

2014

Annual Report

728,788
EYE OPERATIONS
& TREATMENTS

**"I BELIEVE THE BASIC ATTRIBUTE OF
MANKIND IS TO LOOK AFTER EACH OTHER."**

Professor Fred Hollows

OUR GLOBAL IMPACT 2014

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

we're for
Australian Aid

 **The Fred Hollows**
Foundation

GLOBAL RESULTS

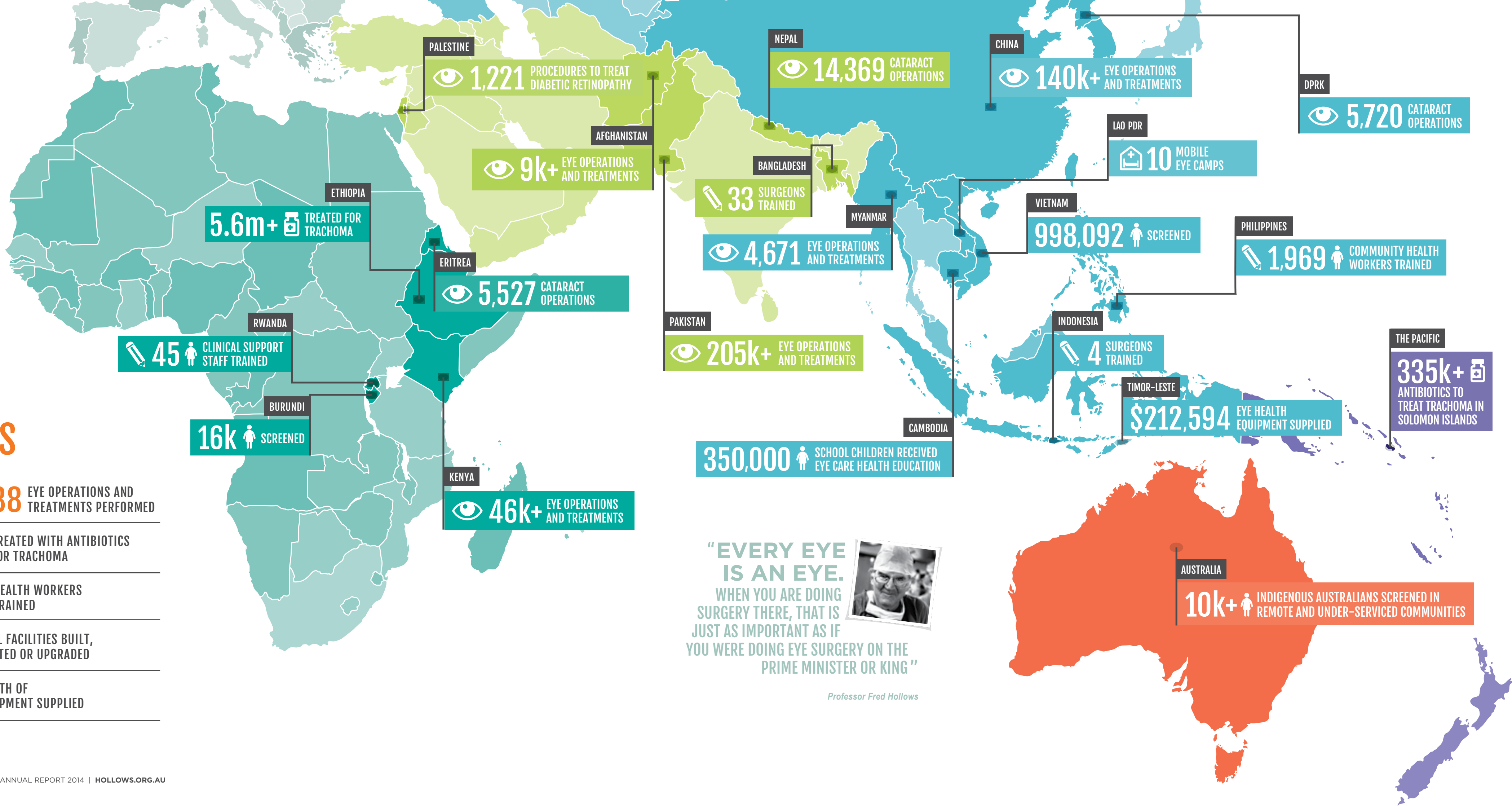
728,788 EYE OPERATIONS AND TREATMENTS PERFORMED

7m+ TREATED WITH ANTIBIOTICS FOR TRACHOMA

56k+ HEALTH WORKERS TRAINED

36 MEDICAL FACILITIES BUILT, RENOVATED OR UPGRADED

\$3.8m WORTH OF EQUIPMENT SUPPLIED



1,221 PROCEDURES TO TREAT DIABETIC RETINOPATHY

14,369 CATARACT OPERATIONS

140k+ EYE OPERATIONS AND TREATMENTS

5,720 CATARACT OPERATIONS

9k+ EYE OPERATIONS AND TREATMENTS

33 SURGEONS TRAINED

10 MOBILE EYE CAMPS

5.6m+ TREATED FOR TRACHOMA

4,671 EYE OPERATIONS AND TREATMENTS

998,092 SCREENED

1,969 COMMUNITY HEALTH WORKERS TRAINED

5,527 CATARACT OPERATIONS

205k+ EYE OPERATIONS AND TREATMENTS

4 SURGEONS TRAINED

45 CLINICAL SUPPORT STAFF TRAINED

335k+ ANTIBIOTICS TO TREAT TRACHOMA IN SOLOMON ISLANDS

16k SCREENED

350,000 SCHOOL CHILDREN RECEIVED EYE CARE HEALTH EDUCATION

\$212,594 EYE HEALTH EQUIPMENT SUPPLIED

46k+ EYE OPERATIONS AND TREATMENTS

"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

10k+ INDIGENOUS AUSTRALIANS SCREENED IN REMOTE AND UNDER-SERVICED COMMUNITIES



GABI HOLLOWS AO

A MESSAGE FROM THE FOUNDING DIRECTOR

Fred once said that having care and concern for others is the highest of human qualities.

He tirelessly worked to end avoidable blindness, here in remote Indigenous communities and overseas.

Fred's last days were spent working to improve eye health in Vietnam, Nepal and Eritrea – three countries where he knew he could make an impact, but places that needed modern cataract surgery - including low cost intraocular lenses.

He didn't see the final results, but from that initial vision grew The Fred Hollows Foundation. We now work in more than 25 countries worldwide and have restored sight to more than two million people.

It remains a burning injustice that four out of five people who are blind right now don't have to be. Their blindness can be avoided or can be treated.

We can all imagine being blind, and we can all understand the hope and opportunities that come when someone's sight is restored.

It is this message of hope that remains Fred's greatest legacy. It continues with the tens of thousands of doctors, nurses and community health workers trained last year. It continues for the patients in outreach eye camps in Nepal and Kenya. It is there for the mothers and children waiting for surgery and antibiotics in Ethiopia right now.

Every time we restore someone's sight, we restore their dignity, their independence, and their ability to go back to work. I'm amazed at what The Foundation has achieved in just over two decades. Fred would be so proud.

Our work is only possible because of the generosity of Australians. So many people from different walks of life continue to support us, and my thanks go out to each and every one of you. We simply could not do this without you.

Founding Director

ABOUT US



WHO WE ARE

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



OUR VISION

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



OUR INSPIRATION

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

CONTENTS

Message from the Chair	4
Message from the CEO	5
Helping People See	6
Investing in People	10
Equipment & Technology	14
Advocacy & Influence	18
Indigenous Australia Program	22
Eyes on Ethiopia	26
Our Partners	28
Thank you	30
Governance	32
The Board of Directors	34
Financials	36
Values in action	41



The Department of Foreign Affairs and Trade (DFAT) is the Australian Government agency responsible for managing Australia's overseas aid program. The aim of the Australian aid program is to promote Australia's national interests through contributing to international growth and poverty reduction. In 2014, the Australian Government contributed funding towards The Fred Hollows Foundation's programs in Afghanistan, Bangladesh, Cambodia, Ethiopia, Kenya, Lao PDR, Nepal, Pakistan, Palestinian Territories, Philippines, Timor-Leste and Vietnam.

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 CEO on 02 8741 1900 or emailing fhf@hollows.org.

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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.



LES FALLLICK

A MESSAGE FROM THE CHAIR

The Fred Hollows Foundation continues to make real progress towards our goal of ending avoidable blindness.

Every day, the staff and partners of The Foundation seek to make Fred's vision and values a reality. Fred took action where he saw inaction, and spoke up when others were silent. He was prepared to work with anyone who showed a commitment to the hard task ahead.

Sir Michael Hirst, the President of the International Diabetes Federation recently described us as "indisputably a world leader in the prevention of blindness and the delivery of quality eye health, often in difficult or risky environments."

Through our Strategic Plan we express Fred's values. Enacting these values - integrity, collaboration, empowerment and action - will keep us true to Fred's vision. They have become the moral compass of everything we do as we manage a period of strong growth.

As this Annual Report for 2014 shows, we have made further advances towards our goals. We continue our work to tackle the backlog of cataract surgeries and build sustainable local eye services. With our global partners we are taking meaningful steps to eliminate trachoma, a disease that should not exist in the modern world. We are trying to ensure that eye health is integrated into national health systems, and that it is appropriately resourced.

A shining example of this work is in Ethiopia, where we have begun an ambitious project to wipe out trachoma, the excruciatingly painful bacterial infection that causes inflammation of the eye and eyelids and can lead to irreversible blindness. Last year in Ethiopia thousands of community-based workers, trained and supported by The Foundation distributed antibiotics to over five million people. Surgical teams are going village to village to conduct operations on the most advanced cases.

We're also continuing to increase our response to the global epidemic of diabetic retinopathy. The number of people we have

screened this year reflects the priority we place on this growing epidemic. In 2013, 4,427 patients were screened or treated for diabetic retinopathy. In 2014, this had quadrupled to more than 16,000.

The credibility and professionalism we have developed from working in the field provides the basis for our global advocacy. Our growing international stature is reflected in the continuing major partnerships we have put in place with Helen Keller International and Sightsavers.

