family planning australia

Reproductive & Sexual Health

ANNUAL REPORT 2024-25

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Publisher

Family Planning Australia

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In December 2022 Family Planning NSW rebranded and is now trading as Family Planning Australia. Our registered name remains Family Planning NSW.

In the spirit of reconciliation, Family Planning Australia acknowledges the Traditional Custodians of Country throughout Australia and their connections to land, sea and community. We pay our respect to their Elders past and present and we extend that respect to all Aboriginal and Torres Strait Islander peoples. Our hope and belief is that we can move to a place of equity and justice and work hand-in-hand.

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.

Our vision

That everyone lives in a sexually healthy world.

Our values

Compassionate – We treat everyone with dignity, foster empathy, embrace diversity, and listen actively to create compassionate, inclusive and supportive workplaces and communities

Collaborative – We share knowledge with everybody and respectfully seek out the expertise of others. We are an active, constructive contributor and are inclusive of diverse views

Empowered – Together we are empowered to support positive change to ourselves and with communities and the people we support

Bold – We embrace innovation and challenge conventions using evidence and technology to improve health, education, and social outcomes for everyone.

Our values support a fundamental principle that **"We champion the right of every individual to make their own choices concerning their sexual and reproductive health and rights."**

Our role

To advance life long reproductive and sexual health and rights.

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

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.

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 and Pregnancy Choices Hotline information and referral services.

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 evidence-based, 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.

> *"I was listened to and received treatment after 3 other doctors dismissed my problem."*
>
> Client

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.

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'.

Royal Australian College of Physicians (RACP) Chapters of Sexual Health & Public Health:

Family Planning Australia is an accredited training facility for doctors pursuing specialisation in Sexual Health. Reproductive health and abortion care are a vital component of the sexual health specialty and Family Planning Australia is recognised by the RACP as a quality provider of supervised work experience for their Advanced Trainees.

In May 2025, Family Planning Australia additionally received accreditation by the Australasian Faculty of Public Health Medicine until December 2028 to be a training site for the RACP Chapter of Public Health. This is in recognition of the wide impact of the work conducted at Family Planning Australia clinicians across the fields of health education and clinical service delivery.

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 Practitioners (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 Additionally, Family Planning Australia is recognised as an accredited training site for GP registrars, improving the capability of future generations of GPs in NSW.

Australian College of Rural and Remote Medicine (ACRRM):

Relevant Family Planning Australia clinical education courses and workshops are also accredited by the Australian College of Rural and Remote Medicine (ACRRM).

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 Human Research 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 (2025). 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. Family Planning Australia will reapply for accreditation in December 2026.

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 2025.

What our clients say:

"The very high level of attentiveness and kindness (including towards my partner). Very regular and clear communication. Clean and modern facilities."

"The girls at admin are amazing super comforting and were very helpful and considerate it was lovely !

"The doctor and nurses were informative, caring, professional and friendly."

Chair's report

Bernadette Or

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

Family Planning Australia's vision is for all people to have high quality sexual and reproductive health and Family Planning Australia has been true to this cause through its long and esteemed history.

We know, realising improved healthcare via advancing lifelong sexual and reproductive health for more people can only be achieved through concerted efforts from a dedicated group of people – our staff and my fellow directors on the Board.

2024-25 has seen the Board engage with the Family Planning Australia Executive and leadership team, staff, consumers and key external stakeholders to develop and agree the strategic directions for the organisation through to 2030. This forward focus allows us to continue to punch above our weight and achieve great outcomes for and with our partners in NSW and across the Pacific.
We will finalise and unveil this new strategic ambition in the coming year as we celebrate our 100-year anniversary. I am delighted to see the energy and the inspiration generated whenever the Family Planning Australia teams gather. This level of engagement and commitment fuels us all to take on new challenges and causes that meet the evolving sexual and reproductive health needs of the community.

Family Planning Australia came together in 1926 with a group of volunteers at a time when it was totally unacceptable to mention family planning or birth control in public. This platform allowed our founders to have conversations with women about contraception and reproductive choice. It's unfathomable to us now that there was once a time where it was not socially acceptable to simply and openly offer women reproductive health advice. However, we know that societal change was slow, in fact, it was only in the 1960s that the word "contraceptive" was allowed on Australian radio. Today, we live in a different world, but perhaps not different enough. There is more that can be done to realise our vision that everyone thrives in a sexually healthy world, by providing culturally appropriate healthcare, whilst talking openly and frankly in all settings about everything from contraception and abortion to STIs and menopause.

Our Centenary in 2026 is a very special time that we are all very excited about as this is an opportunity for us to reach out across our networks and host events that provide opportunities to engage with staff, funders, decision makers, other NGOs and members of the community. It is also a time where we will reflect on who we are now and who we will be through the next 100 years.

In November 2024, as a result of our "Board of the Future" initiative, we welcomed Nicki Potts to the Board. After a term on the Finance, Risk and Audit Committee Nicki joined my fellow Board Directors – Carla Cranny, Stephanie Cross, Neil Jackson, Gary Trenaman, Melissa Williams, Samantha Campbell, Suzanne Stanton, Christine Kane and Dr Imogen Thomson. In addition, Dr Jasmine Jansen continued as an observer to the Board. The increased diversity and experience will serve our great organisation well.

Our people drive our passion and purpose and I am forever indebted to the staff, who under the CEO Sue Shilbury's leadership realise the important work this organisation is so privileged to deliver. I must also thank all our Board members for their continued commitment to Family Planning Australia and their enduring drive to reimagine and meet an ever-developing purpose.
We are graced with a Board that has extensive experience. I am immensely proud of their thoughtful contributions, honest exchanges and energy and thankful for the professional support.

CEO's report

Sue Shilbury

BA Applied Science (Physiotherapy), MBA, GAICD

Family Planning Australia has been at the forefront of reproductive and sexual health care through its almost 100-year history – from our early inception by a group of volunteers in 1926, to establishing Australia's first birth control clinic in Martin Place in 1933. Our early newsletters spruiked that we could help women "avoid pregnancies which cannot end happily" and since then the wellbeing of women and their access to high quality, equitable healthcare has been central to many of our efforts.

Today, we have also become a significant health, education, research and international service, that has a firm focus on advancing lifelong reproductive and sexual health of all people.

There is continuing need for all of us to work together, tirelessly in this regard, because we know that new challenges continue to emerge. Today, some sexually transmitted diseases are increasing, there are women who have never had cervical cancer screening, men who do not yet have access to contraceptive options and women who have challenges with access to care for symptoms of menopause and other common gynaecological problems.

This past year we saw the Federal Government commit to one of the largest investments in the sexual and reproductive health of all Australians through its response to "Ending the postcode lottery- Addressing the barriers to sexual, maternity and reproductive healthcare in Australia" and the "Menopause Inquiry" This work has paved the way for significant investments to help improve uptake of long-acting reversible contraception (LARCs), better access to services and medications, and investment in the development of a national database for sexual and reproductive health.

In NSW, we also saw a change in legislation allowing Nurse Practitioners and Endorsed Midwives to prescribe medical abortion medication. Our team is already being approached by nurses keen to prescribe, reaching out to us for support to do so.
Our work toward cervical cancer elimination is ongoing, members of our International team were excited to deliver the first training using the 'screen and treat' model under the Elimination Partnership in the Indo-Pacific for Cervical Cancer (EPICC) – a milestone moment for both the program and the women of Nauru.

Closer to home our health promotion team developed easy to read booklets, social stories, short videos and a clinical training module as part of the Screen Equal project. These resources support people with intellectual disabilities to have better access to cervical screening. Simultaneously, we partnered with multicultural health in Western Sydney Local Health District to deliver community based self-screening and self-collection to uplift rates of cervical screening in Arabic speaking women.

In our own day surgery, we have redesigned the client journey for surgical abortions, so access is simpler and quicker. We were delighted to see a trend towards earlier gestational procedures being completed after the redesign. In this past year we have seen a reduction in the number of procedures being completed at more than 12 weeks and a 70 per cent reduction in the time it takes a client to go from initial assessment to procedure.

This year we have continued our important work to improve staff engagement with the Love Your Work program. Our work and achievements would not be possible without our people, and it is a personal and organisational priority to ensure that the hard-working professionals that make up this extraordinary organisation feel valued and understand how they contribute to our vision. I was delighted this year to see staff turnover reducing and more candidates applying for roles. These are simple measures that indicate we are building a positive culture and being the best we can be for our people.

It is truly a great honour to lead a team of talented, committed individuals that come together every day to do great things and influence change.

I thank them all and acknowledge the leadership provided to me, the Executive team and our staff by the Chair and the Board.

2024–25 at a glance

CLINICAL SERVICES 26,798

Contraception	33%	Sexual Health	8%
Gynaecological	33%	Pregnancy/Fertility	3%
Abortion	18%	Other services	5%

Enquiries

- Talkline: 9,724
- Pregnancy Choices Helpline: 1,897

ONLINE AND DIGITAL

Click logos to go to sites

family planning australia
Reproductive & Sexual Health

1,053,356
unique visitors across all websites

Planet Puberty

freedom · frank (talk. test. enjoy.) · BODY TALK · Know your health · In REAL life (Stories of sex & relationships)

HEALTH PROMOTION

1,318 Freedom Condom orders dispatched

EDUCATION AND TRAINING

1,462 COURSE PARTICIPANTS
attended including doctors, nurses, midwives, disability workers, teachers and other health education and welfare professionals

ADVOCACY

19 submissions to inquiries, commissions and consultations

39 engagements through meetings and events with key decision makers

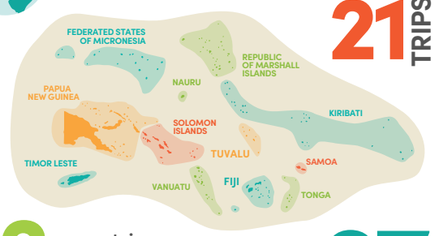
RESEARCH

7 peer reviewed articles published

15 research presentations at conferences

INTERNATIONAL

21 TRIPS



12 countries visited in the Pacific

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

Working together

After launching "Love Your Work" in 2023-24, 2024-25 focused on embedding initiatives that uplift staff engagement.

Under the "Love Your Work" umbrella, this year we have:

- Continued to embed our flexible working options policy such that all staff have access to options that support work/life balance, whilst ensuring organisational priorities are met. Feedback continues to be positive.
- To enhance collaboration and ensure a common understanding of the services we provide to the community, a program of Lunchtime Seminars was launched. This brings together staff across all our sites to learn what each team provides to the community.
- Implemented the Family Planning Australia intranet, known as Frankee. This has proved to be an invaluable way for staff to share information about what is happening across the organisation. It is also the repository of our templates, policies and procedures. Content continues to build.
- Another important project has seen staff and the Leadership team coming together to develop a new suite of values that better reflect how we want to work together in the future. They reflect the more collaborative and inclusive culture that is foundational to the "Love Your Work" program. The new values were approved by the Board in June 2025 and are now being rolled out across the organisation.

Over the course of the current and prior years the three enterprise agreements covering our nurses, our medical officers and our administrative staff progressed, with the final enterprise agreement approved by the Fair Work commission on 23 July 2025. This was a monumental achievement as it involved coordinating discussions between Family Planning Australia management, union officials and workplace staff representatives for all three enterprise agreements. All enterprise agreements are now current and provide certainty around pay and conditions for all staff.

To shape our future strategic direction, 2024-25 has provided an opportunity for the Board to engage across the organisation and with key stakeholders to agree priorities and targets for Family Planning Australia through to 2030. This will see us move beyond our Centenary in 2026 as a refreshed and forward-thinking organisation that has clear focus on achieving great things with our communities and our people.

