stop considering gender, age and disability as separate layers of vulnerability, but start addressing them as a whole.

A proverb from Ghana: 'One broom is easily broken, but brooms that are joined together are hard to break" — this is the power of community!"

Mr Christopher Agbega, Our Views, Our Voices advocate, Ghana NCD Alliance, Ghana

## 66

Listening to the voices of people living with NCDs can really shape the NCD response. Nothing can humanise it better than these voices"

**Ms Manjusha Chatterjee**, Capacity Development Consultant, NCD Alliance, UK

## 66

## Nothing for us without us"

Motto of Organisation of People with disability, cited by Dr. Davide Olchini, Director of Global Health of Humanity & Inclusion.

## 66

Refugees are survivors and fighters – and they need to fight for their voices to reach policymakers"

**Dr Noor Younes**, Medical Doctor, International Rescue Committe)

## WORKSHOP 1.4

## Transforming the narrative of childhood obesity

## **LEADS**

NCD Child, Healthy Caribbean Coalition and World Obesity Federation

## **Emerging themes**

- Childhood obesity is rapidly rising an increase of 100 million in a decade, with the biggest rise in emerging economies. Obesity is strongly linked not only to Sustainable Development Goal 3 (on health) but to many other SDGs.
- Obesity is an urgent, complex issue that requires systemlevel solutions, going far beyond the health sector to include education, transport, social services, culture etc., and with partnership across civil society (including young people, people living with obesity and indigenous communities), government, schools and communities.
- Interventions cannot be imposed from the outside. Instead, economic, social and cultural realities must be considered, involving the target population in the design, implementation and evaluation of preventive measures.
- Young people can (and do) lead impactful action themselves for example, the healthy schools network in the Caribbean and advocating for policy change in Tanzania.

## 66

Solutions have to be local. They can't come from Geneva – they need to come from us"

Mr Andrew Fale Lesa, Youth Programme Advisor, NCD Child, New Zealand



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Obesity is not as simple as energy-in, energy-out. It is a very complex system of policies, structures and personal aspects"

**Ms Hannah Brinsden,** Head of Policy, World Obesity Federation, UK

#### 44

We live in a world where boys are growing up being told "You're growing, you need to eat" – and then suddenly "You're obese, you need to stop eating and lose weight!"

**Mr Pierre Cooke**, Youth Technical Adviser, Healthy Caribbean Coalition, Barbados

## 66

Children cannot push themselves – they need compassion, training and support"

**Ms Allison Ibrahim,** Global Educational Consultant, Kuwait

## **WORKSHOP 2.3**

## Planetary Health Action Dialogue: Connecting the climate and NCD movements to take on global emergencies

## **LEADS**

International Federation of Medical Students' Associations (IFMSA), Vietnam NCDs Prevention and Control Alliance, Global Climate & Health Alliance and the Wellcome Trust

## **Emerging themes**

- Young people are strong voices in the climate change movement and are increasingly advocating for tackling the health impacts of climate change. They, and people living with NCDs, are bringing to the table the passion that this issue merits.
- As Greta Thunberg has shown, the next generation can transform
  the dialogue on global issues, and youth coalitions (such as the
  International Federation of Medical Students Association, or the
  Commonwealth Youth Climate Network and the Commonwealth
  Youth Health Network) can build the capacity and knowledge of
  young people to take this agenda forward.
- Integrating advocacy on NCDs and the environment strengthens both causes. For example, the Vietnam Sustainable Energy Alliance initially focused its efforts on reducing coal in the energy mix – but has now broadened its partnerships into air pollution and other NCD-related issues, which are raised in discussions on renewable energy.
- Small island developing states are at the forefront of bringing the NCD and climate change agendas together into a single topic for advocacy, the Caribbean and advocating for policy change in Tanzania.

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Youth are now more interconnected than ever before and can raise awareness about NCDs all over the world"

Ms Omnia El Omrani, Liaison Officer for Public Health Issues, International Federation of Medical Students' Associations, Egupt



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We have learned that NCDs may be hard to explain, but when we have people living with NCDs as part of the message, there can be greater impact"

**Mr José Luis Castro,** President and CEO, Vital Strategies

## WORKSHOP 2.4

## Building coalitions and social movements to address NCD multi-morbidities: Health systems for people, not siloes for diseases

## **LEADS**

NCD Alliance Supporters Group

## **Emerging themes**

- Multi-morbidity is an emerging burden on individuals and health systems worldwide – but health systems are not equipped to manage it effectively. Integrated care requires better understanding of the connections between conditions – such as incorporating eye health within diabetes care, routinely taking blood pressure measurements, building mental health diagnosis and treatment into primary health care, and providing support in tackling risk factors that cut across NCDs.
- Integrated advocacy depends on recognising, valuing and acting
  upon the commonalities across the different disease areas in
  which we work and with which we live. There is an increasing
  interest in working together as an NCD community rather than
  in disease siloes, by leveraging cross-cutting solutions and
  learning from the positive experiences and recommendations of
  the different sectors.
- An estimated 70% of premature deaths in adults can be linked back to behaviour that started in adolescence. Adequate education on NCDs (including mental health conditions such as dementia) in schools and the involvement of young people in advocacy initiatives are crucial to reduce unhealthy behaviour, create healthier environments and to improve future health outcomes in adulthood.



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Youth should take the lead – not just because they have the energy, but because they are the future and the largest part of the population"

Dr Gerald Yonga, Chair, East African NCD Alliance, Kenya

## 66

Co-morbid diseases are too often treated separately when a holistic approach is needed and would have many benefits"

**Dr Giancarlo Francese,** Teva Access Head, Social Impact and Responsibility, Teva, Switzerland

#### 66

There's a real issue of stigma around dementia being reinforced within the health system. And it is in this context – where services and support are so lacking – that people turn to advocacy"

Ms Annie Bliss, Communications and Policy Manager, Alzheimer's Disease International, UK

## WORKSHOP 3.3

## Think like a broadcaster: How to create compelling stories and increase media attention for NCDs

## **LEADS**

BBC StoruWorks

## **Emerging themes**

- A compelling and relatable story is one that successfully makes the link between NCDs and personal experience: it is not about disease per se, it is about the ramifications for people and families living with the disease.
- Informing and educating relies on engagement, entertainment and personal connection: know your audience (but think beyond viewing figures), shine a new light on your subject, be characterdriven, and trigger emotions.
- The NCD Alliance has partnered with the BBC on 'Turning the Tide', a series of 26 films from 24 countries about NCD care, prevention, leadership, investment and people. The films can be used for a range of advocacy, including with policymakers to reinforce calls to action on NCDs.

