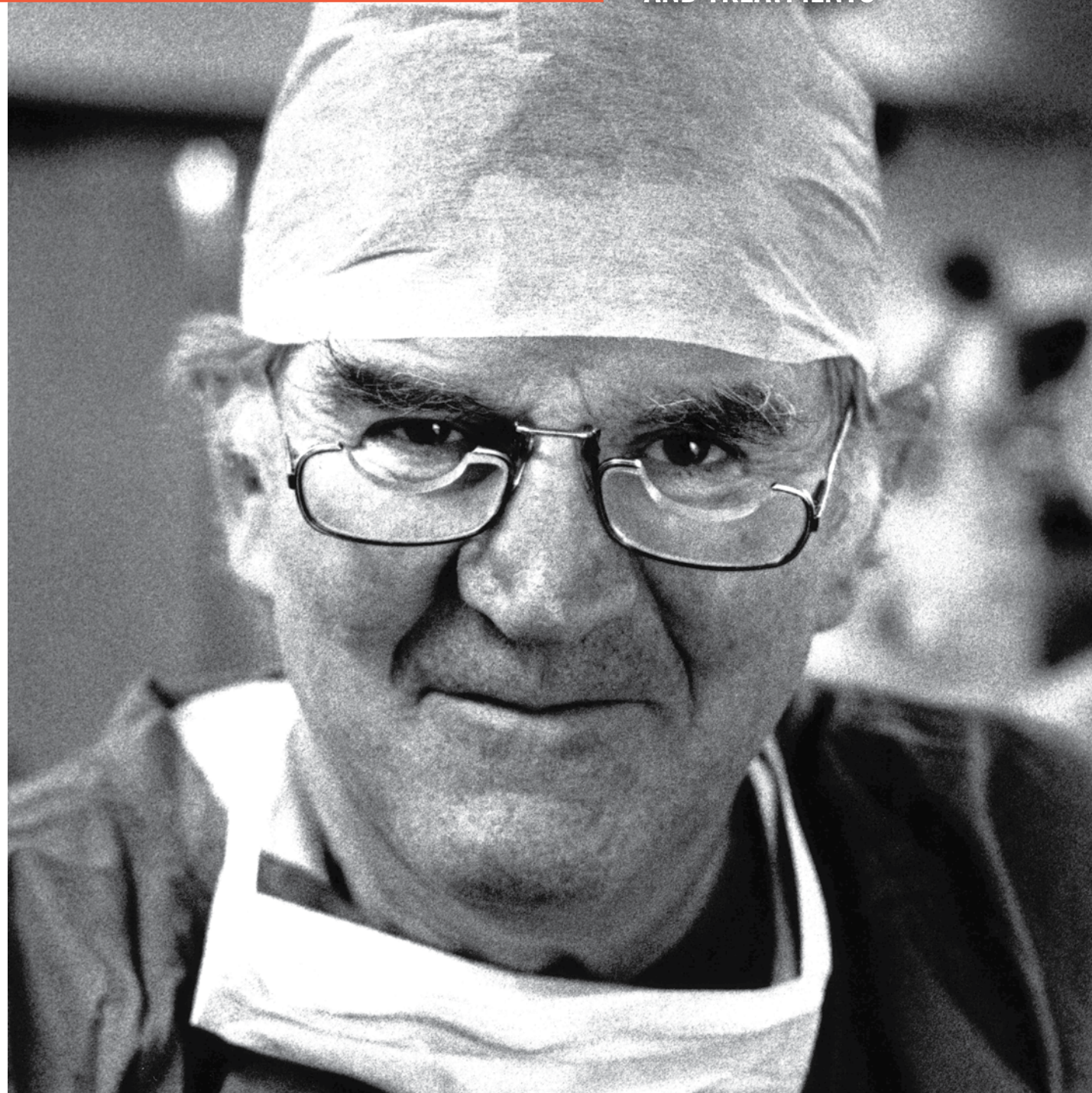


2018

# Annual Report

929,106  
EYE OPERATIONS  
AND TREATMENTS



*"To my mind, having a care and concern for others is the highest of human qualities." – Fred Hollows*









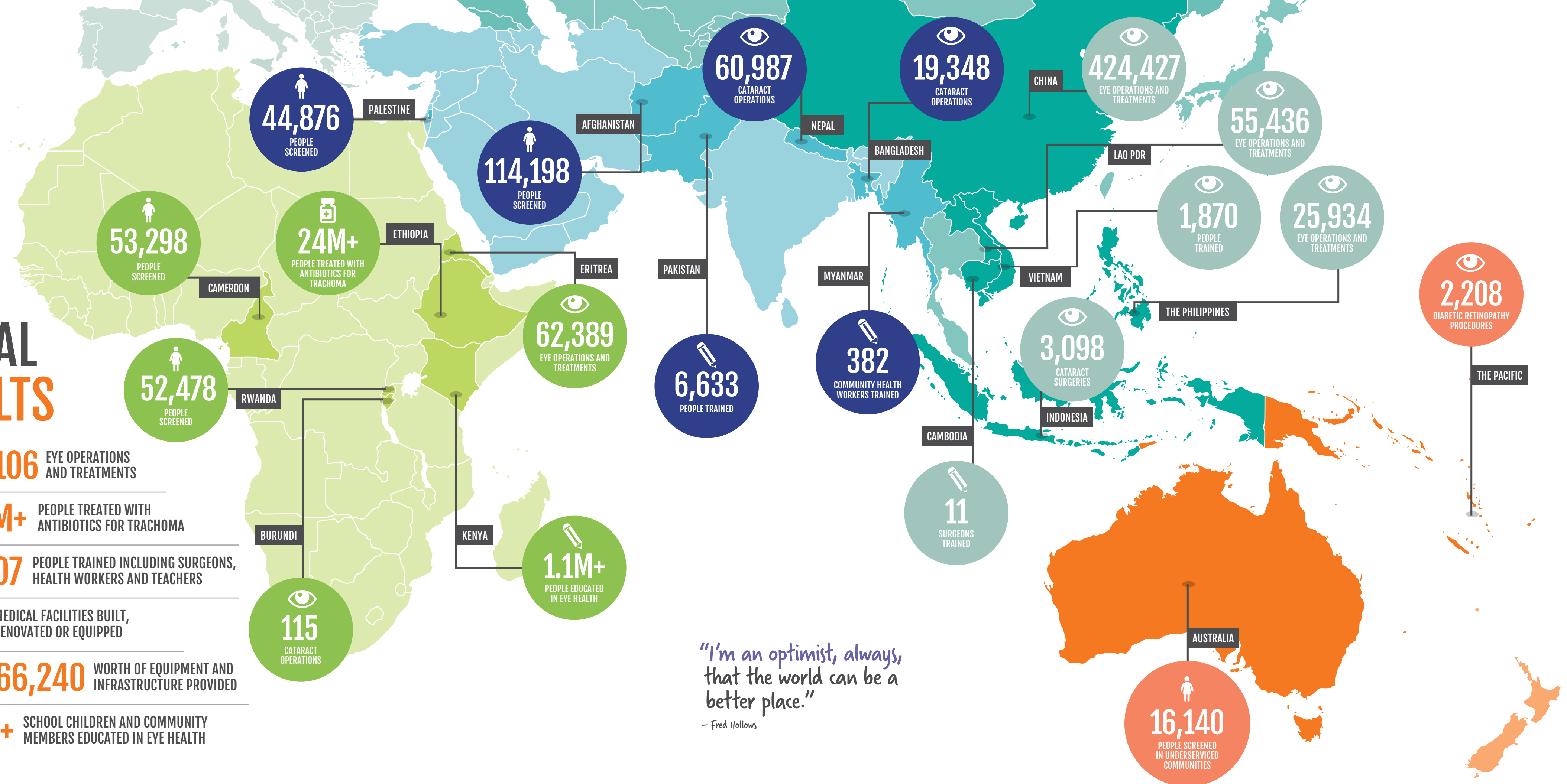
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## OUR GLOBAL IMPACT 2018

We see a world in which no person is needlessly blind and Indigenous Australians exercise their right to good health.

# GLOBAL RESULTS

-  **929,106** EYE OPERATIONS AND TREATMENTS
-  **24.7M+** PEOPLE TREATED WITH ANTIBIOTICS FOR TRACHOMA
-  **59,207** PEOPLE TRAINED INCLUDING SURGEONS, HEALTH WORKERS AND TEACHERS
-  **666** MEDICAL FACILITIES BUILT, RENOVATED OR EQUIPPED
-  **\$4,466,240** WORTH OF EQUIPMENT AND INFRASTRUCTURE PROVIDED
-  **2.4M+** SCHOOL CHILDREN AND COMMUNITY MEMBERS EDUCATED IN EYE HEALTH



*"I'm an optimist, always, that the world can be a better place."*  
 — Fred Hollows



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## ABOUT US



### WHO WE ARE

The Fred Hollows Foundation is an international development organisation focusing on blindness prevention and Indigenous Australian health. We are independent, not-for-profit, politically unaligned and secular.



### OUR VISION

We see a world in which no person is needlessly blind and Indigenous Australians exercise their right to good health.



### OUR INSPIRATION

We are inspired by the life and work of Professor Fred Hollows, an internationally acclaimed eye surgeon and an activist for social justice who championed the right of all people to high-quality and affordable eye care and good health.



### OUR VALUES

Our values of integrity, empowerment, collaboration, and action underpin every aspect of our work both in Australia and around the globe.

## FIND OUT MORE

Nothing highlights the impact of our work better than the stories of people we've helped. That's why we're using QR codes to bring to life the inspiring case studies featured in this year's Annual Report. These are the men, women and children whose lives have been changed by the support you give and the work we do to end avoidable blindness.

### TO USE THE QR CODES:

Go to the app store on your smartphone, search for "qr reader" and download an app. Open the app and scan the QR code.



Photo: Michael Amendolia

The Department of Foreign Affairs and Trade (DFAT) is the Australian Government agency responsible for managing Australia's overseas aid program. The aim of the Australian aid program is to promote Australia's national interests through contributing to international growth and poverty reduction. In 2018, the Australian Government contributed funding towards The Fred Hollows Foundation's programs in Bangladesh, Cambodia, Eritrea, Kenya, Lao PDR, Myanmar, Nepal, Palestinian Territories, Pakistan, Philippines, Rwanda and Vietnam, primarily through the Australian NGO Cooperation Program (ANCP).

The Fred Hollows Foundation is a member of the Australian Council for International Development (ACFID) and is a committed signatory to the ACFID Code of Conduct, which is a voluntary, self-regulatory sector code of good practice. The Code requires members to meet high standards of corporate governance, public accountability and financial management.

More information on the Code, including how to make a complaint, can be obtained from ACFID by visiting [www.acfid.asn.au](http://www.acfid.asn.au) or emailing [code@acfid.asn.au](mailto:code@acfid.asn.au). The Foundation also has its own process for handling complaints which can be activated by phoning The Foundation's head office on 02 8741 1900, and asking to speak with the complaints officer, or emailing [complaints@hollows.org](mailto:complaints@hollows.org).

The Foundation's vision for reconciliation is grounded in our deep commitment to, and respect for, the rights of Aboriginal and Torres Strait Islander peoples. In particular, their inalienable rights to good health and their right to sight. In 2018, we advanced the implementation of our 'Innovate' Reconciliation Action Plan (2017-2019). We launched an employment strategy of our workforce targets to maintain a 50% employment rate for Aboriginal and Torres Strait Islander Australians in our Indigenous Australia Program, and increase this proportion across the organisation within Australia to 3% by 2020. This will ensure we have a diverse range of expertise, skills and experiences at hand and guarantee Aboriginal and Torres Strait Islander voices are at the forefront of our programming decisions in Australia.

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Front cover photo: Peter Solness

This publication may contain images of persons that have passed away. The Fred Hollows Foundation would like to acknowledge these persons and pay our respects to them and their families.

  
Australian Government  
Department of Foreign Affairs and Trade

**Australian  
Aid** 

 ACFID  
MEMBER



# GABI HOLLOWS AO

## A MESSAGE FROM THE FOUNDING DIRECTOR

When we set up The Fred Hollows Foundation almost 27 years ago, Fred and I had no idea that the simple vision of a world where everyone had access to eye health no matter where they lived and where no person was needlessly blind would become a global legacy.