Support for The Foundation from Australian donors remains as steadfast as ever. Our growing digital presence has opened up new ways for donors and supporters to stay involved in the work of The Foundation every day.

Financially we remain in robust good health. We continue to pursue a cautious and sensible investment strategy that supports our strong balance sheet and financial position.

I thank my fellow Board members who have been crucial to ensuring this period of tremendous growth is carried out with transparency and agility. Each bring decades of experience in their various fields to our cause.

My thanks also to every member of staff of The Fred Hollows Foundation. Often they work in some of the most difficult and inaccessible regions of the world - just as Fred did.

Never has The Foundation been more focused, more connected with our values and more inspired by Fred's leadership and example. Thank you for your ongoing commitment to a world in which no one is needlessly blind. With your help, in our lifetime, we will achieve that goal.

Chair



BRIAN DOOLAN

A MESSAGE FROM THE CEO

Fred Hollows had a big dream. It is a dream that lives on in the work of The Fred Hollows Foundation. We believe that everybody, regardless of who they are, where they live or whether they are rich or poor, is entitled to live in a world free of avoidable blindness.

When we sit together with our partners in countries in East and South Asia, in Africa, the Pacific and here in Indigenous Australian communities, we look one another in the eye and acknowledge what it really means to make that dream come true. It means everyone who develops a cataract will be within reach of a service to stop that cataract sending them blind. It means horrible, painful, blinding trachoma will be eliminated from our world. It means every person who develops diabetes will have access to high quality eye care that will stop them losing their sight. Ending avoidable blindness means every country will have a strong national health system in which vision services are incorporated and properly resourced. It means, in short, all people, everywhere, having access to high quality, affordable eye health. That is what we mean when we say "ending avoidable blindness".

Our activities on the ground, continuing Fred's work, give The Foundation the lessons and the credibility to speak globally about how we bring Fred's dream into reality. Our programs tell us that people are going needlessly blind because they are poor; because eye health services are not being provided in rural and remote areas of most countries; because they are women. Women have a lesser role in controlling a family's expenditure, are restricted in travelling away from their village to seek treatment and are more likely to be affected by trachoma. The disease is transmitted through the children whom the sisters, mums and grandmothers are most likely to pick up, cuddle and thereby share the infection. People are going needlessly blind because governments will not, or cannot, meet their responsibility to care for the health of their citizens.

And so in 2014 we learnt lessons from our partners and from individuals in over 25 countries where we:

- Supported 728,788 eye operations and treatments including 119,805 cataract surgeries.
- Treated more than seven million people with antibiotics to combat trachoma.
- Provided 16,237 procedures to treat diabetic retinopathy.
- Examined the eyes of 2,993,829 people.
- Trained 56,544 people including 217 surgeons, 1,121 clinic support staff and 42,595 community health workers.
- Built or upgraded 36 medical facilities.
- Supplied \$3,812,644 in medical equipment.

We take those lessons into our global partnerships with other organisations, like the International Diabetes Federation, the World Health Organization, and with national governments in each of the countries in which we work. Here in Australia we focus on ensuring Aboriginal and Torres Strait Islander leadership in the provision of eye health services to rural and remote communities - the model that Fred championed in his own life.

The 2014 Annual Report of The Fred Hollows Foundation provides you with an insight into the work carried out, with your support, every single hour of every single day. That work will continue until we are done. And we will only be done when every person, regardless of who they are, where they live or whether they are rich or poor, is living in a world free of avoidable blindness.

CEO

HELPING PEOPLE SEE

The Foundation continues to support our partners to deliver eye health services on the ground in the regions where we work. In 2014 we continued to target the main causes of avoidable blindness such as cataract, trachoma, refractive error and the growing epidemic of diabetic retinopathy.



Photo: Michael Amendolia

“IT’S GOOD HONEST WORK WHEN YOU WALK INTO A WARD WHERE PEOPLE HAVE HAD GOOD EYE SURGERY...AND YOU CAN SEE THEM LOOKING AT YOU AND THEIR WHOLE FACE LIGHTS UP.”

Professor Fred Hollows




CASE STUDY: MYANMAR



BRIGHT STAR

Aung's granddaughter Lin was the light of his life. He called her Bright Star. She said she loved him "as much as the sky." But as cataract slowly blurred his sight, Lin, to his dismay, gradually became Aung's carer. He became increasingly dependent on her, and he began to worry about her future. If she couldn't attend school because she was looking after him, she'd never realise her dream of becoming a nurse. But thankfully, the pair were able to travel to Bago, Myanmar, to an eye camp supported by The Foundation, where Aung was operated on by the remarkable Nepalese surgeon Dr Sanduk Ruit. The operation was a complete success – Aung was able to return to his village and live a full life, and his little bright star was able to go back to school. When we restore sight we don't just help the patient - we also help their children, their grandchildren, and the whole community.

 **728,788**

EYE OPERATIONS AND TREATMENTS PERFORMED INCLUDING:


119,805 cataract operations

16,237 procedures to treat people with diabetic retinopathy

569,350 other sight saving or improving interventions

 **2.9m** PEOPLE WERE SCREENED

 **66,710** PAIRS OF GLASSES were distributed to people

7m+ PEOPLE RECEIVED ANTIBIOTICS FOR TRACHOMA 

CASE STUDY: BANGLADESH

REACHING THE UNREACHABLE

In a first for The Foundation, an eye camp was held for transgender people in Bangladesh, taking eye health to one of the most marginalised people of all. 106 locals, many of them sex workers, were screened at the camp. More than 30 received glasses and three were scheduled for cataract surgery. Country manager Dr Zareen Khair said that it was the first time many of them had been able to get an eye check or medical help for their eyes. "These groups do not feel they can freely mix with the general population and access the health service as they require," she said. "This is one of the ways we reach the most vulnerable – the disabled, the elderly, ethnic minorities and sex workers." That's something Fred would be incredibly proud of.



"WE OWE A GREAT DEBT TO THE FOUNDATION FOR ITS COMMITMENT IN WORKING TO ERADICATE AVOIDABLE GLOBAL BLINDNESS"

*Professor Dr Mohammed Daud Khan, Principal and Dean,
Pak International Medical College, Peshawar, Pakistan.*

Working with our partners here are some of the ways we are restoring hope around the world, one pair of eyes at a time.

IN AFGHANISTAN we screened a total of **74,789** people and conducted over **9,000** eye operations and treatments. This included **642** cataract operations. We also screened tens of thousands of school students for refractive error and distributed **2,842** pairs of glasses.

IN BANGLADESH we screened **384,072** people and conducted over **124,000** eye operations and treatments including **16,217** sight restoring cataract surgeries. We also performed **1,735** procedures to treat diabetic retinopathy and distributed over **15,000** pairs of glasses.

IN BURUNDI we supported **19** eye camps across Ngozi and Kayanza provinces. A total of **16,346** people were screened with **281** receiving sight restoring cataract surgery.

IN CAMBODIA we screened **107,634** people and performed over **13,000** eye operations and treatments including **8,775** cataract surgeries.

IN CHINA we performed over **140,000** eye operations and treatments and distributed over **10,000** pairs of glasses. The Foundation became the first International charity to work with ethnic minorities in Xinjiang to help with the delivery of eye services. We also launched projects in Inner Mongolia and Anhui.

IN THE DEMOCRATIC PEOPLE'S REPUBLIC OF KOREA through our Nepalese partner the Tilganga Institute of Ophthalmology we supported an outreach eye camp where **5,720** sight restoring cataract operations were performed.

IN ERITREA we performed **5,527** cataract operations and distributed over **43,000** antibiotics for the treatment of trachoma.

IN ETHIOPIA **5,637,226** people were treated with antibiotics for trachoma and over **7,000** lid surgeries to treat trichiasis were performed.

IN KENYA we treated over **1 million** people with antibiotics for trachoma. We performed over **46,000** eye operations and treatments including **8,695** cataract and **6,052** trichiasis surgeries.

IN LAO PDR we supported **10** mobile eye camps in some of the most remote regions of the country. We screened **14,794** people and conducted almost **8,000** eye operations and treatments.

IN MYANMAR we worked in partnership with the Tilganga Institute of Ophthalmology to conduct outreach eye camps in Yangon and Myeik where **4,671** cataract operations were performed.

IN NEPAL we screened **374,922** people and performed **14,369** cataract operations. We helped support **19** outreach microsurgical eye camps in rural and remote areas.

IN THE PACIFIC more than **335,000** Solomon Islanders received antibiotics to treat trachoma. We also screened **3,655** people in Vanuatu.

IN PAKISTAN we screened over **434,000** people and performed over **205,000** eye operations and treatments including **17,576** sight restoring cataract surgeries.

IN PALESTINE with our partner St John's hospital we screened over **16,000** people, including in refugee camps, for diabetic retinopathy (DR). We supported **1,221** procedures to treat DR.

IN THE PHILIPPINES the country's first Rapid Assessment of Avoidable Blindness, which measures the number of people who are blind, was completed in Tarlac Province. We also supported **3,322** eye operations and treatments.

IN RWANDA we screened **26,582** people for a range of eye conditions and performed **439** sight restoring cataract operations.

IN TIMOR-LESTE in partnership with The Fred Hollows Foundation New Zealand, we screened **21,405** people and performed **2,791** eye operations and treatments including **864** cataract surgeries. We also distributed **5,790** pairs of glasses.

IN VIETNAM we screened **998,092** people and performed **58,619** eye operations and treatments including **28,496** cataract surgeries.

TOTAL EYE OPERATIONS AND TREATMENTS PERFORMED

2014

728,788

2013

449,768

INVESTING IN PEOPLE

Training people - from community health workers to ophthalmologists - so that they can recognise, refer, diagnose and treat eye problems remains a mainstay of our work. It's something Fred always thought was paramount for long-term sustainability and building local capacity.

