

Annual Report

890,066 EVE OPERATIONS & TREATMENTS

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

- Professor Fred Hollows

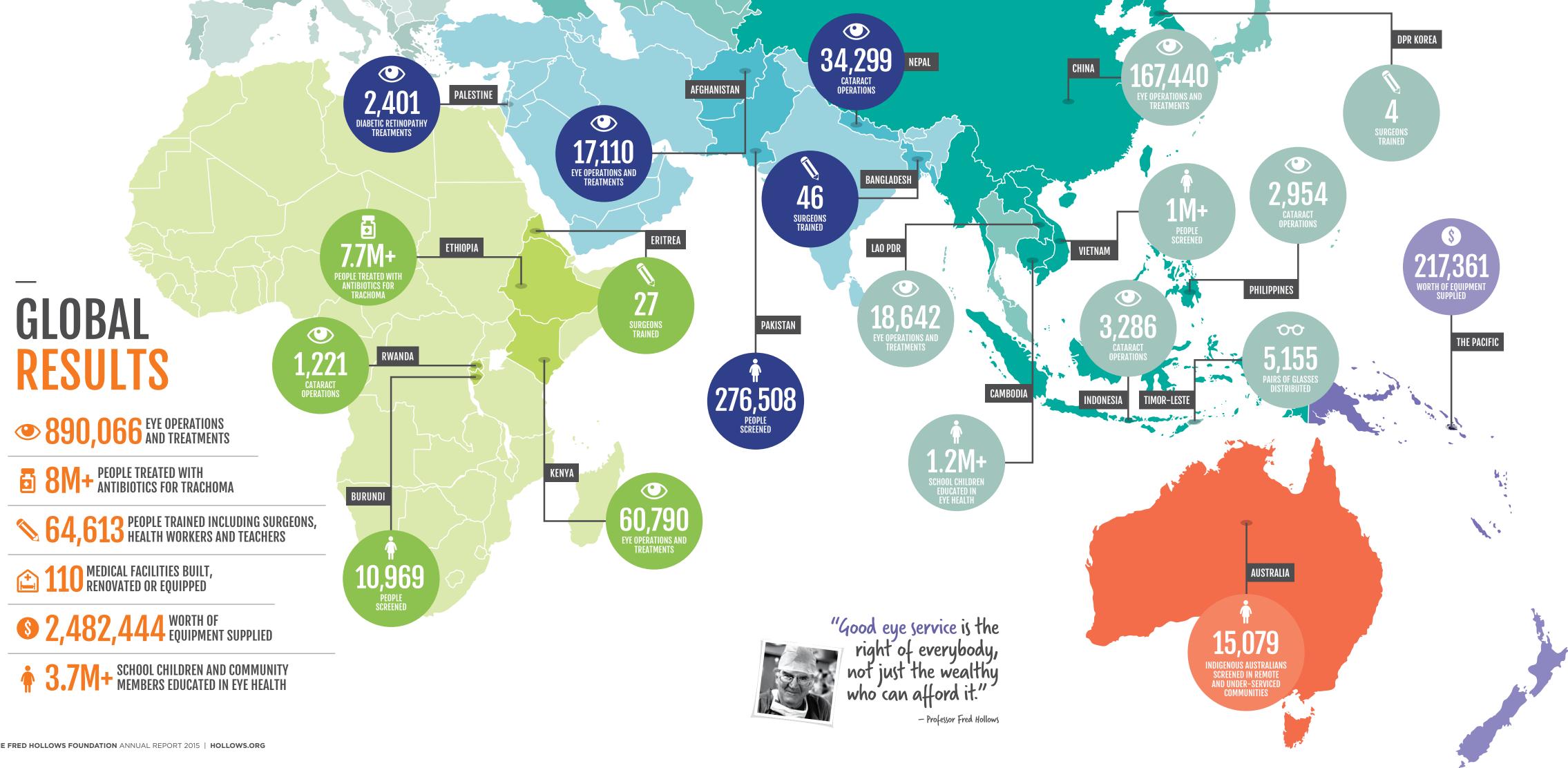




The **Fred Hollows** Foundation

OUR GLOBAL IMPACT 2015

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







Department of Foreign Affairs and Trade

Australian Aid



The Fred Hollows Foundation is a member of the Australian Council for International Development (ACFID) and is a committed signatory to the ACFID Code of Conduct, which is a voluntary, self-regulatory sector code of good practice. The Code requires members to meet high standards of corporate governance, public accountability and financial management. More information on the Code, including how to make a complaint, can be obtained from ACFID by visiting www.acfid.asn.au or emailing complaints@acfid.asn.au. The Foundation also has its own process for handling complaints which can be activated by phoning The Foundation's head office on 02 8741 1900, and asking to speak with the complaints officer, or emailing complaints@hollows.org.



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Front cover photo: Michael Amendolia

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

FIND OUT MORE

Along with advancing medical technology to provide better outcomes, we also use the latest technology to keep you up to date on how we're helping people all over the globe.

That's why we're using QR codes in this year's annual report to share our latest case studies with you – bringing to life the compelling and transformative nature of the work we do here at The Fred Hollows Foundation.

TO WATCH OUR LATEST CASE STUDIES SIMPLY





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

Watch our case studies.

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WHO WE ARE

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

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



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

GABI HOLLOWS_{AO}

A MESSAGE FROM THE FOUNDING DIRECTOR

Fred believed that everyone, everywhere, should have access to the best that modern medicine could provide.

When Fred died it was a sad time for everyone but we didn't have too much time to stand still. We promised Fred that we'd continue the work he had begun.

I am so proud to say that 23 years on, The Fred Hollows Foundation has kept all those promises and achieved so much more. I was extremely moved to witness Fred's vision of restoring sight and hope to thousands of people in Ethiopia last year.

Although trachoma affects more women than men, their health is often not seen as being as important as men's in developing countries. Yet in Ethiopia I watched more than 300 women and girls, clad in multicoloured headscarves, attend our clinics.

I watched one woman, Fatuma Aberaya, a 35-year-old coffee and maize farmer and mother of five, have a 20 minute operation that freed her from the agony of advanced trachoma.

Sadly, as we know, two thirds of the world's blind are women and girls. Often it is harder for women to travel to clinics or hospitals for treatment – they may not be able to afford it, and it may be harder for them to leave their family or work for a day. The Foundation is working hard to address this disparity by training women health workers and providing access to services for those most in need.

This important work is part of the extraordinary development of The Foundation that has seen it grow from an idea hatched around our dinner table to an internationally respected development organisation that is restoring sight to millions.

I am astounded by the continued generosity of spirit that surrounds The Fred Hollows Foundation and its work.

Thank you.

Good Hovens.

ounding Director



SIGH



JOHN BRUMBY

A MESSAGE FROM THE CHAIR

It is an incredible honour to be appointed the Chair of the Board of The Fred Hollows Foundation. I first became

involved with The Foundation about 20 years ago, and it has been remarkable to witness its extraordinary growth and success over that time.

Like so many Australians, I remember Fred as a dedicated campaigner for justice in Australia and overseas. He was someone who worked tirelessly to end avoidable blindness and restore sight to people, regardless of their social background or race. He was forthright, he was direct, and he got results.

More than 20 years later, public support for his work only continues to grow as The Foundation set up in his name increases the scope of its work across the globe.

In 2015, we can report impressive results. Almost every aspect of our work grew, from the number of people screened, and the number of cataract operations performed, to the number of surgeons and health workers trained.

Importantly, as an organisation we act strategically – we target avoidable blindness in countries where we know we can make an impact, we partner with other organisations that can help us do this, and we train the surgeons and invest in the hospitals that can sustain our work for the long-term.

In Africa, we have continued our work to eliminate trachoma in Ethiopia. Through a combination of surgery, antibiotics distribution, improvements in sanitation, and education of local communities on the role of face-washing, we are making real progress in beating this disease. Last year we distributed more than 7 million doses of antibiotics. In 2016, these efforts will increase in intensity.

In Asia, we continue more than 20 years of activity on the ground. The region is home to the largest populations of people living with blindness, with almost 20% of the world's blind in China alone. Diseases like diabetic retinopathy are now hitting working age populations in these countries, with

huge impacts on workforce participation. It is why we have increased our presence in the region, with a new regional centre in Hong Kong. From here, we hope to be able to expand our work across Asia addressing these emerging health issues and working with governments on solutions.

There are always challenges facing our staff and partners on the ground. The devastating earthquake in Nepal left towns and cities in ruins. Many lost family members and were left without shelter. In good news, our partner hospital, the Tilganga Institute of Ophthalmology in Kathmandu, headed by Fred's great friend Dr Sanduk Ruit, has now recommenced its outreach eye camps to remote areas affected by the earthquake.

The Fred Hollows Foundation is uniquely Australian and proudly continues Fred's mission to address blindness among Aboriginal and Torres Strait Islander communities. In 2015 we screened more than 15,000 Aboriginal and Torres Strait Islander Australians, ensuring that they have a pathway to treatment. We have continued to address the causes of trachoma, and remain committed to eliminating it from remote communities by 2020.

Fred Hollows died a national hero in February 1993 after capturing Australia's imagination as a rough diamond with an unerring vision to end avoidable blindness.

I feel privileged to be the Chair of such an extraordinary organisation which is dedicated to making Fred's vision a reality. I thank you for being part of that dream.

