The Fred Hollows Foundation

2024-2028 STRATEGY
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EXECUTIVE SUMMARY

The burden of avoidable blindness and vision loss is increasing globally. The Fred Hollows Foundation aims to contribute to a significant reduction in this by increasing eye care services in countries where The Foundation operates. It will do this by addressing key barriers in eye health, raising awareness of the development benefits of improving eye health, and by embedding actions to enhance eye health and care in policies and practices at the global, regional, and country level to ensure that services are available to those most in need.

The central challenge is that overall need is increasing faster than the best efforts of the eye health sector. Whilst progress has been made to lower the prevalence of blindness, the incidence of disease is increasing. The number of people with severe vision impairment and blindness is predicted to double by 2050, to an estimated 17 billion people and more than 55% of these are women and girls. This increase is driven by population growth and ageing populations in Low-and-Middle-Income Countries (LMICs), and changes in lifestyles that increase specific eye conditions.

Opportunities for tackling this need are already available in current and emerging practice. Cost-effective solutions exist for the most common causes of blindness and vision impairment. Service capacity can be increased through investment in workforce, equipment and facilities. Sustainability is possible when eye health is built into national health policies and practices which also address the issues of access, equity, and inclusion.

The transformative approach underpinning this strategy requires these areas to be considered as a whole, to identify the root causes of the key barriers to eye health and how these areas interplay to ensure eye health services are available to those who need them.

The Foundation will seek to tackle key barriers by raising awareness of the development benefits of improving eye health, and progressing improvements in eye health practices and policies at the global, regional, and country level.

As an International Non-Government Organisation (INGO) The Foundation can be a catalyst, but national government investment is critical to scaling eye health solutions. Opportunities exist to proactively engage with governments on the economic and development benefits of investments in eye health, drawing on research which demonstrates the high return on investment and a positive impact on multiple Sustainable Development Goals (SDGs).

In the face of this challenge, The Foundation continues to seek “A world in which no person is needlessly blind or vision impaired.” This will require supplementing past achievements with new responses that tackle the fundamental issue of how to sustainably scale eye health systems. This is reflected in The Foundation’s purpose: “To deliver bold eye health solutions that transform lives”, which highlights the potential life changing nature of improvement in sight.

This purpose emphasises comprehensive eye health system solutions that benefit people. A stronger systems-change approach at national and global level can generate the broad and sustained transformation required.

Three interrelated high-level goals will deliver on the purpose and meet the key challenge of scaling sustainable eye health systems. The first goal is to Strengthen Integrated People Centred Eye Care (IPEC) to protect and restore sight to those most in need. The Foundation will work with partners to apply IPEC best practice, leading to increases in coverage and service. It will champion IPEC’s call for integration across
health and into other sectors, including education and industry, which will enable greater progress on prevention, screening, and treatment. It will stress the need to be people centred through services to better engage people and communities and to make eye health available at the primary health care level. Equitable access will be improved by focusing on places where there is the greatest gap between access and unmet need.

The second goal is to advance transformative solutions that address key eye health challenges. Removing barriers, finding efficiencies, increasing quality, eliminating challenges can create transformative change in eye health systems. Digital health and eye health data for example drive increases in efficiency, productivity, and better insights. Eliminating trachoma in the countries where The Foundation works will simplify the eye health challenge.

The third goal aims to tackle the challenge of scale by elevating eye health as a social, economic and development issue to unlock political will and resourcing. The Foundation will make the case in health and other sectors that eye health is a social, economic, and development issue. It will promote the case for resourcing by providing evidence from its program experience, and investment case. It will encourage stronger planning and governance around resources, multi-sectoral systemic action, and a focus on the barriers that women and girls face in eye health.

Scaling sustainable solutions will vary between countries and local contexts. The Foundation has Global Principles which enable the global strategy to be tailored and applied by countries in a way that best suits the local context.

The Foundation’s Theory of Change (ToC) guides the practical implementation of the strategy. It outlines the actions and investments The Foundation makes, what is achieved with and through partnership, and how collective action leads to changes to systems and improvements in eye care delivery ultimately to the benefit of individuals and communities. Guided by the ToC, The Foundation will complement its strong output and outcomes measurement with a sophisticated assessment of impact for individuals, systems and communities. In addition, The Foundation will assess its contribution against the Sustainable Development Goals.

Four organisational enablers addressing resources, people, partners, and operations support this strategy. To finance the anticipated scale of programming The Foundation will increase resourcing from existing and new donors using a diverse mixture of funding options. Recognising that its people are critical to delivering The Foundation’s ambition, it will empower their efforts through the employee value proposition, positive culture, faster capability development, and dynamic learning. To support the strategy The Foundation will reorient its partnership approach toward greater codesign, localisation, collaboration, and learning. Finally, operations and governance will be strengthened to maximise effectiveness and efficiency and to support growth, agility, and insight.

This strategy is an ambitious and exciting agenda for eye health. It represents a significant step change for The Foundation to be so comprehensively and consistently seeking change at global, national and systems level in addition to its significant contributions at project and partner level. Increasingly, the whole eye health sector is realising that all agencies have a part to play in this higher-level change. The Foundation will take a leadership role across the eye health sector through the International Agency for Prevention of Blindness (IAPB), in official relations with WHO and other UN agencies, with governments, and with peer agencies to encourage collective effort for system level change.