**"YOU HAVE TO IMPART SKILLS
AND TECHNOLOGY AND HELP
THEM HELP
THEMSELVES."**



Professor Fred Hollows



CASE STUDY: COMMUNITY HEALTH WORKERS

DOORSTEP DIAGNOSIS

Community health workers are a vital link between patients and eye health services. Trained by The Foundation, they go door to door, diagnosing a range of medical conditions, and referring patients on to medical clinics, hospitals and doctors. In 2014, we trained 42,595 teachers and community health workers in primary eye care. In Kenya, they distribute antibiotics to prevent trachoma. In Ethiopia, many are teachers who educate their students on the importance of preventative measures such as face washing to keep the disease at bay. In Australia, they speak the local language of remote Indigenous communities, and thereby dramatically increase the number of people who turn up for eye examinations and treatment.

 **56k+**

HEALTH WORKERS WERE TRAINED, INCLUDING:

 **217** SURGEONS

 **1,121** CLINIC SUPPORT STAFF

 **42,595** TEACHERS AND COMMUNITY HEALTH WORKERS

 **18** SCHOLARSHIPS WERE PROVIDED TO OPHTHALMOLOGISTS

**CASE STUDY:
TRAINING SURGEONS**

MIRACLE DOCTORS

Training surgeons remains a backbone of our work and last year we trained 217 surgeons from all corners of the world. Some were trained as specialists such as paediatric surgeons, restoring sight to children. Others were trained in Small Incision Cataract Surgery, under the tutelage of the great Nepalese ophthalmologist Dr Sanduk Ruit in Kathmandu. Many others have begun specialising in the treatment of diabetic retinopathy, in an effort to stem the tide of this new global epidemic. Thanks to the skillful work of our surgeons, we are able to restore the sight and transform the lives of countless people living in some of the most remote, and under-served communities in the world.



“I HAVE THE DEEPEST ADMIRATION FOR THE WORK OF THE FRED HOLLOWES FOUNDATION, WHICH HAS TRANSFORMED EYE CARE IN TIMOR-LESTE AFTER YEARS OF INFRASTRUCTURE INVESTMENT, TRAINING AND CAPACITY BUILDING”

*Jose Ramos-Horta GCL AC,
former President of Timor-Leste 2007-2012*

Working with our partners here are some of the ways we ensured local people were trained.

IN AFGHANISTAN 1,389 teachers and community health workers were trained. As a result, tens of thousands of students were screened and hundreds were provided with glasses.

IN BANGLADESH we trained 33 surgeons and 6,227 community health workers. We also trained school teachers in how to detect refractive error.

IN CAMBODIA we supported the training of 11 surgeons, 82 clinic support staff and 5,469 community health workers. Approximately 350,000 school children received eye health education.

IN CHINA we trained 30 surgeons, 108 clinic support staff and 2,320 community health workers and teachers.

IN THE DEMOCRATIC PEOPLE'S REPUBLIC OF KOREA four surgeons were trained in Small Incision Cataract Surgery at the Tilganga Institute of Ophthalmology.

IN ERITREA cataract surgeons are being trained in Small Incision Cataract Surgery and 110 community health workers were trained.

IN ETHIOPIA 5,403 teachers and community health workers were trained.

IN INDONESIA we trained four surgeons, 38 clinic support staff and 544 community health workers.

IN KENYA we trained 15 surgeons, 439 clinic support staff and 4,061 community health workers.

IN LAO PDR we trained four surgeons, 129 clinic support staff and 882 community health workers.

IN MYANMAR for the very first time two ophthalmologists were sent to the world renowned Tilganga Institute of Ophthalmology to receive Small Incision Cataract Surgery training.

IN NEPAL we trained six surgeons, 34 clinic support staff and 2,779 community health workers.

IN PAKISTAN we trained five surgeons, 27 clinic support staff and 4,429 community health workers. We also continued to support Lady Health Workers who are trained in basic health care to help housebound women and children to get to hospital.

IN THE PHILIPPINES almost 2,000 village health workers and school nurses were given eye examination training at the Tarlac Eye Centre.

IN RWANDA we trained one surgeon and 45 clinic support staff.

IN TIMOR-LESTE The Foundation helped train and build a small health workforce in eye care, from village health workers to eye care nurses and technicians, and four junior ophthalmology candidates.

IN VIETNAM we trained 19 surgeons, 57 clinic support staff and 5,817 community health workers.

We funded 15 International Council of Ophthalmology scholarships which help ophthalmologists in all the countries we work in to learn specialist skills. In the spirit of Fred Hollows we also ensured that young Australian ophthalmologists were exposed to eye care in under-served communities through The Fred Hollows Foundation Fellowship. Three fellowships were undertaken in 2014.

TOTAL NUMBER OF HEALTH WORKERS TRAINED



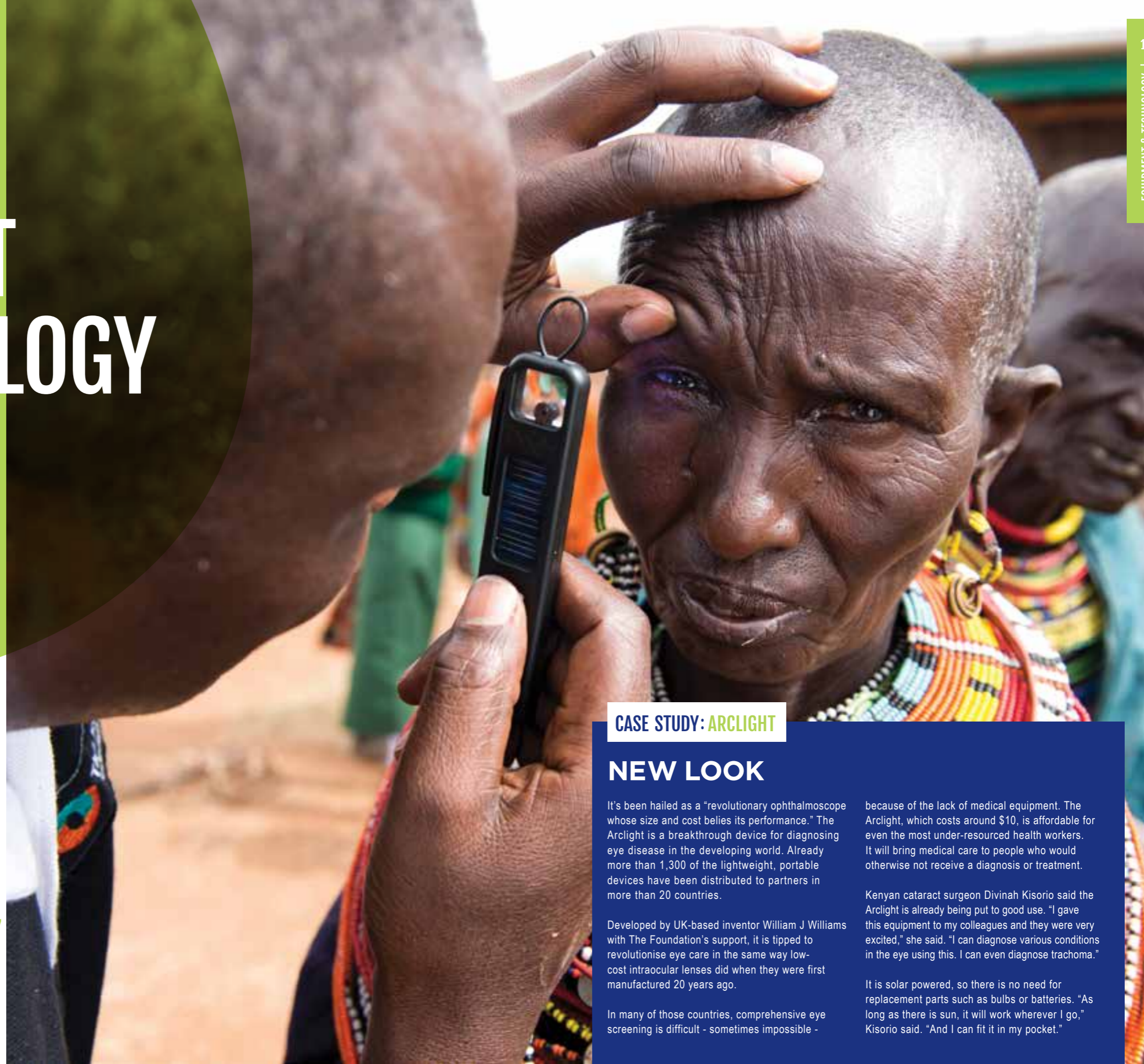
EQUIPMENT & TECHNOLOGY

Fred Hollows believed people should be given the tools of the trade to be able to help themselves, and The Foundation continues to ensure that health workers on the frontline have the equipment they need to restore sight. We are also backing the development of new technology to help bring affordable eye care to the developing world.

“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



CASE STUDY: ARCLIGHT

NEW LOOK

It's been hailed as a "revolutionary ophthalmoscope whose size and cost belies its performance." The Arclight is a breakthrough device for diagnosing eye disease in the developing world. Already more than 1,300 of the lightweight, portable devices have been distributed to partners in more than 20 countries.

Developed by UK-based inventor William J Williams with The Foundation's support, it is tipped to revolutionise eye care in the same way low-cost intraocular lenses did when they were first manufactured 20 years ago.


In many of those countries, comprehensive eye screening is difficult - sometimes impossible -

because of the lack of medical equipment. The Arclight, which costs around \$10, is affordable for even the most under-resourced health workers. It will bring medical care to people who would otherwise not receive a diagnosis or treatment.

Kenyan cataract surgeon Divinah Kisorio said the Arclight is already being put to good use. "I gave this equipment to my colleagues and they were very excited," she said. "I can diagnose various conditions in the eye using this. I can even diagnose trachoma."

It is solar powered, so there is no need for replacement parts such as bulbs or batteries. "As long as there is sun, it will work wherever I go," Kisorio said. "And I can fit it in my pocket."

36 
MEDICAL FACILITIES WERE BUILT,
RENOVATED OR UPGRADED

 **\$3.8m**
WORTH OF EQUIPMENT
WAS SUPPLIED

 **ARCLIGHT** A
LOW-COST OPHTHALMOSCOPE
WAS DISTRIBUTED TO MORE
THAN 20 COUNTRIES

CASE STUDY: CAMBODIA

HOSPITALS AND CLINICS

Eight-year-old Bopreak is examined by Dr Ny Tharoth at Khmer-Soviet Friendship Hospital in Phnom Penh, prior to receiving cataract surgery. In 2014, The Foundation continued to support the hospital's transformation into a training facility that is helping build Cambodia's eye health workforce. Investment in facilities such as this provides the capacity for children like Bopreak to receive the essential eye health services they need.