Lunch time seminars

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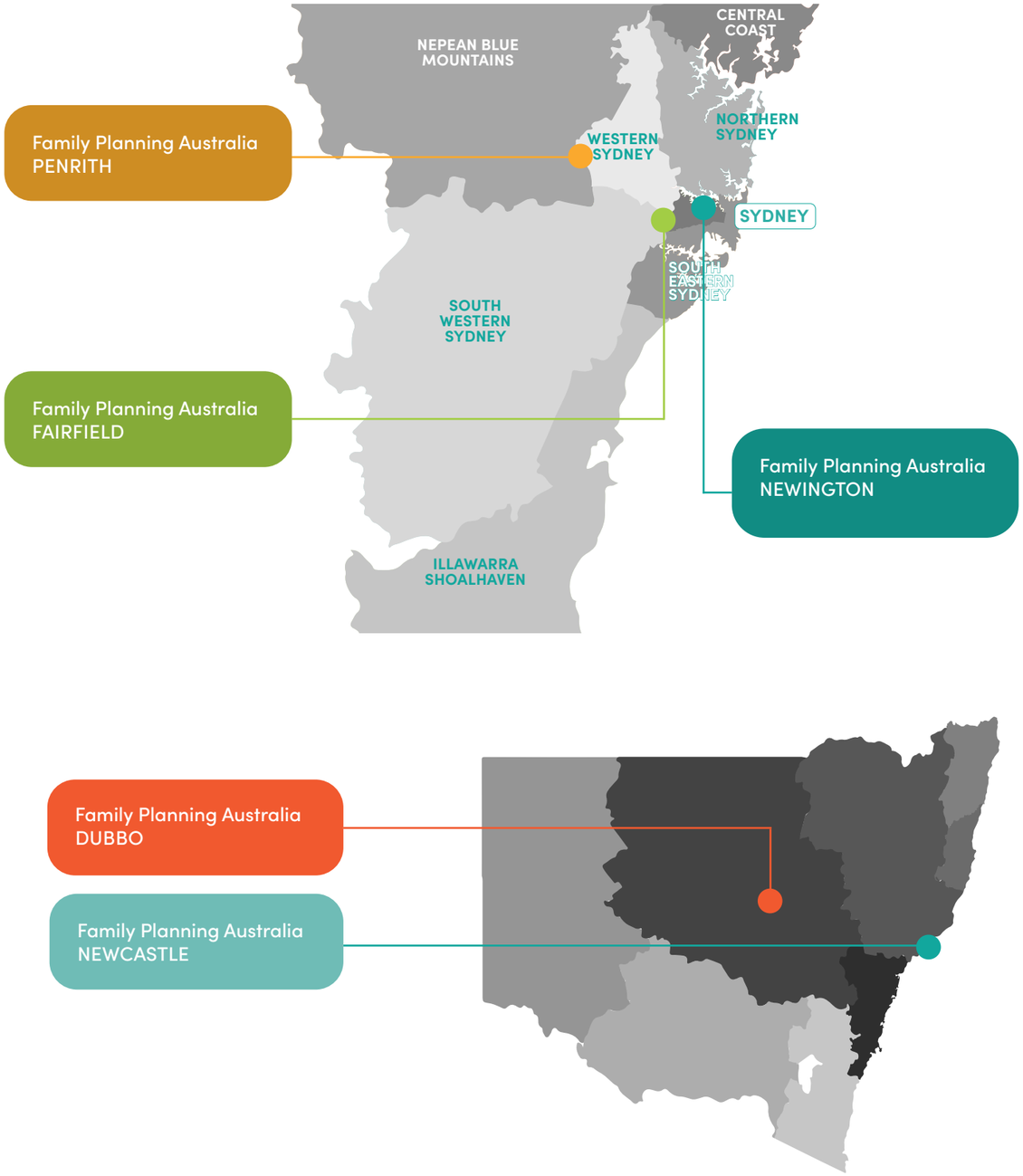
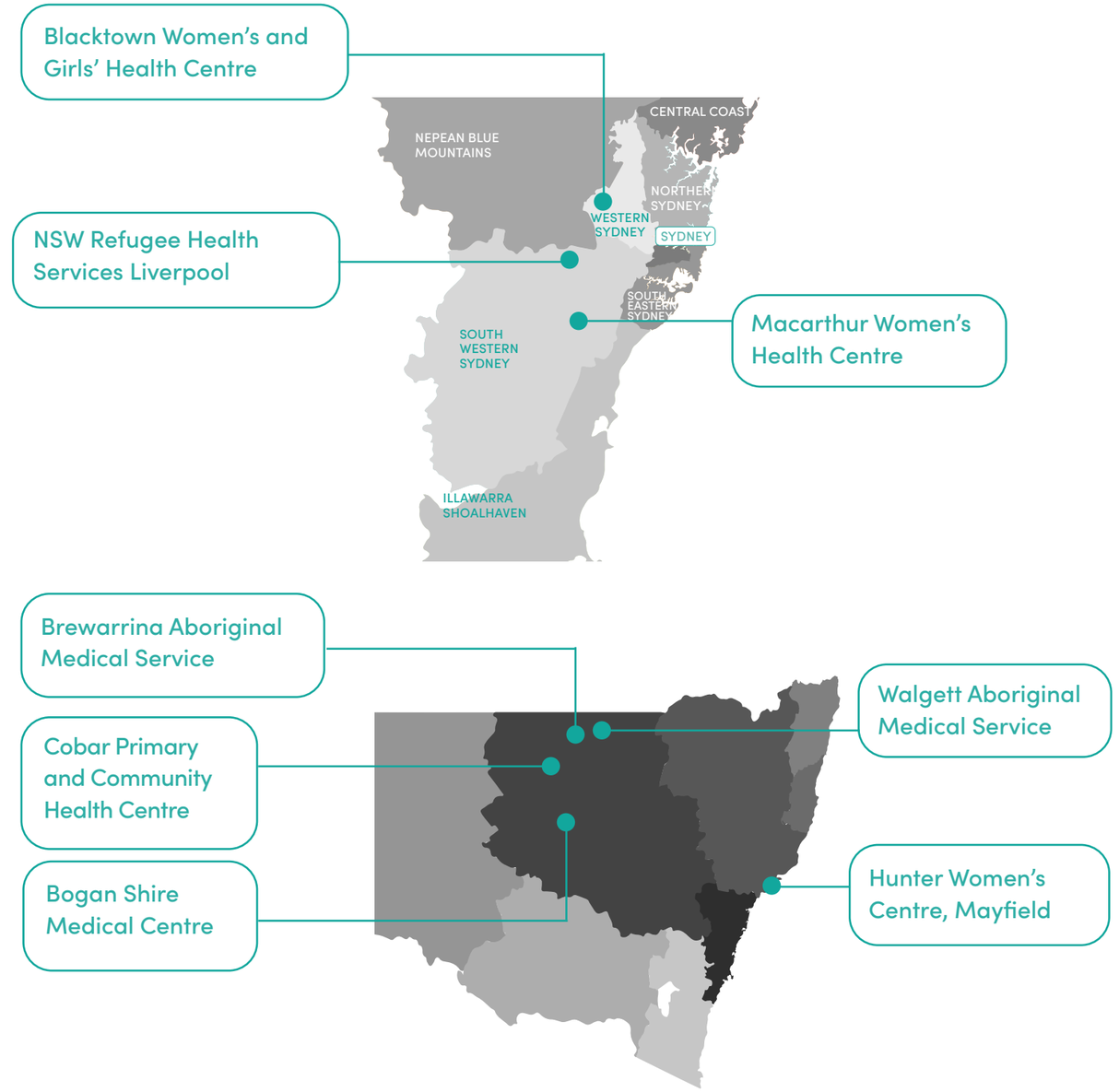
Our NSW clinic locations



Our NSW outreach locations



SUSTAINABLE DEVELOPMENT GOALS

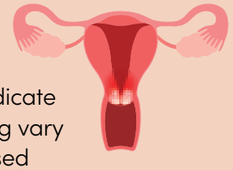
The Sustainable Development Goals (SDGs) are global targets designed to achieve a more just society and a sustainable future for all. Access to sexual and reproductive health care and information, and respect for sexual and reproductive rights are essential for achieving many of the SDGs, particularly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

Our work in Australia and the Pacific contributes to achieving the SDGs through the following strategies.

INCREASE ACCESS TO LONG-ACTING REVERSIBLE CONTRACEPTIVES (LARC)

LARCs provide reliable long term contraception, which can be an effective option enabling people to plan their engagement in education, work and whether or when to have children. 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 supports SDGs 1, 3, 5, 8, 10 & 17.**

ELIMINATE CERVICAL CANCER



While Australia is on track to eradicate cervical cancer, rates of screening vary within vulnerable and marginalised populations. In NSW we train clinicians to provide cervical screening, run health promotion campaigns and provide information to improve screening rates, particularly in under screened populations. Cervical cancer remains a leading cause of death in many Pacific countries. 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 supports SDGs 1, 3, 4, 5, 10 & 17.**

INVESTING IN COMPREHENSIVE SEXUALITY EDUCATION (CSE)

Age appropriate CSE promotes respectful relationships based on consent, gender equality and better health and wellbeing outcomes, including lower rates of unintended pregnancy, STIs and gender-based violence. We contribute to growing awareness of the importance of CSE, and advocate for more widespread and consistent CSE provision in Australia and the Pacific. We deliver professional learning for teachers and other educators to provide effective CSE programs in schools and outside of school settings. We also develop and promote CSE resources co-designed to be relevant to a range of communities in Australia and the Pacific and provide education sessions directly to communities in NSW. **This work supports SDGs 1, 3, 4, 5, 10, 16 & 17.**

PROVIDING ACCESS TO HEALTH CARE AND INFORMATION FOR PRIORITY GROUPS

We focus on groups who are more likely to face barriers to SRH care and information due to factors such as experiencing discrimination, geographical or social isolation and low income. Our work in Australia and the Pacific supports gender equality and inclusive approaches and empowering all people to make informed decisions about their health and relationships. **This work supports SDGs 1, 3, 4, 5, 8 & 10.**

PROMOTE ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH SERVICES FOR ALL

Access to sexual and reproductive health (SRH) services enables people to achieve good health outcomes. People who are socially or culturally marginalised may face additional challenges to accessing SRH services, contributing to health inequity. We develop specialised resources and strategies to reach priority groups at risk of poorer health outcomes and advocate for universal access to SRH services. **This work supports 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. We advocate to build the capacity of our state and national health systems to improve access to abortion care, train clinicians to provide abortion services, provide reliable information to the community and provide safe and inclusive abortion care at our clinics. **This work supports SDGs 3, 5, 8, 10 & 17.**

CONTRIBUTING TO SEXUAL AND REPRODUCTIVE HEALTH DATA COLLECTION

Reliable data on key indicators enable health service providers and governments 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 data trends and research findings available to the broader community. **This work supports SDGs 3, 5, 16 & 17.**

ADDRESSING IMPACTS OF CLIMATE CHANGE ON SRHR

Climate change impacts on sexual and reproductive health and rights (SRHR), particularly by reducing access to SRH services, worsening health outcomes, and increasing gender inequality and risks of gender-based violence. Our programs and advocacy aim to raise awareness of the negative impact of climate change on SRHR and articulate strategies to address this, such as improving systems and infrastructure for more resilient service delivery. **This work supports SDGs 3, 5, 11 & 13. .**

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Aboriginal Health Plan

The **Aboriginal Health Plan (AHP)** is a key strategic initiative by Family Planning Australia to improve reproductive and sexual health outcomes for Aboriginal and Torres Strait Islander communities across NSW. Developed following the evaluation of our *Innovate Reconciliation Action Plan (2022–2024)* and aligned with both the NSW Health Aboriginal Health Plan (2013–2023) and the NSQHS Standards, the AHP is grounded in cultural safety, equity, and community engagement.

In 2024–25, implementation efforts accelerated under the leadership of the Aboriginal Health Working Group, supported by cross-departmental collaboration. Progress was made across all four strategic priorities: improving health outcomes, enhancing service delivery, building partnerships, and strengthening workforce capability. A major milestone was the official launch of the AHP at the NAIDOC Week staff lunchtime seminar, which also featured the unveiling of the commissioned 'Healing Place' artwork by artist Nanni Davies.

Further achievements included the production of a video highlighting the artwork's creation and meaning, and the rollout of a communications strategy including a staff postcard, internal messaging, and social media promotion.

Data collected through a new dashboard confirmed growth in Aboriginal client identification, with high uptake of STI services, cervical screening, and contraception. Strong youth engagement and regional success in Western NSW and Hunter New England reflected the effectiveness of targeted outreach.

Foundational work in cultural learning, governance, and monitoring and evaluation, positions the AHP for long-term sustainability. Moving forward, Family Planning Australia will continue to invest in cultural training, align the AHP with organisational strategy, and seek partnerships to expand its reach and impact.

About the artist:

Natalie 'Nanii' Davies is a contemporary Wiradjuri artist based on the East Coast of Australia. Her totem is the crow, and her work is deeply influenced by her cultural heritage, connection to Country, and love of storytelling. After painting privately for over 20 years, she now devotes more time to sharing her art with broader audiences.

Blending traditional Aboriginal design with intricate geometric patterns, Nanii's style is a unique fusion of culture, mathematics, and personal expression. Influenced by a creative upbringing surrounded by music, craft, and storytelling. She creates works that explore connection, repetition, and the calming rhythm of nature and memory.

Inspired by her family, community, and the stories passed down through generations, Nanii's art is a reflection of her journey and identity. Her work contributes to the evolving landscape of contemporary Indigenous art while honouring the traditions and knowledge of her Wiradjuri ancestors.

Artwork: 'Healing Place' by Natalie 'Nanii' Davies, contemporary Wiradjuri artist

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Services provided in metropolitan Local Health Districts

	CLINIC OCCASIONS OF SERVICE	TALKLINE CALLERS AND E-MAILS	PREGNANCY CHOICES HELPLINE CALLERS AND EMAIL	COMMUNITY EDUCATION PARTICIPANTS	PROFESSIONAL EDUCATION PARTICIPANTS
Central Coast	224	78	50	0	67
Illawarra Shoalhaven	154	67	44	23	74
Nepean Blue Mountains	3,837	584	218	1,427	47
Northern Sydney	823	233	76	563	82
South Eastern Sydney	1,143	395	172	285	64
South Western Sydney	3,983	609	193	690	91
Sydney	2,668	514	171	458	65
Western Sydney	3,601	817	210	659	149

Services provided in regional Local Health Districts

	CLINIC OCCASIONS OF SERVICE	TALKLINE CALLERS AND E-MAILS	PREGNANCY CHOICES HELPLINE CALLERS AND EMAIL	COMMUNITY EDUCATION PARTICIPANTS	PROFESSIONAL EDUCATION PARTICIPANTS
Far West NSW	1	7	1	0	17
Hunter New England	6,133	968	217	2,690	236
Mid North Coast NSW	35	34	23	0	75
Murrumbidgee	17	51	39	0	84
Northern NSW	13	55	49	0	76
Southern NSW	25	37	20	0	48
Western NSW	4,039	232	62	716	73

Integrated Health Services

Clinical services

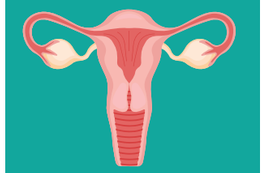
Family Planning Australia provides accredited reproductive and sexual health services to a wide range of people across NSW, including clinical services, community education, and the Talkline information and referral service. We also focus on addressing the needs of our priority population groups which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

Type of service provided to client

33% Contraception

8% STI

33% Gynaecological



21% Pregnancy and fertility including abortion

Clinic occasions of service

26,798

Clients	12,450
Aboriginal and Torres Strait Islander people	1,223
Clients born overseas	1,602
Clients who speak other than English at home	694
Clients with disability	738
Young people (under 30)	5,764

> *Great service and I was well looked after as it was a quick and smooth process from start to finish.*
>
> Client

Aboriginal & Torres Strait Islander people

- 3.4% Aboriginal and Torres Strait Islander population of NSW (ABS 2021)
- 10% Proportion of clients identifying at all sites
- 21% Proportion of clients identifying at Dubbo and outreach clinics

Culturally & linguistically diverse communities

- 29.3% NSW population born outside Australia (ABS 2021)
- 13% Clients born outside of Australia
- 17% Newington clients born outside of Australia
- 22% Fairfield clients born outside of Australia

Young people under the age of 30

- 37% NSW population
- 46% Clients under the age of 30
- 61% Hunter clients
- 47% Penrith clients
- 50% Dubbo clients

People with disability

- 6% Clients at all clinics identified as having a disability

Procedures	DSU	Clinics
Surgical termination	1,002	0
D&C	20	0
IUD	266	1,363
Vasectomy	3	116
Colposcopy	0	306
Implanon	50	636

Day Surgery Unit

Demand for procedures undertaken in the Newington Day Surgery Unit (DSU) continues to grow. The DSU provided IUD procedures, vasectomies, and D&C for miscarriage management as well as surgical abortion. In 2024-25 the DSU provided surgical abortions to clients from all Local Health Districts across the state. The DSU is the only accredited private hospital offering bulk-billing for surgical abortion in NSW.

