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

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
929,106

24.7M+ PEOPLE TREATED WITH ANTIBIOTICS FOR TRACHOMA
24,700,000

59,207 PEOPLE TRAINED INCLUDING SURGEONS, HEALTH WORKERS AND TEACHERS
59,207

666 MEDICAL FACILITIES BUILT, RENOVATED OR EQUIPPED
666

$4,466,240 WORTH OF EQUIPMENT AND INFRASTRUCTURE PROVIDED
4,466,240

2.4M+ SCHOOL CHILDREN AND COMMUNITY MEMBERS EDUCATED IN EYE HEALTH
2,400,000

“...that the world can be a better place.”
– Fred Hollows
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.

ABOUT US

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.
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, 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
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 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:

- 920,106 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.

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 groundbreaking 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.
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: Alknares Tat

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 1,466 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 19,548 cataract operations and 20 diabetic retinopathy treatments.

In Eritrea, we screened 153,400 people and performed 62,389 eye operations and treatments including 5,242 cataract operations and 1,287 surgeries to treat trachoma. We distributed 1,272 doses of antibiotics for trachoma and 9,109 pairs of glasses.

In Ethiopia, we screened 437,003 people and performed 38,521 eye operations and treatments including 1,004 cataract operations and 27,517 surgeries to treat trachoma. We distributed 23,431,357 doses of antibiotics for trachoma.

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

In Nepal, we screened 1,030,995 people and performed 160,118 eye operations and treatments including 60,987 cataract operations. We distributed 6,340 pairs of glasses.

In Pakistan, we screened 455,033 people and performed 12,532 eye operations and treatments including 8,075 cataract operations. We also distributed 10,630 pairs of glasses.

In Palestine, 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 10,630 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

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

— Fred Hollows

**OUR IMPACT**

- **59,207 PEOPLE TRAINED INCLUDING:**
  - 142 SURGEONS
  - 1,108 CLINIC SUPPORT STAFF
  - 48,035 COMMUNITY HEALTH WORKERS
  - 7,789 TEACHERS

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 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 Bangladesh, we trained 1,943 community health workers and educated 46,064 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 China, we trained 3,384 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 Eritrea, we trained 242 community health workers and educated 102,585 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 Indonesia, we trained 1,623 people including 179 clinic support staff, 457 community health workers and 985 teachers.

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 Lao PDR, we trained 1,951 people including two surgeons, 27 clinic support staff, 1,594 community health workers and 328 teachers. We also educated 32,011 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 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 Palestine, we educated 8,307 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 Rwanda, we trained 22 people including five surgeons and 17 clinic support staff. We also educated 5,000 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 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 89,318 school children and community members in eye health.

In Pakistan, we trained 6,633 people including eight surgeons, 5,741 community health workers and 878 teachers. We also educated 137,628 school children and community members in eye health.

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

**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 2,500 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.
“You have to impart skills and technology and help them help themselves. Leave the world a better place.”

— Fred Hollows

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.

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.
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

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.
**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, 314 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. This is part of a suite of tools developed by medical organisations, service providers and social care sectors to achieve high-quality care and promote change across the world.

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.

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**Case Study: Tackling Diabetic Retinopathy**

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 Sight savers 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.

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**Case Study: Vision for the Commonwealth**

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**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, save the country billions of dollars 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 its 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 video 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 eye 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.
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

**INDIGENOUS AUSTRALIA PROGRAM**

**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.
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.”

OUR IMPACT AT HOME

16,140 PEOPLE SCREENED IN REMOTE AND UNDERSERVICED COMMUNITIES

2,632 EYE OPERATIONS AND TREATMENTS

1,142 PAIRS OF GLASSES DISTRIBUTED

147 PEOPLE TRAINED

1,002 CATARACT OPERATIONS

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 underserviced 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.

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.

“\textquoteleft\textquoteleft I hope all Aboriginal children will grow up in an equal world.”\textquoteright\textquoteright\

– Fred Hollows
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

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: ETHIOPIA

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: 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.

CASE STUDY: HUMAN CENTRED DESIGN
THANK YOU

IMPLEMENTING PARTNERS

GLOBALLY Aina 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.


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, Barihal Medical College and Hospital, Nazam Hasina Foundation, Ipaath Branch hugely, Bangabandhu Sheikh Mujib Eye Hospital, Khulna BRNS Eye Hospital, Lachon Charitable Eye Hospital, Mohammad Khalique BRNS Eye Hospital, Bangladesh jaydo Andhul Kalyan Samity, Baktash Sharif, Paribar Kalayan 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 Chuy Chumneak, Kampong Choonang, Kampong Spui, Kampong Thom, Kandal, Neak Leung, Oddar Meanchey, Pailin and Preah Sihanouk provinces, Siem Reap Provincial Referral Hospital, Preah Vihear Referral Hospital, Kmrn Sovery Friendship Hospital, Pnom Penh Municipal Referral Hospital, Preah Ang Duong Hospital, The Eye Care Foundation, Ministry of Women Affairs.

