

## ANNEX 1: DESCRIPTION OF CONSULTATIONS, BY PARTICIPATING COUNTRY

Country	Lead Organization/ Global partner	Date of consultations	Number of participants	Make up of participants	Methods
Argentina	Fundación Huésped	May 23	n= 17 civil society organizations	17 civil society organizations participated. Organizations involved in the consultation: Agrupación Mariela Muñoz, the Health and Population Area of Instituto de Investigaciones Gino Germani UBA, Asociación Civil por la Igualdad y la Justicia (ACIJ), Cámara de Instituciones de Diagnóstico Médico, FADEPOF, Fundación Convivir, Fundación Huésped, Fundación HCV Sin Fronteras, Fundación Mundo Sano, Grupo Transparencia Salteña GTS - ATTTA Salta, Intercambios AC, Promotores juveniles Rio Negro, RAJAP, RAP +30, Todos Frente al Chagas.	1 national consultation
Botswana	Success Capital Organisation	Jun-Jul	n=183	<p>A total of 39 community members participated in preliminary consultations from a mix of peri-urban and rural areas. A further 8 key respondents were identified and targeted from CSOs working in areas of public health (HIV, SRHR). A further 40 community members were engaged on the margins of an existing SRHR campaign on knowledge dissemination on SRHR issues to ensure inclusion of diverse groups inclusive of representatives from disability, indigenous, ethnic minority, LGBTI and sex work communities. The Country Director of UNAIDS and National Coordinator of the National AIDS and Health Promotion Agency provided key remarks after several panels that included insights from diverse community members, guidance &amp; counselling teachers in junior high schools and CSO leaders at the final validation session.</p> <p>The final consultation and validation session had 94 attendees from District Health Management, Ministry of Education, Tribal Administration, Elected Political Representation councils, CSOs working on HIV and Key Populations issues and other CBOs. It was co-chaired by Nothing Without Us Society, which is a grassroots sex worker led and serving organisation in the North East region.</p>	6 consultations

Cameroon	Réseau Accès aux Médicaments Essentiels (RAME)	May 30	n=18	Members representing civil society organizations and community providers in Cameroon. Organizations listed: UNITY Platform, RECAP plus, Trans Ami, HFC, PCA-ACT, PFU, OSC EMPOWER, OSC JAPSO, FIS, CAMNAFAW, POSITIVE-GENERATION, RENATA, ALTERNATIVES CAMEROUN, Organization for Education and Social Development in Africa, Sustainable Impact for Development in Africa, Association of Active and Solitary Women, Association for the Valorization of Women	3 breakout rooms
Dominica	Lifeline Ministries NCD Alliance	May 27	n=26	Participating organizations and individuals: Achievement Learning Centre – Children with learning challenges, Community Hostels Inc (Grotto Home for the Homeless), Dominica Association of People with Disabilities Dominica Cancer Society, Dominica Cancer Society Roseau Support Group, Dominica Cancer Society Support Group for the North Dominica Council on Aging, Dominica Dementia Foundation, Dominica Diabetes Association, Dominica Dialysis Association, Lifeline Ministries, PACIS Respite Centre, Sickle Cell Cares, psychiatric unit staff, relative of a psychiatric patient.  Participants represented health personnel, educators working with special needs children, consumers of the health care services including those living with NCD's, CSO administrators/leaders, caregivers, child protection activist, advocates for the elderly, people living with disabilities and careers of the mentally ill.	3 breakout rooms
Eswatini	Baphalali Eswatini Red Cross Society International Federation of Red Cross and Red Crescent Societies	July 28-29	n=27	The CSOs representatives were of varying interests, including: LGBTQ+ community, faith-based organizations, youth-driven organizations, etc. Community member participants came all 4 regions of Eswatini (Hhohho, Manzini, Lubombo and Shiselweni). The community members selected came from a variety of public health services and organization including BERCS and rural health motivators.	2 focus groups; 1 for CSOs affiliated with the Coordinating Organization of Non-Governmental Organizations and 1 for community members