In November 2024 the DSU launched a streamlined access pathway for clients accessing abortion care. This improvement project provides consumers with greater agency over when to access abortion care once they have decided to end a pregnancy. It respects their autonomy to navigate their own healthcare and make decisions with confidence and support, without delay, delivered without judgement in a high-quality healthcare service.

Family Planning Australia supported a staff medical officer to complete surgical abortion training through the DSU, piloting a training package and clinical placement model that may in future become part of Family Planning Australia Education offering.

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 9,736 Talkline calls, LiveChat conversations and emails during 2024-25.

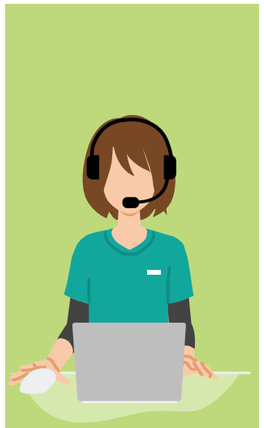
> *"Cannot praise the doctor, reception and call centre people I had contact with enough. The doctor was a role model for ALL doctors!"*
>
> Client

Pregnancy Choices Helpline

During 2024-25, 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 2024 until the end of June 2025, the Pregnancy Choices Helpline has engaged with 1,897 users.

HotDoc rollout

HotDoc is an online client engagement platform to enhance client care as well as streamline external clinical placement trainees. In 2024-25, Family Planning Australia implemented HotDoc to the Outreach Clinics at Blacktown Women's and Girls and Hunter Women's Centre to complement clinical service provision. 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. HotDoc was also implemented in conjunction with the DSU streamlined surgical termination booking process, where the surgical termination assessment was converted into an online HotDoc form that clients can fill in and submit prior to their DSU procedure.



Talkline

Calls: 4,779
Emails: 377
Live chat: 4,580

Pregnancy Choices Helpline

Calls: 1,573
Emails: 102
Live chat: 222

Our work with ACON

2024-25 saw us partnering with ACON to deliver mobile cervical screening at the Newcastle Pride event in November 2024. 16 cervical screening tests were completed. The success of this initiative led to a similar presence at the Sydney Gay and Lesbian Mardi Gras Fair Day in February 2025 where 47 women were screened for cervical cancer.

Dedicated Menopause Service

We have been working toward establishing a dedicated menopause service with a launch in March. This offering is led by our subject matter expert, Dr Lina Safro. Demand for the service is building. This service provides a more specialised, holistic approach to menopause.

SEARCH+ service finder

The SEARCH+ website is a Ministry of Health funded service finder website that assists people find a reproductive or sexual health service near them. The site invites service providers to independently list their details. 2024-25 has seen improvements to website stability and usability.

Partnership with Walgett & Brewarrina Aboriginal Medical Services

In collaboration with the SEARCH project, we continue to partner with Aboriginal Medical Services (AMS) in Brewarrina and Walgett to deliver reproductive and sexual health services for women and men in these remote communities.

We have now increased the scope of our practice to include sexual & reproductive health for men in the community. Feedback from the communities is that this service is highly valued and our dedicated team of clinicians has certainly fostered important relationships with not only the AMS staff but also the communities in which they serve.

Leveraging this collaboration, our outreach teams have been able to facilitate education and training days for AMS staff such as Menopause in-service days and a celebration for International Nurses Day. Our clinicians are committed to building local capacity by providing targeted training and education to staff in our outreach clinics. This upskilling ensures that essential services can continue to be delivered even when our team is not on-site. We have also recently partnered with a local pelvic-floor physiotherapist who has funding to visit the clinics alongside our clinicians. This has also been very well received in the community.

By sharing knowledge and strengthening clinical skills, we help empower local providers to offer high-quality, consistent care to their communities.

This year, we replaced the Dubbo vehicle with a new Mitsubishi Pajero. The upgraded vehicle is better equipped to handle country roads, enhancing safety and reliability for our staff, as they travel to deliver essential outreach services across the region.

Partnership with Hunter Women's Centre

In February 2025, the Hunter team launched an exciting new outreach initiative at the Hunter Women's Centre in Mayfield. Hunter Women's Centre provides vital support to women who are experiencing or at risk of family and domestic violence, as well as to women facing disadvantage and marginalisation. This includes women from culturally diverse backgrounds, those with English as a second language, and Aboriginal and Torres Strait Islander women.

We are proud to support Hunter Women's Centre by delivering essential health services that empower and care for women in our community.

Our experienced and compassionate clinic team provides a range of friendly, practical, and confidential services, including:

- Contraception advice
- Cervical screening
- STI testing, treatment, and prevention
- Pregnancy testing and pregnancy options counselling
- Pre-pregnancy planning and advice

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Consumer engagement

In 2024-25, 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 Quiet Ways: Six Aboriginal community stakeholders were engaged to review draft content for the resource. These stakeholders:

- reviewed and contributed to written content
- helped shape the tone, structure and language
- provided insight into ways to best communicate sensitive topics like consent, bodies and relationships, and
- The contributions of community members formed the foundation of the topic checklists and yarning stories included within the resource

Youth Advisory Group: 11 young people were recruited to our Youth Advisory Group, with a total of four consultations held in 2024-25, two online meetings and two online surveys. Topics covered include:

- Resources for young people about privacy and confidentiality
- Digital engagement
- Family Planning Australia's centenary celebrations

Freedom Condom: Direct to-consumer ordering. As part of the continued expansion in regional areas of NSW, 134 young people completed an online survey to guide the direction of our social media campaign. Additionally, a focus group with young people in the Penrith area was also held to guide the expansion of direct-to-consumer ordering in the Nepean Blue Mountains area.

All About Sex factsheet consultation: 15 people with intellectual disability were involved in text revisions across three factsheets, with participants giving positive feedback on the updates, highlighting enhancements in readability and overall comprehension. The resources that were reviewed include:

- Private body parts – keeping them healthy
- Contraception
- Periods

The internal Consumer Engagement Working Group met three times during 2024-25, working on a range of projects:

- Updating our organisational resource development process to be more inclusive and proactive in how we engage consumers
- Reviewing feedback from quarterly client satisfaction surveys
- Reviewing clinical factsheets for the Day Surgery Unit

Family Planning Australia would like to particularly acknowledge our consumer representative volunteers for their contributions over 2024-25. 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.

CONSUMER ENGAGEMENT PARTICIPANTS

227

"It's never too early to discuss topics of puberty with our kids"

Participant

Health Promotion

The Family Planning Australia Health Promotion 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

20
Health promotion resources developed

Community education sessions – face to face
9,703

Community education participants (including online participants)
196,368

1,092,961
Health promotion resources distributed/accessed (including digital content)

1,318
Freedom Condom packs distributed

99.8%
Participants reporting satisfaction

99.8%
Participants report an increase in knowledge and skills

Community education participants (including online participants)

386

Aboriginal and Torres Strait Islander people accessing health promotion programs

65,597

CALD people accessing health promotion programs and activities

18,633

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

103,342

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

Mardi Gras Fair day 2025

Our priority populations – highlights in 2024-25

Aboriginal and Torres Strait Islander People

Yarning Quiet Ways

In partnership with the STI Programs Unit (STIPU), Family Planning Australia is adapting the Western Australian 'Yarning Quiet Ways' resource to better reflect the needs and voices of Aboriginal families in NSW. The resource supports parents and carers to yarn with children about bodies, relationships, consent, and staying safe.

Between January and May 2025, six Aboriginal community stakeholders and members of the Aboriginal Sexual Health Programs Working Group collaborated with Family Planning Australia through a co-production process to develop the full written content of the resource. This content includes age-appropriate guidance, yarn-based stories, checklists, and mob-friendly referrals, designed to support everyday conversations in culturally safe ways.

A preferred Aboriginal-led design agency has been identified to produce the visual layout and artwork, drawing on their experience with culturally responsive family resources. The work completed so far reflects a strong and values-based partnership with community, and lays the foundation for a powerful, practical resource tailored to the realities and strengths of Aboriginal families across NSW. We look forward to unveiling the completed resource in 2025-26.

Culturally and linguistically diverse (CALD) communities

CALD Implementation Plan

Following a comprehensive review in 2023, Family Planning Australia developed a three-year plan to improve services for culturally and linguistically diverse (CALD) communities who often face additional barriers when accessing reproductive and sexual health services.

In 2024-25, we made significant progress in breaking down these barriers by creating user-friendly appointment booking guides in four community languages, making it easier for CALD clients to navigate Family Planning Australia's services with confidence. These comprehensive, culturally appropriate resources provide step-by-step guidance on accessing government interpretation services, reducing language barriers when seeking essential healthcare.

Family Planning Australia also established dedicated staff working groups to develop enhanced cultural practices and built meaningful connections with multicultural communities in Dubbo. These improvements ensure CALD clients receive the same high-quality, culturally appropriate care, helping to reduce health inequities across NSW.

> *"...as someone who practices alone in health promotion, I felt so invigorated and connected after Wednesday – I felt like my network grew extensively and that I could reach out and connect with so many of my peers following this."*
>
> Participant

Mobile self-collection cervical screening test (CST)

In partnership with Multicultural Health from Western Sydney Local Health District, Family Planning Australia delivered a community-based self-collected cervical screening initiative funded by the Australian Multicultural Health Collaborative. The project focused on Arabic-speaking communities in Blacktown and Auburn and aimed to improve access to culturally safe, accessible, and free cervical screening services.

We set up four mobile clinics in women's health centres and community support organisations, where women could access self-collected CST service, in-language education sessions along with interpreter's support.

Of the 27 participants who were screened, 56% were Arabic-speaking and the remaining 44% came from other linguistic backgrounds including Dari, Burmese, Bengali and Tibetan-speaking communities. Notably, 40% received their first-ever cervical screen through this initiative, and over half of the women were overdue for screening.

Participant feedback was overwhelmingly positive, with several requesting ongoing access to similar services, highlighting the ongoing need for community-based health initiatives. This pilot program has shown that when we bring healthcare to communities rather than expecting communities to come to us, we can reach women who might otherwise miss out on vital health services.

People with Disability

Planet Puberty

Planet Puberty is a comprehensive digital platform that supports parents and carers of children with intellectual disability (ID) and/or autism spectrum disorder (ASD) to navigate puberty and early adulthood. Funded by the Australian Government Department of Social Services (DSS) and supported by in-kind contributions from Sydney LHD, the project is now in its fifth year, with funding secured through to June 2026. The platform offers a wide range of accessible resources, including factsheets, videos, social stories, interactive games, a podcast, and a dedicated resource hub. In 2024–25, the project focused on expanding its resource library and strengthening national engagement.

Key achievements involved creating six detailed teacher lesson plans aligned with the Australian National Curriculum. These plans cover essential topics like hygiene, emotions, public versus private behaviours, menstruation, erections, and puberty changes. Developed collaboratively with educators, they include interactive and inclusive elements suited for diverse learners. Additionally, a new Siblings page was finalised after consulting with consumers and Siblings Australia. This page includes sections such as Feeling Good, Understanding, Connection, Identity, and Resources.

National engagement activities included participation in five major disability expos across Australia, delivery of public webinars, and provision of on-demand educational sessions for parents and carers.

The project continues to demonstrate strong sector engagement, resource development, and impact, supporting families and professionals working with young people with disability during a critical life stage.

All resources are available on the Planet Puberty website, www.planetpuberty.org.au

Disability Inclusiveness Audit

In collaboration with people with disability, Family Planning Australia conducted a Disability Inclusiveness Audit to assess Family Planning Australia's current level of disability inclusivity. The audit evaluated progress to date and identified actions required to achieve equitable and dignified access to services and employment for people with disability.

The audit recommended:

1. Aligning policies, procedures, and culture with the rights and needs of people with disabilities, including developing guidance on reasonable adjustments and a diversity and inclusion plan.
2. Implementing accessible, equitable recruitment and retention strategies.
3. Expanding service accessibility and responsiveness, including tailored health literacy support.
4. Strengthening partnerships with people with disability through active participation in governance and program design.
5. Enhancing accessibility of the built and digital environment, including ICT improvements.
6. Committing to ongoing disability inclusion training for staff.

These recommendations will guide our continued efforts to embed disability inclusion across all aspects of the organisation and reflect our ongoing commitment to increasing access to services, improving health literacy, and empowering people with disability to make informed decisions about their health.

