2023-24 ANNUAL REPORT





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Publisher

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Who we are

Who we are

Family Planning Australia is the leading provider of reproductive and sexual health services in NSW. Our work is grouped across four interdependent pillars, underpinned by robust organisational support.



Integrated Health Services

We provide accredited reproductive and sexual health services to a wide range of people across NSW, including clinical services, health promotion, community education, and the Talkline information and referral service.

We also focus on addressing the needs of our priority population groups which are Aboriginal and Torres Strait Islander peoples, culturally and linguistically diverse people, people with disability and young people.





Education Services

Our education and training activities are evidencebased, broad-ranging and include courses for clinicians, disability workers, teachers, parents and carers, and other health education and welfare professionals, both locally and internationally. Our education services build the capacity of health, education and community professionals to address the reproductive and sexual health needs of their communities and region, beyond our clinical services.

The Research Centre

The Research Centre leads and partners with universities and other research organisations to grow the body of knowledge about reproductive and sexual health. We focus on translating research findings into clinical practice and teaching and in guiding governments on best practice reproductive and sexual health. We conduct rigorous evaluations of our work to continuously improve the quality of all our services and to ensure we are achieving optimal results.



We recognise that every body in every family should have access to high quality clinical services and information. As an independent, not-for-profit organisation, we provide a safe place for people to talk about their reproductive and sexual health.



International Programme

Our international development program works to build capacity of government and civil society to assist poor and marginalised communities in developing countries in the Pacific region to increase access to comprehensive reproductive and sexual health services.

Very professional but also personal ... treated as a person, not a patient...did not talk down (to me). Excellent experience

(Client)



Our vision

For all people to have high quality reproductive and sexual health.



Our mission

To enhance the reproductive and sexual health and rights of our communities by supporting all people to have control over and decide freely on all matters related to their reproductive and sexual health throughout their life.



Who we support

- Every body in every family
- Aboriginal and Torres Strait Islander peoples and communities
- People from culturally and linguistically diverse backgrounds
- People with disability
- Young people

Accreditation

Our suite of services has been accredited by national and international independent organisations. This covers our expert clinical services as well as our education, research and international development activities.

National Safety and Quality Health Service (NSQHS) Standards:

Family Planning Australia has been accredited against the National Safety and Quality Health Service (NSQHS) Standards since 2014. In 2024, a short notice accreditation visit was conducted by ACHS during the week of 4 March 2024 to assess Family Planning Australia against the NSQHS Standards and for the first time, the NSQHS Standards Clinical Trials Governance Framework. We were successfully re-accredited until 27 March 2027, meeting all NSQHS standards with no recommendations, and our maturity against the **NSQHS Standards Clinical Trials** Governance Framework was deemed as 'developing and maturing our systems'.

National Disability **Insurance Scheme Practitioners** (NDIS) provider:

Family Planning Australia has been registered under the National Disability Insurance Scheme (NDIS) since 2015. In 2019 Family Planning Australia was verified by the NDIS Quality and Safeguards Commission which extends until May 2025.

Registered **Training Organisation** (RTO):

Family Planning Australia has been a Registered Training Organisation (RTO) since 2000. In 2022 Family Planning Australia was re-accredited by the Australian Skills Quality Authority (ASQA) which extends until September 2029.

Royal Australian **College of General** (RACGP):

Family Planning Australia has been recognised as an Accredited Activity Provider (AAP) for the 2023-25 triennium, under the Royal Australian College of General Practitioners' (RACGP) Quality Improvement and Professional Development Program.

NSW Education Standards Authority (NESA):

Family Planning Australia is accredited as a NESA Endorsed Provider of registered professional development to teachers in NSW for the course: Sexual health education for life: The PDHPE curriculum for students with disability. This has been recognised as a NESA Accredited professional development course until 1 August 2026.

National Health and Medical Research Council (NHMRC):

The Family Planning Australia **Ethics Committee maintains** registration with the National Health and Medical Research Council (NHMRC) in accordance with the National Statement on Ethical Conduct in Human Research (2018). In addition, Family Planning Australia was confirmed as an Administering Institution in May 2023.

Australian Charities and **Not-for-profits** Commission (ACNC):

Family Planning Australia is registered with the Australian Charities and Not-for-profits Commission (ACNC).

Australian Aid:

Family Planning Australia's International Development programme is accredited until 2026 by the Australian Department of Foreign Affairs and Trade (DFAT), responsible for managing Australia's aid program. Reaccreditation occurred in December 2021.

Australian Council for International Development (ACFID):

Family Planning Australia is a signatory to the ACFID Code of Conduct, which is a voluntary, self-regulatory sector code for good practice. As a signatory, we are committed, and fully adhere, to the ACFID Code of Conduct, undertaking and evaluating our work annually with transparency, accountability and integrity. The current self-assessment signatory status extends to November 2024.

Education and training clients say:

Delivery of information by both facilitators. Relevant refresher for professionals working in all areas of disability. Thoroughly enjoyed.

Love how engaging and how much knowledge the presenters had during the whole webinar. Able to answer any questions and able to give resources!

> Learning how to communicate the information in a way that I could do this with my participants confidently.

President's report

Bernadette Or

Chair & President–FCPA, GAICD, M.Comm, B.Economics & Accounting, Grad Dip Social Impact Studies, Grad Dip Document and Knowledge Management



My Board colleagues provide exemplary leadership to support Family Planning Australia in its crucial work in sexual and reproductive health and rights. Our vision is for all people to have high quality reproductive and sexual health and to support this we provide specialised services and programs and advocate to promote the reproductive and sexual health and rights of everyone.

Founded in 1926, we are the oldest family planning service in Australia and have begun looking forward to the celebration of our centenary in a few years' time.

This year has been one of change, welcomes and farewells as long-standing CEO Ann Brassil retired at the end of 2023–24. Following the completion of an exhaustive recruitment process, we appointed Sue Shilbury as the new Family Planning Australia

CEO and Sue started with us in November 2023. Sue is a former Board Member of Family Planning NSW and comes to us with a wealth of experience across the health and not for profit sectors.

This year we also farewelled Board Member Kim Field after more than five years of service. Kim was a former Vice President and has more than 40 years' experience in the health sector. We thank Kim for her service and commitment to the purpose of Family Planning Australia. In April 2024, we welcomed two new Board Members through our Board of the Future program. Christine Kane and Dr Imogen Thomson, join my fellow Directors - Carla Cranny, Stephanie Cross, Neil Jackson, Gary Trenaman, Melissa Williams, Samantha Campbell and Suzanne Stanton. Through the same program we also welcomed Nicki Potts to the Finance, Risk and Audit Committee and Dr Jasmine lansen as an observer to the Board. I am delighted with the new appointments, the increased diversity and the enhanced skill sets, views and insights we now find among our Board.

Family Planning Australia continues to grow and respond to more diverse needs among the communities we serve.

The coming year will see the development of a new strategic plan that will provide a progressive agenda through to 2030. This work will involve extensive consultations with our key assets - the Family Planning Australia staff, consumers and key external stakeholders.

It is only through the valuable support that is provided by our funders and partners that we can serve our communities across NSW and overseas. I provide deep gratitude from us all at Family Planning Australia for not just providing funding but also access to the skills and resources that allow us to enhance how and where we can deliver services. In particular, I give thanks to the NSW Ministry of Health and the Department of Foreign Affairs and Trade who have partnered with us for many years and continue to provide us with vital support.

In closing, I thank the Family
Planning Australia team. This
highly skilled and passionate
team is committed to improving
the lives of the people we serve.
Their commitment to doing their
best every day to support our
communities and each other is
truly inspirational.

CEO's report Sue Shilbury

BA Applied Science (Physiotherapy), MBA, GAICD

Family Planning Australia delivers high-quality reproductive and sexual healthcare to all people, and we are passionate about also being at the centre of research and education in this space.

I am very proud to be writing this report during my first year as CEO of Family Planning Australia. This is a remarkable organisation delivering 27,481 occasions of service to patients and education and training courses for 1,728 professionals this year. Our work is broad. In 2023-24 we had 132,900 people participate in our community education and health promotion activities and our teams visited 11 countries across the Pacific delivering education and care.

I am delighted to lead a team which sets the advocacy agenda in the sector to shape improved policy in the sexual and reproductive health and rights space.

I must thank former CEO
Ann Brassil for leaving such a
significant legacy and provide
my deep gratitude to Director
Planning, Education, and
International Programme Anne
Stuart for acting as CEO in the
lead-up to my appointment.

This year maturing our digital and cyber security with an enhanced digital strategy has been a priority that will help build a foundation for the future.

Our integrated health team worked hard to see our clinical services accredited under the National Safety and Quality Health Service Standards and I am proud that we are continuing to build the number of procedures that we provide. Improving access to surgical abortions though our day surgery unit at Newington, and medical abortions through our clinics and telehealth is a critical part of our work.

We are committed to our vision for all people to have access to high quality reproductive and sexual health near where they live, and I am especially proud of our work bringing outreach services to communities such as Walgett and Brewarrina. One of the highlights of my year was a road trip with our clinicians to Walgett.



Family Planning Australia is an organisation delivering essential healthcare to people across NSW. At our core, we want to see this healthcare remain accessible, so vulnerable populations are not left behind from the work we do. I am mindful, that none of this would be possible without the dedicated team of staff L am so very proud to lead. This year improving and growing our organisational culture has been a critical focus and we've developed our Love Your Work Program to support staff engagement. This program has and will continue to be an exciting step forward in 2024-25.

We are a relatively small group making enormous positive change in the lives of the people we serve. I am incredibly indebted to every member of the Family Planning Australia family for their commitment to our work. I must thank our team members for their ongoing support and for the important work and care they deliver.

2023-24 at a glance



CLINICAL SERVICES 27,481

occasions of service across 5 clinics and outreach clinics



ONLINE AND

Other services





unique visitors across all websites













Planet 🔯

Puberty





Freedom Condom orders dispatched



Yarning about STIs and



Contraception booklets



makers

submissions to inquiries, commissions and consultations

RESEARCH



peer reviewed articles published







training, consultation, counselling sessions and workshops run by the team



COURSE PARTICIPANTS



Doctors, nurses, midwives, disability

Staff engagement

During early 2023, Family Planning Australia undertook a Staff Engagement survey to better understand the experience of our people across a range of issues - communication, leadership, service delivery and to identify what we do well and where we want to improve.

Following the report, staff working groups were formed to develop a program of work to drive positive change across the organisation across four key themes:

- Leadership
- Communication
- Culture & staff engagement
- Flexible working

The recommendations were developed and prioritised for implementation commencing during late 2023-24. These include:

- Commence a flexible working options policy. This was initially trialled by the Education and International teams whose experience informed the final form of the policy that is now in operation. Managers and staff have embraced the opportunity to work more flexibly, and it has had flow on effects, to an increase in the number of applications received for advertised vacancies. The rollout continues
- Improved staff communication, collaboration and information sharing through Lunchtime Seminars and 'The Pulse' Staff Newsletter
- Implementing a program to develop our leaders and reward and profile positive leadership

- Implementing a new Family Planning Australia intranet for knowledge sharing and to house a central repository of essential corporate information such as policies and procedures. This is being progressed in 2024-25 and is scheduled for implementation before the end of December 2024
- Subscribing to a fitness passport program to allow staff to access benefits that support wellbeing. We have partnered with WHEREFIT who provides a portal to access a range of wellbeing benefits. This will be launched in early 2024-25
- Establishment of a staff social committee
- All the recommendations led to the development of a "Love Your Work" program being rolled out in 2024-25. This approach is focused on explicitly and outwardly valuing and recognising the contribution of staff in an ongoing way and is central to how we work together in the future to drive significant uplift in staff experience and engagement and to drive a values led culture for all our people

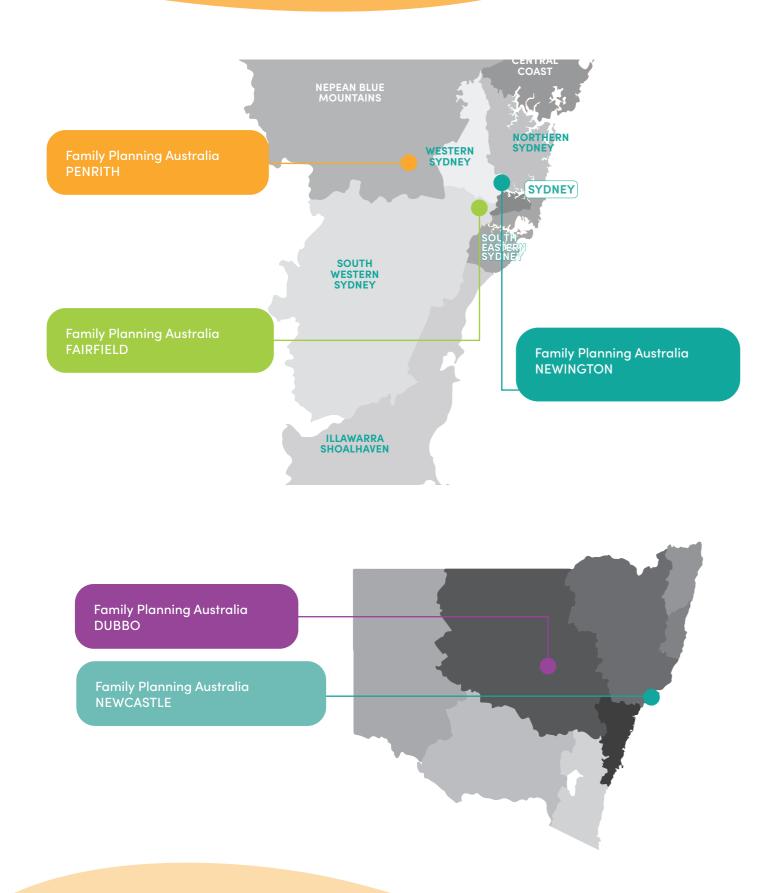


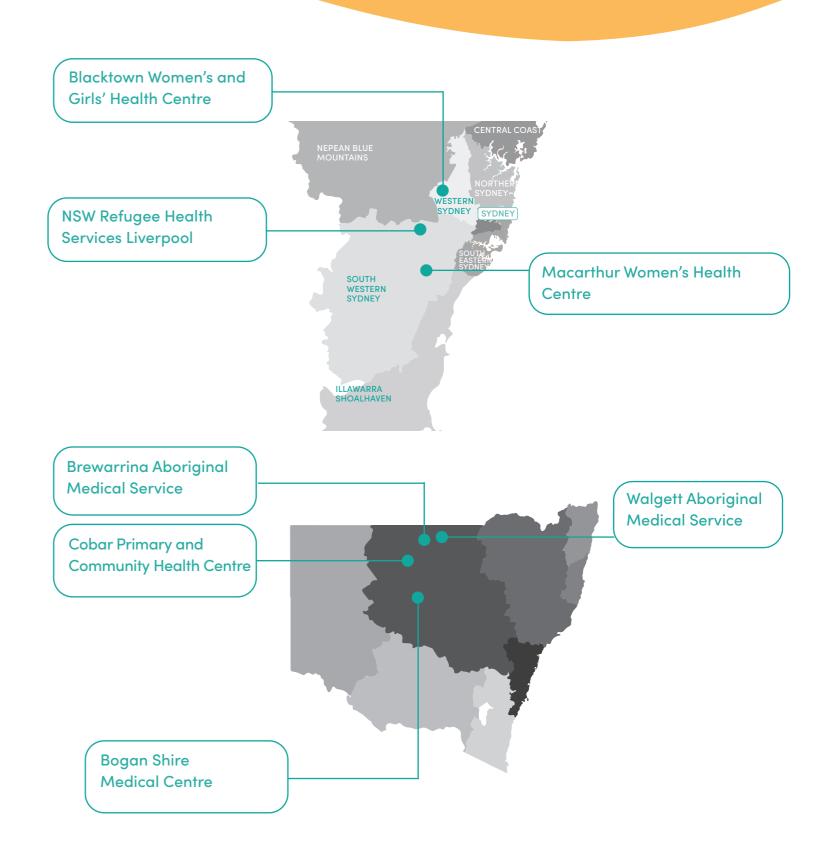


Leadership, Communication, Culture and Staff engagement, Flexible working...

Our clinic locations

Our outreach locations





SUSTAINABLE DEVELOPMENT GCALS



The Sustainable Development Goals (SDGs) are global targets designed to achieve a more just society and a sustainable future for all. Access to sexual and reproductive health care and information, and respect for sexual and reproductive rights are essential for achieving many of the SDGs, particularly those focused on health (SDG 3), education (SDG 4), gender equality (SDG 5) and reducing inequalities (SDG 10).

We work closely with local and international networks, partners and governments to engage in dialogues to highlight these links.

Family Planning Australia's work in NSW, national advocacy and our Pacific programs focus on the following strategies in sexual and reproductive health and rights (SRHR) which contribute to achievement of the SDGs.

INCREASE ACCESS TO LONG-ACTING REVERSIBLE **CONTRACEPTIVES (LARCS)**

Increasing LARC uptake supports women and girls to decide whether or when to have children and enables them to engage in work and education by reducing the number of unintended pregnancies. We provide education and information to increase community awareness on the benefits of highly effective contraceptives, we train clinicians to provide LARCs and we advocate to improve access to LARC services. This work promotes SDGs 1, 3, 5, 8, 10 & 17.

ELIMINATE CERVICAL CANCER

While Australia is on track to eradicate cervical cancer, rates of screening varies within vulnerable and marginalised populations. Cervical cancer remains a leading cause of death for women in many countries in the Pacific, preventing many women from living long and healthy lives. In NSW we run health promotion campaigns and provide information to improve screening rates, particularly in under screened populations, and train clinicians to provide cervical screening. We work with local partners in the Pacific to provide workforce training and build the capacity of Pacific health services in cervical cancer prevention. This work promotes SDGs 1, 3, 4, 5, 10 & 17.

INVEST IN COMPREHENSIVE SEXUALITY EDUCATION (CSE)

Age appropriate CSE promotes respectful relationships based on consent, gender equality and better health outcomes, including lower rates of unintended pregnancy, STIs and gender-based violence. Despite greater awareness of the need for education on relationships, sexuality and sexual health, CSE delivery in Australia remains inconsistent, and it is not yet widespread in the Pacific. We provide community education sessions in NSW, along with CSE resources co-designed to be relevant to a range of communities in Australia and the Pacific. We also deliver professional learning for teachers and other educators to provide effective CSE programs in schools and outside of school settings. This work promotes SDGs 1, 3, 4, 5, 10, 16 & 17.

PROMOTE ACCESS TO VULNERABLE GROUPS

Discrimination and gender-based violence are common both in Australia and the Pacific and women are disproportionately impacted. Our SRHR work supports gender equality by promoting respectful relationships, and empowering women to make informed decisions about their health, relationships, work, education and whether or when to have children. This work promotes all SDGs as it is a cross-cutting issue.

PROMOTE ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH **SERVICES FOR ALL**

Access to sexual and reproductive health (SRH) services enables all community members to achieve good health outcomes. People who are socially or culturally marginalised may face additional challenges in accessing SRH services, contributing to health inequity. We work with communities to provide specialised resources and strategies to reach groups at risk of poorer health outcomes and advocate for universal access to SRH services for all people, including those most disadvantaged. This work promotes SDGs 1, 3, 4, 5, 10, 11 & 17.