Ethiopia	YeEthiopia Cancer Society  NCD Alliance	July 23	n=30	CSOs, patient caregivers, volunteer, youth representatives, health professionals, community members and leaders, CSO advocates involved in global health, adolescents and young people, marginalized communities (people with disabilities, women and girls, elderly, patients etc.), physicians, researchers, community health providers	3 breakout rooms
Ghana	Basic Needs Ghana  United for Global Mental Health	June	n=65	CSOs, people with lived experience, service users, young people, women and government officials.	3 breakout rooms - face to face, virtual and one on one interviews
Italy	Villa Maraini  IFRC	Sep 2	n=55	Civil society leaders, community health providers, representatives of marginalized populations.	3 focus groups with people who use drugs 1 with health workers 7 interviews with community leaders and health providers
Jordan	Jordan National Red Cross Society  IFRC	Sep 3	n=10	In-depth focus group discussion with community, civil society organizations and non-Governmental organizations members	1 focus group discussion
Liberia	Cultivation for User's Hope  United for Global Mental Health	June	n=40	The focus group discussion participants comprised of CSOs: National Union of Organization for Disable, National commission on Disability, parliament representative, Public Health Initiative of Liberia, community members, Liberia Association of Psychosocial Services, Liberia Center for Outcomes Research in Mental Health	4 breakout rooms
Malawi	Malawi NCD Alliance  NCDA	June 28	n=40	40 participants representing local communities and civil society organisations, international NGOs, UN organisations as well as the government	3 breakout rooms

Mali	CSO Forum of Mali  Réseau Accès aux Médicaments Essentiels (RAME)	May 30	n=31	<p>Participants came from all the entities of the community: women, men, young people, adolescents and the physically handicapped. Doctors and other health workers working in national and international NGOs such as Groupe Pivot Santé Population (GP/SP), Walé Santé, NGO Convergence d'Actions pour l'Environnement et la Santé (CAES), NGO Association for the Support of the Development of Population Activities (ASDAP) and Soutoura (Protecting honor). NGO Hinèso (Jigisèmèjiri) or "hope" in French which aims to develop projects and provide cash transfers to poor and food insecure households.</p> <p>Other participants evolve in organizations specialized in the defense and protection of human rights such as Association Droit de l'Homme au Quotidien (DHQ Mali) which has given itself the mission of building the capacities of young people on the functions of justice, legal and judicial procedures, and the protection of human rights in criminal proceedings, the Malian Association of Physically Handicapped Persons (AMPHP), the Coordination of Women's Associations and NGOs of Mali (CAFO). The Children's Parliament known as the "Children's Government".</p>	2 breakout rooms
Philippines	Healthy Philippines Alliance  APCASO	July		<p>Most participant who joined came from marginalized and vulnerable populations, including indigenous communities. Some were development workers from various health and related civil society and non-profit organizations.</p> <p>Representation from: Persons with disability, Elderly and senior citizens, Patients living with HIV/NCDs [including survivors and those with chronic conditions], Rural poor / farmers / fishers, Indigenous peoples, Professionals in civil society organizations working in policy advocacy and/or with basic sectors/communities, Barangay (village) officials, Primary healthcare workers [i.e., doctor to the barrio, midwives, public health nurse, sanitary inspector]</p>	6 breakout rooms: 4 - Zoom/online sessions. 2- face-to-face sessions with one conducted at a geographically-isolated and disadvantaged area; 1 key informant interview
Senegal	Réseau Accès aux Médicaments Essentiels (RAME)	May 30	n=30	Leaders of civil society organizations involved in advocacy for health, in the fight against HIV and stigmatization and/or discrimination of vulnerable populations (women, key populations, etc.), in universal health coverage, and access to quality health services.	3 breakout rooms

Singapore	School of Public Health, National University of Singapore APCASO	Jun 9 and 16	n=21	Day 1: Representatives from patient and caregiver organisations; directors of social sector organisations for LGBTQ+ communities, disability groups and mental health; academics and medical social workers.  Day 2: Youth advocates on public health, political education, LGBTQ+ and disability issues; staff from migrant worker organisations; civil society advocates for sex workers, LGBTQ+ groups and racial & religious unity; leaders of HIV/AIDS and addiction rehabilitation organisations.	2 breakout rooms on two days
Sri Lanka	DAST APCASO	August 8	n=37	CSOs and members of marginalized communities	1 breakout room
Switzerland	Swiss Red Cross IFRC	August 25	n= 7	Civil society representatives from 7 organizations	Survey
Uruguay	CIET Uruguay NCD Alliance	23 July	n=7	Patients, migrants, different geographical areas of the country, transplant recipients, patient rights advocates, older adults	1 breakout room; online