"THE FRED HOLLOWS FOUNDATION HAS ACHIEVED MAJOR BREAKTHROUGHS IN THE USE OF INNOVATIVE TECHNOLOGY TO PREVENT AVOIDABLE BLINDNESS"

Sir Michael Hirst, President, International Diabetes Federation

Here are some of the ways we are providing our partners with what they need to treat avoidable blindness.

The Foundation helped develop and produce the arclight, a low-cost, solar powered LED ophthalmoscope which has been distributed to partners in more than 20 countries.

IN AFGHANISTAN we renovated and equipped the Outpatient Department and Operating Theatre of the University Eye Hospital in Kabul, in preparation to train doctors and eye care workers.

IN BANGLADESH we upgraded the Barisal branch of the Ispahani Islamia Eye Institute and Hospital.

IN CAMBODIA the construction of a new Eye Unit at Sihanouk Province Referral Hospital was completed. Equipment for the National Refraction Training Centre was also set up at Khmer-Soviet Friendship Hospital in Phnom Penh. The Centre, supported by The Foundation, will train many to screen for refractive error and dispense glasses. **\$276,740** worth of equipment was donated.

IN CHINA we renovated 12 facilities including equipping three vision centres in county hospitals in Inner Mongolia.

IN ETHIOPIA we supplied **\$126,747** worth of equipment essential for tackling trachoma in Oromia region.

IN INDONESIA we supplied **\$157,730** worth of essential eye health equipment.

IN KENYA a review of the electronic Health Information System was conducted in hospitals across the country. We also upgraded two eye health facilities and donated **\$485,773** worth of equipment.

IN MYANMAR we supplied **\$103,437** worth of eye health equipment to Yangon Eye Hospital.

IN PAKISTAN we upgraded **nine** facilities including Civil Hospital Hyderabad Sindh which is now able to provide diabetic retinopathy screening services. We also donated **\$264,521** worth of equipment.

IN TIMOR-LESTE The Foundation launched a database to collect national data on eye health, making it easier for doctors to keep patient records. We also donated **\$212,594** worth of essential eye health equipment.

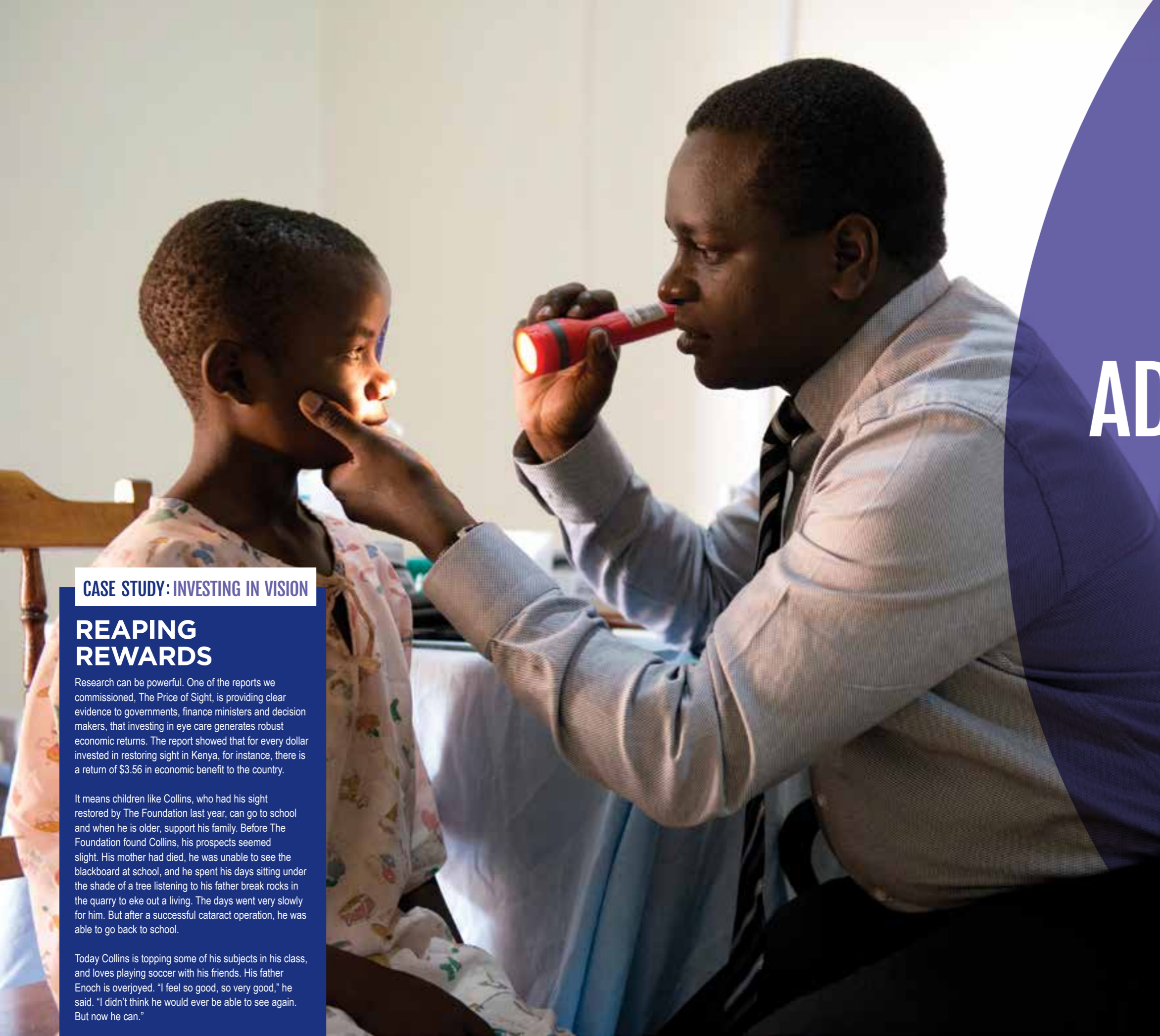
IN VIETNAM The Foundation helped build an eye clinic in Quang Nam Province which services 1.5 million people. The operating theatre and wards at the Ha Tinh Province Eye Centre were completed. **\$693,714** worth of equipment was donated.

CASE STUDY: INTRAOCULAR LENSES (IOLs)

A HISTORY OF INNOVATION

In the final years of his life, Fred worked furiously towards the opening of intraocular lens laboratories in Eritrea and Nepal. He understood that the cost of these lenses, often hundreds of dollars each, was a major barrier for people living in the developing world. Australians rallied behind Fred and his big idea and in 1994, one year after Fred passed away, two laboratories were opened in his name – one in Asmara and one in Kathmandu. Today these laboratories have manufactured over 6 million lenses for export to more than 70 countries. The lenses themselves can cost as little as \$5 each bringing affordable, sight restoring surgery within the reach of millions.





ADVOCACY & INFLUENCE

CASE STUDY: INVESTING IN VISION

REAPING REWARDS

Research can be powerful. One of the reports we commissioned, *The Price of Sight*, is providing clear evidence to governments, finance ministers and decision makers, that investing in eye care generates robust economic returns. The report showed that for every dollar invested in restoring sight in Kenya, for instance, there is a return of \$3.56 in economic benefit to the country.

It means children like Collins, who had his sight restored by The Foundation last year, can go to school and when he is older, support his family. Before The Foundation found Collins, his prospects seemed slight. His mother had died, he was unable to see the blackboard at school, and he spent his days sitting under the shade of a tree listening to his father break rocks in the quarry to eke out a living. The days went very slowly for him. But after a successful cataract operation, he was able to go back to school.

Today Collins is topping some of his subjects in his class, and loves playing soccer with his friends. His father Enoch is overjoyed. "I feel so good, so very good," he said. "I didn't think he would ever be able to see again. But now he can."

Research and advocacy continue to mean better eye health services for people around the world. In countries where The Fred Hollows Foundation operates, we've seen improvements in national and provincial eye care driven by targeted research and advocacy. Increased funding for eye health ensures that more people who are currently unable to see can have their sight restored. Here are some highlights from 2014.



Photo: Sam Phelps

THE PRICE OF SIGHT REPORT

Fred believed restoring sight was money well spent. Now we have the evidence. A series of landmark reports commissioned from PricewaterhouseCoopers Australia show the economic benefits of eliminating blindness in developing countries far outweigh the costs. The report showed that every dollar invested in restoring sight generated an economic return on investment of \$4.

In 2014, we applied the same methodology to three countries on the economic value of restoring sight. It showed that in Pakistan, for every \$1 invested in blindness prevention work, there is a potential return of \$6 in economic gains and health savings. For every \$1 invested in Kenya, the return is \$3.56 and for Yunnan Province, one of the poorest regions in China, the return on investment is \$3.16. Along with the human value, ending avoidable blindness will pay big dividends for developing nations, and is expected to inject billions of dollars into the poorest economies.

Many of the results restored sight brings - longer and healthier lives, reductions in extreme poverty, increased school attendance, gender equality, independence and self-esteem - simply cannot be quantified financially.

\$4 ECONOMIC RETURN FOR EVERY \$1 INVESTED



THE VISIONARY STUDY

In partnership with The George Institute for Global Health, we explored the impact of cataract surgery on patients in Vietnam. The results, published in 2014, show that 17% fewer patients experienced social and economic hardship following cataract surgery. The study adds to growing global evidence on the economic benefits of restoring sight through cataract surgery.

The study found that following cataract surgery there was an average increase in participation in paid work of 45 hours per month and a doubling in participation in hours of unpaid work. One year after surgery, people who had undergone cataract surgery reported they were able to walk independently, socialise a lot more easily, and felt much healthier and happier.