IMPROVE ACCESS TO ABORTION CARE

Across Australia and the Pacific, there are significant challenges accessing abortion care. Improving access to safe and reliable abortion care supports choice and ensures better outcomes in health, education and employment, particularly for women. In Australia we advocate to build the capacity of our health system to improve access to abortion care. We provide access to abortion care, train clinicians to provide abortion services and provide reliable information resources and support services for the community. This work promotes SDGs 3, 5, 8, 10 & 17.



IMPROVE REPRODUCTIVE AND SEXUAL HEALTH DATA COLLECTION

There are significant gaps in reliable data on key indicators that would improve governments' ability to identify areas of SRH need and to assess the effectiveness of existing strategies and policies. Our research and evaluation work contributes to building the evidence base and improving data collection systems, whilst our publications, communications and advocacy make research findings and data available to the broader community. This work promotes SDGs 3, 16 & 17.





There are known links between climate change and SRHR, particularly around gender inequality and reduced access to SRH services. Our advocacy and our newly developed policy statement on climate change and SRHR highlights the evidence demonstrating the negative impact of climate change on SRHR and articulates strategies to address this, such as improving systems and infrastructure for more resilient service delivery. This work promotes SDGs 3, 5, 11, 13, 16 & 17.

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Reconciliation **Action Plan**

The second Innovate RAP, 2022-2024 was developed to further advance Family Planning Australia's commitment to reconciliation, setting clear actions to ensure the work we do is respectful, safe and inclusive for Aboriginal and Torres Strait Islander individuals and communities. In February 2024, the Innovate RAP concluded.

Throughout 2023-24, the following key actions were our focus:

- Developed and circulated regular RAP e-newsletters to all Family Planning Australia staff
- Developed standardised Family Planning Australia Acknowledgement of Country slide for all PowerPoint presentations using RAP artwork
- Reviewed and updated the Aboriginal and Torres Strait Islander Employment and Retention Strategy
- Increased procurement and spend with Aboriginal controlled businesses
- Developed Aboriginal and Torres Strait Islander Health Action Plan in line with National Safety and Quality Health Service Standards for working with Aboriginal and Torres Strait Islander communities
- Conducted a review of cultural learning needs within our organisation
- Developed and communicated cultural days of significance/observance calendar to all Family Planning Australia staff
- Increased the percentage of Aboriginal and Torres Strait Islander staff employed in our workforce

Whilst the majority of actions were completed, a number of key actions require a longer timeframe for meaningful implementation, such as the Aboriginal Employment and Retention Strategy, and Aboriginal Cultural Learning Strategy. Additionally, as part of agreed RAP deliverables, and a requirement of the NSQHS accreditation, an Aboriginal Health Plan has been developed.

Considering this, and in consultation with the RAP working group and Reconciliation Australia, Family Planning Australia will be pausing the development of a future RAP and focusing on the implementation of the Aboriginal Health Plan over the next four years. The plan proposes tailored and strength-based approaches to improve reproductive and sexual health outcomes among Aboriginal and Torres Strait Islander communities in NSW.

The plan has been developed around four key strategic actions:

- Improving reproductive and sexual health outcomes of Aboriginal and Torres Strait Islander communities across NSW
- Enhancing the delivery of our reproductive and sexual health services to Aboriginal and Torres Strait Islander people and communities
- Strengthening our current partnerships and exploring new opportunities for collaboration
- Strengthening the capabilities of our workforce to ensure the provision of services prioritises cultural safety and inclusivity

The existing FPA Reconciliation Action Plan Working Group is responsible for implementing the Plan, reporting on progress and will monitor progress and oversee evaluation.

Artwork: Coastal People by Billy Reynolds



Acknowledgement, respect, inclusive, strategic actions, cultural learning...

Local Health Districts





TALKLINE CALLERS AND E-MAILS

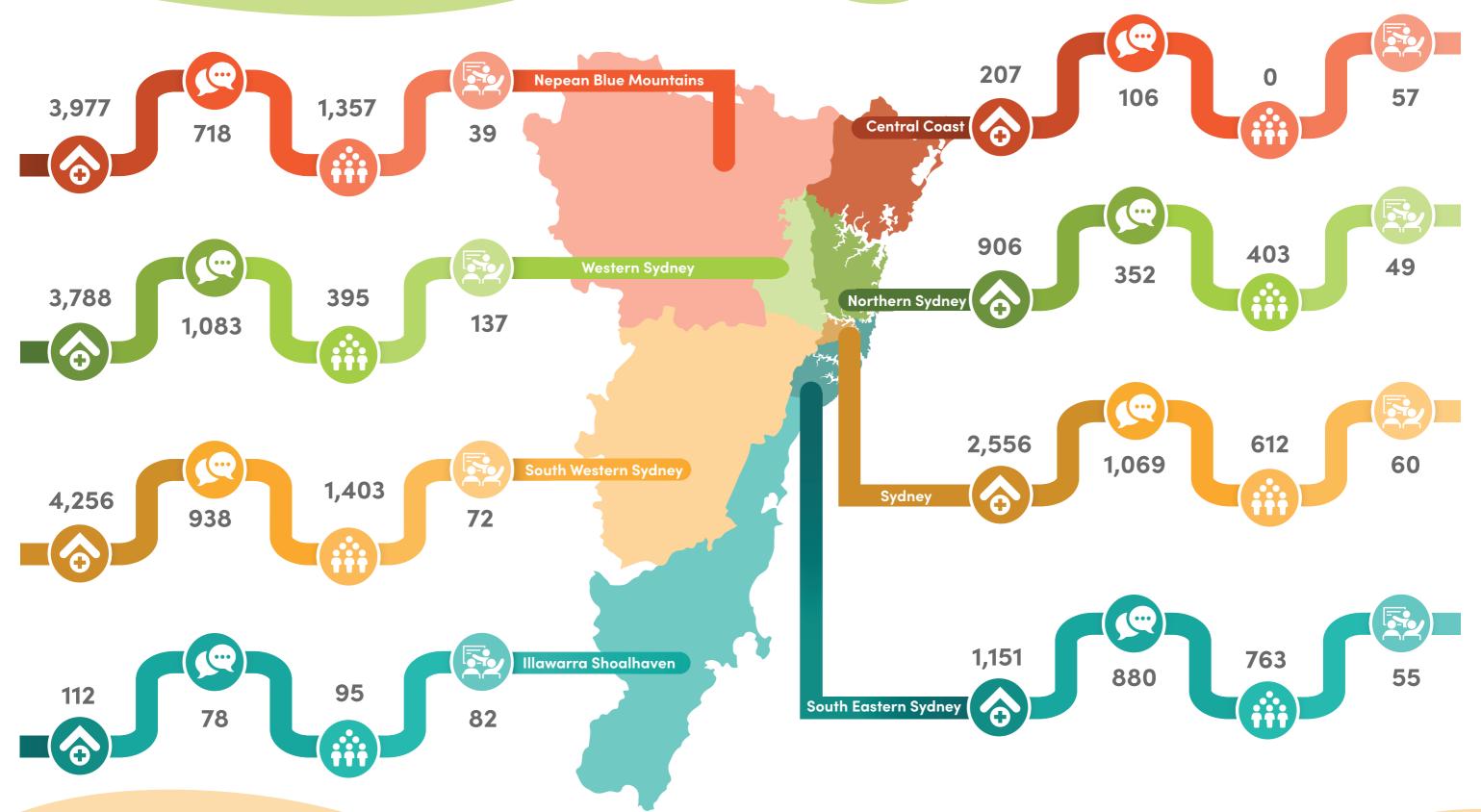


COMMUNITY EDUCATION PARTICIPANTS









Services provided in regional Local **Health Districts**







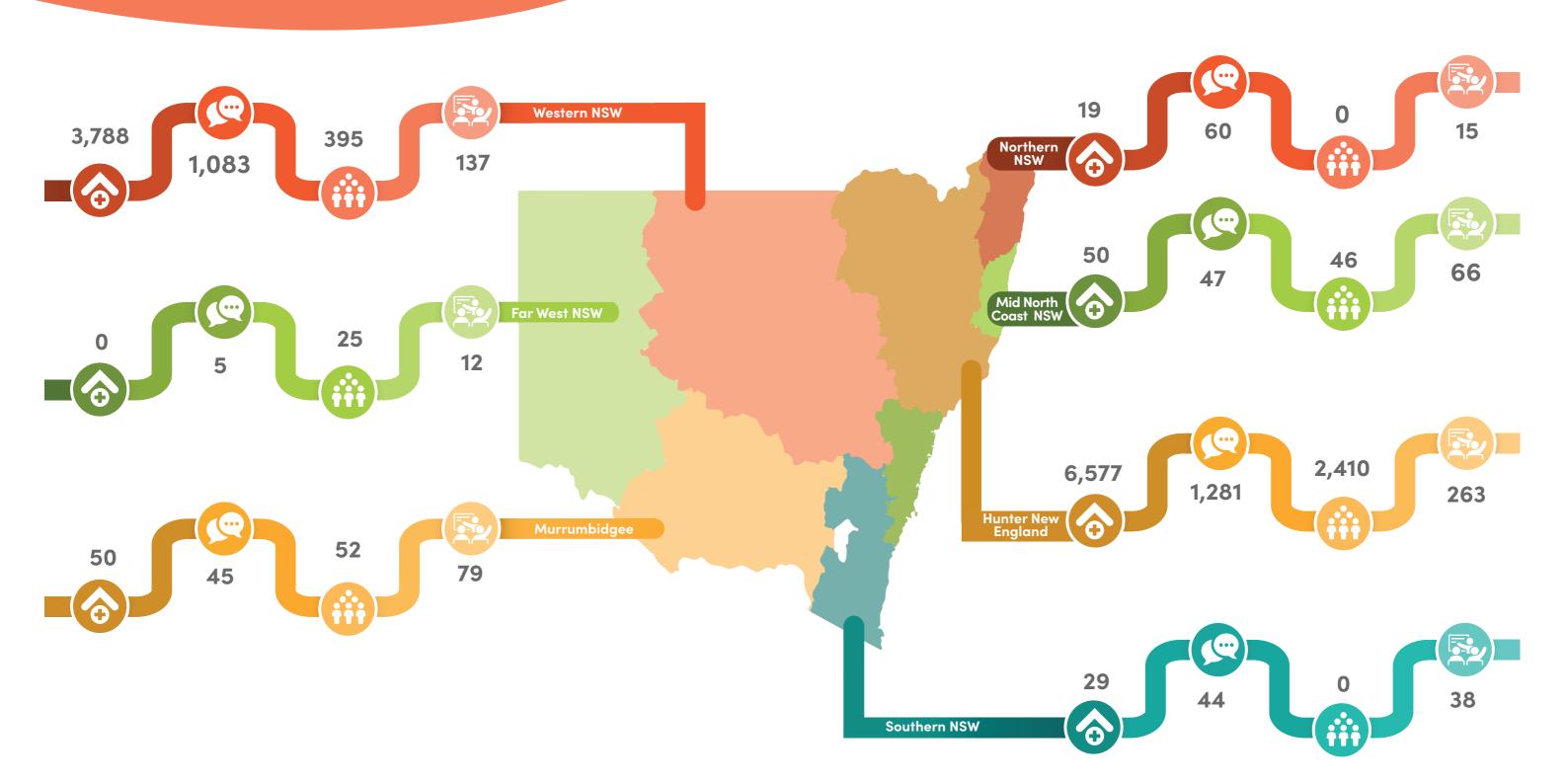












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Integrated Health Services

Clinical services

Family Planning Australia provides accredited reproductive and sexual health services to a wide range of people across NSW, including clinical services, community education, and the Talkline information and referral service. We also focus on addressing the needs of our priority population groups which are Aboriginal and Torres Strait Islander peoples, culturally and linguistically diverse people, people with disability and young people.

Type of service provided to client

31% Contraception STI 33% Gynaecological **Pregnancy and** fertility, including

abortion

Clinic occasions of service 27,481



The doctor I saw today was excellent at communicating (and listening), and she was respectful and clear in asking for consent, both with her treatment plan and the way she conducted a physical exam.

Priority populations













Data source - ABS 2021

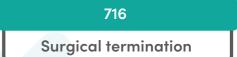


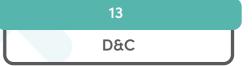
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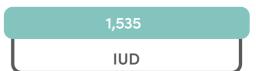
having a disability















(Client)

Clinic services

In 2023-24, we provided 27,481 occasions of service across our fixed and outreach clinics.

The main services provided to clients were contraception (31%), gynaecological (33%), pregnancy and fertility related services, including abortion (21%) and STIs (9%). The proportional mix of these services is demand driven, influenced by client need. Client satisfaction continues to be high with 93% of clients satisfied or very satisfied with the care they received.

Day Surgery Unit

Demand for procedures undertaken in the Newington Day Surgery Unit (DSU) continues to grow. The DSU enables the provision of surgical abortions to clients, along with other procedures under sedation including D&Cs, IUD insertion and vasectomies.

These procedures are in addition to the vasectomies and IUD procedures undertaken within our fixed clinics under local anaesthetic.

IHS update day November 2023



Talkline

Talkline is a nurse-led telephone, email and live chat information and referral service which provides confidential and evidence-based information to the community and health professionals on a wide range of reproductive and sexual health topics including unplanned pregnancy, contraceptive options and sexually transmissible infections.

There were 11,999 Talkline calls, LiveChat conversations and emails during 2023-24.

Pregnancy Choices Helpline

During 2023-24, Family Planning Australia continued delivery of the Pregnancy Choices Helpline, a NSW Health funded free, unbiased and confidential helpline that provides community members with information on their pregnancy options, including referrals to abortion service providers across NSW. NSW Health professionals can also contact the helpline to support their clients to access abortion services.

From 1 July 2023 until the end of June 2024, the Pregnancy Choices Helpline has engaged with 3,130 encounters which represents a 17% increase compared to the previous year. This likely reflects the increased demand for unbiased pregnancy counselling in NSW.

HotDoc rollout

HotDoc is an online client engagement platform to enhance client care as well as streamline external clinical placement trainees. In 2023-24, Family Planning Australia implemented HotDoc to complement clinical service provision and clinical education. The program works with existing clinical record software to allows clients to book online with clinicians which improves access to healthcare and reduces time taken on administrative tasks. External clinicians wishing to schedule into a clinical placement with Family Planning Australia clinical instructors can also utilise HotDoc.

SEARCH (Sustainable and Equitable Access to Reproductive Health Choices)

We continue to receive funding from the Ministry of Health to develop a service model to support the delivery of communitybased surgical and medical termination of pregnancy (MTOP) services and best practice longacting reversible contraception (LARC) for women who experience barriers to safe and affordable services in regional NSW.

We currently have 22 established partners across eight Local Health Districts with 11 new partnerships formed in 2023-24. Partnership development is ongoing.



2023-24 has also seen a focus on other initiatives within the **SEARCH** program including:

- Attendance at the HealthEd Women and Childrens Conference
- Providing information on MTOP at a number of locations and forums such as a Coffs Harbour GP Seminar, Healthy North Coast PHN and Hunter New England PHN
- Presenting on the project at the 2023 Australasian Sexual and Reproductive Health Conference

We are also members of recently established abortion working parties in Western NSW LHD and Murrumbidgee LHD. These have a charter to look at bridging abortion access issues in these remote areas of NSW.

Family Planning Australia also hosted a GP Women's Health Forum in Dubbo. 14 GPs attended to hear a Women's Health update, and to learn more about the SEARCH project. In addition, the SEARCH project manager attended the Rural Doctors Network (RDN) GP Refresher Conference in Port Macquarie. This enabled us to connect with over 100 rural GPs and explore partnership opportunities with them. It has also fostered a strengthening of our partnership with the RDN which will build more visibility for SEARCH.

The SEARCH+ website is a Ministry of Health funded service being developed to assist people find a reproductive or sexual health service near them. The site invites service providers to independently list their details. Further improvements to website functionality and expansion of listed providers are expected in 2024-25.

Partnership with Walgett & Brewarrina **Aboriginal Medical Services**

Family Planning Australia, in collaboration with SEACH project, has partnered with Aboriginal Medical Services (AMS) in Brewarrina and Walgett for another 12 months to deliver reproductive and sexual health services for women and men in these remote communities.

These outreach clinics will allow the continuation of the current comprehensive reproductive and sexual health services for the communities in Walgett and Brewarrina. The clinic will continue to focus on providing accessible contraception, sexually transmissible infection (STI) testing and treatment, pregnancy options, abortion care, menopause, common gynaecological services, cervical screening, fertility, post-natal checks, breast awareness and most recently, additional services to include men's sexual health.

A Family Planning Australia medical officer and a Family Planning Australia registered nurse are delivering these services in community one week out of every 4 weeks developing key relationships with the AMS clinicians and the community in a spirit of collaboration.

Family Planning Australia and SEARCH will continue to strengthen these partnerships by supporting these services and by increasing awareness and knowledge of the services provided by Family Planning Australia including community education, training and education for health professionals, health promotion activities, research recruitment, telephone and online support via Talkline and our website.

Consumer engagement

In 2023-24, Family Planning Australia used a variety of methods to engage with consumers including online surveys, focus groups and opportunistic engagements at events. Key engagements with consumers included:

 Yarning About STIs: 13 Aboriginal and Torres Strait Islander community members in Dubbo, Penrith and Newcastle were interviewed as part of our review of the existing Yarning About STIs booklet. Their feedback was incorporated into the final resource, with the feature artwork of the resource developed by Indigenous artist Belinda Coe, a Kamillaroi woman from Gilgandra and Condobolin.

The way the staff made me feel from the moment I arrived and they really listened and understood my situation... and always had beautiful staff from reception, nurses and doctors. So thank you

(Client)

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- Hawkesbury Needs Assessment: 55 people were consulted online and in-person as part of a comprehensive assessment of the reproductive and sexual health needs of the Hawkesbury Local Government Area. Consultations revealed significant barriers to accessing reproductive and sexual health services in the Hawkesbury area. Recommendations will be reviewed and implemented in collaboration with Nepean Blue Mountains Local Health District.
- Freedom Condom Directto-consumer ordering:
 As part of the continued
 expansion in regional areas
 of NSW, four focus groups
 with 16 young people were
 held online in February 2024
 to improve our understanding
 of condom ordering patterns
 and review promotional
 strategies.
- Youth Drop-in survey:
 A survey was implemented at Hunter and Penrith clinics to seek feedback about our Youth Drop-In clinics. There were 31 respondents to the evaluation survey with 13 from the Penrith clinic and 18 from the Hunter Clinic. Of those respondents, 27 were female, four were male and 48% were aged 19-21. 90% of respondents

found the clinic easy to get to, 68% of respondents reported that they felt very comfortable about coming to their appointment and 84% of respondents found the reception staff to be very welcoming.

• All About Sex Images
consultation: nine people
with intellectual disability took
part in the consultations to
review the images used in
the All About Sex factsheet
series for people with
intellectual disability. Key
feedback included adding
more diversity in the images,
including cultural diversity,
gender diversity and diversity
of disabilities.

The internal Consumer Engagement Working Group met five times during 2023-24, working on a range of projects:

- Reviewing feedback from quarterly client satisfaction surveys
- Reviewing the final recommendations from the Youth Friendliness Audit and Cultural Responsiveness Audit conducted by Health Promotion
- Development of patient journey mapping to identify pain points and encourage discussion on strategies to minimise and mitigate these pain points

 Updating the clinic waiting room video

Family Planning Australia would like to particularly acknowledge our consumer representative volunteers for supporting our NSQHS clinical accreditation this year. Our volunteers are community members who are engaged on a long-term basis to provide a consumer perspective on how we can improve the reproductive and sexual health services and programs Family Planning Australia provides to the community in NSW.

