



## ICTC strategic plan 2015 – 2020

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**ICTC** International Coalition  
for Trachoma Control

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## Executive summary

Welcome to ICTC's 2015-2020 strategic plan, which spans the critical period running up to 2020, the year by which we are striving to see the elimination of trachoma as a public health problem.

At the core of this strategy lie our 2015-2020 strategic objectives, through which we aim to:

1. **Increase political will** for, and commitment to, trachoma elimination among donors and decision makers.
2. **Increase investment**, as required, in trachoma elimination programs and SAFE interventions.
3. **Strengthen capacity** and human resources needed to achieve trachoma elimination by 2020.
4. **Coordinate the provision of technical assistance** and the sharing of knowledge to support high quality outcomes in trachoma elimination programs.
5. **Ensure an effective coalition model** and way of working that responds appropriately to changing contexts.

The **Introduction** sets out the context in which we find ourselves in 2015. The rest of the document is arranged into five sections. **About trachoma** is an overview of the trachoma burden and its impacts. **About ICTC** describes the nature of the coalition; our history, vision, mission and principles. Section three looks at **how ICTC supports trachoma elimination** and aims to clarify the unique contribution of ICTC to the elimination of trachoma as a public health problem by 2020. Section four outlines our **five strategic objectives** and key areas of activity against each one. The final section details our **ways of working** that rely on a high level of member engagement and an agile approach to collaboration.

Information on how we progressed against our strategic objectives for 2012-15 and the review and engagement process undertaken to develop this strategy is provided in a number of appendices, which can be found at [www.trachomacoalition.org/2015strategyreview](http://www.trachomacoalition.org/2015strategyreview)

## Introduction

Since ICTC developed its 2012-15 strategic plan, tremendous progress has been made in global efforts to eliminate trachoma. Not only have ICTC members collaborated on a number of preferred practice resources to support high quality implementation programs, they have been collaborating on several innovative initiatives that have set the pace for the coming years, including the ambitious Global Trachoma Mapping Project (GTMP) and two large-scale partnership initiatives – the Queen Elizabeth Diamond Jubilee Trust Trachoma Initiative and the DFID SAFE Trachoma Program. Together, these initiatives have brought a staggering \$150 million dollars of new funding to the table. They were also catalytic in generating new funding opportunities and greater collaboration amongst existing funders of the global program. ICTC and its members will seek to build on that momentum in the coming years by attracting different sources of funds to target identified gaps in trachoma elimination.

This scale up has been a huge step change – representing both tremendous opportunities and real challenges. By the end of 2015, GTMP, the world’s largest disease mapping project, will have screened up to 4 million people in 30 countries across Africa, Asia and the Pacific. While GTMP data is already supporting more efficient spending of resources and targeting of interventions to those most in need, it has also revealed more endemic areas, which has increased the implementation challenge. In 2014, the Queen Elizabeth Diamond Jubilee Trust Trachoma Initiative and the DFID SAFE Trachoma Program were launched, involving over 30 partners in at least 13 countries throughout Africa and the Pacific regions. With this massive implementation scale up, private sector partner Pfizer is providing more antibiotics for a greater number of programs than ever before and has pledged to continue to donate the medicine necessary to achieve elimination. Responsibility for trachoma was also moved from WHO’s Prevention of Blindness and Visual Impairment department into the Neglected Tropical Disease department in 2014, receiving a significant boost with a full time role allocation.

With its focus on leaving no one behind and prioritizing those most in need, the forthcoming sustainable development goals (SDGs) framework has the potential to produce a shift towards more investment in trachoma and other neglected tropical diseases (NTD). As well as the changes at the global level, there have been positive shifts in leadership within endemic countries, critical to making elimination a reality. For many ICTC members and other stakeholders supporting national programs, more integrated approaches have required different capabilities and new ways of working; they have also underscored the urgent need for active engagement with the water, sanitation and hygiene sectors; and increased demands for accountability from all stakeholders.

