



**IAPB COUNCIL OF MEMBERS MEETING**  
**17 SEPTEMBER, 2013**

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**AGENDA ITEM 4.1: NEW STRATEGIC FRAMEWORK 2013-2017**

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**IAPB STRATEGIC FRAMEWORK 2013-2017**

<b>IAPB</b>	The International Agency for the Prevention of Blindness (IAPB) is a global alliance of non-governmental agencies and institutions seeking excellence and equity in the provision of eye health services. <sup>1</sup>
<b>VISION</b>	A world in which everyone has access to the best possible standard of eye health; where no one is needlessly visually impaired; and where those with irreparable vision loss achieve their full potential.
<b>MISSION</b>	To achieve universal access to eye health <sup>2</sup> , by <ul style="list-style-type: none"><li>• adding value to and maximising the impact of the individual and collective work of our Members, including those who strive for the inclusion and rehabilitation of those with vision loss</li><li>• promoting knowledge and awareness of comprehensive eye health system development, particularly at country level.</li></ul>
<b>VALUES</b>	<p>In all our endeavours, IAPB Members, staff and supporters will strive to be guided by the following values:</p> <p><b>Plurality</b> - we embrace the plurality of approaches we adopt in the pursuit of our common goals, in the belief that our strength derives from diversity rather than uniformity.</p> <p><b>Collaboration</b> - we believe that by working together we have far greater chances of achieving change than any one organisation can alone. We actively seek partnerships and collaboration with others as an effective means to achieve our vision.</p>

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<sup>1</sup> This strategy is the strategy for the members of this alliance, when acting collaboratively together. It is *not* a strategy for individual members acting in their own capacity; and it is *not* a strategy only for the staff employed by the alliance. The term 'IAPB', as used in this strategy, refers to the totality of the alliance of members when working together, acting with the support of the staff they employ.

<sup>2</sup> IAPB promotes and actively aims to deliver the targets of VISION 2020, the WHA Global Action Plan for Universal Eye Health, and the UN Convention on the Rights of Persons with Disabilities as they relate to persons with vision impairment and loss.

**GOAL 2013-17** Access to eye health, particularly for the most marginalised, is increased significantly, fulfilling their right to sight.

*Indicator: The prevalence and causes of visual impairment*

*Target: A 25% reduction in the prevalence of avoidable visual impairment by 2019 from the baseline of 2010, including a reduction in prevalence amongst the most marginalised<sup>3</sup>.*

<b>Strategic Aim 1: Changes to government policy, health systems and resourcing decisions at global, regional and national levels result in significantly increased access to eye health, particularly for the most marginalised</b>				
Using rolling 2-3-year priorities for advocacy topics and processes set by the Board, IAPB will...				
<b>Strategic objective</b>	<b>Strategic approach</b>	<b>What success will look like</b>	<b>Indicators of success</b>	<b>How/by whom implemented</b>
Influence national government health policy & systems, & resourcing decisions to achieve the implementation of the actions proposed for Member States in the WHA Resolution 66.11 “Universal eye health: a global action plan 2014-2019” and other relevant WHA resolutions	Establish and / or strengthen national coalitions of IAPB Members and other stakeholders in selected countries that are capable of influential advocacy and providing high quality technical advice on eye health.	<p>Presence of strong national coalitions, which have influenced policy, resourcing and practice change in their country.</p> <p>Demonstrable up-scaling of eye health systems in selected countries that results in better coverage and quality of services for the poorest communities and other marginalised groups.</p> <p>Strong health care system in which eye health is an integral part</p>	<p>Traceable influence by coalitions on policy, systems, resourcing or practice</p> <p>Number of eye care personnel by cadre: ophthalmologists, optometrists and allied ophthalmic personnel</p> <p>Cataract surgical rate and coverage.</p>	<p>Members in each country form, or strengthen, coalitions</p> <p>IAPB regional offices support coalition creation &amp;/or effectiveness in selected priority countries</p> <p>Coalitions advocate collectively in each country</p>

<sup>3</sup> IAPB recognises the difficulty of data gathering for prevalence amongst the most marginalised, but will strive to measure or assess this

	Influence regional and global inter-governmental and bilateral organizations' health policy, practice & resourcing to ensure they include eye health and that they promote & resource this approach at country level.	Relevant regional and global health policies include significant references to eye health and commitment of dedicated resources	Relevant inter-governmental and bilateral organisations have documented eye health policies/practice  Traceable influence by IAPB on regional/global organisations' policy & practice	Groups of members are facilitated by staff & regional chairs to advocate effectively to inter-governmental and bilateral organisations
	Engage with, and advocate to, other networks to ensure they include eye health in their policies and practice e.g. those involved with the NCDs, NTDs, healthy ageing and the global health work force.	Significant references to eye health issues in policy statements by other relevant health networks.	Networks have documented eye health policies/practice  Traceable influence by IAPB on networks' policies & practice	Groups of members are facilitated by staff to engage effectively with other health networks
	Actively work for the inclusion of the voices of people with vision loss and vision impairment, particularly from the South and marginalised groups, in advocacy for eye health at all levels	People with vision loss and vision impairment are advocates for eye health in a significant proportion of advocacy processes supported by IAPB	Inclusion of people with vision loss & vision impairment in advocacy activities of IAPB	Lead people & groups amongst both members and staff actively ensure inclusion in advocacy activities
	Update and refine as necessary evidence of the economic and cost-effectiveness benefits of prioritising eye health, and make accessible to all IAPB advocates	Sound evidence, available for use by advocates, of the economic & cost-effectiveness benefits of investment in eye health	IAPB members have all necessary evidence available for their advocacy	Specialist members of IAPB generate evidence, guided by priorities of IAPB advocates



<p>Influence global development policy processes to ensure they reflect disability and health as priorities, providing entry points for access to eye health</p>	<p>Engage with and conduct evidence-based advocacy to the key UN, government and civil society groups involved in the development of the post 2015 development agenda.</p>	<p>The post-2015 development framework includes disability &amp; health as a priority, providing entry points to eye health, and recognition of the rights of the visually impaired.</p>	<p>Disability &amp; health are priorities in the post-2015 development framework</p>	<p>Groups of members are facilitated by IAPB head office to advocate effectively in each major policy process (eg post 2015 development agenda), at global, regional and national levels as appropriate</p>
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**Strategic Aim 2: IAPB members and other stakeholders are significantly more able to contribute effectively to eye health, particularly for the most marginalised**

Using rolling 2-3-year priorities for topics selected through member consultation, IAPB will...