In 2023-24, Family Planning Australia recruited three new consumer representative volunteers. Our consumer representative volunteers are community members who are engaged on a long-term volunteer basis to provide a consumer perspective on how we can improve the reproductive and sexual health services and programs Family Planning Australia provides to the community in NSW. To date, our consumer representative volunteers have attended one Consumer Engagement Working Group meeting and one meeting with Board and Executive representatives. They have provided valuable insight and advice on a variety of matters including call handling, cultural responsiveness and strategies to support clients to have better access to clinics.

Health Promotion

The Family Planning Australia <u>Health Promotion</u> team supports our priority population groups to improve their reproductive and sexual health. Our priority population groups include:

- Aboriginal and Torres Strait Islander peoples
- people from culturally and linguistically diverse backgrounds
- people with disability
- young people

We achieve this by working closely with our communities to develop and implement a range of reproductive and sexual health projects, including delivering community education, developing health information resources, and supporting services to become more accessible and inclusive.

We understand that reproductive and sexual health can sometimes be difficult to discuss. It is our priority to ensure that the community can rely on us to provide trustworthy, up-to-date and evidence-based information.

We partner actively and strategically with services across the NSW to enable us to ensure all our programs and resources are culturally appropriate and accessible, and to extend our reach to marginalised populations across the state and support better health outcomes.

Our partners include:

- · Local Health Districts
- Community organisations
- Schools, universities and other education/ training providers
- Aboriginal Medical Services
- Aboriginal Community Controlled Health Organisations

Extremely informative and very kind and understanding staff.

(Youth drop in survey)

Health promotion resources developed

Community education sessions
– face to face

205

Community
education
participants
(including
online
participants)

133,132



1,290,090

Health promotion resources distributed/accessed (including digital content)

11,700 CONDOMS DISTRIBUTED

95%

Participants reporting satisfaction

Freedom Condom clients

205

92%

Participants report an increase in knowledge and skills



73 Family Planning Australia Annual Report 2023-24

Community education participants (including online participants)

516

Aboriginal and
Torres Strait
Islander people
accessing
health
promotion
programs

38,365

CALD people accessing health promotion programs and activities

22,891

People with
disability
(including their
parents and
carers) reached
with health
promotion
activities

68,792

Young people under the age of 30 accessing health promotion programs and activities CONSUMER ENGAGEMENT PARTICIPANTS

618



Bring It On Festival Fairfield Showground



Broadmeadows Children's Court Program Youth Impact Day event

I work with women individually. Having more knowledge on cervical screening, I feel empowered to have conversations with women and ensure they have been screened or ensure they understand their results or even know when they are due next.

(Cancer Institute NSW - Cervical Screening Training project)

Our priority populations - key highlights in 2023-24

Aboriginal and Torres Strait Islander People

Aboriginal Health Worker Cervical Screening Training

With funding from Cancer Institute NSW, we trained 87 Aboriginal Health Workers and Aboriginal Health Practitioners across NSW on how to talk to their communities about cervical screening. Eight sessions were delivered in regional and rural Local Health Districts and two in metropolitan areas.

The training was developed in consultation with Aboriginal Health Services and Aboriginal Health Workers, with a particular focus on changes to self-collection.

Overall, the project evaluation showed that the training increased participants' knowledge about cervical screening, self-collection and communicating key messages to the Aboriginal women across community. Satisfaction rates were very high, with all participants indicating they would recommend the training to others.

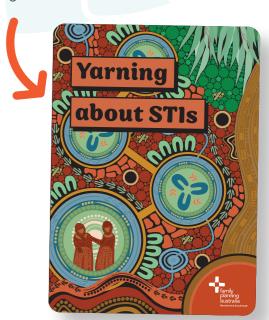


Yarning About STIs

The <u>Yarning about STIs</u> resource was originally developed in 2013 and was re-developed in 2023-24 with funding from Sydney Local Health District. The resource provides information on sexually transmissible infections for Aboriginal and Torres Strait Islander communities.

The resource was co-designed through detailed consultation with Aboriginal community members in Dubbo, Penrith and Newcastle as well as with Family Planning Australia Aboriginal staff. The content was additionally informed by a detailed literature review.

The resource was created using Indigenous artwork, developed by Indigenous artist Belinda Coe, a Kamillaroi woman from Gilgandra and Condobolin. The artwork depicts a person's journey of strength and support, including the role Elders play to build physical, mental and spiritual health throughout life.





Culturally and linguistically diverse (CALD) communities

CALD Implementation Plan

Family Planning Australia conducted a Cultural Responsiveness Audit in 2023 to identify areas for improvement in delivering culturally responsive and appropriate services to CALD clients.

In 2024, we developed the CALD Cultural Responsiveness Implementation Plan to enhance culturally responsive practices within the organisation. The Implementation Plan outlines a three-year organisational approach to better support the reproductive and sexual health outcomes of CALD populations in NSW.

Key actions completed in 2023-24 included:

- Health literacy session for CALD communities updated, with five sessions delivered
- Translated appointment booking information added to the Family Planning Australia website
- Australian Charter of Health Care Rights displayed in multiple languages in Family Planning Australia clinical areas

I love Planet Puberty. I tell everybody I work with about it!

(Planet Puberty expo attendee)

Relationships 101

In May 2024, Family Planning Australia released its Relationships 101 booklet in 21 community languages. This was made possible as part of a collaboration with NSW Multicultural Health Communication Service.

The translated booklet is designed to provide the information that people of culturally and linguistically diverse backgrounds need when entering new relationships. It covers topics such as consent, dating, and same sex relationships.

The Relationships 101 booklet was originally developed with young people in Southwest Sydney, with funding from NSW Health.

Further translations will give more people from diverse cultural and linguistic backgrounds, including those from refugee backgrounds, important information about their relationships. The new translations include languages such as Farsi, Ukrainian, Somali, and Urdu.





People with Disability

Planet Puberty

<u>Planet Puberty</u> is a digital resource suite created by Family Planning Australia with funding from the Australian Government Department of Social Services and in-kind staffing support from Sydney Local Health District. The resource aims to build the capacity of parents and carers to better support their children with intellectual disability (ID) and/or autism spectrum disorders (ASD) in the transition from puberty to young adulthood.

The project was co-designed with adults with ID and/or ASD and in consultation with parents and carers of young people with ID and/or ASD.

Now in its fourth year, the feedback from parents and carers continues to be overwhelmingly positive.

Key statistics from 2023-24 include:

- 2,100 parents, carers and disability support workers engaged with at expos across the country
- 84,000 unique users with 878,115 views of the Planet Puberty website
- 19 community education sessions delivered with 331 attendees
- 98% of these attendees indicated they learnt something new by attending the session



Source Kids Adelaide Expo - Planet Puberty

Sydney Disability Connection expo



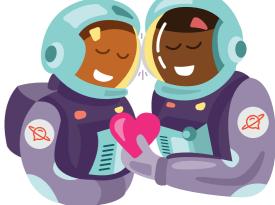
Melbourne Disability Expo



New resources were also added to the Planet Puberty website www. planetpuberty.org.au:

- Planet Puberty: A guide for parents and carers of children with intellectual disability and autism - Easy Read version
- Planet Puberty: A guide for parents and carers of children with intellectual disability and autism - translated into Arabic, simplified Chinese, Dari, Punjabi and Vietnamese
- Planet Puberty Social Story Using a Pad and and How to Use a Pad Visual Schedule





Brisbane Disability Expo

Disability Needs Assessment

Family Planning Australia conducted a comprehensive needs assessment to better understand the current state of sexuality support available to people with disability (PWD) and identify any new or persisting gaps in the disability sector.

We conducted 1:1 semi-structured interviews and focus groups with disability sector workers, clinicians, and representatives from organisations that advocate for and support people with disability. This was accompanied by an online survey for disability sector workers.

The qualitative analysis of the data revealed several key themes:

- Lack of training and education regarding reproductive and sexual health for staff across all settings
- Fear regarding professional boundaries due to lack of clear guidelines and policies
- Need for improved intake processes prior to appointments in clinical settings to ensure care provided is tailored to individual needs
- Overall dissatisfaction with support, with both people with disability and those working within the sector feeling that the existing support mechanisms are inadequate and do not meet the needs of people with disability

This information will be used for developing targeted interventions and strategies to improve reproductive and sexual health education, training, and support within the disability sector over the next three years.



Young People

Freedom Condom

The <u>Freedom Condom</u> project in NSW aims to prevent sexually transmissible infections by providing free condoms to young people under 30. The project combines condom dissemination with sexual health education and is designed as an early intervention capacity building health promotion strategy. The program is delivered in person through partnerships with local services across NSW, and online as part of our 'direct-to-consumer' pilot project.

In 2023–24, we distributed over 11,700 condoms to young people across NSW. We also expanded direct–to–consumer online ordering program to cover the following areas:

- Far West Local Health District
- Western NSW Local Health District
- Murrumbidgee Local Health District
- Mid North Coast Local Health District
- Tamworth and surrounds
- Taree and surrounds

With FREE condoms from

An evaluation survey was conducted during the marketing campaign, with 94% reporting improved comprehension of safe sex and 100% finding the website useful and planning to return for more condom packs.

In 2024-25, Family Planning Australia will be continuing the expansion of the Freedom Condom direct-to-consumer ordering project across regional NSW.



Youth Implementation Plan

Family Planning Australia conducted a comprehensive Youth Friendliness Audit across all Family Planning Australia clinics in 2022–23. The aim was to evaluate the youth-friendliness of our services and identify areas for improvement to better meet the needs of young people accessing our services. In 2023–24, we developed a Youth Implementation Plan that outlines strategies to address these recommendations over the next four years (2023–2027).

Highlights from 2023-24 include:

- initiating recruitment for our youth advisory group
- evaluating our youth drop-in clinics, with positive feedback received on services and client comfort
- updating the Frank website to enhance user experience and navigation
- registering Family Planning Australia with the ACON "Welcome Here" project affirming our ongoing commitment to fostering a safe and welcoming space for everyone regardless of their sexual orientation or gender identity

The 2024-25 financial year will focus on establishing the youth advisory group, updating key youth resources including Body Talk, and developing a youth digital resource strategy to improve young people's awareness of Family Planning Australia clinical services and youth-specific projects.



Frank.org.au

Frank.org.au is Family Planning Australia's sexual health website for young people aged 18 to 30. In 2023-24, the website underwent a makeover to enhance user experience and functionality, resulting in improved navigation and a fresh visual appeal.

We also added ten new articles to Frank, including "How to talk about consent" "How to tell your partner you have herpes", and 'The Self-Collect Cervical Screening Test is here!"

In November 2023, our Talking Frank podcast was recognised as a finalist in the Best Sex and Relationships category at the Australian Podcast Awards.

In 2023–24, the Frank website attracted 3,200 users and 16,000 interactions. The most viewed pages included 'Does Oral Sex Count,' 'Mycoplasma Genitalium,' and 'Talking Frank Podcast.' Frank's YouTube videos obtained 58,350 views, and the Talking Frank podcast received 819 downloads, with top episodes including 'Masturbation and Sex Toys,' 'Dating,' and 'Men's Sexual Health.'





Macquarie University Sextember event

Education

Family Planning Australia's <u>education</u> and <u>training</u> activities are evidence based, broad-ranging and include programs for clinicians, teachers, disability, youth and community workers and other health education and welfare professionals, both locally and internationally.

In 2023–24, Family Planning Australia provided training to 1,728 course participants.

This year has seen the continuation of courses being delivered in a blended format with several workshops now being delivered as face-to-face training. We have been able to expand the provision of face-to-face courses to all Family Planning Australia sites and in several Local Health Districts to support the community need. We continue to offer webinars and online training, as this expands our geographic reach and provides opportunities for us to target individuals who may have difficulty accessing face-to-face training including people with a disability or those in remote areas.

Clinical education

We are an accredited provider with the Royal College of General Practitioners and Australian College of Rural and Remote Medicine for the 2023–2025 triennium for all our courses for doctors.

All our courses for registered nurses, enrolled nurses and midwives provide certification with equivalent hours to meet the Nursing and Midwifery Board of Australia requirements for continuing professional development.

Friendly trainer and well-structured materials. I love being able to check in person with an instructor

(Course participant)



In 2023-24, we continued to review and update our clinical education programs, including the release of two new online courses for doctors:

- Menopause
- Sexually Transmitted Infection and Blood Borne Viruses

Both courses offer a comprehensive understanding of each topic with expert lecture recordings. These subjects form part of the full course <u>FPAA National Certificate in Reproductive Sexual Health for Doctors</u> with the aim to support doctors access to updates of individual topics, or at a later stage to be used as credit for the full course.

IUD Refresher training, a newly released course that supports clinicians who are already trained IUD inserters and wish to refresh and enhance their knowledge, skills and confidence in IUD insertion. The training includes expert tips and tricks for insertion of all IUD's available in Australia, practise of IUD insertion using pelvic models, and case studies discussing commonly encountered clinical scenarios.

The clinical education team continue delivering Clinical Skills workshops designed to ensure doctors, nurses and midwives are up to speed with clinical skills prior to engaging in a Family Planning Australia clinical placement.

<u>Cervical Screening Comprehensive Skills Training</u> and <u>Implanon Face-to-Face Training</u> both have steady enrolments and are delivered monthly in Newington and Hunter and bimonthly at Dubbo.

Implanon Online Training remains popular and caters to clinicians locally and in rural and remote greas.

Exhibitions attended to promote Family Planning Australia and Education

 GPCE Friday 24 May – Sunday 26 May at ICC Sydney. General Practice Conference and Exhibition stand

The presenter!!! Engaging and knowledgeable. Relatable and insightful.

(Course participant)

 HealthEd Saturday 9 September 2023 at ICC Sydney. HealthEd medical update day for General Practitioners was attended by the Education team

Schools and community sector education

Family Planning Australia has been a Registered Training Organisation (RTO) since 2000. This allows us to deliver nationally accredited courses under the Australian Qualifications Framework.

Relevant courses for teachers are accredited by the NSW Education Standards Authority (NESA) against the Australian Professional Standards for Teachers which are necessary for maintaining proficient teacher accreditation in NSW.

Family Planning Australia continues to work to improve the existing portfolio of courses as well as building new learning opportunities.

Courses have increased in face-to-face delivery with the team travelling to different Local Health Districts including Wagga Wagga, Warilla, Bega, Orange, Tamworth, Taree and Central Coast. Some highlights in 2023-24 include:

The RTO accredited course <u>CHCEDU003: Provide</u> sexual and reproductive health information to <u>clients, for disability, youth and community workers</u> has proven to be a popular course with steady enrolments. This course has achieved a high completion rate since being updated.

The <u>Sexualised Behaviours of Concern and</u> <u>Intellectual Disability</u> course continues to attract significant interest for professionals working with people with intellectual disability and autism, with high enrolment numbers across all scheduled sessions.

Throughout 2023–24, the team continued developing a series of guidance documents for schools with a focus on priority populations, this includes guidance for LGBTQIA students, students with disability, Aboriginal and Torres Strait Islander students and Culturally and Linguistically Diverse students.

The documents are supported by a newly developed 'Directory' of 'Key Messages for age and stage' teacher training resources on sexuality and sexual health education.

These publications will be supported by the launch of a new workshop for teachers *Let's Talk Inclusive Practice* to explain these documents and provide guidance around their use.

These documents are a follow on from the previously created "Best Practice Statement" and school guidance documents:

- Guidance document for school leaders
- Guidance document for school Wellbeing staff
- Guidance document for working with parents and carers

The supporting online training <u>Let's Talk Best</u> <u>Practice</u> has been delivered each quarter with continued interest from teachers.

Exhibitions attended to promote Family Planning Australia and Education

ACHPER NSW

31 May 2024 – we presented at the ACHPER Early Career Teachers' Conference at Australian Catholic University. This conference is for teachers in their first three years of teaching. Our session was titled Navigating Sexuality and Sexual Health Education and was fully subscribed.

24 November 2023 – we presented at the ACHPER K-12 PDHPE Conference at Western Sydney University, and the session was titled Let's Talk: Best Practice in Sexuality and Sexual Health Education.



Clinical **Education**



Cervical Screening Training

technique, and confidence in cervical screening, with a to self-collection. This blended learning course comprises both online learning and comprehensive skills practise led by Family Planning Australia clinicians.

Aims to enhance knowledge, strong focus on recent updates

Menopause Online



Provides clinicians with updated comprehensive knowledge on a range of topics including physiology of menopause, common symptoms, and both hormonal and nonhormonal management strategies.

FPAA National Certificate in Reproductive

Supporting doctors to upskill in reproductive

options, men's health, and menopause.

and sexual health. Topics include contraceptive options, STIs, cervical screening, pregnancy

and Sexual Health for Doctors

Medical Abortion Online



Supporting clinicians to update their knowledge about the provision of medical abortion in Australia, with a focus on NSW.

Clinical **Education**



Clinical education training courses



Contraceptive Implant (Implanon NXT) Insertion and Removal Training

Aims to enhance knowledge and skills to safely insert and remove the Implanon device. This blended learning course comprises both online theory and comprehensive skills practise either online via a zoom session or face-to-face, led by Family Planning Australia clinicians.

Reproductive and Sexual Health for Nurses and Midwives (RSH-CAP)



Supporting nurses and midwives to prepare and extend clinical role as a practitioner in the specialty of reproductive and sexual health. Topics include history taking, contraceptive options, cervical screening, breast health, STIs, pregnancy options and men's health.

Pregnancy Choices



Aims to enhance the knowledge of non-clinical staff to support clients presenting with unintended pregnancy.

Reproductive and Sexual Health Updates



Masterclasses, webinars and workshops for clinicians to enhance knowledge and practice on reproductive and sexual health including updates on current best practice, clinical guidelines and practical techniques.

Sexually Transmitted Infections & Blood Borne Viruses Online



Supporting clinicians seeking to build on knowledge and skills required to provide STI and BBV screening, assessment and management appropriate to role and specific clinical context.

Clinical Placements - for doctors, nurses, and midwives



Clinicians

attended

courses

Provides clinicians with supervised clinical placements to develop competency and confidence in delivering comprehensive reproductive and sexual health consultations.

Schools and **Community Education**



Education Essentials

Aims to support Family Planning Australia staff members to design, deliver, and evaluate education programs and develop foundational education knowledge and skills.



Support decision making in sexuality for people with intellectual disability

Supports disability workers to understand NSW laws and misunderstandings for people with intellectual disability to make their own decisions about sex.

Let's Talk webinar series



Develops educators' capacity to provide engaging, evidence-based education on a specific topic, including consent and healthy relationships and influence of technology on relationships, talking with young people about contraception and puberty.

School and **Community Education**



participants attended courses

courses delivered



CHCEDU003: Provide sexual and reproductive health information to clients



Supports participants to learn about best practice principles for educating people with intellectual disability and use discussion and case scenarios to explore the balance between duty of care with

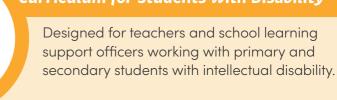


The Nitty Gritty: Specialised Reproductive and Sexual Health Training for Youth Workers

Aims to increase knowledge of sexuality and sexual health issues which affect young people, with a particular focus on working effectively with young people from priority groups.



Sexual Health Education for Life: the PDHPE **Curriculum for Students with Disability**







Explores sexualised behaviours of concern in people with intellectual disability. It aims to identify the difference between healthy and unhealthy sexual behaviours, the common reasons for why these behaviours occur and strategies that workers can use to respond to and de-escalate behaviours.