Chair

A MESSAGE FROM THE CEO

One of the great privileges of my work is experiencing those magic moments when the bandages come off and people who have been blind can see clearly again. Often they are tentative at first, as they take in their surroundings. Then as their vision clears, they are jubilant as they see their loved ones.

Fred Hollows, was, in the writer Tom Keneally's words, "The wild colonial boy of Australian surgery". He would have been so impressed to know that The Foundation set up in his name has gone on to restore the sight of millions.

Our work is now truly global, and The Fred Hollows Foundation can rightly claim to be one of Australia's leading international development organisations.

Our work spans continents and deals with the many diseases that cause avoidable blindness – cataract, trachoma and diabetic retinopathy in particular. We train the doctors and nurses, equip the hospitals and provide the surgery that restores sight – often with a simple 20 minute operation.

This work remains powered by our hundreds of thousands of supporters in the Australian community and around the world. These are people from all walks of life who are inspired Fred Hollows' way of working was not to go into a community, by Fred's vision and mission.

The 2015 Annual Report of The Fred Hollows Foundation highlights some of the many achievements we have made with the support of so many. Some of these highlights include:

- 890,066 eye operations and treatments, including 137,216 cataract surgeries.
- 8,203,202 people treated with antibiotics for trachoma.
- 12,486 diabetic retinopathy treatments.
- 3,490,071 people screened.
- **64,613** people trained including surgeons, nurses, health workers and teachers.
- 110 medical facilities built, renovated or equipped.
- \$2,482,444 worth of equipment supplied.

BRIAN DOOLAN

But our work encompasses much more than these numbers as we increase our efforts to end avoidable blindness.

MESSAGES

Our partnerships with other like-minded organisations around the world and on the ground in targeted countries are critical to delivering services and achieving our goal of a world without avoidable blindness.

We are exploring new and innovative forms of financing to ensure that everyone who needs surgery can access it, no matter whether they are rich or poor. New forms of social financing for projects can help with this, as can increased support from governments in Australia and in developed countries. With 2015 heralding significant cuts to the Australian Aid program, securing new forms of financing remains critical.

The Foundation continues to work with national governments to build stronger healthcare systems. Governments with limited resources continue to need the support of organisations like The Fred Hollows Foundation and the international community, but are also taking steps themselves to end avoidable blindness.

fix a few eves and then walk away. Fred saw it as a matter of working with people, beside them, strengthening the local health clinics and hospitals, and training people so they could take control. As he put it: "You have to impart skills and technology, and help them help themselves. Leave the world a better place."

Thank you to our many supporters across Australia and across the world for helping us to achieve Fred's dream.

Bi-Jah

CFO

HELPING PEOPLE SEE

Millions of people around the world have received the gift of sight because of our work. Whether it is removing cataracts, treating trachoma and diabetic retinopathy, or prescribing a new pair of glasses, our mission is to make sure that every person, no matter where they live, or how poor they are, has access to inexpensive and high quality eye care.

"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."

- Professor Fred Hollows

HELPING PEOPLE SEE



CASE STUDY: BURUNDI

UNDER AFRICAN SKIES

Born in Burundi, one of Africa's poorest nations, with cataract in both eyes, three-yearold Cesaria's prospects seemed bleak.

But then something wonderful happened. Cesaria was found by The Foundation when we screened people for blindness in her village and we quickly arranged for her to be operated on by the country's only paediatric ophthalmologist, Dr Levi.

The next day, in her best orange dress, Cesaria started to giggle excitedly as she peeked out from under the patches – a girl who just couldn't wait to see the world. She beamed when she saw her grandmother. She had only been able to hear and touch her until that moment. When the pair arrived home after her operation, everyone came out to witness the miracle of Cesaria's new life.



CASE STUDY: NEPAL

NORTHERN EXPOSURE

Barefoot, in tattered clothes, blind in both eyes, Lakpa Tamang had been led by his daughter for several days to reach an eye camp in the foothills of the Himalayas. Like many patients, the 82-year-old retired farmer was too poor to afford the bus fare to Kathmandu for surgery.

He shuffled forward, just one of hundreds awaiting the expert skill of Dr Sanduk Ruit, the Nepalese surgeon trained by Fred Hollows and head of the Tilganga Institute of Ophthalmology. Two days after surgery, Lakpa could see again. He stood up straight, looking 10 years younger than he had when he came into the camp, declaring he couldn't wait to buy sweets for his favourite grandchild on the way home.



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

- Professor Fred Hollows

OUR IMPACT

2890,066 EYE OPERATIONS & TREATMENTS INCLUDING:

137,216 CATARACT OPERATIONS	ļ
46,211 SURGERIES TO TREAT TRACHOMA	
• 12,486 DIABETIC RETINOPATHY TREATMENTS	
+ 694,153 OTHER SIGHT SAVING OR IMPROVING INTERVENTIONS	-

With the help of our partners, we are working tirelessly to achieve Fred's vision to end avoidable blindness.

In Afghanistan we screened 84,185 people and conducted 17,110 eye operations and treatments.

In Australia we screened more than 15,000 people and supported 782 cataract surgeries and 816 diabetic retinopathy treatments. We also treated 2,408 people with antibiotics for trachoma.

In Bangladesh we screened 335,263 people and performed 100,844 eye operations and treatments including 15,069 cataract surgeries. We also distributed 17,207 pairs of glasses.

In Burundi despite the difficult situation, we screened **10,969** people and performed over **400** cataract surgeries.

In Cambodia we screened 86,921 people and conducted 13,620 eye operations and treatments including 8,708 cataract surgeries.

In China we screened 486,462 people and performed
167,440 eye operations and treatments including
4,292 cataract surgeries. We also distributed 17,367 pairs of glasses to school students.

In the Democratic People's Republic of Korea through our Nepalese partner the Tilganga Institute of Ophthalmology we supported more than **700** cataract operations.

In Eritrea we screened **76,824** people and performed **7,835** eye operations and treatments including **4,923** cataract surgeries. We also treated more than **169,000** people with antibiotics for trachoma.

In Ethiopia we treated more than 7.7 million people with antibiotics and performed 18,617 surgeries to treat trachoma.

In Indonesia we screened 10,953 people and performed 3,286 cataract surgeries.

In Kenya we screened 158,657 people and performed 60,790 eye operations and treatments including 9,722 cataract surgeries. We also treated 314,488 people with antibiotics and conducted 7,231 surgeries for trachoma.

AS WELL AS:

≫ 3.4M+ PEOPLE SCREENED

8.2 M+ PEOPLE TREATED WITH ANTIBIOTICS FOR TRACHOMA

6 85,337 PAIRS OF GLASSES DISTRIBUTED

In Lao PDR we screened **26,507** people and performed **18,642** eye operations and treatments.

In Nepal despite the devastating earthquake, we screened more than 550,000 people and performed 326,805 eye operations and treatments through our partner Tilganga. This included 34,299 cataract operations and procedures to treat people whose eyes were injured during the earthquake.

In the Pacific we screened 776 people and conducted more than 100 procedures to treat diabetic retinopathy.

In Pakistan we screened 276,508 people and performed 64,519 eye operations and treatments, including 18,849 cataract surgeries and over 5,000 diabetic retinopathy procedures.

In Palestine with our partner St John of Jerusalem Eye Hospital Group, we screened **13,906** people and performed **2,401** diabetic retinopathy treatments.

In the Philippines we conducted **10,649** eye operations and treatments including **2,954** cataract surgeries.

In Rwanda we screened **49,616** people and performed **1,221** cataract operations.

In Timor-Leste we screened 13,398 people, performed 575 cataract surgeries and distributed 5,155 pairs of glasses.

In Vietnam we screened more than 1 million people and performed 53,403 eye operations and treatments including 28,300 cataract surgeries.

TOTAL EYE OPERATIONS AND TREATMENTS PERFORMED

2015

2014

890,066

728,788

INVESTING **IN PEOPLE**

The Foundation continues to train the eye health workforce of the future. Last year we trained more than 64,613 people including surgeons, health workers and teachers. They recognise, refer, diagnose and treat eye problems. They teach that blindness is not an inevitable part of ageing, but rather something that can be cured.

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







CASE STUDY: LAO PDR

GENERATING HOPE

Imagine having to stop in the middle of a cataract operation because of a power blackout. This problem does not deter Dr Phetsamone, a Foundation-trained surgeon at the Oudomxay Provincial Hospital in northern Laos.

Like many doctors in the developing world, he patiently waits for a backup generator so he can resume his work. He's well aware that many of his patients have walked through mountainous terrain to reach him, and this might be their only chance to receive high quality eye care. Last year Dr Phetsamone successfully carried out a delicate cataract operation on sevenmonth-old twins, the youngest Laotian children to ever have such an operation.



"Teach the teachers first, then the teachers can teach others."

- Professor Fred Hollows

CASE STUDY: PAKISTAN HOUSE CALLS

The lack of mobility of women in Pakistan prompted The Foundation to think of a new way to reach out to women, especially those in remote rural villages where eye disease remains largely undiagnosed and untreated.

That is why we have trained more than 4,000 Lady Health Workers, such as Ishrat Parveen, to go door to door in their community, identifying cataract, trachoma and other eye diseases and referring housebound women and children to the local eye unit for screening. The health care workers were a great success; soon more women than men were visiting eye units for treatment.