The continued rise of insecurity in many districts where trachoma is endemic poses a significant obstacle to implementation in those areas. Although targeted funding is urgently required, it must be appropriate to the need. We will continue to advocate for commitment to the full SAFE strategy, with a particular focus on facial cleanliness (F) and environmental improvement (E). While the surgery (S) and antibiotic (A) components have traditionally been a greater focus, the F and E components are essential to sustaining the elimination of trachoma. We also need to ensure that research and capacity building activities are supported alongside the core S,A,F and E programming components. Finally, there exists a persistent

neglect of certain countries and regions within countries. Addressing these issues lie at the centre of our strategic objectives.

During this year's strategy review and member engagement process, members used many superlatives to describe how they felt about ICTC's progress over the last few years: 'phenomenal', 'terrific', 'fantastic'. Members felt that ICTC has proven to be 'a successful platform for coordination' and 'a catalyst for more action and funding'. Membership has grown significantly in both size and type of organizations. ICTC has contributed to providing a good interface between its members and WHO. Donors have expressed their appreciation for the coalition's value in coordinating responses, catalyzing action, promoting good practice and measuring progress. Above all, progress is being made toward the GET2020. The added value of the coalition has been widely appreciated and there continues to be a strong commitment by members to contribute to 'the greater good.' One or two of the smaller and newer members highlighted the added value of membership, which they felt gave them greater standing in their local contexts.

In 2015, we find ourselves at a critical juncture. Significant challenges remain but with just five years to go until our 2020 target, this is the moment to redouble our efforts for trachoma and build on the momentum that is already underway in both trachoma and the wider NTD sector. For ICTC to remain effective, relevant and responsive to the changing global landscape, it also needs to consider its own capacity, ensuring its model of coordination and collaboration is aligned with the needs of the global program, and that it adds value to the work undertaken by our members.

**ICTC's 5-year strategic plan 2015 – 2020** presents the coalition's strong commitment to the GET2020 Alliance and trachoma prevention communities and identifies how it will work towards the GET2020 goal with a collective sense of responsibility and a real urgency for action.

Find out more about ICTC's 2015 strategy review process, including an assessment of the previous strategic plan, a summary of the findings and information on how ICTC developed this strategy:

[www.trachomacoalition.org/2015strategyreview](http://www.trachomacoalition.org/2015strategyreview)

## 1. About trachoma

Trachoma is the world's leading infectious cause of blindness and one of 17 neglected tropical diseases that affect over 1 billion of the world's poorest people. It is caused by the bacterium *Chlamydia trachomatis*. The bacteria are spread from person to person by infected eye secretions in areas where there is poor sanitation and hygiene practices mainly due to limited access to water. The bacteria are spread through contact with eye discharge from an infected person – via hands, towels, sheets and, in some cases, eye-seeking flies, and thrive where there is poor sanitation and limited access to water for personal hygiene.

Repeated infection damages the eyelids in some individuals so that the normal defences are compromised causing the eyelashes turn inwards and rub painfully against the eyeball surface. This advanced stage of the disease, trichomatous trichiasis, is extremely painful and has a profoundly negative impact on an individual's quality of life. Trichiasis can be corrected by eyelid surgery, however if left untreated it may lead to irreversible low vision and blindness.

Trachoma is currently estimated to be responsible for the visual impairment of about 2.2 million people, of whom 1.2 million are irreversibly blind, with approximately 232 million people worldwide living in trachoma-endemic districts<sup>1</sup>. Trachoma can destroy the economic well-being of entire communities, keeping affected families trapped in a cycle of poverty as the disease passes from one generation to the next.

Globally, trachoma results in an estimated US \$2.9 billion in lost productivity per year. Total loss of productivity for the visually impaired or blind and their caregivers has been estimated at \$3bn-\$6bn annually<sup>2</sup>.