In 2018 we continued to see the amazing growth and expansion of those early dreams. I'm sure Fred would be overwhelmed to know how far we've come!

Last year I was delighted to make my first visit to China to mark 20 years of our work there. I'm so proud to say The Foundation has established strong partnerships with the central government and local partners, aiming to end avoidable blindness and vision impairment in China.

Since 1998, through The Foundation's programs in China, we have provided more than one million eye operations and treatments for people in rural areas, and more than 30,000 eye care professionals and community health workers have been trained.

I was pleased to visit a village screening in Xingtang County. There I met a 77-year-old man who had been blind with bilateral cataract. He told me that he lived alone and used to fall and hurt himself because he could not see. He felt helpless as he couldn't care for himself. Nothing makes me happier than to see him now smiling and enjoying life with his sight restored. I wish I could take every one of our supporters to meet the people that they help and to experience these moments of joy.

It's not just our work in China. Last year we also celebrated milestones and anniversaries with our projects in Pakistan and Cambodia also marking 20 years and Bangladesh and Lao PDR 10 years.

What is core to The Foundation's work is the importance of working to build local health services. It was what Fred believed so strongly. He knew that teaching the teachers and helping local people to deliver eye health was the only

sustainable way to make a long-term difference. It's why he checked himself out of hospital to go to Vietnam in 1992 to help start the training program which would eventually train more than 350 surgeons in modern cataract surgery in less than three years. After Fred's passing, I never imagined I would leave my young children at home to visit Vietnam to make sure this work continued.

I'm pleased that empowering local people to deliver local services and working with governments and health authorities is still the focus of everything The Foundation does.

It's those partnerships and the trust that governments have in us that allow The Foundation to deliver new projects like our work with Rohingya refugees in Bangladesh. I was so proud to see that our Bangladesh team looked at the crisis that existed when more than one million refugees arrived near Cox's Bazar, and realised that we could help.

While emergency care was the first priority it soon became clear that up to 50,000 refugees were blind. The Fred Hollows Foundation's team took the lead and that has seen other eye health organisations decide they must also help. Now many organisations are working together on this humanitarian project.

At The Fred Hollows Foundation we do not discriminate. Everybody has the right to sight. It is what Fred fought for and it is what we work for now. Fred rolled up his sleeves, got stuck into things, and never gave up until the job was done. While our Annual Report shows our significant progress, our job is far from over. With your support, we will continue working toward Fred's dream of a world in which no person is needlessly blind.

Thank you for pushing us forward.

Founding Director



# JOHN BRUMBY AO

## A MESSAGE FROM THE CHAIR

In 2018 The Fred Hollows Foundation continued its dedicated efforts to end avoidable blindness and ensure Aboriginal and Torres Strait Islander peoples exercised their right to good health.

It was also the final year for our 2014-2018 Strategy – so this report provides a great opportunity to reflect on the amazing growth and success we've delivered over that time.

The raw numbers of The Foundation's achievements during our last strategy are astounding. Since 2014, working with our partners we have seen:

- 20.5 million people screened;
- 3.6 million eye operations and treatments;
- 77 million people treated with antibiotics for trachoma;
- 303,000 people trained including surgeons, health workers and teachers;
- 4,300 medical facilities built, renovated or equipped;
- \$16.5 million worth of equipment and infrastructure provided; and
- 9.9 million children and community members educated in eye health.

While we reflect on those impressive statistics, what is more important is that every number represents an individual whose life has been changed, whose sight has been restored or saved, because of our efforts. That should make all of our supporters, whether they are mums and dads or major institutional partners, feel incredibly proud.

The past four years have also seen strong strategic growth, with The Foundation opening fundraising offices in Hong Kong, the United Arab Emirates and the United States in a bid to diversify our funding base and ensure we can continue to expand.

The challenge for The Foundation now, is where to from here?

That's why much of 2018 was focussed on evaluating our successes, looking at what we've achieved but also assessing the direction for the next five years.

The Foundation's core belief remains as it was back when Fred and Gabi set up the fledgling charity in 1992. We believe in a world where no one is needlessly blind or vision impaired.

But today, there are still 36 million people who are blind and about 1.1 billion people live with some form of vision impairment.

Our challenge is huge and growing. Over the past 26 years The Foundation and the global eye health community have worked together to ensure 90 million people who would otherwise be blind have had their sight saved or restored, but there is so much more to do.

As the world's population ages and grows so does the need for more eye health resources. Despite all the work we've done, we know that if we can't scale up our efforts, blindness will triple by 2050.

That's why our new strategy focuses on how to urgently scale-up efforts to reach those who are being left behind. We have set ambitious targets against our disease priorities. That means we will boost efforts to treat cataract and ensure that we are responding to the increasing burden of refractive error. We will also continue our significant efforts to end the scourge of trachoma.

To achieve the strategy, The Foundation's Board and staff have set ambitious goals for ourselves. We will make attracting major new investment a higher priority, while continuing our successful efforts in individual giving. We will target and improve expertise to amplify our impact and bring about more sustainable change. Some of these goals involve taking on more risk than we have in the past. But if we are not bold in what we do, we won't close the gap on avoidable blindness.

I want to thank my fellow Directors for their hard work and commitment over the last year – and particularly acknowledge the longstanding contributions of our retiring Directors Jamie La Nauze, Graham Skeates and Joy Savage.

I look forward to continuing to work with the management and staff of The Foundation as we move into this new period of growth, a period which we believe will bring us closer to Fred's ultimate vision of a world where no person is needlessly blind.

Chair



# IAN WISHART

A MESSAGE FROM THE CEO

My first year as CEO of The Fred Hollows Foundation has been busy and rewarding and I'd like to thank the supporters of The Foundation for their generous welcome.

It has been an inspiring year. I was honoured to see the work The Foundation does first-hand. My first two visits were to projects at the heart and soul of our work – to Nepal and here at home seeing our work in Aboriginal and Torres Strait Islander communities.

Fred's legacy dates back to his years working with Aboriginal and Torres Strait Islander people in the 1970s. It is disappointing that 26 years after we lost Fred, Aboriginal and Torres Strait Islander adults are still three times more likely to be blind than other Australians. While the gap has narrowed, there's still a long way to go. That's why our Indigenous Australia Program is as important as it's ever been because we need to finish the job. In Darwin I met Chrissy. Chrissy had already had one eye fixed and was back for her second surgery. She was so happy to have good sight.

Nepal also had a very special place in Fred's heart. It's where he and great mate Dr Sanduk Ruit stood up to the authorities and argued that modern cataract surgery should be available to people in developing countries. That's why I wanted to make one of my first visits to Nepal to meet Dr Ruit and see his work at Tilganga Institute of Ophthalmology.

At Tilganga I was lucky to meet Ramesh a man who came into the hospital very subdued, dependent on others and struggling to interact with his surroundings. After Dr Ruit operated on him I could see Ramesh had a cheeky sense of humour and would soon be back in his village as a force of nature.

While our Annual Report necessarily focusses on our major achievements of the year, for me meeting patients like Chrissy and Ramesh is what our work is all about. It's the individual people whose lives are impacted that drive our efforts each and every day. We will never lose sight of that.

2018 was another year of milestones for The Foundation. Last year we celebrated 20 years of work in China, Cambodia and

Pakistan and 10 years in Lao PDR and Bangladesh. We should all be so proud of our achievements in these countries, and recognise our people past and present who have contributed so much towards this longevity.

One of my first duties as CEO was to help launch The Foundation's new gender campaign 'She Sees'. We know that 55 per cent of the world's blind are women. Women are twice as likely as men to be blinded by trachoma and are up to four times more likely to need eye surgery for trachoma.

She Sees aims to raise vital funds to support our gender equity programing efforts to ensure all women and girls can access eye health care and that women and girls who need eye health care, effectively engage with services.

The Foundation is committed to closing the gender gap in eye health – through our programs, within our organisation, and across the sector. This Annual Report highlights the results The Fred Hollows Foundation has achieved in 2018. These include:

- 929,106 eye operations and treatments;
- 24.7 million people treated with antibiotics for trachoma;
- 57,615 people trained including surgeons, health workers and teachers;
- 666 medical facilities built, renovated or equipped; and
- 2.4 million children and community members educated in eye health.

These results would not have been possible without the outstanding leadership of our global team, the dedication of our partners and your generous support. I'd like to thank all of the staff and volunteers who work so hard and The Foundation's Board for their support and leadership.

The ongoing commitment you show to carrying on Fred's legacy is inspiring. As we move into our new strategic plan we will continue to keep Fred's vision front of mind.

CEO 

## GROUND-BREAKING WAY TO MEASURE THE OUTCOMES OF OUR WORK

For the past 26 years The Fred Hollows Foundation has reported to our donors and supporters about the numbers of people we've helped – how many cataract surgeries we've performed - along with all the other important work we do that is critical to ending blindness, like training doctors, equipping eye health facilities and offering preventative treatment – like the antibiotics that prevent trachoma.

We know that by directly supporting treatments like cataract surgery, we've restored sight to more than 2.5 million people around the world. And through all the long-term investments we make in training, equipping and prevention, we know that we've restored sight and prevented vision loss for many millions more.

So in a major first for an eye health non-government organisation, The Foundation is developing a new approach to estimating eye health outcomes.

For the first time, The Foundation will be able to accurately estimate how many cases of blindness and vision loss we've prevented through all the different types of work we do. We will also report on the years of sight saved through our work – rather than simply measuring numbers of people helped. This is a ground-breaking new lens through which to view our work and gives us a better long-term evaluation of the impact our supporters and The Foundation are having on the lives of millions of people worldwide.

Until now, The Foundation's results have been followed up for just two years. But many of the investments we make during a project – such as training a doctor or investing in expensive medical equipment – can last far longer, perhaps 10 years or more.

Activity at a national level – like building a training institution for ophthalmologists – might never be translated into the impact it has on cataract surgery outcomes, despite the fact that many of the ophthalmologists trained through these programs work for 10 or more years.

The Foundation's work has also diversified over the years, expanding from cataract into trachoma and diabetes, and training a broader range of people including community health workers and teachers. So we need to be able to measure a project's impact on blindness and vision loss.

The Foundation will soon be able to report on cases of blindness averted, through prevention and treatment, and years of sight saved, which looks at the improvements for people for the rest of their lives. We've already estimated that the cataract surgeries we supported in 2018 mean more than 1.4 million years of sight saved. Adding to that the trachoma surgeries and spectacles we've supported this year, we estimate at least **2.4 million years of sight saved** for these three initiatives alone.



A better understanding of the outcomes of different projects will also allow The Foundation to make better decisions about how we prioritise funding for different types of programs, and improve accountability to our donors and supporters.

This new measure is being looked at closely by others in the global eye health community and we believe it could be adopted by others to show the importance of investing in eye health care.

*In 2018 our work contributed to more than 2.4 million years of sight saved.*

# HELPING PEOPLE SEE

We believe that everybody, no matter who they are or where they live, deserves affordable, high-quality eye care. That's why we're working tirelessly to treat and prevent the main causes of avoidable blindness including cataract, trachoma and diabetic retinopathy. With the support of our partners, we're delivering eye health services that are transforming the lives of millions of people around the world.

*"To watch good surgery being done on cataract-blind people warms your soul..."*

— Fred Hollows



Photo: Michael Amendolia

## CASE STUDY: KENYA



### TIMOTHY'S STORY

Childhood cataract must be treated urgently before it leads to irreversible blindness. For Timothy, help arrived just in time.

At school, the shy 9-year-old from rural Kenya would stand at his teacher's feet, inches from the blackboard. It was the only way he could see the letters and numbers.

Brain development, and the process of learning visual stimuli, is usually complete around 10 years of age. Even if a child receives help later in life, their sight may never be completely restored.

Timothy's parents sought help. Fortunately, The Fred Hollows Foundation had trained a local health worker to recognise the condition and with The Foundation's help organised surgery for Timothy.