17% FEWER PATIENTS EXPERIENCED SOCIAL AND ECONOMIC HARDSHIP



BETTER VISION AND HEALTHY AGEING RESEARCH ACTION PROJECT

We continued to support the Burnet Institute, through a study which aims to improve the health and vision for elders in South and South East Asia. This study aims to test the benefits of eye health for the elderly, as well as screening as many as possible, carrying out cataract surgery and providing glasses. So far, 78 elders have been trained to conduct vision screening workshops. This study also explores how elderly people living in remote areas such as tea plantations in Sri Lanka access health care in their communities. Working with the government and NGOs, we helped establish 204 Elders Clubs where people can access eye health advice. This project is removing some of the health obstacles that elders face and will ultimately benefit more than 80,000 older Sri Lankans.

204 CLUBS WHERE OLDER SRI LANKANS CAN ACCESS EYE HEALTH ADVICE

“THE FRED HOLLOWES FOUNDATION DESERVES RECOGNITION AS A GLOBAL LEADER IN THE ALLEVIATION OF BLINDNESS AND VISUAL IMPAIRMENT”

The Right Honourable Helen Clark, Administrator of the United Nations Development Programme, Former Prime Minister of New Zealand 1999-2008

Country Highlights – Advocacy and Influence.

IN BANGLADESH The Fred Hollows Foundation's district eye care model was replicated by the National Government in Patuakhali and Chittagong district hospitals. Previously there were no cataract surgeries being conducted in this 250 bed Patuakhali facility but now the eye unit is delivering services to some of the most disadvantaged members of the community.

IN CAMBODIA the opportunity to address gender equality in eye health began with the signing of a Memorandum of Understanding between The Foundation and The Ministry of Women's Affairs.

IN CHINA we co-funded The Price Project. Working together with rural hospitals in China, the project aims to create, study and advocate for a model that can be adopted by the government to provide free glasses for school aged children.

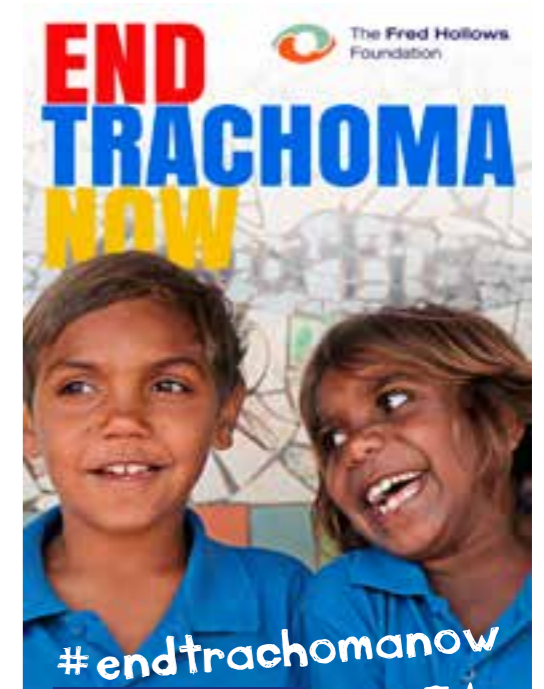
IN CHINA we continued to advocate for the elimination of avoidable blindness by working with the National Blindness Prevention Committee to bring together key government officials and members of the ophthalmic community.

IN LAO PDR we helped re-establish the National Eye Care Committee. Chaired by the Vice Minister of Health, the committee will steer eye health services towards a sustainable future.

IN PAKISTAN we launched the Pakistan-Australian Prevention of Avoidable Blindness (PAPAB) Project. With support from the Australian government over four years, this project aims to strengthen eye health in Pakistan, targeting emerging issues such as diabetic retinopathy, retinopathy of prematurity and childhood blindness.

IN PAKISTAN we developed a partnership with different provincial Departments of Education to establish new ways of screening school children for conditions such as refractive error.

Across the globe International World Sight Day provided The Fred Hollows Foundation with the opportunity to increase awareness of eye health through a combination of activities including rallies, engagement with local media, and eye camps which targeted disadvantaged groups.



SPEAKING OUT



5,000+ PEOPLE INCLUDING 36 MPs AND SENATORS SIGNED OUR ONLINE PETITION urging the Australian government to stand by its promise to eliminate trachoma in Australia by 2020.

10,000+ AUSTRALIANS SIGNED OUR ONLINE PETITION AGAINST FURTHER CUTS TO THE AUSTRALIAN AID BUDGET

The Fred Hollows Foundation

@FredHollows | Fredhollowsau

INDIGENOUS AUSTRALIA PROGRAM

Although Fred Hollows died more than 20 years ago, his fierce determination to improve the eye health of Aboriginal and Torres Strait Islander Australians lives on through The Foundation.

Aboriginal and Torres Strait Islander people are six times more likely to go blind; but 94 per cent of vision loss for Indigenous Australian adults is preventable or treatable.

In 2014, we continued to build our work with partners, including the Aboriginal community controlled health sector, in regions across Australia to increase specialist eye care services to even more people living in remote and under-served communities.

We continued our efforts to advocate for improved health outcomes and close the gap in life expectancy between Indigenous and non-Indigenous Australians.

Photo: Michael Amendolia



CASE STUDY: MOSES AND JOYCIE SILVER

BLIND, BUT SOON THEY'LL SEE

Like many of the residents of Mataranka, 400 kilometres south of Darwin, Moses Silver is rarely able to visit a big city hospital. But thanks to the Top End Outreach program funded by The Foundation and the Northern Territory government, he was able to walk across the red-baked earth to see an ophthalmologist who had driven there from Darwin. His wife Joycie was also seen for a trauma in her eye and encouraged to go to Darwin for surgery. Indigenous Australians like Moses and Joycie are 12 times more likely to suffer blinding cataracts, but seven times less likely than others to get simple sight-saving surgery.

10,284 PEOPLE IN REMOTE AND UNDER-SERVED COMMUNITIES were screened and provided with optometry and ophthalmology services.

793 CATARACT SURGERIES PERFORMED

296 DIABETIC RETINOPATHY PROCEDURES

51 OTHER SIGHT SAVING INTERVENTIONS in the Northern Territory, Western NSW and the Pilbara region of Western Australia.

75 PRIMARY HEALTH CARE WORKERS across Australia were supported to detect eye disease and refer patients for further treatment.

35 INDIGENOUS AUSTRALIANS from the Aboriginal community controlled health sector were trained as leaders. We supported the production of the short film, "Step Up" which showcases Indigenous leaders talking about the importance of leadership.

HELPING PEOPLE SEE

- ▶ Working with our partners we are improving eye health services for Indigenous Australians living in remote and under-served areas. We continued to fund the Top End Outreach Ophthalmology Resources Project which assists the Royal Darwin Hospital Eye Clinic to reach people who would otherwise have limited access to eye care services. The team consists of an ophthalmology fellow, a care co-ordinator and an Indigenous Liaison Officer who make weekly visits to remote areas by plane or car.
- ▶ We funded an orthoptist to provide eye health services to Indigenous Australians living in Western NSW.

INVESTING IN PEOPLE

- ▶ We funded five eye health coordinator positions to provide logistical and clinical support to outreach optometrists and ophthalmologists in the Northern Territory.
- ▶ We continued to support the employment and training of Aboriginal Community Based workers to join the Trachoma Elimination Program in remote communities across the Northern Territory. The workers increase participation in trachoma screening and the uptake of preventative face washing.
- ▶ We financed a four-year project in South Australia's Anangu Pitjantjara Yankunytjara (APY) Lands that funded an additional doctor, three nurses and other support staff to tackle chronic disease, eye health and improve child health. As a result, all 268 (100 per cent) of Anangu children aged between six months and six years were fully immunised; and growth checks were performed on all of 158 Anangu children under three years.



"UNTIL ABORIGINAL PEOPLE SHARE THE SAME BASIC CONDITIONS OF HYGIENE, SOUND DIET, INSECT PROOF HOUSING, SANITATION AND CLEAN WATER... IN RURAL PARTS OF THE COUNTRY...[THEY]...WILL CONTINUE TO BE AFFLICTED WITH AVOIDABLE DISEASE SUCH AS TRACHOMA."



Professor Fred Hollows

Photo: Alan McDonald

CASE STUDY: TELEHEALTH

OUTBACK EYE CARE

One of the biggest improvements in our ability to help Indigenous Australians is the recent roll-out of telehealth, which enables doctors in remote communities to tap into expertise from afar.

One of the many people who have already benefited from this technology is Dennis Jefferies, pictured above, from Jigalong in the Pilbara in Western Australia. The 58-year-old Martu man has diabetes and a complication that affects the eyes called diabetic retinopathy which can lead to blindness if left untreated.

Luckily, his local Aboriginal community controlled health clinic hosted an eye health screening led by The Lions Eye Institute, supported by The Fred Hollows Foundation.

Using face-to-face video conferencing and electronic scanning, optometrist Stephen Copeland was able to screen Dennis in consultation with Associate Professor Angus Turner in Perth, an ophthalmologist more than 1,000 kilometers away. Dennis was then flown to Port Hedland for a successful cataract operation. "I feel a lot better now," he said.

EQUIPMENT AND TECHNOLOGY

- ▶ The Foundation donated specialist eye health equipment to eight primary and eye health services working in remote and under-served regions in Queensland, NSW, WA and the Northern Territory. This enables more Indigenous Australians to access eye care services and support the integration of diabetic retinopathy (DR) screening services to primary health care services.
- ▶ Through our partners we supported the provision of affordable glasses to those in need. Uncorrected refractive error remains the number one cause of vision loss among Indigenous adults.

ADVOCACY AND INFLUENCE

- ▶ We funded and supported the South Australian Health and Medical Research Institute to undertake a cost benefit analysis of diabetic retinopathy screening in remote communities. The goal was to evaluate the economic effectiveness of the Telehealth and Eye Associate Medical Services Network (TEAMSNet) model.
- ▶ The Foundation funded the printing, promotion, and book launch of a children's book about how to prevent trachoma, the "Sore Eyes Story" book by Hazel Presley, a local Aboriginal author from Ti Tree community in the Northern Territory.

EYES ON ETHIOPIA

Trachoma, a disease of poverty, is placing entire generations of people – especially mothers and children – at risk of blindness. In one of our most ambitious campaigns ever, The Foundation is working with the Ethiopian government and international partners to stamp out the disease for good.