Starting the Conversation



Enables community workers to increase their knowledge and confidence to talk to people from CALD communities about reproductive and sexual health.

Research Centre

Family Planning Australia's Research Centre plays an important role in identifying research priorities related to reproductive and sexual health, conducting quality research, and disseminating and translating research findings to optimise impact at community and health service levels. With expertise in quantitative and qualitative research methods, biostatistics, epidemiology, data management and data linkage, the Research Centre plays a key role in gathering, analysing and disseminating reproductive and sexual health information for use by governments, health practitioners and the community. We have extensive experience both in leading our own research and in collaborating with universities and other research organisations and institutions on clinical and population health research studies.

The Research Centre also facilitates monitoring and evaluation of Family Planning Australia's programs and services in Australia and the Pacific region. All of this work contributes to improving reproductive and sexual health outcomes for people in Australia and the Pacific.

The Research Centre partners and collaborates with healthcare, academic and community organisations, researchers, consumers, and industry to conduct research, design projects and support quality service delivery. We proactively contribute to national and international committees on reproductive and sexual health in Australia and the Asia Pacific region.

The Family Planning Australia Ethics Committee ensures that our research complies with the National Health and Medical Research Council (NHMRC) standards as outlined in the NHMRC National Statement on Ethical Conduct in Human Research (2023). During 2023–24, our Ethics Committee recruited several new members and convened seven times (five via Zoom and two via email). The expedited review subcommittee convened twice (all via email), with one additional out of session review conducted by the Chairperson. In addition, the Ethics Committee reviewed and approved 16 amendments.

Supported by our Ethics Executive Officer, the Committee also spent time updating their Standard Operating Procedures and working with our international program to improve compliance for Pacific projects.

Research team milestones and updates

The Research Centre data team responded to 354 internal requests for data and continued to work with teams across the organisation to ensure our data is accurate, meaningful and supports the organisation to monitor and evaluate the work we do.

Our research team submitted six journal articles and had five published in peer reviewed journals.

The Research Centre successfully achieved our first accreditation assessment for clinical trials and supported clinical teams in the process of accreditation assessment for our clinics.

Two chapters were updated in our resource for clinicians, Reproductive and Sexual Health:

An Australian Clinical Practice Handbook. This included Chapter 10 – Pregnancy options and Chapter 19 – Legal considerations in reproductive and sexual health.

Research projects

The Research Centre has been involved in a range of <u>studies</u> in 2023-24 – here are some examples of work undertaken over the past year.

Step-Up - Treating male partners of women with bacterial vaginosis to reduce recurrence: a randomised controlled trial

In partnership with Monash University, Kirby
Institute and others across Victoria and NSW, Family
Planning Australia continues to contribute to the
Step-Up study, a randomised controlled trial for
women diagnosed with bacterial vaginosis and
their male partners. This study aims to identify

whether treating male partners can contribute to reduced bacterial vaginosis re-infection among women. Bacterial vaginosis is very common among women and can contribute to pre-term delivery, spontaneous abortion and increased likelihood of STI or HIV acquisition.

ScreenEQUAL - Overcoming inequity: Increasing cervical screening participation for people with intellectual disability

In collaboration with the Daffodil Centre, University of Sydney, University of Western Sydney, UNSW, The Kirby Institute and the Cancer Institute NSW, Family Planning Australia is working to identify facilitators and barriers to participation in the National Cervical Screening Program among people with intellectual disability. The first stage of the study is focusing on consultation, which will be followed by co-design of interventions to improve access and uptake and evaluation of the impact of these interventions.

Identifying primary care opportunities to enhance human papillomavirus (HPV) vaccination and cervical screening for priority population groups

Led by University of NSW with partnership from Family Planning Australia, this study aims to fast-track the elimination of cervical cancer in Australia by identifying and addressing persistent barriers to access to proven cervical cancer prevention services in primary health care. The project is creating a digital navigation tool to share data about cervical cancer among groups with high rates of cervical cancer – people with a disability, Aboriginal and Torres Strait Islander people, people with socioeconomic disadvantage, people from culturally and linguistically diverse backgrounds, and people living in remote areas.

Our research team submitted six journal articles and had five published in peer reviewed journals.

Compass - Improving cervical cancer screening for women in Australia

Led by the Australian Centre for the Prevention of Cervical Cancer in collaboration with the Daffodil Centre, this is a large scale randomised controlled trial. Family Planning Australia is a partner supporting participant recruitment and follow-up. Compass aims to test the effectiveness of screening for the types of Human Papillomavirus which cause cervical cancer in comparison to Pap smears in the Australian context. We are doing this by comparing 2.5-yearly cytology-based cervical screening with 5-yearly primary HPV screening in Australian women aged 25-69.

Sexual health promotion and education among young people

Led by La Trobe University's Australian Research Centre in Sex, Health and Society, Family Planning Australia is a partner in this national four-year project. The project will work with young people, parents and carers, teachers and school staff and community services to focus on the sexual health, rights, well-being, and education of people in Australia. We have supported the project team in establishing the Youth Advisory Board and developing consultation surveys for stakeholder groups.

Improving counselling for emergency contraception: A unique job aide for pharmacists in Fiji

Family Planning Australia is collaborating on this project with the University of Technology Sydney, Fiji National University, the Reproductive and Family Health Association of Fiji, the Fijian Ministry of Health and the Asia Pacific Consortium for Emergency Contraception. The project aims to increase knowledge and confidence of pharmacists in Fiji to improve the availability and accessibility of emergency contraception in Fiji. Fijian pharmacists were surveyed and consulted to ascertain their knowledge of emergency contraception, their confidence in dispensing and discussing emergency contraception with clients and their dispensing practices. We are working with our International Program team and partners to publish the results of this project.

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ALLIANCE trial - Supporting pharmacists to provide contraception for people in need

Family Planning Australia is partnering with Monash University on the ALLIANCE trial, Quality family planning services and referrals in community pharmacy: Expanding pharmacists' scope of practice. This collaboration involves other leaders in reproductive and sexual health, including University of Melbourne, Sexual Health Victoria, Family Planning Welfare Association of the Northern Territory, Jean Hailes Foundation, University of Technology Sydney, University of Sydney, Gippsland Health Network Limited, Australian Pharmaceutical Industries Ltd, and Pharmaceutical Society Australia.

This trial aims to improve the health and wellbeing of Australian women by promoting safe and effective use of contraceptive medicines amongst those at high risk (women seeking the emergency contraceptive pill or early medical abortion) in settings such as rural and regional communities. It will achieve this by expanding community-based pharmacists' scope of practice to include the delivery of a contraception counselling and referral intervention. It will also directly address key barriers to implementation of this approach previously identified by community pharmacists.

Peer reviewed publications

Family Planning Australia Research Centre staff have authored and co-authored the following peer reviewed publications in 2023–24:

- Ford E. A., Chojenta C., Bagade T., Sweeney S., & Sutherland J. M. (2023). Fertility knowledge in a cohort of Australia's adolescents: a crosssectional study of reproductive and sexual health education. Sex Education, 1–19. https://doi.org/10.1 080/14681811.2023.2255543
- Bateson D., Ussher J. Strnadová I., Loblinzk J.,
 David M., Chang, E., Carter A., Sweeney S., Winkler
 L., Power R., Basckin C., Kennedy E., Jolly H. (2024).
 Working together with people with intellectual
 disability to make a difference: a protocol for a
 mixed-method co-production study to address
 inequities in cervical screening participation.
 Frontiers in Public Health, vol 12. https://
 www.frontiersin.org/journals/public-health/
 articles/10.3389/fpubh.2024.1360447

- Cheng Y., Boerma C. J., McGeechan K., & Estoesta J. (2023). Impact of policy changes of Medicare-rebated telehealth services on medical abortions provided at a family planning service during the coronavirus (COVID-19) pandemic. Sexual health, 20(4), 357–359. https://doi.org/10.1071/SH22196
- Cheng Y, Botfield J, Boerma C, Estoesta J. (2023)
 Increased demand for abortion information and advice during the COVID-19 pandemic.

 Australian and New Zealand Journal of Obstetrics and Gynaecology. 2023. http://dx.doi.org/10.1111/ajo.13651
- Robbers G. M. L., Cousins N., Lim Y. L., Estoesta J., & Botfield J. R. (2024). Views and experiences of young women from a migrant or refugee background regarding the contraceptive implant in Australia. Culture, Health & Sexuality, 1–18. https://doi.org/10.1080/13691058.2024.2328223

Fertility knowledge in Australia's adolescents: a cross-sectional study of reproductive and sexual health education (Ford et al, 2024)

Family Planning Australia partnered with the University of Newcastle and Hunter Medical Research Institute to examine fertility knowledge and understanding in adolescents. UNESCO guidelines for best practice in sexuality education for youth recommends including fertility education. This project examined young people's knowledge to develop guidance and future strategies for education.

Improving knowledge about fertility could lead to promoting good preconception health behaviours, which is important for reducing the 12% infertility rate.

Results recently published from this survey of a diverse sample of over 2,600 adolescents identified that knowledge about fertility was poor and knowledge about fertility was lower than knowledge of other sexual and reproductive health topics appearing in the Australian national curriculum. The study provides a promising perspective that including fertility explicitly as part of the national curriculum may lead to improvements in knowledge for young people of all backgrounds. The research team is continuing this work to investigate the best way to move forward for delivering evidence-based and relevant education about fertility to young people.

Conference presentations

<u>Oral and poster presentations</u> given by the Research Centre and other Family Planning Australia staff at conferences in 2023–24:

Title	Conference
Emergency contraception knowledge, attitude and practices of pharmacists in Fiji	Australasian Sexual and Reproductive Health Conference 2023
Views and experiences of young migrant and refugee women in Australia regarding the contraceptive implant	Australasian Sexual and Reproductive Health Conference 2023
Initial implementation of abortion services at Family Planning Australia	Australasian Sexual and Reproductive Health Conference 2023
Challenges and experiences of primary healthcare providers during initial implementation of abortion services at Family Planning Australia	WONCA World Conference 2023
Views and experiences of young migrant and refugee women in Australia regarding the contraceptive implant	WONCA World Conference 2023
Views and experiences of young migrant and refugee women in Australia regarding the contraceptive implant	Australian Public Health Conference 2023
Initial implementation of abortion services at Family Planning Australia	Australian Public Health Conference 2023
Medical abortion provision in NSW – Methodology and preliminary findings from our upcoming statistical report	Access All Areas: Prototyping Abortion Desert Visualisations to Improve Access 2024, University of Sydney

Views and experiences of young migrant and refugee women in Australia regarding the contraceptive implant (Robbers et al, 2024)

This study worked with young women from migrant and/or refugee backgrounds who spoke a language other than English. Interviews were conducted with 33 women, aged 15–24, living in NSW about their experience of the contraceptive implant. The study revealed factors which influenced their decision making and issues which supported or created barriers to accessing information and contraceptive services. Some of these are illustrated in these quotes from participants:

"Before I came to Australia I didn't know about all this contraception. The only contraception I knew was condoms" (Rwandan, 20 years old, past user).

"There's a lot of resources online. I'm not sure (...) how accurate everything is" (Chinese, 20 years old, current user).

"I used Implanon. It was good, it was invisible" (Afghani, 22 years old, past user).

"I think another pro to me about the Implanon, was, well, I don't have to be taking it every day. I don't have to be stashing pills away so that my parents can't find them." (Vietnamese, 23 years old, current user).

International Programme

Family Planning Australia works with partners in the Pacific to improve reproductive and sexual health and rights (SRHR) outcomes. We support local health and education services with a focus on gender equality, disability equity and rights, and youth participation. We apply a rights and evidence-based approach to creating a more equitable world and are committed to applying locally led principles to our programming.

We work across three program areas:

- Contraceptive choices
- Cervical screening and treatment
- Comprehensive sexuality education

In 2023–24 we were proud to collaborate with partners across 11 countries to reach over 10,203 people directly. The cervical screening program in the Solomon Islands significantly contributed to beneficiary reach. Innovative digital comprehensive sexuality education work with our partners in Fiji and Vanuatu reached over 331,000 people. Other projects provided clinical training on and supplies of contraception; supported countries to develop youth-friendly health service guidelines; reviewed school curricula hand in hand with Ministries of Education; and provided comprehensive sexuality education training for community members working with young people.

As part of our work under the United Nations
Population Fund (UNFPA) Transformative Agenda,
we were excited to continue to work in the
Federated States of Micronesia (FSM) and Republic
of the Marshall Islands (RMI). We completed our
first Family Planning Training in Yap state, the FSM
and collaboratively developed and localised the
RMI Teacher's Handbook and translated Lesson
Guides for Grade 4 and 5. We also grew our activity
in Fiji, providing training to enhance pharmacists'
knowledge and confidence in discussing and
counselling clients in emergency contraceptives

and introduced a standardized job aid to ensure consistent information across pharmacies. Work completed under the collaborative Eliminating Cervical Cancer in the Western Pacific initiative further connected us with PNG and Vanuatu partners, and we engaged with the Nauru government to scope an integrated women's health initiative.

Our <u>International Programme</u> is supported by the Australian government, through the Australian NGO Cooperation Program and Partnerships for a Healthy Region and the UNFPA Transformative Agenda. Other projects are funded by UNFPA Papua New Guinea, the Minderoo Foundation, Women's Plan Foundation and private donors.

Family Planning Australia is fully accredited with the Department of Foreign Affairs and Trade (DFAT) in relation to the management of international projects. This includes all components of DFAT compliance requirements for service integrity, development effectiveness, and financial management.



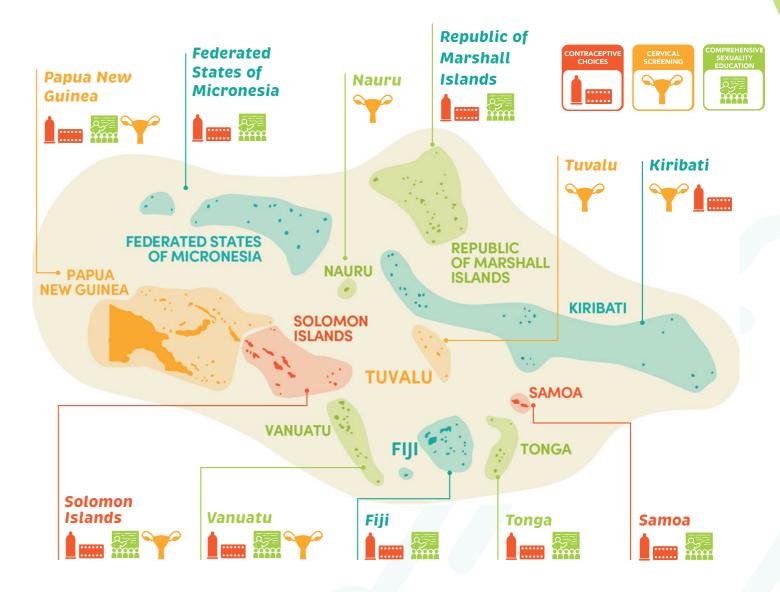


Family Planning Australia is a signatory to the Australian Council for International Development (ACFID) Code of Conduct, which is a voluntary, self-regulatory sector code for good practice. As a signatory, we are committed and fully adhere to the ACFID Code of Conduct, undertaking and evaluating our work with transparency, accountability and integrity.

If you wish to lodge a complaint with our organisation, our complaints handling policy can be found on our website: www.fpnsw.org.au.

Formal complaints can be submitted by email at: feedback@fpnsw.org.au. If you are not satisfied with our response to your complaint and believe our organisation has breached the ACFID Code of Conduct, you can lodge a complaint with the ACFID Code of Conduct Committee at code@acfid.asn.au. Information about how to lodge a complaint with ACFID can be found at www.acfid.asn.au.

Partners in the Pacific



Our projects aim to support all people to make informed decisions about their SRHR and improve access to fulfil their choices

Contraceptive Choices Program

Family Planning Australia supports increasing access to safe, effective and affordable methods of contraception in the Pacific. The Pacific has some of the lowest contraceptive prevalence rates globally, and a high need for family planning. We work with local partners to build the capacity of health systems to provide information and services so all people can actively plan their families.

Thanks to the ongoing generous support of the Wasley family, our partners in Papua New Guinea and Vanuatu have been able to provide over 5,024 women with contraceptives. This support ensures women in these communities have access to long acting reversible and other contraceptives.

5,024
CONTRACEPTIVES
DISTRIBUTED IN
VANUATU & PNG



Case study 1: Attitudinal changes towards Family Planning in Yap, Federated States of Micronesia

Family Planning Australia is engaged as an Implementing Partner of the UNFPA Transformative Agenda, to develop and deliver Family Planning Training in across the Pacific.

Family Planning Training equips clinicians with up-to-date knowledge and skills in sexual and reproductive health (SRH) and modern methods of contraception. This builds clinicians' capacity to deliver comprehensive family planning services locally, as well as strengthening counselling skills to address inaccurate and harmful stereotypes around family planning.

Family Planning Australia is engaged as an Implementing Partner of the In the second phase of the Transformative Agenda (2023 –2027), the Family Planning Training project expanded to the Federated States of Micronesia (FSM). In June, it was delivered to 14 healthcare providers in Yap state, which has a population of 11,000.

According to available data, 44 per cent of women in FSM are experiencing an "unmet need for family planning". This means that almost half of women of childbearing age in FSM want to delay or avoid pregnancy but are not using any reliable contraception¹ Additionally, FSM has one of the highest adolescent fertility rates in the world at 36 births in 1000 women².

The success of the training was evident by participants' change in attitudes. At the start of training, healthcare providers shared that they were dramatically influenced by community-held myths. Family Planning Australia's International Nurse Educator observed such changes in one Yapese healthcare assistant and training participant.

"She shared with the group that she had initially not wanted to attend training because she 'didn't believe in family planning', she believed it risked deformity in future children. By the end of the theory week, her position on family planning had changed so dramatically, that she spoke to a few of her adolescent nieces about family planning over the weekend.

By week two of training, she had bought her nieces into the clinic to have family planning education and have a Jadelle inserted so they could delay pregnancy and complete their education. It really goes to show how invaluable dispelling misinformation is in enabling access to services."

Cervical Screening Program

Cervical cancer is one of the most preventable and treatable forms of cancer. It is estimated that Pacific women are dying from cervical cancer at up to 13 times the rate of women in Australia. Cervical screening and treatment saves lives, however, it is not widely available in the Pacific.

Family Planning Australia supports the implementation of cervical cancer screening and treatment programs that reduce mortality from this preventable disease by training health professionals, providing education, and encouraging women to be screened for early detection and treatment. In 2023–24 partners in the Solomon Islands and Tuvalu successfully screened 4,696 women. We also held mentoring sessions with Master Trainers in PNG to strengthen local training capacity as part of the Eliminating Cervical Cancer in the Western Pacific initiative. We were invited to support the Republic of Nauru Hospital in planning for the implementation of a screening program, supporting the review of national policy and conducting a scoping visit in May 2024.

Family Planning Australia has been working in partnership throughout the year with the Daffodil Centre (joint venture between the University of Sydney and Cancer Council NSW), the Kirby Institute and the Australian Centre for the Prevention of Cervical Cancer to plan the co-design of the EPICC (Elimination Partnership in the Indo-Pacific for Cervical Cancer) program, funded as part of the DFAT Partnerships for a Healthy Region. EPICC will focus on the three pillars (immunisation, screening, treatment) of the WHO Global Strategy for the Elimination of Cervical Cancer. EPICC project activities will be co-designed with partner governments in 2024–25 to undertake a range of cervical cancer control activities in the Indo-Pacific region, with a focus on capacity building, sustainability and equity.