CHINA China National Blinding Prevention Committee, National Institute of Hospital Administration of FMMPC, Provincial Disabled Persons’ Federation of Anhui, Provincial Blinding 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, Hubu County Hospital, Shawan County Hospital*, Provincial Blinding Prevention Committee of Guangxi, Guangxi Medical University Referral Hospital, People’s Hospital of Qibo County, Affiliated Hospital of Daizi University, People’s Hospital of Wenshan Prefecture, Binhuan County Hospital, Nanjian County Hospital, Yarsen County Hospital, Xingyang County Health Bureau, Huairuan County Health Bureau, County Hospital, Provincial Blinding Prevention Committee of Guangzhou, The First Affiliated Hospital of Guangzhou Medical University, Heping County Hospital, Xingyi County Hospital, Guangyang County Hospital.

ERITREA Asama 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 Bureau, Ambo Hospital, Shenen Gibe Hospital, Blvdian Hospital, Tulo Boko Hospital, Richa Hospital, Shambu Hospital, Jimma University Specialized Hospital, Areda Red Hospital, Adama Hospital, Goba Hospital, Shashamane Hospital, Olecheh I Hospital, Chiro Hospital, Oromia Television and Radio Organisation, FANA Broadcasting Corporate, Contax International, UNILEVER ETHIOPIA, the NALA Foundation, Zonal-Health Departments: Arsi Zone Health Department, Bale Zone Health Department, West Ars Zone Health Department.

Department, East Shewa Zone Health Department, West Shewa Zone Health Department, North Shewa Zone Health Department, South West Shewa Zone Health Department, Jima Zone Health Department, Buno Bedefe Zone Health Department, Iisubara Health Zone Department, Horo Guduru Wollega Zone Health Department, East Wollega, East Hararge, West Harargee Zone Health Department, Guli Zone Health Department, West Gji Zone Health Department and Oromia Special Zone Surrounding Finfinne (OSSF) Health Department.

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


LAO PDR Ministry of Health of Lao PDR, National Ophthalmology Centre, Eye Units and Provincial Departments of Health and Hospitals of Phoukhtoun, Bungsa, selvam, Liabung, Pakkabok, Nam and Da Nang.


PALESTINE St. John of Jerusalem Eye Hospital Group.


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, Ghûrû Eye Trust Teaching Hospital, Allied Hospital Jafarabad, Comprehensive Eye Care Cells of Balochistan, Khyber Pakhtunkhwa, Punjab and Sind, Laleen Rahmatullah Benevolent Trust, Pakistan Institute of Community Ophthalmology, provincial and district departments of Health of Punjab, Balochistan, Khyber Pakhtunkhwa and Sind, Provincial Departments of Education of Balochistan, Khyber Pakhtunkhwa, Punjab and Sind, National Program for Family Planning, Lahore General Hospital, Saidu Group of Teaching, Hospitals Swat, Laksin Medical Trust Swabi, Eastern Mediterranean Region Alliance for Trachoma Control, CBM Pakistan, SightSavers Pakistan, Waterdesk Pakistan.

RWANDA Ministry of Health, College of Medicine and Health Sciences, Rwanda International Institute of Ophthalmology, Rwanda Ophthalmology Society, Ruyigi Referral Hospital, Kagugire Referral Hospital, Samashe Primary Hospital, Namakura Primary Hospital, Mahugu Primary Hospital, Rainy Hospital, Kiriri Primary Hospital, Gitega Primary Hospital, Kigali Primary Hospital, Gashora Primary Hospital, Kigali Primary Hospital, Ruyigi Primary Hospital, City Hospital Kimbire, Regional Hospital Kibungo, Kigali Referral Hospital, Kigali Referral Hospital, Kigali Referral Hospital, Kigali Referral Hospital, Kigali Referral Hospital.

TIMOR-LESTE The Fred Hollows Foundation New Zealand, Timor Leste Ministry of Health, Guido Valadares National Hospital, Focolaro 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.

THANK YOU

THE FRED HOLLOWS FOUNDATION ANNUAL REPORT 2018 | HOLLows.ORG
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 lifelong 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.

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 Dabel

MANAGEMENT AND STAFF

At the end of 2018, The Foundation had 406 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; Jan Crall – 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 advisory business 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 (GHAM)
THE BOARD OF DIRECTORS

As of December 2018

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).

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.

