2026 Global Summit for Eye Health

Draft Guidance

Malawi Strategy to Secure Government Commitments

Purpose and Status of this Document

This document is **Draft Guidance** intended to support a strategic process to explore, shape, and secure potential Government of Malawi commitments in the lead-up to the **2026 Global Summit for Eye Health**. It is propositional rather than prescriptive and is designed to support structured discussion, consultation, and iterative refinement with the **Ministry of Health (MoH)** and key stakeholders in eye health.

Timeframes included are indicative. Face-to-face engagement is considered important throughout the process. Exact dates, sequencing, and formats will be adapted to Malawi's policy environment, planning cycles, and decision-making processes.

Overview of the Global Summit for Eye Health

The first-ever Global Summit for Eye Health, to be hosted by the Government of Antigua and Barbuda in **November 2026**, represents a landmark moment for global eye health. Building on the WHO Resolution on **Integrated People-Centred Eye Care (IPEC)** and the UN Resolution on Vision, the Summit will convene Heads of Government, Ministers, multilateral agencies, development banks, industry, and civil society.

The Summit aims to strengthen national action, unlock sustainable financing, and establish a global accountability framework for eye health. It positions eye health as a whole-of-life and whole-of-government priority that supports **Universal Health Coverage (UHC)**, strengthens primary health care, improves education and workforce productivity, and advances equity and inclusion.

Malawi's Context

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Malawi has a long-standing commitment to eye health, supported by government leadership, strong partnerships with non-governmental organisations, and a focus on primary health care.

Key features of Malawi's eye health context include:

- The presence of a **national eye health programme within the Ministry of Health**, providing coordination and policy oversight for eye care services.
- **Multiple population-based eye health surveys**, including Rapid Assessment of Avoidable Blindness (RAAB) studies conducted over the past decade, which provide a solid evidence base for planning and priority-setting.
- A strong role for **NGOs and faith-based organisations** in supporting eye health service delivery, including community screening, cataract surgery, and outreach to underserved populations.
- Progressive experience with **Primary Eye Care (PEC)**, including training of frontline health workers to support early detection, referral, and community-level eye care.
- Alignment of eye health priorities with broader national goals related to UHC, primary health care strengthening, and non-communicable disease (NCD) responses.

Together, these elements position Malawi as a country with practical experience in partnership-based delivery and data-informed eye health planning.

Why the Global Summit for Eye Health Is Important for Malawi

The 2026 Global Summit for Eye Health offers Malawi a strategic opportunity to consolidate progress, elevate national priorities, and strengthen visibility and accountability for eye health.

Engagement in the Summit would enable Malawi to:

- Formalise and publicly signal **government-led commitments** grounded in existing eye health strategies and partnerships.
- Showcase effective collaboration between government and NGOs in expanding access to eye care.
- Strengthen national accountability through clearer monitoring and reporting of eye health outcomes.

- Position Malawi as a contributor to regional and global learning on eye health delivery in low-resource settings.

Participation in the Summit does not require a new policy direction. Rather, it provides a platform to recognise, strengthen, and scale existing efforts through clear, time-bound commitments.

Characteristics of Potential Commitments

In discussion with the Ministry of Health and partners, potential commitments may be explored that are:

- **New or scaled**, building on existing initiatives rather than restating current policy
- **Specific, measurable, and time-bound**, with clear accountability
- **Aligned with Malawi's health sector priorities**, including UHC and primary health care
- **Grounded in existing data and delivery platforms**, including RAABs and PEC systems
- **Supportive of partnership-based implementation**, reflecting Malawi's delivery model
- **Aligned with global frameworks**, including WHO IPEC, the World Report on Vision, and Global Summit accelerators
- **Feasible and cost-aware**, drawing where possible on existing budgets and partner-supported programmes

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Pathway to Exploring Government Commitments

The proposed approach aligns with established government decision-making pathways, progressing from technical engagement to senior endorsement and public signalling. The process is structured across five phases.