## we need to truly think like a broadcaster" Mr Mbiydzenyuy Ferdinant Sonyuy, Secretary General, Cameroon Civil Society NCD Alliance, Cameroon

To pass on a strong message,

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Do not put your products and projects of your organisation first; put the people first"

**Dr Jean-Luc Eiselé**, CEO, World Heart Federation, Switzerland



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Audio-visual storytelling is a must for any NGO trying to reach out to massive audiences and create awareness on any issue. 'Turning the Tide' series is a first step in the right direction"

Jimena Márquez Donaher, Communications Director, NCD Alliance

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As striking as the NCD statistics are, they lose their meaning completely if we don't link them to people's lives and families. We need their stories, our stories and my stories that can connect with people more than figures"

**Mr Simon Shelley**, Global Director of Programme Partnerships, BBC Global News, UK

## WORKSHOP 3.4

## Bridging sectors: Broadening coalitions for NCD advocacy

## **LEADS**

ACT Promoção da Saúde / ACT Health Promotion and Global Health Advocacy Incubator (a project of the Campaign for Tobacco-Free Kids)

## **Emerging themes**

- Coalitions can be built across civil society organisations, young people, academia, people living with NCDs and the media.
   Coalitions can be large or small, formal or informal, loose or tight, and each model has advantages and disadvantages. But – however they are constituted – a degree of compromise will be required between members' opinions.
- Transparency within each coalition is essential, particularly to identify any potential conflicts of interests.
- The benefits of coalition include: the identification of new allies by finding the NCD angle in others' work; engagement of grassroots organisations and individuals (such as local communities who can call for effective implementation of NCD policies) or high-level policymakers or influencers (who can speak publicly (online or in traditional media) about the issues); and the ability to speak with a louder and more coherent voice.
- Civil society coalitions can call for stronger action on currently neglected areas across the social and commercial determinants of health – such as policy action on unhealthy foods and strengthened tobacco control measures.



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We have to figure out our governance model. We need to be stronger, to have more people on board: how do we bring them together?"

Paula Johns, Executive Director, ACT Promoção da Saúde, Brazil

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We need to find the NCD angle in other people's work"

Mr Mbiydzenyuy Ferdinant Sonyuy, Secretary General, Cameroon Civil Society NCD Alliance, Cameroon

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We need to challenge ourselves and find new, innovative ways to bring our movement together"

**David Mulabi,** CEO, East Africa NCD Alliance, Uganda

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We need consensus building – and we need transparency, even within the coalition"

**Labram Musah,** National Coordinator, Ghana NCD Alliance. Ghana



# **Enhancing accountability through transformative and inclusive governance**

## **WORKSHOP 1.5**

## Promoting whole of government and whole of society action on NCDs

## **LEADS**

Friends of Cancer Patients

Moderator	Dr Sawsan Abdul Salam Al Madhi Director General, Friends of Cancer Patients, United Arab Emirates
CONFIRMED SPEAKERS	Dr Elfatih Abdelraheem Team Leader for HIV, Health and Development - Arab States, UNDP - Istanbul Regional Hub, Turkey
	Ambassador Sally Cowal Senior Vice President, Global Cancer Control, American Cancer Society, United States
	Ms Bekki Field Senior Programme Lead, International Cancer Prevention Programme, Cancer Research UK, United Kingdom
	Ms Florence Bulte Head of Sustainable Engagement, Chalhoub Group, United Arab Emirates
	Dr Adel Al Shammari Cardiac Surgery Consultant, United Arab Emirates

## **Emerging themes**

- All sectors of society are 'equal stakeholders in accountability'; this includes politicians and civil servants, civil society organisations, the private sector and the general public.
- Making the investment case is a catalyst for engagement by
   Ministries of Finance and can lead to rapid positive returns on
   NCD interventions across a range of areas, including enhanced
   tobacco control legislation, childhood obesity strategies and salt
   reduction campaigns.
- Where the investment case is made, consulting with stakeholders from across the community will ensure that everyone understands it and can play a role in implementing change.
- Civil society organisations must learn to speak the language of target audiences, and be ready both to use quantitative data and to humanise the case using stories.

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Understanding the political economy drivers is important to help build the case for investment"

**Dr Elfatih Abdelraheem**, Team Leader for HIV, Health and Development - Arab States, UNDP - Istanbul Regional Hub, Turkey



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Civil servants play a very important role because their technical and institutional knowledge brings continuity to issues even when there is political change"

**Ms Bekki Field,** Senior Programme Lead, International Cancer Prevention Programme, Cancer Research UK, UK

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No numbers without pictures and no pictures without the numbers"

Ambassador Sally Cowal, Senior Vice President, Global Cancer Control, American Cancer Society, USA

## **WORKSHOP 1.6**

## The power of data to fuel systems reform for NCDs: Leveraging evidence to achieve planetary and human health

## **LEADS**

NCD Alliance Supporters Group

## **Emerging themes**

- There is a complex interplay between food, health and environmental sustainability, as demonstrated by the concept of the Global Syndemic, which identifies 'triple-duty' actions that simultaneously address over-nutrition, under-nutrition and climate change.
- Tools are available to gather and present data in an actionable and understandable form, enabling the monitoring of prevention and implementation strategies. Examples include the Healthy Caribbean Coalition's Childhood Obesity Prevention Scorecards (which assist civil society in tracking national progress on obesity) and The George Institute's FoodSwitch food database (which empowers individuals to make healthier food choices and collects data that can be used to monitor the food environment and advocate for improvements). There are also initiatives like the American Heart Association's Foodscape Innovation Initiative, which aims to identify and reward innovative and datainformed actions by different types of stakeholders to improve the sustainability of food systems.
- There are major challenges in data collection (how to gather all the data that is required) and data use (for example, how to harness the big data captured through the use of mobile apps), and also in how best to use this data to inform evidence-based policy change.