The Government of Pakistan was so impressed it decided to take over the eye health training. The Foundation continues to support these friendly faces who are also advocates for children's vaccines and family planning.

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OUR IMPACT

PEOPLE TRAINED INCLUDING:

232 SURGEONS

+ 547 CLINIC SUPPORT STAFF

35,185 COMMUNITY HEALTH WORKERS
12,081 TEACHERS

Working with our partners, we are training an eye health workforce to restore sight around the world.

In Afghanistan we trained 1,150 teachers in primary eye care. As a result, thousands of school children were screened and provided with glasses.

In Bangladesh we trained 46 surgeons and 56 clinic support staff. We also trained 5,773 teachers and 1,984 community health workers and leaders.

In Burundi we supported **one** surgeon to receive training at the University of Nairobi in Kenya.

In Cambodia we trained 13,363 people including 11 surgeons. We also continued to train school teachers to deliver primary eye care education to more than 1.2 million school children.

In China we trained 28 surgeons, 169 clinic support staff and 2,201 community health workers. We also trained 17 staff at the newly established vision centres in Anhui and Xinjiang provinces to screen and provide glasses to local children.

In the Democratic People's Republic of Korea we supported four surgeons to receive training at the Tilganga Institute of Ophthalmology in Nepal.

In Eritrea we trained **19** ophthalmic nurses in Small Incision Cataract Surgery. We also trained **eight** trachoma surgeons and **12** clinic support staff.

In Ethiopia we trained 56 surgeons including 15 ophthalmologists in a 'train the trainers' initiative. We also trained 16,569 community health workers and teachers who played a crucial role in the strategy to eliminate trachoma.

In Indonesia we trained 1,490 community health workers.

In Kenya we trained three surgeons, 26 clinic support staff and 3,751 community health workers. We also worked in partnership with the Kenya Medical Training College and the University of Nairobi to support two full scholarships including a Master of Medicine in Ophthalmology for a rural based doctor. In Lao PDR we trained **four** surgeons from Bokeo and Luang Prabang provinces. We also trained **46** clinic support staff, **872** community health workers and **665** primary school teachers.

In Nepal we trained 28 surgeons and 15 clinic support staff. We also trained 477 community leaders and health workers and 158 school teachers in primary eye care.

In the Pacific we trained three surgeons and 60 community health workers.

In Pakistan we trained 1,665 teachers and 1,752 community health workers including Lady Health Workers.

In the Philippines we trained 677 community health workers and teachers who then screened and provided glasses to thousands of school children.

In Rwanda we trained **38** clinic support staff and **23** community health workers.

In Timor-Leste we trained 143 community health workers. We also supported 54 people to continue their education and attend courses and clinical placements to further strengthen the country's eye health workforce.

In Vietnam we trained 14 surgeons, 31 clinic support staff and 4,881 community health workers and teachers. We also supported more than 100 staff from Hue and Thai Binh Medical Universities to receive training to increase their eye health research and teaching capacity.

TOTAL NUMBER OF PEOPLE TRAINED



EQUIPMENT & TECHNOLOGY

By developing robust, low cost technology for eye surgeons who often work in extreme conditions, we are able to reach out to vulnerable people far from medical care. Whether it's a new app that helps detect early signs of eye damage, or a hostel to help train women ophthalmologists, we are determined to provide first-rate eye care to everyone who needs it.



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

- Professor Fred Hollows

NEW VISION

The Foundation is always looking for ways to improve our work. Last year we supported the development of a new smartphone and laptop app that evaluates and improves the performance of our hospitals' cataract surgeons.

Surgeons who use the BOOST (Better Operative Outcomes Software Technology) app can benchmark their surgical performance against others locally and globally, and receive advice on how to improve.

BOOST, which is being trialled in more than 40 hospitals, allows surgeons to compare their performance by recording patients' vision one to three days after surgery, rather than the traditional four to six weeks later.

The shorter time frame allows hospitals to examine patients before they return home, meaning surgical quality can be benchmarked for many more patients – patients such as 76-year-old Tan Thi Lo, who was taken to hospital in Vietnam on a motorbike on a precarious mountain road. In the future, her surgeon will be able to check their performance without her making such an arduous trip a second time. "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."

- Professor Fred Hollows

EYE CONTACT

In 2014, the Aboriginal artist and senior ranger Peter Rowlands began losing his sight because of diabetic retinopathy, prompting him to travel for two days to have laser surgery in one of our partners' clinics.

Martu Rang

Last year in partnership with the Social Eyes Corporation, we began developing a new computer program, Marvin, that would have allowed Peter to have a check-up a lot earlier and without having to travel so far.

Loaded onto a tablet or computer, Marvin will provide health care workers in remote communities with on-the-spot imaging and early identification of eye damage.

OUR IMPACT

110 MEDICAL FACILITIES BUILT, RENOVATED OR EQUIPPED \$ 2.4M+ WORTH OF EQUIPMENT SUPPLIED ➡ 346 WATER POINTS BUILT OR UPGRADED wc 46 LATRINES BUILT OR UPGRADED

Working with our partners, we continue to build and equip the facilities needed to deliver world-class eye care.

In Afghanistan we renovated the University Eye Hospital at Kabul Medical University and provided essential eye health equipment.

In Australia we helped equip four new eye health clinics in the South East Queensland region. We also provided ophthalmic equipment to eye health providers in the Torres Strait and Cape York regions, and supplied diabetic retinopathy scanners to partners for use in Western Australia.

In Bangladesh we equipped **11** facilities including the Brahmanbaria Sadar Sub-District Health Centre and the Koshba Sub-District Health Centre.

In China we provided \$436,367 worth of equipment to 17 facilities including Huoqiu County Hospital in Anhui province and Altay Prefecture Hospital in the remote Xinjiang Uyghur Autonomous Region.

In the Democratic People's Republic of Korea

we supplied essential eye health equipment to the Ministry of Public Health. This equipment will help the Pyongyang Eye Hospital.

In Ethiopia we repaired or built 346 water points and **46** latrines. These improved services are a key part of the 'environmental improvements' component of the strategy to combat trachoma.

In Kenya we supported the renovation of Siaya County Hospita and supplied **\$104,272** worth of equipment to **nine** facilities including Kisumu County Hospital and Narok County Hospital. We also provided critical equipment to the Kenya Medical Training College to increase the quality of its training.

In Lao PDR after conducting an extensive survey, The Foundation supported the installation of a Health Management Information System in Luang Prabang and Oudomxay provinces. This system aims to improve the quality of service in the eye units by more effectively managing data and reporting.

In the Pacific we provided \$217,361 worth of essential diabetes clinic equipment to the Regional Eye Centre in Honiara, Solomon Islands.

In Pakistan we completed the construction of a women's hostel attached to the College of Ophthalmology and Allied Vision Sciences in Lahore. We also renovated the Allied Hospital Faisalabad and provided **\$258,088** worth of equipment to six facilities including Liagat University Eye Hospital.

In Rwanda we supplied \$198,577 worth of equipment to 17 facilities including Shyira District Hospital, Gahini District Hospital and Kibuye Referral Hospital.

In Vietnam we renovated the Ha Tinh Eye Center and equipped **15** facilities including Tien Giang Eye Hospital and the eye department at Thai Binh University of Medicine and Pharmacy. We supplied **\$408,936** worth of essential eye health equipment, including portable equipment which will be used during community outreach training in Thai Binh province.

TOTAL NUMBER OF FACILITIES BUILT, RENOVATED OR EQUIPPED

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2014

36

110

WILLING PUPILS

We are training teachers, children and communities to prevent avoidable blindness. Last year, more than 3 million people were taught about eye health. In Ethiopia, a country plagued by the blinding disease of trachoma, more than 1.6 million people were educated in eye health, including teaching school children the importance of washing their faces to prevent the disease.

In Cambodia, more than 1 million primary school children learnt about eye health as part of a partnership with the Cambodian Government. Topics included preventing eye disease through good hygiene, and how to be aware of short and long sightedness.

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ADVOCACY & INFLUENCE

Fred didn't just operate on eyes, he urged governments to rise to the challenge of ensuring all people had access to the highest standard of health. Today The Foundation continues to demonstrate to governments the need to invest in vision with hard evidence. We work with finance and health ministers to make eye health a priority.

"The great challenges are to be part of setting up structures that will go on when each one of our individual biological lives no longer exist.

- Professor Fred Hollows







INVESTING IN WOMEN

People often say disease doesn't discriminate when it comes to gender. But eye disease certainly does.

Almost two-thirds of the world's blind people are women; in every region of the world, women are more likely to be blind than men. Women are less able to get treatment because in many communities, men control the family finances and their medical needs are prioritised. It can also be harder for women to travel to clinics and hospitals because of family responsibilities.

The Foundation has been spearheading a campaign to address this disparity. Last year, in partnership with the International Association for the Prevention of Blindness, we held a forum in Cambodia on the best ways to reach more women and girls, as well as encouraging more women to become ophthalmologists, orthoptists and eye care workers.

3 OUT **5** PEOPLE WHO ARE BLIND ARE WOMEN

SEEING IT CLEARLY

Nearsightedness affects 60 per cent of Chinese secondary school students in rural areas. Despite this, more than half of these students don't have glasses, or have glasses with the wrong prescription.