Timothy's cataract was removed and the next day when the eye patch was removed the family's anxiety quickly turned to elation – and high fives between Timothy and his father Symon.



## CASE STUDY: LAO PDR

### HAO'S STORY

At 3 years of age, Hao was almost completely blind. His family was very poor and couldn't afford surgery.

After sacrificing ducks and pigs to ghosts that they believed were responsible for his blindness, the family finally turned to a Foundation-supported eye doctor, Dr Phetsamone Indara.

In 2014, Hao, from Lao PDR, regained his sight following cataract surgery.

Four years later, The Foundation caught up with Hao who is now a 13-year-old trainee monk and excelling as a fourth-grader at his local school in Oudomxay province in the country's north. Dr Phetsamone says Hao's sight is excellent.

As a monk, Hao wakes up at 5am every day to receive his daily ration of sticky rice before performing important ceremonial duties in his village.



Hao's life of discipline extends to his studies. In recent mid-term exams, Hao topped his class. Dr Phetsamone and The Foundation couldn't be prouder.



"All I try to do is live up to the real humanitarian aim of medicine — to do the most good for the greatest number of people. It's that simple."

— Fred Hollows

Photo: Aildrene Tan

## OUR IMPACT

**929,106** EYE OPERATIONS & TREATMENTS INCLUDING:

**163,960** CATARACT OPERATIONS

**42,264** SURGERIES TO TREAT TRACHOMA

**17,605** DIABETIC RETINOPATHY TREATMENTS

**705,278** OTHER SIGHT SAVING OR IMPROVING INTERVENTIONS

### AS WELL AS:

**5,306,365** PEOPLE SCREENED

**24,799,814** PEOPLE TREATED WITH ANTIBIOTICS FOR TRACHOMA

**125,619** PAIRS OF GLASSES DISTRIBUTED

### WORKING WITH OUR PARTNERS, WE'RE ENSURING PEOPLE CAN ACCESS AFFORDABLE, HIGH-QUALITY EYE CARE.

**In Afghanistan**, we screened 114,198 people. We supported 3,371 eye operations and treatments including 2,611 cataract operations.

**In Australia**, we screened 16,140 people and performed 2,569 eye operations and treatments including 1,002 cataract operations and 1,416 diabetic retinopathy treatments. We treated 62 people with antibiotics for trachoma.

**In Bangladesh**, we screened 364,948 people and performed 19,558 eye operations and treatments including 19,348 cataract operations and 210 diabetic retinopathy treatments.

**In Burundi**, we performed 119 eye operations and treatments including 115 cataract operations.

**In Cambodia**, we screened 38,744 people and performed 5,715 eye operations and treatments including 3,771 cataract operations.

**In China**, we screened 1,065,461 people and performed 424,427 eye operations and treatments including 13,274 cataract

operations, 294 surgeries to treat trachoma and 7,117 diabetic retinopathy treatments. We distributed 47,054 pairs of glasses.

**In Eritrea**, we screened 153,400 people and performed 62,389 eye operations and treatments including 5,242 cataract operations and 2,987 surgeries to treat trachoma. We distributed 1,272 doses of antibiotics for trachoma and 5,109 pairs of glasses.

**In Ethiopia**, we screened 437,003 people and performed 38,521 eye operations and treatments including 1,004 cataract operations and 37,517 surgeries to treat trachoma. We distributed 24,341,357 doses of antibiotics for trachoma.

**In Indonesia**, we screened 100,288 people and performed 3,026 eye operations and treatments including 2,914 cataract operations.

**In Kenya**, we screened 513,108 people and performed 36,458 eye operations and treatments including 9,779 cataract operations and 1,436 surgeries to treat trachoma.

**In Lao PDR**, we screened 118,432 people and performed 55,436 eye operations and treatments including 5,110 cataract operations. We distributed 5,904 pairs of glasses.

**In Myanmar**, we screened 3,671 people and performed 281 cataract operations. We distributed 625 pairs of glasses.

**In Nepal**, we screened 1,030,595 people and performed 160,118 eye operations and treatments including 60,987 cataract operations. We distributed 6,340 pairs of glasses.

**In the Pacific**, we screened 5,915 people and performed 2,226 eye operations and treatments including 2,208 diabetic retinopathy treatments. We distributed 95,448 doses of antibiotics for trachoma.

**In Pakistan**, we screened 455,033 people and performed 12,532 eye operations and treatments including 8,079 cataract operations. We distributed 19,488 pairs of glasses.

**In Palestine**, we screened 44,876 people and performed

3,878 eye operations and treatments including 460 cataract operations and 3,081 diabetic retinopathy treatments.

**In the Philippines**, we screened 50,661 people and performed 25,934 eye operations and treatments including 3,804 cataract operations.

**In Rwanda**, we screened 52,478 people and performed 10,329 eye operations and treatments including 2,115 cataract operations.

**In Vietnam**, we screened 505,824 people and performed 30,799 eye operations and treatments including 10,335 cataract operations. We also distributed 10,574 pairs of glasses.

Through our partners **Alina Vision** in Vietnam we screened 5,588 people and performed 20 cataract operations.

Through the **Cameroon Development Impact Bond**, we screened 53,298 people and performed 3,122 eye operations and treatments including 2,176 cataract operations.

# INVESTING IN PEOPLE

Empowering local people to identify, refer and treat eye diseases remains a mainstay of our work. By training community health workers, clinic support staff and surgeons we're able to create sustainable change in the countries where we work.

"What we are doing is revolutionary...what we are doing is giving these people the chance to help themselves. We are giving them independence."



— Fred Hollows



Photo: Michael Amendolia



## CASE STUDY: LAO PDR

### DR PHETSAMONE'S STORY

Taking eye care to the people was a principle championed by Fred Hollows. It's a belief shared by Dr Phetsamone Indara an ophthalmologist supported by The Foundation.

It's not uncommon for Dr Phetsamone to travel for hours in remote and hard-to-reach villages in Lao PDR to treat patients.

"Poor families can't afford to travel to district or provincial hospitals. If we have no mobile service, many more people will be blind."

Dr Phetsamone often sets up a makeshift operating room, using his car battery to power his instruments.

"I know that if we didn't come, people would be blind for the rest of their life," he said.



Dr Phetsamone's can-do attitude was recognised this year when he was named by the IAPB as an Eye Health Hero – the first from Lao PDR.





Photo: Michael Amendolia

## CASE STUDY: BANGLADESH

### ZINNAT'S STORY

In Jessore, Bangladesh, one of the first things villagers see when Zinnat Ara approaches is her big smile. After 10 years working in their communities as a maternal health worker, Zinnat knows these villagers well.

Zinnat provides primary care for mothers and babies in the Mollapara area, a territory covering two square miles and about 2500 houses.

She visits about 20 houses and sees up to 100 people a day.

The Foundation recognised the value of Zinnat and the hundreds of other maternal health workers and provided them with eye care training.

Before they received the training, patients with eye problems often thought nothing could be done. And if they did want help they needed to arrange for transport and someone to accompany them to the nearest hospital about half an hour away. For poorer villagers, transport may be too expensive.

Now Zinnat can identify patients with eye issues like cataract and help them access treatment.

## OUR IMPACT

 **59,207** PEOPLE TRAINED INCLUDING:

 **142** SURGEONS

 **48,035** COMMUNITY HEALTH WORKERS

 **1,108** CLINIC SUPPORT STAFF

 **7,789** TEACHERS

*"The best part of teaching is seeing the light of understanding go on in a student's eyes."*

— Fred Hollows

WITH THE HELP OF OUR PARTNERS, WE'RE TACKLING AVOIDABLE BLINDNESS BY TRAINING THOUSANDS OF LOCAL EYE HEALTH WORKERS.

**In Afghanistan** we trained 130 teachers in eye health.

**In Eritrea**, we trained 242 community health workers and educated 102,585 school children and community members in eye health.

teachers. We also educated 32,011 community members in eye health.

**In Palestine**, we educated 8,307 community members in eye health.

**In Australia**, we trained 147 people including three surgeons, two clinic support staff and 130 community health workers. We also educated 618 school children and community members in eye health.

**In Ethiopia**, we trained 26,956 people including 19 surgeons, 25,771 community health workers and 1,166 teachers. We also educated 152,688 school children and community members in eye health.

**In Myanmar**, we trained 387 people including 382 community health workers and five teachers. We also educated 291 community members in eye health.

**In the Philippines**, we trained 403 people including 21 clinic support staff and 382 community health workers. We also educated 8,330 school children and community members in eye health.

**In Bangladesh**, we trained 1,943 community health workers and educated 46,064 community members in eye health.

**In Indonesia**, we trained 1,623 people including 179 clinic support staff, 457 community health workers and 985 teachers.

**In Nepal**, we trained 1,308 people including 18 surgeons, 33 clinic support staff, 669 community health workers and 551 teachers. We also educated 108 community members in eye health.

**In Rwanda**, we trained 22 people including five surgeons and 17 clinic support staff. We also educated 5,000 community members in eye health.

**In Cambodia** we trained 1,447 people including 11 surgeons, 14 clinic support staff and 1,422 community health workers. We also educated 74,667 community members in eye health.

**In Kenya**, we trained 2,976 people including five surgeons, 52 clinic support staff and 2,889 community health workers. We also educated 1,146,306 school children and community members in eye health.

**In the Pacific**, we trained 1,739 people including one surgeon, 321 clinic support staff, 1,266 community health workers and 150 teachers. We also educated 89,218 school children and community members in eye health.

**In Vietnam**, we trained 1,870 people including three clinic support staff, 611 community health workers and 1,138 teachers. We also educated 609,998 school children and community members in eye health.

**In China**, we trained 3,304 people including 69 surgeons, 424 clinic support staff, 1,769 community health workers and 728 teachers. We also educated 52,186 school children and community members in eye health.

**In Lao PDR**, we trained 1,951 people including two surgeons, 27 clinic support staff, 1,594 community health workers and 328

**In Pakistan**, we trained 6,633 people including eight surgeons, 5,741 community health workers and 878 teachers. We also educated 127,328 school children and community members in eye health.

**Through Alina Vision**, we trained 41 people including one surgeon and 13 clinic support staff.

# INNOVATION & TECHNOLOGY

We're honouring Fred Hollows' pioneering spirit by investigating new ways to address avoidable blindness around the world. Through the development of innovative new models of eye care financing and state-of-the-art, low-cost technology, we're providing the infrastructure and tools needed to effectively prevent and treat eye disease.

*"You have to impart skills and technology and help them help themselves. Leave the world a better place."*

— Fred Hollows



## CASE STUDY: BOOST

The Fred Hollows Foundation played a leading role in developing a new smartphone app to improve cataract surgical outcomes, especially for people in developing countries.

In June 2018, a global consortium launched BOOST (Better Operative Outcomes Software Tool), a simple, free and easy-to-use app to help surgeons monitor and improve outcomes of cataract surgery.

In developing countries many patients do not return for follow up care because of lack of transport and other costs, making it hard for doctors to monitor the quality of surgery and respond to problems.

BOOST was developed following a study of 40 hospitals in 12 low and middle-income countries published in Lancet Global Health, that showed measuring vision one to three days after surgery is a valid indicator of longer-term quality.

The app now gives surgeons and clinics a simple tool to measure, benchmark and improve their results, even where few patients return. The app also suggests tailored strategies to improve outcomes. Tools like BOOST are essential for surgeons and hospitals to maintain high standards of quality and ensure patients get the best possible results from surgery.



“To help someone to see was a tremendous feeling and with medical and technological advances we have greatly increased the ability of eye doctors to give that help.”

— Fred Hollows



### CASE STUDY: SHE SEES

The Fred Hollows Foundation released a landmark report into the impact of blindness and vision impairment on women's empowerment.

The “Restoring Women's Sight” report, from The Economist Intelligence Unit, was a flagship study into the key ways vision impairment and blindness affect women's psychological wellbeing, their potential to earn income and their capacity to actively participate in society, as well as the social and economic costs to the wider family.

At least 55 per cent of the world's blind are women and most live in low and middle income countries.