Young People

Freedom Condom

The Freedom Condom project is a free-to-access condom distribution scheme targeted to young people under 30 years in NSW. The project combines condom dissemination with sexual health education and is designed as an early intervention capacity building health promotion strategy. The project utilises a partnership-based approach whereby project providers are trained to educate young people on safe sex and STIs, allowing the project to expand its reach across NSW. In addition, the Freedom Condom project includes an online component that provides young people in some areas across NSW with access to condoms and sexual health education.

The Freedom Condom project has achieved several goals during the 2024-25 financial year with over 15,000 condoms distributed and the continued expansion of the project online. There was also a significant increase in partnerships in regional areas, with 14 new partnerships for the project. Family Planning Australia's clinics have remained a central point for engaging young people throughout the project and consumer engagement has also been a key strength, highlighted by collaboration with Family Planning Australia's Youth Advisory Group and the use of surveys at events.

Looking ahead to 2025-26, the project aims to further expand its online offerings and redesign the face-to-face component to enhance access to free condoms for young people across NSW.

Youth Implementation Plan

In 2024-25, the second year of the Youth Implementation Plan delivered strong progress across consumer engagement, digital innovation, and clinical environment improvements.

Key achievements include:

- Formation of a Youth Advisory Group, with 11 young people contributing to health promotion projects, digital strategies, and youth-specific resources.
- New co-designed Privacy Postcard, a discreet and accessible resource that helps young clients understand their privacy rights and how their health information is managed

- Installation of phone charging stations in waiting areas and a successful trial of free period products and condoms at the Penrith clinic – an initiative that reinforced Family Planning Australia's commitment to health equity and inclusive care.
- LGBTIQ+ inclusiveness was strengthened with Transhub pronoun posters displayed in all clinic rooms, and Pride and First Nations flag pins offered to staff
- Ten new Frank articles, covering topics such as erectile dysfunction, media myths, and HIV prevention (e.g. PEP and PrEP). The Frank website attracted 7,911 users, a 147% increase from the previous year. Social media engagement also grew with both Frank and Talking Frank accounts recording a 10% increase in followers.

In 2025-26, key priorities include a Body Talk update, delivery of youth-friendliness training, and implementation of the youth communications and marketing plan to further strengthen reach and impact.

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Education

Family Planning Australia's education and training 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 2024-25, Family Planning Australia provided training to 1,808 course participants. This year has seen the continuation of courses being delivered in a blended format with workshops delivered as face-to-face training and online. We have expanded face-to-face courses to all Family Planning Australia sites and in several Local Health Districts to support 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 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.

This year we delivered 158 courses to 888 clinical participants, 54 Clinicians attended clinical placements.

Remote and Rural delivery: Cervical Screening training (CST) delivered to 110 remote and rural participants out of a total of 295 overall participants. Long Acting Reversable Contraceptive courses (LARC training) was delivered to 129 remote and rural participants out of a total of 368 participants.

In 2024-25 we continued to review and update our clinical education programs, including the release of new online courses for doctors:

- Menopause
- STI and BBV
- Unintended pregnancy and medical abortion in primary care
- Contraception
- Common gynaecological conditions, Breast health are accredited and in final testing stages before release

All courses offer a comprehensive understanding of each topic with expert lecture recordings. These subjects form part of the full course Family Planning Australia Alliance National Certificate in Reproductive Sexual Health for Doctors and the course in Reproductive Sexual Health for Nurses and Midwives, with the aim to support clinicians access to updates of individual topics, or at a later stage to be used as credit for the full course. We continue to update all topics and lectures within the full course.

We are also providing a new face-to-face fast-paced version of the Family Planning Australia Alliance course to support all delivery options. This follows the receipt of requests from participants to bring back the face-to-face component of this course that was impacted by COVID-19 restrictions.

2024-25 has seen the rejuvenation of the Family Planning Australia Clinical Forums for Doctors, Nurses and Midwives at three locations – Newington, Newcastle and Wagga Wagga. These include a half-day session aimed at clinicians looking to update and expand their knowledge in reproductive and sexual health, with optional workshops in the afternoon. These workshops include Implanon Training, Cervical Screening Training and IUD Refresher Training.

IUD Refresher training, a recently 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. This course is also suitable for nurses assisting in IUD insertion. IUD Refresher training was delivered to a total of 44 participants (including six staff members).

IUD Insertions workshops were held for 28 participants (including six staff members) 13 participants have completed the clinical placement component.

> *I liked the workshop. I am now aware of situations that I might face in the future. Some topics covered in the workshop are things that I hadn't even thought of so it's good to know beforehand.*
>
> Participant

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

Cervical Screening Comprehensive Skills and Contraceptive Implanon Face-to-Face Training, both have steady enrolments and have been delivered monthly in Newington and Hunter and bimonthly at Dubbo. Cervical Screening Comprehensive Training was delivered to a total of 153 participants. Contraceptive Implanon was delivered to a total of 186 participants.

Implanon Online Training remains popular and caters to clinicians locally and was designed specifically to be accessible for rural and remote area clinicians.

Exhibitions attended to promote Family Planning Australia and Education – Clinical

- ASHM 17-20 September 2024 HIV&AIDS IUSTI world congress, Education arranged an exhibition table and timetable inviting all pillars/department to take part in networking at the event.
- HealthEd Saturday 10 May 2025 at ICC Sydney. HealthEd medical update day for General Practitioners was attended by the Education team

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 community based surgical and medical termination of pregnancy (MTOP) services and best practice long-acting reversible contraception (LARC) for women who experience barriers to safe and affordable services in regional NSW.

We currently have 16 active partnerships across eight Local Health Districts with two new partnerships formed in 2024-25. Partnership outreach and development is ongoing.

2024-25 has also seen a focus on other initiatives within the SEARCH program including:

- Provision of seven webinars on related topics
- Appointing a social worker to provide support to SEARCH partners and their clients
- Conducting face to face training in contraceptive implants with supported clinical supervision
- Enabling access to IUD insertion training to several midwives and nurse practitioners in remote and regional areas

Feedback on the webinars has been very positive. Comments from participants includes "Thanks so much. I know Family Planning does lots of training and capacity work, but I wanted to share how impressed I was with the webinar and all the wrap around communications. Really outstanding and I feel raising the bar!" and regarding the face-to-face training: "I also want to thank you for providing such a great training opportunity for the staff".

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 locations including Coffs Harbour, Tweed Heads, Warilla, Orange, Tamworth, Taree, Parramatta and Surry Hills.

This year we delivered 33 courses to 565 professional community and school educators.

Some highlights in 2024-25 include:

- **The Nitty Gritty: Specialised Reproductive and Sexual Health Training for Youth Workers** course continues to see strong demand. This Sydney Local Health District funded course saw the course facilitated across seven Local Health Districts with 178 participants successfully completing the course.
- **The RTO accredited course CHCEDU003:** Provides sexual and reproductive health information to clients, for disability, youth and community workers and has continued to be a popular course with steady enrolments in the Hunter New England region.
- **The Sexualised Behaviours of Concern and Intellectual Disability course** continues to attract significant interest for professionals working with people with intellectual disability and autism, with high enrolment numbers across all scheduled online sessions.

2024-25 saw the publication of a series of guidance documents for schools with a focus on priority populations, this includes guidance for LGBTQI+ students, students with disability, Aboriginal and Torres Strait Islander students and Culturally and Linguistically Diverse students. Funded under Sydney Local Health District Population Health/ Sexual Health grant, 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 have been 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.

Exhibitions attended to promote Family Planning Australia and Education – SACS

EDUtech Australia Conference

11 & 12 June 2025 – Victoria Oettel, Senior Education Officer, presented at the EDUtech Australia held at the Convention Centre in Darling Harbour. This is a large conference with at least 100 PDHPE teachers in attendance. Victoria was on a panel with a Joyce Yu, Co-founder of Consent Labs, speaking about consent and respectful relationships.

ACHPER K-12 PDHPE Conference

24 and 25 November 2024 – We had two interactive workshops presented at the Conference, as well as an Exhibition Table that received a lot of traffic.

Workshop 1: Innovative Classroom Approaches to Consent and Healthy Relationships – Victoria Oettel

Workshop 2: Teaching sexuality and sexual health education through a diversity lens. Facilitator: Rhiannon Watson. This workshop introduced the new priority populations guidance documents.

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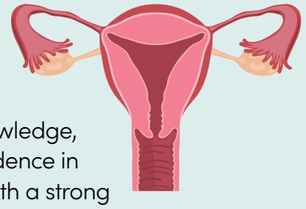
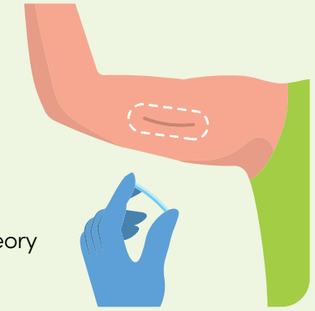
Clinical Education

CERVICAL SCREENING TRAINING



Aims to enhance knowledge, technique, and confidence in cervical screening, with a strong focus on recent updates to self-collection. This blended learning course comprises both online learning and comprehensive skills practise led by Family Planning Australia clinicians.

CONTRACEPTIVE IMPLANT (IMPLANON NXT) INSERTION AND REMOVAL



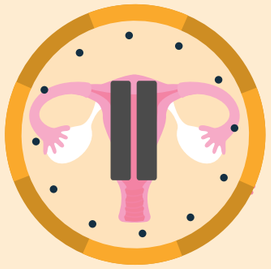
Aims to enhance knowledge and skills to safely insert and remove the Implanon device. This blended learning course comprises both online theory and comprehensive skills practise either online via a zoom session or face-to-face, led by Family Planning Australia clinicians.

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.

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.



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.

MEDICAL ABORTION ONLINE

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

CLINICAL FORUMS – DOCTORS CLINICAL FORUMS – NURSES AND MIDWIVES

Half-day session, to enhance knowledge on reproductive and sexual health, led by experienced Family Planning Australia clinicians and subject matter experts. The Forum covers key topics in women's health including: menopause, contraception, reproductive coercion, Pregnancy options.

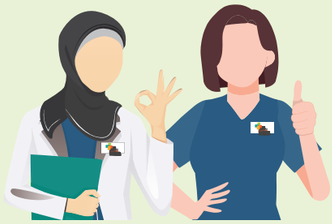
FAMILY PLANNING AUSTRALIAA NATIONAL CERTIFICATE IN REPRODUCTIVE AND SEXUAL HEALTH FOR DOCTORS

Supporting doctors to upskill in reproductive and sexual health. Topics include contraceptive options, STIs, cervical screening, pregnancy options, men's health, and menopause.

PREGNANCY CHOICES

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

CLINICAL PLACEMENTS – FOR DOCTORS, NURSES, AND MIDWIVES



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

158 Clinical education training courses delivered

888 Clinicians attended courses

54 Clinicians attended clinical training practicum

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Schools and Community Education

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.

Let's talk SERIES

EDUCATION ESSENTIALS

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

SEXUAL HEALTH EDUCATION FOR LIFE: THE PDHPE CURRICULUM FOR STUDENTS WITH DISABILITY

Designed for teachers and school learning support officers working with primary and secondary students with intellectual disability.

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.

SUPPORT DESCISION MAKING IN SEXUALITY IN 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. .

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 dignity of risk.

PRESENTATION SKILLS

Aims to support Family Planning Australia staff members to develop, design, deliver, and evaluate presentation skills.

SEXUALISED BEHAVIOURS OF CONCERN AND INTELLECTUAL 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.

"The course was highly informative and well-structured. The practical demonstrations were clear and very helpful in building my confidence with the procedure."

Participant

565 participants attended courses

33 courses delivered

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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 2024-25, our Ethics Committee convened eight times (two via Zoom and six via email), with one additional out of session review conducted by the Chairperson. In addition, the Ethics Committee reviewed and approved 10 amendments and monitored 12 ongoing research projects.

> *"Great service and I was well looked after as it was a quick and smooth process from start to finish."*
>
> Client

Research team milestones and updates

Our research team submitted six journal articles and had seven published in peer reviewed journals. The research centre also published a statistical report detailing prescription rates of medical abortion across NSW. This report, Use of medical abortion services in New South Wales Australia between 2018-2022, was launched by ABC news online and featured heavily in the media upon its December 2024 release, including over 40 appearances by Family Planning Australia staff across tv, radio, and social media.

Outcomes from the international randomised clinical trial for Very Early Medical Abortion (VEMA) were published in the prestigious New England Journal of Medicine. Family Planning Australia was a trial site for this research, which found that providing medical abortion (up to 42 days/6 weeks) with an unconfirmed intrauterine pregnancy was not inferior to standard care. This evidence is an important step to reduce delays to high-quality abortion care.

Research projects

The Research Centre has been involved in a range of studies in 2024-25 – 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 contributed to the Step-Up study, a randomised controlled trial for women diagnosed with bacterial vaginosis and their male partners. BV is very common among women and over half of women experience a recurrence of BV within a few months of being treated. Results from the trial were published this year and showed that treating men at the same time as their partner is treated more than doubles the likelihood of BV cure compared to only treating women.

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 focused on consultation, which was followed by the co-design of interventions to improve access and uptake and evaluation of the impact of these interventions, which is currently underway.

A recent systematic review and meta-analysis by the ScreenEQUAL team identified that that just over a third of people with intellectual disability have had cervical screening, that they are less likely to have a cervical screening test compared with people without intellectual disability. This makes ScreenEQUAL interventions an important resource for achieving cervical screening equity in Australia.

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.

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 improve the availability and accessibility of emergency contraception in Fiji.