So we supported the PRICE study, which screened students in 140 rural schools in China. Free glasses were offered to every pupil who could not afford them at their county hospital. The sales of glasses from those who could afford them were used to help fund school screening programs, and also helped local optometrists provide free glasses to the poorer students.

The PRICE study resulted in twice the number of students wearing glasses six months later. The results were so impressive that the government of China has announced a new national refractive error program for rural schools.

60% OF CHINESE SECONDARY SCHOOL STUDENTS ARE AFFECTED BY NEARSIGHTEDNESS

EYES ON THE FUTURE

The Foundation's partnership with the International Diabetes Federation (IDF), an umbrella organisation of over 200 national diabetes associations, continues to strengthen and grow.

The Foundation and the IDF recently launched Diabetes Eye Health a guide for health professionals. IDF President Sir Michael Hirst said diabetic retinopathy - which occurs when blood vessels inside the retina are damaged is one of the most devastating complications for people with diabetes.

The increase in the number of people developing Type 2 diabetes means that more and more people will develop diabetic retinopathy unless action is taken. People at risk of diabetic retinopathy often live in developing countries where it is difficult to properly manage high blood sugar levels and high blood pressure.

DIABETES COULD BECOME THE LEADING CAUSE OF BLINDNESS WORLDWIDE BY 2035

CASE STUDY: PAKISTAN ⁄

PAKISTAN **FUNDING PUSH**

The Australian Government's decision to cut \$1 million from The Foundation's Pakistan program prompted us to launch a petition asking Australians to help us continue our work there. More than 15,000 people signed the petition.

At risk are 1,200 babies who need specialised care to prevent and treat retinopathy of prematurity. The funding cuts also mean 18,000 patients will not receive sight saving cataract operations, and 60 ophthalmology students will be forced to suspend their training.

The Foundation has a strong track record in Pakistan, having helped to halve the blindness rate there, saving the sight of more than 4.5 million people.

to school.

we're for Australian Aid

More than half of the students are women from rural and remote areas of Pakistan.

Five-year-old Faizan was recently operated on by a Foundation-trained surgeon after an accident with a thread cutter injured his eye. After the surgeon performed his magic, Faizan was able to see well enough to return



INDIGENOUS AUSTRALIA PROGRAM

The Foundation has never wavered from Fred's determination to improve the lives of Aboriginal and Torres Strait Islander people. The disparity between their eye health and other Australians is still stark. Blindness rates in adults are still six times the rate of other Australians.



'I'd like to think that I've been a part of a more effective approach to Aboriginal health."

- Professor Fred Hollows



CASE STUDY: AUSTRALIA

PETER DATJING

Thanks to two recent cataract operations supported by The Foundation, artist Peter Datjing Burarrwanga can now clearly paint his ancestral designs and can continue teaching at the local school at Elcho Island, to the north east of Darwin.

Before the operation, the clouding of the lens had made it increasingly difficult for Peter to work. "But now that I've had the operation, I can see clearly," he said. "I can keep telling our stories, I can teach the next generation," he said. "I'm a very happy man."



OUR IMPACT AT HOME

† 15,079 PEOPLE SCREENED IN REMOTE AND **UNDER-SERVICED COMMUNITIES**

● 1,719 EYE OPERATIONS AND TREATMENTS INCLUDING:

782 CATARACT SURGERIES

0 816 DIABETIC RETINOPATHY TREATMENTS

2,408 PEOPLE TREATED WITH ANTIBIOTICS FOR TRACHOMA

€ 3,765 PAIRS OF GLASSES DISTRIBUTED

✓ 268 PEOPLE TRAINED

S 319K+ WORTH OF EQUIPMENT SUPPLIED

3,490 SCHOOL CHILDREN AND COMMUNITY MEMBERS EDUCATED IN EYE HEALTH

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

- Professor Fred Hollows

END IN SIGHT FOR EYE DISEASE

Aboriginal author and illustrator Hazel Presley, from the Ti Tree community in the Northern Territory, is a strong advocate for the elimination of trachoma. The disease remains prevalent among Aboriginal people living in remote communities in the Northern Territory, South Australia and Western Australia.

Hazel has written and illustrated The Trachoma Sore Eyes Story to spread the message of trachoma prevention and treatment in her community and across the Central Australia and Barkly regions. "If this prevents kids from going blind from a horrible disease later in life then I will be very happy," Hazel said.

The Foundation is supporting the translation of the book into other Aboriginal languages along with its distribution to schools and health centres. Hazel is also teaching children about trachoma through her songs, and her paintings. "Trachoma is everybody's business," she said.





HELPING PEOPLE SEE

- ▶ The Top End Outreach Ophthalmology Resources Project delivered specialist eye care services to 33 remote Aboriginal communities in the Top End of the Northern Territory, almost tripling the number of patients seen in previous years. The outreach team made more than 60 trips by plane, car or boat.
- ► We screened 2,383 people and supported 430 diabetic retinopathy procedures through outreach ophthalmology services in the Pilbara region of Western Australia, in partnership with the Royal Australian and New Zealand College of Ophthalmologists Eye Foundation and the Lions Eye Institute.
- ▶ With the help of our partners, 38 Aboriginal patients received cataract surgery at Alice Springs Hospital as part of an Intensive Eye Surgery week.

INVESTING IN PEOPLE

- ▶ We supported the training of 268 clinical and non-clinical staff and continued to fund the positions of eye health coordinators and Indigenous Liaison Officers.
- ► We trained 10 Aboriginal Community Based Workers to provide on-the-ground support and increase understanding about trachoma prevention, treatment and elimination.
- ▶ We helped the Apunipima Cape York Health Council increase its leadership in eye health through the recruitment of an eye health co-ordinator.

EQUIPMENT AND TECHNOLOGY

- ▶ We helped equip four new eye health clinics servicing the South East Queensland region.
- ► We provided ophthalmic equipment to eye health providers in the Torres Strait and Cape York regions.
- We provided diabetic retinopathy scanners to an Aboriginal Community Controlled Health Organisation and to the Lions Eye Institute for use in Western Australia.

ADVOCACY AND INFLUENCE

- ► In partnership with other eye health organisations, we supported the launch of the 10-year National Aboriginal and Torres Strait Islander Health Implementation Plan, which aims to Close the Gap between Aboriginal and Torres Strait Islander people and non-Indigenous Australians by 2025.
- ▶ We continued to advocate to the Australian Government to eliminate trachoma in Australia by 2020.
- ▶ We contributed to a national sector proposal to the Australian Government which secured additional funding for Aboriginal and Torres Strait Islander eye health.
- ► We funded the production and filming of a second instalment in the TV series, Looking Better, screened on a free to air network, which is raising awareness of eye health conditions among Aboriginal people in Central Australia.

A MAN OF VISION

Fred Hollows' crusade into outback Australia to carry out the National Trachoma and Eye Health Program fired up his sense of injustice and blazed the trail for improving Aboriginal and Torres Strait Islander eye health.

It was no surprise when 25 years ago Fred Hollows was named Australian of the Year. He dedicated his life to making sure the most vulnerable people in the world had access to high quality eve care.

It was the work Fred did outside operating theatres that made him one of the most famous people in Australia. As an eye doctor, Fred Hollows knew about the disparity between the lives of Aboriginal and Torres Strait Islander people and non-Indigenous Australians. But travelling across the country with a team of eye doctors, nurses and Indigenous Liaison Officers, Fred found entire communities suffering from advanced trachoma. Examining the patients was "like something out of the medical history books," he said.

The National Trachoma and Eye Health Program encountered "eye diseases of a kind and degree that hadn't been seen in western society for generations," he said. "The neglect... this implied, the suffering and wasted quality of human lives was appalling."

Between 1976 and 1979, Fred's team belted across Australia, visiting 465 rural and remote Aboriginal and Torres Strait Islander communities, testing for trachoma, treating it, and recording the data.

Afterwards, he captured headlines with press conferences about the scandalous health and conditions in Aboriginal and Torres Strait Islander communities.

Fred was offered the nation's highest honour, the Order of Australia, in 1985 for his work, but turned it down because of the lack of progress being made. "My God," he wrote. "This is not the time to be accepting accolades for pointing out problems in Aboriginal health."

Jaki Adams-Barton, The Manager of The Foundation's Indigenous Australia Program, said the "extraordinary achievements" of the 1970s program were only made more apparent by the recent sobering results of the Close the Gap campaign, which show the Government's efforts to improve Aboriginal health are "still a long way off the mark."

"Aboriginal and Torres Strait Islander people were seen as second class citizens at the time, so for a white guy in Sydney to want to go out there with a team and do something about Aboriginal health was just amazing for the time," she said.

"While significant progress has been made in eliminating trachoma in parts of Australia, the modern scourge of diabetes is on the rise, and we have to do everything we can to prevent it.