CHRISTINE HAWKINS

Christine was elected to the Board in 2015 after a spell 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.

MICHAEL JOHNSON AM

Michael has had a close relationship with Fred Hollows for many years 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 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.

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.

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.

The full Directors’ Report for 2018 is available on The Foundation’s website www.hollows.org or upon request by emailing fred@hollows.org or phoning 02 8741 1900.
# Statement of Comprehensive Income

For the year ended 31 December 2018

<table>
<thead>
<tr>
<th>REVENUE</th>
<th>2018 $000</th>
<th>2017 $000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community and Corporate Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Donations and gifts</td>
<td>50,170</td>
<td>49,438</td>
</tr>
<tr>
<td>- Legacies and bequests</td>
<td>15,121</td>
<td>17,348</td>
</tr>
<tr>
<td>Grants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Department of Foreign Affairs and Trade (DFAT)</td>
<td>7,716</td>
<td>5,778</td>
</tr>
<tr>
<td>- Other Australian Government departments</td>
<td>17</td>
<td>515</td>
</tr>
<tr>
<td>Total Current Assets</td>
<td>14,943</td>
<td>13,150</td>
</tr>
<tr>
<td>Non Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Investments at fair value</td>
<td>9,752</td>
<td>13,639</td>
</tr>
<tr>
<td>- Investments in an associate</td>
<td>1,467</td>
<td>1,530</td>
</tr>
<tr>
<td>- Loans receivable non-current</td>
<td>366</td>
<td>556</td>
</tr>
<tr>
<td>- Property, plant and equipment</td>
<td>1,921</td>
<td>1,839</td>
</tr>
<tr>
<td>- Intangible software</td>
<td>4,223</td>
<td>2,706</td>
</tr>
<tr>
<td>Total Non Current Assets</td>
<td>17,729</td>
<td>20,270</td>
</tr>
<tr>
<td>Total Assets</td>
<td>32,672</td>
<td>33,420</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EXPENDITURE</th>
<th>2018 $000</th>
<th>2017 $000</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTERNATIONAL AID &amp; DEVELOPMENT PROGRAMS EXPENDITURE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>International Programs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Funds to international programs</td>
<td>41,261</td>
<td>40,321</td>
</tr>
<tr>
<td>- Program support costs</td>
<td>11,330</td>
<td>10,596</td>
</tr>
<tr>
<td>Community Education</td>
<td>6,784</td>
<td>6,563</td>
</tr>
<tr>
<td>Fundraising Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Public</td>
<td>16,104</td>
<td>14,663</td>
</tr>
<tr>
<td>- Government, multilateral &amp; private</td>
<td>162</td>
<td>148</td>
</tr>
<tr>
<td>Accountability &amp; Administration</td>
<td>5,616</td>
<td>5,070</td>
</tr>
<tr>
<td>Total International Aid &amp; Development Programs Expenditure</td>
<td>81,257</td>
<td>77,321</td>
</tr>
<tr>
<td>DOMESTIC AID &amp; DEVELOPMENT PROGRAMS EXPENDITURE</td>
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<td></td>
</tr>
<tr>
<td>Domestic Programs</td>
<td>6,496</td>
<td>6,357</td>
</tr>
<tr>
<td>Community Education</td>
<td>838</td>
<td>820</td>
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<tr>
<td>Fundraising Costs</td>
<td>2,009</td>
<td>1,851</td>
</tr>
<tr>
<td>Accountability &amp; Administration</td>
<td>692</td>
<td>633</td>
</tr>
<tr>
<td>Total Domestic Aid &amp; Development Programs Expenditure</td>
<td>10,035</td>
<td>9,661</td>
</tr>
<tr>
<td>Total Expenditure</td>
<td>91,292</td>
<td>86,982</td>
</tr>
</tbody>
</table>

