

Guidance on Coordination between

Refractive Error Stakeholders



01 Strategic Framing: Why Coordination Matters

A photograph of a man and a woman, both of African descent, looking upwards and to the right with expressions of hope and anticipation. The man, in the foreground, is wearing glasses and a light blue shirt. The woman, slightly behind him, is wearing a vibrant, colorful headwrap and glasses. The background is a solid dark blue.

Coordination is the strategic multiplication of effort, aligning priorities, resources, and innovation so that collective action delivers greater impact.

Refractive error is the biggest solvable global eye health challenge. The solutions exist, but progress is slowed by fragmentation. Coordination is not optional - it is the strategic force multiplier that turns isolated efforts into system-wide change. More than a billion people live with preventable sight loss. In many cases, restoring sight is as straightforward as providing a pair of glasses.

The World Health Organization's target - a 40-percentage-point increase in effective refractive error coverage (eREC) by 2030 - offers a unifying global goal and a shared measure of success. The Value of Vision investment case shows that every US \$1 invested in eye health yields a US \$28 return, underscoring that eye health is both a social and economic imperative. The WHO SPECS 2030 strategy and related technical package provide a practical, evidence-based roadmap. The Value of Vision's accelerators reinforce these strategies. The recommendations from these initiatives and reports encourage different stakeholders to "collaborate across the public and private sector and wider society".

"What coordination unlocks"



Faster national policy adoption.



Lower cost of spectacles through aligned market shaping.



Better effective coverage - (eREC).



Stronger pipeline of evidence and shared learning.



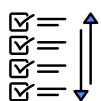
Reduced duplication and fragmentation in countries.



The upcoming Global Summit for Eye Health marks a defining opportunity for the sector to demonstrate collective leadership, mobilise political will, and translate ambition into measurable outcomes. To realise this, partners must act in concert; harmonising efforts, aligning resources, and linking innovation to policy and delivery.



When aligned, the global refractive error community can:



Ensure Refractive Error is a development priority - harmonising global and national efforts;



Share data, evidence, and learning to make our case and provide a basis for influencing policy;