Founding Director Gabi Hollows at Cẩm Phúc Primary School in Vietnam’s Hải Dương province, where students are learning about eye health.
OUR VISION: A world in which no person is needlessly blind or vision impaired

OUR PURPOSE: Deliver bold eye health solutions that transform lives

GOALS

- Strengthen integrated people-centred eye care to protect and restore sight to those most in need
  - Training, equipping and mobilising eye care teams to scale up treatment
  - Secure political commitment to plan, fund and deliver eye care
  - Build resilient and coordinated eye care services and facilities
  - Improve quality outcomes for eye care
  - Increase access to and use of eye care, particularly in marginalised communities
  - Adapt to and mitigate the impacts of climate change

- Advance transformative solutions that address key eye health challenges
  - Improve workforce coverage and quality
  - Enrich eye health data availability, quality and use
  - Eliminate Trachoma
  - Optimise the supply chain and reduce environmental and other costs of eye care consumables and equipment
  - Harness digital and enabling technologies to address priority eye health challenges

- Elevate eye health as a social, economic and development issue that unlocks political will and resourcing
  - Build and promote the investment case for eye health action
  - Unlock funding and resourcing
  - Foster multi-sectoral systemic action for eye health
  - Promote accountability and good governance of eye health
  - Overcoming barriers for women and girls in accessing eye health

OBJECTIVES

- Inspire our supporters and unlock resources from around the world
- Invest in and empower our people
- Work with and for our partners
- Optimise our delivery through effective and efficient operations

ENABLERS

- Integrity
- Collaboration
- Action
- Resourceful
- Empowerment

PEOPLE AND PARTNERS

- Create sustainable change around the world for people at greatest risk of being left behind
- Work with Aboriginal and Torres Strait Islander Peoples in Australia so they can always exercise their right to sight, good health and self-determination
- Work with partners to deliver locally-led, quality, cost-effective solutions

VALUES

- Inspire our supporters and unlock resources from around the world
- Invest in and empower our people
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- Optimise our delivery through effective and efficient operations

THE FRED HOLLOWS FOUNDATION 2024-2028 STRATEGY
EYE HEALTH
CONTEXT

11 billion people around the world are living with the consequences of blindness and vision loss because they do not have access to eye care services. These are some of the poorest and most marginalised people in society. Without change, this will rise to 17 billion people by 2050. The eye health sector has successfully lowered the prevalence of blindness from 4.8% to 3.1% over 30 years, yet blindness is still predicted to grow from 43 million in 2020 to 61 million by 2050.

The reasons for this challenging situation are complex. The world population continues to grow and at the same time the world population is ageing. This is causing the volume of need to rise faster than growth in eye health services. The majority of this is happening in LMICS where health systems are often under-resourced and stretched. Even when basic services are created, more marginalised groups such as women and girls, older people, people with disabilities and Indigenous peoples have trouble accessing services.

Lifestyle changes are also causing an increase in non-communicable diseases that impact vision (diabetes, hypertension, myopia).

Not meeting the needs of people with vision impairment has wide-reaching consequences on the lives of people and their communities. Children with early onset severe impairment can experience delayed motor, language, emotional, social, and cognitive development. This means they are often left behind at school, limiting their educational opportunities, and future job prospects. Adults with vision impairment can have lower quality of life, lower rates of workforce participation and productivity, and higher rates of depression and anxiety.

Blindness and vision impairment present not only an enormous personal cost but also an enormous financial burden on the global economy, with an estimated annual GDP productivity loss of US$411 billion purchasing power parity. Failing to reduce or prevent vision loss or to develop strategies to help visually impaired people is forgoing significant productivity gains. The losses far outweigh the estimated one-off investment cost of US$24.8 billion required to increase eye health workforce and infrastructure.

Unfortunately, despite the opportunity that eye health presents, it is often marginalised within health services because it is not perceived as a life-threatening condition. This results in it being underfunded in government budgets and a low priority for Official Development Assistance (ODA) donors.

Blindness and vision impairment cost the global economy an estimated annual GDP productivity loss of US$411 billion purchasing power parity.

Ho Thi Thu, 76, from Vietnam gets her eyes checked at a clinic organised by The Fred Hollows Foundation, Quang Nam Eye Hospital and the Association of Older People.

“Vision loss has stolen my social life from me,” she said.
Despite the current adverse trajectory, lessons from the past three decades demonstrate that the overall challenge can be met. There are current and emerging opportunities that can be pursued to bring about significant change. Foremost is that for 9 out of 10 people, their blindness or vision loss is preventable or treatable with existing, cost-effective solutions. And that tenth person living with an unavoidable condition can continue to reach their full potential and remain connected to their communities through vision rehabilitation, assistive technology, and an enabling social and physical environment. This means that the challenge can be met, medically and technically, with the right investment and scaling of services.

