



# IAPB SECRETARIAT PRIORITIES AND PLAN: 2018-2021





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## INTRODUCTION

1. The eye health sector has a long and successful history of partnership in pursuit of a shared purpose: the global elimination of avoidable blindness. IAPB is an expression of that partnership. It has created and fostered cooperation, and, through its members provides expertise, experience and maturity.
2. We are nearing the end of the VISION 2020 period. There have been significant successes, notably the significant reduction in prevalence of visual impairment and the prospect of the elimination of trachoma and river blindness by the mid-2020s. But demographic change and the growth of conditions like myopia and diabetic retinopathy, means that achievement of our goal seems further away than ever. Nonetheless, there are reasons to be positive:
  - New technologies are creating new, cost effective ways of diagnosing and tackling vision impairment and sight loss.
  - The WHO's [World Report on Vision](#) is intended to provide the strategic framework to ensure global eye care services meet people's needs. It aims to set out a package of appropriate services within the context of Universal Health Coverage (UHC). It will provide a real impetus to integrate eye care into UHC at country level.
  - There are opportunities to mobilise increased funding.
  - There is energy and enthusiasm in the sector and a number of campaigns are having an impact in raising the profile of vision impairment and avoidable blindness.
3. But there are significant challenges, including:
  - The funding environment is highly competitive. Standard Chartered and Conrad Hilton are withdrawing from or reducing their eye health funding.
  - Eye health often remains a Cinderella subject in global development.
  - NGOs face an increasingly hostile operating environment in many places.
4. This plan is focused on the role and activities of the IAPB Secretariat over the next 2-3 years. One of our first priorities should be to facilitate the development of a longer term strategy for the eye health community as a whole.





## A STRATEGY FOR THE EYE HEALTH COMMUNITY

5. Over the next 10 years, the eye health community faces big challenges and big choices. We will need a strategy covering the Sustainable Development Goals (SDG) period until 2030. Its development should follow the publication of the World Report on Vision. If the World Report on Vision succeeds in setting a strategic framework for eye health, the focus of the strategy should be on how we support its implementation, including the WHO Programme of Work already under development. If it doesn't, there will be even greater need for a strategy which sets out how we develop eye care in the context of Universal Health Coverage. We will need a separate process to engage IAPB members in the development of this strategy. The aim should be to bring this strategy to the 2019 Council of Members (IAPB's annual general body meeting). The strategy should also clarify whether our purpose should continue to focus on the elimination of avoidable blindness or broaden to focus on achieving eye health for all, in particular, for those left behind.

### Priority

Facilitate the development of a strategy for the eye health community to cover the SDG period until 2030, engaging the membership.

## A PLAN FOR THE IAPB SECRETARIAT

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6. This plan has a narrower and shorter term focus, specifically on the IAPB Secretariat. It aims to set out **how we will make the Secretariat a highly effective and responsive service in support of members to tackle the challenges we face and achieve our shared purpose**. It will cover the period until 2020/21, likely to be a period of transition from VISION 2020 and the [WHO Global Action Plan 2014-19](#) to the new overall strategy. Once a new strategy is developed for the eye health community as a whole, we will review the IAPB Secretariat's plan.
7. In developing this plan, we have drawn on a large number of conversations with members as well as the considerable work carried out in 2016/17 to develop a new strategic plan. Views are consistent. Members are keen for a reinvigorated IAPB. They are keen we address the following:
  - Profile and Influence: There is a strong desire, particularly from Group A members, for IAPB to play an influential role in global advocacy.
  - Levels of engagement: Increase engagement between members.
  - Partnership: We can get more value from the network. Group C members particularly value services to support capacity building.
  - Responsiveness: Be highly responsive to demands from members.
  - Realism and resources: Any plan needs to be realistic about what can be achieved from the resources available to the Secretariat. It needs to be prioritised, focused and, wherever possible, be a facilitator for members.

## THE SECRETARIAT'S ROLE AND PRIORITIES

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8. The Secretariat should support members in four main areas:
  - **Global Advocacy:** A core role for the Secretariat is to represent members to key international institutions. Our objective should be **to raise the profile of eye care so it receives the attention and resources needed to achieve universal access to eye health**.
  - **Strengthening the network:** We should support active partnership building both between members and with other key sectors. Our objective should be **to strengthen the network by facilitating partnership building to tackle the barriers to delivering eye care for all**.
  - **Connecting knowledge:** Underpinning our activities is our role in providing authoritative data and information and enabling access to up to date knowledge, information and practice. Our objectives should be **to be the authoritative source for data and information about eye health; and to enable the sharing**



**of knowledge and experience to promote the development of good policy and practice.**

- **Providing services to members:** We currently provide a limited range of specific services to members. Our objective should be **to provide good quality services which add value to members, which are economically viable and, where appropriate, contribute a surplus.**

## GLOBAL ADVOCACY

### Strategic shifts

- **Establish IAPB as a leading global advocate for eye health and its integration with Universal Health Coverage**
- **Develop strong and effective relationships with key global development institutions**

9. Global advocacy on behalf of members is a core role for the Secretariat. We will focus on eye health. We have a deep relationship with WHO, both in and beyond the eye health team, which is very important to sustain and develop. We are working with them closely on the World Report on Vision and what follows. But we have struggled to build relationships with other key development institutions. The proliferation of campaigns being undertaken by different organisations in part reflects this lack of traction.