Each phase should include:

- Consultation with relevant MoH departments
- Engagement with key eye health partners and implementing organisations
- Periodic check-ins with the IAPB Africa regional team
- Simple tracking of consultations, decisions, and milestones

Phase 1: Engagement and Scoping

Indicative timing: February – March 2026

Objectives

- Explore alignment between possible commitment areas and MoH priorities
- Introduce the Global Summit and commitment concept informally
- Identify potential government champions

Indicative activities

- Technical briefings drawing on RAAB and routine eye health data
- Initial discussions with key NGO and faith-based partners

Phase 2: Cross-Sector Alignment and Initial Consultation

Indicative timing: April – May 2026

Objectives

- Translate priority areas into draft commitment concepts
- Encourage input from primary health care, NCD, and data units
- Begin informal feasibility and resourcing considerations

Indicative activities

- Refinement of draft commitment language
- Alignment with national health strategies and WHO reporting frameworks

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Phase 3: Commitment Shaping and Senior Engagement

Indicative timing: June – September 2026

Objectives

- Refine commitments with senior leadership input
- Prepare Malawi's narrative and positioning for regional and global audiences

Indicative activities

- Clarification of implementation pathways and responsibilities
- Preparation of draft public-facing commitment statements

Phase 4: Submission and Preparation

Indicative timing: By World Sight Day (October 2026)

Objectives

- Register commitments in the Global Summit tracking mechanism
- Support announcement planning and communications
- Prepare for post-announcement follow-up

Phase 5: Announcement and Implementation

Indicative timing: Post-announcement

Objectives

- Support implementation, monitoring, and reporting
- Enable recognition, peer learning, and accountability

Messaging and Positioning Considerations

Messaging throughout the process may emphasise that the Global Summit for Eye Health is a **recognition and leadership opportunity**, rather than an external policy request.

Indicative messaging themes include:

- Malawi's commitment to **equitable access** to eye health services
- Strong government–NGO partnerships delivering impact at scale
- Eye health as integral to UHC, productivity, and inclusion
- Malawi's experience contributing to regional and global learning

Illustrative Areas for Potential Commitments

The areas below are indicative and intended to support discussion. Final decisions rest with the Government of Malawi.

- **Monitoring and accountability for eye health outcomes**

- **Scaling and strengthening Primary Eye Care**
- **Reducing cataract and refractive error backlogs**
- **Strengthening partnerships for outreach and service delivery**

Illustrative Commitment Examples

These examples are provided to support discussion and refinement. They are not intended as final proposals.

1. Monitoring and Accountability (Flagship Example)

From 2027 onwards, Malawi could strengthen routine monitoring of key eye health indicators—such as effective cataract surgical coverage (eCSC) and effective refractive error coverage (eREC)—using RAAB and routine service data to guide equitable planning.

Rationale

- Builds on Malawi's strong history of eye health surveys
- Supports evidence-based planning and accountability
- Aligns with WHO 2030 eye health targets and Global Summit accelerators

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2. Scaling Primary Eye Care

By 2029, Malawi could further expand and standardise Primary Eye Care across districts, strengthening referral pathways, supervision, and integration within the primary health care system.

Rationale

- Builds on existing PEC experience
- Improves early detection and continuity of care
- Supports UHC and equity goals

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3. Partnership-Based Cataract and Outreach Services

By 2028, Malawi could formalise coordination mechanisms between the Ministry of Health and eye health NGOs to support planned cataract surgical outreach and reduce avoidable blindness in underserved areas.

Rationale

- Reflects Malawi's strong partnership model
- Improves efficiency and coverage
- Requires limited new policy change

Supporting Policy Frameworks and Evidence Base

This process will be supported by:

- Malawi's national health sector and primary health care strategies
- WHO Integrated People-Centred Eye Care guidance
- Global Summit for Eye Health Policy Framework and accelerator areas
- National RAABs and routine eye health data

Together, these provide a strong foundation for feasible, measurable, and high-impact commitments.

Looking Ahead

The 2026 Global Summit for Eye Health offers Malawi an opportunity to consolidate progress, elevate national eye health priorities, and demonstrate leadership grounded in data, partnership, and primary care. Through a structured and consultative approach, Malawi can articulate clear and credible commitments that deliver national impact while contributing to global accountability and progress in eye health.