Importantly, strategies for making sustainable improvements in eye health systems are better understood than ever before, having evolved over 30 years. Historically, eye health NGOs have concentrated on core input interventions like training ophthalmologists, equipping hospitals, and treating lists of patients, all of which are critical. When adequate resources are available though, these experiences have been drawn on to scale up services across each country. This involves working closely with Ministries of Health (MOH) as equal partners on system level changes.

Implementation of IPEC will also address many of the challenges to delivering effective eye care services even in established services. It will reorient the mode of care towards primary care as the key entry point, engage people and communities, coordinate services within and across sectors, and create an enabling environment.

Performance of eye health systems can be improved through innovation and change. This will come from the use of technology, artificial intelligence, process change, task shifting, or data and digital improvements. Many of these have the potential to bring about transformative improvements that are not just incremental but actually multiply change.

Drawing on the recent evidence from research, there are opportunities to engage governments and donors on the value of eye health investments. Investments in eye care represent a sound return, especially for resource constrained countries. Proven eye care interventions, such as cataract surgery and glasses have a high Return on Investment (ROI). Taken together, investment in the two leading causes of blindness and vision impairment (cataract and refractive error) on average return US$9.40 for each dollar spent.

Eye health must be repositioned as a social, economic and development issue to unlock political will and resourcing. Eye health should not be thought of as a less critical health issue when its economic benefits for people and development are clear. Restoring sight and improving vision is also gender transformative when attention is paid to appropriate access by women and girls. Increasing advocacy around these benefits will help governments see the strong case for increasing resources to eye health.
OUR VISION AND PURPOSE

VISION

A WORLD IN WHICH NO PERSON IS NEEDLESSLY BLIND OR VISION IMPAIRED.

The Foundation’s vision is consistent with the legacy of its founder, Professor Fred Hollows, and his belief that everyone should have access to high quality, affordable eye care, no matter where they live. His specific interest that poorer and more marginalised people all over the world be reached remains a core focus.

The Foundation continues to focus on assisting the 9 out of 10 people whose blindness or vision loss is preventable or treatable. Under this eye health vision however, in line with IPEC, The Foundation will be active in the full continuum of vision care. This means that The Foundation will go beyond simply providing referrals for the 1 in 10 people who are permanently blind and make contributions that strengthen vision rehabilitation and assistive technologies for blind people within clinical settings. In this way, The Foundation will ensure a comprehensive and holistic approach for all individuals impacted by eye health issues throughout their life.

PURPOSE

TO DELIVER BOLD EYE HEALTH SOLUTIONS THAT TRANSFORM LIVES.

The Foundation’s new, concise purpose will drive progress towards the vision. This purpose calls on The Foundation to be bold and transformative, and to bring about comprehensive eye health solutions that transform lives.

Boldness is required to do things differently and to do them to scale. More effort is needed at a national level to make system-altering change. This will require strengthening advocacy and influence skills, greater use of collective leadership, and a strong focus on the major barriers to eye health such as critical health workforce shortages, quality issues, and the lack of eye health data.

The purpose puts the focus squarely on sustainable eye health solutions. Simply funding more projects that treat additional patients will not suffice. Every project must have a wider system change purpose such as demonstrating a model, providing research, or applying an innovation. There must be change at the national system level across eye health, health, and other development sectors for sustainable solutions to take hold.

The Foundation will better assess its development impact through a better understanding of how lives have been transformed. Eye health NGOs such as The Foundation traditionally measure their outputs (such as the number of people whose sight has been restored) with an implicit assumption that restoring sight is beneficial. There is evidence that good vision leads to better health and wellbeing. There is also evidence that it unlocks better educational outcomes, creates better employment prospects, increases productivity at work and promotes greater gender equity. In this strategy, The Foundation will increase research evidence and stakeholder appreciation of these longer-term impacts of sight restoration and vision improvement on the full range of SDGs.

Nasrin Akter, a maternal child health worker from Bangladesh, runs satellite clinics, educating women and children about eye health.

“I feel very proud because I tell them how to get help,” she said.
GOALS AND OBJECTIVES

Three interrelated goals with respective objectives underpin The Foundation’s Vision and Purpose. Together, these three goals provide a comprehensive approach to achieve the changes required.

The goals:
- Strengthen integrated people-centred eye care (IPEC) to protect and restore sight to those most in need.
- Advance transformative solutions that address key eye health challenges.
- Elevate eye health as a social, economic and development issue that unlocks political will and resourcing.

GOAL 1
STRENGTHEN INTEGRATED PEOPLE-CENTRED EYE CARE TO PROTECT AND RESTORE SIGHT TO THOSE MOST IN NEED

The World Health Organization’s more recent call for IPEC has the potential to address many of the challenges to delivering effective eye care services. Consequently, The Foundation will tackle the poor integration of eye health within and beyond the health system. It will address the need for eye care services to be organised according to health needs and expectations of people through the life course. It will further work across the continuum of care to deliver preventative interventions, early interventions, treatment and management of disease and the provision of clinical rehabilitation services.

OBJECTIVES:

A. Training, equipping and mobilising eye care teams to scale up treatment
   Effective coverage and distribution of complete eye care teams is required to meet growing service demand. Training will be strengthened across all levels and cadres, along with the development of research and evidence on the key health workforce challenges. Eye care training will be included in primary health care and integrated as appropriate into other sectors.