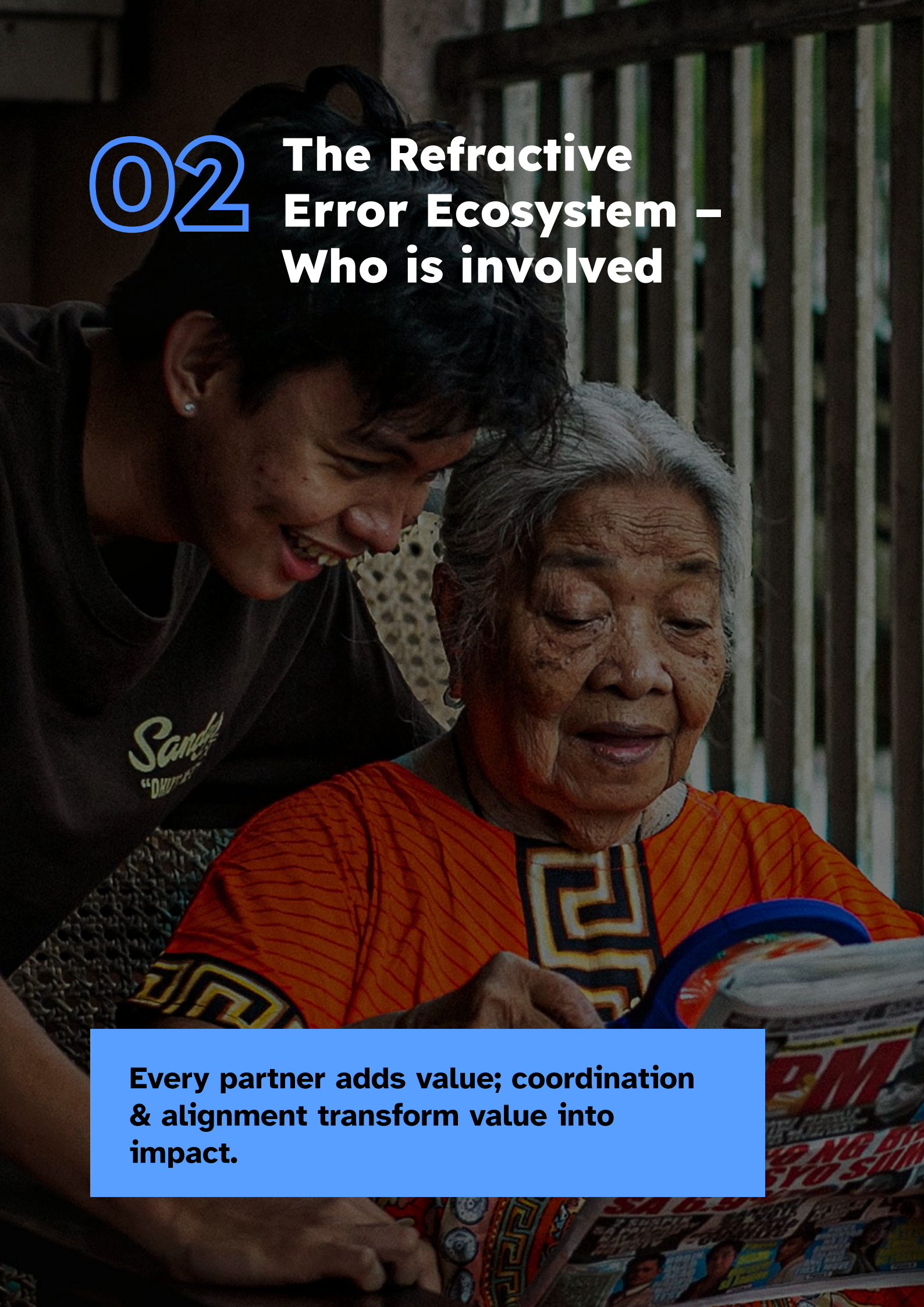
Reduce duplication and optimise the use of resources;



Accelerate the scale-up of equitable, quality, and accessible refractive services.

This guidance is facilitative, not prescriptive. It provides a shared framework to help stakeholders identify where they contribute, complement one another, and connect their initiatives within a common purpose, ensuring every action advances progress towards universal access to refractive error services by 2030.





02

The Refractive Error Ecosystem – Who is involved

**Every partner adds value; coordination
& alignment transform value into
impact.**

The refractive error ecosystem is diverse, interconnected, and multilayered. It spans global institutions, technical bodies, implementing agencies, innovators, and advocacy networks, local governments, each bringing unique capacities that, when aligned, can accelerate progress towards the WHO global eye care targets.

Global Backbone

Several initiatives and coalitions provide the strategic foundation for collective progress on refractive error. The broader ecosystem then builds on this foundation by linking global direction with regional platforms, national policy leadership, implementation networks, and research and innovation communities.

*Note: The list below is non exhaustive and is subject to change.

IAPB Refractive Error Strategy Group:

The [IAPB Refractive Error Strategy Group](#) is a sector-wide leadership group dedicated to keeping refractive error high on the agenda of health and development policymakers and driving coordinated action across the global eye health community. It provides leadership and technical guidance to IAPB members and stakeholders on strategic priorities related to refractive error, encouraging the sharing of best practices, innovative approaches, and robust evidence to accelerate progress towards universal eye health coverage. The group plays a central role in aligning efforts with the 2030 In Sight strategy, advancing evidence-based solutions, advocating for global policy change, and supporting sustainable and scalable refractive error services.