Four key themes emerged from the report, showing the negative impacts of blindness and vision impairment on women:

1. Individual choice autonomy and self-efficacy
2. Economic security and independence (blindness is both a cause and effect of decreased financial independence)
3. Social inclusion, participation and voice
4. Psychological and physical health, and wellbeing.

The release of the report coincided with The Foundation's launch of ‘She Sees’, a new fund to help end gender disparity in eye health by ensuring women can access affordable eye health services.

## OUR IMPACT



**9** MEDICAL FACILITIES BUILT OR RENOVATED

**654** MEDICAL FACILITIES EQUIPPED



**363** TRAINING HEALTH CENTRES AND SCHOOLS EQUIPPED

**\$ 4,466,240** WORTH OF EQUIPMENT SUPPLIED

### WORKING WITH OUR PARTNERS, WE'RE EQUIPPING FACILITIES AND PROVIDING INNOVATIVE SOLUTIONS TO EYE HEALTH CHALLENGES.

**In Afghanistan**, we equipped teachers at 84 schools with basic eye care screening kits.

**In Bangladesh** we renovated eight medical facilities and equipped eight other facilities.

**In Cambodia** we equipped two teaching hospitals (Preah Ang Doung and Khmer Soviet Friendship Hospital) with ophthalmic

equipment used for teaching ophthalmology residents.

**In China** we equipped five medical facilities and one training facility.

**In Ethiopia** we equipped 252 medical facilities.

**In Kenya** we equipped 19 medical facilities.

**In Myanmar** we equipped 320 medical facilities.

**In Nepal** we equipped one medical facility.

**In Pakistan** we equipped 33 medical facilities and 276 schools.

**In the Philippines** we equipped the four provincial hospitals in Quezon, Antique, Oriental Mindoro and Negros Oriental with essential ophthalmic equipment.

**In Rwanda** we equipped 10 medical facilities. Through Rwanda International Institute of Ophthalmology we renovated one medical facility and equipped one other.

**In Vietnam** we equipped Da Nang Eye Hospital with IT equipment and software to reduce patient waiting times, which allowed more time to be spent on patient care.

### CASE STUDY: CHINA

#### XIAO LONG'S STORY

Four-year-old Xiao Long, or “Little Dragon”, from a remote county in China's Yunnan province, was born with blinding cataract.

The family realised Xiao Long had a problem when he was a baby. Xiao Long would stare at objects like a light bulb for a long time and reach for other things but miss.

The local hospital said Xiao Long's eyes could not be fixed. Fortunately, a team from one of The Foundation's partner hospitals visited Xiao Long's village and arranged for surgery.

China has the largest number of blind and visually impaired people – accounting for 20 per cent of the world's total. Most of China's ophthalmologists work in urban areas while the greatest demand for services is in rural areas.

The Foundation is working with local hospitals and governments in China to train eye health staff and allow people to access affordable eye care.



Photo: Fanny Lee

# ADVOCACY & INFLUENCE

We're using our position as a leading international development organisation to put eye health on the global agenda. Working in partnership with like-minded organisations, we're using evidence-based research to affect sustainable change and challenging governments to do more to ensure everyone can access high-quality care.

*"I might be a do-gooder, but if doing good is preventing people going blind and curing curable blindness, I don't care what they call me."*

— Fred Hollows



Photo: Michael Amendolia

## CASE STUDY: ROHINGYA

When one million refugees fled to Bangladesh in late 2017 the world watched on.

We saw the images of people fleeing violence, walking through jungle, across mountains and rivers for weeks to find safety. But what we didn't know was that as many as 50,000 of the refugees were blind.

With the help of partners, including Baitush Sharaf Eye Hospital, The Foundation was the first organisation to try to help.

When The Foundation held its first eye camp for Rohingya refugees in Bangladesh, it was clear there was a dire problem. Almost 600 people lined up for help.

As Fred used to say: "The alternative is to do nothing and that's not an alternative". So the Foundation's team in Bangladesh pushed on, using its 10 years of work in the country to gain the trust and support of Government and other agencies.

Now many organisations are working together on this humanitarian project.



## CASE STUDY: TACKLING DIABETIC RETINOPATHY

Diabetic retinopathy (DR) affects an estimated one third of all people with diabetes and is the leading cause of vision loss in working-age adults. Every person with diabetes is at risk of developing DR. Predictions suggest that by 2040, 224 million adults will have some form of DR and 70 million will have vision-threatening DR.

To address this escalating epidemic, a coordinated and collaborative response is required between diabetes and eye health, through prevention, early detection and treatment of DR. The Fred Hollows Foundation worked with partners to develop the Global DR Advocacy Initiative which launched 'Integrated care for diabetes and eye health: A global compendium of good practice' in Hyderabad in 2018.

This first of its kind report documents a series of examples of integrated care in practice in a range of different settings. It demonstrates how integrated care can be achieved and seeks to inspire action and promote change across the world.

The document provides guidance to policy makers, medical organisations, service providers and social investors and is part of a suite of tools developed by the Global DR Advocacy Initiative aimed at providing a collaborative voice and concrete solutions for change.



Photo: Michael Amendolia

## CASE STUDY: VISION FOR THE COMMONWEALTH

The Fred Hollows Foundation was one of six global eye health organisations which secured a commitment from the Commonwealth Heads of Government Meeting (CHOGM) to take action to ensure all people have access to quality eye care.

The commitment was accompanied by a \$36 million funding boost for trachoma elimination from the UK Government's Commonwealth 2018-2020 fund, established to support the delivery of CHOGM outcomes.

The funds will enhance activities across more than a dozen Commonwealth countries in Africa, Asia and the Pacific and will be managed by Sightsavers and The Foundation in collaboration with the International Coalition for Trachoma Control (ICTC).

Commonwealth leaders also tasked Commonwealth Health Ministers with discussing eye health regularly and asked that progress achieved towards bringing vision to all citizens is reported at future CHOGMs.

In what was a landmark moment in the movement to ensure everyone, everywhere has access to quality eye care, organisations worked under the banner "Vision for the Commonwealth" to raise awareness of the growing issue of avoidable blindness and poor vision and unite governments, advocates and supporters to take action.



Photo: Muhammad Aamir

**WHO World Report on Vision**, The Foundation continued its global eye health leadership delivering on the second year of our three year collaboration with the World Health Organization (WHO) under official relations status. The Foundation is supporting the WHO in developing the first World Report on Vision, which will provide the direction for global eye care until 2030 and mark the end of an era under Vision 2020: Right to Sight. This will set the scene for a global agreement for eye health to be put to world leaders in 2020, seeking a renewed commitment to take urgent action and place eye health within the global movement towards universal health coverage and leaving no one behind. Along with setting the agenda, The Foundation is supporting the WHO to shape and deliver a package of technical tools on eye health and planning resources to provide governments and non-government organisations with the knowledge to implement the plan.

**In Afghanistan** we provided regular support to the National Committee for Eye Health to support an integrated eye care system in the country. This committee provides technical guidance, strengthens coordination and advocates for resource mobilisation.

**In Bangladesh** thanks to advocacy led by The Foundation, the first ever National Strategy and Action Plan on Diabetic Retinopathy was endorsed by the Ministry of Health and Family Welfare and presented to the President of the People's Republic of Bangladesh. Our advocacy efforts also secured support from USAID to replicate The Foundation's Maternal Child Health model into 10 clinics.

**In Cambodia** we have strongly advocated for increasing the government budget for eye health. The planning department within the Ministry of Health asked The Foundation to help cost a primary eye care model which could, if implemented, see a significant increase in eye health funding. It is the first time an NGO has been asked to provide input to the government's budgeting process.

**In China** The Foundation, in cooperation with the National Institute of Hospital Administration, co-hosted the second China Eye Health Conference. It attracted more than 650 ophthalmologists and professionals working on the prevention of blindness. The conference built The Foundation's reputation with national decision makers and allowed us to forge new relationships.

**In Eritrea** The Foundation's lobbying and advocacy has seen the Ministry of Health include a trachoma indicator in the Integrated Disease Surveillance and Reporting system. Data on trachoma will now be collected every month as part of the integrated disease surveillance and reporting.

**In Ethiopia** The Foundation's efforts have brought together a range of partners from government and civil society to review progress on joint initiatives to eliminate trachoma as a public health problem in Ethiopia, in support of the Federal Ministry of Health's Trachoma Fast Track Initiative. The partners also explored plans to eliminate trachoma and The Foundation's initiatives to expand support to comprehensive eye health services to help millions of people exposed to preventable blindness and extreme poverty.

**In Kenya** four out of the six counties where The Foundation works have incorporated eye health into the County Integrated Development Plans, meaning that resources for eye health will be resourced in the future. Our advocacy has led to Turkana County hiring an ophthalmologist, West Pokot producing a vitreo retina specialists and Migori co-sponsoring an ophthalmologist training.

**In Nepal** advocacy by The Foundation and our partners has helped achieve several key milestones for establishing a national framework for integrating diabetic retinopathy in health care. The Ministry of Health recently approved three National level documents that will facilitate the effective integration of eye health within diabetes care.

**In Pakistan** following a successful Foundation school eye screening project, the district government in Toba Tek Singh has made eye screening compulsory for all children in schools district-wide. Additionally, ongoing advocacy by The Foundation to the Sindh Health Department has helped secure the inclusion of diabetes and diabetic retinopathy in training for Lady Health Workers. The Foundation also successfully advocated to Azad Jammu & Kashmir to equip the health department for a five year eye health plan.

**In the Philippines** we partnered with L'Occitane Foundation for World Sight Day to engage the public on blindness prevention which resulted in features on television, in newspapers and on social media. We also organised a forum on Overcoming Inequity in Accessing Eye Care Services in the Asia Pacific Region with the World Health Organization.

**In Rwanda** The Fred Hollows Foundation has taken the lead in developing the National Plan of Action for Eye Health. The Foundation has also advocated for including eye health indicators into the Health Medical Information System.

**In Vietnam** our advocacy through the Better Quality for Eye Care project has contributed to the development and approval of a new National Protocol for Cataract surgery by the Ministry of Health which will be applied nationwide from 2019. We also helped influence the development of the Ministry of Health's new school eye care program guidelines for school nurses.

# INDIGENOUS AUSTRALIA PROGRAM

Aboriginal and Torres Strait Islander people are three times more likely to go blind than other Australians. Which is why we are working hard to ensure sustained investment in high-quality, accessible and culturally-appropriate eye care services in remote and underserved communities around the country. Twenty-six years since Fred's passing, we are continuing his commitment to improving the health of Aboriginal and Torres Strait Islander people.

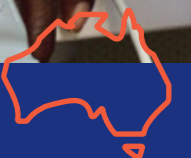


*"There must be active community involvement, using the community's own structures, in every aspect of disease control programs."*

— Fred Hollows



## CASE STUDY: NORTHERN TERRITORY



### RALPH'S STORY

"They call me The Rubber Man", Ralph said. "Whenever I get knocked down, I get back up again."

This time, cataract in his right eye was threatening to knock him down.

Ralph had already lost vision in his left eye. If the cataract in Ralph's right eye remained untreated, he would soon be blind.

Ralph attended an intensive surgery day in Darwin, organised and funded by The Fred Hollows Foundation.

The intensive surgery days are a collaborative approach to eye health involving several health agencies where groups of patients from regional and remote areas are brought to Darwin to receive surgery.

Ralph's surgery was a success but it came with an added bonus. During a post-operative check the day after surgery, Ralph's injured left eye was examined and the team believe it can be fixed. Another win for the Rubber Man.

OUR IMPACT AT HOME

# THE WAY WE WORK

Our Indigenous Australia Program supports increased investment in and access to culturally-appropriate eye care services for people in remote and underserved communities around the country.

We work with partners to deliver medical treatment for cataract, diabetic retinopathy and trachoma, coordinate and improve outreach services and provide training to build the eye health workforce.

We also advocate to Australian governments for sustained investment to improve the eye health of Aboriginal and Torres Strait Islander people, and to close the health inequality gap between Aboriginal and Torres Strait Islander Australians and other Australians by 2030.

## A STRONG VOICE

In 2018 The Fred Hollows Foundation publicly supported the Uluru Statement from the Heart through a submission to the Joint Select Committee on Constitutional Recognition for Aboriginal and Torres Strait Islander Peoples.