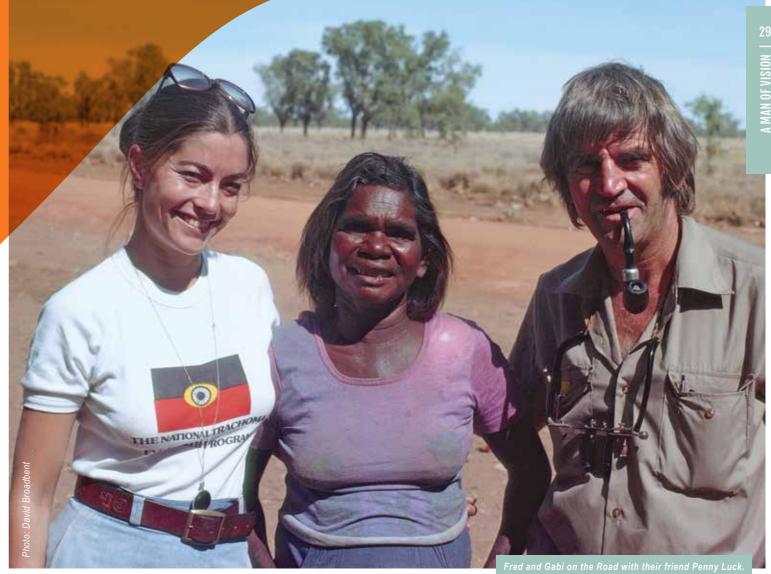
"Fred was welcomed with open arms on the trip because he respected the role of the Aboriginal Liaison Officers and the protocols of the local communities," she said.

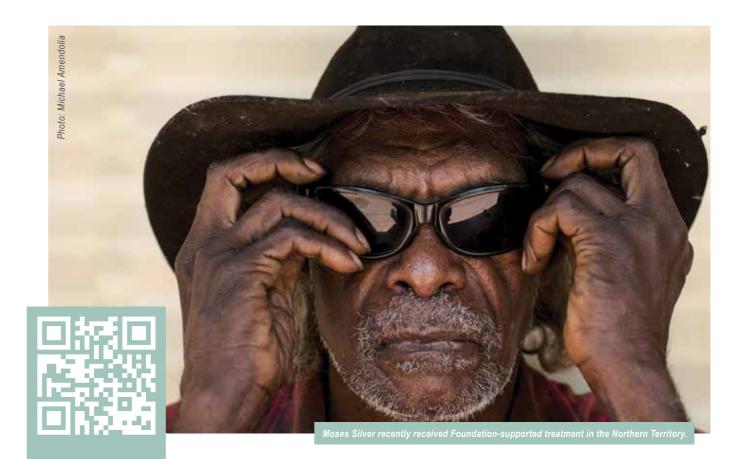
Gabi O'Sullivan, a young orthoptist from The Prince of Wales hospital, was right by Fred's side during the program and has continued to carry out her late husband's vision as our Founding Director.

"Fred was appalled by their lack of rights, and also set up the first National Aboriginal Health Service, which went on to help so many Indigenous Australians."

Fred was a man who kept his word, right up until his last breath.







OUR PARTNERS

AFGHANISTAN

University Eye Hospital Kabul, Ministry for Higher Education Afghanistan, Human Concern International.

AUSTRALIA

Aboriginal Medical Services Alliance NT, Aboriginal Peak Organisations NT, Apunipima Cape York Health Council, Australian Council For International Development, AFL Northern Territory, Anyinginyi Health Aboriginal Corporation, Australian Government - Department of Health, Australian Human Rights Commission, Barunga Festival, Belinda Mason Photography, Bila Muuji Aboriginal Health Service Incorporated, Bill Robertson Optometrists, Bourke Aboriginal Health Service Limited, Brewarrina Aboriginal Health Service Limited, Brien Holden Vision Institute, Burnet Institute, Central Australian Aboriginal Congress Inc, Central Australian Rural Practitioners Association, Centre for Eye Research Australia, Department of Foreign Affairs and Trade, Far West Medicare Local, Far Western NSW Local Health District, Google Australia, Indigenous Allied Health Alliance, Institute for Urban Indigenous Health, Katherine Regional Aboriginal Health and Related Services, Katherine West Health Board, Lions Eye Institute, Melbourne University Indigenous Eye Health Unit, Menzies School of Health Research, Michael Long Learning and Leadership Centre, Music NT, National Aboriginal Community Controlled Health Organisation, National Health and Medical Research Council, National Rural Health Alliance, National Trachoma Surveillance and Reporting Unit, Nganampa Health Council, NHMRC Clinical Trials Centre, Northern Territory Football Club, Northern Territory Government: Central Australian Health Services and Top End Health Services (Alice Springs Hospital, Gove District Hospital, Katherine District Hospital, Royal Darwin Hospital, Centre for Disease Control (Environmental Health Branch), Northern Territory Primary Health Network, Northern Territory Stolen Generations Aboriginal Corporation, Outback Eye Service, OPSM, Prince of Wales Hospital, Queensland Health – Torres Cape Hospital and Health Service, Queensland CheckUP, Royal Australian and New Zealand College of Ophthalmology Eye Foundation, Reconciliation Australia, Rural Doctors Network, Sironis Health, South Australian Health and Medical Research Institute, South Australian Institute for Ophthalmology, Sunrise Health Service, TEAMSNet (Telehealth and Associate Medical Services Network), The Centre for Eye Research Australia, The George Institute for Global Health, The Nossal Institute, The University of Sydney, Tullawon Health Service, Urapuntja Health Service, Vision 2020 Australia, Vision Cooperative Research Centre, Walaman Aboriginal Corporation, Walgett Aboriginal Medical Service Co-operative Limited, Wellington Aboriginal Corporation Health Service, Western NSW Local Health District, Western NSW Medicare Local, Wuchopperen Health Services Limited, Wurli-Wurlinjang Health Service, Yuendumu Women's Centre Aboriginal Corporation.

BANGLADESH

Bangladesh Institute of Research and Rehabilitation in Diabetes, Endocrine and Metabolic Disorders, Bangladesh National Institute of Ophthalmology and Hospital, Department of Health Services, Ministry of Health and Family Welfare Bangladesh, Chittagong Eye Infirmary and Training Complex, Ispahani Islamia Eye Institute and Hospital.

BURUNDI Clinique de l'Oeil.

CAMBODIA

National Program for Eye Health, University of Health Science, Cambodian Ophthalmological Society, Chey Chumneas Referral Hospital Eye Unit, Kampong Chhnang Provincial Referral Hospital Eye Unit, Kampong Speu Provincial Referral Hospital Eye Unit, Kampong Thom Provincial Referral Hospital Eye Unit, Neak Loeung Referral Hospital Eye Unit, Oddar Meanchey Provincial Referral Hospital Eye Unit, Pailin Provincial Referral Hospital Eve Unit, Preah Sihanouk Provincial Referral Hospital Eye Unit, Siem Reap Provincial Referral Hospital, Preah Vihea Referral Hospital, Khmer- Soviet Friendship Hospital, Phnom Penh Municipal Referral Hospital, Preah Ang Duong Hospital, Family Health Development, Krousar Thmey Blind School, The Association of the Blind in Cambodia, The Eye Care Foundation, World Vision Cambodia, Cambodia Development Mission for Disability, Brien Holden Vision Institute, Department of School Health, Provincial Department of Education in Kampong Chhnang Province, Provincial Department of Education in Kampong Speu Province, Provincial Department of Education in Kampong Thom Province, Provincial Department of Education in Kandal Province, Provincial Department of Education in Prey Veng Province, Department of Women and Health.

CHINA INCLUDING HONG KONG

The Australian Association of Hong Kong, The Australian Chamber of Commerce Hong Kong and Macau, The Australian Chinese Association of Hong Kong, China National Blindness Prevention Committee, Invest HK, Australian International School Hong Kong, Provincial Health and Family Planning Commission of Inner Mongolia, Provincial Education Department of Inner Mongolia, Provincial Disabled Persons' Federation of Inner Mongolia, Education Department of Inner Mongolia, Chaoju Ophthalmic Hospital Group of Red Cross Society of Inner Mongolia, International Mongolia Hospital of Inner Mongolia, People's Hospital of Duolun County, People's Hospital of Horqin Right Wing Middle Banner, People's Hospital of Taibus Banner, Provincial Health and Family Planning Commission of Anhui Province, Anhui Provincial Hospital, The 2nd People's Hospital of Huoqiu County, People's Hospital of Susong County, People's Hospital of Lixin County, Provincial Health and Family Planning Commission of Xinjiang Uygur Autonomous Region, People's Hospital of Xinjiang Uygur Autonomous Region, Adiya Eye Hospital of Hotan Prefecture, People's Hospital of Altay Prefecture, People's Hospital of Tacheng Prefecture, People's Hospital of Cele County, People's Hospital of Lancang County, People's Hospital of Jianchuan County, People's Hospital of Nanjiang, Zhongshan Ophthalmic Center.

DEMOCRATIC PEOPLE'S REPUBLIC OF KOREA

Tilganga Institute of Ophthalmology, Korean Federation for the Protection of the Disabled, Ministry of Public Health.

ERITREA

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

ETHIOPIA

The Federal Ministry of Health, Oromia Regional Health Bureau, Oromia Regional Education Bureau, Oromia Regional Water Mineral and Energy Bureau, Oromia Television and Radio Organisation, Fana Broadcasting Corporate, Oromia Bureau of Finance and Economic Development, International Trachoma Initiative, Light for the World, Orbis International, The Carter Center, Sightsavers International, RTI International, North Shewa Zone Health Department, North Shewa Zone Water Mineral and Energy Department, North Shewa Zone Education Department, Finfine Special Zone Health Department, Finfine Special Zone Water Mineral and Energy Department, Finfine Special Zone Education Department, West Shewa Zone Health Department, West Shewa Zone Water Mineral and Energy Department, West Shewa Zone Education Department, South West Shewa Zone Health Department, South West Shewa Zone Water Mineral and Energy Department, South West Shewa Zone Education Department, Jimma Zone Health Department, Jimma Zone Water Mineral and Energy Department, Jimma Zone Education Department, East Harerghe Zone Health Department, Ambo Hospital, Senen Gibe Hospital, Bissi Dimo Hospital, Shenen Gibe Hospital, Tulu Bolo Hospital, Fiche Hospital, Bisidimo Hospital, Ambo Hospital, Jimma University Specialized Hospital, Kuyu Hospital, The Fred Hollows Foundation UK.