Impact story 1: First Pacific nation reaches WHO cancer elimination goal

The tiny and remote island nation of Tuvalu is the first in the Pacific to meet the World Health Organization (WHO) global screening goal for cervical cancer elimination with 86% of eligible women screened. Tuvalu is also the third country globally to reach the World Health Organizations target of 70% of eligible women screened. This is an outstanding achievement for women's health in the region. Tuvalu's nurses led the screening and treatment locally after training from Family Planning Australia nurse educators.

This is a remarkable effort as the population of Tuvalu is spread over nine geographically remote islands. Clinicians travel by sea from the main island to the outer islands, which is often a long and difficult journey. The essential medical equipment that is required for the project is frequently delayed or does not arrive in Tuvalu due to the limited flights and shipping availability.

"Together we've surpassed goals and set a shining example of collaborative achievement and a commitment to women's health." Ms Fenuatapu Mesako, Programme Manager, Tuvalu Family Health Association



Comprehensive Sexuality Education

The provision of comprehensive sexuality education (CSE) to all is a crucial enabler for individuals to make decisions on their sexual and reproductive health. In many countries in the Pacific, women and girls have a low social status and people with disability are often not provided the same rights as others. We aim to build the capacity of health and education systems as well as communities to provide evidence-based, inclusive CSE.

Considered a lifelong process, CSE extends beyond the school curriculum and should be accessible to all individuals regardless of age and their engagement with the education system.





Case study 3: Expanding Access to CSE through Digital Innovation in Fiji

Family Planning Australia has been collaborating with the Reproductive and Family Health Association of Fiji (RFHAF) to expand access to CSE through innovative digital health communication. As of 2021, 67.8% of the Fijian population used social media, presenting an opportunity to increase exposure to health communication messaging. For RFHAF, trialling CSE for young people through social media campaigns marks a new and innovative approach.

In April 2024, Family Planning Australia facilitated a 3-day Digital Communications refresher, following an initial workshop in 2023. This year's training engaged 13 participants in online health promotion skills development and RFHAF staff received guidance developing a social media policy. This policy will inform RFHAF's digital strategy and assist in managing potential challenges.

To further enhance their digital presence, RFHAF introduced Instagram to complement its established Facebook presence, boosting posts across both platforms to maximise reach. Over the year, RFHAF held four content creation workshops with peer educators, developing engaging and relevant CSE content for social media and honing the skills learnt in the Digital Communications Workshop. As a result, their social media campaigns reached an impressive 329,789 views over 12 months.

A key highlight was the creation of two animated videos on <u>consent and contraception</u>, recorded in both iTaukei and English. These videos, launched on social media, accounted for over half of the total views RFHAF received this year.

This approach broadened access to sexual and reproductive health information in Fiji and showcased the potential of social media to engage young people in ways traditional methods may not.

Comments from RFHAF social media posts:

Vinaka na veivakararamataki (thank you for the enlightenment.)"

"Please allow us to share this important information on our stories to ensure wider visibility. Vinaka (thank you).

329,789

PEOPLE RECEIVED
INNOVATIVE COMPREHENSIVE
SEXUAL INFORMATION
AND EDUCATION



My family know they can talk to me about FAMILY PLANNING





Case study 4: In School CSE (Family Life Education) resource development workshop, Majuro, the Republic of the Marshall Islands.

In 2022–23, the Public Schools System (PSS) of the Republic of the Marshall Islands (RMI) revised its Grade 4 and 5 health curriculum to include comprehensive Family Life Education (FLE). To build teacher confidence, and ensure that content was age and culturally appropriate, a resource development workshop was held in RMI in February 2024. The workshop's aim was to produce Grade 4 and Grade 5 Student Learning Resource Books, and an accompanying Teacher Manual.

The workshop, facilitated by two Family Planning Australia International Education Officers, contained two parts: validation and resource development. Validation gathered feedback from participants on their preference for images, layout and appropriate terminology, using interactive group activities. Participants recommended that the student workbooks be adapted into lesson guides for teachers, which included handouts for students.

The International Education Officers supplied participants with a completed draft Grade 4 Student Learning Resource Book and Teacher Manual, and feedback was collected on both. The Grade 5 Student Learning Resource Book was partially drafted for participants to enable them to develop content and add activities during the workshop.

Participants reiterated the need for translated materials, as most Marshallese primary-age students likely do not yet possess the English literacy levels required to thoroughly understand key concepts in English. It was agreed that instructions and student handouts should be in both US English and Marshallese.

The workshop was highly successful, gathering important insights and suggestions from education professionals in the Marshall Islands. The face-to-face workshop enabled Family Planning Australia to strengthen our working relationship with the PSS and other teaching experts by engaging in honest and constructive discussions. Their advice shaped the format and content of the materials, ensuring better contextualisation of FLE for young people in their communities.

This work is part of UNFPA's Transformative Agenda for Women, Adolescents and Youth in the Pacific, funded through the Australian Department of Foreign Affairs and Trade.

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Communications and Marketing

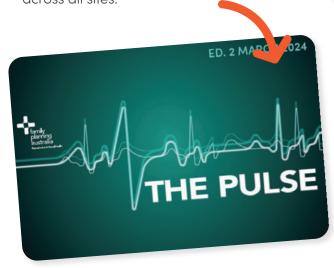
2023-24 was a busy year for the Communications & Marketing team as we continued to support the business across corporate and pillars, as well as implementing our comprehensive strategic plan.

Our graphic design team produced excellent work across digital/online and video, as well as a range of print and ad hoc resources. We developed and delivered key messages via through-the-line campaigns that achieved high awareness and reach through the year in NSW, Australia and the Pacific.

Our primary focus continues to be knowledge sharing of reproductive and sexual health information and services to improve health outcomes for every body.

Launch of The Pulse

The first edition of the staff newsletter was launched on 1st December, 2023 with a round up of companywide activities, events, milestones and news. The Pulse was created by the Communications Working Group in response to feedback from the Staff Survey in 2023, addressing the need for shared communications across Family Planning Australia. Each edition was enthusiastically received by staff across all sites.



Websites

The website also promotes our Education course enrolments, supports the International Program, allows visitors to access a huge range of resources such as clinical factsheets, research papers, booklets and leaflets, and showcases our advocacy initiatives.

Our supporting websites - frank.org.au, planetpuberty. org.au, bodytalk.org.au, freedomcondom.org.au, inreallife.org.au, pregnancychoices.org.au and Know Your Health - are purpose built and offer specialised information on reproductive and sexual health across a broad range of target audiences including young people, parents and carers of people with disability and people who's first language is not English.





Social media

Family Planning Australia continues to have a robust social media presence across









We ran campaigns in support of International Women's Day, International Day of Nurses and paid promotional campaigns for Freedom Condom and Planet Puberty, which ran animated visuals and short videos for the first time ever. The International and Education teams were supported through a series of customised posts promoting collaborations and courses.

AVERAGING 736 POSTS ACROSS AROUND ALL CHANNELS

TOTAL NUMBER OF FOLLOWERS







Our graphic design team developed resources from social media tiles, bookles, flyers, posters, eDMs, branding, signage, manuals and infographics, videos, audio files and photos for all pillars, including corporate events and conferences.











We continue to work proactively with the media, sharing stories, reports and articles showcasing our leadership in reproductive and sexual health services and information across NSW.

We were represented across a range of radio, podcast and videointerviews, quotes in publications, and representations at key events in NSW and overseas. Our staff from clinics, advocacy, research, education and health promotion ably supported the organsation in highlighting imprortant access and equity issues, as well as addressing misconceptions and promoting our various resources and services.







organic LinkedIn posts promoting our services





paid posts on Facebook, three in LinkedIn



International Day of Nurses



Events, social media, media, promotional material, video, branding, podcasts...

Advocacy

Family Planning Australia advocates for sexual and reproductive health and rights by engaging with key stakeholders and decision makers at state, national and international levels. We use a range of strategies to deliver and amplify our messages, working in partnership with local and regional networks and maintaining a particular focus on the health and rights of priority population groups.

This year our advocacy work involved contributing to:



stakeholder

and decision

networks

makers

We use research evidence to strengthen our position on key issues and respond to ongoing and emerging developments in the sector.

During 2023-24 our advocacy work had a particular focus on:

stakeholders

• Ensuring the continuation of telehealth for reproductive and sexual healthcare. Following strong advocacy on this issue since 2020, this year telehealth item numbers and exemptions for sexual and reproductive health and pregnancy support counselling were made permanent

- Increasing access to abortion services in NSW
- Enhancing access to long-acting reversible contraceptives through stronger support for nurse-led models
- Promoting well-resourced and accessible cervical screening and prevention services in Australia and the Pacific
- Providing comprehensive sexuality education in schools which is evidence based, age appropriate and covers the full range of content on relationships, sexuality and sexual health, as recommended by international best practice standards
- Updating our disability policy statement and strengthening the capacity of disability services and the NDIS to ensure provision of sexuality and relationships supports for people with disability
- Supporting equity and rights to healthcare services and information for other priority population groups, including young people, Aboriginal and Torres Strait Islander people, culturally and linguistically diverse people, LGBTIQA+ people, and people living in rural and remote locations
- Contributing to the formation of the Australian government's new gender equality and disability equity and rights strategies, which will inform funding and delivery of international development programs
- Marking the 30th anniversary of the International Conference on Population and Development Program of Action, acknowledging progress and calling for renewed efforts to achieve targets
- Developing an organisational policy statement outlining the links between climate change and sexual and reproductive health and rights and our role in addressing this

- Promoting ways in which our work supports achievement of SDG targets, we collaborated with the STI Programs Unit at the NSW Ministry of Health to develop and deliver a workshop at the NSW Department of Education's conference for Stage 6 teachers, 'Applying the Sustainable Development Goals to sexual and reproductive health in Australia.'
- Improving access to public transport in Western Sydney

International advocacy

This year we continued to engage with key stakeholders and decision makers in regional and global consultations, forums and events to highlight achievements and challenges in SRHR we encounter in our work in Australia and the Pacific. This includes working with the Department of Foreign Affairs and Trade and other government stakeholders to inform and support our international advocacy. We also join with national, regional and global networks to amplify our messages, including the Asia Pacific Alliance for Sexual and Reproductive Health and Rights (APA), the International Sexual and Reproductive Health Consortium, the International Sexual and Reproductive Rights Coalition and members of the International Planned Parenthood Federation (IPPF).

November 2023 was a busy month for our advocacy team, travelling to Bangkok for the 7th Asia Pacific Population Conference (APPC), hosted by the United Nations Economic and Social Commission for Asia and the Pacific. The conference is held every 10 years to review and renew efforts in the region to meet development targets, including advances in sexual and reproductive health and rights, gender equality, universal health coverage and sustainable development. In preparation for the conference, we also attended the biennial APA members' meeting, exploring the theme of strategies for SRHR advocacy. We then worked together with APA members and others from the region at the APPC Civil Society Organisations' Forum to develop strategies and a joint statement on key issues, which were later presented to government representatives during the APPC proceedings.





CEO Sue Shilbury made an oral statement at the Commission on Population and Development at the United Nations, New York, November 2023

CEO Sue Shilbury and Senior Policy Officer Caecilia Roth attended the 57th Commission on Population and Development (CPD) 29 April – 3 May 2024 in New York. CPD is a global event, run by the United Nations Population Division, fostering support for global dialogue and action on population and development. The theme this year marked the 30th anniversary of the International Conference on Population and Development in 1994 and its landmark Program of Action outlining targets to focus on reproductive and sexual health with a human rights-based approach to development.



Advocating for SRHR access and education for all at the 7th Asia Pacific Population Conference in Bangkok in November 2023: The Hon Michael Kirby and Rosemary McKay, Director Universal Health Coverage Section, Australian Department of Foreign Affairs and Trade, with Senior Policy Officer Caecilia Roth



Meeting with other IPPF member associations to collaborate on advocacy at the Commission on Population and Development: Sue Shilbury and Caecilia Roth meeting with Tor-Hugne Olsen and Kristin Kjaeret from Sex og Politikk, Norway and Alicia Sudden from Sexual Wellbeing Aotearoa

Our <u>oral statement</u> to the Commission highlighted ways in which Family Planning Australia is contributing to achieving the Program of Action, such as through the establishment of outreach clinics in rural and regional NSW, leading initiatives to increase access to cervical screening for unscreened and under screened people, and contributing to the evidence base on adolescent fertility and provision of long-acting reversible contraception. We also presented an oral statement on behalf of APA, highlighting the contribution of civil society organisations and the importance of their ongoing engagement with international processes and advocacy. Both statements acknowledged that concerted and ongoing action is needed to address challenges to sexual and reproductive health and rights as an essential component of sustainable development, and to ensure that no one is left behind.

With funding from the UNFPA, Family Planning Australia is the secretariat of the <u>Australian</u>

Parliamentary Group on Population and Development (APGPD). The APGPD is a cross-party group of parliamentarians committed to advocating for sexual and reproductive health, the rights of women, and sustainable development in Australia and the region.

We use a range of strategies to deliver and amplify our messages, working in partnership with local and regional networks and maintaining a particular focus on the health and rights of priority population groups.

Throughout the year we worked with the APGPD to host a series of events for parliamentarians and key stakeholders, including Australia's Department of Foreign Affairs and Trade, with guest presenters to inform them on current issues. UNFPA Asia Pacific presented key findings from their 2023 State of the World Population Report, <u>8 Billion Lives</u>, Infinite Possibilities: the case for rights and choices. Care Australia/Afghanistan provided a briefing on the impact of Australian aid is having on improving the lives of women and girls in Afghanistan. Plan Interational and ActionAid provided an overview of the impacts of the climate crisis on women and girls in the Asia-Pacific region, presented by young women activists from Vanuatu, Indonesia, Nepal and Australia. The International Sexual and Reproductive Health and Rights Consortium also hosted a roundtable discussion on SRHR challenges in the region from the perspective of Australian based non-government organisations working in international development.



Australian Parliamentary Group on Population and Development Co-Chairs with UNFPA representatives in August 2023 launching UNFPA's State of the World Population 2023 report, 8 Billion Lives. (L-R): Lisa Chesters MP (APGPD co-chair), UNFPA representatives Ana Maria Leal, Catherine Breen Kamkong and Bjorn Andersson (Regional Director, Asia Pacific), Sen. Mehreen Faruqi (APGPD co-chair), Dr Monique Ryan MP (APGPD co-chair).

Advocacy submissions

Our submissions to inquiries, consultations and letters covered the following topics:

Focus Area/Issues	Audience/Recipients
Post Implementation Review of Telehealth	MBS items Medicare Benefits Schedule Review Advisory Committee
Review of telehealth Medicare Benefits	Schedule items NSW Government – Hon Mark Butler MP, Minister for Health and Aged Care
Nurse led Long-Acting Reversible Contraceptive services	Hon Ged Kearney MP, Assistant Minister for Health and Aged Care
Consultation on draft Clinical Guideline for Abortion Care	Royal Australian and New Zealand College of Obstetricians and Gynaecologists – Women's Health Committee
NSW Abortion Law Reform Act 2019 – 5-year review since decriminalisation	NSW Health
Prioritising sexual and reproductive health and rights internationally, including abortion rights	Senator Penny Wong, Foreign Minister
Review of national family planning needs and activities	Australian Government – Department of Health and Aged Care
New international disability equity and rights strategy	Australian Government – Department of Foreign Affairs and Trade, Minister of Foreign Affairs and Minister for International Development and the Pacific
Inquiry into the capability and culture of the National Disability Insurance Agency	Joint Standing Committee on the National Disability Insurance Scheme
New international gender equality strategy	Australian Government – Department of Foreign Affairs and Trade
Inquiry into the Equality Legislation Amendment (LGBTIQA+) Bill 2023	NSW Government – Committee on Community Services and NSW Premier Chris Minns
Alternative Report on the International Conference on Population and Development Program of Action	Asia Pacific governments and civil society organisations
Call to action on gender equality and sexual and reproductive health and rights	7th Asia Pacific Population Conference - Governments, UN agencies, donors, and civil society organisations attending
Universal access to sexual and reproductive health and rights, emphasising our work in cervical screening and our research on adolescent pregnancy	United Nations – 57th Commission on Population and Development
Revised National Cervical Screening Program Guidelines	Australian Department of Health – Cancer Council Australia
Statement on community and health workforce collaboration to eliminate HIV in Asia and the Pacific	Australian Government – Department of Foreign Affairs and Trade
Youth priorities in NSW	NSW Government – Office for Regional Yout
Current and future public transport needs in Western Sydney	NSW Government – Portfolio Committee No. 6 Transport and the Arts
Sydney Metro West Project	NSW Government – Committee on Transport and Infrastructure
NSW Years 7-10 syllabus for Personal Development, Health and Physical Education	NSW Years 7–10 syllabus for Personal Development, Health and Physical Education

Family Planning Australia Annual Report 2023-24

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Financial Information

Family Planning NSW trading as Family Planning Australia

ABN 75 000 026 335

Annual Report - 30 June 2024

Family Planning Australia Directors' report 30 June 2024

The Directors present their report, together with the financial statements, on the company for the year ended 30 June 2024.

Directors

The following persons were Directors of the company during the whole of the financial year and up to the date of this report, unless otherwise stated:

Bernadette Or

Carla Cranny

Kim Field (resigned September 2023)

Gary Trenaman

Melissa Williams

Neil Jackson

Stephanie Cross

Samantha Campbell

Suzanne Stanton

Dr Imogen Thomson (appointed April 2024)

Christine Kane (appointed April 2024)

Objectives

The company's short term objectives are to:

- Provide expert reproductive and sexual health services targeted to marginalised communities, through clinical care and health promotion.
- · Provide best practice education, training and workforce development to service providers and our target communities.
- Increase the body of evidence for reproductive and sexual health, translating research into practice and evaluating project outcomes.
- Work to assist the poor and disadvantaged communities in the Asia Pacific region to access comprehensive reproductive and sexual health services.
- · Maintain a strong and sustainable organisation with efficient core services to support our staff, partners and clients.

The company's long term objectives are to:

- Facilitate, promote and provide best practice reproductive and sexual health services for all.
- Be sustainable and strive for continuous improvement as to provide the best possible outcomes with respect to reproductive and sexual health for the people of NSW and Asia Pacific region.

Strategies for achieving the objectives

- Working within a strategic framework to maximise reproductive and sexual health outcomes, through the provision of demonstration services targeted to priority populations, and education and training to healthcare providers.
- · Establishing collaborative relationships and partnerships to extend the reach of Family Planning Australia.
- Promoting the uptake and integration of research findings into service delivery.

Principal activities

During the financial year the principal continuing activities of the company were to facilitate optimal reproductive and sexual health service provision through direct clinical services, education and training of doctors and nurses, research and advocacy.

Performance measures

The company measures its performance against benchmarks determined by the organisation's Strategic Plan, current year Business Plan and the performance indicators set in negotiation with the NSW Ministry of Health as part of annual funding agreements. Performance against these benchmarks is reported to funders and the Board of Directors. The benchmarks are used by the directors to assess the financial sustainability of the company and whether the company's short-term and long-term objectives are being achieved.

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Family Planning Australia Directors' report 30 June 2024

Key performance measures 2023 2023 2024 2024 Benchmark Actual Benchmark Actual Benchmark Client Visits 27,481 31,441 28,316 28,000 **Operational and Financial** Proportion of funding from: **Grants:** Government grants 71% 76% 72% Other grants 9% 10% 8% 6% Self-generated income: **Donations** 0% 0% 0% Investments 3% 2% 14% 21%

Review of operations

The surplus for the company after providing for income tax amounted to \$582 (30 June 2023: \$91,005).

