

Looking back,
our year in review:



Chief Executive and President's Report

Pipiri June 2022

Haratua May 2022

Paenga-whāwhā April 2022

Poutū-te-rangi March 2022

Hui-tanguru February 2022

Kohitātea January 2022

Hakihea December 2021

Whiringa-ā-rangi November 2021

Whiringa-ā-nuku October 2021

Mahuru September 2021

Here-turi-kōkā August 2021

Hōngongoi July 2021

Ko mātou **Our People**

Family Planning Annual Report Pūrongo ā Tau

1 July 2021 – 30 June 2022

Family Planning Annual Report

Pūrongo ā Tau

1 Hōngongoi July 2021 – 30 Pipiri June 2022



Jackie Edmond
Chief Executive
Mana Whakahaere

Chief Executive and President's Report

Te Pūrongo a te Mana Whakahaere
rāua ko te Pou Whakarae

Health care systems and health care provision have been challenged in the last year or so – arguably as never before.

The health response to COVID has been delivered in large part, through primary care adapting and moving to new and innovative ways of working. And, new ways of working are at the core of the new system level change to our health system from 1 July 2022.



Dr Jackie Percy
President
Te Pou Whakarae

When she spoke to our National Staff Hui this year, Associate Health Minister Hon Ayesha Verrall talked about her aspirations for the new health system. She noted that support for primary care will be essential to reducing health

inequities. “A key part of the new health system is prevention, removing barriers to healthcare so that people can get the help they need early. In terms of sexual and reproductive health, I have no doubt that Family Planning will continue to be at the forefront.”

You will read much in this Annual Report about how our service has adapted and responded to the challenges of COVID. This response includes retaining some of our COVID adaptations and innovations which have improved access and removed barriers to our services. You'll read too of new innovations. Some, such as DECIDE, the national abortion telehealth service, will change the provision of sexual and reproductive health care in Aotearoa New Zealand for ever.

Health Sector Reform

Family Planning supports health system reform, including the establishment of Te Whatu Ora|Health New Zealand, Te Aka Whai Ora| the Māori Health Authority, and formalising the role and purpose of iwi-Māori partnership boards. We have been an active participant in the reform process, working with sector colleagues such as Whānau Āwhina Plunket and the College of Midwives, submitting to the Pae Ora Select Committee and meeting with Cabinet Ministers in relevant portfolios.

In our submission to the Pae Ora Bill we made a number of recommendations including:

- strengthening the purpose statement including realising the right to health as a purpose of the Bill
- explicitly prioritising primary health care and prevention in the health system principles
- including a women's health strategy as a statutory requirement

When we spoke to the Select Committee reviewing the legislation, we were at pains to note that the health sector as a whole must work differently to address the significant disparities that exist in health care – especially for Māori and Pasifika. We noted too that reducing disparities is not the same as achieving equity.

We also expressed strong support for the statutory requirement for a women's health strategy. Women's health issues and needs have been marginalized for many, many years. Contraception, endometriosis, cervical cancer, and maternity care are examples of health issues for women and girls which have not been addressed. This legislation is an opportunity to have a more gender equitable health system.

We believe a women's health strategy has the potential to address the historic marginalisation of women's health issues in the health system, and the range of factors impacting women's health and wellbeing including sexual violence, intimate partner violence, gender inequity. Wāhine Māori, Pacific women and girls, and women and girls with a disability are disproportionately impacted and should be a priority.

We are one of the biggest providers of services for women in the country. We look forward to contributing to the development of a women's health strategy to improve equitable outcomes for women and girls.

While the extent of reform has yet to be realised, we remain committed to the notion that the health system must be reoriented to prioritise equitable access to essential primary care providers like Family Planning to promote good health and wellbeing for all New Zealanders.

DECIDE – National Abortion Telehealth Service

The promise of abortion law reform moved closer to being realised with the contract to deliver the national abortion telehealth service being awarded to Family Planning in partnership with Magma Healthcare in early December 2021.

Just four months later, **Phase One** of the service launched on time on 26 April 2022.

[DECIDE.org.nz](https://decide.org.nz) website, 0800 DECIDE and the web chat function provide an information and enquiry portal to abortion services in New Zealand during Family Planning's hours of operation. After hours service users can access information via the website and web bot.