Photography by Michael Amendolia



Trachoma, a bacterial infection that can eventually cause irreversible blindness, was eradicated from the US more than a century ago. Yet in Ethiopia, more than 76 million people are at risk of contracting trachoma, people like Azmera Tedessie, pictured above.

It is a scourge which is prevalent in hot dusty areas where people lack access to clean water and sanitation.

CEO Brian Doolan says the results are catastrophic. "It is a disaster which is being played out every day as countless people go needlessly blind."

"If left untreated, the eyelashes turn inward, scraping the cornea, leading to agonisingly painful blindness."

The scale of the problem is daunting. Ethiopia has the highest burden of trachoma in the world. In the Oromia region, where The Foundation is focusing its efforts, more than 27 million people live in trachoma endemic areas. An estimated 150,000 are in need of urgent surgery.

But in one of our most ambitious programs yet, we are determined to wipe out the problem entirely within five years. We've already treated millions with an antibiotic to prevent the disease, and have conducted thousands of surgeries on the most advanced cases. An army of community based workers is being trained to carry out our work, often going door to door and village to village to help.

The Foundation's Technical Adviser on trachoma, Dr Wondu Alemayehu, said what was so heartbreaking is that the worst cases are among mothers and children. It is often children who first contract the disease. Unfortunately, there are few symptoms, but what they pass onto their mothers and carers is dangerous. The simple act of caring for a child - cuddling, touching, and even washing - can spread infection. Left untreated, they can lose their sight altogether.

Like many sufferers, Azmera used the worrento, a type of tweezer,

to pluck out her eyelashes one by one in a desperate bid to save her sight and reduce the pain. She wore these around her neck as she went about her day, cooking and caring for her family, including her two children, 12-year-old Habtamresh and 10-year-old Derese.

She was the lynchpin of her family. The mere thought of taking a pair of tweezers to your eyelashes would probably make most people uncomfortable. Yet for thousands of women like Azmera, it is their only defence against this agonisingly painful disease.

Azmera had advanced trachoma on both lower lids, but thanks to surgery, her eyelashes are now turned outwards and her cornea spared. Like countless others, her sight was saved, and her life was transformed, because of our campaign.

After six years of pain, she looked up at Dr Wondu after the operation and said, "Now I can see my children. I can go back to work and live a better life. I am just so happy."

Surgery is the first aspect of a four-part strategy The Foundation is carrying out known as SAFE, endorsed by the World Health Organization. The A stands for antibiotics to treat the infection. F is for face washing education to prevent the disease, and E refers to making environmental improvements at a community level.

Our CEO was struck by the power of the strategy watching a mother of seven children with chronic trachoma undergo surgery.

In the operating theatre, the surgeon said to her, "Are you OK? Are you in pain?" The woman simply replied. "I don't care, just take away the pain of my eyes, take away the pain of trachoma."

"After the operation, which was successful, the mother, her husband and their children, had their life restored," he said. "That's the miracle of this work."



ETHIOPIA: 2014 RESULTS

5.6m+ ANTIBIOTICS DISTRIBUTED

36 SURGEONS TRAINED

7,000+ TRICHIASIS SURGERIES PERFORMED

26 WELLS DUG

14 LATRINES BUILT IN 7 SCHOOLS

139k STUDENTS EDUCATED ABOUT FACE WASHING

OUR PARTNERS

AFGHANISTAN

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

AUSTRALIA

Aboriginal Medical Services Alliance NT (AMSANT), Aboriginal Peak Organisations NT (APONT), Australian Council for International Development ACFID, AFL Northern Territory, Anyinginy Health Aboriginal Corporation, Australian Government - Department of Health, Australian Human Rights Commission, Barunga Festival, Bila Muuji Aboriginal Health Service Incorporated, Bourke Aboriginal Health Service Limited, Brewarrina Aboriginal Health Service Limited, Brien Holden Vision Institute (BHVI), Burnet Institute, Central Australian Aboriginal Congress, Far West Medicare Local, Far Western NSW Local Health District, Institute for Urban Indigenous Health, Katherine Regional Aboriginal Health and Related Service (KRAHRS), Katherine West Health Board, Lions Eye Institute, Menzies School of Health Research, Miwatj Health Aboriginal Cooperation, Music NT, National Aboriginal Community Controlled Health Organisation (NAACHO), National Health and Medical Research Council, Nganampa Health Council, NHMRC Clinical Trials Centre, Northern Territory Government Department of Health- Alice Springs Hospital, Gove District Hospital, Katherine District Hospital, Royal Darwin Hospital, Centre for Disease Control, Outback Eye Service, PricewaterhouseCoopers Australia, RANZCO Eye Foundation, Reconciliation Australia, Rural Doctors Network, Sironis Health, South Australian Health and Medical Research Institute, Sunrise Health Service, The Australian Centre for Social Innovation, The Centre for Eye Research Australia, The George Institute for Global Health, The University of Melbourne- Indigenous Eye Health Unit, The University of Sydney, Urapuntja Health Service, Vision2020 Australia, Vision Cooperative Research Centre (BHVI), Walaman Aboriginal Corporation, Walgett Aboriginal Medical Service Co-operative Limited, Wellington Aboriginal Corporation Health Service, Western NSW Local Health District, Western NSW Medicare Local, 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

Ministry of Health and Ngozi Hospital.

CAMBODIA

Cambodian Development for Disability, Chey Chumneas Referral Hospital Eye Unit (Kandal), Family Health Development, Kampong Chhnang Provincial Referral Hospital Eye Unit, Kampong Speu Provincial Referral Hospital Eye Unit, Kampong Thom Provincial Referral Hospital Eye Unit,

Khmer- Soviet Friendship Hospital (Phnom Penh), Krousar Thmey, Neak Loeung Referral Hospital Eye Unit (Prey Veng), Oddar Meanchey Provincial Referral Hospital Eye Unit, Pailin Provincial Referral Hospital Eye Unit, Phnom Penh Municipal Referral Hospital, Preah Ang Duong Hospital (Phnom Penh), Preah Sihanouk Provincial Referral Hospital Eye Unit, 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, Siem Reap Provincial Referral Hospital, The Association of the Blind in Cambodia, The Eye Care Foundation and World Vision Cambodia.

CHINA

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.

ERITREA

Asmara College of Health Sciences and 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 Bureau of Finance and Economic Development, International Trachoma Initiative, Light for the World, Amhara Regional Health Bureau, University of Gondar, 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

“THE FRED HOLLOWES FOUNDATION’S COMMITMENT TO COLLABORATION SETS IT APART FROM OTHER ORGANISATIONS”

Sir Michael Hirst, President, International Diabetes Federation

Shewa Zone Education Department, Jimma Zone Health Department, Jimma Zone Water, Mineral and Energy Department, Jimma Zone Education Department, Ambo Hospital, Kuyu Hospital, Shenen Gibe Hospital, The Fred Hollows Foundation (UK).

INDONESIA

A New Vision, Indonesian Central Ministry of Health, Indonesian Ophthalmologists Association (Perdami) and Provincial Governments of West Nusa Tenggara (NTB).

KENYA

Ministry of Health, Kenya Medical Training College, University of Nairobi, 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 (COECSA), Christian Blind Mission (CBM), Operation Eye Sight Universal, The Fred Hollows Foundation (UK).

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.

MYANMAR

Tilganga Institute of Ophthalmology, Yangon Eye Hospital

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 and Tilganga Institute of Ophthalmology, The Fred Hollows Foundation (UK).

PAKISTAN

Al-Ibrahim Eye Hospital, Al-Shifa Trust Eye Hospital, College of Ophthalmology and Allied Vision Sciences, Comprehensive Eye Care Cells (Punjab, Balochistan, Sindh and Khyber Pakhtoon Khwa), Khyber Eye Foundation (Peshawar), Leyton Rahmatullah Benevolent Trust, Pakistan Institute of Community Ophthalmology and Provincial Departments of Health (Punjab, Balochistan, Sindh and Khyber Pakhtoon Khwa).

PALESTINE

St John of Jerusalem Eye Hospital.

RWANDA

Ministry of Health, Gisenyi Hospital, Muhororo Hospital, Kabaya Hospital, Shyira Hospital, Kirinda Hospital, Kibuye Hospital, Mugonero Hospital, Murunda Hospital, Rwamagana Hospital, Gihundwe Hospital, Kibilizi Hospital, Nyagatare Hospital, College of Medicine and Health Sciences, Rwanda International Institute of Ophthalmology, Kabgayi Eye Hospital. We also work with the following partners to strength Human Resources in Africa: College of Ophthalmology of Eastern, Central and Southern Africa (COECSA), University of Cape Town (UCT), Community Eye Health Institute (CEHI), Witwatersrand University, SA College of Health Sciences, IAPB Africa, Kilimanjaro Centre for Community Ophthalmology

SRI LANKA

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

THE PACIFIC

IAPB Western Pacific, Fiji Ministry of Health, Kiribati Ministry of Health & Medical Services, Solomon Islands Ministry of Health and Medical Services, Vanuatu Ministry of Health

THE PHILIPPINES

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

TIMOR-LESTE

The Fred Hollows Foundation New Zealand, Timor-Leste Ministry of Health, Fo Naroman Timor-Leste, The Royal Australasian College of Surgeons.

VIETNAM

Ministry of Health, the Medicine Services Administration, People's Aid Coordinating Committee, Vietnam Union of Friendship Organisations, and Vietnam National Institute of Ophthalmology. Thai Binh and Hue Universities of Medicine and Pharmacy, Ho Chi Minh City Eye Hospital, and the Departments of Health, Provincial People's Committees and Eye Centres or Social Diseases Prevention Centres in all provinces where we work.

GLOBAL PARTNERSHIPS

Brien Holden Vision Institute, CBM, Centre for Global Development, College of Ophthalmology of Eastern, Central and Southern Africa, Community Eye Health Institute, EMR Alliance for Trachoma Control, Helen Keller International, Global Partnership for Education, HelpAge International, Himalayan Cataract Project, International Agency for the Prevention of Blindness (IAPB), International Coalition for Trachoma Control, International Council of Ophthalmology, 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, ORBIS, Pacific Eye Institute, RTI, Quantum Catch Corporation, Sightsavers, Social Eyes Corporation, Social Finance UK, South Asian Association for Cooperation (Academy of Ophthalmology), TEAMSNet (Telehealth and Associate Medical Services Network), The Carter Center, The Fred Hollows Foundation New Zealand, The Nossal Institute, The Queen Elizabeth Diamond Jubilee Trust, The Royal Australian and New Zealand College of Ophthalmologists, United Kingdom Department for International Development, University of Cape Town (UCT), Water Aid, Witwatersrand University (SA College of Health Sciences), World Health Organisation and WJW Limited.