Significant changes in the state of affairs

There were no significant changes in the state of affairs of the company during the financial year

Information on Directors



Bernadette Or

Qualifications

GAICD, FCPA, M.Comm, B.A. Economics and Accounting

Grad Dip Social Impact

Grad Dip Document and Knowledge Management Studies

Experience

- Non-executive director Family Planning Australia since November 2017
- CFO across various industries
- Chair and President of Afghan Women On The Move Board
- Former Board member Streetwize Communications
- Former Chair Crohns and Colitis Australia Board

Special Responsibilities

- President
- Chair Performance and Remuneration Committee
- Chair Board Executive Committee



Carla Cranny

Qualifications

BA, University of Sydney

Experience

- Non-executive director Family Planning Australia since November 2018
- Director Carla Cranny & Associates
- Twelve years in senior Executive roles in NSW Health and Western Sydney Local Health District
- Former CEO Family Planning NSW
- Extensive advocacy and leadership roles in NSW Health leading statewide reforms and strategic and service planning

Special Responsibilities

- Vice President
- Member Finance, Risk and Audit Committee
- Chair, Planning and Development Working Group
- Board Executive Committee



Kim Field

Qualifications

Master Social Work

Experience

- Non-executive director Family Planning Australia since November 2018
- More than 40 years in health services including over 20 years as Director of Primary and Community Health in Western Sydney, Northern Sydney Central Coast and Northern Sydney



Gary Trenaman

Qualifications

BComm, MBA, GradDip Applied Corporate Governance, CPA, GAICD, FGIA, JP.

Experience

- Non-executive director Family Planning Australia since November 2017
- CEO Running for Premature Babies
- Former Company Secretary
- Focused career in not for profits in CEO and CFO roles

Special Responsibilities

- Treasurer
- Chair Finance, Risk and Audit Committee
- Board Executive Committee



Dr Melissa Williams

Qualifications

Doctor of Philosophy School of Business Western Sydney University (WSU)

Bachelor of Business UTS

Grad Cert of Research WSU

Experience

- Non-executive director Family Planning Australia since November 2020
- Chief Executive Officer at Gandangara Local
- Aboriginal Land Council, Gandangara Health Services Limited, Marumali Ltd and Gandangara Transport Services Limited
- Former Industry Marketing Director, Telstra
- Former Director Western Sydney University
- Author



Neil Jackson

Qualifications

LL.B, B.Ec, LL.M.

Experience

- Non-executive director Family Planning Australia 1999-2011; reelected November 2017
- Barrister
- Member of the Conciliators and Arbitrators Association, the Australian Association of Family Lawyers and Conciliators, the Family Law Section of the Law Council of Australia, Australian Plaintiff Lawyers Association
- Member of the Family Law Committee and the Alternative Dispute Resolution Committee of the New South Wales Bar Council. Former board member of 3 Bridges

Special Responsibilities

- Vice President
- Member Finance, Risk and Audit Committee
- Member Executive Committee



Stephanie Cross

Qualifications

B SocSc (Applied), MBA,
GAICD

Experience

- Non-executive director Family Planning Australia since November 2019
- Extensive senior experience in corporate and strategic services in the NSW public sector including former roles as Deputy Director General and Executive Director in several government departments and agencies
- Board member of Massey Park Golf Club

Special Responsibilities

- Member Finance, Risk and Audit Committee
- Member Performance and Remuneration Committee



Samantha Campbell Qualifications

B.A. Gender Studies.

Post-Graduate Certificate in Social Health and Counselling Diploma in Community Sector Management.

Experience

- Non-executive director Family Planning Australia since November 2022
- Specialist in domestic and family violence sector.
- Women's rights activist
- Manager of community-based Specialist Homelessness Sector

Special Responsibilities

- Member Planning and Development Working Group
- Member Board Consumer Advisory Committee



Suzanne Stanton Qualifications LL.B, B.A.

Experience

- Non-executive director Family Planning Australia since November 2022
- Director and Corporate Counsel Mawland Group
- Director at Sala bai School Cambodia
- Director of Swiss-Belhotel International Group
- Previous Partner Gadens Lawyers

Special Responsibilities

• Member Performance and Remuneration Committee



Christine Kane

Qualifications

Masters of Data Analysis MBA, Accounting and **Negotiations** B. Science in Finance

Experience

- Non-executive director Family Planning Australia since April 2024
- 20+ years of commercial strategy, pricing, and operations experience in technology and software industries
- Previous committee experiences in social, audit and governance

Special Responsibilities

Member Planning and Development Working Group



Dr Imogen Thomson

Qualifications Doctor of Medicine M. Philosophy

Experience

- Non-executive director of Family Planning Australia since April 2024
- Clinical experience in women's health as a current trainee with the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (FRANZCOG trainee)
- Non-executive director of Through the Unexpected, a not-for-profit organisation supporting families who receive an unanticipated result or diagnosis during their pregnancy
- Experience in clinical governance and health systems, including for the Australian Digital Health Agency and McKinsey & company



Charmaine Belfanti

Qualifications

GAICD, MBA (Executive) Grad. Certificate in Governance Practice, FGIA.

Experience

- Company Secretary Family Planning Australia since June 2023
- Company Secretary for charities and companies limited by guarantee
- Facilitator, Governance Institute Australia (GIA)

Matters subsequent to the end of the financial year

No matter or circumstance has arisen since 30 June 2024 that has significantly affected, or may significantly affect the company's operations, the results of those operations, or the company's state of affairs in future financial years.

Family Planning Australia Directors' report 30 June 2024

Meetings of Directors

The number of meetings of the company's Board of Directors ('the Board') and Sub-Committees of the Board held during the year ended 30 June 2024, and the number of meetings attended by each director were:

	Full E Attended	Board Held
Bernadette Or (Chair) Carla Cranny Kim Field Gary Trenaman Melissa Williams Neil Jackson Stephanie Cross Samantha Campbell Suzanne Stanton Christine Kane Dr Imogen Thomson	6 8 1 7 5 6 8 6 6 2 2	
	Board Executive Committee Attended	Board Executive Committee Held
Bernadette Or (Chair) Gary Trenaman Carla Cranny Neil Jackson	- - -	
	Finance Risk and Audit Committee Attended	Finance Risk and Audit Committee Held
Gary Trenaman (Chair) Stephanie Cross Neil Jackson Carla Cranny Nicki Potts	5 5 5 6 2	
This respective committee was dissolved in November 2023	Governance Committee Attended	Governance Committee Held
Stephanie Cross (Chair) Gary Trenaman Neil Jackson Carla Cranny	1 1 1	

Family Planning Australia Directors' report 30 June 2024

	Performance and Remuneration Committee Attended	Performance and Remuneration Committee Held
Bernadette Or (Chair) Stephanie Cross Suzanne Stanton	1 1 1	1 1 1
	Day Surgery Unit – Medical Advisory Committee	Day Surgery Unit – Medical Advisory Committee
Antoinette Walsh Bronte Simpson Clare Boerma Naim Arrage Evonne Ong Jodie Duggan Kevin Pedemont Nic Comninos Selvan Pather Agnes Molnar Kitty Smith Joanne Ludlow (resigned)	Attended 3 2 2 1 3 4 3 2 - 4 1 1	Held 3 2 2 3 4 4 4 4 1 1
	Clinical Advisory Committee	Clinical Advisory Committee
	Attended	Held
Antoinette Walsh Clare Boerma Donna Tilley Jodie Duggan Kirsten Black Lesley Cotterell Majella Hill Rebecca Davis Selvan Pather Sue Jacobs Evonne Ong Sue Shilbury (Guest)	1 1 2 2 2 2 1 1 1 - 2	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 1

Held: represents the number of meetings held during the time the Director held office.

Indemnity and insurance of auditor
The company has not, during or since the end of the financial year, indemnified or agreed to indemnify the auditor of the company or any related entity against a liability incurred by the auditor.

During the financial year, the company has not paid a premium in respect of a contract to insure the auditor of the company or any related entity.

Family Planning Australia Annual Report 2023-24

Family Planning Australia Directors' report 30 June 2024

Proceedings on behalf of the company

No person has applied to the Court under section 237 of the Corporations Act 2001 for leave to bring proceedings on behalf of the company, or to intervene in any proceedings to which the company is a party for the purpose of taking responsibility on behalf of the company for all or part of those proceedings.

Contributions on winding up

In the event of the company being wound up, ordinary members are required to contribute a maximum of \$50 each. The total amount that members of the company are liable to contribute if the company is wound up is \$950 based on 19 current ordinary members.

Auditor's independence declaration

A copy of the auditor's independence declaration as required under section 307C of the Corporations Act 2001 is set out immediately after this Directors' report.

This report is made in accordance with a resolution of Directors, pursuant to section 298(2)(a) of the Corporations Act 2001.

On behalf of the Directors

Bernadette Or President

28 October 2024

gangamea

Gary Trenaman Treasurer



Auditor's Independence Declaration under Section 60-40 of the Australian Charities and Not-for-profits Commission Act 2012

To those charged with governance of Family Planning NSW trading as Family Planning Australia

As auditor for the audit of Family Planning Australia for the year ended 30 June 2024, I declare that, to the best of my knowledge and belief, there have been:

- no contraventions of the auditor independence requirements as set out in the Australian Charities and Not-for-profits Commission Act 2012 in relation to the audit; and
- no contraventions of any applicable code of professional conduct in relation to the audit.

This declaration is in respect of Family Planning Australia during the year.

William Buck

Accountants & Advisors

William Buch

ABN: 16 021 300 521

Domenic Molluso

Partner

Sydney, 28 October 2024

Level 29, 66 Goulburn Street, Sydney NSW 2000 Level 7, 3 Horwood Place, Parramatta NSW 2150 1/28 National Circuit, Forrest ACT 2603

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Family Planning Australia Contents 30 June 2024

Statement of profit or loss and other comprehensive income
Statement of financial position
Statement of changes in equity
Statement of cash flows
Notes to the financial statements
Directors' declaration
Independent auditor's report to the members of Family Planning Australia

General information

The financial statements cover Family Planning Australia as an individual entity. The financial statements are presented in Australian dollars, which is Family Planning Australia's functional and presentation currency.

Family Planning Australia is an unlisted public company limited by guarantee, incorporated and domiciled in Australia. Its registered office and principal place of business is:

8 Holker St Newington NSW, 2127, Australia

A description of the nature of the company's operations and its principal activities are included in the Directors' report, which is not part of the financial statements.

The financial statements were authorised for issue, in accordance with a resolution of Directors, on 28 October 2024. The Directors have the power to amend and reissue the financial statements.

Family Planning Australia Statement of profit or loss and other comprehensive income For the year ended 30 June 2024

	Note	2024 \$	2023 \$
Domestic Revenue Grants - Government grants Other grants		12,611,096 257,664	12,201,816 273,049
Other grants		12,868,760	12,474,865
Sales Revenue			
Sales revenue - Contraceptive income Sales revenue - Course fees		44,986 342,587	44,030 202,950
Sales revenue - Bookshop sales		60,477	53,040
		448,050	300,020
Medicare revenue		812,905	690,554
Private billing revenue		1,099,243	860,081
Investment revenue Donations and gifts - Monetary		429,857 -	85,217 -
Donations and gifts - Non-monetary		-	-
Other revenue		178,783 2,520,788	159,904 1,795,756
Total domestic revenue		15,837,598	14,570,641
		10,007,000	14,070,041
International revenue Grants - Department of Foreign Affairs and Trade		594,757	602,139
Grants - Other Australian		71,846	179,904
Grants - Other overseas		1,659,461	1,115,745
Donations and gifts - Monetary		81,111	63,509
Donations and gifts - Non-monetary		30,238	28,206
Investment income		51,173	225,012
Other revenue Total international revenue		222,023 2,710,609	234,593 2,449,108
Total revenue		18,548,207	17,019,749
Expenses Audit / professional services		(57,000)	(43,500)
Bad debts		(37,000)	(83)
Branding and marketing		(60,122)	(42,255)
Computer services and software Conferences and seminars		(749,145) (151,269)	(496,362) (72,387)
Consultancy		(667,121)	(811,364)
Depreciation - PPE	9	(379,700)	(387,099)
Depreciation - ROUA	10	(61,296)	(60,624)
Amortisation - Intangible	11	(5,560)	(5,560)
Consumables / client expenses Cost of Goods Sold		(71,895) (57,150)	(107,296) (69,054)
Employee benefit expenses		(11,601,489)	(10,041,452)
File scanning		(9,849)	(8,778)
Insurance		(212,842)	(221,455)
Lease / rent		(10,939)	(10,527)
Materials and equipment Medical consumables		(61,588) (202,585)	(133,453) (179,432)
Printing / postage / stationery / advertising / photocopying		(92,994)	(179,432)
Repairs and maintenance / cleaning		(358,445)	(734,553)
Staff recruitment		(90,280)	(35,210)
Stock write-off		(7,652)	2,194

The above statement of profit or loss and other comprehensive income should be read in conjunction with the accompanying notes

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Family Planning Australia Statement of profit or loss and other comprehensive income For the year ended 30 June 2024

	Note	2024 \$	2023 \$
Strata levies Teaching resources Telephone / internet Travel Utilities Website development Other expenses Total domestic program expenses		(50,746) (47,171) (99,009) (271,543) (120,593) (4,626) (334,407) (15,837,016)	(61,290) (11,166) (195,368) (190,750) (120,426) (22,338) (254,854) (14,508,220)
International aid and development programs International programs - Funds to international programs International programs - Program support costs		(1,887,629) (481,398)	(1,549,697) (588,622)
Fundraising costs - Public Fundraising costs - Government, multilateral and private		(249)	(220)
Accountability and administration		(311,095)	(282,363)
Non-Monetary expenditure		(30,238)	(28,206)
Total international aid and development program expenses		(2,710,609)	(2,449,108)
Total expenses		(18,547,625)	(16,928,744)
Surplus before income tax (expense)		582	91,005
Income tax (expense)		-	-
Surplus after income tax (expense) for the year attributable to the members of Family Planning Australia	18	582	91,005
Other comprehensive income			
Items that may be reclassified subsequently to profit or loss Net gain on asset revaluation reserve Net gain on investment revaluation reserve		1,004,916 28,975	9,088
Other comprehensive income for the year, net of tax		1,033,891	9,088
Total comprehensive income for the year attributable to the members of Family Planning Australia		1,034,473	100,093

The above statement of profit or loss and other comprehensive income should be read in conjunction with the accompanying notes