B. Secure political commitment to plan, fund and deliver eye care
   For eye health to become more affordable to patients, it must be sustainably and appropriately resourced and financed. The Foundation will build a strong evidence base and advocate for the inclusion of eye health into national health budgets and national health financing mechanisms, as well as build strong leadership capability to plan, implement and report on eye health.

C. Build resilient and coordinated eye care services and facilities
   Eye health needs to be effectively integrated and coordinated within levels of the health system, from primary through to tertiary, across other relevant development sectors, including public and private service providers. The Foundation will support and strengthen coordination and referral mechanisms. Where appropriate, facilities will be equipped, and partners supported to provide services.

D. Improve quality outcomes for eye care
   Across LMICs there are unfortunately significant differences in the quality of eye care received by patients. It is important that all clinical outcomes meet the minimum standards required for good visual outcomes. The Foundation will support partners with continuous quality improvement processes and standard operating procedures, advocate for regulations for the provision of eye health services and ensure that all partners have clear clinical governance, practice, controls, and regular reporting.

E. Increase access to and use of eye care, particularly in marginalised communities
   Engaging individuals and communities is critical to increasing both the awareness and the acceptability of eye health, as well as ensuring that services are responsive, inclusive and people centred. The Foundation adopts an intersectional approach to equity using GAPSED+12 and will seek to mainstream equity and inclusion to improve patient accessibility, while strengthening eye health training for women and delivering health promotion activities that encourage health seeking behaviours.

F. Adapt to and mitigate the impacts of climate change
   Climate change, pollution and environmental degradation present major threats to global eye health and delivery of eye health care, and risk undermining decades of progress in reducing the burden of avoidable blindness and vision impairment. Eye health services, including The Foundation’s own operations and programs, also have an impact on the environment by contributing to greenhouse gas emissions, consumption of resources, and production of clinical and other waste. The Foundation is committed to action that reduces the environmental impact of its work, and to building the resilience of eye care services by understanding and adapting its programs and operations to climate risks.

Nabiritha, 7, from Kenya was born with bilateral cataract. The Fred Hollows Foundation funded her surgery at Sabaria Eye Hospital.

“I want to go back to school so that I can learn how to read and write and see my friends,” she said.
GOAL 2
ADVANCE TRANSFORMATIVE SOLUTIONS THAT ADDRESS KEY EYE HEALTH CHALLENGES

Eye health delivery is constrained by big barriers and entrenched problems that have not historically been tackled effectively. This goal seeks to advance transformative solutions that will multiply services and impact. The Foundation will actively seek out and scale up solutions, this may include new tools and technologies, along with breakthroughs in business models, working with new partners and collaborators, and delivering more effective models of care.

OBJECTIVES:
A. Improve workforce coverage and quality
The availability, accessibility, acceptability and quality of a health workforce and the services they provide are critical to addressing the global eye health challenge. However, there are systemic and ongoing human resource challenges that include general shortages, maldistribution of workers, attrition, imbalances in skill composition and inadequate regulation. Through collective action and strategic partnerships, The Foundation will build models to increase integration, coverage, and distribution, including new and existing technology solutions for training, care tasks and processes so that complete eye care teams are available to collectively perform all tasks and meet the service demand at a single point of care.

B. Enrich eye health data availability, quality and use
Globally there is a severe lack of reliable eye health data available within information systems at all levels within the health system. This hampers the evidence-based planning of eye care programs and services and limits the prioritisation of eye health as a global health issue. The Foundation’s interventions will support partners with data collection and integration into health information systems. It will work with partners to leverage data to increase evidence-based decision making that will improve the efficiency and allocation of eye health services. The Foundation will influence the development of standard tools, guidance and reporting, advocate for reforms to eye health data capture, improve the use and analysis of data in Health Management Information Systems and pilot new approaches for cost-effective, real-time collection of data.

C. Eliminate trachoma
The Foundation is actively engaged in efforts to eliminate trachoma, an avoidable infectious eye disease that disproportionately impacts underprivileged populations. Progress has been made but according to the International Trachoma Initiative (ITI) Mass Drug Administration (MDA) donation program, 44 countries have yet to eliminate trachoma as a public health problem. Removing one major problem like this from eye care would simplify the overall challenge. The Foundation will therefore continue the journey to eliminate trachoma in the countries where it works. This includes identifying opportunities for integrated Neglected Tropical Disease (NTD) practice and primary health care approaches.

D. Optimise the supply chain and reduce environmental and other costs of eye care consumables and equipment
Health systems throughout the world, and particularly in developing countries, are struggling with the challenge of how to manage healthcare delivery within resource constrained environments. Consistent availability of various eye care instruments, equipment, consumables, and supplies at all levels of the health care system are essential for effective and efficient service delivery. Weak procurement practices and high inflation often mean consumables cost more than they should. The Foundation will analyse the challenges in the supply chain management, procurement processes, and the maintenance of ophthalmic equipment, to propose realistic, practical improvements and generate evidence to advocate for policy and practice change.