While children are the most susceptible to infection, the blinding effects of repeated infection do not usually develop until adulthood. In most communities, women are about twice as likely as men to develop trichiasis, in part because of repeated exposure to their children's infections. The disabling effects of vision loss further compounds other common challenges faced by poor and marginalised people.

In 1998, the World Health Organization (WHO) Alliance for the Global Elimination of Trachoma by 2020 (GET 2020 Alliance) was created to address this health and development burden. The GET2020 Alliance is the principal platform through which the trachoma prevention community works together towards a shared goal. It includes representatives from 51 endemic country governments as well as other non-government development organizations (NDGOs), academic institutions, and donor and private sector stakeholders.

Adding further support to the Alliance, in May 1998, the 51st World Health Assembly adopted a resolution calling for the elimination of trachoma as a cause of blindness and recommending that Ministries of Health pursue the SAFE strategy to do so (WHA Resolution 51.11). WHO recommends that elimination of trachoma as a public health problem is approached through the SAFE strategy, which consists of surgery (S),

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<sup>1</sup> Pascolini D., Mariotti S.P. *Global estimates of visual impairment* British Journal of Ophthalmology, 2010

<sup>2</sup> Frick et al., *Estimating the burden and economic impact of trichomatous visual loss*, Ophthalmic Epidemiology, 2003

antibiotics (A), facial cleanliness (F) and environmental improvement (E) interventions. This approach includes reducing the prevalence of active disease in a population as well as undertaking corrective surgery on people suffering from the blinding stage of the disease. The delivery of this comprehensive approach is critical for the sustainability of trachoma elimination, which may be particularly contingent on the facial cleanliness and environmental improvement components. Importantly, trachoma interventions are undertaken within national health systems and integrated into national priorities, contributing to health system strengthening through the building of knowledge, skills and capacity.

## 2. About ICTC: vision, mission and principles

**ICTC is a coalition of non-governmental, donor, private sector and academic organizations working together to support the Alliance for the Global Elimination of Trachoma by 2020.**

The **International Coalition for Trachoma Control (ICTC)** was established in 2004 to contribute to global efforts to eliminate trachoma by supporting the GET2020 Alliance and to advocate for and implement the WHO-endorsed SAFE strategy. The coalition has a highly committed and professional multi-stakeholder membership, including NGOs, research and academic institutions, donors and private sector organizations.

ICTC members believe we can achieve more together as a group than if we were working as individual organizations. Observers include the World Health Organization (WHO), pharmaceutical, other private sector stakeholders and institutional and philanthropic funders. Membership is free to members and observers, who demonstrate a common commitment to accomplishing GET2020 objectives.

The coalition's approach is aligned with the roadmap outlined in *2020 INSight: The end in sight*, which specifies the actions required of the global community to achieve the global elimination of trachoma by the year 2020. This builds on *Accelerating work to overcome the global impact of neglected tropical diseases - a roadmap for implementation*, published in 2011 by WHO, which is a comprehensive plan of control, elimination and eradication targets for 17 NTDs to be reached between 2012-2020.

### **Our story**

ICTC was originally conceived as a meeting of implementing NGOs and supporting donor organizations, to be held separately and immediately after the annual meeting of the GET2020 Alliance, to discuss how to support the implementation of recommendations from the Alliance.

Where trachoma programs had originally been geographically focused on a small part of a country and operationally focused on only one or two components of the SAFE strategy, ICTC members recognised the need to support national programs more comprehensively by supporting all districts and all components of the SAFE strategy. Implementing members soon realised the added value of sharing annual work plans to avoid duplication and maximise the use of limited resources, with each member organization contributing through their individual strengths. ICTC members began conducting joint training activities for national staff, developing technical practice materials and cost-sharing according to the abilities of the partners and their donors. All of these activities are coordinated at the national level through National Trachoma Task Forces.