WHO SPECS 2030:

A [WHO led initiative](#) focused on defining and advancing universal access to affordable, people centred refractive error services. It supports Member States in achieving the 2030 target on effective refractive error coverage endorsed by the Seventy fourth World Health Assembly. The initiative calls for coordinated global action across five strategic pillars: improving access to refractive services, strengthening the capacity of personnel to deliver these services, increasing population awareness and education, reducing the cost of refractive care, and strengthening surveillance and research. The normative work focuses on

developing evidence-based guidance to support countries in strengthening their health systems to better deliver refractive error services and eye care services more generally. Upon request from governments, WHO also provides technical and coordination support for the implementation of country-level SPECS 2030 Initiatives.

Coalition for Clear Vision (TCCV):

[The Coalition for Clear Vision \(TCCV\)](#) is a global and country level alliance working to ensure that everyone who needs eyeglasses has access to them by 2050. It mobilises cross sector partnerships to address the systemic barriers that limit access to vision care, with a strong focus on building sustainable market systems, advancing scalable models to eliminate avoidable sight loss, and strengthening coordination across stakeholders. By aligning public, private, and civil society actors, TCCV supports countries to integrate eyeglass delivery into health and education systems, strengthen government ownership, and enable collective action that delivers lasting, equitable impact. TCCV Global is focused on aligning and mobilising the private sector with business investment opportunities based on market shaping efforts in low- and middle-income countries. With the country-level alliance in Kenya, TCCV's goal is to demonstrate, through coordinated efforts and integrated initiatives, that poor vision due to uncorrected refractive error can be eradicated and to use the key learnings to inform and replicate in other countries and global efforts.

EYelliance:

[EYelliance](#) is the global market catalyst for eyeglasses, having mobilised governments in low- and middle-income countries, bi- and multilateral partners, development finance, local entrepreneurs, global development players, and impact investors. Since 2015, EYelliance has been: 1) Demonstrating the viability of new scaling pathways by activating underutilised government and private-sector channels; 2) De-risking investment, new market entry, and government adoption of proven solutions; and 3) Enlisting new influential actors to join in the solution.

ATscale:

[ATscale](#), the Global Partnership for Assistive Technology, is a cross-sector global alliance hosted by UNOPS with a vision of ensuring that every person can access and afford the assistive technology they need, enabling a lifetime of potential. Its mission is to catalyse action, amplify existing efforts, and unite partners behind

a shared strategy to increase the availability of assistive products and services, including eyeglasses, hearing aids, wheelchairs, prostheses, and digital tools, particularly in low- and middle-income settings. ATscale aims to reach 500 million more people with life-changing assistive technology by 2030 by supporting country-led system strengthening, fostering inclusive markets, advocating for policy and financing, and building partnerships across governments, civil society, users, and the private sector to drive sustained, equitable access.

World Council of Optometry (WCO):

The World Council of Optometry (WCO) is an international, membership based non-profit organisation representing individual optometrists, industry professionals, and optometric organisations worldwide. Its mission is to advance and promote optometry, global eye health, and vision care through collaboration, education, and advocacy, guided by a vision of accessible eye health and vision care for everyone.

Together, these organisations form the global coordination backbone, aligning vision, standards, and resources across the refractive error landscape.



The Refractive Error Strategy Implementation Group

Formed under IAPB, this group leads and coordinates global efforts on refractive error priorities, supporting members and stakeholders to act collectively toward 2030 In Sight.

Purpose: Provide leadership, technical guidance, and strategic alignment across policy, research, advocacy, and implementation.

Current thematic focus:

Advocacy elevating refractive error on the global development agenda.

Coordination & Communication linking WHO SPECS 2030, TCCV, and IAPB regional priorities.

Research & Evidence curating models of practice and activating sector learning.

Myopia Response coordinating the sector's strategy on the global myopia epidemic.

Approach: Operates as a collaborative network rather than a directive body fostering synergy, sharing data, and learning, and amplifying collective results.

The Broader Ecosystem

Beyond the global backbone, coordination depends on the interaction of:



Governments and Ministries integrating RE into national health, social services, employment, education, and other sectors.



Implementers and NGOs piloting scalable delivery models.



Private Sector supporting interventions that create a mature private market.



Innovators testing and expanding access to affordable products and technologies.