The Foundation also continued to be an active member of the Close the Gap campaign. We supported the National Indigenous Health Leadership Forum in its call for Australian governments to establish a formal partnership with Aboriginal and Torres Strait Islander health leadership on the Government's Closing the Gap Refresh. This was successful with the Council of Australian Governments announcing its intention to establish a partnership in early 2019.

The Foundation continued to engage with Vision 2020 Australia using this as a key advocacy platform for Aboriginal and Torres Strait Islander eye health; prevention and early intervention; and global efforts across the sector.

 **16,140** PEOPLE SCREENED IN REMOTE AND UNDERSERVED COMMUNITIES

 **2,632** EYE OPERATIONS AND TREATMENTS

 **1,142** PAIRS OF GLASSES DISTRIBUTED

 **147** PEOPLE TRAINED

 **1,002** CATARACT OPERATIONS

The Foundation worked with Vision 2020 Australia and members on the Aboriginal and Torres Strait Islander Committee to develop a five year plan for Aboriginal and Torres Strait Islander eye health. The Foundation strongly advocated for a key role for Aboriginal Community Controlled Health Organisations (ACCHOs), as well as increased funding to local patient support.

As the result of many years of advocacy, The Foundation's efforts to promote and uphold self-determination and a strong Aboriginal and Torres Strait Islander voice have resulted in a paradigm shift in the manner in which the sector and governments approach eye health and vision care for Aboriginal and Torres Strait Islander peoples.

A notable example is that there is now substantial support in government and the sector for ACCHOs to lead the design and delivery of eye care services.

"I hope all Aboriginal children will grow up in an equal world."  
— Fred Hollows



## CASE STUDY: TRAILBLAZING DOCTOR

### DR KRIS'S STORY

Yuggera and Biri-Gubba-Juru/Yuggera man Kris Rallah-Baker was just 13 years old when Fred Hollows passed away – but he was well on his way to becoming Australia's first Indigenous ophthalmologist.

A family tragedy encouraged him to become a doctor. Dr Rallah-Baker was determined.

A chance to work with The Fred Hollows Foundation in the Northern Territory made a lasting impact and led to a fellowship with The Foundation.

The Foundation was honoured to play a small part in his journey to being Australia's first Indigenous ophthalmologist.

"I guess some people would suggest that I'm a trailblazer. I see myself as doing a job and being a role model for other people to follow a similar path both Indigenous and non-Indigenous," he said.

"Having Aboriginal ophthalmologists at the table brings a new perspective. These patients could be like me, they could be my uncle, they could be my cousins.

"The gap itself won't be closed by me, but it helps the conversation move along."

Photo: Michael Amendolia

# THANK YOU

## INSTITUTIONAL DONORS

Institutional donors provided more than \$24.75 million in 2018 to help us tackle avoidable blindness. This support will allow The Foundation to deliver high-quality eye care services to millions of people around the world.

- Australian Government through the Australian NGO Cooperation Program (ANCP)
- Standard Chartered Bank Seeing is Believing Initiative
- The Queen Elizabeth Diamond Jubilee Trust
- United States Agency for International Development and RTI International

- UK Aid
- Conrad N. Hilton Foundation
- The Wellcome Trust
- The END Fund
- International Trachoma Initiative
- Kadoorie Charitable Foundation
- Vitol Foundation
- L'OCCITANE Foundation
- World Diabetes Foundation
- Convergence



## STRATEGIC GLOBAL PARTNERS

The Fred Hollows Foundation is proud to work with the following strategic global partners:

- Sightsavers
- Helen Keller International
- International Diabetes Federation
- International Council of Ophthalmologists

The Fred Hollows Foundation also works in partnership with:

- World Health Organization
- Brien Holden Vision Institute
- Global Partnership for Education
- The George Institute for Global Health
- The University of Auckland



### CASE STUDY: ETHIOPIA

Kemeru Abdela, an 80-year-old woman from East Hararghe district in Oromia, Ethiopia, first discovered she had a problem with her eyes about 20 years ago.

"All I felt were some persistent irritations that made me scratch my eyes and remove the lashes using my fingers."

Kemeru had developed trachoma, a painful but preventable eye disease prevalent throughout most of Ethiopia.

Fortunately, The Foundation and partners were able to organise trachomatous trichiasis (TT) surgery for Kemeru.

Her surgery was the 100,000th supported by The Foundation in Ethiopia and she can look forward to a future free of the blinding disease.

When The Foundation started work in Oromia about four years ago there were 150,000 people desperately waiting for surgery.

Strong partnerships have reduced the national surgical backlog by some two-thirds and saved the sight of hundreds of thousands of people.



### CASE STUDY: HUMAN CENTRED DESIGN

Working with patients to develop eye care solutions was the driving force behind a 2018 innovative pilot project from the Philippines Country Office.

Using a human-centred design approach to improve quality of care in two of its provincial partner hospitals, patients were encouraged to co-design solutions to their eye health needs.

The project, involving eight workshops and 78 patients and health workers in Tarlac and Surigao del Norte, provided The Foundation valuable feedback on models of patient care.

Immediate improvements were made to the appointment and queueing systems and patients and health workers reported higher standards of care and fairer access to services. The results were presented at the World Health Organization/International Agency for the Prevention of Blindness and the Annual Philippines Academy of Ophthalmology National Convention.





# THANK YOU IMPLEMENTING PARTNERS

**GLOBALLY** Alina Vision, Centre for Eye Research Australia, Deakin University, London School of Hygiene and Tropical Medicine, Nossal Institute for Global Health, Prevent Blindness. World Health Organization, International Trachoma Initiative, Tropical Data.

**AFGHANISTAN** HealthNet TPO, Kabul Medical University Eye Hospital, National Committee for Eye Health Afghanistan, Ministry of Education.

**AUSTRALIA** \*indicates partners of a regional coalition  
Aboriginal Medical Services Alliance NT, Australian Government Department of Health, Australian Indigenous Doctors' Association, Anyinginyi Health Aboriginal Corporation, Australian Human Rights Commission, Australian College of Optometry, Bila Muuji Aboriginal Health Service\*, Bourke Aboriginal Health Service\*, Brewarrina Aboriginal Health Service\*, Central Australian Aboriginal Congress\*, Central QLD Regional Aboriginal and Islander Community Controlled Health Organisation\*, Central QLD Wide Bay Sunshine Coast PHN\*, Centre for Eye Health\*, Centre for Eye Research Australia, CheckUP Australia, Cobar Aboriginal Medical Service\*, Council for Aboriginal and Torres Strait Islander Nurses and Midwives, Diabetes QLD\*, Dubbo Aboriginal Medical Service\*, Dubbo Base Hospital\*, Edith Cowan University – Australian Indigenous HealthInfoNet, Far West Primary Health Network\*, Guide Dogs NSW\*, Guide Dogs NT\*, Healthscope, Helen Summers Optometrist\*, Indigenous Allied Health Australia, Indigenous Eye Health - University of Melbourne, Institute for Urban Indigenous Health, Katherine West Health Board\*, Kelley Baldwin, Lightning Ridge Aboriginal Medical Service\*, Lions Eye Institute\*, Lisa Penrose, Malabam Health Board Aboriginal Corporation\*, Marathon Health\*, Menzies School of Health Research\*, Michael Long Learning and Leadership Centre, Miwatj Health Aboriginal Corporation\*, Music NT, National Aboriginal Community Controlled Health Organisation, National Health and Medical Research Council\*, National Trachoma Surveillance and Reporting Unit, New South Wales Rural Doctors Network, Nganampa Health Council, Northern Territory Government: Central Australian Health Services and Top End Health Services, Northern Territory Primary Health Network\*, Northern Territory Stolen Generations Aboriginal Corporation, Outback Eye Service – Prince of Wales Hospital, Oxfam, Peak Hill Aboriginal Medical Service Inc.\*, Queensland Aboriginal and Islander Health Council\*, Queensland Department of Health\*, Royal Australian and New Zealand College of Ophthalmology, Reconciliation Australia, Sironis Health, Sunrise Health Service, Vision Australia (QLD)\*, Vision 2020

Australia, Walgett Aboriginal Medical Service Cooperative\*, Wellington Aboriginal Corporation Health Service\*, Western NSW Local Health District, Western QLD PHN\*, Wurli-Wurlinjang Health Service.

**BANGLADESH** Ministry of Health and Family Welfare Bangladesh, National Institute of Ophthalmology and Hospital, Bangladesh Institute of Research and Rehabilitation in Diabetes Endocrine and Metabolic Disorders, Diabetic Association Society Bangladesh, Barisal Medical College and Hospital, Nizam Hasina Foundation, Ispahani Islamia Eye Institute and Hospital, Khulna BNSB Eye Hospital, Lions Charitable Eye Hospital, Mazharul Haque BNSB Eye Hospital, Bangladesh Jatiyo Andha Kalyan Samity, Baitush Sharaf, Paribar Kallayan Samity.

**BURUNDI** Clinique de l'Oeil.

**CAMBODIA** National Program for Eye Health, University of Health Science, Cambodian Ophthalmological Society, Provincial Referral Hospital Eye Units of Chey Chumneas, Kampong Chngang, Kampong Speu, Kampong Thom, Kandal, Neak Loeung, Oddar Meanchey, Palin and Preah Sihanouk provinces, Siem Reap Provincial Referral Hospital, Preah Vihear Referral Hospital, Khmer-Soviet Friendship Hospital, Phnom Penh Municipal Referral Hospital, Preah Ang Duong Hospital, The Eye Care Foundation, Ministry of Women Affairs.

**CHINA** China National Blindness Prevention Committee, National Institute of Hospital Administration of NHFPC, Provincial Disabled Persons' Federation of Anhui, Provincial Blindness Prevention Committee of Anhui, Anhui Provincial Hospital, Provincial Health Commission of Xinjiang, Altay Prefecture Hospital, The First Affiliated Hospital of Xinjiang Medical University, Kashgar Prefecture Hospital, Hutubi County Hospital, Shawan County Hospital, Provincial Blindness Prevention Committee of Yunnan, Yunnan Red Cross Hospital, People's Hospital of Qiubei County, Affiliated Hospital of Dali University, People's Hospital of Wenshan Prefecture, Binchuan County Hospital, Nanjian County Hospital, Yanshan County Hospital, Xingtang County Health Bureau, Huanxian County Health Bureau, County Hospital, Provincial Blindness Prevention Committee of Guangxi, The First Affiliated Hospital of Guangxi Medical University, Hepu County Hospital, Xingye County Hospital, Guanyang County Hospital.

**ERITREA** Asmara College of Health Sciences, Ministry of Health of the State of Eritrea.

**ETHIOPIA** Federal Ministry of Health, Oromia Regional Health, Education, Water Mineral and Energy and Finance and Economic Development Bureaus, Ambo Hospital, Shenen Gibe Hospital, Bissidimo Hospital, Tulu Bolo Hospital, Fiche Hospital, Shambu Hospital, Jimma University Specialized Hospital, Asela Hospital, Adama Hospital, Goba Hospital, Shashamane Hospital, Olenchiti Hospital, Chiro Hospital, Oromia Television and Radio Organisation, FANA Broadcasting Corporate, Caritas International, UNILEVER ETHIOPIA, the NALA Foundation, Zonal Health Departments: Arsi Zone Health Department; Bale Zone Health Department, West Arsi Zone Health

Department, East Shewa Zone Health Department, West Shewa Zone Health Department, North Shewa Zone Health Department, South West Shewa Zone Health Department, Jimma Zone Health Department, Buno Bedele Zone Health Department, Iluababora Zone Health Department, Horo Guduru Wollega Zone Health Department, East Wollega, East Hararghe, West Hararghe Zone Health Department, Guji Zone Health Department, Borena Zone Health Department, West Guji Zone Health Department and Oromia Special Zone Surrounding Finfinnee (OSZSF) Health Department.