This transparent and open approach to program development and implementation allowed programs to be harmonized within and between countries and allowed the development of context-specific resource materials based on the shared field learnings of multiple partners. As the ranks of ICTC started to grow, working groups were formed to document operational effectiveness; these documents became ICTC's series of preferred practice manuals. Going forward these working groups will be transitioned to task teams.

The pursuit of operational efficiency and commitment to both quality and quantity led partners to the logical next step of purposely working together to support new country programs from the outset. Small

groups of ICTC members identified implementation gaps and then developed joint funding proposals for their organizations to collaborate at the national level.

In 2011, ICTC published *2020 INSight: The end in sight*, a roadmap that laid out the actions that needed to be taken to achieve the global elimination of trachoma as a public health problem by the year 2020. The impact of 2020INSight was a significant boost to existing trachoma control programs. The roadmap contributed bringing the DFID and USAID-supported GTMP project to the table as well as attracting two large scale partnership initiatives - The Queen Elizabeth Diamond Jubilee Trust Trachoma Initiative and the DFID SAFE Trachoma Program. These three initiatives brought a staggering \$150 million dollars of new funding into trachoma control and elimination programs. The sheer scale of collaboration and coordination involved in these programs – over 30 partners in at least 13 countries throughout Africa and the Pacific - is testament to the dedication and hard work of all the partners involved.

The value of this approach is the degree of collaboration; member organizations that had considered one another competitors eight years earlier, now work together for the benefit of the entire global program rather than acting solely in the interest of their respective organizations.

#### **Our vision**

*The global elimination of trachoma as a public health problem by 2020*

#### **Our mission**

*To act as a catalyst for the comprehensive implementation of the SAFE strategy at scale in support of trachoma elimination programs in endemic countries*

#### **Our principles**

ICTC members seek to pursue the following principles in their strategic operations and program planning:

- **Implementation of the WHO SAFE strategy:** playing to their strengths, stakeholders partner to comprehensively support SAFE implementation through the surgery for trichiasis, antibiotics to treat infection, and water sanitation and hygiene initiatives to encourage both facial cleanliness and environmental improvement to reduce transmission of and prevent infection.
- **Country ownership of national programs:** support sustainable SAFE strategy implementation in accordance with national NTD and trachoma action plans.
- **Partnership and participation:** engage stakeholders from the outset in goal setting and implementation.
- **Equity, inclusion and non-discrimination:** build equity, inclusion and non-discrimination into programs to ensure that programs are better targeted towards those most in need.
- **Integration:** aim to undertake joint planning and implementation of services where relevant and possible, to build on other programs that can have an impact on trachoma.
- **Use of evidence:** underpin advocacy and programming for the full SAFE strategy with the best available evidence.
- **Joint advocacy:** reinforce the importance of F&E at local, regional, national and international levels.

- **Context driven social and behaviour change:** reflect social norms in behaviour change approaches, based on a robust understanding of the specific context in which they are delivered.
- **Tracking progress and measuring success:** collect detailed data at national and district level to monitor and track progress against global indicators and national milestones, when feasible and possible.
- **Viable financing:** ensure financial arrangements of trachoma programs support the financial and management capacity of national governments.
- **Sustainability:** keep sustainability at the core to ensure lasting change.

Further detail on ICTC principles can be viewed on the ICTC website: [www.trachomacoalition.org/principles](http://www.trachomacoalition.org/principles)