E. Harness digital and enabling technologies to address priority eye health challenges
As the COVID-19 pandemic demonstrated, digital health has the potential to increase the accessibility, productivity, efficiency, and effectiveness of eye health. The Foundation will further develop its capabilities in digital health to support partners with technology selection and implementation, as well as build an evidence base on the use of digital technology to solve key eye health challenges such as training and referral pathways.
WHAT WE AIM TO ACHIEVE

GOAL 3
ELEVATE EYE HEALTH AS A SOCIAL, ECONOMIC AND DEVELOPMENT ISSUE THAT UNLOCKS POLITICAL WILL AND RESOURCING

Good eye health is a major global challenge, but there is a lack of awareness of eye health as a global health issue and the social and economic benefits that it unlocks. Visual impairment affects not just the individual but has ripple effects across and beyond families. Eye health has historically been marginalised both as a health issue and development issue. Its relevance to overall health, the economy, education and productivity must be brought to the fore. It is only through elevating the issue that governments and other partners will see the immense value in prioritising eye health and unlocking additional funding. The Foundation will foster multi-sectoral approaches across government, non-government, philanthropy, and the private sector to create the momentum required to scale up funding initiatives that address eye health as a matter of urgency.

OBJECTIVES:
A. Build and promote the investment case for eye health action
The Foundation will develop a body of research that models and articulates the ROI for eye health and the benefits of eye health from a socio-economic point of view. This evidence base will ensure eye health is recognised as a critical requirement for social and economic development by governments, donors, and other key stakeholders.

B. Unlock funding and resourcing
Significant funding to the sector can be unlocked by addressing eye health as part of broader development issues. The Foundation will convene strategic partnerships and alliances across priority sectors, and pilot innovative financing such as blended finance and impact investing, seeking to close the gap in funding.

C. Foster multi-sectoral systemic action for eye health
Collective action is required to tackle global problems. The Foundation will lead and contribute to alliances with other coalitions and sectors to integrate eye health into their strategies, policies and programs, expanding and enhancing collective action for eye health and other related issues.

D. Promote accountability and good governance of eye health
The Foundation seeks to embed indicators for eye health within global and national health and development frameworks, such as the SDGs. This includes working with the World Health Organization to establish and promote technical tools and guidance to member states.

E. Overcoming barriers for women and girls in accessing eye health
Women and girls make up more than 55% of people living with avoidable blindness and vision impairment. To address this inequity, The Foundation will build a strong evidence base to demonstrate the impacts of good vision on social and economic outcomes for women, advance equity and inclusion in services, and advocate support for women in eye health leadership.

Eye health has historically been marginalised both as a health issue and development issue. Its relevance to overall health, the economy, education and productivity must be brought to the fore.
The four key enablers for this strategy are The Foundation’s resources, people, partners, and operations.

“We learned how to properly care for our eyes, and we also learned how to apply these lessons in our families and communities.”

ENABLERS

INSPIRE OUR SUPPORTERS AND UNLOCK RESOURCES FROM AROUND THE WORLD

A scale up in resources is required for The Foundation to respond to the ambition in programming. The Foundation’s supporters are critical to ensuring it has the funding required to deliver its anticipated work. Their support will ensure that diverse, dynamic, and innovative funding streams are available to address eye health issues. The Foundation also seeks to be a catalyst for funding both to The Foundation and for the sector, by exploring innovative and sustainable funding solutions.

OBJECTIVES:
A. Build a sustainable, multi-channel funding program
The Foundation’s private philanthropic revenue comes from multiple sources through different giving patterns (single, regular, major) which provides funding stability and distributes risk. The Foundation will continue to build its private philanthropy in this way to safeguard future revenue.

B. Mobilise a global supporter base
The Foundation seeks to develop its international fundraising markets. This will complement the revenue strength of the Australian office and create a multi-polar world with increased revenue coming from other entities thereby building a stronger international NGO network.

C. Increase global institutional funding for eye health
The Foundation will grow its revenue from ODA sources by attracting grants for core eye health work and for work where eye health is integrated into broader health and other development sectors.

D. Explore new ventures and types of funding
The Foundation will build on its experiences with the Cameroon Development Impact Bond (DIB) and the Aina Vision (AV) social enterprise hospital to explore other innovations in eye health financing during this strategy.

INVEST IN AND EMPOWER OUR PEOPLE

The Foundation’s people are critical to the delivery of the strategy. Consequently, The Foundation will invest in and empower its people through training and development opportunities and clear delegations and accountabilities. It will foster a positive culture consistent with its values and aligned to the demands of the strategy for agility, innovation, and collaboration.

OBJECTIVES:
A. Strengthen the employee value proposition and maintain the Employer of Choice status
It is imperative that The Foundation can attract and retain the talented people it requires to deliver this strategy. In a market where The Foundation competes to attract talented staff against commercial and multilateral organisations, The Foundation will differentiate with a comprehensive employee value proposition and employer of choice status.

B. Develop the culture and mindset to create the right environment to enable achievement of the strategic aspirations
The Foundation will continue to create the right environment for its people to perform. This requires a culture and mindset that supports the strategic aspirations to deliver bold eye health solutions. This will require new levels of agility and collaboration that support collective effort.

C. Empower the global workforce, investing in the talent and capabilities of people
This strategy requires empowered people at every level, supported by systems and processes that enable them to strengthen their capabilities and address the requirements of this strategy.