**INDONESIA** National Ministry of Health, National Committee of Prevention of Blindness, Indonesian Ophthalmologists Association, Provincial Government of West Nusa Tenggara, CBM UK, Orbis International, Provincial Eye Hospital of West Nusa Tenggara, City of Mataram Hospital, University of Mataram, West Nusa Tenggara District Education Offices.

**KENYA** Ministry of Health, Nairobi County Government Department of Health, Amref Health Africa in Kenya, Kenya Defeat Diabetes Association, Kenya Diabetes Management Information centre, Sabatia Eye Hospital, Kenya Society for the Blind, County Referral Hospitals of Bungoma, Busia, Homa Bay, Kabarnet, Kapenguria, Kitale, Kitui, Lodwar, Maralal, Migori and Siaya, Jaramogi Oginga Odinga Teaching & Referral Hospital, Trans Mara Sub County Hospital, College of Ophthalmology of East, Central and Southern Africa, Operation Eyesight Universal, SightSavers, University of Nairobi, Kenya Medical Training College, Blue Cross Nyatike, NYARAMI, Rural AIDS Prevention and Development Organization, Budalangi Theatre Group, GESAO Foundation International, Nambale New Life Community Based Organisation, Dongruok Doho Youth Group, Kabarnet Talents Theatre Group, RUMA Women Development, ULUSI Youth Group, Ilchamus Teachers Lobby Group, Emining Community Based Organisation, CBM International.

**LAO PDR** Ministry of Health of Lao PDR, National Ophthalmology Centre, Eye Units and Provincial Departments of Health and Hospitals in Oudomxay, Bokeo, Phongsaly, Luangnamtha, Luangprabang, Vientiane, Savannakhet, Khammouan and Bolikhamxay, Luxembourg Development

**MYANMAR** Trachoma Control and Prevention of Blindness Program, Ministry of Health and Sports, Shan State Health Department, Yangon Eye Hospital.

**NEPAL** Tilganga Institute of Ophthalmology, Geta Eye Hospital, Ramlal Golchha Eye Hospital Foundation, Shree Janaki Eye Hospital, The Social Welfare Council, The Apex Body for Eye Health/Ministry of Health and Population, Ministry of Women Children and Senior Citizens.

**PALESTINE** St. John of Jerusalem Eye Hospital Group.

**THE PHILIPPINES** Department of Health, National Committee

for Sight Preservation, Philippine Eye Research Institute, Philippine Academy of Ophthalmology, Provincial Governments of Tarlac, Surigao del Norte, Antique, Negros Oriental, Oriental Mindoro, Quezon, L'Occitane Foundation Philippines, Philippine Academy of Ophthalmology, Philippine Society of Public Health and Occupational Optometry.

**THE PACIFIC** The Fred Hollows Foundation New Zealand, International Agency for the Prevention of Blindness Western Pacific, Fiji Ministry of Health and Medical Services, Kiribati Ministry of Health and Medical Services, Samoa Ministry of Health, Solomon Islands Ministry of Health and Medical Services, Tonga Ministry of Health, Vanuatu Ministry of Health, Pacific Eye Institute Fiji, Pacific Eye Care Society, Regional Eye Centre Solomon Islands, World Health Organization Western Pacific Regional Office Suva, Tropical Data Georgia, Project Heaven Fiji, Rural Water Sanitation and Hygiene Solomon Islands, The National Department of Health Papua New Guinea, PNG Eye Care Inc., National Prevention of Blindness Committee Papua New Guinea.

**PAKISTAN** College of Ophthalmology and Allied Vision Sciences, Sindh Institute of Ophthalmology and Vision Sciences, Ghurki Eye Trust Teaching Hospital, Allied Hospital Faisalabad, Comprehensive Eye Care Cells of Balochistan, Khyber Pakhtunkhwa, Punjab and Sindh, Leyton Rahmatullah Benevolent Trust, Pakistan Institute of Community Ophthalmology, provincial and district departments of Health of Punjab, Balochistan, Khyber Pakhtunkhwa and Sindh, Provincial Departments of Education of Balochistan, Khyber Pakhtunkhwa, Punjab and Sindh, National Program for Family Planning, Lahore General Hospital, Saidu Group of Teaching Hospitals Swat, Lakson Medical Trust Swabi, Eastern Mediterranean Region Alliance for Trachoma Control, CBM Pakistan, Sightsavers Pakistan, WaterAid Pakistan.

**RWANDA** Ministry of Health, College of Medicine and Health Sciences, Rwanda International Institute of Ophthalmology, Rwanda Ophthalmology Society, Rwamagana Referral Hospital, Ruhengeri Referral Hospital, Kibungo Referral Hospital, Bushenge Provincial Hospital, Kinyira Provincial Hospital, Nyamata District Hospital, Kabaya District Hospital, Muhororo District Hospital, Kibogora District Hospital, Nema District, Kirehe District Hospital.

**TIMOR-LESTE** The Fred Hollows Foundation New Zealand, Timor-Leste Ministry of Health, Guido Valadares Hospital Nacional, Fo Naroman Timor-Leste, The Royal Australasian College of Surgeons.

**VIETNAM** Ministry of Health, Ministry of Education and Training, General Department of Preventive Medicine, Medical Services Administration, Danang Eye Hospital, Vietnam National Institute of Ophthalmology, the Provincial Departments of Health in Da Nang and Binh Dinh, Provincial Departments of Education and Training in Hai Duong, Da Nang, Tien Giang, Provincial Trade Unions in Quang Nam and Da Nang.

# GOVERNANCE

## THE BOARD OF DIRECTORS

The Foundation is a not-for-profit company limited by guarantee and governed by a voluntary board.

The Constitution specifies a minimum of five and a maximum of 13 directors, and there were nine as at December 2018. Of these nine, the majority are directly elected by The Foundation's members at the Annual General Meeting. Up to six may be appointed by the Board itself, and there was one appointed director as at December 2018. The Board also appoints the Chair and Deputy Chair from among the existing directors. With the exception of Gabi Hollows, who occupies a special position as 'Founding Director' and has the right to lifetime membership, directors are elected or appointed for three-year terms and the Constitution sets limits on the maximum consecutive period people may serve on the Board.

## THE ROLE OF THE BOARD

The Board is the trustee of the founding spirit and vision of The Foundation, and is responsible for its good governance. It operates in accordance with principles and practices set out in its Corporate Governance Charter which is available at [www.hollows.org](http://www.hollows.org).

### The Board meets at least quarterly and:

- ▶ Sets strategic direction and policies
- ▶ Approves and monitors budgets and ensures appropriate financial and risk management strategies
- ▶ Oversees and protects the broader resource base of the organisation
- ▶ Ensures compliance with relevant standards, regulations and reporting requirements
- ▶ Provides accountability to members and stakeholders
- ▶ Appoints, supports and monitors the performance of the CEO who is charged with the executive management of The Foundation

## COMMITTEES

### The Board has established three committees which report directly to it:

- ▶ The Governance and Nominations Committee supports specific elements of the Board's governance responsibilities
- ▶ The Finance and Audit Committee assists and advises the Board on key financial, audit, financial systems, financial

compliance matters and risk

- ▶ The Programs and Partnerships Committee provides advice to the Board on the efficacy of its programs, projects and initiatives to achieve The Foundation's strategic objectives and on the management of substantive risks

## MEMBERS

The Foundation is a membership-based organisation. The goal is to have a diverse membership to reflect the democratic spirit of Fred who attracted the support of people from all walks of life. Our members are generous in sharing their wide range of skills and experience with the Board and staff. They form the inner circle of The Foundation's family. The Corporate Governance Charter requires directors to acknowledge the special trust placed in them by members and their right to hold the Board to account.

### Life Members

Nigel Milan AM, Dr Graham Fraenkel, Ray Martin AM, Gabi Hollows AO, Howard Davies, Michael Johnson AM, Robert Dalziel

## MANAGEMENT AND STAFF

At the end of 2018, The Foundation had 408 paid staff, including 235 in-country staff based in our 19 overseas offices. During the year, around 40 people were regular volunteers in our offices in Australia and Overseas (Sydney, Bangladesh, Kenya and Cambodia) and many more gave valuable help on an as-needs basis, including volunteering for Coastrek. As of end of December 2018, the Executive Management Group was comprised of: Ian Wishart – CEO; Kirsten Armstrong – Director of Knowledge and Innovation; Daryn Deiley – Chief Operating Officer; Jennifer Gersbeck – Director of Global Partnerships and Advocacy; Jon Crail – Director of Programs; Nick Martin – Director of Public Affairs; Lee Chung – Head of Strategy & Planning; Victoria Morris – Associate Director of Strategy and Innovation (maternity leave), and Nicola Stewart – Associate Director of Marketing and Fundraising.

## REPRESENTATION AND LINKS WITH OTHER BODIES

The Foundation has formal Licence Agreements with other Fred Hollows entities domiciled elsewhere in the world – The Fred Hollows Foundation New Zealand, The Fred Hollows Foundation (UK), The Fred Hollows Foundation

Kenya, The Fred Hollows Foundation (HK) Limited, The Fred Hollows Foundation (USA), The Fred Hollows Foundation Social Action Fund (USA), and the two Fred Hollows Intraocular Lens (IOL) Laboratories in Eritrea and Nepal.

### In addition, The Foundation is:

- ▶ In Official Relations with the World Health Organization (WHO)
- ▶ A member of the Board of Trustees of the International Agency for the Prevention of Blindness (IAPB)
- ▶ A partner in 'VISION 2020: The Right to Sight', a global partnership between the IAPB and WHO with the goal of eliminating avoidable blindness by the year 2020
- ▶ A member and Immediate Past Chair of the International Coalition for Trachoma Control
- ▶ A member of Vision 2020 Australia, the national peak body for eye health and vision care organisations
- ▶ A member of the Australian Council for International Development, the national peak body of international development NGOs and a signatory to its Code of Conduct
- ▶ A member of Together 2030 and the Together 2030 Advocacy Working Group, a civil society initiative promoting and tracking progress of the 2030 Agenda for Sustainable Development
- ▶ A member of and Working Group Co-chair of the Neglected Tropical Disease NGO Network (NNN)
- ▶ A member of the Steering Committee for the Close the Gap campaign, which aims to overcome the difference in life expectancy between Indigenous and non-Indigenous Australians
- ▶ A member of the Campaign for Australian Aid
- ▶ A member of Diversity Council Australia, a not-for-profit workplace diversity advisor to businesses in Australia
- ▶ A signatory to the National Anti-Racism Strategy
- ▶ A member of the Royal Australian and New Zealand College of Ophthalmologists
- ▶ A member of East Africa Trachoma/NTD Cross Border Partnership
- ▶ A member of Eastern Mediterranean Region Alliance for Trachoma Control
- ▶ A partner of the International Trachoma Initiative
- ▶ A member of UK Coalition Against NTDs
- ▶ FHF (UK) is a member of BOND, the UK membership body for non-governmental organisations working in international development
- ▶ A partner in Vision for the Commonwealth, a coalition of six international organisations seeking to unite Governments, advocates, service providers and supporters to bring vision to everyone everywhere in the Commonwealth
- ▶ A founding and Board Member of Global Health Alliance Melbourne (GLHAM)

- ▶ In strategic organisational partnerships with Sightsavers, Helen Keller International, International Council of Ophthalmology and the International Diabetes Federation

## RESEARCH, MONITORING AND EVALUATION

The Fred Hollows Foundation has rigorous monitoring processes that support delivery of effective and sustainable programs, including conducting periodic evaluations to examine the quality and impact of projects. In line with The Foundation's Evaluation Policy, 16 project evaluations across 14 countries were conducted in 2018.

In addition, The Foundation completed one 'strategic' evaluation of its Vietnam program, in 2018. The Foundation commissioned an in-depth evaluation of the Comprehensive Eye Care model used in Vietnam projects between 2003 and 2016. The evaluation examined longer-term changes in provinces where The Foundation had worked, and how the Foundation's programs had supported stronger eye health services in the medium-longer term. Designed to provide learning that will guide programming in other countries, the evaluation documented key learnings about what had worked in particular sites and why. It produced case studies on partnership and governance, health professional training, community education campaigns, transition to social health insurance and sustainability, which summarise issues and learnings that Foundation staff should consider when they are designing new projects. Investment in this type of evaluation underlines The Foundation's commitment to share learnings about effective eye health programs across contexts, and continually improve its approach to project design.