WE CANNOT THANK YOU ENOUGH FOR CONTINUING TO SUPPORT FRED'S WORK. TOGETHER WE ARE ACHIEVING HIS VISION

OUR SUPPORTERS

It has been more than 20 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 simply could not do this important work without you. Thank you.

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 2014, over 13,000 Australians became regular givers, pledging to support The Foundation with monthly gifts that helped restore sight to those living in darkness. The results in this Annual Report represent the change that you help us make in the lives of so many.

Globally there are millions of 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 2014, 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, and through the Commonwealth Department of Health.



Tiwi Islanders who took part in Coastrek

Photo: David Hancock/SkyScans

SYDNEY COASTREK

Sydney Coastrek organised by Di Westaway, Lisa Marshall and the team at Wild Women on Top has grown exponentially since it began in 2009. In its first year, Sydney Coastrek comprised 45 teams raising \$28,902 for The Foundation. In 2014, WWOT handed a cheque for \$2.5 million to The Foundation.

More than 600 teams participated in 2014, trekking along Sydney's spectacular harbour, stunning beaches and cliff-top walks. Some walked 50km either during the day or the night whilst others set themselves a 100km challenge.

The Foundation's Ambassadors, Australian Olympic gold medallist swimmer Susie O'Neill and former AFL player Aaron Davey were just two of the thousands of people who walked Sydney Coastrek this year. A team of visually impaired trekkers also finished the course.

Sydney Coastrek has become one of the most popular charity challenges in Sydney.

With the aim to get women walking for fitness, fun and fundraising, Sydney Coastrek is truly changing lives.

Photo: Barry Skipsey



Gabi Hollows with Indigenous artist Langaliki giving one of her paintings to Specsavers for the design of one of their frames

OUR SUPPORTERS 2014

- ABC
- Agility Logistics
- APA Group
- Blackwoods
- Dixie Cattle Company
- Dr Francis Maxwell Hooper
- Ernst & Young
- Gilbert + Tobin Lawyers
- Google
- IAPB Western Pacific
- JCDecaux
- Jetmaster
- Laser Vision SA
- PwC
- Qantas Loyalty
- Rotary Clubs of Australia
- Russell McMurray
- Specsavers
- Standard Chartered Bank
- The Miller Foundation
- The School for Excellence
- Thick as Thieves
- Wild Women on Top
- Travel Insurance Direct
- The Queen Elizabeth Diamond Jubilee Trust

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 want to say thank you. 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.

Less than half of 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 ensure that we can continue our sight-saving work. For more information, visit www.hollows.org.au

"THE FOUNDATION'S ACHIEVEMENTS ARE TESTAMENT TO THE WONDERFUL FRIENDS AND SUPPORTERS WHO HELP US TO KEEP FRED'S LEGACY ALIVE."

Gabi Hollows, Founding Director

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 2014. 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 in 2014. The Board also appoints the Chair and Deputy Chair from amongst 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 on the website.

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 four 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
- ▶ Two provide strategic advice to the Board on program development – the Medical Advisory Committee and the Program Advisory 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 2014, The Foundation had 276 paid staff, including 152 in-country staff based in our 13 overseas offices. During the year around 52 people were regular volunteers in the six offices in Australia (Sydney, Melbourne, Brisbane, Darwin, Katherine, and Alice Springs), and many more gave valuable help on an as-needs basis.

As of December 2014, the Executive Management Group was comprised of: Brian Doolan – CEO; Martyn Dominy – Chief Operating Officer; Nick Martin – Director of Public Affairs; Lesley Podesta – Director Global Partnerships, Policy and Advocacy; Nicola Stewart – Associate Director of Marketing and Fundraising; and Thomas White – Director of Programs.

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.

The Foundation also has an entity incorporated 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, which aims to achieve the United Nations' Millennium Development Goals by 2015
- ▶ 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.



CASE STUDY: LAOS

HAO'S STORY

Hao, a little boy from Northern Laos, was carried into one of our clinics by his father. He was blind in both eyes from cataract. Unable to walk independently, he'd had to shuffle tentatively behind his older brother, holding his hand. He had to leave school because he couldn't see the blackboard. But thanks to a successful operation by one of our surgeons, he can now see extremely well. We recently followed up on Hao and found him leading a happy life with his family in his mountain village, and playing soccer with his friends. And just as importantly, Hao now attends school where he is one of the brightest students in the class. He is just one of the many people whose lives have been transformed by The Foundation.

THE BOARD OF DIRECTORS

As of December 2014



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.



ROBERT R. DALZIEL

Bob has been a member of the Board since 2004, serving as Chair from 2013 until May 2014. With over 40 years of experience in retail, logistics, travel, marketing, telecommunications and the healthcare industry, he is currently Chairman of Pacwel Pty Ltd, Deputy Chairman of the Melbourne Rebels Rugby Union Ltd, Chairman of Wine Preserva and a Director of Dacland Management. Bob also has substantial experience in the not-for-profit sector, having formerly chaired the Salvation Army Red Shield and served as a Director on the Australian Rugby Union board. In The Foundation, Bob has served on The Foundation's Finance and Audit Committee and is a member of the Governance and Nominations 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 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.



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.



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. She is a member of the Board's Governance and Nominations Committee.



KATHY FARRELL

Kathy was appointed to the Board in mid-2013. She is a Judge of the Federal Court of Australia, Deputy President of the Australian Competition Tribunal and a Director of the National Institute of Company Directors. Kathy's current judicial role follows a 30-year career as a corporate lawyer and a non-executive Director in a diverse range of industries. She was President of the Takeovers Panel and has also held office and been active in many professional associations and NGOs. Kathy is a member of the Board's 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 a Masters in Clinical Epidemiology. He is a Fellow of the Royal Australian and New Zealand College of Ophthalmologists, has written numerous papers on eye health, and contributed to a book on The Foundation's work. Jamie chairs the Board's Medical Advisory Committee.



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 Royal Prince Alfred (RPA) Hospital in Sydney. Paul also acts as RPA's Executive Clinical Director, is Clinical Professor of Medicine at the University of Sydney and Clinical Director of critical care services for the Sydney Local Area Health District. He has worked for the World Health Organization (WHO) as consultant in Child Health, particularly in the area of the Integrated Management of Childhood Illness (IMCI) program. Paul is a member of the Board's Medical Advisory Committee.



JOHN BRUMBY

John has been a member and active supporter of The Foundation for many years 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.



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. Gabi was recently 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 Foundation's Miracle Club and undertakes extensive speaking engagements for The Foundation. She is a member of the Board's Governance and Nominations Committee.



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 Assistant Secretary for Indigenous Policy and Citizenship in the Department of Prime Minister and Cabinet, Joy helped lead policy and program implementation around the government's Close the Gap and COAG's Indigenous Disadvantage agendas. She has also held senior public sector posts in the health portfolio and worked 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 Program Advisory Committee.

The Board also thanks a number of non-Directors who generously contributed their expertise to its Committees during the year:

- PROGRAM ADVISORY COMMITTEE - Sarah Elliot, Jo Thomson
- FINANCE AND AUDIT COMMITTEE – Christine Hawkins
- MEDICAL ADVISORY COMMITTEE – Dr David Moran, Dr Stephanie Young, Dr Tim Henderson, Dr Neil Murray, Dr Katherine Smallcombe and Dr Richard Wormald

The full Directors' Report for 2014 is available on The Foundation's website WWW.HOLLOWS.ORG.AU or upon request by emailing FRED@HOLLOWS.ORG or phoning 02 8741 1900.

FINANCIAL OVERVIEW

STATEMENT OF COMPREHENSIVE INCOME

For the year ended 31 December 2014

	2014 (\$)	2013 (\$)
REVENUE		
Community and Corporate support		
- Donations and gifts	36,413,190	33,288,038
- Legacies and bequests	13,482,096	9,319,294
Grants		
- Department of Foreign Affairs and Trade (DFAT)	10,068,606	10,482,277
- Other Australian Government Departments	675,916	694,970
- Other Overseas	2,881,788	1,689,423
Net Gains/Losses on Investments at Fair Value		
- Other Income	1,270,717	1,986,213
	56,198	699,215
Total Revenue	64,848,511	58,159,430
EXPENDITURE		
INTERNATIONAL AID & DEVELOPMENT PROGRAMS EXPENDITURE		
International Programs		
- Funds to international programs	28,131,209	26,645,292
- Program Support Costs	7,740,316	6,230,060
Community Education	2,582,142	2,231,506
Fundraising Costs		
- Public	9,383,081	8,288,509
- Government, Multilateral & Private	115,820	83,165
Accountability & Administration	3,501,701	3,084,141
Total International Aid & Development Programs Expenditure	51,454,269	46,562,673
DOMESTIC AID & DEVELOPMENT PROGRAMS EXPENDITURE		
Domestic Programs	8,264,210	8,610,774
Community Education	595,232	584,812
Fundraising Costs	2,184,825	2,179,517
Accountability & Administration	797,507	798,987
Total Domestic Aid & Development Programs Expenditure	11,841,774	12,174,090
Total Expenditure	63,296,043	58,736,763
Net surplus/(deficit) of income over expenditure	1,552,468	(577,333)
Other comprehensive income	-	-
Total Comprehensive income(deficit) for the period	1,552,468	(577,333)

* In 2014 The Foundation prepared consolidated financial statements incorporating the subsidiaries, The Fred Hollows Foundation (UK) and The Fred Hollows Foundation Kenya. The 2013 accounts have been restated on a consolidated basis for comparative purposes.

* During the financial years 2014 and 2013, The Fred Hollows Foundation had no transactions for international political or religious proselytisation programs.