D. Enable dynamic teaming and collaboration for collective impact
Much in the strategy requires collective effort across The Foundation and with other stakeholders in eye health, health, and other sectors. This requires The Foundation’s people to be able to dynamically team and collaborate using collective leadership skills.
WORK WITH AND FOR OUR PARTNERS

This strategy and its emphasis on localisation requires a shift in how The Foundation works with partners. Respecting the role that partners, particularly government partners play, in local responses and sustainability, The Foundation will transform and redefine partnerships so they are more multi-directional relationships. Further prominence will also be placed on establishing new partnerships to increase impact.

OBJECTIVES:
A. Redefine partnerships to achieve shared impact
The Foundation works primarily through partners. Fundamental to this is ensuring a shared understanding and commitment to the impact sought beyond inputs and outputs.

B. Strengthen partner engagement and foster a collective learning network
To generate the transformation and scale up required, new and different ways of working with new and different partners need to be established. A key focus will be on the transfer and application of learnings across the partner network to drive greater impact.

C. Strengthen co-design and collaborative ways of finding solutions with partners
Facing the challenge of scaling quality services, The Foundation realises that many of the solutions must be collectively driven. The Foundation will therefore be strengthening its codesign and collaboration with partners.

OPTIMISE DELIVERY THROUGH EFFECTIVE AND EFFICIENT OPERATIONS

As The Foundation scales its work to implement this strategy it will also review its operational support model to ensure ongoing effectiveness and efficiency.

OBJECTIVES:
A. Build a support model that enables scale and growth
The front lines of program and resourcing are enabled through a support model. The transformation and scale up required by this strategy will require a support model that is agile and flexible, yet delivers the appropriate rigour required by partners for compliance and effective governance.

B. Leverage research, evaluation, data, and analytics to improve the way we operate
As the organisation grows and scales under this strategy, it will become increasingly important to adapt to insights derived from research, evaluations, data, and analytics. This information capture and reporting will require strengthening, as will the processes whereby the learnings are assessed and applied.

C. Transform our business systems and processes to deliver with agility
The business systems and processes of The Foundation will need to be assessed and improved to enable new agile ways of working. Several legacy systems will require upgrading and new technologies introduced to support data reporting and insights.

D. Evolve our governance structures to reflect the aspiration of our global organisation
As the organisation grows and becomes more multi-polar across market and program entities, it will become increasingly important that governance evolves to meet requirements. This will include boards becoming more international and representative as well as more localised. It will also require careful skills-gap analysis to ensure each governance opportunity is used to further the strategy.
The Foundation exists to serve people in priority populations and the local partners who will make implementation possible. It seeks to serve those at risk of being left behind in developing countries while retaining a strong domestic commitment to assisting Aboriginal and Torres Strait Islander Peoples in Australia. The Foundation’s commitment to empowerment and sustainability means that it works with and through local partners and communities to bring about this change.

CREATE SUSTAINABLE CHANGE AROUND THE WORLD FOR PEOPLE AT GREATEST RISK OF BEING LEFT BEHIND

The Foundation is an international eye health development agency seeking to serve the most marginalised people in LMICs. These are the people at greatest risk of being left behind because of inequality in development outcomes, within countries and across countries. The Foundation is currently working in more than 25 countries across East Africa, the Middle East, Asia, and the Pacific.

More specifically, those often left behind are women and girls, people living in poverty and other vulnerable situations (such as children, youth, persons with disabilities, people living with HIV, older persons, indigenous peoples, refugees and internally displaced persons and migrants). Leave no one behind is the central, transformative promise of the 2030 Agenda for SDGs. The Foundation is signalling its commitment to the SDGs and the agenda for sustainable development.

WORK WITH ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES IN AUSTRALIA SO THEY CAN ALWAYS EXERCISE THEIR RIGHT TO SIGHT, GOOD HEALTH, AND SELF-DETERMINATION

The Foundation’s work with Aboriginal and Torres Strait Islander Peoples is part of the organisation’s DNA. Professor Fred Hollows began his humanitarian outreach work seeking to close the gap in eye health outcomes for Aboriginal and Torres Strait Islander Peoples relative to other Australians. While the gap has narrowed, it has not fully closed. The fact that Aboriginal and Torres Strait Islander Peoples are still three times more likely to be blind than other Australians demands an ongoing response. Consequently, The Foundation will continue supporting Aboriginal and Torres Strait Islander organisations, communities, and people to exercise their right to sight and good health. As an Australian headquartered organisation and consistent with Professor Fred Hollows’ foundational approach, the strategy includes the right to self-determination for Aboriginal and Torres Strait Islander Peoples.

WORK WITH PARTNERS TO DELIVER LOCALLY-LED, QUALITY, COST-EFFECTIVE SOLUTIONS

The Foundation is committed to locally-led principles of working with partners to deliver sustainable, high quality, cost-effective solutions. The Foundation believes locally-led solutions are optimal and local partners are best placed to understand needs and respond to them. Strengthened local partners are the basis of sustainable solutions in eye health. The majority of The Foundation’s partners are national governments and public health institutions who are the rightful duty bearers for health for their citizens. Local partners deliver cost-effective and quality solutions in their context. Local partners break down access barriers and scale up treatments at costs that are affordable for people in LMICs. The issue of service quality is only sustainably solved when it is embedded in local training, procurement, systems, and procedures.