As well as commissioning independent evaluation, The Foundation has a new process of annual self-reflection for all country programs, requiring analysis of how programs are tracking against strategic objectives. Country program results reports are synthesised to identify common themes, key strengths and areas for ongoing improvement. This reflection and reporting cycle was completed for the first time in 2018.

The Foundation is also committed to delivering research that builds a strong evidence base, drives better performance in our programs, furthers the global thinking on ending avoidable blindness, and supports our advocacy efforts. In 2018 The Foundation managed a research portfolio of 38 projects, with a total, multi-year value of \$12.2M. The Foundation was involved in publication of 11 research reports, 30 peer review journal articles, an evidence summary, and five discussion papers.

# THE BOARD OF DIRECTORS

As of December 2018



## THE HON. JOHN BRUMBY AO CHAIR

John was elected Chair of The Board of The Foundation on 1 February 2016. Before that, he was a member and active supporter of The Foundation and joined the Board in 2013. John is well known from his roles as the Premier of Victoria from 2007 to 2010 and as Treasurer from 2000 to 2007. Since retiring from the political arena, John has become the Chair of MTAA Super, the Chair of Citywide Solutions Pty Ltd and Chair of the Melbourne Convention and Exhibition Trust. John is an Enterprise Professor at the University of Melbourne and has been appointed Chancellor of La Trobe University from 29 March 2019. He is also Chair and National President of the Australia China Business Council and Chair of the Olivia Newton-John Cancer Research Institute. John is the Chair of The Fred Hollows Foundation (USA), The Fred Hollows Foundation (HK) Ltd, and the Governance and Nominations Committee.



## JOY SAVAGE DEPUTY CHAIR

Joy joined the Board in 2013. An Aboriginal woman from far North Queensland, Joy has extensive public sector and non-government experience. She is currently Executive Director, Aboriginal and Torres Strait Islander Health with the Cairns and Hinterland Hospital and Health Service. Previously she has held Senior Executive roles in the Commonwealth Public Service including CEO of Aboriginal Hostels Limited, Department of the Prime Minister and Cabinet and Department of Health. Joy has an MBA, is Chair of The Fred Hollows Foundation Social Action Fund (USA), and is a member of the Board's Finance and Audit Committee.

The full Directors' Report for 2018 is available on The Foundation's website [www.hollows.org](http://www.hollows.org) or upon request by emailing [fred@hollows.org](mailto:fred@hollows.org) or phoning 02 8741 1900.



## HELEN EVANS AO

Helen is an expert in public health and development, and social policy with a special focus on infectious diseases. She has been involved in the work of a range of key national and international health and development organisations. Based in Geneva from 2005 until her retirement in 2014, Helen worked as Deputy CEO at the Global Fund to Fight AIDS, Tuberculosis and Malaria and then at Gavi, The Vaccine Alliance. In the early 1990s, Helen managed the National Communicable Diseases Program in the Australian Department of Health. For seven years prior to moving to Geneva she headed up the Australian Government Office for Aboriginal and Torres Strait Islander Health. Now based in Melbourne, Helen has an honorary appointment as Associate Professor at the Nossal Institute for Global Health at the University of Melbourne. Helen is a member of the Global Fund to Fight AIDS, Tuberculosis and Malaria's Technical Evaluation Reference Group. She is also a member of the Australian Government's Indo-Pacific Centre for Health Security Technical Reference Group. Helen is a board member of the Burnet Institute, the Chair of The Fred Hollows Foundation's Programs and Partnerships Committee and a Director of The Fred Hollows Foundation (USA).



## CHRISTINE HAWKINS

Christine was elected to the Board in 2015 after serving as an independent member of the Finance and Audit Committee from November 2010. Originally an economist with the Reserve Bank of Australia, Christine spent her senior executive career as a corporate adviser in investment banking, specialising in capital markets and financial structuring. In 1997, she established Cinnabar International Pty Limited, which provides advice on effective governance for small to medium enterprises, government and not-for-profit organisations. Concurrently, Christine has been a nonexecutive director of many companies in a range of industries and Chairman of several not-for-profit organisations. She holds an honours degree in Commerce in Accounting and Financial Management, a Master of Commerce degree in organisational development and taxation law and a Level 5 Certificate from Cambridge University in Teaching English to Speakers of Other Languages. She is a Fellow of CPA Australia and a Fellow of the Australian Institute of Company Directors. Christine serves as Chair of The Fred Hollows Foundation Kenya, is a Director of The Fred Hollows Foundation Social Action Fund (USA) and a member of the Finance and Audit Committee.



## GABI HOLLOWS AO

Gabi is the Founding Director and has served on the Board since its establishment. She graduated as an orthoptist in 1972 and travelled with Fred Hollows for three years on The Royal Australian College of Ophthalmologists National Trachoma and Eye Health Program. Gabi married Fred in 1980, and together they had five children. In 2013 Gabi was invested as an Officer in the Order of Australia and has been declared one of Australia's '100 Living National Treasures'. She also holds an Advance Australia Award (Community Service) and a Centenary Award from the Australian Government. In 2014, Gabi was awarded the Sir Edward 'Weary' Dunlop Asialink Medal for her work with The Foundation and in 2015 was awarded the inaugural Ryman Prize in New Zealand. In 2018, Gabi was awarded the John Yu Medal by The George Institute for Global Health for her contribution to preventable blindness in Australia and Asia. Gabi is the Patron of The Fred Hollows Foundation Regular Giving Program and undertakes extensive speaking engagements for The Foundation. She is a member of the Board's Governance and Nominations Committee, and Programs and Partnerships Committee.



## MICHAEL JOHNSON AM

Michael had a close relationship with Fred Hollows that continues with Gabi and he has been involved with The Foundation from its very beginning. He was one of the team that set up The Foundation and has been a member of the Board, with two short breaks since its establishment in 1992. Michael stepped down from the main Board in 2016 but continued as a Director of FHF Hong Kong and FHF Kenya as well as serving as a member of the Board's Governance and Nominations Committee, all responsibilities that he continues after he returned to The Foundation Board as a member in 2018. Michael is an Honorary Associate Professor in the School of Social Sciences at UNSW. He has had extensive experience as a professional economist, educator, researcher as well as engagement in the practical work of delivering development programs. He currently teaches a Masters course on international aid at UNSW as well as giving occasional lectures in development studies and economics. He is also an editor of the research and policy journal, the Economic and Labour Relations Review. In 2015, Michael was invested as a Member of the Order of Australia (AM) for significant service to the blind and those with low vision, to education, and to the community.



## DR JAMIE LA NAUZE

Jamie joined the Board in 2010, but his association with The Foundation goes back to its earliest days when he was part of the inaugural Medical Directorate developing surgical skills through workshops in Vietnam, Cambodia and China. Jamie trained as an ophthalmic surgeon in Melbourne and Cambridge (UK), and holds a Masters in Clinical Epidemiology. Jamie is a Fellow of the Royal Australian and New Zealand College of Ophthalmologists, has written numerous papers on eye health, and contributed to a book on The Foundation's work. Jamie is a member of the Board's Governance and Nominations Committee and Programs and Partnerships Committee.



## GRAHAM SKEATES

Graham has been involved with The Foundation since its inception and joined the Board as Treasurer in 2010 – a position he held until mid-2013 when this office was removed from the Constitution. He remains Chair of the Board's Finance and Audit Committee and is also a Director of The Fred Hollows Foundation (HK) Limited. Graham has 40 years' experience in the accounting profession and the financial services industry and was previously Group Chief Accountant for AMP and the Regional Finance Director for the Asian operations of Prudential Insurance UK. Graham helped launch the Financial Services Accountants Association of Australia and was its inaugural president.



## PROFESSOR PAUL TORZILLO AM

Paul joined the Board in 2012 bringing over 30 years' experience in Aboriginal and international health. He is Medical Director of the Nganampa Health Council in South Australia, and Head of Respiratory Medicine and a senior intensive care physician at the Royal Prince Alfred (RPA) Hospital in Sydney. Paul also acts as RPA's Executive Clinical Director, is Clinical Professor of Medicine at the University of Sydney and Clinical Director of critical care services for the Sydney Local Area Health District. He has worked for the World Health Organization (WHO) as a consultant in child health, particularly in the area of the Integrated Management of Childhood Illness (IMCI) program. Paul is a member of the Board's Programs and Partnerships Committee.

# STATEMENT OF COMPREHENSIVE INCOME

For the year ended 31 December 2018

	2018 \$000	2017 \$000
<b>REVENUE</b>		
<b>Community and Corporate Support</b>		
- Donations and gifts	50,170	49,438
- Legacies and bequests	15,121	17,348
<b>Grants</b>		
- Department of Foreign Affairs and Trade (DFAT)	7,716	5,778
- Other Australian Government departments	17	515
- Other overseas	16,070	11,276
<b>Net Gains/Losses on Investments at Fair Value</b>		
- Other income	(172)	(878)
<b>Total Revenue</b>	<b>89,574</b>	<b>84,931</b>
<b>EXPENDITURE</b>		
<b>INTERNATIONAL AID &amp; DEVELOPMENT PROGRAMS EXPENDITURE</b>		
<b>International Programs</b>		
- Funds to international programs	41,261	40,321
- Program support costs	11,330	10,556
<b>Community Education</b>	6,784	6,563
<b>Fundraising Costs</b>		
- Public	16,104	14,663
- Government, multilateral & private	162	148
<b>Accountability &amp; Administration</b>	5,616	5,070
<b>Total International Aid &amp; Development Programs Expenditure</b>	<b>81,257</b>	<b>77,321</b>
<b>DOMESTIC AID &amp; DEVELOPMENT PROGRAMS EXPENDITURE</b>		
<b>Domestic Programs</b>	6,496	6,357
<b>Community Education</b>	838	820
<b>Fundraising Costs</b>	2,009	1,851
<b>Accountability &amp; Administration</b>	692	633
<b>Total Domestic Aid &amp; Development Programs Expenditure</b>	<b>10,035</b>	<b>9,661</b>
<b>Total Expenditure</b>	<b>91,292</b>	<b>86,982</b>
<b>Net surplus (deficit) of income over expenditure</b>	<b>(1,718)</b>	<b>(2,051)</b>
Share of Loss of Associate	(63)	-
Other comprehensive income	-	-
<b>Total Comprehensive income (deficit) for the period</b>	<b>(1,781)</b>	<b>(2,051)</b>

\* During the financial years 2018 and 2017, The Fred Hollows Foundation had no transactions for international political or religious proselytisation programs.

\* No non-monetary donations or gifts were recorded during 2018 and 2017.

\* The Group's consolidated accounts are presented in Australian dollars and are rounded to the nearest thousand.

# STATEMENT OF FINANCIAL POSITION

As at 31 December 2018

	2018 \$000	2017 \$000
<b>ASSETS</b>		
<b>Current Assets</b>		
- Cash and cash equivalents	3,935	5,414
- Other interest bearing deposits	317	317
- Trade and other receivables	9,451	6,400
- Loan receivable current	171	54
- Prepayments	1,069	965
<b>Total Current Assets</b>	<b>14,943</b>	<b>13,150</b>
<b>Non Current Assets</b>		
- Investments at fair value	9,752	13,639
- Investments in an associate	1,467	1,530
- Loans receivable non-current	366	556
- Property, plant and equipment	1,921	1,839
- Intangible software	4,223	2,706
<b>Total Non Current Assets</b>	<b>17,729</b>	<b>20,270</b>
<b>Total Assets</b>	<b>32,672</b>	<b>33,420</b>
<b>LIABILITIES</b>		
<b>Current Liabilities</b>		
- Trade and other payables	3,922	5,314
- Deferred grants	8,271	8,766
- Borrowings	812	-
- Provisions	1,939	1,609
<b>Total Current Liabilities</b>	<b>14,944</b>	<b>15,689</b>
<b>Non Current Liabilities</b>		
- Provisions	337	358
- Deferred liability	286	389
- Borrowings	1,902	-
<b>Total Non Current Liabilities</b>	<b>2,525</b>	<b>747</b>
<b>Total Liabilities</b>	<b>17,469</b>	<b>16,436</b>
<b>Net Assets</b>	<b>15,203</b>	<b>16,984</b>
<b>EQUITY</b>		
Accumulated Surplus	1,403	4,561
Contingency Reserve	13,800	12,423
<b>Total Equity</b>	<b>15,203</b>	<b>16,984</b>

\* At the end of the financial years 2018 and 2017 The Fred Hollows Foundation had Nil balances for Current Assets Inventories, Assets held for sale and Other financial assets, for Non Current Assets Trade and other receivables, Investment property, Intangibles and Other non-current assets, for Current Liabilities Net current tax liabilities, Other financial liabilities and Other, for Non Current Liabilities Other financial liabilities and Other. The Foundation had Nil balances for other Reserves at the end of the 2018 and 2017 financial years.