* No non monetary donations or gifts were received during 2014 and 2013

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

We have audited the extraction of the attached Summary of Financial Reports of The Fred Hollows Foundation ("the Summary") for the year ended 31 December 2014. The financial information contained in the Summary has been extracted from the Financial Report of The Fred Hollows Foundation for the year ended 31 December 2014, upon which we expressed an unmodified audit opinion.

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

Auditor's Responsibility
Our audit of the financial report of The Fred Hollows Foundation was conducted in accordance with Australian Auditing Standards in order to provide reasonable assurance as to whether the financial report was free from material misstatement. The nature of an audit is influenced by factors such as the use of professional judgement, selective testing, the inherent limitations of internal controls and the availability of persuasive rather than conclusive evidence. Therefore, an audit cannot guarantee that all material misstatements have been detected. For a better understanding of the scope of our audit of the financial report of The Fred Hollows Foundation, this opinion should be read in conjunction with our audit opinion on The Fred Hollows Foundation's financial report for the year ended 31 December 2014. We have not performed audit procedures subsequent to the issuing of our audit opinion on the financial report of The Fred Hollows Foundation.

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

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

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

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Page 2

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

Opinion
In our opinion, in all material respects, the Summary of Financial Reports of The Fred Hollows Foundation is properly extracted from the audited financial report of The Fred Hollows Foundation for the financial year ended 31 December 2014.

Basis of Accounting
The Summary of Financial Reports is prepared to assist the directors of The Fred Hollows Foundation to meet the requirements of the Australian Council for International Development (ACFID) Code of Conduct. The summary has been extracted from the audited financial report of The Fred Hollows Foundation for the financial year ended 31 December 2014 which was prepared in accordance with Australian Accounting Standards and the Corporations Act 2001.

[Signature]
Ernst & Young

[Signature]
Kieren Cummings
Partner
Sydney
7 April 2015

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

In relation to our audit of the consolidated financial report of The Fred Hollows Foundation for the financial year ended 31 December 2014, to the best of my knowledge and belief, there have been no contraventions of the auditor independence requirements of the Corporations Act 2001 or any applicable code of professional conduct.

[Signature]
Ernst & Young

[Signature]
Kieren Cummings
Partner
Sydney
30 March 2015

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An independent audit of The Fred Hollows Foundation's financial accounts for 2014 was conducted by:

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

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

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

STATEMENT OF FINANCIAL POSITION

As at 31 December 2014

	2014 (\$)	2013 (\$)
ASSETS		
Current Assets		
- Cash and cash equivalents	4,788,226	4,400,446
- Other interest bearing deposits	6,010,000	4,010,000
- Trade and other receivables	2,305,620	3,386,042
- Prepayments	706,518	593,281
Total Current Assets	13,810,365	12,389,769
Non Current Assets		
- Financial assets at fair value	11,460,422	10,494,422
- Property, plant and equipment	2,401,861	2,725,046
Total Non Current Assets	13,862,283	13,219,468
Total Assets	27,672,648	25,609,237
LIABILITIES		
Current Liabilities		
- Trade and other payables	9,367,040	9,014,921
- Provisions	1,140,905	927,365
Total Current Liabilities	10,507,945	9,942,286
Non Current Liabilities		
- Provisions	229,667	260,680
- Deferred liability	135,858	159,561
Total Non Current Liabilities	365,525	420,241
Total Liabilities	10,873,470	10,362,527
Net Assets	16,799,178	15,246,710
EQUITY		
Accumulated Funds	16,799,178	15,246,710
Total Equity	16,799,178	15,246,710

*In 2014 The Foundation prepared consolidated financial statements incorporating the subsidiaries, The Fred Hollows Foundation (UK) and The Fred Hollows Foundation Kenya. The 2013 accounts have been restated on a consolidated basis for comparative purposes.

*At the end of the financial years 2014 and 2013 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 2014 and 2013 financial years.

STATEMENT OF CHANGES IN EQUITY

For the year ended 31 December 2014

	ACCUMULATED FUNDS (\$)
Balance at 1 January 2014	15,246,710
Surplus/(Deficit) for the year	1,552,468
Other comprehensive income	-
Total comprehensive income for the period	1,552,468
As at 31 December 2014	16,799,178
Balance at 1 January 2013	15,824,043
Surplus/(Deficit) for the year	(577,333)
Other comprehensive income	-
Total comprehensive income for the period	(577,333)
As at 31 December 2013	15,246,710

*In 2014 The Foundation prepared consolidated financial statements incorporating the subsidiaries, The Fred Hollows Foundation (UK) and The Fred Hollows Foundation Kenya. The 2013 accounts have been restated on a consolidated basis 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 2014.

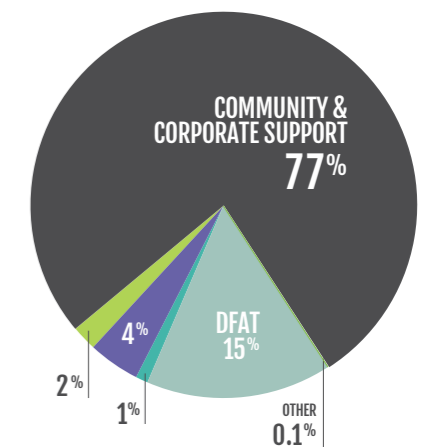
FOR THE YEAR ENDED 31 DECEMBER 2014

All figures in Australian dollars

WHERE THE MONEY COMES FROM

■ Community and Corporate Support	49,895,285
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)	10,068,606
Grants received from the Australian Government's overseas aid program	
■ Other Australian Government Departments and Agencies	675,916
Grants received from other Government Departments for Indigenous programs	
■ Other Overseas Grants	2,881,788
Grants received from Trusts & Foundations for International Programs	
■ Net Gains/(losses) on investments at fair value	1,270,717
■ Other Income	56,198
Total	64,848,511

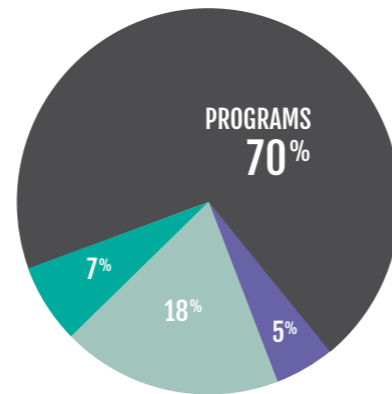
SOURCE OF INCOME



HOW THE MONEY IS SPENT

■ Programs	44,135,735
- Africa	13,419,515
- South East Asia	13,820,603
- South Asia	6,520,559
- Timor Leste & Pacific Region	1,745,689
- Middle East	365,159
- Indigenous Australia	8,264,210
■ Community Education	3,177,374
■ Fundraising Expenses	11,683,726
Public & Government/Multilateral fundraising	
■ Operating Expenses	4,299,208
Accountability and Administration	
Total	63,296,043

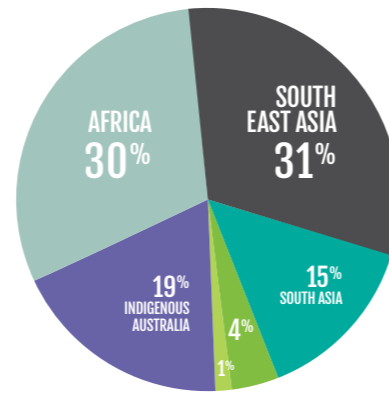
RATIO OF EXPENSES



WHERE THE PROGRAM MONEY IS SPENT

■ Africa	13,419,515
■ South East Asia	13,820,603
■ South Asia	6,520,559
■ Timor Leste & Pacific Region	1,745,689
■ Middle East	365,159
■ Indigenous Australia	8,264,210
Total	44,135,735

EXPENDITURE BY REGION



“Programs” includes sight restoring 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 partnerships and includes items such as advertising, direct marketing, supporter services 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.



Photo: Stephen Ellison

VALUES IN ACTION

Enacting the values set out in our strategic plan – integrity, collaboration, empowerment and action – keep us true to Fred’s vision.

In 2014, during a period of tremendous growth and change, our values have become the moral compass of everything we do. As Chair Les Fallick puts it, “Never has The Foundation been more focused, more connected with our values, and more inspired by Fred’s leadership and example.”

Some of the practical ways we did this in 2014 include:

ENVIRONMENT

The Foundation remains committed to putting into place an environmental policy with the aim of reducing non-renewable resources, water, wood products, and polluting chemicals. We continue to work on receiving a GreenBizCheck certificate, a global benchmark for organisational sustainability.

Our Sydney headquarters received a 6-star energy rating for energy consumption from the NABERS Green Office Environmental Assessment. Our Darwin office received a 4-star rating. The Foundation remains a signatory to CitySwitch Green Office, an Australia-wide program encouraging office tenants to increase their energy efficiency.

All offices continue to use 100 per cent recycled paper and staff are encouraged to minimise paper use and recycle.

RECONCILIATION

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

In 2014, we:

- ▶ Continued to work through our partners to take eye care to Aboriginal and Torres Strait Islander people, with a particular focus on remote and under-served areas.
- ▶ Actively supported campaigns including Close The Gap, Recognise (constitutional recognition), NAIDOC and Reconciliation weeks. 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.
- ▶ Continued to uphold our guiding principles, specifically in not competing for funding with Aboriginal and Torres Strait Islander organisations; only going where we are invited and where there is a demonstrated need; and, ensuring Programs are sustainable beyond The Foundations’ investment, including a clear transition process.

EVALUATIONS & LESSONS LEARNT

In addition to the regular monitoring of all programs, The Foundation conducts periodic evaluations to examine the quality and success of our projects.

These reviews identify valuable lessons about what works, what doesn’t – and why. This helps us to do our work better.

In 2014, we conducted 24 evaluations, reviews and other studies on the effectiveness and reach of our projects across seven countries. The findings inform our future directions and are used to influence policy and decision makers.

80-year-old Kumari Gurung got up and danced with joy after having her sight restored at an outreach camp in Nepal last year.



Photo: Michael Amendolia

“LEAVE THE WORLD A BETTER PLACE”

Professor Fred Hollows



**The Fred Hollows
Foundation**

we're for
Australian Aid