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Data has huge power and can make a real change"

Professor Bruce Neal, Executive Director, The George Institute for Global Health, Australia

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Helping consumers navigate the food system with innovative solutions support their empowerment in making healthier food choices"

Ms Diana Vaca McGhie, Global Advocacy Lead, American Heart Association, United States

## **WORKSHOP 2.5**

## Global governance and binding frameworks: Necessary instruments for tackling NCD drivers and determinants?

## **LEADS**

Framework Convention Alliance, World Obesity Federation, Global Alcohol Policy Alliance and the McCabe Centre for Law and Cancer

## **Emerging themes**

- Binding international legal frameworks that apply to global health include WHO treaties, human rights law, international environmental law, and trade and investment law. States have also made political commitments to address NCDs, through UN General Assembly declarations and the Sustainable Development Goals.
- All countries are already party to at least one treaty that includes the right to health -- civil society can call for action to prevent and treat NCDs on the basis of these existing rightsbased obligations.
- The Framework Convention on Tobacco Control remains a landmark treaty, but it is still not fully resourced or implemented worldwide. There are now increasing calls for framework conventions in alcohol and food, which could mobilise policy support and draw attention to NCDs as a serious health crisis of the SDG era.
- Civil society can play a more direct and active role in demanding immediate change, demanding a move away from the cooperative and voluntary engagement with the private sector that currently defines the space.
- A common theme that underpins the rationale for a legal framework in tobacco/food/health/alcohol/climate change was to have a mechanism which helps address conflicts of interest and minimise industry interference in policy-making, address cross-border challenges (including marketing), as well as to increase multi-sector cooperation and coherence, and increase political buy-in and will to take action.



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Every country in the world has legally committed to the right to health through at least one human rights treaty, and politically committed to action on NCDs through UN General Assembly declarations on NCDs"

Ms Suzanne Zhou, Legal Policy Advisor, McCabe Centre for Law & Cancer, Australia

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The human rights and foodsystem perspective can provide policy practitioners with increased leverage in the battle to prioritise food and nutrition issues in budgetary allocations"

Busiso Moyo, South Africa

## 66

Let's not forget that most countries already have the obligation to protect the right to health. This remains core to our work"

**Ms Belen Rios**, Legal and Human Rights Adviser, Coalición Latinoamericana Saludable, Argentina

## **WORKSHOP 2.6**

## Accountability in the era of the e-cigarette epidemic

## **LEADS**

American Heart Association / American Stroke Association, NCD Child and Vital Strategies

## **Emerging themes**

- There is a significant lack of awareness about the health impacts of e-cigarettes and novel products, both among the general public and policymakers.
- There is a clear need to regulate the use of e-cigarettes, but not yet a consensus on how this should be done. Public support and understanding are critical.
- The national context for e-cigarette use varies. In India, most people use smokeless tobacco or bidis, so the context of harm reduction (e-cigarettes as a quit device from regular cigarettes) is not relevant, but the industry is pushing their use. In the United States, there is an epidemic of e-cigarette use among young people.
- The industry continues to use many of the same tactics as for cigarettes, using marketing strategies that specifically target new users – particularly young people.
- E-cigarettes and tobacco products must be considered together, so we don't displace our progress in tobacco control with a new tobacco industry product.
- The leadership of civil society groups in devising, implementing, and demanding the enforcement of tobacco control policies and regulations is critical as new tobacco products emerge like e-cigarettes.
- Encouraging the inclusion of e-cigarettes under current country legislation may protect the public's health especially new uptake of e-cigarette among the youth.



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Policymakers are as misinformed as the general public. Information is needed for all"

Group feedback

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Tragically, vaping is the new youth tobacco epidemic [in the United States]"

**Dr Jeff Willett,** Vice President, Integrated E-Cigarette Strategy, American Heart Association, USA

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Big tobacco is a predatory industry, whose market dynamics demand that it recruits young people"

**Daniel Hunt,** Health Policy Consultant, NCD Child, UK

## **WORKSHOP 3.5**

## David versus Goliath: Strategies for managing conflict of interest and countering industry interference in public health policy

## **LEADS**

Healthy Caribbean Coalition, University of Edinburgh, Coalición Latinoamérica Saludable/ Healthy Latin America Coalition

## **Emerging themes**

- The unhealthy commodity industries tobacco, alcohol and unhealthy food – have vested interests that are incompatible with public health objectives, and often wield political influence through the corporate interests of policymakers.
- Voluntary corporate responsibility initiatives for example, by the alcohol industry – have had too little effect on harm reduction: more radical action is needed.
- Where civil society and public health speak out with a single, aligned and coherent voice against the influence of the unhealthy commodity industries (tobacco, alcohol and unhealthy food), this assists in holding the industries to account.
- Successfully addressing conflicts of interest requires monitoring
  of industry behaviour, learning from and evaluating experiences
  (nationally, regionally and globally), setting clear transparency
  requirements (such as through memorandums of understanding
  prior to engagement), engaging champions to highlight the
  threat, building coalitions and partnerships among civil society
  organisations, and using tools such as human rights obligations.

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The market power of huge transnational alcohol companies gives them huge political power as well"

Mr Øystein Bakke, Secretary, Global Alcohol Policy Alliance, Sweden

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I don't care what you are – if you cross the line with what our principles are and what our work is, we won't engage"

**Ms Deborah Chen,** Executive Director, Heart Foundation of Jamaica, Jamaica



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Government corruption is threat to health and human development"

Dr Beatriz Champagne, Coordinator, Healthy Latin America Coalition, USA

## WORKSHOP 3.6

## Taking the pulse of NCD progress: How to hold governments to account

## **LEADS**

NCD Alliance

## **Emerging themes**

- Accountability is not just data and monitoring, it's also reviewing action and constant feedback loop.
- We're not doing enough as alliances, only 1/3 of NCD alliances are engaged in NCD accountability activity.
- WHO website can be used to access country level data. Policy
  documents are available in the NCD Document Repository.
  Quantitative data is available via the WHO Global Health
  Observatory and the new NCD Data Finder app.
- It is important identify the specific and strategic opportunities to hold the Government accountable. E.g. The experience in Mexico.
- Non-compliance and funding allocation is a major issue across all regions. Civil Society needs to pressure funders and the Government to allocate funding to NCDs.
- Civil Society needs to show government and decision makers that we are allies fighting the same battle.
- NCD Alliance accountability toolkit provides a tool for alliances and CSOs to assess progress at national/regional level from a civil society perspective.