\* Intangible Software Assets and Deferred Grants for previous year have been reclassified for consistency.

# STATEMENT OF CHANGES IN EQUITY

For the year ended 31 December 2018

	ACCUMULATED FUNDS \$000	CONTINGENCY RESERVE \$000	TOTAL \$000
Balance at 1 January 2017	7,617	11,418	19,035
Movements in contingency reserves	(1,005)	1,005	-
Surplus (deficit) for the year	(2,051)	-	(2,051)
<b>As at 31 December 2017</b>	<b>4,561</b>	<b>12,423</b>	<b>16,984</b>
Balance at 1 January 2018	4,561	12,423	16,984
Movements in contingency reserves	(1,377)	1,377	-
Surplus (deficit) for the year	(1,781)	-	(1,781)
<b>As at 31 December 2018</b>	<b>1,403</b>	<b>13,800</b>	<b>15,203</b>

## Table of Cash Movements for Designated Purpose

No single appeal or other form of fundraising for a designated purpose generated 10% or more of total income for the year ended 31 December 2018.

# 2018 FINANCIAL OVERVIEW

All figures in Australian dollars

WHERE THE MONEY CAME FROM	\$000	SOURCE OF INCOME
<ul style="list-style-type: none"> <li>Community and Corporate Support</li> </ul> Income received from the public and corporations, in the form of public donations, project grants, fundraising and bequests	65,831	
<ul style="list-style-type: none"> <li>Department of Foreign Affairs and Trade (DFAT)</li> </ul> Grants received from the Australian Government's overseas aid program	7,716	
<ul style="list-style-type: none"> <li>Other Australian Government Departments and Agencies</li> </ul> Grants received from other Government Departments for Indigenous programs	17	
<ul style="list-style-type: none"> <li>Other Overseas Grants</li> </ul> Grants received from Governments, Trusts & Foundations for international programs	16,070	
<ul style="list-style-type: none"> <li>Net Gains/(losses) on investments at fair value</li> </ul>	112	
<ul style="list-style-type: none"> <li>Other Income</li> </ul>	(172)	
<b>Total</b>	<b>89,574</b>	

The Fred Hollows Foundation is in a sound financial position to pay its debts as and when they become due and payable. The maintenance of a contingency reserve protects The Foundation from future unforeseen events to meet contractual, legal and ethical obligations to partners, suppliers of good and services and staff. The launch of the 2019-2023 Strategic will continue and enhance the historic work and set The Foundation in a stronger financial position to deliver more impact to our beneficiaries.

HOW THE MONEY WAS SPENT	\$000	\$000	RATIO OF EXPENSES
<ul style="list-style-type: none"> <li>Programs &amp; Community Education</li> </ul> - Africa - South East Asia - South Asia - Pacific Region - Middle East - Indigenous Australia - Community Education		66,709	
<ul style="list-style-type: none"> <li>Fundraising Expenses</li> </ul> Public & government/multilateral fundraising		18,275	
<ul style="list-style-type: none"> <li>Operating Expenses</li> </ul> Accountability and administration		6,308	
<b>Total</b>		<b>91,292</b>	

WHERE THE PROGRAM MONEY WAS SPENT	\$000
Africa	26,859
South East Asia	12,542
South Asia	10,118
Indigenous Australia	6,496
Pacific Region	2,168
Middle East	904
<b>Total</b>	<b>59,087</b>

"Programs" includes expenditure on our development work across both international and Indigenous programs, as well as a small amount of expenditure on emergency relief.

"Community Education" includes staff time and outlays involved in providing community information and raising awareness around eye and Indigenous health issues as well as broader international development issues.

"Fundraising Expenses" are the costs associated with attracting more support through donations and sponsorships, and includes items such as advertising, mail-outs, the toll-free phone line and processing of donations.

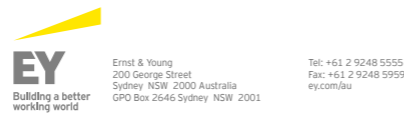
"Operating Expenses" covers the administrative and other costs inherent in running an organisation, including staff time in areas such as finance, human resources, information technology and administration, insurance premiums, legal and professional fees, office supplies and other running costs.

**An independent audit of The Fred Hollows Foundation's financial accounts for 2018 was conducted by:**

**Kieren Cummings** (*Partner*)  
**Ernst and Young**  
 200 George Street,  
 Sydney NSW 2000  
 + 61 2 9248 5555

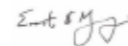
The Summary Financial Reports have been prepared in accordance with the requirements set out in the ACFID Code of Conduct. For further information on the Code please refer to the ACFID Code of Conduct Implementation Guidance available at [www.acfid.asn.au](http://www.acfid.asn.au).


The full Financial Report can be obtained at [www.hollows.org/au/annual-reports](http://www.hollows.org/au/annual-reports)



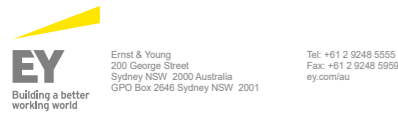
**Auditor's Independence Declaration to the Directors of The Fred Hollows Foundation**

In relation to our audit of the financial report of The Fred Hollows Foundation for the financial year ended 31 December 2018, and in accordance with the requirements of Subdivision 60-C of the *Australian Charities and Not-for profits Commission Act 2012* to the best of my knowledge and belief, there have been no contraventions of the auditor independence requirements of any applicable code of professional conduct.

  
 Ernst & Young

  
 Kieren Cummings  
 Partner  
 Sydney  
 28 March 2019

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**Independent Auditor's Report to the Directors of The Fred Hollows Foundation**

**Opinion**

We have audited the extraction of the attached Annual Report Information of The Fred Hollows Foundation which comprises the statement of financial position as at 31 December 2018 and the statement of comprehensive income and statement of changes in equity for the year then ended ("the Summary"). The financial information contained in the Summary has been extracted from the Financial Report of The Fred Hollows Foundation for the year ended 31 December 2018, upon which we expressed an unmodified audit opinion.

In our opinion, in all material respects, the Summary of The Fred Hollows Foundation is properly extracted from the audited financial report of The Fred Hollows Foundation for the financial year ended 31 December 2018.

**Emphasis of Matter - Basis of Accounting**

The Summary is prepared to assist the directors of The Fred Hollows Foundation to meet the requirements of the Australian Council for International Development (ACFID) Code of Conduct. The summary has been extracted from the audited financial report of The Fred Hollows Foundation for the financial year ended 31 December 2018 which was prepared in accordance with *Australian Charities and Not-for profits Commission Act 2012*. Reading the Summary and the auditor's report thereon is not a substitute for reading the audited financial report and the auditor's report thereon. Our opinion is not modified in respect of this matter.

**The Responsibility of the Directors for the Summary**

The directors of The Fred Hollows Foundation are responsible for the preparation of the Summary and for such internal controls as the directors determine are necessary to enable the preparation of the Summary that is free from material misstatement, whether due to fraud or error.

**The Audited Financial Report and Our Report Thereon**

Our audit of the financial report of The Fred Hollows Foundation was conducted in accordance with Australian Auditing Standards in order to provide reasonable assurance as to whether the financial report was free from material misstatement. The nature of an audit is influenced by factors such as the use of professional judgement, selective testing, the inherent limitations of internal controls and the availability of persuasive rather than conclusive evidence. Therefore, an audit cannot guarantee that all material misstatements have been detected. For a better understanding of the scope of our audit of the financial report of The Fred Hollows Foundation, this opinion should be read in conjunction with our audit opinion on The Fred Hollows Foundation's financial report for the year ended 31 December 2018. We have not performed audit procedures subsequent to the issuing of our audit opinion on the financial report of The Fred Hollows Foundation.

**Auditor's Responsibility for the Summary**

In respect to our opinion on the attached Summary, we have undertaken procedures to form an opinion as to whether, in all material respects (where materiality is related to The Fred Hollows Foundation's financial report), the financial information has been properly extracted from the audited financial report of The Fred Hollows Foundation discussed above.

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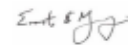


We conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance about whether the Summary has been extracted free from material misstatement.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

**Independence**

In conducting our audit we have met the independence requirements of Australian professional accounting bodies.

  
 Ernst & Young

  
 Kieren Cummings  
 Partner  
 Sydney  
 9 April 2019

# THANK YOU

## OUR SUPPORTERS

We would like to thank our supporters who share Fred's vision that every person has access to inexpensive and high-quality eye care, regardless of who they are and where they live. So many individuals, families, volunteers, corporations, workplaces and community organisations have kept Fred's vision alive this year. Our work in more than 25 countries around the world would not be possible without your generosity and support. Thank you for partnering with us to carry on Fred's dream of ending avoidable blindness.

### REGULAR GIVING

In 2018, another 18,785 Australians chose to join Fred's team and become regular givers supporting The Foundation's work to restore sight and transform lives. Your monthly gifts allow us to plan ahead and develop strategic and targeted programs to tackle avoidable blindness and give the gift of sight to more people every month. Thank you. We are hugely grateful that so many generous Australians continue to support our vital sight-saving work in this way. The results in this Annual Report demonstrate what we can achieve with your generous support.

### YOUR WILL - KEEPING FRED'S VISION ALIVE

To the families and friends of those who left a gift in their Will, and those who intend to, thank you. Fred always encouraged people to "leave the world a better place". A gift in your Will means you help his vision to live on. Over the years, The Foundation has been a grateful beneficiary of many gifts which have helped restore sight to millions of people in more than 25 countries. For more information, visit [www.hollows.org/bequests](http://www.hollows.org/bequests)

## OUR MAJOR SUPPORTERS 2018

- ACME Foundation
- APA
- Australia China Business Council
- Australian Business Council Dubai
- Australian New Zealand Association in UAE
- Bill and Eileen Doyle

- Blackwoods
- CMG International Charity Fund Ltd
- Cody Foundation
- Daniel Shanahan and June Summers
- DBM Consultants
- Etihad Airways
- Eureka Tower Owners Corporation
- Friends for Fred Canberra
- Geri and the late Jeff Underhill
- Goodman
- HSBC Bank Australia
- iChoice Home Loans
- IMC
- Ivan Halbert
- JB Hi-Fi
- Larsen Jewellery
- Laser Vision SA
- Melbourne Grammar School
- Nan Hai Culture and Media Australia
- Natural Resource Assessments
- Phil and Susan McDonald
- Robert C Bulley Charitable Fund
- Rotary Clubs of Australia
- ShineWing
- Specsavers Australia
- Suttons
- TechnologyOne
- The George Lewin Foundation
- The Kel and Rosie Day Foundation
- The late Lee Seidel
- The Miller Foundation
- The School for Excellence
- The Shine On Foundation
- Thick as Thieves - Mike Toner
- Unione Abruzzesi Melbourne
- Victoria International School of Sharjah
- Wild Women on Top
- World Nomads Group
- World on Wheels
- Yaru Water

"Things are so different now. We feel like real parents. I hope she will be a doctor. I'd like her to help other people who have eye problems similar to the one she once had."

— baby Shanice's parents William and Milly

"Every eye is an eye. When you are doing surgery there, that is just as important as if you were doing eye surgery on the Prime Minister or King."

— Fred Hollows

Photo: Michael Amendolia



**The Fred Hollows**  
Foundation