OUR PEOPLE AND PARTNERS

The Foundation exists to serve people in priority populations and the local partners who will make implementation possible. It seeks to serve those at risk of being left behind in developing countries while retaining a strong domestic commitment to assisting Aboriginal and Torres Strait Islander Peoples in Australia. The Foundation’s commitment to empowerment and sustainability means that it works with and through local partners and communities to bring about this change.

CREATE SUSTAINABLE CHANGE AROUND THE WORLD FOR PEOPLE AT GREATEST RISK OF BEING LEFT BEHIND

The Foundation is an international eye health development agency seeking to serve the most marginalised people in LMICs. These are the people at greatest risk of being left behind because of inequality in development outcomes, within countries and across countries. The Foundation is currently working in more than 25 countries across East Africa, the Middle East, Asia, and the Pacific.

More specifically, those often left behind are women and girls, people living in poverty and other vulnerable situations (such as children, youth, persons with disabilities, people living with HIV, older persons, indigenous peoples, refugees and internally displaced persons and migrants). Leave no one behind is the central, transformative promise of the 2030 Agenda for SDGs. The Foundation is signalling its commitment to the SDGs and the agenda for sustainable development.

WORK WITH ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES IN AUSTRALIA SO THEY CAN ALWAYS EXERCISE THEIR RIGHT TO SIGHT, GOOD HEALTH, AND SELF-DETERMINATION

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OUR VALUES

Five values guide The Foundation’s interactions and approach to working with all stakeholders.

INTEGRITY
- We hold ourselves accountable to meet our agreed commitments
- We do what we say we will do
- We are honest and transparent to engender trust in everything we do
- We strive for fairness and equity

COLLABORATION
- We partner with others to achieve more
- We are stronger together
- We value and respect the strengths of those with whom we work
- We embrace diversity and celebrate inclusion

ACTION
- We roll up our sleeves to get the job done
- We learn from our successes and mistakes
- We strive to be innovative, agile and flexible to achieve consistently greater outcomes
- We take bold, considered risks to achieve our vision

RESOURCEFUL
- We embrace a sense of curiosity, optimism, and determination to find solutions
- We proactively care and support each other through challenging situations
- We encourage a positive, inclusive and supportive atmosphere to reframe setbacks as an opportunity for growth and learning

EMPOWERMENT
- We enable people to take actions themselves
- We create pathways to amplify the voices of those who are not heard
- We listen, learn and share information
- We encourage people to be brave and speak-up

Santoshi, 28, from Nepal never had the opportunity to go to school or work. After receiving surgery for bilateral cataract at an eye camp at Pullahari Monastery, her mother Tara said:

“I can’t give much to her, but I am glad this will let Santoshi have a better life.”

PHOTO: MICHAEL AMENDOLIA
OUR APPROACH

 IMPLEMENTATION APPROACHES

The Foundation has developed four approaches that will be used to implement the strategy to maximum effect, namely global principles, thematic priorities, ToC and alignment to the SDGs.

GLOBAL PRINCIPLES

The Foundation seeks to create the right balance between having a global strategy and enabling country teams to apply that strategy to the local context. Applying Global Principles is the approach that will guide decision making by articulating where, who and what is focused on at an organisational portfolio level. At a country level, these principles will be applied to determine what best suits the local context and aligns with national eye health plans and priorities. This will result in country strategies that reflect the differing eye health needs and stages of development in countries’ health systems and eye care programs.

The Global Principles for program selection and design are:

A. We strategically target where we can make the most impact.
   - We invest where there is a high burden AND high prevalence, and a significant gap between access and need.
   - We take a systems-change approach when appropriate (acknowledging this may not be appropriate for fragile states).
   - Our work delivers direct measurable benefit to eye health (short, medium and long-term).
   - We prioritise opportunities to scale sustainable, diverse funding that maximises our medium to long-term impact.

At a global level this means that we work in low to medium resource settings, primarily within LMICs, and focus on high burden eye conditions (those that threaten sight and are highly prevalent).

B. We optimise programming at a global portfolio level and embed locally-led development in our work.
   - We maintain a balanced global portfolio that optimises opportunity for impact and effectiveness whilst managing risk.
   - We use each dollar responsibly without limiting what we can do based on short-term needs for immediate outputs or outcomes.
   - We ensure approaches and solutions are tailored to local or regional context and priorities.
   - Localisation is our preferred strategic choice for middle income countries where there are no operational issues forcing exit.

The Foundation seeks to manage risk, optimise impact and efficiency and ensure The Foundation is well positioned to continue to contribute towards the elimination of avoidable blindness by maintaining a balanced portfolio.

C. We deliver bold solutions.
   - We identify which areas will transform eye health and the value and role we can bring.
   - We approach big barriers collectively, building and working in partnership coalitions and consortiums.
   - We scale proven solutions that deliver impact.
   - We pilot and test new interventions where cost-effective proven solutions do not exist.