Strategic objective	Strategic approach	What success will look like	Indicators of success	How/by whom implemented
Enhance knowledge of eye health, relevant health & development topics, research findings and state of the art practices amongst IAPB Members & other stakeholders	Development of the IAPB website as the “go to” knowledge portal for all matters relevant to eye health.	IAPB website becomes the “go to” knowledge portal for all matters relevant to eye health, with IAPB Members proactively contributing their experience and best practice.	IAPB members & other stakeholders use IAPB website as first portal when seeking information on eye health matters Recommendations & referrals by members to site	Staff manage on-line information & communication systems  Members contribute information on-line
Enhance IAPB Members’ and other stakeholders skills in key areas of eye health delivery & advocacy	Establish on-line and face-to-face spaces in which IAPB members can exchange learning on effective practice.	IAPB Members are regularly supporting and learning from each other	IAPB members can demonstrate use of learning from other members in their work	Staff establish on-line & face-to-face spaces in which members can exchange; members populate and use those spaces
	Facilitate training workshops and other learning opportunities for IAPB Members & other stakeholders	Higher levels of skill amongst members in key areas of eye health delivery & advocacy	Enhanced skill levels are in use by members, and are traceable to IAPB-facilitated trainings Growth in demand for IAPB courses	Staff mediate between members & training providers to enable members to access training
	Include other stakeholders in learning opportunities, where this contributes to IAPB strategic objectives	The skills & practice of relevant other stakeholders are enhanced	Enhanced skill levels are in use by relevant other stakeholders, and are traceable to IAPB trainings	Staff & Members advertise opportunities to other stakeholders as appropriate
Enable IAPB Members and others to collaborate effectively with a view to enhancing the quality and coverage of eye health systems.	Establish on-line and face-to-face spaces in which IAPB members and others can build collaborative relationships.	IAPB Members adopt collaborative approaches that add value to areas such as eye health service delivery, research, advocacy and resource mobilisation.	New collaborations & consortia between members and others, arising from IAPB spaces, demonstrably add value to their work	Staff establish on-line & face-to-face spaces;  Members populate and use spaces



	<p>Reduce Members' costs by using their collective economies of scale &amp; negotiating power to procure equipment &amp; services, including through the Standard List</p>	<p>IAPB Members, and their partners in-country, benefit from lower prices for drugs, consumables and equipment</p>	<p>Members are using lower prices arising from IAPB negotiating power</p>	<p>Staff negotiate (in close collaboration with larger members) with suppliers on behalf of members, &amp; establish systems for ordering</p>
	<p>Advocate for improved resourcing for eye health, including for members; manage such resources only if other avenues for management are not available</p>	<p>Eye health, particularly if implemented by members, is better resourced</p>	<p>Members are using resources whose availability is traceable to IAPB advocacy                  Members have confidence that IAPB governance and management structures have adhered to the principles of this approach</p>	<p>Staff and member engagement with potential donors</p>



**Strategic Aim 3: IAPB's structures, systems and resources are sufficient, and organised appropriately, to enable its members to deliver this Strategy effectively and efficiently**

Using rolling 2-3-year priorities set by the Board, IAPB will...

Strategic objective	Strategic Approach	What success will look like	Indicators of success	How/by whom implemented
Members have a strong sense of ownership of, and engagement in, IAPB; and, as a result, commit time and energy to drive its work.	Review of membership & governance structures in 2014.	Members express an increased sense of ownership of IAPB  New members have opted to join IAPB	New membership & governance structures exist; Membership numbers increased; High annual membership renewal rates Members express trust in the transparency of IAPB processes & decisions	Executive Committee leads participatory membership & governance review
	Strategy is primarily implemented by members, with support, facilitation, enabling from staff teams	Members of all categories active in all areas of IAPB activity	Members express trust in each other, & are clear on their rationale for engagement in IAPB processes	Global & regional staff teams facilitate & enable members to make major contribution to determining & achieving strategy
	Regional structures are supported to strengthen members' engagement in IAPB activities	Vibrant regional structures support members to deliver key components of strategy	Members express trust in their regional officers and personnel to support them appropriately, and in the IAPB centre to support regions effectively	Executive Committee supports development of appropriate frameworks for development of regional structures
IAPB is adequately resourced to deliver this strategy.	The principle source of resources for IAPB to implement the strategy is fees, service charges and other contributions from members, supplemented by fundraising	Resources sufficient to deliver the strategy, principally derived from members' contributions and supplemented by fundraising .	Resources sufficient to deliver the strategy, balanced between sources.  Members are satisfied with balance between time and money they contribute to IAPB strategy	Board sets membership fees  Board sets guidelines for fundraising  Staff fundraise & generate service fees



	IAPB employs sufficient staff capability, appropriately distributed in terms of skills, to support the members in effectively delivering the strategy	A well-managed, skilled and effective team supports members to deliver the strategy	Members consider the staff team to have been an effective support in delivering the strategy	Executive Committee employs a Director, who ensures an effective staff team is in place
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