10. It is planned that implementation of the strategic framework set by the World Report on Vision will take place mainly at country level. WHO's emphasis, in line with their approach to UHC, will be to support countries implement eye care packages and integrate them into their health systems. Members already have mature relationships in many countries and many countries also have mechanisms to take forward implementation. However, there are some countries where mechanisms are weak and members have not established a strong presence. In these countries, there may be a role for the Secretariat to support the development of local mechanisms and capacity, bring together members and build advocacy capability. Such support would need to be time-limited and sustainable, with the aim of handing over long-term engagement to members. So our Global Advocacy priorities will be:

### Global Advocacy priorities

- Facilitate the successful and timely launch of the World Report on Vision
- Provide support to WHO in the development of tools, including the package of eye care interventions
- Achieve an eye health resolution at the 2020 World Health Assembly
- Focus at a global level; provide support at regional and country level where there is a specific need and request from members.
- Build productive relationships with 2-3 non-eye health global institutions linking eye health to the SDGs and mobilising new sources of funding.
- Develop common and shared messages on eye health.

## STRENGTHENING THE NETWORK

### Strategic shift

Proactively facilitate the development of partnerships focused on tackling key system barriers

11. IAPB is recognised for our convening role. One of our underlying principles is that we can achieve much more working together than individually. Members still value the opportunity to meet together and share and develop practice at General Assemblies, Councils and working groups. But we could do more to get practical value out of the network and support active partnership-building, both between members and across sectors. In particular, sharing expertise and experience can help in tackling some of the significant systemic barriers that we face in integrating eye care into broader health systems. Eye care straddles a number of complex systems. Private sector organisations, from micro-entrepreneurs to multi-national corporations play a critical delivery role and will be key players in successfully implementing eye care for all. There are new players, such as technology companies, entering the field. A number of the big players are already involved in initiatives. But it can be difficult to engage them on how to integrate eye care into health systems and meet the needs of those left behind.

12. We currently have relationships with a few private sector partners, but these are mainly donor and funding oriented. With the development of a new strategy for the eye care sector, there may be an opportunity to engage some private sector players in a discussion about their contribution to the whole sector and potentially bring them on board as more active partners with IAPB. Our key priorities will be:



### Strengthening the network priorities:

- **Develop simple and systematic initiatives to foster partnerships within the members, e.g. searchable online database of members; active sessions at conferences to foster links; model partnership agreements.**
- **Identify capability to support members tackling complex system issues, e.g. framework of accredited consultants, showcasing good practice.**
- **Engage private sector organisations as active partners with IAPB.**
- **Develop cross-sector leadership training (with partners, e.g. ICO, WCO, others).**
- **Develop accreditation criteria for new members.**
- **A successful GA in 2020.**



## KNOWLEDGE CONNECTOR

13. IAPB gains real credibility and authority from our expertise and access to knowledge. We have produced highly valued products, such as the [IAPB Vision Atlas](#), and are respected as an impartial source of data and information. It is critically important that we maintain and develop this reputation. We will need to draw on the knowledge and expertise of members. Increasingly, rather than being a direct source of expertise, the Secretariat should play a connecting and curating role which enables information, practice and policy to be shared and promoted, and support monitoring, evaluation and quality assessment. We propose our key priorities to be:



### Knowledge Connector priorities

- **Maintain the Vision Atlas so it remains the key source of global data.**
- **Work with members to develop platforms and approaches for curating and sharing knowledge and practice, including online tools and apps.**
- **Support the work groups to be the core knowledge resource for their areas. With the work groups, develop capability to understand, evaluate and promote innovations to the eye health sector.**

14. Good communications will underpin our knowledge connector role and, indeed, advocacy and partnership building. We already have an effective communications team, but there are areas which need developing. The key elements for our communications function should include:

- Regular, proactive and engaging communications to the membership; and tailored communications to specific groups (geographic, sectoral etc.).
- Communications tools which enable members to share information, learning and success stories with each other.

- Development of a more proactive and respected public profile in support of our advocacy role, leveraging our network and expertise. This will require additional capability.

## PROVIDING SERVICES

15. Currently, we offer a limited range of specific services beyond the conferences and working groups – the [IAPB Standard List](#) and the Vision Atlas, although, of course, much of our work supporting members could be termed “soft service provision”.



16. We will continue to offer services, but they will need significant development, as follows:

### Providing Services priorities

- **Modernise the Standard List (including developing online accessibility) and explore opportunities to monetise it.**
- **Add relevant services to the Standard List, e.g. accredited consultancies; accredited monitoring and evaluation services.**
- **Survey members about additional services they want.**
- **Only provide or develop services where there is a clear demand from members, we add significant value and there is a business case. Take a more commercial approach.**
- **Review progress at the September 2019 and 2020 Board meetings to consider whether to continue, outsource or close our services.**