INDONESIA

National Ministry of Health, Indonesian Ophthalmologists Association, Provincial Government of West Nusa Tenggara, BKMM Eye Hospital Mataram, West Nusa Tenggara District Health Services, Helen Keller International, CBM, Orbis International.

KENYA

Ministry of Health, Homa Bay District Hospital, Migori District Hospital, Nakuru Eye Unit, Migori Hospital, Kisumu Hospital, Nakuru Hospital, Kitale Hospital, Kabarnet Hospital, Lodwar Hospital, Busia Hospital, Siaya Hospital, Bungoma Hospital, Trans Mara Hospital, Kapenguria Hospital, Kitui Hospital, Maralal Hospital, College of Ophthalmology of East South Africa, Sightsavers International, Operation Eye Sight International, Brien Holden Vision Institute, Christian Blindness Mission, University of Nairobi, Kenya Medical Training College.

LAO PDR

Ministry of Health of Lao PDR, National Ophthalmology Centre and Provincial Departments of Health and Hospitals in Oudomxay, Bokeo, Phongsaly, Louangnamtha, Louangprabang, Xayabury and Vientiane.

NEPAL

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

PAKISTAN

Al-Ibrahim Eye Hospital, Al-Shifa Trust Eye Hospital, College of Ophthalmology and Allied Vision Sciences, Comprehensive Eye Care Cells in Punjab, Balochistan, Sindh and Khyber Pakhtoon Khwa, Khyber Eye Foundation, Leyton Rahmatullah Benevolent Trust, Pakistan Institute of Community Ophthalmology, Provincial Departments of Health in Punjab, Balochistan, Sindh and Khyber Pakhtoon Khwa, Education Department in Sindh, Balochistan, and Khyber Pakhtoon Khwa, National Program for Family Planning, Lahore General Hospital, Allied Hospital Faisalabad, Nishtar Hospital, Liaqat University of Medical and Health Science, Chandka Medical College, Hayatabad Medical Complex, Saidu Teaching Hospital, Ayub Medical Complex, Gomal Medical College.

PALESTINE

St John of Jerusalem Eye Hospital Group.

RWANDA

Ministry of Health, College of Medicine and Health Sciences, Rwanda International Institute of Ophthalmology, Rwamagana Referral Hospital, Ruhengeri Referral Hospital, Kinihira Provincial Hospital, Kibuye Referral Hospital, Bushenge Provincial Hospital, Nyamata District Hospital, Gahini District Hospital, Nyagatare District Hospital, Kibagabaga District Hospital, Masaka District Hospital, Butaro District Hospital, Ruli District Hospital, Byumba District Hospital, Kirinda District Hospital, Mugonero District

Hospital, Kabaya District Hospital, Muhororo District Hospital, Shyira District Hospital, Kibogora District Hospital, Gihundwe District Hospital, Murunda District Hospital.

SRI LANKA

Berendina Development Services, College of Ophthalmologists Sri Lanka, Government of Sri Lanka, Kandy Centre for Sight, Plantation Human Development Trust, Sarvodaya, The Palm Foundation.

THE PACIFIC

International Agency for the Prevention of Blindness Western Pacific, Fiji Ministry of Health, Kiribati Ministry of Health and Medical Services, Solomon Islands Ministry of Health and Medical Services, Vanuatu Ministry of Health, Pacific Eye Institute.

PHILIPPINES

Republic of the Philippines Department of Health, Provincial Government of Tarlac, Tarlac Provincial Hospital Eye Centre.

TIMOR-LESTE

The Fred Hollows Foundation New Zealand, Timor-Leste Ministry of Health, Guido Valadares Hospital Nacional, Fo Naroman Timor-Leste, The Royal Australasian College of Surgeons, Universidade Nacional Timor Lorosa'e.

VIETNAM

Ministry of Health, the Medicine Services Administration, People's Aid Coordinating Committee, Vietnam Union of Friendship Organisations, Vietnam National Institute of Ophthalmology, Thai Binh University of Medicine and Pharmacy, Hue University of Medicine and Pharmacy, Ho Chi Minh City Eye Hospital, and the Provincial Departments of Health, Provincial People's Committees and Social Diseases Prevention Centres, Eye Hospitals or Centres in Ha Giang, Thai Binh, Hai Duong, Hoa Binh, Ninh Binh, Ha Tinh, Quang Binh, Thua Thien-Hue, Quang Nam, Quang Ngai, Ninh Thuan, Da Nang, Dak Nong, Lam Dong, Vinh Long, and Tien Giang provinces.

GLOBAL PARTNERSHIPS

Brien Holden Vision Institute, Burnet Institute Centre for International Health, CBM, Centre for Global Development, College of Ophthalmology of Eastern Central and Southern Africa Community Eye Health Institute, East Africa Trachoma/ NTD Cross Border Partnership, EMR Alliance for Trachoma Control, Helen Keller International, Global Partnership for Education, HelpAge International, Himalayan Cataract Project, International Agency for the Prevention of Blindness, International Coalition for Trachoma Control, International Council of Ophthalmology, International Council of Nurses, International Diabetes Federation, International Trachoma Initiative, Johns Hopkins University, Kilimanjaro Centre for Community Ophthalmology, Light for the World, London School of Hygiene and Tropical Medicine, Magrabi ICO Cameroon Eye Institute, The NGDO NTD Network, ORBIS International, PricewaterhouseCoopers, RTI International, Quantum Catch Corporation, Sightsavers International, Social Eyes Corporation, Social Finance UK, Standard Chartered Bank, The Carter Center, The Fred Hollows Foundation New Zealand, The Fred Hollows Foundation UK, The Queen Elizabeth Diamond Jubilee Trust, The Royal Australian and New Zealand College of Ophthalmologists, The UK Coalition Against NTDs, United Kingdom Department for International Development, United States Agency for International Development, University of Cape Town, Wake Forest University, WaterAid, Witwatersrand University (SA College of Health Sciences), World Health Organization, The WHO Alliance for the Global Elimination of Trachoma by 2020, WJW Limited.

THANK YOU

OUR SUPPORTERS

It has been 23 years since Fred Hollows passed away, but your continued support is ensuring his vision and legacy remain. You come from all walks of life and support us as individuals, families, volunteers, corporations, workplaces and community organisations. The Fred Hollows Foundation can help restore sight for as little as \$25 in some of the countries where we work. We cannot thank you enough for continuing to support Fred's work. Together we are achieving his vision.

REGULAR GIVING

As a regular giver, you are a driving force behind The Foundation - helping us continue what Fred called "good honest work" and changing lives forever. In 2015, 16,916 Australians chose to become regular givers, pledging to support The Foundation with monthly gifts that helped restore sight.

The results in this Annual Report represent the change that you help us make in the lives of so many. Globally there are 32 million people who are blind simply because they don't have access to eye services. Our job is to change this - and through your monthly gifts we are reaching more people than ever before. None of this can happen without you. Thank you for believing that every eye is an eye, and that everyone's sight is worth saving.

AUSTRALIAN GOVERNMENT

In 2015, The Foundation received valuable support from the Australian Government through the Department of Foreign Affairs and Trade (DFAT), Australia's NGO Cooperation Program (ANCP), the Avoidable Blindness Initiative (ABI), the Pakistan Australia Prevention of Avoidable Blindness (PAPAB) Project, the Department of Prime Minister and Cabinet and through the Commonwealth Department of Health.



OUR SUPPORTERS 2015

Agility Logistics APA Group Aztec Services Baker & MacKenzie (Australia & NZ) Christie's Crossroads Hong Kong Dixie Cattle Company Dr Francis Maxwell Hooper Ernst & Young Freshfields Bruckhaus Deringer (Hong Kong) Gilbert + Tobin Lawyers HSBC Australia IAPB Western Pacific IB Hi-Fi Jeff and Gerry Underhill K&L Gates Laser Vision SA PwC Australia Qantas Loyalty Rotary Clubs of Australia Standard Chartered Bank The Miller Foundation The Queen Elizabeth Diamond Jubilee Trust The School for Excellence Travel Insurance Direct United Kingdom Department United States Agency for International Development Wild Women on Top



Last year's inaugural Melbourne Coastrek, together with the last six Sydney Coastreks have seen thousands complete the challenge, raising more than \$10.2 million for The Fred Hollows Foundation.

Founded by Wild Women on Top, the treks are fast becoming one of Australia's most popular charity challenges. With the aim to get people walking for fitness, fun and fundraising, the Sydney and Melbourne events are truly changing lives. More than \$2.8 million was raised at Sydney Coastrek 2015 and more than \$1.2 million was raised at the first Melbourne Coastrek.

YOUR WILL - KEEPING FRED'S VISION ALIVE

To the families and friends of those who gave an important gift in their will to The Foundation and also those who intend to leave a legacy, we can't thank you enough. Fred always encouraged people to "leave the world a better place" and because of your gifts we are able to do just that and allow Fred's vision to live on.