Academia and Research Institutions generating data and evidence to support all stakeholders.



Advocacy and Communication Actors raising awareness and political visibility.



Donors and Investors aligning resources behind shared priorities.



A close-up photograph of a man with dark hair and a mustache, smiling warmly at a young child. The child, who has dark hair and is wearing a colorful striped shirt, is looking towards the camera with a slight smile. The man's hand is visible, gently holding the child. The background is a soft, out-of-focus grey.

03

The Action Pillars for coordination

**Five bridges connect us:
policy, data, innovation, voice,
and resources.**



Effective coordination operates across five interdependent pillars of collaboration. Each provides a domain where partners can align, complement one another, and adapt to context. These are not directives but guiding lenses through which coordination can thrive, enabling a globally aligned, evidence-driven, and well-resourced refractive-error ecosystem that works collectively to achieve universal access and effective coverage.





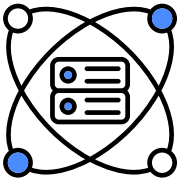
Pillar 1.

Policy and Planning Alignment

- Integrate refractive error within national eye-health, primary-care, and UHC frameworks, aligned with the WHO IPEC approach and SPECS 2030.
- Establish cross-sector planning (e.g., health, education, labour) to embed RE within social and economic policy.
- Encourage governments and partners to apply shared indicators, data collection methods and dashboards for tracking eREC progress.
- Advocate for government policy commitment in line with the UN Resolutions, WHO World Report on Vision, and Global Eye Health Summit journey and mechanisms for accountability, including supporting the WHO in the Global Status Report.

Core message:

Alignment is impact at scale, when global ambition meets local implementation.



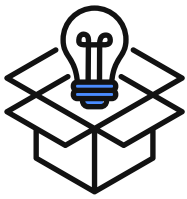
Pillar 2.

Data, Evidence, and Learning

- Harmonise measurement through standard RE indicators and data collection methods and open data platforms.
- Build regional and global learning networks connecting researchers, implementers, and policymakers.
- Share evidence through joint reporting and peer-learning mechanisms (e.g., global learning briefs, IAPB Vision Atlas dashboards).
- Create visibility to government and other stakeholder commitments through the IAPB / WHO portal for the Global Eye Health Summit.

Core message:

Knowledge is the connective tissue of coordination. When we share data, we share direction.



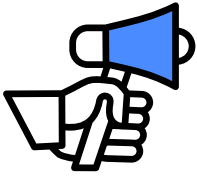
Pillar 3.

Innovation and Delivery Scale-Up

- Encourage partnerships that translate innovation and evidence into service models, from school eye health programmes to digital solutions such as tele-optometry services.
- Prioritise joint pilot initiatives designed for adaptation, replication, and cross-country learning.
- Embed the WHO Competency-Based Refractive Error Teams framework to standardise workforce quality and integration.
- Leverage private-sector partnerships to improve supply chains, affordability, and demand generation.
- Promote inclusive innovation, local production, digital tools, and mobile delivery, as enablers of equity.

Core message:

Innovation achieves its promise only when it travels beyond the pilot.



Pillar 4.

Advocacy and Communication

- Align global and national advocacy messages around the Value of Vision investment case.
- Coordinate campaigns (e.g., World Sight Day, Summit pledges) under unified narratives of health, education, and productivity.
- Coordinate marketing campaigns of the private sector with public health messaging, including utilising WHO messaging
- Celebrate shared milestones through collective reporting and storytelling.
- Build a common voice linking vision to global development priorities and financing agendas.

Core message:

A unified voice transforms vision into visibility.



Pillar 5.

Resource Mobilisation and Financing

- Explore innovative funding mechanisms for scalable RE initiatives.
- Encourage integration of RE into national health budgets and insurance packages.
- Explore blended partnerships that combine public, philanthropic, and private capital.
- Link financing to outcomes, rewarding progress on effective coverage and quality of care.

Core message:

Collective ambition requires collective investment.

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