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Just over half of the countries have NCD polices in place.... which is an improvement from 4 years ago which was only a third"

Ms Melanie Cowan, Technical Officer, Surveillance, Monitoring and Reporting, Noncommunicable Diseases Department, WHO, Switzerland

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If you close the accountability gap, the investment and leadership gap will follow"

**Ms Nina Renshaw,** Policy and Advocacy Director, NCD Alliance

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Bottom action is that every action that we as Civil Society take, saves lives"

Manhusha Chatterjee, Capacity Development Consultant, NCD Alliance, United Kingdom

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I am enraged by the way people with NCDs in my countries are treated"

**Dr Victoria Pinkney-Atkinson**, Director, South African NCDs Alliance (SANCDA), South Africa

## **SATELLITE SESSIONS**

# Protecting Populations, Preserving Futures: Empowering the Health Workforce to Tackle the Greatest Global Health Challenge of our Time

Sponsored by Upjohn-Pfizer

Chair	Mr Neal Kovach Division Vice President, Global Market Strategy, American College of Cardiology, United States
Panel 1	Professor Kaushik Ramaiya General Secretary, Tanzania NCD Alliance, Tanzania
	Ms Johanna Ralston Chief Executive Officer, World Obesity Federation, United Kingdom
	Mr Enzo Bondioni Executive Director, FDI World Dental Federation, Board Member of World Health Professions Alliance, Switzerland
	Her Excellency Dr Maryam Mohamed Fatma Matar Founder and Chairperson of UAE Genetic Diseases Association, United Arab Emirates
Panel 2	Ms Jennifer Bae Managing Director of Innovation, American College of Cardiology, United States
	Professor Adel El Sayed Selim Emeritus Professor of Internal Medicine and Diabetes, Sohag University, Egypt; President of the Egyptian NCD Alliance, Egypt
	Dr Lobna Salem Chief Medical Officer Developed Markets, Upjohn - Pfizer, United States

This satellite session took the form of two panel discussions. First, how (and how urgently) to build an optimum health workforce for NCDs and, secondly, examples of evidence-based strategies that can drive the development of an effective health workforce.



Accountability is key: government must have skin in the game!"

**Dr Lobna Salem**, Chief Medical Officer, Developed Markets Upjohn-Pfizer

## Discussion highlights:

- It is a challenge to take an integrated approach to care because programmes are often established for specific diseases (e.g. malaria), and there are not the same incentives to train or work in NCDs.
- Low- and middle-income countries are still developing their models for chronic care. The HIV experience has assisted this process, as HIV has evolved from being an acute condition to a chronic condition.
- Invest in the health workforce through education/training and champion the integration of primary care. For example, obesity can be tackled throughout primary care, but often struggles to find a place within the health system, and health professionals often have only limited opportunities to learn about obesity prevention and treatment.
- Carefully consider ways in which to negotiate with the private sector to ensure that patients, government and company all benefit in the long term. The private sector can move swiftly to scale up programmes, moving from 'we should' to 'they did' (with the example of the Healthy Heart Africa initiative).
- Humanitarian settings pose particular challenges for integrated care, including transient or displaced populations and a shortfall in training for primary healthcare workers.
- Digital health presents opportunities that are best realised when there is clear understanding between health partners and tech partners, and where accurate data is available to be used by the digital algorithms.

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## We need to get digital health right – and get it right fast"

**Dr Guy Fones,** Advisor, Acting Head, Secretariat of the WHO GCM-NCD



## Delivering and financing quality care for NCDs: leaving no one behind

Sponsored by the Leona M. and Harry B. Helmsley Charitable Trust

Chair	Ms Megan Deichler Associate Program Officer for the Type 1 Diabetes Program (T1D) Leona M. and Harry B. Helmsley Charitable Trust, United States
Moderator Panel 1	Dr Gina Agiostratidou Director, Type 1 Diabetes program, Leona M. and Harry B. Helmsley Charitable Trust, United States
Panel 1	Ms Emily Wroe Associate Director of NCD Policy & Implementation, Partners in Health, United States
	Ms Lea Kilenga Our Views, Our Voices advisory committee member, NCD Alliance Kenya, Kenya
	Ms Happy Nchimbi Project Manager, Tanzania NCD Alliance, Tanzania
	Ms Aigerim Zhaparova patient advocate, Kyrgyzstan
Moderator Panel 2	Ms Estefania Palomino Program Officer, Type 1 Diabetes program, Leona M. and Harry B. Helmsley Charitable Trust, United States
Panel 2	Dr Layal Barjoud Special Assistant to the CEO, Defeat-NCDs, Switzerland
	Ms Maia Olsen Programme Manager, NCD Synergies, Partners In Health, United States
	Dr Andrea Feigl Executive Director, Health Finance Institute, United States
	Dr Mamka Anyona Health Specialist, Noncommunicable diseases, United Nations Children's Fund (UNICEF), United States

This satellite session took the form of two panel discussions. The first panel – 'Delivering quality care for vulnerable communities: from global initiatives to grassroots movements' – discussed how international and local partners are working to ensure access to care in the most resource-scarce settings, and the role of women in leading local access initiatives. The second panel – 'Strategic and inclusive partnerships to finance NCD care: how catalytic funding can have a sustainable impact on the lives of people in LMICs' – focused on the financing challenges and the opportunities to improve access through a gender lens.

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You have to translate
the global by going to
households and families and
explaining NCD conditions
that they do not understand.
Communities need to be
made aware of the challenges
of sickle cell disease and to
be more inclusive"

**Ms Lea Kilenga,** Our Views, Our Voices Global Advisory Committee, Africa Sickle Cell Organisation, Kenya

## Discussion highlights:

- The lack of adequate financing for NCDs is a global concern and should be a core message within universal health coverage (UHC) discussions.
- Impact investment is a relatively new concept in low- and middle-income countries. This is an outcomes-based contract between service providers, governments and investors, which aims to unlock savings in the future through providing access to capital today.
- Integrated care models are often not standard practice, but health systems and patients would benefit from their introduction. This entails moving away from episodic care towards a more holistic approach across multiple conditions (including NCDs such as sickle cell disease), incorporating prevention, early detection and management.
- Including children in NCD prevention and management is essential in moving from a 'survive' model (all children should live through childhood) to a longer-term 'thrive' model (living a long and healthy life).
- NCD civil society organisations have a responsibility to ensure that women are empowered to move beyond a traditional caring role in the family and community to fulfil global and local leadership roles. We must also raise awareness about the burden of NCDs on women and other vulnerable groups.



#### 66

Access to care and medicine is not a privilege: it is a right for everyone!"