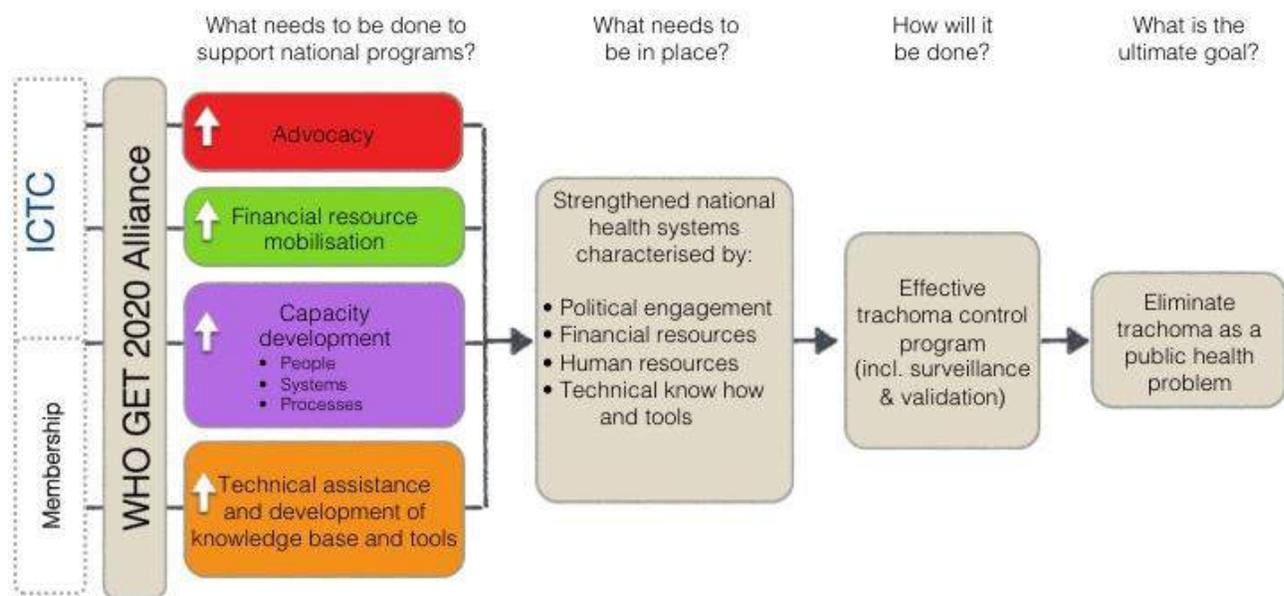
### 3. How ICTC supports trachoma elimination

ICTC supports the GET2020 Alliance’s ultimate goal of eliminating trachoma as a public health problem by 2020. All activities conducted by ICTC, as members of the Alliance, aim to support the achievement of this goal.

#### How will it be achieved?

Elimination of trachoma will be achieved through effective collaboration within the GET2020 Alliance to support the strengthening and scale up of trachoma control programs in endemic countries.

Figure 1: How ICTC contributes to the elimination of trachoma



#### How is ICTC contributing to the GET2020 Alliance’s goal of eliminating trachoma?

The figure above illustrates the relationships between the GET2020 Alliance, ICTC and ICTC members and lays out the focus of our individual and collective efforts to build political engagement, to increase the quality and availability of human and financial resources and to provide access to technical tools and know-how.

ICTC and its members engage in each of these areas in different ways. ICTC members amplify their individual support for national programs through their collective contributions to achieving ICTC’s strategic objectives. The following pages outline ICTC's strategic objectives and the key initiatives to be pursued to help achieve GET2020. ICTC will focus on activities that add value and act as a ‘broker’ coordinating members to best address the priority gaps that need to be filled to achieve elimination of trachoma. These activities will require a high level of member engagement and an agile approach to collaboration.

## 4. Our 2015-2020 strategic objectives

In order to best support the GET2020 Alliance and contribute to the ultimate goal, ICTC members will come together to:

1. **Increase political will** for, and commitment to, trachoma elimination among donors and decision makers.
2. **Increase investment**, as required, in trachoma elimination programs and SAFE interventions.
3. **Strengthen capacity** and human resources needed to achieve trachoma elimination by 2020.
4. **Coordinate the provision of technical assistance** and the sharing of knowledge to support high quality outcomes in trachoma elimination programs.
5. **Ensure an effective coalition model** and way of working that responds appropriately to changing contexts.

