



# 2026 Global Summit for Eye Health

## Draft Guidance

## Togo Strategy to Secure Government Commitments

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### 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This document is **Draft Guidance** intended to support a strategic process to explore, shape, and secure potential Government of Togo commitments in the lead-up to the **2026 Global Summit for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, Public Hygiene, Universal Health Coverage and Insurance** 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 Togo's policy environment, planning cycles, and decision-making processes.

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### 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.

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### Togo's Context

Togo has made important progress in recent years in strengthening its health system, particularly through reforms linked to Universal Health Coverage, primary health care revitalisation, improving access and the expansion of essential health services.

Key features of Togo's eye health context include:

- **Developing integration of eye health within broader primary health care** coordinated by the Ministry of Health's National Programme for the Prevention of Blindness and supported by the recent expansion of Universal Health Insurance (AMU) to include optical and vision care, reducing financial barriers.
- **A strong role for partner-supported service delivery**, including NGOs, faith-based providers, and professional associations, working alongside the Ministry of Health.
- **The elimination of trachoma** as a public health problem in 2022 following decades of prevention, screening, surgery, and hygiene promotion.
- **Growing emphasis on equity and rural access to health care**, aligned with national UHC objectives.
- **Increasing policy attention to NCDs**, especially diabetes, with a focus on screening, early detection and referral.
- **Opportunities to strengthen eye health data**, routine reporting, and monitoring within national health information systems.

Togo's context highlights the importance of functional, feasible, and system-embedded commitments that build on existing delivery platforms and institutional structures.

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## **Why the Global Summit for Eye Health Is Important for Togo**

The 2026 Global Summit for Eye Health offers Togo a strategic opportunity to elevate eye health within national development priorities, reinforce existing reforms and strengthen visibility and accountability for eye health.

Engagement in the Summit would enable Togo to:

- Formalise and publicly signal commitments that align with existing national health strategies.
- 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 Togo 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.

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## 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 Togo'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 Togo'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
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## **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 Togo's narrative and positioning for regional and global audiences

### **Indicative activities**

- Clarification of implementation pathways and responsibilities
  - Preparation of draft public-facing commitment statements
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## 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
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## Phase 5: Announcement and Implementation

**Indicative timing:** Post-announcement

### Objectives

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

- Togo'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
  - Togo's experience contributing to regional and global learning]
  - Data-driven planning and accountability
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## Illustrative Areas for Potential Commitments

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

- **Monitoring and accountability for eye health outcomes**
  - **Integrating eye health services within primary health care and NCD programmes**
  - **Targeted action on priority eye conditions**
  - **Advancing eye health workforce capacity and deployment**
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## **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, Togo could commit to strengthening the inclusion of key eye health indicators such as cataract surgical coverage and refractive error service coverage within national health information and reporting systems, using routine data to guide equitable planning and resource allocation.

#### **Rationale**

- Builds national capacity for evidence-based decision-making
  - Supports accountability within UHC reforms
  - Aligns with WHO 2030 eye health targets and Global Summit accelerators
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### **2. Integrating eye health services within primary health care and NCD programmes**

By 2029, Togo could better integrate basic eye screening, referral, and follow-up into primary health care and diabetes services, especially at district and community levels, by training frontline health workers to screen, manage common conditions, and refer patients through standardised pathways.

#### **Rationale**

- Supports early detection and prevention of avoidable vision loss
- Builds on existing service delivery platforms
- Expands access to eye care in rural and underserved areas

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### **3. Targeted Action on Priority Eye Conditions**

Togo could commit to implementing targeted national strategies for high burden eye conditions, particularly cataract, glaucoma, diabetic retinopathy, and uncorrected refractive error, informed by RAAB surveys and integrated with non-communicable disease programmes.

#### **Rationale**

- Focuses resources on the leading causes of avoidable vision loss and addresses unmet need
- Supports expansion of essential services, including increased access to timely and affordable cataract surgery
- Aligns eye health with broader NCD and ageing-population strategies

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## **Supporting Policy Frameworks and Evidence Base**

This process will be supported by:

- Togo'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.

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## **Looking Ahead**

The 2026 Global Summit for Eye Health offers Togo 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, Togo can articulate clear and credible commitments that deliver national impact while contributing to global accountability and progress in eye health.