**Dr Gina Agiostratidou**, Director, Type 1 Diabetes program, Leona M. and Harry B. Helmsley Charitable Trust

## 66

The global health mission is about making space and making use of our privilege to ensure that the unfairness, cruelty and inequality of the world is chipped away"

**Dr Mamka Anyona,** Health Specialist, NCDs, UNICEF

## Building the Case for National Plans to Tackle NCDs: Heart Failure

## Sponsored by AstraZeneca

Moderator	Dr Waleed Al Habeeb Consultant Cardiologist; President of Saudi Heart Failure Society, Saudi Arabia
SPEAKERS	Professor John McMurray Professor of Cardiology, University of Glasgow, United Kingdom
	Dr Hussein Heshmat Kassem Consultant Cardiologist, Fujairah Hospital, United Arab Emirates; Associate Professor of Cardiovascular Medicine, Department of Cardiology, Cairo University, Egypt
	Dr Buthaina Abdulla Bin Belaila Head, Supreme National Committee for the Control of NCD, UAE Ministry of Health and Prevention, United Arab Emirates
	Dr Monika Arora Executive Director, HRIDAY (Secretariat of Healthy India Alliance); Director, Health Promotion Division and Professor, Public Health Foundation of India, Board member, NCD Alliance, India

This satellite session looked in depth at the largely preventable but life-threatening, prevalent and costly disease of heart failure, which is the single most common cardiovascular problem globally. The panel set out the extent of the challenge of heart failure and spoke on the importance of national plans and strategies such as engaging young people in promoting heart health, and in preventing avoidable death and disease.

## 66

## Heart failure is common, disabling and deadly"

**Professor John McMurray,** Professor of Cardiology, University of Glasgow

## **Discussion highlights:**

- Challenges to successfully addressing heart failure include the cost of medication and surgery, limited access to care, fragmented care, a lack of understanding about the condition, and cultural barriers such as a fatalistic view of disease progression.
- A multisector national plan (for example, on CVD or NCDs more broadly) can greatly assist in the translation of evidence into policy and into action, improving both prevention and treatment of heart failure.
- Heart failure is a 'data desert', not even appearing on death certificates in many countries. But without data it is hard to make the case for action. Improved data collection, stratification and analysis will shed light on heart failure for governments, health care professionals, patients and the wider population.
- Young people can play an important role in raising awareness both of the need to create a health-promoting environment and of the role of universal health coverage – for example through peer-led activism or through involvement in Youth Boards. They are excellent messengers and can translate science into language that is understood by everyone.

# Regional Showcase: **Healthy Schools**

CHAIR Ms Eman Turki
Health Promotion Department, Supreme Council of Family Affairs

PANELLISTS Dr Hala Bouchra and Ms Laheeb Almutwall; and students from international schools, Ms
Azza Elhaj, Ms Hessa AlMeheiri, Ms Al Unoud Ali and Mr Arman Abdelwahid

The regional showcase was an opportunity to highlight action on NCDs within Sharjah. Sharjah's dedication to promoting child health was brought to life with a video capturing a number of school-based initiatives.

The WHO's Global School Health Initiative, implemented in Sharjah by the Health Promotion Department, is designed to provide basic standards that schools should follow, engaging pupils, teachers, parents, education officials, investors, health providers and community leaders. Schools that take part commit to creating a safe and health-promoting environment for students and staff.

In Sharjah, action being taken at the schools involved in the programme include mental-health provision, regular check-ups for pupils, providing information on disease prevention and healthy lifestyles outside school, and addressing obesity and other NCDs, including through regular physical activity and healthy eating. Sharjah is committed to improving the health of its young population, as an important step towards creating a healthy and ambitious societu.

The panel discussion was enriched with the voices of local schoolchildren. The young people gave their perspectives on the importance of health programmes within their schools and the impact that the initiative has on lives today and long-term.

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This creates healthy habits that will stay with us throughout our lives and make us better learners...and create a smarter and better generation"

Ms Hessa AlMeheiri

## **CLOSING PLENARY**

## Accelerating overdue progress with ambitious action: the fast track to 2030



CHAIR Ms Nina Renshaw

Policy and Advocacy Director, NCD Alliance, Switzerland

PANELLISTS

Ms Katie Dain

Chief Executive Officer, NCD Alliance, United Kingdom

Dr Marie Hauerslev

Chair, NCD Child, Denmark

Dr Ibtihal Fadhil

Chair, Eastern Mediterranean NCD Alliance; Board member, NCD Alliance, Bahrain

Ms Jyotsna Govil

Our Views, Our Voices advocate, Healthy India Alliance & Indian Cancer Society, India

Ms Helen Seibel

Global Head, Community Investment & Philanthropy, AstraZeneca; Member of the NCD Alliance Supporters Group, Canada

Professor Sani Malami

Executive Director, NCD Alliance Nigeria, Nigeria

The closing plenary was an opportunity to reflect on the discussions across all the themes of the Forum. The Forum had begun by focusing on the significant 'gaps' that remain in the global and national responses to NCDs – but the panellists ended on a note of real optimism, calling on delegates to be inspired to take home what they learnt, ready to put it into practice in their own countries.

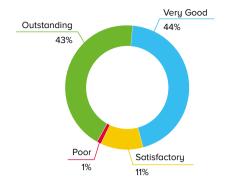
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We need to unleash power, passion and outrage"

**Ms Nina Renshaw,** Policy and Advocacy Director, NCD Alliance

## Discussion highlights:

- The involvement both of young people and of people living with NCDs has significantly changed the focus and feel of the Forum. Their passion and experience are a vital resource for civil society, and they should be fully integrated and involved in all aspects of delegates' work from now on.
- To make the change that is needed, we need to translate the reality of NCDs into a message that is emotive and urgent: use stories, not just statistics.
- There are significant regional differences in the challenges
  of addressing NCDs, with a need for nationally appropriate
  capacity building. The NCD Alliance's Advocacy Institute
  initiative is providing technical assistance and tools to in-country
  NCD alliances.
- Cross-sector working and partnership is essential: as an Arabic proverb notes, 'You can't clap with one hand.' (Dr Ibtihal Fadhil)



**Figure 17:** Delegate rating of closing plenary

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People living with NCDs are a very valuable resource that can go out and shake the system in every one of our countries"

**Ms Jyotsna Govil**, Our Views, Our Voices advocate, Healthy India Alliance & Indian Cancer Society





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The solution is probably somewhere in this room, and that gives me a great sense of hope!"

