

Assessment of alignment of individual NCD and other strategies against the Draft South Africa National Strategic Plan for the Prevention and Control of Noncommunicable Disease (2020 – 2025)

ABOUT THIS REPORT

This report is a summary of an in-depth assessment of the alignment of seven standalone noncommunicable disease (NCD strategies) and 15 overlapping strategies with the draft South African National Strategic Plan (NSP) for Noncommunicable Diseases (NCDs), 2020 – 2025 (May 2020 version).

This NSP for NCDs is intended to combine all existing efforts to address NCDs, presenting a common vision, mission, objectives, goals, targets and guiding principles for action. However, there are several existing national standalone strategies to deal with NCDs and NCD risk that predate this draft national plan. These include national strategies on obesity, cancers and mental health as described in Diagram 1 below.

Broader health strategies, plans and policies, are also relevant to NCDs. These overlapping strategies include policies and guidelines on: infant and child feeding; youth and school health; adult primary care; HIV and TB; maternity care; health promotion and clinical services as well as the National Department of Health (NDoH) Strategic Plan (2020/21 to 2024/25) and the national health plan (Negotiated Service Delivery Agreement).

At the request of the NDoH, BHPSA commissioned a team of researchers to assess the extent to which the standalone and overlapping strategies are aligned to the draft NSP (or not aligned), and to make recommendations for strengthening the national NCD response.

► [The full report is available here ...](#)

Are standalone strategies aligned with the draft NSP for NCDs 2020 – 2025?

NSP



7 STANDALONE STRATEGIES WERE ANALYSED:

Mental health, obesity, diabetes, hypertension, breast cancer, cervical cancer, national cancer framework

QUESTIONS TO DETERMINE ALIGNMENT WITH THE NSP	ANSWERS
Do standalone strategies:	
Acknowledge the NSP?	Limited
Address NSP principles and strategic areas?	Not systematic
Explain how they will contribute to the target?	Limited
Analyse behavioural risk factors and align with NSP?	Strong
Analyse South Africa's NCD scenario?	No
Do standalone strategies have:	
NSP-aligned coordination and implementation mechanisms?	Insufficient information
NSP-aligned outputs, indicators and activities?	Weak
NSP-aligned workplans?	No
Are the NCDs in the standalone strategy included in the NSP?	Yes

CONCEPTUAL FRAMEWORK

For the assessment, assumptions were made about what full alignment of standalone and overlapping strategies with the NCD would look like. Potential categories for alignment were identified as: strategic overview, background analysis, approach, and targets and monitoring. A series of questions were developed to probe the extent of alignment in each category (see table above).

FINDINGS

Overall, little alignment was found between the strategies analysed and the NSP. Where there is alignment it is largely coincidental, rather than the result of the NSP acting as a high-level strategy helping to prioritise and determine lower-level inputs. In part, this is a product of timing, as all the standalone strategies were developed before the current NSP was drafted. However, few of them make any reference to the previous NSP, which implies they were not aligned to that version either.

Findings include:

- **The NSP impact target:** There is little acknowledgement in the strategies of the comprehensive NCD target, which is 'To reduce, by one third, premature mortality of noncommunicable diseases through prevention and treatment, and promote mental health and well-being, by 2030'.
- **Behavioural risk factors:** Alignment of behavioural risk factors and NCDs in the standalone strategies is strong, but weaker in the overlapping strategies.
- **Principles:** Most of the strategies, both standalone and overlapping, pick up on many of the principles of the NSP. However, this is not done in a systematic or consistent manner.
- **Strategic areas:** Although the standalone strategies reflect the five strategic action areas of the NSP (governance, reduction of risk factors, early detection and effective NCD management, high quality NCD research and surveillance) this is not done in a way that suggests a coordinated, systematic approach with the NSP guiding priority-setting.
- **Strategic objectives:** Although many of the standalone strategies touch on the NSP's seven strategic objectives, this is not systematic. Alignment of the overlapping strategies is much lower.
- **Implementation arrangements:** The standalone strategies are stronger than the overlapping ones on the importance of integrated care. Whilst coordination mechanisms are mentioned by most of the strategies, there is insufficient information to identify how these would link with the proposed coordination mechanisms in the NSP.
- **Targets and monitoring:** None of the strategies, standalone or overlapping, are well-aligned with the NSP, mostly because targets, outputs, activities, and indicators are missing from the lower-level strategies.

RECOMMENDATIONS

The timing to improve the alignment of strategies with the NSP is favourable. The NSP draft is near finalisation and the policies and guidelines of at least 12 of the standalone strategies are due to be updated and revised. This is an opportunity for the NDoH to position NCDs front and centre of strategic thinking and implementation, in the immediate future.

The priority recommendations to achieve this are:

- Clarify the relationship between the NSP and the standalone strategies so that it is clear that the NSP should have strategic primacy.
- Examine the organisational structure of NDoH to ensure a consolidated and coherent structure which enables systematic monitoring and reporting of policies and programmes that contribute to NCDs.
- Develop lower-level strategies, policies and guidelines where they are missing e.g., for cardiovascular disease and stroke.
- Use the experience of implementing the previous NSP, ensuring lessons are carried through into the individual strategies as well as the final version of the NSP.
- Revisit the level of aspiration in the NSP and the associated strategies, ensuring the adoption of realistic targets and outputs with stakeholders responsible for implementation.
- Elaborate the National Monitoring Framework to develop a robust M&E plan that is based on shared indicators across both standalone and overlapping strategies.
- Begin work on updating the national indicator dataset.
- Develop guidance on the formulation of updated and new standalone strategies in consultation with the teams developing individual strategies.
- Develop similar guidance for new and revised overlapping strategies.