Family Planning Australia Statement of financial position As at 30 June 2024

Current assets		Note	2024 \$	2023 \$
Cash and cash equivalents 4 6,674,600 6,952,524 Irrade and other receivables 5 502,577 23,824 Inventories 5 502,577 23,824 Other financial assets 7 150,843 20,737 Total current assets 7 150,843 7,447,600 Non-current assets 8 1,751,978 1,723,002 Financial assets at fair value through other comprehensive income 8 1,751,978 1,723,002 Financial assets at fair value through other comprehensive income 8 24,803,167 24,076,384 Right-of-use assets 10 30,640 91,936 Intangibles 11 3,218 8,778 Other non-current assets 26,589,003 25,900,100 Total assets 12 1,774,387 1,546,808 Lease liabilities 12 1,774,387 1,546,808 Lease liabilities 12 1,774,387 1,546,808 Lease liabilities 12 1,774,387 1,546,808	Assets			
Tarda and other receivables 5 502,577 233,624 17,151 1				
Inventories				
Other financial assets 7 150,843 209,737 Other Other 7,384,684 7,447,600 Non-current assets Trade and other receivables Trade and other receivables 1 2 Financial assets at fair value through other comprehensive income Property, plant and equipment Right-of-use assets 8 1,751,978 1,723,002 24,803,167 24,076,384 8,778 1,723,002 24,076,384 8,778 1,773,084 8,778 1,778,384 8,778 1,778,384 8,778 1,778,384 8,778 1,778,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 8,778 1,770,384 3,347,700 1,770,384 1,770,387 1,546,808 3,287 1,770,387 1,774,387 <td></td> <td></td> <td></td> <td></td>				
Non-current assets		Ü	-	-
Non-current assets Trade and other receivables 8 1,751,978 1,723,002 Financial assets at fair value through other comprehensive income 8 1,751,978 1,723,002 Property, plant and equipment 9 24,803,167 24,076,384 Right-of-use assets 10 30,640 91,936 Intangibles 11 3,218 8,778 Other non-current assets 26,589,003 25,900,100 Total assets 33,973,687 33,347,700 Current liabilities Trade and other payables 12 1,774,387 1,546,808 Lease liabilities 13 32,971 63,328 Employee benefits 14 1,463,914 1,474,192 PAYG withholding tax 121,603 93,907 Provisions 121,603 93,907 Other 1 1,070,899 1,644,087 Total current liabilities 1 1,070,899 1,644,087 Total current liabilities 1 1,070,899 1,644,087 Total inon-current liabilities <td></td> <td>7</td> <td></td> <td></td>		7		
Financial assets at fair value through other comprehensive income Financial assets at fair value through other comprehensive income Financial assets at fair value through other comprehensive income Page	Total current assets	=	7,384,684	7,447,600
Financial assets at fair value through other comprehensive income 8 1,751,978 1,723,002 3,004 3,00	Non-current assets			
Property, plant and equipment 9 24,803,167 24,076,384 Right-of-use assets 10 30,640 91,936 Intangibles 11 3,218 8,778 Other non-current assets 26,589,003 25,900,100 Total non-current assets 26,589,003 25,900,100 25,900,100 25,900,100 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 25,900,100 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 26,589,003 27			-	-
Right-of-use assets Intangibles 10 30,640 91,936 land possibles 11 3,218 8,778 7				
Intangibles Other non-current assets 11 3,218 26,589,003 8,778 25,000,100 Total non-current assets 26,589,003 25,900,100 Total assets 33,973,687 33,347,700 Current liabilities Trade and other payables 12 1,774,387 1,546,808 Lease liabilities 13 32,971 63,328 Employee benefits 14 1,463,914 1,474,192 PAYG withholding tax 121,603 93,907 Provisions 12 1,070,899 1,644,087 Other 15 1,070,899 1,644,087 Total current liabilities 15 1,070,899 1,644,087 Total current liabilities 2 2 2 2 2 Trade and other payables 2 2 2 2 2 Borrowings 2 2 2 2 2 Lease liabilities 16 2 32,971 2 2 Employee benefits 17 61,654 78,621 Provisions 2 61,654 111,592 Other 4,525,428 4,933,914 Total inon-current liabilities 29,448,259 28,413,786				
Total assets 26,589,003 25,900,100 Total assets 33,973,687 33,347,700 Liabilities Trade and other payables 12 1,774,387 1,546,808 Lease liabilities 13 32,971 63,328 Employee benefits 14 1,463,914 1,474,192 PAYG withholding tax 121,603 93,907 Provisions 15 1,070,899 1,644,087 Other 15 1,070,899 1,644,087 Total current liabilities 15 1,070,899 1,644,087 Trade and other payables 5 1,070,899 1,644,087 Borrowings 5 2 2 2 Lease liabilities 16 32,971 61,654 78,621 Provisions 16 - 32,971 61,654 78,621 Provisions 17 61,654 78,621 78,621 78,621 78,621 78,621 78,621 78,621 78,621 78,621 78,621 78,621				
Total assets 33,973,687 33,347,700 Liabilities Current liabilities 1 1,774,387 1,546,808 Trade and other payables 13 32,971 63,328 Employee benefits 14 1,463,914 1,474,192 PAVG withholding tax 121,603 93,907 Provisions 121,603 93,907 Other 1 1,070,899 1,644,087 Total current liabilities 1 1,070,899 1,644,087 Trade and other payables 2 - - Borrowings 2 - - Lease liabilities 16 - 32,971 Employee benefits 16 - 32,971 Frovisions - - - Other - - - Total non-current liabilities 17 61,654 78,621 Provisions - - - Other - - - Total inon-current liabi	Other non-current assets	-	<u> </u>	
Liabilities Current liabilities Trade and other payables 12 1,774,387 1,546,808 Lease liabilities 13 32,971 63,328 Employee benefits 14 1,463,914 1,474,192 PAYG withholding tax 121,603 93,907 Provisions 121,603 93,907 Provisions 1 1,070,899 1,644,087 Total current liabilities 15 1,070,899 1,644,087 Total current liabilities 1 4,463,774 4,822,322 Non-current liabilities 2 - - - Trade and other payables 2 - - - Borrowings 2 - - - - Lease liabilities 16 - 32,971 - <td>Total non-current assets</td> <td>-</td> <td>26,589,003</td> <td>25,900,100</td>	Total non-current assets	-	26,589,003	25,900,100
Current liabilities Trade and other payables 12 1,774,387 1,546,808 Lease liabilities 13 32,971 63,328 Employee benefits 14 1,463,914 1,474,192 PAYG withholding tax 121,603 93,907 Provisions - - Other - - Grants received in advance 15 1,070,899 1,644,087 Total current liabilities - - - Trade and other payables - - - Borrowings - - - Lease liabilities 16 - 32,971 Employee benefits 17 61,654 78,621 Provisions - - - Other - - - Total non-current liabilities 4,525,428 4,933,914 Net assets 29,448,259 28,413,786 Equity - - - Reserves 18 4,482,109 3,448,218 Reserves 18 4,966,150 <t< td=""><td>Total assets</td><td>_</td><td>33,973,687</td><td>33,347,700</td></t<>	Total assets	_	33,973,687	33,347,700
Trade and other payables 12 1,774,387 1,546,808 Lease liabilities 13 32,971 63,328 Employee benefits 14 1,463,914 1,474,192 PAYG withholding tax 121,603 93,907 Provisions - - - Other - - - - Grants received in advance 15 1,070,899 1,644,087 Total current liabilities - - - Trade and other payables - - - Borrowings - - - Lease liabilities 16 - 32,971 Employee benefits 17 61,654 78,621 Provisions - - - Other - - - Total non-current liabilities - 61,654 111,592 Total liabilities 4,525,428 4,933,914 Net assets 29,448,259 28,413,786 Equity Reserves 18 4,482,109 3,448,218 Reserves	Liabilities			
Trade and other payables 12 1,774,387 1,546,808 Lease liabilities 13 32,971 63,328 Employee benefits 14 1,463,914 1,474,192 PAYG withholding tax 121,603 93,907 Provisions - - - Other - - - Grants received in advance 15 1,070,899 1,644,087 Total current liabilities - - - Trade and other payables - - - Borrowings - - - - Lease liabilities 16 - 32,971 Employee benefits 17 61,654 78,621 Provisions - - - Other - - - Total non-current liabilities 4,525,428 4,933,914 Net assets 29,448,259 28,413,786 Equity Reserves 18 4,482,109 3,448,218 Reserves 18 4,482,109 3,448,218 24,966,150	Current liebilities			
Lease liabilities 13 32,971 63,328 Employee benefits 14 1,463,914 1,474,192 PAYG withholding tax 121,603 93,907 Provisions - - - Other - - - Grants received in advance 15 1,070,899 1,644,087 Total current liabilities - - - Trade and other payables - - - Borrowings - - - Lease liabilities 16 - 32,971 Employee benefits 17 61,654 78,621 Provisions - - - Other - - - Total non-current liabilities 4,525,428 4,933,914 Net assets 29,448,259 28,413,786 Equity - - - Reserves 18 4,482,109 3,448,218 Reserves 18 4,482,109 3,448,218		12	1 774 387	1 546 808
PAYG withholding tax 121,603 93,907 Provisions				
Provisions Other Other		14		
Other - <td></td> <td></td> <td>121,603</td> <td>93,907</td>			121,603	93,907
Non-current liabilities 4,463,774 4,822,322 Non-current liabilities Trade and other payables - - Borrowings - - - Lease liabilities 16 - 32,971 Employee benefits 17 61,654 78,621 Provisions - - - Other - - - Total non-current liabilities 61,654 111,592 Total liabilities 4,525,428 4,933,914 Net assets 29,448,259 28,413,786 Equity Reserves 18 4,482,109 3,448,218 Retained surplus 24,966,150 24,965,568			-	-
Non-current liabilities Trade and other payables - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - <t< td=""><td>Grants received in advance</td><td>15</td><td></td><td></td></t<>	Grants received in advance	15		
Trade and other payables - </td <td>Total current liabilities</td> <td>-</td> <td>4,463,774</td> <td>4,822,322</td>	Total current liabilities	-	4,463,774	4,822,322
Borrowings				
Lease liabilities 16 - 32,971 Employee benefits 17 61,654 78,621 Provisions - - - Other - - - Total non-current liabilities 61,654 111,592 Total liabilities 4,525,428 4,933,914 Net assets 29,448,259 28,413,786 Equity Reserves 18 4,482,109 3,448,218 Retained surplus 24,966,150 24,965,568			-	-
Employee benefits 17 61,654 78,621 Provisions - - - Other - - - Total non-current liabilities 61,654 111,592 Total liabilities 4,525,428 4,933,914 Net assets 29,448,259 28,413,786 Equity Reserves 18 4,482,109 3,448,218 Retained surplus 24,966,150 24,965,568		16	-	32.971
Other Total non-current liabilities			61,654	
Total non-current liabilities 61,654 111,592 Total liabilities 4,525,428 4,933,914 Net assets 29,448,259 28,413,786 Equity Reserves 18 4,482,109 3,448,218 Retained surplus 24,966,150 24,965,568			-	-
Total liabilities 4,525,428 4,933,914 Net assets 29,448,259 28,413,786 Equity Reserves 18 4,482,109 3,448,218 Retained surplus 24,966,150 24,965,568		-	61 654	111 502
Net assets 29,448,259 28,413,786 Equity Reserves 18 4,482,109 3,448,218 Retained surplus 24,966,150 24,965,568	Total Hon-editent liabilities	-	01,004	111,002
Equity Reserves 18 4,482,109 3,448,218 Retained surplus 24,966,150 24,965,568	Total liabilities	=	4,525,428	4,933,914
Reserves 18 4,482,109 3,448,218 Retained surplus 24,966,150 24,965,568	Net assets	:	29,448,259	28,413,786
Reserves 18 4,482,109 3,448,218 Retained surplus 24,966,150 24,965,568	Fauity			
Retained surplus 24,966,150 24,965,568		18	4,482,109	3,448,218
Total equity 29,448,259 28,413,786				
	Total equity	_	29,448,259	28,413,786

The above statement of financial position should be read in conjunction with the accompanying notes

Family Planning Australia Statement of changes in equity For the year ended 30 June 2024

	Asset Revaluation Reserve \$	Investment Revaluation Reserve \$	Retained Surplus \$	Total equity
Balance at 1 July 2022	3,439,815	(685)	24,874,563	28,313,693
Surplus after income tax (expense) for the year Other comprehensive income for the year, net of tax	-	9,088	91,005	91,005 9,088
Total comprehensive income for the year		9,088	91,005	100,093
Balance at 30 June 2023	3,439,815	8,403	24,965,568	28,413,786
	Asset Revaluation Reserve \$	Investment Revaluation Reserve \$	Retained Surplus \$	Total equity
Balance at 1 July 2023	Revaluation Reserve	Revaluation Reserve		Total equity \$ 28,413,786
Balance at 1 July 2023 Surplus after income tax (expense) for the year Other comprehensive income for the year, net of tax	Revaluation Reserve \$	Revaluation Reserve \$	Surplus \$	\$
Surplus after income tax (expense) for the year	Revaluation Reserve \$ 3,439,815	Revaluation Reserve \$ 8,403	Surplus \$ 24,965,568	\$ 28,413,786 582

Family Planning Australia Statement of cash flows For the year ended 30 June 2024

Note	2024 \$	2023 \$
	, ,	2,834,707
	,	(17,843,297)
	, ,	14,832,458
	,	63,509
	421,866	68,958
	(110,682)	(43,665)
9	(101,567)	(176,754)
	(101,567)	(176,754)
	(65,675)	(64,074)
		,
	(65,675)	(64,074)
	(277,924)	(284,493)
	6,952,524	7,237,017
4	6.674.600	6,952,524
		\$ 2,955,729 (19,651,549) 16,082,161 81,111 421,866 (110,682) 9 (101,567) (65,675) (65,675) (277,924) 6,952,524

The above statement of changes in equity should be read in conjunction with the accompanying notes

The above statement of cash flows should be read in conjunction with the accompanying notes

Note 1. Material accounting policy information

The accounting policies that are material to the company are set out below. The accounting policies adopted are consistent with those of the previous financial year, unless otherwise stated.

New or amended Accounting Standards and Interpretations adopted

The company has adopted all of the new or amended Accounting Standards and Interpretations issued by the Australian Accounting Standards Board ('AASB') that are mandatory for the current reporting period.

The adoption of these Accounting Standards and Interpretations did not have any significant impact on the financial performance or position of the company.

Basis of preparation

These general purpose financial statements have been prepared in accordance with Australian Accounting Standards - Simplified Disclosures and the Australian Charities and Not-for-profits Commission Act 2012, as appropriate for not-for-profit oriented entities, and accordance with the requirements set out in the ACFID Code of Conduct. For further information on the Code please refer to the ACFID website at www.acfid.asn.au

The financial statements are presented in Australian dollars, which is Family Planning Australia's functional and presentation currency.

Historical cost convention

The financial statements have been prepared under the historical cost convention, except for, where applicable, the revaluation of financial assets and liabilities at fair value through profit or loss, financial assets at fair value through other comprehensive income, investment properties, certain classes of property, plant and equipment and derivative financial instruments.

Critical accounting estimates

The preparation of the financial statements requires the use of certain critical accounting estimates. It also requires management to exercise its judgement in the process of applying the company's accounting policies. The areas involving a higher degree of judgement or complexity, or areas where assumptions and estimates are significant to the financial statements, are disclosed in note 2.

Revenue recognition

The company recognises revenue as follows:

Revenue from contracts with customers

Revenue is recognised at an amount that reflects the consideration to which the company is expected to be entitled in exchange for transferring goods or services to a customer. For each contract with a customer, the company: identifies the contract with a customer; identifies the performance obligations in the contract; determines the transaction price which takes into account estimates of variable consideration and the time value of money; allocates the transaction price to the separate performance obligations on the basis of the relative stand-alone selling price of each distinct good or service to be delivered; and recognises revenue when or as each performance obligation is satisfied in a manner that depicts the transfer to the customer of the goods or services promised.

Sales revenue

Income from events, fundraising and raffles are recognised when received or receivable.

Grants

Grant revenue is recognised in profit or loss when the company satisfies the performance obligations stated within the funding agreements.

Grants received in advance

If conditions are attached to the grant which must be satisfied before the company is eligible to retain the contribution, the grant will be recognised in the statement of financial position as a liability until those conditions are satisfied.

Volunteer services

The company has elected to recognise volunteer services as either revenue or other form of contribution received. As such, any related consumption or capitalisation of such resources received is also recognised.

Family Planning Australia Notes to the financial statements 30 June 2024

Note 1. Material accounting policy information (continued)

Donations

Donations are recognised at the time the pledge is received.

Interest

Interest revenue is recognised as interest accrues using the effective interest method. This is a method of calculating the amortised cost of a financial asset and allocating the interest income over the relevant period using the effective interest rate, which is the rate that exactly discounts estimated future cash receipts through the expected life of the financial asset to the net carrying amount of the financial asset.

Other revenue

Other revenue is recognised when it is received or when the right to receive payment is established.

Income tax

As the company is a charitable institution in terms of subsection 50-5 of the Income Tax Assessment Act 1997, as amended, it is exempt from paying income tax.

Current and non-current classification

Assets and liabilities are presented in the statement of financial position based on current and non-current classification.

An asset is classified as current when: it is either expected to be realised or intended to be sold or consumed in the company's normal operating cycle; it is held primarily for the purpose of trading; it is expected to be realised within 12 months after the reporting period; or the asset is cash or cash equivalent unless restricted from being exchanged or used to settle a liability for at least 12 months after the reporting period. All other assets are classified as non-current.

A liability is classified as current when: it is either expected to be settled in the company's normal operating cycle; it is held primarily for the purpose of trading; it is due to be settled within 12 months after the reporting period; or there is no unconditional right to defer the settlement of the liability for at least 12 months after the reporting period. All other liabilities are classified as non-current.

Cash and cash equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

Trade and other receivables

Other receivables are recognised at amortised cost, less any allowance for expected credit losses.

Other receivables are recognised at amortised cost, less any allowance for expected credit losses.

Inventories

Stock on hand is stated at the lower of cost and net realisable value. Cost comprises of purchase and delivery costs.

Net realisable value is the estimated selling price in the ordinary course of business.

Investments and other financial assets

Investments and other financial assets are initially measured at fair value. Transaction costs are included as part of the initial measurement, except for financial assets at fair value through profit or loss. Such assets are subsequently measured at either amortised cost or fair value depending on their classification. Classification is determined based on both the business model within which such assets are held and the contractual cash flow characteristics of the financial asset unless an accounting mismatch is being avoided.

Financial assets are derecognised when the rights to receive cash flows have expired or have been transferred and the company has transferred substantially all the risks and rewards of ownership. When there is no reasonable expectation of recovering part or all of a financial asset, its carrying value is written off.

Note 1. Material accounting policy information (continued)

Financial assets at fair value through profit or loss

Financial assets not measured at amortised cost or at fair value through other comprehensive income are classified as financial assets at fair value through profit or loss. Typically, such financial assets will be either: (i) held for trading, where they are acquired for the purpose of selling in the short-term with an intention of making a profit, or a derivative; or (ii) designated as such upon initial recognition where permitted. Fair value movements are recognised in profit or loss.

Financial assets at fair value through other comprehensive income

Financial assets at fair value through other comprehensive income include equity investments which the company intends to hold for the foreseeable future and has irrevocably elected to classify them as such upon initial recognition.

Impairment of financial assets

The company recognises a loss allowance for expected credit losses on financial assets which are either measured at amortised cost or fair value through other comprehensive income. The measurement of the loss allowance depends upon the company's assessment at the end of each reporting period as to whether the financial instrument's credit risk has increased significantly since initial recognition, based on reasonable and supportable information that is available, without undue cost or effort to obtain.

Where there has not been a significant increase in exposure to credit risk since initial recognition, a 12-month expected credit loss allowance is estimated. This represents a portion of the asset's lifetime expected credit losses that is attributable to a default event that is possible within the next 12 months. Where a financial asset has become credit impaired or where it is determined that credit risk has increased significantly, the loss allowance is based on the asset's lifetime expected credit losses. The amount of expected credit loss recognised is measured on the basis of the probability weighted present value of anticipated cash shortfalls over the life of the instrument discounted at the original effective interest rate.

For financial assets mandatorily measured at fair value through other comprehensive income, the loss allowance is recognised in other comprehensive income with a corresponding expense through profit or loss. In all other cases, the loss allowance reduces the asset's carrying value with a corresponding expense through profit or loss.

Property, plant and equipment

Plant and equipment is stated at historical cost less accumulated depreciation and impairment. Historical cost includes expenditure that is directly attributable to the acquisition of the items.

Land and buildings are shown at fair value, based on periodic, at least every 3 years, valuations by external independent valuers, less subsequent depreciation and impairment for buildings. The valuations are undertaken more frequently if there is a material change in the fair value relative to the carrying amount. Any accumulated depreciation at the date of revaluation is eliminated against the gross carrying amount of the asset and the net amount is restated to the revalued amount of the asset. Increases in the carrying amounts arising on revaluation of land and buildings are credited in other comprehensive income through to the revaluation surplus reserve in equity. Any revaluation decrements are initially taken in other comprehensive income through to the revaluation surplus reserve to the extent of any previous revaluation surplus of the same asset. Thereafter the decrements are taken to profit or loss.

Depreciation is calculated on a straight-line basis to write off the net cost of each item of property, plant and equipment (excluding land) over their expected useful lives as follows:

Buildings 50 years
Leasehold property 50 years
Plant and equipment 8 – 10 years
Motor Vehicles 6.66 years
Office equipment 3 years

The residual values, useful lives and depreciation methods are reviewed, and adjusted if appropriate, at each reporting date.

Leasehold improvements are depreciated over the unexpired period of the lease or the estimated useful life of the assets, whichever is shorter.

Family Planning Australia Notes to the financial statements 30 June 2024

Note 1. Material accounting policy information (continued)

An item of property, plant and equipment is derecognised upon disposal or when there is no future economic benefit to the company. Gains and losses between the carrying amount and the disposal proceeds are taken to profit or loss. Any revaluation surplus reserve relating to the item disposed of is transferred directly to retained profits.

Right-of-use assets

A right-of-use asset is recognised at the commencement date of a lease. The right-of-use asset is measured at cost, which comprises the initial amount of the lease liability, adjusted for, as applicable, any lease payments made at or before the commencement date net of any lease incentives received, any initial direct costs incurred, and, except where included in the cost of inventories, an estimate of costs expected to be incurred for dismantling and removing the underlying asset, and restoring the site or asset.

Right-of-use assets are depreciated on a straight-line basis over the unexpired period of the lease or the estimated useful life of the asset, whichever is the shorter. Where the company expects to obtain ownership of the leased asset at the end of the lease term, the depreciation is over its estimated useful life. Right-of use assets are subject to impairment or adjusted for any remeasurement of lease liabilities.

The company has elected not to recognise a right-of-use asset and corresponding lease liability for short-term leases with terms of 12 months or less and leases of low-value assets. Lease payments on these assets are expensed to profit or loss as incurred

Lease liabilities

A lease liability is recognised at the commencement date of a lease. The lease liability is initially recognised at the present value of the lease payments to be made over the term of the lease, discounted using the interest rate implicit in the lease or, if that rate cannot be readily determined, the company's incremental borrowing rate. Lease payments comprise of fixed payments less any lease incentives receivable, variable lease payments that depend on an index or a rate, amounts expected to be paid under residual value guarantees, exercise price of a purchase option when the exercise of the option is reasonably certain to occur, and any anticipated termination penalties. The variable lease payments that do not depend on an index or a rate are expensed in the period in which they are incurred.

Intangible assets

Website

Significant costs associated with the development of the revenue generating aspects of the website, including the capacity of placing orders, are deferred and amortised on a straight-line basis over the period of their expected benefit, being their finite life of 5 years.

Impairment of non-financial assets

Non-financial assets are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount may not be recoverable. An impairment loss is recognised for the amount by which the asset's carrying amount exceeds its recoverable amount.

Recoverable amount is the higher of an asset's fair value less costs of disposal and value-in-use. The value-in-use is the present value of the estimated future cash flows relating to the asset using a pre-tax discount rate specific to the asset or cash-generating unit to which the asset belongs. Assets that do not have independent cash flows are grouped together to form a cash-generating unit.

Trade and other payables

These amounts represent liabilities for goods and services provided to the company prior to the end of the financial year and which are unpaid. Due to their short-term nature they are measured at amortised cost and are not discounted. The amounts are unsecured and are usually paid within 30 days of recognition.