Ms Helen Seibel, Global Head, Community Investment & Philanthropy, AstraZeneca and Member of the NCD Alliance Supporters Group, Canada

## **CLOSING CEREMONY**

The Closing Ceremony summarised the three days of the Forum and asked delegates to look ahead to the future.

**Ms Cajsa Lindberg,** president of the Swedish Diabetes Association, was the Closing Ceremony's voice of a person living with multiple NCDs, reminding delegates of the need for a human-rights based approach, an always to have 'statistics in one hand and the hand of a person living with NCDs in the other'. To quote a former deputy secretary-general of the UN, Jan Elliassen: 'Without passion, nothing happens; without compassion, the wrong things happen.'

**Mr Todd Harper**, NCD Alliance president, thanked everyone for their perseverance to date and called on all to move forward together. He highlighted the contributions of the youth delegates – 'the custodians of the future' – and the importance of stories in making the case for action on NCDs.

The announcement by **HE Mrs Sawsan Jafar** (Chair of the Board of Directors, Friends of Cancer Patients) of a new Young Leaders programme in NCDs was greeted with enthusiasm by delegates. This two-year programme, in collaboration with NCD Child, will build competencies and support those who are ready to take action.

Finally, **Mr José Luis Castro**, past-president of the NCD Alliance and Chief Executive Officer of Vital Strategies, introduced the Sharjah Awards for Excellence in **NCD Civil Society. Awards** were presented by HE Mrs Sawsan Jafar and Mr Todd Harper to three NCD alliances for their exceptional efforts:

- The Vietnam Prevention and Control Alliance received the award in the category 'Saving lives through transformative policies and solutions' for its work on alcohol-related harm.
- The Slovenian NCD Alliance was the winner in the category 'Building demand through transformative social movements and voices of change' for its work to build a youth NCD alliance.
- The Healthy Caribbean Coalition was presented the award for 'Enhancing accountability through transformative and inclusive governance' for its work to establish a civil society accountability framework for childhood obesity prevention policies in the region.



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We need to raise our voices so that we are louder than the injustice"

Ms Cajsa Lindberg, Our Views, Our Voices, Global Advisory Committee member; President, Swedish Diabetes Association



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I would like to charge each one of you to take what you have learned here in Sharjah and return to your respective countries with a renewed sense of urgency, a renewed commitment to action, and a promise to deliver. To deliver environments that promote health. To deliver tried and tested public health policies that yield results. To deliver a world that ensures all people their right to access to safe, affordable medicines. To deliver the world we want."

**Mr Todd Harper**, CEO, Cancer Council Victoria and President, NCD Alliance

In closing the Forum, the NCD Alliance presented HE Mrs Sawsan Jafar with a plaque for Her Highness Sheikha Jawaher bint Mohammed Al Qasimi, Wife of the Ruler of Sharjah, UAE, for Her Highness' patronage of the third Global NCD Alliance Forum and for helping to bridge the gap on NCDs.





## **COMMUNITY IN ACTION**

An interactive digital poster exhibition was a welcome addition to the Global NCD Alliance Forum. The Community in Action exhibition showcased projects, programmes and initiatives working to bridge the gaps in the NCD response, through accelerating policies and solutions, growing the movement and enhancing accountability.

Delegates were invited to explore 38 posters from members of the NCD Alliance and UAE-based organisations, through on-site screens or via the Forum event App. Posters were selected following a call for abstracts and review panel process.

From engaging the media on NCDs and UHC in Togo (Coalition MNT-Togo), to challenging harmful alcohol norms and beliefs in Slovenia (Slovenian NCD Alliance), the exhibition provided a snapshot of NCD action around the world.

Delegates rated the Community in Action exhibition at 3.7. According to delegate feedback, the exhibition would have benefitted from additional publicity and additional time to view posters.





Figure 18: Delegate rating of Community in Action



## **SOCIAL EVENTS**

Local host organisation, Friends of Cancer Patients, warmly welcomed Forum delegates to Sharjah, UAE, hosting social events that offered an opportunity to sample local culture, sights and cuisine. Delegates enjoyed experiencing Sharjah and its rich cultural offering as well as socialising with other delegates.



## Forum reception

Forum delegates visited the Heart of Sharjah, the region's largest historical preservation and restoration project, to appreciate the city's traditional areas and reflect on what Sharjah was like over half a century ago. For the Forum reception dinner, delegates had the opportunity to sample Emirati cuisine and taste local delicacies.

## Sharjah Light Festival and Sharjah Aquarium

Forum delegates were treated to a special showing of the Sharjah Light Festival, which invites internationally renowned artists to celebrate science, creativity and heritage in a display of lights, colours and music at key local landmarks. Delegates then visited the Sharjah Maritime Museum and Sharjah aquarium, to appreciate how sea-related life has had such an impact on Sharjah's heritage, and the development of coastal cities for over 6,000 years ago.

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Social events gave good opportunities to meet new people from around the globe and learn what they are doing"

## **NETWORKING OPPORTUNITIES**

Connections were established and strengthened with many opportunities to interact and exchange ideas during collaborative workshop sessions, and at display walls and social events. A show of hands during the civil society coordination session told us that the majority of delegates were first-time Forum attendees, creating great potential for new interactions and network building.

As observed for past Forums, networking opportunities were the top reason delegates chose to attend. According to delegate feedback, networking opportunities were well-appreciated; 87% of delegates rated the networking opportunities as outstanding or very good.

91% of delegates told us networking opportunities are one of their main reasons for attending the Global NCD Alliance Forum.

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Networking opportunities across such a wide spectrum of civil society was incredibly useful, the NCDA team did a great job of building in formal and informal opportunities to do so ... the breakout sessions were also a good chance to hear interesting content and discuss/reflect in smaller groups"

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The networking [opportunities were] unmatched and I managed to get myself two amazing mentors that will be so influential in our work"

Forum Youth Delegate



## **FORUM COMMUNICATIONS**

The third edition of the Forum was marked by being completely paperless, introducing for the first time a smartphone event app, which was very positively received by delegates. The Forum served as an ideal platform to launch several tailored publications and audiovisual productions. The daily update for delegates became one of the essential tools to keep them informed, with high open rates. The digital engagement strategy included a social media toolkit, with a comprehensive pack of visuals to amplify the event online.

Using an app made the Forum much more interactive, allowing delegates to build their own personal schedules, share comments and photos, rate sessions, download presentations and other resources, and more. It also permitted NCDA to send reminders and notifications to delegates about last-minute changes as they happened.