This year saw the publication of new research describing Fijian pharmacists' knowledge of emergency contraception, their confidence in dispensing and discussing emergency contraception with clients and their dispensing practices. Findings from this research were used to co-develop a pharmacist job aid for emergency contraception, which has had a positive impact and informed Phase 2 of the project. Phase 2, supported by the Fiji Ministry of Health & Medical Services, pilots emergency contraception training for public pharmacists at five clinic sites, evaluates the job aid in practice, and examines demand for emergency contraception in public healthcare services. Findings from Phase 1 have been presented at the Australasian Sexual & Reproductive Health Conference in Adelaide (September 2025).

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 contraception counselling and referral intervention. It will also directly address key barriers to implementation of this approach previously identified by community pharmacists.

Cervical Screening and Treatment in Tuvalu

Family Planning Australia in collaboration with the Tuvalu Family Health Association and the Ministry of Health, has supported the implementation of cervical cancer screening and treatment services and the training of local healthcare workers. Since 2019, around 70% of eligible women have been screened. The evaluation of these activities was conducted by the research centre, examining barriers and facilitators from the perspectives of both women accessing services and healthcare workers.

Findings from this work have been presented at several conferences, including the 25th IUSTI World Congress in Sydney (September 2024), the Eliminating Cervical Cancer Conference (ECC2024) in Melbourne (November 2024), and the Australasian Sexual & Reproductive Health Conference in Adelaide (September 2025). Building on these findings, Tuvalu is now participating in the multi-country EPICC project, in collaboration with Family Planning Australia and other partners, to strengthen efforts toward cervical cancer elimination.

Understanding the fertility knowledge of adolescents

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 examines 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. Adding from previous findings showing that knowledge about fertility was poor and knowledge about fertility was lower than other sexual and reproductive health topics taught in the curriculum. New qualitative research from the team explored fertility through focus groups with 25 adolescents. These insights provide comprehensive understanding of the perspectives of young people on fertility, and recommendations made by the team can help enable education towards a preventative approach that is contextually and socially relevant.

Peer reviewed publications

Family Planning Australia Research Centre staff have authored and co-authored the following peer reviewed publications in 2024-25:

Power R, David M, Strnadová I, Touyz L, Basckin C, Loblinzk J, Jolly H, Kennedy E, Ussher J, Sweeney S, Chang EL. Cervical screening participation and access facilitators and barriers for people with intellectual disability: a systematic review and meta-analysis. Frontiers in Psychiatry. 2024 Jul 26;15:1379497.

Trinh LT, Estoesta J, Macdonald V, Bateson D, Boerma C, Rogers C, Gounder R, Dawson A. Emergency contraception access in Fijian community pharmacies: A descriptive study. Australian and New Zealand Journal of Public Health. 2024 Oct 1;48(5):100191.

Brandell K, Jar-Allah T, Reynolds-Wright J, Kopp Kallner H, Hognert H, Gyllenberg F, Kaislasuo J, Tamang A, Tuladhar H, Boerma C, Schimanski K. Randomized trial of very early medication abortion. New England Journal of Medicine. 2024 Nov 7;391(18):1685-95.

Vodstrcil LA, Plummer EL, Fairley CK, Hocking JS, Law MG, Petoumenos K, Bateson D, Murray GL, Donovan B, Chow EP, Chen MY. Male-partner treatment to prevent recurrence of bacterial vaginosis. New England Journal of Medicine. 2025 Mar 6;392(10):947-57.

Graham S, Martin K, Gardner K, Beadman M, Doyle MF, Bolt R, Murphy D, Bell S, Treloar C, Browne AJ, Aggleton P. First Nations perspectives about youth pregnancy and parenthood in Western Sydney, Australia: A qualitative study. First Nations Health and Wellbeing-The Lowitja Journal. 2025 Jan 1;3:100047.

Martin K, Bryant J, Bolt R, Graham S, Beadman M, Doyle M, Treloar C, Bell S, Murphy D, Gardner K, Newman C. Aboriginal adults' perspectives on talking with young people about sexual health and relationships in two communities in Western Sydney, Australia. Sex Education. 2025 May 31:1-7.

Ford EA, Medley A, Chojenta C, Bagade T, Sweeney S, Sutherland JM. A qualitative study of Australian adolescent perceptions of fertility and infertility. Human Fertility. 2025 Dec 31;28(1):2506790.

Conference presentations

Oral and poster presentations given by the Research Centre and other Family Planning Australia staff at conferences in 2024-25:

Title	Conference
Use of long-acting reversible contraception in New South Wales, Australia between 2005 and 2019	Children by Choice Reproductive Rights and Abortion Conference 2024
Estimating medical abortion in NSW 2018-2022	Children by Choice Reproductive Rights and Abortion Conference 2024 and Western NSW Health Research Network Research Symposium 2024
Evaluating the implementation of abortion services: collaborations and challenges	Children by Choice Reproductive Rights and Abortion Conference 2024
Achieving equitable elimination of cervical cancer in Australia	National Health and Medical Research Council – Centre for Excellence in Cervical Cancer Control (C4) Seminar Series
Barriers and facilitators for increasing cervical cancer screening in Tuvalu	IUSTI World Congress incorporating the Australasian Sexual and Reproductive Health Conference 2024 Eliminating Cervical Cancer Conference 2024 27th Congress of the World Association for Sexual Health 2025 Screening 2025
A mixed-method investigation into acceptability of intrauterine device insertion without sedation for young nulliparous people	2025 Women's Health Forum, Centre for Women's Health Research
Pelvic inflammatory disease: a pilot study to identify microbial and immune biomarkers associated with pelvic inflammatory disease	2025 Women's Health Forum, Centre for Women's Health Research

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 2024-25 we were proud to collaborate with partners across 12 countries to reach 15,824 people directly. Our contraceptive supply partnership with IPPF significantly contributed to beneficiary reach with 11,405 contraceptives distributed across eight countries. Innovative digital comprehensive sexuality education work with our partners in Fiji and Vanuatu reached 446,754 people. Other projects provided clinical training on family planning and cervical screening and treatment; supported countries to develop youth-friendly health service (YFHS) guidelines; reviewed school curricula hand in hand with Ministries of Education; and provided comprehensive sexuality education (CSE) training for community members working with young people. Across these programs we trained close to 400 health workers, educators and community members in the Pacific.

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 delivered our first Train the Trainer (TOT) Family Planning Training in Chuuk, FSM with participants from both FSM and RMI. We delivered Out of School CSE training in Pohnpei, FSM. We held a YFHS training for health workers in Majuro, RMI to increase their capacity to understand, engage and respond to the needs of young people and deliver best-practice youth friendly SRH services.

We continued our work in Nauru in 2024. In August we delivered the first HPV 'screen and treat' training under the Elimination Partnership in the Indo-Pacific for Cervical Cancer (EPICC) program as part of the Department of Foreign and Trade (DFAT) Partnerships for a Healthy Region initiative—a milestone moment for both the program and Nauru. We returned to Nauru the next month to deliver our first Family Planning Training in country. Twenty-three health professionals were trained in Consultation, Counselling and Contraception, in addition to long-acting-reversible contraceptive methods.

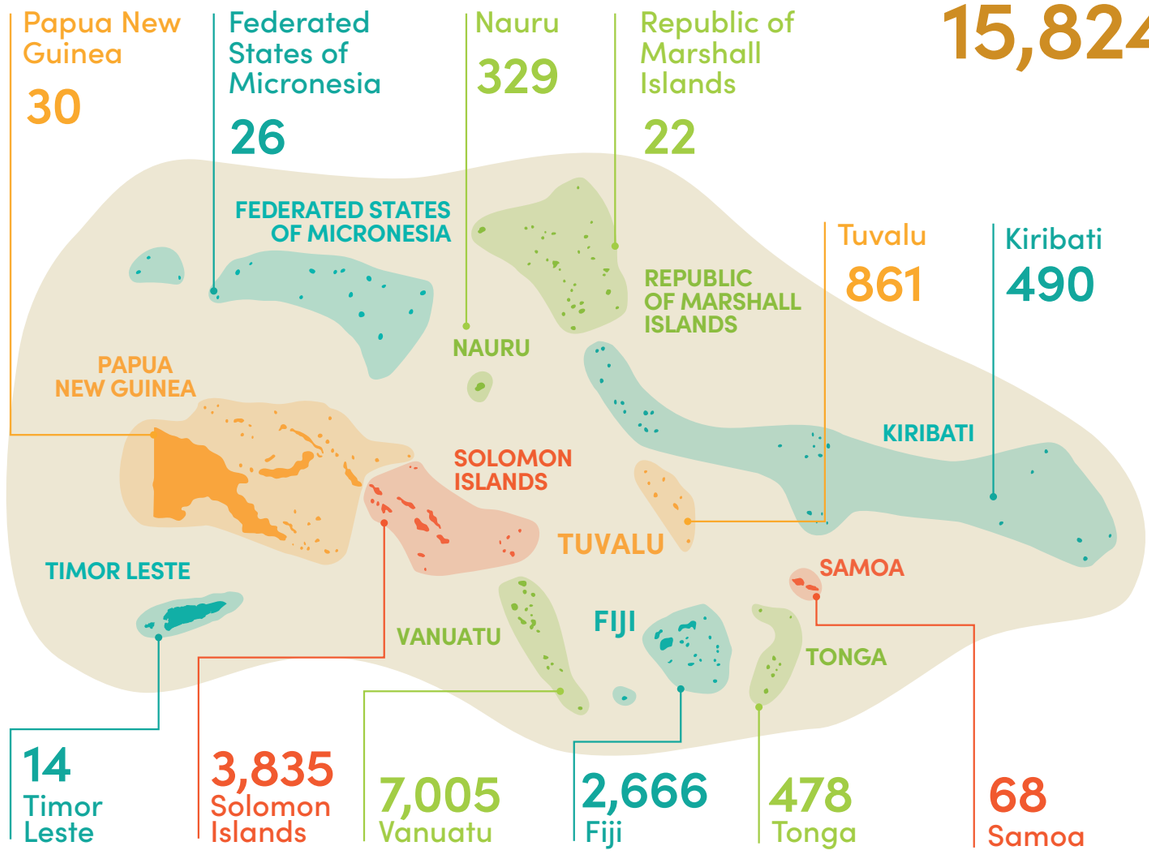
We also grew our activity in Fiji, providing training to enhance pharmacists' knowledge and confidence in discussing and counselling clients in emergency contraceptives (EC) and began a pilot program in partnership with the Fiji Ministry of Health and Medical Services (MHMS), Reproductive and Family Health Association of Fiji (RFHAF) and Fiji National University (FNU) dispensing EC in select public clinics supported with the job aid and consumer brochures co-designed with pharmacists and public health nurses. In Fiji, we led a landmark two-week regional training on sexual and reproductive health (SRH) and family planning for 24 midwifery educators from across the Pacific.

We completed our final training under the collaborative Eliminating Cervical Cancer in the Western Pacific in PNG marking a shift of cervical cancer elimination projects to EPICC and Advancing Cervical Cancer Elimination in the Pacific program (AdvanCE). Under EPICC and AdvanCE, we began work with our partners in Solomon Islands to provide programmatic support for their new national HPV screening program set to begin roll out by the end of 2025. Through the AdvanCE program, we travelled in Timor Leste and Tonga to deliver HPV 'screen and treat' training, supporting our consortia members' and in country partners' programs.

Our International Programme is supported by the Australian government, through the Australian NGO Cooperation Program and Partnerships for a Healthy Region, the UNFPA Transformative Agenda and the Elimination Partnership in the Indo-Pacific for Cervical Cancer Advancing Cervical Cancer with support from the Swire Group (AdvanCE), the Minderoo Foundation, Women's Plan Foundation and private donors.

Partners in the Pacific

Total beneficiaries 15,824



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.

Australian Aid

ACFID MEMBER

"My confidence has improved a lot. I now feel prepared to share this knowledge with my students and colleagues."

Participant

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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 work with Vanuatu Family Health Association, and our partnership with the International Planned Parenthood Foundation Sub Regional Office of the Pacific 11,405 women received contraceptives across eight countries. This support ensures women in these communities have access to long acting reversible and other contraceptives.

11,405

CONTRACEPTIVES DISTRIBUTED IN

Fiji, Kiribati, Solomon Islands, Samoa, Vanuatu, Tonga, Tuvalu & PNG

Impact story 1: From Confusion to Confidence – Emergency Contraception Made Easy

Access to family planning is a proven strategy for reducing maternal and child mortality. In Fiji, emergency contraception (EC) remains one of the least known and accessible methods, particularly in public health facilities. While available through private pharmacies, community awareness is low.

In 2023, an online survey of private pharmacists in Fiji revealed the need for a consistent, easy-to-use job aid to support EC provision, including guidance on counselling and referrals. In response, the Reproductive and Family Health Association of Fiji (RFHAF), Fiji National University (FNU), Family Planning Australia, and the Ministry of Health and Medical Services (MHMS) collaborated to develop and pilot a standardised EC job aid.

A training workshop brought together healthcare workers, public and private pharmacists to learn about EC and co-design the job aid. This participatory approach fostered collaboration across sectors. Training also included legal guidance for underage clients and improved their skills in counselling clients. To raise awareness in the community, brochures and social media campaigns were developed.

The job aid has improved pharmacists' and nurses' confidence and counselling skills, providing a structured approach to EC consultations. Brochures have helped increase public understanding and acceptance of EC. The initiative has streamlined service delivery and enhanced the overall client experience.

> *"My experience with the job aid has been very positive. It simplified the process and helped us know what to ask clients."*
>
> Garden City Pharmacist

As a result of this collaboration, MHMS is now piloting the dispensing of EC with the use of the job aid in select public clinics. If successful, EC will become routinely available through MHMS services.