THEMATIC PRIORITIES

Five thematic priorities have been drawn from the strategy and prioritised for multi-country planning, resourcing, and management support to ensure synergies are drawn from work undertaken at country and regional levels. Benefits include sharing technical skills, research, and planning. Thematic areas selected for initial scale up are workforce, data, elimination of trachoma, quality, and integration.

PROGRAMMATIC THEORY OF CHANGE

The Theory of Change (ToC) outlines the overall logic and causal pathways showing how The Foundation will achieve impact. The ToC will inform programmatic decisions toward greatest impact and guide what is measured and reported on in The Foundation’s impact framework.

The most important feature of the ToC is that it aims to build sustainable system solutions to the eye care needs of individuals rather than concentrating only on immediate service delivery, such as eye surgeries. The key premise is that the scale of the need can only be met when the overall system is lifted to a new level.

The ToC illustrates that when The Foundation takes certain actions and investments, they contribute to collective action with partners, that changes health systems and eye care in countries to ultimately benefit individuals and communities.

The ToC shows that The Foundation has a sphere of control, a sphere of influence and a sphere of interest. The Foundation uses learning feedback loops to monitor and evaluate its interventions and their impact.

An important feature of the ToC is the articulation of the roles that The Foundation plays in bringing about change. Recognising that it is the partners that do the eye health work, the roles The Foundation can and will play are:

- **Influencer:** Through systemic advocacy and technical expertise, influence policy and practice.
- **Facilitator:** Through collective action, facilitate, convene, and lead diverse stakeholders.
- **Knowledge Broker:** Through research and innovation, generate and broker knowledge.
- **Technical Advisor:** Through applying technical expertise to partnerships, strengthen partners.
- **Funder:** Through strategic investments, enable catalytic programs to occur.

The Foundation undertakes these roles with its partners, aiming to scale and strengthen the critical enablers of eye health which are seen as appropriate policies, research and innovation, stakeholder engagement, key financial investments, data collection, service and system improvements and integration of eye health to health and other sectors.

The enablers are designed to contribute to stronger building blocks of IPEC and health systems which are financing mechanisms, equipment, workforce, data, community engagement, and leadership and governance.

When the building blocks are strengthened, it will lead to a sustainable improvement in services and reduced inequity so more people can access and receive the high quality eye care they need at the right place, time, and price.

The impact for individuals that The Foundation seeks, is a reduction in blindness and vision loss for those with reversible or treatable conditions, and improved functioning for those with ongoing vision loss.

The impact The Foundation seeks for communities is improved lives and stronger communities in the sectors of health and wellbeing, education, workforce and employment, and overall standards of living.

Note: Full page Theory of Change diagram on following page.
Our Programmatic Theory of Change depicts the story of how our work leads to the change that we seek.

**Our Work**
- Eye health action and investment in
  - Systemic advocacy
  - Service improvement programs
  - Research and innovation
  - Systemic collective action
  - Investments

**With Partners Contributes to Collective Action**
- Scale and strengthen critical enablers of eye health
  - Policies and guidelines
  - Research and innovation
  - Stakeholder engagement and coordination
  - Investment
  - Data collection and use
  - Service and system improvement planning and execution
  - Integration into health and other systems

**That Changes the System and Improves Eye Care**
- Optimise integrated people centred eye care and strengthen health and social systems
  - Financing mechanisms
  - Equipment
  - Workforce
  - Data
  - Community engagement
  - Leadership and governance
  - Reduce inequity so more people access and receive high quality eye care, at the right place, time, and price

**To Benefit Individuals and Communities**
- Reduce blindness and vision loss
- Improve functioning for those with ongoing vision loss
- Improve lives and strengthen communities
  - Health and wellbeing
  - Education
  - Standards of living

**Principles**
- Learning, Innovation and Quality
- Systemic Change
- Locally Led Development
- Equity and Inclusion

Our work is informed by learning and feedback loops.
The Foundation will continue to use the SDGs as an overarching approach for aligning and measuring its work. While eye health, blindness and vision impairment do not feature explicitly within the goals, targets, or indicators the relationship between eye health and broader health and development markers is significant. Research undertaken during the 2019-2023 strategy demonstrated that The Foundation’s work contributes to the SDGs tagged with a star below.

Footnotes:
1 Prevalence – the proportion (%) of a particular population found to be affected by a medical condition at a specific time.
2 Incidence – the number of new cases occurring during a period. Used to describe volume of new cases of disease.
3 WHO introduced PCD in the World Report on Vision in 2019
4 Typical outputs are patients screened, cataract operations, doctors trained, drugs administered.
5 Outcomes aggregate the effect of outputs into more singular measures like Years of Sight Saved (YSS)
6 IAPB 2030 In Sight, 2021
7 The Lancet Global Health Commission on Global Eye Health, 2021 – prevalence % rates are for population 50+ years of age
8 WHO Blindness Key Facts, 2023
9 WHO World Report on Vision, 2019
10 Investment Case for Eye Health, The Fred Hollows Foundation, 2023
11 IAPB 2030 In Sight
12 GAPSSD+ Gender, Age, Place of Residence, Socio-economic Status, Ethnicity/Indigeneity/Race, Disability, Plus