Fewer than half of all Australians know they can leave a gift in their will – yet many wish to help Fred's work continue. 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 hollows.org

ANU VISION

Aboriginal artist Langaliki's artwork was placed on Specsavers frames for the second time to raise funds to restore sight to Indigenous Australians. Langaliki is able to paint because of two cataract operations supported by The Fred Hollows Foundation.

The South Australian artist lives in Pukatja, 435 kilometres south west of Alice Springs, and paints in the colourful and dramatic style for which the Ernabella region is famous. Specsavers ambassador Christine Anu knows the importance of looking after eye health with Aboriginal and Torres Strait Islander adults six times more likely than other Australians to go blind. The ongoing support of Specsavers in Australia and New Zealand has raised \$1.5 million for The Foundation.





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 11 in December 2015. Of these 11, 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 were four Appointed Directors as of December 2015. The Board also appoints the Chair and Deputy Chair from among the existing Directors. With the exception of Gabi Hollows who occupies a special position as 'Founding Director' and has the right to lifetime membership, Directors are elected or appointed for three year terms and the Constitution sets limits on the maximum consecutive period people may serve on the Board.

THE ROLE OF THE BOARD

The Board is the trustee of the founding spirit and vision of The Foundation, and responsible for its good governance. It operates in accordance with principles and practices set out in its Corporate Governance Charter which is available at 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:

- Two of these committees support specific elements of the Board's governance responsibilities – the Governance and Nominations Committee and the Finance and Audit Committee.
- The other committee provides strategic 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 risk – the Programs and Partnerships Committee.

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.

MANAGEMENT AND STAFF

At the end of 2015, The Foundation had 306 paid staff, including 154 in-country staff based in our 14 overseas offices. During the year around 45 people were regular volunteers in the six offices in Australia (Sydney, Melbourne, Brisbane, Darwin, Alice Springs and Katherine) and many more gave valuable help on an as-needs basis, including volunteering for Coastrek.

As of December 2015, the Executive Management Group was comprised of: Brian Doolan – CEO; Daryn Deiley – Chief Operating Officer; Nick Martin – Director of Public Affairs; Lesley Podesta – Director Global Partnerships, Policy and Advocacy; Thomas White – Director of Programs 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, and the two Fred Hollows Intraocular Lens (IOL) laboratories in Eritrea and Nepal. In 2015 The Foundation also established a registered entity in Hong Kong - The Fred Hollows Foundation (HK) Limited.

In addition, The Foundation is:

- Represented by the CEO on the Board of Trustees of the International Agency for the Prevention of Blindness.
- A partner in 'VISION 2020: The Right to Sight' a global partnership between the IAPB and the World Health Organization with the goal of eradicating all forms of avoidable blindness by the year 2020.
- A member of the International Coalition for Trachoma Control.
- ► A member of Vision 2020 Australia.
- 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 and the prime contract holder of the Vision 2020 Australia Global Consortium, an unincorporated joint venture of six Australian eye health agencies that work internationally.
- A signatory and supporter of the Make Poverty History campaign.
- 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 signatory to the National Anti-Racism Strategy.
- ► A member of the Campaign for Australian Aid.

CASE STUDY: CHINA

Three years ago, the world of the music teacher Zengbao Li in Lancang County in south western China began to dim, when cataract began clouding his eyes.

It saddened Zengbao that he couldn't see his students' faces during his lessons teaching the lusheng, a reed instrument made of bamboo. But luckily, Zengbao was found by the screening team of the Lancang First People's Hospital, and brought in for surgery with a Foundationtrained surgeon. Once he could see, he was thrilled to be able to start teaching again.



THE BOARD OF DIRECTORS

As of December 2015



LES FALLICK CHAIR

Les was elected to the Board in 2010, serving as Chair until February 2013 and again from May 2014. An economist with a Master of Arts, Les has worked in government, the private sector, tertiary education and the trade union movement, and has authored

two books. He has been the Director of over 20 companies in Australia, the UK, Europe and Asia. Les also has considerable experience in the not-for-profit sector – including as past Chairman of the Carbon Advisory Board for Greening Australia. He has served on both the Governance and Nominations Committee and the Finance and Audit Committee. Les is currently a Director of The Fred Hollows Foundation Kenya and The Fred Hollows Foundation (HK) Limited.



ANN PORCINO DEPUTY CHAIR

Ann has been involved with The Foundation as a strategic planning consultant and facilitator since 2004 and joined the Board in 2013. She is a Founding Director of RPR Consulting, which provides governance, strategy, executive coaching and change

management services to a wide range of NGOs and government agencies. Ann holds an MBA and a BA in Health Services Administration. Ann is Chair of the Board's Programs and Partnerships Committee and is also a member of the Board's Governance and Nominations Committee. Ann resigned as both a Board member and Deputy Chair in February 2016.



THE HON. JOHN BRUMBY

John was elected Chair of The Board of The Foundation on 1 February 2016. Before that, he was a member and active supporter of The Foundation and joined the

Board in 2013. John is well known from his roles as the Premier of Victoria from 2007 to 2010 and as Treasurer from 2000 to 2007. Since retiring from the political arena, John has become the Chair of MTAA Super, an Independent Director of Huawei Technologies (Australia), the Chair of Citywide Solutions Pty Ltd and a Professorial Fellow at both Melbourne and Monash Universities. John is a member of the Board's Finance and Audit Committee.



HELEN EVANS

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 and the University of Melbourne. Helen is a board member of the Burnet Institute, and a member of The Fred Hollows Foundation's Programs and Partnerships Committee.

CHRISTINE HAWKINS

Christine was elected to the Board in 2015 after serving as an independent member of the Finance and Audit Committee since November 2010. Originally 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 and not-for-profit organisations. Concurrently, Christine has been a non-executive director of many companies in a range of industries and Chairman of several not-for-profit organisations. Christine 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 CPA and a Fellow of the Australian Institute of Company Directors.

The full Directors' Report for 2015 is available on The Foundation's website hollows.org or upon request by emailing fred@hollows.org or phoning 02 8741 1900.



GABI HOLLOWS

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. Gabi is the Patron of The Fred Hollows Foundation Regular Giving Program and undertakes extensive speaking engagements for The Foundation. She is a member of the Board's Governance and Nominations Committee, and Programs and Partnerships Committee.

MICHAEL JOHNSON



Michael has been involved with The Foundation from the very beginning and a member of the Board since its establishment in 1992. In 2014 Michael was invested as a Member of the Order of Australia (AM) for significant service

to the blind & those with low vision, to education, and to the community. He has served as Deputy Chair and is currently also a Director of The Fred Hollows Foundation Kenya and The Fred Hollows Foundation (HK) Limited. An Honorary Associate Professor in the School of Social Sciences at the University of NSW, Michael's professional field is development studies and public sector economics. He chairs the Board's Governance and Nominations Committee and is a member of the Finance and Audit Committee.



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 Royal Prince Alfred (RPA) Hospital in Sydney. Paul also acts as a Masters in Clinical Epidemiology. He is a Fellow of the Royal RPA's Executive Clinical Director, is Clinical Professor of Medicine Australian and New Zealand College of Ophthalmologists, has at the University of Sydney and Clinical Director of critical care written numerous papers on eye health, and contributed to a services for the Sydney Local Area Health District. He has worked book on The Foundation's work. Jamie is a member of the Board's for the World Health Organization (WHO) as a consultant in child health, particularly in the area of the Integrated Management of Governance and Nominations Committee and Programs and Partnership Committee. Childhood Illness (IMCI) program.



JOY SAVAGE

Joy joined the Board in 2013. An Indigenous woman from far North Queensland, Joy is the CEO of Aboriginal Hostels Ltd, which manages a national network of short-term accommodation facilities for Aboriginal and Torres Strait Islander people. In her previous

role as an Assistant Secretary in the Department of Prime Minister and Cabinet, Joy provided policy advice and coordination of the Government's Close the Gap and COAG's Indigenous Disadvantage agendas. She has also held senior public sector roles in the Commonwealth health portfolio and worked in senior management roles in the non-government sector in the field of Aboriginal health and community services for 16 years. Joy has an MBA and is a member of the Board's 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.



PAUL TORZILLO

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

STATEMENT OF COMPREHENSIVE INCOME

For the year ended 31 December 2015

	2015 \$000	2014 \$000
REVENUE		
Community and Corporate support		
- Donations and gifts	41,141	36,413
- Legacies and bequests	10,905	13,482
Grants		
- Department of Foreign Affairs and Trade (DFAT)	10,582	10,069
- Other Australian Government Departments	291	676
- Other Overseas	5,140	2,882
Net Gains/Losses on Investments at Fair Value	779	1,271
- Other Income	719	55
Total Revenue	69,557	64,848

EXPENDITURE

INTERNATIONAL AID & DEVELOPMENT PROGRAMS EXPENDITURE		
International Programs		
- Funds to international programs	29,518	28,131
- Program Support Costs	7,685	7,740
Community Education	3,839	2,582
Fundraising Costs		
- Public	11,007	9,383
- Government, Multilateral & Private	111	116
Accountability & Administration	3,843	3,502
Total International Aid & Development Programs Expenditure	56,003	51,454
DOMESTIC AID & DEVELOPMENT PROGRAMS EXPENDITURE		
Domestic Programs	7,595	8,264
Community Education	784	595
Fundraising Costs	2,270	2,185
Accountability & Administration	784	798
Total Domestic Aid & Development Programs Expenditure	11,433	11,842
Total Expenditure	67,436	63,296
Net surplus of income over expenditure Other comprehensive income	2,121	1,552
Total Comprehensive income(deficit) for the period	2,121	1,552

* During the financial years 2015 and 2014, The Fred Hollows Foundation had no transactions for international political or religious proselytisation programs. *No non-monetary donations or gifts were received during 2015 and 2014.