This project is made possible by the generous support of Women's Plans Foundation and the Australian Government through the Australian NGO Cooperation Program (ANCP) funding.

Case study 1: Strengthening midwifery education through regional collaboration

Family Planning Australia is engaged as an Implementing Partner of the UNFPA Transformative Agenda, to develop and deliver Family Planning Training across the Pacific. Family Planning Training equips clinicians with up-to-date knowledge and skills in 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.

In June 2025, 24 midwifery educators from across seven Pacific nations gathered in Nadi, Fiji, for a two-week regional training. The landmark event represented a unique opportunity for educators and clinicians from diverse island nations to share experiences, strengthen skills, and build a united vision for improving family planning educationin the region.

Midwifery schools across the Pacific are revising their curricula to strengthen SRH and family planning content. Educators engaged in classroom sessions, simulations, and clinical observation to build confidence in teaching family planning skills and revising curricula.

Outcomes included:

- All educators signed off to deliver theoretical SRH and family planning education
- Majority achieved competency in Jadelle and IUD procedures using simulation model
- 13 participants certified as Clinical Instructors to train others in their home countries.

Participants highlighted how the hands-on approach and peer learning boosted their confidence to teach both the theory and practice of family planning.

As one participant shared:

"My confidence has improved a lot. I now feel prepared to share this knowledge with my students and colleagues."

The training fostered meaningful dialogue among educators from diverse Pacific contexts, who shared strategies for teaching sensitive content, supporting varied communities, and adapting to limited resources. This collaboration strengthened regional networks and highlighted the value of south-south partnerships. By building educators' confidence and skills, the initiative laid a foundation for sustainable, high-quality SRH education—empowering midwives to deliver life-saving family planning services across the Pacific.

Impact story 2: Advancing Youth-Friendly Health Services Across the Pacific

As an Implementing Partner of the UNFPA Transformative Agenda, Family Planning Australia provides technical and operational guidance to key stakeholders in delivering local youth SRH services across the Pacific.

2024–25 has been a landmark year for youth-friendly health in the Pacific, with three countries making significant progress. National Youth-Friendly Health Services (YFHS) Guidelines were finalised in Nauru and Tonga, and training rolled out in Kiribati. These Guidelines provide practical tools for health workers and support staff to ensure care is accessible, acceptable, appropriate and comprehensively responds to the needs of young people.

Nauru: Ready to launch a milestone

Finalised in 2024-25, Nauru's first ever YFHS Guidelines are set to launch early next financial year. Developed through consultations with young people, health experts, and community stakeholders. the Guidelines provide clear direction to deliver high-quality services for adolescents and youth aged 10–34. Aligned with WHO global standards and tailored to Nauru's unique context, they are supported by resources, including a Health Facility Readiness Assessment, Supportive Supervision Toolkit, and Contraceptive Flipchart—marking a new chapter for youth-centred healthcare in Nauru.

Kiribati: Building a network of trainers

In November 2024, Kiribati held its first-ever YFHS Master Training, equipping health workers with the skills and confidence to deliver youth-friendly services. Strong participant engagement led to a second training in February 2025, facilitated by newly trained Master Trainers with Family Planning Australia joining virtually. Using culturally relevant examples in local language, facilitators ensured high levels of engagement. By February, Kiribati had 39 passionate Master Trainers. With plans to roll out five more training sessions, including to outer islands, Kiribati is ensuring that young people across the country can access youth-friendly healthcare.

As one Master Trainer reflected:

> *"The training has shown me how to talk with young people in a way that builds trust. I feel more confident to support them now."*

Tonga: Customised Guidelines completed

Tonga finalised its national YFHS Guidelines in 2025, adapting them to the local context and integrating its own SOGIESC (sexual orientation, gender identity and expression, and sex characteristics) Guidelines. With endorsement and training on the horizon, Tonga is preparing to implement a model of inclusive and culturally grounded youth-friendly health services.

Together, these milestones reflect a shared regional commitment to embedding youth-friendly principles into national health services—creating supportive environments where young people can access care with dignity and confidence.

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, until recent investments, organised screening programs have not been widely available in the Pacific.

Family Planning Australia supports the implementation of cervical 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 2024-25 partners in the Solomon Islands and Tuvalu successfully screened 3,550 women. In November 2024, we co-facilitated with in country Master Trainers training in PNG as part of the Minderoo Foundation funded Eliminating Cervical Cancer in the Western Pacific (ECCWP) initiative.

This and other programs related to cervical cancer in the Pacific will now shift to the Elimination Partnership in the Indo-Pacific for Cervical Cancer (EPICC) and Advancing Cervical Cancer Elimination in the Pacific program (AdvanCE). Family Planning Australia is an implementing partner of the EPICC consortia which includes the University of Sydney, the Kirby Institute and the Australian Centre for the Prevention of Cervical Cancer. EPICC is funded as part of the DFAT Partnerships for a Healthy Region.

EPICC builds on the successes of the consortia work in cervical cancer elimination in Solomon Islands, Tuvalu, PNG, Vanuatu and PNG. It focuses on three pillars (immunisation, screening, treatment) of the WHO Global Strategy for the Elimination of Cervical Cancer. In 2024-25 we worked with partner governments and other in country partners to co-design a range of cervical cancer control activities in the Indo-Pacific region, with a focus on capacity building, sustainability and equity.

We were excited to deliver the first training using the 'screen and treat' model under EPICC program—a milestone moment for both EPICC and Nauru. In September 2024, the Family Planning Australia team trained nine clinicians in the prevention of cervical cancer through point of care testing for Human Papillomavirus (HPV) and treatment for pre-cancerous cervical changes.

Three clinicians were certified to perform thermal ablation procedures. Since then 294 women have been screened, with plans to expand the 'screen and treat' program in the upcoming financial year. Additionally, we trained 26 community health workers from the Nauru Department of Public Heath on health promotion principals and cervical screening. Together they adapted and localised information, education and communication materials to support community outreach, recognising the vital role community health workers play improving access to cervical screening. Additional training and programmatic support next year will leverage the lessons learned from this year experience in Nauru.

Thanks to additional funding from the Swire group, AdvanCE will build on and align with EPICC and other philanthropic investments in the Indo-Pacific region to expand the reach of HPV 'screen and treat' model. In 2025, we travelled to Timor Leste and Tonga to lead training for clinicians in the model and support the opening of inaugural cervical screen and treat services for women in the fight against cervical cancer.

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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 disabilities 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.

446,754

people received innovative **comprehensive sexual** *information and education*

Miri – Fiji One segment menstrual hygiene

Case study 2: From Facebook to Fiji TV: Periods in the Spotlight

Menstruation remains a stigmatised topic in Fiji, and access to comprehensive, evidence-based information is often limited. Many girls and women may not know when to seek medical help for issues such as heavy menstrual bleeding, pelvic pain, or other reproductive health concerns. Leaving these issues untreated can prevent girls from attending school and women from participating fully in work or community life. Limited knowledge about menstrual hygiene — including how often to change products — can lead to health issues and further reinforce stigma. Access to appropriate menstrual products is also limited, contributing to period poverty and compounding barriers to education and participation.

The issue is not only for women and girls — boys and men also need to be included to reduce stigma and create supportive communities. Recognising this, RFHAF's trained peer educators designed a youth-led social media campaign on menstrual hygiene. The posts aimed to increase awareness, reduce stigma, provide guidance on safe menstrual practices, and advise where to access menstrual products.

The campaign went viral on Facebook, reaching over 216,500 views and generating widespread engagement. One Facebook comment reflected the impact on community attitudes:

"Boy, please do not make fun of you. Go and be an ambassador of an important issue."

National recognition followed. RFHAF was invited to participate in a live interview on Fiji One TV's program Ketekete Nei Nau, providing a platform to discuss menstrual hygiene, youth leadership, and the partnership with Family Planning Australia that enabled the campaign.

Through both digital and national media channels, the campaign reduced stigma, promoted safe hygiene practices, encouraged community participation, and strengthened RFHAF's profile as a youth-driven organisation addressing sexual and reproductive health issues.

This project is made possible by the ongoing funding Australian Government through the Australian NGO Cooperation Program (ANCP).

Case study 3: From Curriculum to Classroom: Strengthening Family Life Education in the Federated States of Micronesia (FSM)

Family Planning Australia, as an Implementing Partner of the UNFPA Transformative Agenda, supports Ministries of Education to integrate Family Life Education (FLE) into formal schooling. In 2024-25, the Pohnpei Department of Education (PDOE) in the Federated States of Micronesia (FSM) achieved a significant milestone: FLE is now ready to be delivered in Grades 6, 7, and 8 across more than 30 elementary schools starting in the 2025–2026 school year.

The initiative—driven by PDOE, UNFPA, and Family Planning Australia—highlights the power of strategic partnerships, technical expertise, and local solutions in embedding FLE into a state education system.

The journey began with a comprehensive curriculum review to assess existing FLE content. Guided by the UNESCO International Technical Guidance on Sexuality Education, Family Planning Australia worked closely with PDOE to integrate essential FLE topics and adapt sensitive content to reflect Pohnpei's culture and needs.

We then trained key educators, principals, and subject specialists as Master Trainers. These trainers led teacher training for all Grades 6–8 teachers, ensuring consistent, interactive, and high-quality FLE delivery. Teachers practiced discussing sensitive topics in safe, supportive peer environments—building confidence before entering classrooms.

As capacity grew in FSM, 12 educators were brought together to participate in a Family Planning Australia-led workshop to co-develop detailed lesson plans for each grade. Family Planning Australia reviewed and compiled these into comprehensive teacher guides, complete with activities and practical strategies to support sustainable and effective classroom delivery.

One teacher reflected:

> *"The training gave me confidence to teach topics I used to avoid. Now I have clear lesson plans and activities to guide my students through important discussions."*

PDOE Director, Stanley Etse, emphasized the broader impact:

> *"Family Health Education supports healthy individuals, families, and communities. May the knowledge and skills gained from learning FLE empower you to make powerful contributions in your communities."*

Communications and Marketing

As part of the People, Culture and Corporate Services team, Communications & Marketing (C&M) offers services to all Family Planning Australia.

Through 2024-25, we supported Family Planning Australia service delivery with marketing, communications and media activities, strategy, planning, implementation and promotions, while introducing agile ways of working and delivery to timelines.

All our activity has been centred around contributing to the upcoming 5-year strategic plan and celebrating our people through well-crafted initiatives.

Some of our key achievements are:

International Nurses Day celebrations on 12 May, 2025 coinciding with Integrated Health's Update Day. Clinicians from across our sites were welcomed at Newington with a specially themed individual gratitude pack of chocolates, and a postcard and pin. Their names were presented on a looped video at the venue, and they were celebrated via social media posts and a blog article. Posters were put up at all clinics and all material was designed by the C&M team. We received very positive feedback from nurses and attendees who appreciated the personalised approach and special care shown to them.

Frankee, the Family Planning Australia intranet was launched on 11 December, 2025 and was very well received by all staff. Internal communication is now streamlined with everyone having access to a single location for the latest news, information, forms, policies and much more. The C&M team were involved in the development and launch of the site and continue uploading content and site management. This initiative has delivered the outcome of better internal communication that was identified in the staff survey.

Through 2024-25, we developed a wide range of collateral for internal teams to share with the wider community and priority populations, promoting various key sexual and reproductive health messages. These include flyers, booklets, brochures, social media tiles, eDMs, project collateral and much more.

Digital communication has been a key focus area through the year with successful delivery of many projects but in particular the RSH Handbook site upgrade for clinical students, and relaunch of SEARCH+, a site to find reproductive and sexual health information across NSW. We also assisted the SEARCH Project in marketing the program to targeted clinical audience across NSW and made progress in delivering In The Know, our resource hub for all reproductive and sexual health information.

Our media presence was enhanced through highly successful campaigns such as the MTOP media release in December 2024, which extensively featured comments from Sue Shilbury – CEO, Dr EmmaLee Ford – Senior Research & Evaluation Officer and Dr Evonne Ong – Medical Director at Family Planning Australia. The total number of media mentions via articles, radio, TV, podcasts, interviews was 284 featuring various Family Planning Australia staff. It was good to see Family Planning Australia widely showcased across media as trusted experts and advocates for reproductive and sexual health.

Number of stories

77

Audience

292,183

We have delivered key social media campaigns such as celebrating NAIDOC Week, the Olympics, and the 'Love Your Work' campaign across logo development, posters, flyers and other internal communication.

In 2024-25 we began working on two key projects – The Family Planning Australia Centenary celebrations program that will cover activities in 2026, our 100 year anniversary, and the Rebranding Project, which will deliver a new name for Family Planning Australia that reflects its new vision and role.

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

Organic posts across all SM channels

558

Paid campaign posts across all SM channels

73

1,053,356

Number of unique visitors to all Family Planning Australia and FPA-managed websites

12,206

Number of followers across all Social Media channels

eDMs sent to various audiences

78

Video/audio/ photography tasks

78

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Advocacy

Family Planning Australia champions sexual and reproductive health and rights through active collaboration with influential stakeholders and policymakers across state, national, and global platforms. We place strong emphasis on advancing the wellbeing and rights of priority populations and strengthen our impact by partnering with local and regional networks.

This year our advocacy work involved contributing to:

Our 2024-25 advocacy activities addressed issues around the following themes:

Abortion access and legislative reform

In 2024 the 5-year anniversary of abortion decriminalisation in NSW marked a moment of reflection on advances and called for renewed commitment to address ongoing barriers to abortion access, especially in rural, regional and remote areas.

We supported the Abortion Law Reform Amendment (Health Care Access) Bill 2025, which was passed and expanded medical abortion prescribing rights to nurse practitioners and endorsed midwives.