265 of the 370 delegates (72%) downloaded and used the app. According to the app maker, Attendify, the number of users was above average, as most events using an app for the first time see 50-60% of delegates using the app. The Forum took place on 9-11 February 2020. From 1-17 February app users generated 12,131 sessions and posted 68 messages and 98 photos on the activity feed.



Group Head of Sustainabi Chalhoub Group, United

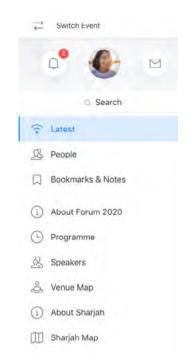
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A snapshot of some of the app's features is on the left (with the full list of features below). The most used features of the app were:

- Forum Programme (3,231 sessions)
- Photo Album (459)
- Venue Map (272)
- About Forum 2020 (208)

Notably, more than 100 delegates downloaded the app in the final week before the Forum. Almost all feedback (posted on the app and given verbally to NCDA staff) was positive. For example, "Wow. This App looks good and it's very innovative. Looking forward to seeing everyone soon" (Christopher Agbega, posted on the app). There were also suggestions on improving the app for the next Forum (see Recommendations below).

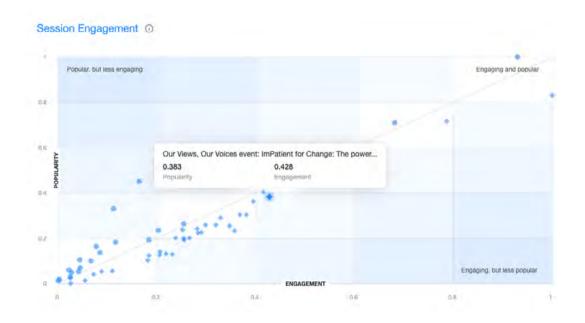
NCDA posted 40 instant notifications on the app, including 12 before the Forum began, and 6 poll questions before and during the Forum to generate activity. Below is the most popular poll, responded to by 54 delegates.



Results Voters Edit Poll	
What is your main goal for the Forum?  Posted to Activity Stream	□ Display Results
A. Learn more about my area of focus 19 votes	35.2%
B. Expand my network 23 votes	42.6%
C. Get inspired and motivated 12 votes	22.2%

The app used data generated by users to create 'Insights' (see screenshot below and further explanation <u>online</u>). A sample of these insights included:

- The Opening Plenary and plenaries 1-3 were the most popular and engaging sessions. The Closing Plenary and Closing Ceremony were less popular and less engaging (which can likely be explained by the fewer number of people in attendance).
- The next most popular and engaging event was the Our Views, Our Voices session, *ImPatient for Change: The power of lived experience in Bridging the Gap for NCDs* and Workshop 1.1: Catalysing action on *NCD 'best buys': challenges and enablers for policy progress.*



#### Recommendations

- Include an event app in the next NCDA Forum
- Reduce the time frame slightly start 'building' the app 6-10 weeks ahead of time (to launch 2-3 weeks ahead of event)
- Delegates suggested including various features in future apps. This can be explored ahead of the next
  - Downloading of session content in one batch (presentations, background docs, etc), instead of having to do it one at a time
  - Downloading of photos in Photo Album by users
  - Linking personal schedules created by delegates with their phone calendars
  - Scheduling meetings with other app users
  - Linking of speakers' profiles (created by NCDA) with speakers' user profiles (created by themselves)
  - Giving longer names to Features (this version of the app uses a very small number of characters)
- · Promote more features ahead of and during the Forum, e.g. Twitter and hashtag links
- Event organisers should consider using the app in a more analytical way, e.g. by asking people to rate the sessions and then analysing the data afterward.

# **Daily Update**

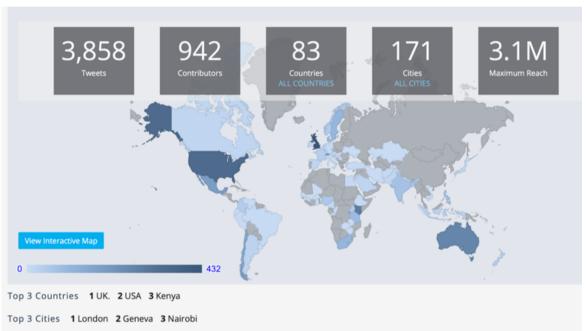
We distributed email newsletters to delegates of NCDAF2020 on 5 days — 7-11 February. They contained the daily blog with an analysis of the day's events, along with events and activities to come, links to resources and other relevant information. Open rates ranged from 47.7%-70.8% and click through rates from 17.5% to 22.1%.

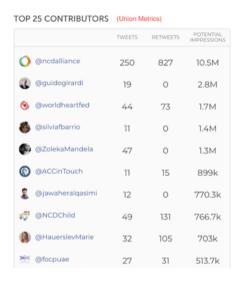


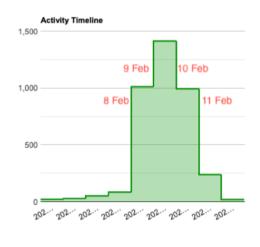
# Social Media

For the third consecutive year, a social media toolkit for delegates was created. It was downloaded 145 times from ncdalliance. org. On Twitter alone, the Forum hashtag #NCDAF2020 had 22 million impressions and reached 83 countries with 942 contributors engaged.









# **Facebook**

Total reach of #NCDAF2020 increased four times during the week of NCDAF2020. Facebook Live engagement increased significantly in comparison with the previous edition of the event and video minutes viewed, for the entire month of February, increased 3,000+%.

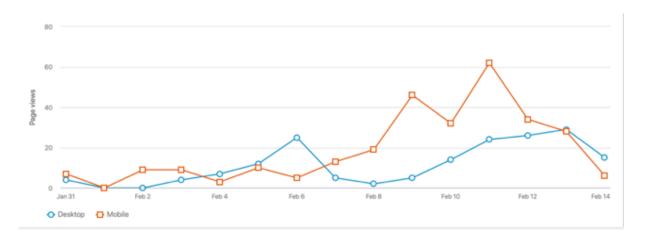


# Facebook Live (comparisons between 2017-2020 Forum)

PLENARY	REACH		VIEWS	ENGAGEMENT		
	#NCDAF2020	#NCDAF2017	#NCDAF2020	#NCDAF2017	#NCDAF2020	#NCDAF2017
Opening Plenary	1k	2.2k	706	671	697	110
Plenary 1	1.2k	595	517	273	176	39
Plenary 2	800	5.5k	622	1,304	954	212
Plenary 3	2k	1.5k	739	659	674	95
Closing	2.2 k	207	619	172	449	23

## LinkedIn

Visits to NCDA's LinkedIn page spiked for the Forum. Not surprisingly, visits via mobiles also jumped, as many NCDA followers were themselves in Sharjah.