Net surplus (deficit) of income over expenditure | (1,718) | (2,051) |

Share of Loss of Associate | (63) | - |

Other comprehensive income | - | - |

Total Comprehensive income (deficit) for the period | (1,781) | (2,051) |

# Statement of Financial Position

As at 31 December 2018

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>2018 $000</th>
<th>2017 $000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Cash and cash equivalents</td>
<td>3,935</td>
<td>5,414</td>
</tr>
<tr>
<td>- Other interest bearing deposits</td>
<td>317</td>
<td>317</td>
</tr>
<tr>
<td>- Trade and other receivables</td>
<td>9,431</td>
<td>6,400</td>
</tr>
<tr>
<td>- Loan receivable current</td>
<td>171</td>
<td>54</td>
</tr>
<tr>
<td>- Prepayments</td>
<td>1,069</td>
<td>985</td>
</tr>
<tr>
<td>Total Current Assets</td>
<td>14,943</td>
<td>13,150</td>
</tr>
<tr>
<td>Non Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Investments at fair value</td>
<td>9,752</td>
<td>13,639</td>
</tr>
<tr>
<td>- Investments in an associate</td>
<td>1,467</td>
<td>1,530</td>
</tr>
<tr>
<td>- Loans receivable non-current</td>
<td>366</td>
<td>556</td>
</tr>
<tr>
<td>- Property, plant and equipment</td>
<td>1,921</td>
<td>1,839</td>
</tr>
<tr>
<td>- Intangible software</td>
<td>4,223</td>
<td>2,706</td>
</tr>
<tr>
<td>Total Non Current Assets</td>
<td>17,729</td>
<td>20,270</td>
</tr>
<tr>
<td>Total Assets</td>
<td>32,672</td>
<td>33,420</td>
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</table>

<table>
<thead>
<tr>
<th>LIABILITIES</th>
<th>2018 $000</th>
<th>2017 $000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Trade and other payables</td>
<td>3,922</td>
<td>5,314</td>
</tr>
<tr>
<td>- Deferred grants</td>
<td>8,271</td>
<td>8,766</td>
</tr>
<tr>
<td>- Borrowings</td>
<td>1,939</td>
<td>1,609</td>
</tr>
<tr>
<td>- Provisions</td>
<td>2,525</td>
<td>747</td>
</tr>
<tr>
<td>Total Current Liabilities</td>
<td>14,944</td>
<td>15,689</td>
</tr>
<tr>
<td>Non Current Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Provisions</td>
<td>337</td>
<td>358</td>
</tr>
<tr>
<td>- Deferred liability</td>
<td>286</td>
<td>389</td>
</tr>
<tr>
<td>- Borrowings</td>
<td>1,902</td>
<td>-</td>
</tr>
<tr>
<td>Total Non Current Liabilities</td>
<td>2,525</td>
<td>747</td>
</tr>
<tr>
<td>Total Liabilities</td>
<td>17,469</td>
<td>16,436</td>
</tr>
</tbody>
</table>

Net Assets | 15,203 | 16,984 |

<table>
<thead>
<tr>
<th>EQUITY</th>
<th>2018 $000</th>
<th>2017 $000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accumulated Surplus</td>
<td>1,403</td>
<td>4,561</td>
</tr>
<tr>
<td>Contingency Reserve</td>
<td>13,800</td>
<td>12,423</td>
</tr>
<tr>
<td>Total Equity</td>
<td>15,203</td>
<td>16,984</td>
</tr>
</tbody>
</table>

* During the financial years 2018 and 2017, The Fred Hollows Foundation had no transactions for international political or religious proselytisation programs.
* Donations and gifts are recorded when received during 2018 and 2017.
* The Group’s consolidated accounts are presented in Australian dollars and are rounded to the nearest thousand.
* The Group’s consolidated accounts are presented in Australian dollars and are rounded to the nearest thousand.
* During the financial years 2018 and 2017, The Fred Hollows Foundation had no transactions for international political or religious proselytisation programs.
Where the money came from $000

Source of Income

- Community and Corporate Support 65,831
- Department of Foreign Affairs and Trade (DFAT) 7,716
- Other Australian Government Departments and Agencies 17
- Other Overseas Grants 16,070
- Net Gains/(losses) on investments at fair value 112
- Other Income 172

Total 89,574

How the money was spent $000 $000 Ratio of expenses

- Programs & Community Education
  - Africa 26,859
  - South East Asia 12,542
  - South Asia 10,118
  - Pacific Region 2,168
  - Middle East 904
  - Indigenous Australia 6,496
  - Community Education 7,622
- Fundraising Expenses 18,275
- Operating Expenses 6,308

Total 91,292

Where the program money was spent

Africa 26,859
South East Asia 12,542
South Asia 10,118
Indigenous Australia 6,496
Pacific Region 2,168
Middle East 904

Total 59,087

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

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)

As at 31 December 2017

4,561 12,423 16,984

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)

As at 31 December 2018

1,403 13,800 15,203

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 goods 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.

For the year ended 31 December 2018

Statement of Changes in Equity

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)

As at 31 December 2017

4,561 12,423 16,984

Balance at 1 January 2018

4,561 12,423 16,984

Movements in contingency reserves

(1,377) 1,377 -

Surplus (deficit) for the year

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As at 31 December 2018

1,403 13,800 15,203

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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 ACIFD Code of Conduct. For further information on the Code please refer to the ACIFD Code of Conduct Implementation Guidance available at www.acifd.asn.au.

The full Financial Report can be obtained at www.hollows.org.au/annual-reports

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.au/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
“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