We are working with the Australian Medical Association NSW, RACGP and NSW government stakeholders focus on strategies to better embed abortion services into NSW Health systems, with emphasis on integrated care and primary health.

Contributing to health strategies and data collection

Our feedback on drafts of the revised NSW HIV Strategy and National STI Strategy stressed the importance of inclusive definitions of priority populations, expanded testing access and consideration of local approaches for effective implementation.

Our expertise in research and data is contributing to developing the structure of the Australian Institute of Health and Welfare's new national SRHR monitoring framework. We also collated data from our own services and colleagues in other states for the International Planned Parenthood Federation's global data collection to strengthen evidence-based policy, advocacy and service delivery.

Countering global anti-rights movements

There is growing and coordinated anti-rights activism in our region and globally undermining sexual and reproductive health and rights, gender equality, and LGBTIQ+ rights.

Misinformation campaigns also threaten credible health information and policy progress.

Our activities this year linked with parliamentarians, United Nations agencies, and civil society networks to raise awareness and highlight emerging evidence from our region to call out and resist this pushback and to ensure all people can access the information and services they need for good sexual and reproductive health.

Women's health and equity

- Promoted strategies to improve contraceptive choice for Australian women through nurse-led provision of long-acting reversible contraceptives.
- Endorsed government recommendations and identified strategies to improve health and wellbeing for those experiencing menopause and perimenopause.
- Supported initiatives which address gender bias in our healthcare systems and enhance affordability and accessibility of women's health care.

Supporting the health and rights of Pacific Communities

We called on the Australian government to ensure that funding for development assistance continues to include sexual and reproductive health and rights as a priority as it is an essential component of supporting wellbeing and prosperity in Pacific Island nations.

Based on emerging research about the sexual and reproductive health of Pacific Australia Labour Mobility (PALM) Scheme workers, we also advocated for the need to improve access to sexual and reproductive health information and services for these workers prior to departure and on arrival to work in Australia, and for better workplace supports, particularly to address their sexual health, reproductive rights, sexual violence and coercive control.

Focus on people with disability and young people

Calls to prioritise access to sexuality and relationships supports to ensure equality and rights for people with disability, both in Australia and as part of Australia's development work in the Asia-Pacific region.

Youth-focused initiatives have promoted sexuality and sexual health education, supported national research to improve access to sexual health services and information on healthy relationships and contributed to a national policy statement on pornography which also addresses youth wellbeing and digital literacy.

Building relationships for advocacy

The Hon Sally Sitou MP, Federal Member for Reid, visited the Newington clinic and offices for a tour and an overview of the services we provide. She was very interested in our services and was particularly keen to learn more about the barriers women and young people face in accessing sexual and reproductive health services and accurate, relatable information in our local area and also in the broader community.

CEO Sue Shilbury attended the Commission on Population and Development at the United Nations in New York, which this year had the theme 'Ensuring healthy lives and promoting well-being for all at all ages'. Sue engaged with our government representatives from the Department of Foreign Affairs and Trade as well as our international counterparts from the International Planned Parenthood Federation and the Asia Pacific Alliance for Sexual & Reproductive Health and Rights. The Commission featured reports on positive initiatives, identified areas where progress is lagging behind global targets, and there was also a significant presence of conservative, anti-rights narrative from some countries and organisations attending.

Sally Sitou visits Newington clinic

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Australian Parliamentary Group on Population and Development (APGPD) Highlights

With support from the UNFPA, Family Planning Australia continued as secretariat of the Australian Parliamentary Group on Population and Development (APGPD), a cross-party group committed to advancing sexual and reproductive health and rights, gender equality, and sustainable development in Australia and the region.

We launched UNFPA's 2024 State of the World Population (SoWP) Report in Canberra, bringing together Members of Parliament, the Department of Foreign Affairs and Trade, the UNFPA Asia-Pacific Regional Office, and the International Sexual and Reproductive Health and Rights Consortium. The Consortium also met with UNFPA to discuss regional priorities.

The APGPD hosted the Australian Council for International Development (ACFID) and Many Coloured Sky for the parliamentary launch of We Are the Rainbow, a toolkit supporting the rights and wellbeing of LGBTQI+ youth. Following the event, a letter was submitted to the Minister for Foreign Affairs requesting increased funding to better support inclusion in the region.

The final briefing of the year, held with MSI Reproductive Choices, focused on protecting reproductive rights and access to choice in Australia and abroad.

International engagement continued through collaboration with global partners. A bilateral meeting with the New Zealand Parliamentarians' Group on Population and Development strengthened regional advocacy. The Secretariat participated in the Asian Forum of Parliamentarians on Population and Development conference in Bali. Engagement also continued with the European Parliamentary Forum and the United Kingdom All-Party Parliamentary Group.

In early 2025, activities paused due to the federal election and caretaker conventions. During this time, the secretariat conducted outreach to over 450 election candidates, resulting in strong engagement and the recruitment of new members, including Dr Carina Garland as incoming APGPD Co-Chair.

Many Coloured Sky launch

APGPD launch

APGPD SoWP launch

APGPD SoWP launch

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 Youth
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

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Financial Information

Family Planning NSW trading as Family Planning Australia

ABN 75000 026 335

Annual Report – 30 June 2025

Directors' report

30 June 2025

The Directors present their report, together with the financial statements, on the company for the year ended 30 June 2025.

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
- Gary Trenaman
- Melissa Williams
- Neil Jackson
- Stephanie Cross
- Samantha Campbell
- Suzanne Stanton
- Dr Imogen Thomson
- Christine Kane
- Nicki Potts (appointed November 2024)

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.

Our 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 and other partners 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.

Key performance measures

Benchmark	2025 Actual	2025 Benchmark	2024 Actual	2024 Benchmark
Client Visits	26,718	27,800	27,481	31,441
Operational and Financial				
PROPORTION OF FUNDING FROM:				
Grants:				
Government grants	67%	66%	71%	68%
Other grants	13%	12%	9%	10%
Self-generated income:				
Donations	1%	0%	0%	0%
Investments	3%	2%	3%	1%
Other	16%	20%	17%	21%

Review of operations

The deficit for the company after providing for income tax amounted to $414,576 (30 June 2024: $582).

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

- Chair
- Chair Performance and Remuneration 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

- Member Finance, Risk and Audit Committee
- Member Planning and Development Working Group

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

- Chair Finance, Risk and Audit 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

- Member Finance, Risk & Audit Committee

Stephanie Cross

Qualifications

B SocSc (Applied), MBA, GAICD

Experience

- Non-executive director Family Planning Australia since November 2019
- Extensive senior experience in NSW public sector including former Deputy Director General and former Executive Director in various departments and agencies

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
- Previous Partner Gadens Lawyers
- Previous NFP directorships

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

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

Nicki Potts

Qualifications

B Com (Finance, Information Systems)

Experience

- Committee member Family Planning Australia since April 2024
- Non-executive director since November 2024
- Over 20 years of experience in the financial services and technology industries spanning research and development, operations, and product management.
- Non-executive Director Heart On My Sleeve since Dec 2023

Special Responsibilities

- Member Finance, Risk and Audit Committee

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.

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 2025, and the number of meetings attended by each director were:

Board Meetings

	Attended	Held
Bernadette Or (Chair)	6	7
Carla Cranny	7	7
Gary Trenaman	5	7
Melissa Williams	5	7
Neil Jackson	7	7
Stephanie Cross	5	7
Samantha Campbell	6	7
Suzanne Stanton	5	7
Christine Kane	7	7
Dr Imogen Thomson	7	7
Nicki Potts	3	4

Finance, Risk and Audit Committee

	Attended	Held
Gary Trenaman (Chair)	4	5
Stephanie Cross	5	5
Neil Jackson	3	5
Carla Cranny	5	5
Nicki Potts	5	5

Performance and Remuneration Committee

	Attended	Held
Bernadette Or (Chair)	1	1
Stephanie Cross	1	1
Suzanne Stanton	1	1

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.

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

Chair

31 October 2025

Gary Trenaman

Director

Tel: +61 2 9251 4100
Fax: +61 2 9240 9821
www.bdo.com.au

Parkline Place
Level 25, 252 Pitt Street
Sydney NSW 2000
Australia

DECLARATION OF INDEPENDENCE BY LEAH RUSSELL TO THE DIRECTORS OF FAMILY PLANNING NSW (Trading as FAMILY PLANNING AUSTRALIA)

I declare that, to the best of my knowledge and belief, there have been no contraventions of any applicable code of professional conduct in relation to the audit of Family Planning NSW for the year ended 30 June 2025.

Leah Russell
Director

BDO Audit Pty Ltd

Sydney
31 October 2025

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 31 October 2025. 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 2025

	Note	2025 $	2024 $
Domestic Revenue			
Grants - Government grants		12,784,934	12,611,096
Other grants		358,391	257,664
		13,143,325	12,868,760
Sales Revenue			
Sales revenue - Contraceptive income		27,199	44,986
Sales revenue - Course fees		525,501	342,587
Sales revenue - Bookshop sales		50,918	60,477
		603,618	448,050
Medicare revenue		1,117,681	812,905
Private billing revenue		1,234,849	1,099,243
Investment revenue		421,416	429,857
Gain on sale of plant and equipment		6,000	-
Other revenue	3	210,717	178,783
		2,990,663	2,520,788
Total domestic revenue		16,737,606	15,837,598
International revenue			
Grants - Department of Foreign Affairs and Trade		515,413	594,757
Grants - Other Australian		883,690	71,846
Grants - Other overseas		1,326,756	1,659,461
Donations and gifts - Monetary		49,520	81,111
Donations and gifts - Non-monetary		55,656	30,238
Investment revenue		80,300	51,173
Other revenue		210,062	222,023
Total international revenue		3,121,397	2,710,609
Total revenue		19,859,003	18,548,207
Expenses			
Audit / professional services		(67,956)	(57,000)
Branding and marketing		(54,411)	(60,122)
Computer services and software		(605,238)	(749,145)
Conferences and seminars		(101,131)	(151,269)
Consultancy		(1,001,124)	(667,121)
Depreciation and amortisation	4	(466,698)	(446,556)
Consumables / client expenses		(95,668)	(71,895)
Cost of Goods Sold		(32,223)	(57,150)
Employee benefit expenses	4	(12,712,857)	(11,601,489)
File scanning		(16,097)	(9,849)
Insurance		(212,081)	(212,842)
Lease / rent		(10,346)	(10,939)
Materials and equipment		(37,579)	(61,588)
Medical consumables		(263,181)	(202,585)
Printing / postage / stationery / advertising / photocopying		(113,399)	(92,994)
Repairs and maintenance / cleaning		(372,618)	(358,445)
Staff recruitment		(86,686)	(90,280)
Stock write-off		(48,325)	(7,652)

Family Planning Australia
Statement of profit or loss and other comprehensive income
For the year ended 30 June 2025

	Note	2025 $	2024 $
Strata levies		(43,727)	(50,746)
Teaching resources		(62,992)	(47,171)
Telephone / internet		(51,244)	(99,009)
Travel		(259,223)	(271,543)
Utilities		(102,353)	(120,593)
Website development		(44,929)	(4,626)
Other expenses		(385,782)	(334,407)
Total domestic program expenses		(17,247,868)	(15,837,016)
International aid and development programs			
International programs - Funds to international programs		(2,403,763)	(1,887,629)
International programs - Program support costs		(501,429)	(481,398)
Fundraising costs - Public		(45)	(249)
Accountability and administration		(160,504)	(311,095)
Non-Monetary expenditure		(55,656)	(30,238)
Total international aid and development program expenses		(3,121,397)	(2,710,609)
Total expenses		(20,369,265)	(18,547,625)
(Deficit)/Surplus before income tax and unrealised investment income		(510,262)	582
Income tax expense		-	-
Unrealised gain on fair value movement from investment		91,913	-
(Deficit)/Surplus after income tax and unrealised investment income for the year attributable to the members of Family Planning Australia		(418,349)	582
Other comprehensive income			
Items that may be reclassified subsequently to profit or loss			
Net gain on asset revaluation reserve		-	1,004,916
Net gain on investment revaluation reserve		3,773	28,975
Other comprehensive income for the year, net of tax		3,773	1,033,891
Total comprehensive income for the year attributable to the members of Family Planning Australia		(414,576)	1,034,473

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

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Family Planning Australia
Statement of financial position
As at 30 June 2025

	Note	2025 $	2024 $
Assets			
Current assets			
Cash and cash equivalents	5	2,928,491	6,674,600
Trade and other receivables	6	594,579	502,577
Inventories	7	21,238	56,664
Other assets	8	240,542	150,843
Total current assets		3,784,850	7,384,684
Non-current assets			
Financial assets at fair value	9	5,899,913	1,751,978
Property, plant and equipment	10	24,709,910	24,803,167
Right-of-use assets	11	169,988	30,640
Intangibles	12	-	3,218
Total non-current assets		30,779,811	26,589,003
Total assets		34,564,661	33,973,687
Liabilities			
Current liabilities			
Trade and other payables	13	1,131,075	1,774,387
PAYG withholding tax		123,318	121,603
Lease liabilities	14	65,226	32,971
Employee benefits	15	1,622,002	1,463,914
Grants received in advance	16	2,423,866	1,070,899
Total current liabilities		5,365,487	4,463,774
Non-current liabilities			
Lease liabilities	14	107,928	-
Employee benefits	15	57,563	61,654
Total non-current liabilities		165,491	61,654
Total liabilities		5,530,978	4,525,428
Net assets		29,033,683	29,448,259
Equity			
Reserves	17	4,485,882	4,482,109
Retained surplus		24,547,801	24,966,150
Total equity		29,033,683	29,448,259

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

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Family Planning Australia
Statement of changes in equity
For the year ended 30 June 2025