Figure 2: Five focal areas of coalition engagement



### Strategic objective 1: **ADVOCACY**

Increased political will and focus on trachoma among donors and decision makers and funders.

The elimination of trachoma is essential to achieving the global agenda of shared prosperity and development. As 2020 draws closer, ICTC will position trachoma elimination and comprehensive implementation of the SAFE strategy as key development issues with all partners.

ICTC will:

- Conduct a situational analysis that identifies resource, capacity, knowledge, data, policy and practice gaps in global programs.
- Develop an advocacy strategy on filling priority gaps.
- Develop common and harmonized messaging and a strategic and comprehensive communications plan to ensure a unified voice on trachoma elimination for our membership (at all levels) and amplify the messaging to stakeholders and media.
- Produce a progress report on the 2020 INSight global roadmap, policy papers on key thematic areas including health system strengthening and relevant business/economic cases for trachoma investments.

- Engage the trachoma prevention community in relevant decision-making and information sharing forums including: the GET2020 Alliance, the NTD NGDO Network (NNN), National and sub-National task forces, WASH and Education forums etc.
- Link trachoma elimination initiatives with other development sectors (e.g. WASH and education) to maximize impact and sustainability.

### **Strategic objective 2: NEW FUNDING**

Increased investment in trachoma elimination programs and SAFE interventions

The elimination of trachoma as a public health problem is one of the best investments in public health. Every dollar invested in trachoma elimination has a significant multiplier effect. In spite of recent increased investments in the global trachoma elimination program, a considerable increase in funding is needed to achieve GET2020 on a global scale. ICTC supports the GET2020 Alliance to advocate for new funding to address the known gaps in elimination efforts and to implement SAFE interventions globally.

ICTC will:

- Develop a tool to identify the global cost of implementing SAFE and advocate for the prioritization of funding gaps and needs (geographic and thematic).
- Produce business cases for funding the priority gaps in the global trachoma program and leverage the power of strong membership communications teams to amplify the message.
- Link limited grant opportunities to broader and comprehensive interventions (area wide, entire SAFE strategy and multi-agency initiatives).
- Promote positive case and program stories that demonstrate the impact of eliminating trachoma, including stories that focus on the return on investment, personal stories, the importance of trachoma as a proxy indicator of poverty and opportunities for public/private partnerships.
- Strengthen relationships with existing health and development partners.
- Attract and influence new donors into the field of trachoma, SAFE and NTDs; including enabling existing partners to lend their voice to support resource mobilisation efforts.

*Note: As well as advocating for new funding through ICTC, ICTC members fundraise individually for their own programs, coordinate other collaborative fundraising efforts and manage their own implementation programs.*

### **Strategic objective 3: CAPACITY BUILDING**

Strengthened health system capacity and human resources needed to achieve trachoma elimination goals by 2020.

The lack of skilled personnel in the quantities and locations required was a challenge when elimination programs were operating in 'business as usual mode'. Significant scaling up of efforts has exacerbated already weak health systems. Strengthening existing systems and building entirely new capabilities within all stakeholder audiences are a critical challenge to achieving the GET2020 goal.

ICTC will:

- Work with the GET2020 Alliance to facilitate the identification and prioritization of gaps in capacities of national programs, GET2020 Alliance and ICTC.

- Develop and provide appropriate capacity-strengthening resources, tools and training initiatives.
- Respond to requests for capacity-building support from the GET2020 Alliance.

#### **Strategic objective 4: TECHNICAL ASSISTANCE**

Improved technical assistance and knowledge base needed to effectively support high quality outcomes in trachoma elimination programs.

By sharing their practical field expertise and working together as ICTC, members strengthen their technical knowledge base and that of their partners and networks around trachoma elimination and the SAFE strategy. Together, they develop evidence-based recommendations to support high quality outcomes.