# **Media Relations**

NCDA worked with a media relations specialist to advise on global media engagement and reach out to mainstream journalists in the lead up to the Forum and during the event. NCDA coordinated with the WHO the launch of the 2020 Global Status Report on NCDs at the Forum, which generated visibility for the event. The press release sent out to a database of 150 global health journalists on 10 February had an open rate of 41.9% and click through rate of 33.0% which is very high, therefore generating attention from international media, including "Health Policy Watch", based in Geneva and a reference outlet for global health policy makers Nevertheless, given the emergency of COVID-19 at the moment of the event, it was challenging to get international media attention.

Forum 2020 counted on a new and exciting training opportunity. Population Reference Bureau (PRB) organised a two-day training for 12 journalists at the Forum. The training, supported by an AstraZeneca programme for young people, focused on the risks that NCDs pose and how young people can prevent NCDs. Journalists learnt about NCDs and used that background to cover the Forum for their news organisations. The journalists were oriented to the topics and issues that were raised at the Forum and had access to interview experts. They were also given access to Forum plenary sessions and interactive spaces.





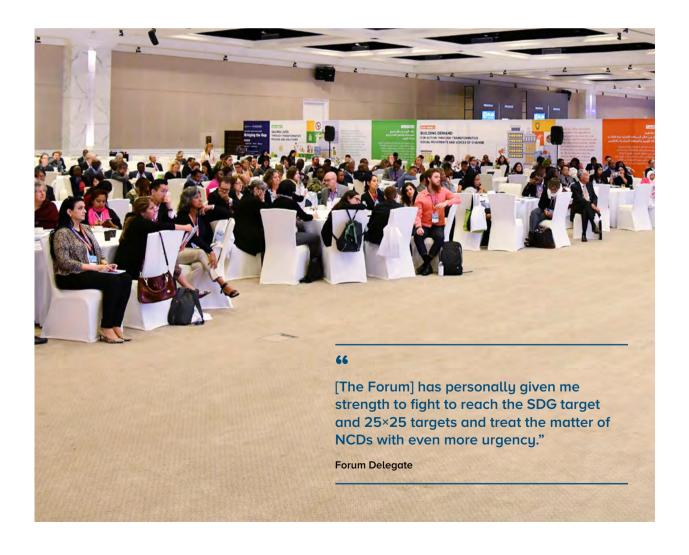
# **FORUM IMPACT**

# As a result of the Forum...

of delegates have greater knowledge on the gaps in NCD prevention and control and how civil society can act to address these.

delegates are better equipped to plan and deliver advocacy activities to bridge the gaps in the NCD response.

of delegates are better connected with other advocates to collectively scale up NCD action.



# **Delegate plans**

Delegates were asked: "As a result of the Forum, what do you plan to do differently in the next 12 months?"

Here is what delegates plan to do...

# Engage with people living with NCDs and youth

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I was very impressed by the diversity of delegates, especially youth and from the AFRO region. This was a real feat and inspired me to go back to my organisation and attempt to engage in advocacy with a broader range of voices."



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[As a result of the Forum, I'm planning to] invite more patients with NCDs to raise their voices from their lived experience in favor of the prevention and attention of NCDs and in search of universal health."

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[As a result of the Forum], we will seek to reach the indigenous community to learn about their experience, their needs and invite them to join in raising their voice."

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[As a result of the Forum, I'm planning to] think more about how to involve PLWNCDs in the prevention agenda."

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[As a result of the Forum, I'm planning to] involve as soon as possible many youth, particularly Youth MPs on the prevention of NCDs."



# Work collaboratively with new connections

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I have planned actions and projects with a number of participants that I will be following up. It has been fantastic."

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[As a result of the Forum, I'm planning to] engage more strategically with other HIC orgs around opportunities e.g. G7."



# **Build demand for action through media engagement**



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[As a result of the Forum, I'm planning to] bridge the gap that exists between media and NCD experts, beating the drums loud on NCD through story telling."

# Increase collaboration with regional colleagues

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[As a result of the Forum, I'm planning to] engage and collaborate with regional members for advocacy activities and also prepare the country advocacy agenda for people living with NCDs."



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[As a result of the Forum, I'm planning to] engage on regional accountability efforts with the Latin American Coalition."



# Assess national progress against identified NCD response gaps

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[As a result of the Forum, I'm planning to] assess our country's progress against the identified gaps and plan stakeholder engagement activities that align with these gaps."





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[As a result of the Forum, I'm planning to] hold government accountable, and mobilise community support for action at the national level."

# NCD ALLIANCE FORUM FOLLOW-UP

To maintain and build on the Forum's momentum, the NCD Alliance:

Will advocate globally on the need to accelerate progress on NCDs and bridge the main gaps to effective NCD prevention and control: leadership, care, accountability, investment, community engagement. Is committed to promoting the NCD Civil Society Compass and mobilising civil society community from across the world in bridging the gaps in the NCD response to accelerate progress at the national and regional level. Is continuing to promote the importance of the role plaued by civil society in furthering the NCD response globally, as first set out in the Sharjah Declaration. Is addressing the intersections of NCDs and COVID-19, including PLWNCDs perspectives and voices, to ensure a strong response and leaguu of the pandemic, protecting the vulnerable and building back better with greater investments in public health and health systems. Has leveraged the power of its network and is sharing evidence, best practices, guidance, and tools and resources from across multiple countries and geographies to help address the intersection of NCDs and COVID-19. Is committed to supporting the network of national and regional NCD alliances to adapt and respond to the changing landscape due to COVID-19, to ensure civil society sustainability, protect PLWNCDs, and strong advocacy and communications that promote the needs of PLWNCDs during and after the pandemic Is calling for the meaningful involvement of people living with NCDs through the Our Views, Our Voices

initiative and collaborating with WHO to facilitate an NCD Lab on the Meaningful Involvement of

PLWNCDs.



# **Global NCD Alliance Forum 2020**

# **Bridging the Gap**



#NCDAF2020 #NCDs #Sharjah
@focpuae @ncdalliance