STATEMENT OF FINANCIAL POSITION

As at 31 December 2015

Α

	2015	2014
	\$000	\$000
ASSETS		
Current Assets		
- Cash and cash equivalents	5,952	4,788
- Other interest bearing deposits	5,260	6,010
- Trade and other receivables	4,249	2,306
- Prepayments	960	707
Total Current Assets	16,421	13,811
Non Current Assets		
- Investments at fair value	12,100	11,460
- Property, plant and equipment	2,263	2,402
Total Non Current Assets	14,363	13,862
Total Assets	30,784	27,673
LIABILITIES		
Current Liabilities		
- Trade and other payables	10,294	9,367
- Provisions	1,274	1,141
Total Current Liabilities	11,568	10,508
Non Current Liabilities		
- Provisions	244	230
- Deferred liability	52	136
Total Non Current Liabilities	296	366
Total Liabilities	11,864	10,874
Net Assets	18,920	16,799
EQUITY		
Accumulated Surplus	6,283	3,089
Contingency Reserve	12,637	13,710
Total Equity	18,920	16,799

* In 2015 The Foundation has disclosed separately the contingency reserve that is set aside primarily to protect against any catastrophic event resulting in cessation or significant reduction in income. The 2014 accounts have been restated for comparative purposes.

* At the end of the financial years 2015 and 2014 The Fred Hollows Foundation had Nil balances for Current Assets Inventories, Assets held for sale and Other financial assets, for Non Current Assets Trade and other receivables, Investment property, Intangibles and Other non - current assets, for Current Liabilities Net current tax liabilities, Other financial liabilities and Other, for Non Current Liabilities Other financial liabilities and Other. The Foundation had Nil balances for other Reserves at the end of the 2015 and 2014 financial years.

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

STATEMENT OF CHANGES IN EQUITY

For the year ended 31 December 2015

	ACCUMULATED FUNDS \$000	CONTINGENCY FUNDS \$000	TOTAL \$000
Balance at 1 January 2015	3,089	13,710	16,799
Movements in contingency reserves	1,073	(1,073)	-
Surplus for the year	2,121		2,121
As at 31 December 2015	6,283	12,637	18,920
Balance at 1 January 2014	2,547	12,700	15,247
Movements in contingency reserves	(1,010)	1,010	-
Surplus for the year	1,552	-	1,552
As at 31 December 2014	3,089	13,710	16,799

*In 2015 The Foundation has disclosed separately the contingency reserve that is set aside primarily to protect against any catastrophic event resulting in cessation or significant reduction in income. The 2014 accounts have been restated for comparative purposes.

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 2015.

2015 FINANCIAL OVERVIEW

All figures in Australian dollars

WHERE THE MONEY CAME FROM	\$000	SOURCE OF INCOME
Community and Corporate Support	52,046	
Income received from the Australian public and corporations, in the form of public donations, project grants, fundraising and bequests.		
Department of Foreign Affairs and Trade (DFAT)	10,582	COMMUNITY &
Grants received from the Australian Government's overseas aid program		CORPORATE SUPPORT
Other Australian Government Departments and Agencies	291	/5%
Grants received from other Government Departments for Indigenous programs		
Other Overseas Grants	5,140	
Grants received from Governments, Trusts & Foundations for International Programs		7% DFAT 15%
Net Gains/(losses) on investments at fair value	779	1%
Other Income	719	$1\% _{1\%}$ 0.4%
Total	69,557	

HOW THE MONEY WAS SPENT	\$000
Programs & Community Education	
- Africa	14,785
- South East Asia	13,154
- South Asia	6,952
- Pacific Region	1,955
- Middle East	357
- Indigenous Australia	7,595
- Community Education	4,623
Fundraising Expenses	
Public & Government/Multilateral fundraising	
Operating Expenses	
Accountability and Administration	
Total	
WHERE THE PROGRAM MONEY WAS SPENT	
Africa	

- South East Asia
- South Asia
- Pacific Region
- Middle East
- Indigenous Australia
- Community Education

Total

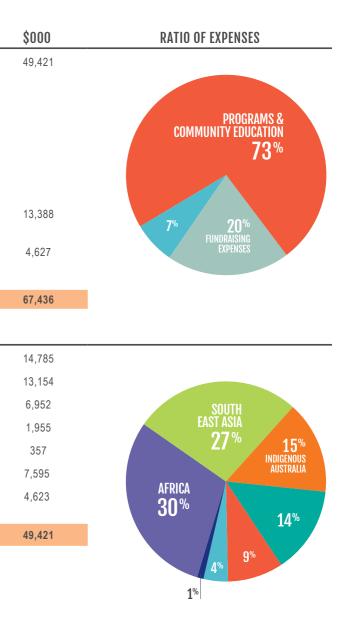
"Programs" includes expenditure on our development work across both international and Indigenous programs, as well as a small amount of expenditure on emergency relief.

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

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

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

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A NATION REBUILDS FROM THE RUINS

Eight months after a magnitude 7.8 earthquake devastated the Himalayan nation of Nepal, our partner hospital, the Tilganga Institute of Ophthalmology, resumed its outreach eye camps, allowing people in remote villages who would otherwise not receive any medical treatment to have sight restoring surgery.

The first of these was held in Nuwakot, north of Kathmandu, where more than 1,000 people were killed and 1,300 were injured. Purnizi Gurung was one of more than 288 people who had cataract surgery at the camp by the hospital's medical director, Dr Sanduk Ruit.

The 69-year-old was so elated after her bandages were removed and she could see again that she got up and danced. Dr Ruit estimates more than 3,000 people are without sight because of the natural disaster and there is much work to be done clearing the backlog.

Within 24 hours of the earthquake, the hospital had turned itself into a relief centre, distributing food and medical supplies to people in remote communities who had lost almost everything.

Last year The Foundation also launched an emergency relief appeal, raising more than \$64,000 for families affected by the earthquake.



VALUES IN Action

As Gabi Hollows puts it: "Fred treated all his patients the same way. Whether they were public or private, rich or poor, whether they lived in a remote community or a bustling city – he believed they all deserved the very best of care."

More than 20 years later, The Foundation set up in his name remains true to that vision. Fred's values are set out in our strategic plan. These are: integrity, collaboration, empowerment and action. We continue to reflect those principles in everything we do, wherever we work around the world.

RECONCILIATION

The Foundation's vision for reconciliation is grounded in Fred's deep commitment to, and respect for Aboriginal and Torres Strait Islander people.

In 2015, we:

- Continued to work with our partners to take high quality and specialist eye care services to Aboriginal and Torres Strait Islander people living in remote and under-serviced regions of Australia.
- Actively supported national advocacy campaigns including Close The Gap, Recognise (constitutional recognition), NAIDOC and Reconciliation Australia. We also acknowledged significant dates and ongoing recognition of Aboriginal and Torres Strait Islander peoples (culture and custodianship).
- Maintained a 50% employment rate of Aboriginal and/or Torres Strait Islander staff within our Indigenous Australia Program.



- Became a member of Supply Nation, which connects Indigenous businesses with corporations and government departments. This is part of our supplier diversity program which allows Indigenous businesses the opportunity to provide goods and services in our Australian operations.
- Continued to uphold our guiding principles, specifically in not competing for funding with Aboriginal and Torres Strait Islander organisations; only working where we are invited and where there is a demonstrated need; and ensuring our eye health projects are sustainable beyond The Foundation's investment, including a clear transition process.

EVALUATIONS & LESSONS LEARNT

The Foundation has rigorous monitoring processes that assist us to deliver effective and sustainable projects. We also conduct periodic evaluations to examine the quality and success of our projects.

In addition to conducting 13 evaluations and reviews on The Foundation's effectiveness and reach, in 2015 we undertook a comprehensive review of our evaluation process across nine countries. In 2016 we will use the findings of this review to ensure all our evaluations are high quality and inform new and innovative approaches to tackling avoidable blindness.

CASE STUDY: LAO PDR

Twin baby boys Samlan and Sintham were born blind from cataract. Had The Foundation not found them, they would have remained trapped in darkness their entire lives, unable to go to school and go on to lead fulfilling lives.

Despite their remote location in a small village in northern Laos, we organised a rescue team to ride the rapids of the Nam Tha River in a narrow wooden boat, and navigate the mountainous terrain in a four-wheel drive to bring the twins to the district capital of Huay Xai for surgery.

There, one of the country's Foundationtrained surgeons, Dr Phetsamone, skillfully removed their cataracts. The next day, when their bandages were removed, and their eyes were able to follow the doctor's torch for the first time, everyone was smiling with joy and relief– especially their mother. She knew her little boys' lives had just been changed forever.



Three-year-old Cesaria beamed with delight when she could see the world for the first time.

"Leave the world a better place."

S. C. Walder - -

- Professor Fred Hollows



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