	Asset Revaluation Reserve $	Investment Revaluation Reserve $	Retained Surplus $	Total equity $
Balance at 1 July 2023	3,439,815	8,403	24,965,568	28,413,786
Surplus after income tax (expense) for the year	-	-	582	582
Other comprehensive income for the year, net of tax	1,004,916	28,975	-	1,033,891
Total comprehensive income for the year	1,004,916	28,975	582	1,034,473
Balance at 30 June 2024	4,444,731	37,378	24,966,150	29,448,259

	Asset Revaluation Reserve $	Investment Revaluation Reserve $	Retained Surplus $	Total equity $
Balance at 1 July 2024	4,444,731	37,378	24,966,150	29,448,259
Surplus after income tax (expense) for the year	-	-	(418,349)	(418,349)
Other comprehensive income for the year, net of tax	-	3,773	-	3,773
Total comprehensive income for the year	-	3,773	(418,349)	(414,576)
Balance at 30 June 2025	4,444,731	41,151	24,547,801	29,033,683

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

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Family Planning Australia
Statement of cash flows
For the year ended 30 June 2025

	Note	2025 $	2024 $
Cash flows from operating activities			
Receipts from customers (inclusive of GST)		3,600,533	2,955,729
Payments to suppliers (inclusive of GST)		(22,420,607)	(19,651,549)
Grants received		18,944,366	16,082,161
Donations received		49,520	81,111
Interest and dividends received		316,675	421,866
Net cash used in operating activities		490,487	(110,682)
Cash flows from investing activities			
Payments for property, plant and equipment	9	(305,590)	(101,567)
Payments for investments		(3,867,208)	-
Net cash used in investing activities		(4,172,798)	(101,567)
Cash flows from financing activities			
Repayment of lease liabilities		(63,798)	(65,675)
Net cash used in financing activities		(63,798)	(65,675)
Net decrease in cash and cash equivalents		(3,746,109)	(277,924)
Cash and cash equivalents at the beginning of the financial year		6,674,600	6,952,524
Cash and cash equivalents at the end of the financial year	4	2,928,491	6,674,600

Family Planning Australia
Notes to the financial statements
30 June 2025

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.

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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.

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

Note 1. Material accounting policy information (continued)

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.

Trade and other payables
The amounts are unsecured and are usually paid within 30 days of recognition.

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.

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 2025

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

	2025 $	2024 $
NSW Ministry of Health - NGO Funding:		
Family Planning Grant	10,150,000	9,783,100
Fairfield Multicultural Women's Health	754,600	727,300
Population Program Grant	383,700	369,900
NBMLHD General Grant	665,100	641,100
	11,953,400	11,521,400
Non Government Grants		
UNFPA Pacific	1,176,410	1,232,411
UNFPA PNG	49,932	322,056
UNFPA - New York	100,414	90,148
IPPF	-	14,844
Minderoo Foundation	45,405	-
Women's Plan Foundation	25,000	53,436
EPPIC	813,285	18,410
	2,210,446	1,731,305
DFAT		
ANCP	515,413	594,759
Commonwealth Government Grants		
NDIA Grant - Community Inclusion Capacity Development	183,428	250,136
Research Grants		
Total research grants	358,391	257,664

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	2025 $	2024 $
Other Grant:		
Hunter Health Promotion (HNELHD)	60,800	60,600
Cancer Institute NSW - Cervical Screening Training	-	120,023
NSW Health - Pregnancy Choices Hotline	79,988	104,863
Ministry of Health - SEARCH	469,297	275,263
SWSLHD - FF Postnatal Project	-	4,799
NSW Department of Customer Service	-	20,000
Walgatte AMS	38,021	231,009
Community Building Grant	-	23,002
	648,106	839,559
Total grants received	15,869,184	15,194,823

As international grants do not fully cover corporate overheads, Family Planning Australia allocates internal revenue to support the sustainability of international program activities.

Note 4. Other expenses

	2025 $	2024 $
Depreciation and amortisation		
Depreciation- property, plant and equipment	398,847	379,700
Amortisation- ROU assets	64,633	61,296
Amortisation- intangibles	3,218	5,560
	466,698	446,556
Employee benefits-superannuation	1,428,410	1,275,710

Note 5. Cash and cash equivalents

	2025 $	2024 $
Cash on hand	1,397	1,110
Cash at bank - Domestic programs	2,671,863	6,656,445
Cash at bank - International programs	255,231	17,045
	2,928,491	6,674,600

Note 6. Trade and other receivables

	2025 $	2024 $
Trade receivables - other	498,461	389,013
GST receivable	96,118	113,564
	594,579	502,577

Family Planning Australia
Notes to the financial statements
30 June 2025

Note 7. Inventories

	2025 $	2024 $
Stock at cost	21,238	56,664

Note 8. Other assets

	2025 $	2024 $
Dividend income	51,581	41,771
Prepayments	188,961	109,072
	240,542	150,843

Note 9. Financial assets at fair value through other comprehensive income

	2025 $	2024 $
Financial Assets at Fair Value through other comprehensive income	1,755,750	1,751,978
Financial Assets at Fair Value through profit or loss	4,144,163	-
	5,899,913	1,751,978

Note 10. Property, plant and equipment

	2025 $	2024 $
Land and buildings - at independent valuation	22,980,150	22,850,000
Less: Accumulated depreciation	(245,814)	-
	22,734,336	22,850,000
Leasehold property - at independent valuation	1,400,000	1,400,000
Less: Accumulated depreciation	(28,000)	-
	1,372,000	1,400,000
Plant and equipment - at cost	1,556,285	1,432,043
Less: Accumulated depreciation	(1,027,019)	(927,080)
	529,266	504,963
Motor vehicles - at cost	125,796	98,048
Less: Accumulated depreciation	(66,703)	(71,615)
	59,093	26,433
Office equipment - at cost	233,282	232,357
Less: Accumulated depreciation	(218,067)	(210,586)
	15,215	21,771
	24,709,910	24,803,167

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Note 10. Property, plant and equipment (continued)

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 2025 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 not been a material movement in fair value as at 30 June 2025. Thus, fair value gain is recognised through statement of profit and loss and other comprehensive income as at 30 June 2025. 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 2024	22,850,000	1,400,000	504,963	26,433	21,771	24,803,167
Additions	130,150	-	124,243	50,272	925	305,590
Revaluation increments/(decrements)	-	-	-	-	-	-
Depreciation expense	(245,814)	(28,000)	(100,154)	(17,613)	(7,266)	(398,847)
Balance at 30 June 2025	22,734,336	1,372,000	529,052	59,092	15,430	24,709,910

Note 11. Non-current assets - right-of-use assets

	2025 $	2024 $
Land and buildings - right-of-use	203,984	183,880
Less: Accumulated depreciation	(33,996)	(153,240)
	169,988	30,640

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

	2025 $	Total $
Balance at 1 July 2024	30,640	30,640
Addition	203,981	203,981
Depreciation expense	(64,633)	(64,633)
Balance at 30 June 2025	169,988	169,988

Note 12. Non-current assets - intangibles

	2025 $	2024 $
Website - at cost	27,800	27,800
Less: Accumulated amortisation	(27,800)	(24,582)
	-	3,218

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

	2025 $	Total $
Balance at 1 July 2024	8,778	8,778
Amortisation expense	(8,778)	(8,778)
Balance at 30 June 2025	-	-

Note 13. Trade and other payables

	2025 $	2024 $
Trade payables	55,666	225,872
Income received in advance	255,231	262,521
GST payable	339,830	353,109
Other payables	480,348	932,885
	1,131,075	1,774,387

Note 14. Lease liabilities

	2025 $	2024 $
Lease liability – premises- current	65,226	32,971
Lease liability – premises- non-current	107,928	-
	173,154	32,971

Future lease payments
Future lease payments are due as follows:

Within one year	71,429	33,243
One to five years	111,422	-
	182,851	33,243

Note 15. Employee benefits

	2025 $	2024 $
Current		
Annual leave	961,986	813,236
Long service leave	660,016	650,678
	1,622,002	1,463,914
Non-current		
Long service leave	57,563	61,654

Note 16. Grants received in advance

	2025 $	2024 $
Other grants	1,943,134	274,912
Government grant	480,732	795,987
	2,423,866	1,070,899

Note 17. Equity – reserves

	2025 $	2024 $
Asset revaluation reserve	4,444,731	4,444,731
Investment revaluation reserve	41,151	37,378
Retained profits at the end of the financial year	4,485,882	4,482,109

Family Planning Australia
Notes to the financial statements
30 June 2025

Note 17. 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 18 – Going concern

The financial report has been prepared on a going concern basis. As at the reporting date, the company had net current liabilities of $1,580,637 and recorded a deficit of $510,262. However, it generated positive operating cash flow of $490,488 during the period.

Although the investments in managed funds and portfolios disclosed in Note 9, totalling $5,899,913, are classified as non-current assets, they are accessible and could be realised if necessary to meet current obligations.

Note 19. 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:

	2025 $	2024 $
Aggregate compensation	1,608,945	1,411,824

Note 20. Remuneration of auditors

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

	2025 $	2024 $
Audit services		
Audit of the financial statements	69,500	57,000
Other services		
Review system change over	-	5,000
	69,500	62,000

Note 21. Contingent liabilities

The company had no contingent liabilities as at 30 June 2025 (2024: Nil).

Note 22. 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:

	2025 $	2024 $
Related Party Transactions		
Sydney Reproductive Health Services Limited	469	235
Family Planning Australia Limited*	282	442

*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 23. 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 24. 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 2025 the number of members of the company is 27 (2024: 19).

Note 25. Events after the reporting period

No matter or circumstance has arisen since 30 June 2025 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 26. Financial Summary

The deficit of the company for the current year is $510,262. The company's income and expenditure for the year ended 30 June 2025 is summarised below.

Family Planning Australia
Notes to the financial statements
30 June 2025

Note 26. Financial Summary (continued)

Family Planning Australia reported a deficit of $418,349 for the financial year ending 30 June 2025. This result was anticipated, reflecting the Organisation's planned use of reserves to fund strategic transformation projects, including a major cyber security uplift and the development of our new strategic plan. These investments strengthen long-term resilience and position the Organisation for future growth.

Total revenue for the year 2024-25 was $19.9m, an increase of $1.3m compared with 2023-24. Growth was supported by additional government and international grants, higher Medicare income and increased private billing.

Over the year, Family Planning Australia delivered strong outcomes across NSW And the Pacific. Our clinics provided 26,798 occasions of clinical service to 12,450 clients, with 46% under 30 years of age and 10% identifying as Aboriginal and Torres Strait Islander people. More than 3,700 procedures were performed across our Day Surgery Unit and clinics, while our Talkline and Pregnancy Choices Helpline supported over 11,600 contacts. In health promotion, more than 1.09million resources were distributed, and 196,368 participants engaged in education sessions. We also strengthened sector capacity by training 888 clinicians and 565 participants through clinical, school and community education programs.

At 30 June 2025, Family Planning Australia's net assets stood at $29.0m, reflecting a stable and sustainable balance sheet that provides both operational security and capacity for continued investment.

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 $3.1m in 2024-25, which is an increase of $0.4m from 2023-24.

In 2024-25 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 2024-25, 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.

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Family Planning Australia
Notes to the financial statements
30 June 2025

Note 26. Financial Summary (continued)

	2025
	$
Income	
NSW ministerially approved grants	12,014,200
Other periodic government grants	770,734
International program grant	515,413
Research grants	358,391
Other grants	2,210,446
Self-generated income	3,989,819
	19,859,003
Expenditure	
Staffing	(14,737,201)
Projects	(4,620,572)
Site	(1,011,492)
	(20,369,265)
Deficit during the year	(510,262)
Unrealised gain on fair value movement from investment	91,913
Deficit after income tax and unrealised investment income	(418,349)

Family Planning Australia
Directors' declaration
30 June 2025

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 2025 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
Chair

31 October 2025

Gary Trenaman
Director

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INDEPENDENT **AUDITOR'S REPORT**

To the members of Family Planning NSW (Trading as Family Planning Australia)

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of

Family Planning NSW trading as Family Planning Australia (the registered entity) , which comprises the statement of financial position as at 30 June 2025, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial report, including material accounting policy information, and the responsible entities' declaration.

In our opinion the accompanying financial report of , is in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

(i) Giving a true and fair view of the registered entity's financial position as at 30 June 2025 and of its financial performance for the year then ended; and

(ii) Complying with Australian Accounting Standards - Simplified Disclosures and Division 60 of the *Australian Charities and Not-for-profits Commission Regulations 2022*.

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 registered entity 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.

Other information

The responsible entities of the registered entity are responsible for the other information. The other information obtained at the date of this auditor's report is information included in Family Planning NSW Directors' report, but does not include the financial report and our auditor's report thereon.

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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 on the other information obtained prior to the date of this auditor's report, 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.

Other matter

The financial report of Family Planning NSW, for the year ended 30 June 2024 was audited by another auditor who expressed an unmodified opinion on that report on 28 October 2024.

Responsibilities of responsible entities for the Financial Report

The responsible entities of the registered entity are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards - Simplified Disclosures and the ACNC Act, and for such internal control as the responsible entities determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, responsible entities are responsible for assessing the registered entity'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 responsible entities either intends to liquidate the registered entity or to cease operations, or has no realistic alternative but to do so.

The responsible entities of the registered entity are responsible for overseeing the registered entity'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 the 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 (http://www.auasb.gov.au/Home.aspx) at:

http://www.auasb.gov.au/auditors_responsibilities/ar4.pdf
This description forms part of our auditor's report.

BDO Audit Pty Ltd

BDO
L Russell

Leah Russell
Director

Sydney, 5 November 2025

2024–25
ANNUAL REPORT

family planning australia
Reproductive & Sexual Health