Employee benefits

Short-term employee benefits

Liabilities for wages and salaries, including non-monetary benefits, annual leave and long service leave expected to be settled wholly within 12 months of the reporting date are measured at the amounts expected to be paid when the liabilities are settled.

Note 1. Material accounting policy information (continued)

Other long-term employee benefits

The liability for annual leave and long service leave not expected to be settled within 12 months of the reporting date are measured at the present value of expected future payments to be made in respect of services provided by employees up to the reporting date using the projected unit credit method. Consideration is given to expected future wage and salary levels, experience of employee departures and periods of service. Expected future payments are discounted using market yields at the reporting date on high quality corporate bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows.

Fair value measurement

When an asset or liability, financial or non-financial, is measured at fair value for recognition or disclosure purposes, the fair value is based on the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date; and assumes that the transaction will take place either: in the principal market, or in the absence of a principal market, in the most advantageous market.

Fair value is measured using the assumptions that market participants would use when pricing the asset or liability, assuming they act in their economic best interests. For non-financial assets, the fair value measurement is based on its highest and best use. Valuation techniques that are appropriate in the circumstances and for which sufficient data are available to measure fair value, are used, maximising the use of relevant observable inputs and minimising the use of unobservable inputs.

Goods and Services Tax ('GST') and other similar taxes

Revenues, expenses and assets are recognised net of the amount of associated GST, unless the GST incurred is not recoverable from the tax authority. In this case it is recognised as part of the cost of the acquisition of the asset or as part of the expense.

Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the tax authority is included in other receivables or other payables in the statement of financial position.

Cash flows are presented on a gross basis. The GST components of cash flows arising from investing or financing activities which are recoverable from, or payable to the tax authority, are presented as operating cash flows.

Commitments and contingencies are disclosed net of the amount of GST recoverable from, or payable to, the tax authority.

Note 2. Critical accounting judgements, estimates and assumptions

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the reported amounts in the financial statements. Management continually evaluates its judgements and estimates in relation to assets, liabilities, contingent liabilities, revenue and expenses. Management bases its judgements, estimates and assumptions on historical experience and on other various factors, including expectations of future events, management believes to be reasonable under the circumstances. The resulting accounting judgements and estimates will seldom equal the related actual results. The judgements, estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities (refer to the respective notes) within the next financial year are discussed below.

Estimation of useful lives of assets

The company determines the estimated useful lives and related depreciation and amortisation charges for its property, plant and equipment and finite life intangible assets. The useful lives could change significantly as a result of technical innovations or some other event. The depreciation and amortisation charge will increase where the useful lives are less than previously estimated lives, or technically obsolete or non-strategic assets that have been abandoned or sold will be written off or written down

Impairment of non-financial assets other than goodwill and other indefinite life intangible assets

The company assesses impairment of non-financial assets other than goodwill and other indefinite life intangible assets at each reporting date by evaluating conditions specific to the company and to the particular asset that may lead to impairment. If an impairment trigger exists, the recoverable amount of the asset is determined. This involves fair value less costs of disposal or value-in-use calculations, which incorporate a number of key estimates and assumptions.

Family Planning Australia Notes to the financial statements 30 June 2024

Note 2. Critical accounting judgements, estimates and assumptions (continued)

Lease term

The lease term is a significant component in the measurement of both the right-of-use asset and lease liability. Judgement is exercised in determining whether there is reasonable certainty that an option to extend the lease or purchase the underlying asset will be exercised, or an option to terminate the lease will not be exercised, when ascertaining the periods to be included in the lease term. In determining the lease term, all facts and circumstances that create an economical incentive to exercise an extension option, or not to exercise a termination option, are considered at the lease commencement date. Factors considered may include the importance of the asset to the company's operations; comparison of terms and conditions to prevailing market rates; incurrence of significant penalties; existence of significant leasehold improvements; and the costs and disruption to replace the asset. The company reassesses whether it is reasonably certain to exercise an extension option, or not exercise a termination option, if there is a significant event or significant change in circumstances.

Incremental borrowing rate

Where the interest rate implicit in a lease cannot be readily determined, an incremental borrowing rate is estimated to discount future lease payments to measure the present value of the lease liability at the lease commencement date. Such a rate is based on what the company estimates it would have to pay a third party to borrow the funds necessary to obtain an asset of a similar value to the right-of-use asset, with similar terms, security and economic environment.

Employee benefits provision

As discussed in note 1, the liability for employee benefits expected to be settled more than 12 months from the reporting date are recognised and measured at the present value of the estimated future cash flows to be made in respect of all employees at the reporting date. In determining the present value of the liability, estimates of attrition rates and pay increases through promotion and inflation have been taken into account.

Note 3. Grant funding received during the year (cash basis)

	2024 \$	2023 \$
NSW Ministry of Health - NGO Funding: Statewide grant - Child, Youth and Family South Western Sydney LHD FPA Population Health / Sexual Health Sexual and Reproductive Health Clinical Services and Health Promotion - Penrith Clinic	9,783,100 727,300 369,900 641,100 11,521,400	9,251,100 687,700 349,800 461,250 10,749,850
NSW Health - SEARCH	-	400,000
NSW Health - Pregnancy Choices Hotline NSW Department of Customer Service NSW Health - Walgatt AMS	92,778 20,000 231,009	66,504 - 175,066
	343,787	641,570
Hunter New England LHD Hunter Health Promotion	60,600	60,200
Cancer Institute NSW: Cervical Screening Training	46,000	215,000
Commonwealth Government Grants Department of Health: Trending Sexual Health Department of Foreign Affairs and Trade: ANCP	210,219 543,661	439,923 514,550
	753,880	954,473

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Note 3. Grants received during the year (exclusive of GST) (continued)

Other Grant:		
Research Grant	29,912	18,718
University of NSW: ECCWP UNFPA Pacific	36,333	71,167
International Planned Parenthood Federation	1,161,408	681,559 9,313
UNFPA PNG	322,056	3,313
UNFPA New York	88,772	_
Oceania Hockey	-	17,105
Women's Plan Foundation	25,000	30,000
EPPIC Grant	18,410	-
	1 004 004	007.000
-	1,681,891	827,862
Total grants received	14,407,558	13,448,955
=	14,407,550	13,440,933
Note 4. Current assets - cash and cash equivalents		
·		
	2024	2023
	\$	\$
Cash on hand	1,110	1,110
Cash at bank - Domestic programs	6,656,445	6,481,205
Cash at bank - International programs	17,045	470,209
<u> </u>	6,674,600	6,952,524
Note 5. Current assets - trade and other receivables		
	2024	2023
	\$	\$
	·	•
Trade receivables - other	389,013	233,624
BAS receivable	113,564	
	500 577	000 004
<u>-</u>	502,577	233,624
Note C. Comment and the Inventories		
Note 6. Current assets - inventories		
	2024	2023
	\$	\$
Stock at Cost	56,664	51,715
Note 7. Current assets - other		
	2024	2023
	\$	\$
Accrued revenue	41,771	33,780
Prepayments	109,072	175,957
	150,843	209,737
_	. 55,5 15	_50,101

Family Planning Australia Notes to the financial statements 30 June 2024

Note 8. Non-current assets - financial assets at fair value through other comprehensive income

	2024 \$	2023 \$
Financial Assets at Fair Value through other comprehensive income (Listed investment at fair		
value)	1,751,978	1,723,002
Note 9. Non-current assets - property, plant and equipment		
	2024	2023
	\$	\$
Land and buildings - at independent valuation	22,850,000	22,200,000
Less: Accumulated depreciation	-	(253,889)
-	22,850,000	21,946,111
Leasehold property - at independent valuation	1,400,000	1,600,000
Less: Accumulated depreciation	-	(34,667)
	1,400,000	1,565,333
Plant and equipment - at cost	1,432,043	1,357,432
Less: Accumulated depreciation	(927,080)	(861,028)
	504,963	496,404
Motor vehicles - at cost	98,048	98,048
Less: Accumulated depreciation	(71,615)	(60,286)
	26,433	37,762
Office equipment - at cost	232,357	232,357
Less: Accumulated depreciation	(210,586)	(201,583)
2000.7 todathalatoa adprodution	21,771	30,774
	24,803,167	24,076,384

Valuations of land and buildings

The basis of the valuation of land and buildings is fair value. The land and buildings were last revalued on 30 June 2024 based on independent assessments by a member of the Australian Property Institute having recent experience in the location and category of land and buildings being valued. The directors believe that there has been a material movement in fair value as at 30 June 2024. Thus fair value gain is recognised through statement of profit and loss and other comprehensive income as at 30 June 2024. Valuations are based on current prices for similar properties in the same location and condition.

Reconciliations

Reconciliations of the written down values at the beginning and end of the current financial year are set out below:

	Land and buildings	Leasehold property \$	Plant and equipment \$	Motor vehicles	Office equipment \$	Total \$
Balance at 1 July 2023 Additions Revaluation	21,946,111	1,565,333	496,404 101,567	37,762	30,774	24,076,384 101,567
increments/(decrements) Depreciation expense	1,138,248 (234,359)	(133,332) (32,001)	(93,008)	(11,329)	(9,003)	1,004,916 (379,700)
Balance at 30 June 2024	22,850,000	1,400,000	504,963	26,433	21,771	24,803,167

Note 10. Non-current assets - right-of-use assets

	2024 \$	2023 \$
Land and buildings - right-of-use Less: Accumulated depreciation	183,880 (153,240)	183,880 (91,944)
	30,640	91,936
Reconciliations Reconciliations of the written down values at the beginning and end of the current financial year	ar are set out below	:
	2024 \$	Total \$
Balance at 1 July 2023 Depreciation expense	91,936 (61,296)	91,936 (61,296)
Balance at 30 June 2024	30,640	30,640
Note 11. Non-current assets - intangibles		
	2024 \$	2023 \$
Website - at cost Less: Accumulated amortisation	27,800 (24,582)	27,800 (19,022)
	3,218	8,778
Reconciliations Reconciliations of the written down values at the beginning and end of the current financial year	ar are set out below	:
	2024 \$	Total \$
Balance at 1 July 2023 Amortisation expense	8,778 (5,560)	8,778 (5,560)
Balance at 30 June 2024	3,218	3,218
Note 12. Current liabilities - trade and other payables		
	2024 \$	2023 \$
Trade payables Income received in advance BAS payable Other payables	225,872 262,521 353,109 932,885	160,342 264,011 127,682 994,773
	1,774,387	1,546,808

Family Planning Australia Notes to the financial statements 30 June 2024

Note 13. Current liabilities - lease liabilities

	2024 \$	2023 \$
Lease liability - premises	32,971	63,328
Future lease payments Future lease payments are due as follows: Within one year One to five years	33,243	65,675 33,243
	33,243	98,918
Note 14. Current liabilities - employee benefits		
	2024 \$	2023 \$
Employee benefits	1,463,914	1,474,192
Note 15. Current liabilities - grants received in advance		
	2024 \$	2023 \$
Other grants Government grant	274,912 795,987	372,892 1,271,195
	1,070,899	1,644,087
Note 16. Non-current liabilities - lease liabilities		
	2024 \$	2023 \$
Lease liability - premise		32,971
Refer to Note 13 for maturity profile of future lease payments.		
Note 17. Non-current liabilities - employee benefits		
	2024 \$	2023 \$
Employee benefits	61,654	78,621
Note 18. Equity – reserves		
	2024 \$	2023 \$
Asset revaluation reserve Investment revaluation reserve	4,444,731 37,378	3,439,815 8,403
Retained profits at the end of the financial year	4,482,109	3,448,218

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Note 18. Equity – reserves (continued)

Asset revaluation reserve

The reserve is used to recognise increments and decrements in the fair value of land and buildings.

Investment revalaution reserve

The reserve is used to recognise increments and decrements in the fair value of financial assets at fair value through other comprehensive income.

Note 19 - Dividends

There were no dividends paid, recommended or declared during the current or previous financial year.

Note 20. Key management personnel disclosures

Compensation

The directors of the company receive no remuneration for their role as director.

The aggregate compensation made to directors and other members of key management personnel of the company is set out below.

		2024 \$	2023 \$
Aggregate compensation	_	1,411,824	1,257,734

Note 21. Remuneration of auditors

During the financial year the following fees were paid or payable for services provided by the auditor of the company

		2024	2023
Audit services Audit of the financial statements		57,000	55,000
Other services Review system change over		5,000	
		62,000	55,000

Note 22. Contingent liabilities

The company had no contingent liabilities as at 30 June 2024 (2023: Nil).

Family Planning Australia Notes to the financial statements 30 June 2024

Note 23. Related party transactions

Key management personnel

Disclosures relating to key management personnel are set out in note 20.

Transactions with related parties

Transactions between related parties are on normal commercial terms and conditions no more favourable that those available to other parties unless otherwise stated.

The following transactions occurred with related parties:

	2024 \$	2023 \$
Related Party Transactions Sydney Reproductive Health Services Limited Family Planning Australia Limited*	235 442	698 663

*Family Planning NSW operates under the trading name Family Planning Australia. Family Planning Australia Ltd is a separate non-trading entity.

Receivable from and payable to related parties

There were no trade receivables from or trade payables to related parties at the current and previous reporting date.

Loans to/from related parties

There were no loans to or from related parties at the current and previous reporting date.

Terms and conditions

All transactions were made on normal commercial terms and conditions and at market rates.

Note 24. Economic dependency

Family Planning NSW is dependent upon the ongoing receipt of Federal and State Government grants to ensure the continuance of its programs. At the date of this report, management has no reason to believe that this financial support will not continue.

Note 25. Member guarantees

Family Planning NSW is incorporated under the Australian Charities and Not-for-profits Commission Act 2012 and is a company limited by guarantee. If the company is wound up, the ordinary members are required to contribute a maximum of \$50 each. As at 30 June 2024 the number of members of the company is 19 (2023: 36).

Note 26. Events after the reporting period

No matter or circumstance has arisen since 30 June 2024 that has significantly affected, or may significantly affect the company's operations, the results of those operations, or the company's state of affairs in future financial years.

Note 27. Financial Summary

The surplus of the company for the current year is \$582. The company's income and expenditure for the year ended 30 June 2024 is summarised below.

Note 27. Financial Summary (continued)

Like many similar organisations, Family Planning Australia faced challenging economic conditions in 2023-2024, including rising inflation and increased wage costs. Despite these pressures, strong financial management ensured the company maintained a solid financial position throughout the year.

Total revenue for the year 2023-24 was \$18.5m, an increase of \$1.5m from the previous year. This growth was driven primarily by expanded operations in day surgery unit and increased international programme grants. Over the year, we provided 27,481 occasions of clinical services across NSW including increased the number of procedures performed in both Newington Day Surgery Unit and other clinics. Additionally, 132,900 individuals participated in our community education and health promotion activities, while 1,728 participants attended education courses, offered both in person and online. Our international programs also had a significant impact, directly benefiting over 10,049 people in the Pacific region.

The reported surplus of \$582 in 2023-24 reflects the company's ability to maintain financial stability despite challenging economic conditions.

As of 30 June 2024, Family Planning Australia's net assets stood at \$29m, with the increase primarily attributed to property revaluations. This solid financial position underscores the company's strong and sustainable balance sheet, ensuring ongoing stability and capacity to deliver essential services well into the future.

International Programme

Family Planning Australia works with partners in the Pacific to improve reproductive and sexual health outcomes. Our international work focuses on supporting the capacity of local partners to deliver services and education to clinicians, communities, teachers, government officials and young people. We work across three program streams:

- · contraception choices
- cervical screening and treatment
- · comprehensive sexuality education

Revenue from international development was \$2.7m in 2023-24, which is an increase of \$0.3m from 2022-23.

In 2023-24 we were proud to collaborate with partners across 11 countries to reach 10,049 people directly. Innovative digital comprehensive sexuality education work in Fiji and Vanuatu extended our reach to 331,712 digitally through social media. In Solomon Islands and Tuvalu, 4,696 women were screened for cervical cancer and 21 clinicians trained to deliver screening and treatment. In 2023-24, 91 clinicians were trained to deliver comprehensive family planning training in Vanuatu, Papua New Guinea and Federated States of Micronesia and 54 people trained in Fiji, Solomon Islands and Vanuatu to deliver youth friendly health services. Work continues across the Pacific, supporting national in and out of school comprehensive sexuality education curricula development and training to 202 workers.

Our International Programme is supported by the Australian government, through the Australian NGO Cooperation Program and the UNFPA Transformative Agenda. Other projects are funded by UNFPA PNG, the Minderoo Foundation through the University of NSW, Women's Plan Foundation and private donors.

	2024
Income	\$
NSW ministerially approved grants	11,609,801
Other periodic government grants	1,596,054
Research grants	257,664
Other grants	1,731,305
Self-generated income	3,353,383
	18,548,207
Expenditure	
Staffing	(13,396,522)
Projects	(4,158,922)
Site	(992,181)
	(18,547,625)
	582

Family Planning Australia Directors' declaration 30 June 2024

The Directors of Family Planning Australia declare that in the Directors' opinion:

- The attached financial statements and notes comply with the Australian Accounting Standards Simplified Disclosures, the Australian Charities and Not-for-profits Commission Act 2012 and other mandatory professional reporting requirements;
- The attached financial statements and notes give a true and fair view of the company's financial position as at 30 June 2024 and of its performance for the financial year ended on that date; and
- There are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.
- the company does not have any controlled entities and is not required by the Accounting Standards to prepare consolidated financial statements. Therefore, a consolidated entity disclosure statement has not been included as section 295(3A)(a) of the Corporations Act 2001 does not apply to the entity.

Signed in accordance with a resolution of Directors made.

On behalf of the Directors

Bernadette Or President

28 October 2024

Gary Trenaman

Treasurer



Independent auditor's report to the members of Family Planning NSW trading as Family Planning Australia

Report on the audit of the financial report

Our opinion on the financial report

In our opinion, the accompanying financial report of Family Planning NSW trading as Family Planning Australia ('the company') has been prepared in accordance with Division 60 of the Australian Charities and Not-for-profits Commission Act 2012, including:

- giving a true and fair view of the company's financial position as at 30 June 2024 and of its financial performance for the year then ended; and
- complying with Australian Accounting Standards Simplified Disclosures and Division 60 of the Australian Charities and Not-for-profits Commission Regulations 2022.

What was audited?

We have audited the financial report of the company which comprises

- the statement of financial position as at 30 June 2024,
- the statement of profit or loss and other comprehensive income for the year then ended,
- the statement of changes in equity for the year then ended,
- the statement of cash flows for the year then ended,
- notes to the financial statements, including material accounting policy information, and
- the directors' declaration.

Basis for opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial report section of our report. We are independent of the company in accordance with the auditor independence requirements of the Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act) and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (including Independence Standards) (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

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Other information

The directors are responsible for the other information. The other information comprises the information included in the company's Director report for the year ended 30 June 2024, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of the directors for the financial report

The directors of the comapny are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards - Simplified Disclosures and the Australian Charities and Not-for-profits Commission Act 2012. The directors responsibility also includes such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations, or have no realistic alternative but to do so. The directors are responsible for overseeing the company's financial reporting process.

Auditor's responsibilities for the audit of the financial report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: https://www.auasb.gov.au/auditors_responsibilities/ar4.pdf

This description forms part of our auditor's report.

William Buck

Accountants & Advisors

William Buch

ABN: 16 021 300 521

Domenic Molluso

Sydney, 28 October 2024



2023-24
ANNUAL REPORT