ICTC will:

- Respond to requests from WHO / GET2020 Alliance.
- Promote operational research that provides the evidence base and field learnings for implementation guidelines and preferred practice tools.
- Maintain an up-to-date information sharing portal to link stakeholders with relevant technical information and resources.
- Provide technical guidance to adapt tools for national program application where requested.
- Provide advisory input to grant managers through the ICTC Program Advisory Committee.

#### **Strategic objective 5: COALITION DEVELOPMENT**

A model of collaboration that responds appropriately to changing contexts.

ICTC acts in a manner of 'proactive responsiveness' to the felt needs of the GET2020 Alliance. We will continue to refine our mode of collaboration to achieve our objectives in a manner that is agile, provides opportunities for members to engage and is in close alignment with key GET2020 Alliance stakeholders.

ICTC will:

- Strengthen and align its relationship with WHO, the GET 2020 Alliance and other key partners to achieve GET2020 Alliance goal.
- Establish temporary task teams (formerly working groups), as needed, to undertake priority activities.
- Coordinate member participation in relevant networks at all levels.
- Develop an inventory of member competencies to be able to facilitate the best support in response to needs identified in trachoma treatment, control and elimination interventions.
- Continue to attract relevant new members and engage the membership.
- Resource itself adequately to perform all activities in its agreed annual plans.

## 5. How we work

ICTC's governance platform includes an Executive Group comprising of a Chair, Vice Chair and Immediate Past Chair. These are voluntary roles with the Vice-Chair elected from membership representatives and each serving for a period of two years in each successive office. The Executive Group members work through a basis of trust for the common good of the coalition, to provide leadership and ensure accountability of members for progress towards the ICTC strategic objectives and priorities.

ICTC initiatives are supported by:

- Thematic leads and temporary task teams that support the ICTC strategic work plan, including developing evidence based technical tools and resources or contributing to key messages and influencing materials. Representatives work according to a terms of reference and contribute their time and expertise voluntarily.
- Grant Managers who manage the contracts with funders and implementers for specific initiatives undertaken in partnership with ICTC, on behalf of the ICTC.<sup>3</sup> Grant Managers are appointed from member organizations and the associated activities undertaken by these members are funded from within the donor-funded projects.<sup>4</sup>
- A Program Advisory Committee that provides quality assurance, advice to the Grant Manager (as indicated) and reviews the technical aspects of capacity-building tools/resources developed by the Coalition. Representatives work according to a [terms of reference](#) and contribute their time and expertise voluntarily.
- Focal points represent ICTC in external meetings and groups that have been identified as of strategic significance by ICTC. They play an instrumental role in creating and strengthening cross sector linkages and building collaboration that supports progress towards the elimination of trachoma. These representatives are appointed by the Executive Group from members based on their expertise, interest and capacity to contribute to a specific area.
- Project Coordinators provide operational and administrative support to the Executive Group for coordination of member engagement and implementation of ICTC strategy. These dedicated positions are funded, employed and hosted by members.

Onwards and upwards, together we can achieve more than we ever could working in isolation.

For more information, visit [www.trachomacoalition.org](http://www.trachomacoalition.org), follow @trachomacontrol or contact [trachomacoalition@gmail.com](mailto:trachomacoalition@gmail.com)

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<sup>3</sup> ICTC is not a registered organization and has no legal status.

<sup>4</sup> A letter of understanding guides the decisions and operational relationships between these parties in relation to specific activity grants.

International Coalition for Trachoma Control (ICTC)

VISION:  
Global Elimination of blinding Trachoma by 2020.

MISSION:  
To act as a catalyst for the implementation of the SAFE strategy in support of endemic countries' trachoma control programs.

ICTC has a highly committed and professional multi-stakeholder membership, including Non-Governmental Development Organizations, donors, private sector organizations and research/academic institutions that demonstrate a commitment to GET 2020 and the WHO-endorsed SAFE strategy.

ICTC members at time of publication:



ICTC observers at time of publication:



**ICTC** International Coalition for Trachoma Control

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