Phase Two of the development launched on 1 July 2022. Clients of primary health care early medical abortion providers can access decision, pre and post virtual counselling via the DECIDE service, if required. We have sub-contracted counselling provision to EAP Services who are experienced in providing abortion counselling through their services for Hauora a Toi Bay of Plenty.

Clients may also select to speak to the nurses via video, through the option of a video call back.

Phase Three is due to launch on 1 November, with Magma Healthcare providing the telemedicine EMA service nationally for DECIDE clients who are suitable for, and choose, at home EMA.

We are excited at the potential of this service to expand access to services and information nationally. This is an exciting time for us organisationally as it's the first time Family Planning and Magma have jointly provided a service with shared protocols. We hope, too, the counselling and after care supports will make EMA provision more achievable for primary care practitioners across the country.

Investing in equality essential

“Universal access to sexual and reproductive health services using a rights-based approach is a critical enabler for achieving gender equality. Access to the full range of safe, effective, affordable and acceptable methods of contraception and safe and legal access to abortion are essential if we are to make progress towards the Sustainable Development Goals.”

New Zealand’s statement to the 2022 United Nations General Assembly: Commission on Population and Development, above, highlighted that investing in gender equality and women’s empowerment is essential.

The statement noted that Aotearoa New Zealand is committed to empowering women to lead independent and self-determining lives, including the ability to decide freely whether and when to have children. Providing equitable access to quality methods of contraception, decriminalising abortion, and comprehensive sexuality education are part of the Government’s commitment to women. As a country, we have work to do to achieve these things – as an organisation, we are committed to playing our part in expanding access to all these services and information.

COVID

No review of the past few years would be complete without reflecting on the impact of COVID19. This has been the most challenging time to run a health service that we can recall. Balancing client need and staff safety, ensuring that Ministry of Health guidelines were embedded into every aspect of our work, vaccine mandates, essential worker exemptions – all these things have been a challenge for staff to navigate and managers to oversee.

All National Office and support functions are now well set up to work from home and can continue to provide support functions for the organisation remotely. COVID has been a challenge for our health promotion team who are most usually out and about in communities. Their work has been significantly curtailed and the impact continues as schools and community organisations continue to restrict the number of people allowed on site. Our health promoters have pivoted to online delivery with an increasing number of courses offered remotely. This has been a positive outcome from the pandemic and one which is now very much business as usual.

As you would expect, it is the clinics where the impact of COVID has been most deeply felt. As a designated essential organisation, the professional manner in which our clinical staff have responded to the COVID challenges has been fundamental to being able to provide services across the pandemic. Particular mention should be made of Dr Beth Messenger and Rose Stewart for the clinical leadership they have shown throughout the pandemic. Clinic managers too have put in a phenomenal effort to ensure services continued to be delivered, regardless of Traffic Light or Alert Levels.

Jackie Edmond, Chief Executive Mana Whakahaere

Dr Jacky Percy, President Te Pou Whakarae

Looking back, our year in review.

Roe V Wade

On 24 June, the United States Supreme Court handed down a decision that overturned a ruling that had guaranteed a constitutional right to abortion for almost half a century. While, the decision caused global concern and outrage, the impact in America was almost immediate with clinics in many states ceasing to operate almost as soon as the decision was released.

The Court's overturning of the landmark ruling is likely to lead to **abortion bans in roughly half the states**. Pregnant women considering abortions already had been dealing with a near-complete ban in Oklahoma and a prohibition after roughly six weeks in Texas. Clinics in at least eight other states – Alabama, Arizona, Arkansas, Kentucky, Missouri, South Dakota, Wisconsin and West Virginia – stopped performing abortions after the Court decision.

We issued a **statement condemning the decision** and describing it as a “sad day” for millions of American women. We also issued a **joint statement with the Association of Salaried Medical Specialists (ASMS)** saying if one thing can be learned from the overturning of Roe v Wade it is that access to safe abortion and contraceptive care must be embedded as a core service within a national health system.

The decision prompted a frenzy of activity and an outpouring of support for our colleagues in America and for Family Planning domestically.

Whangārei

Our Whangārei Clinic moved to a new location in June, opening in a small arcade in James Street which is home to a number of other health providers. Whangārei is one of 29 clinics Family Planning has across New Zealand. Clinic services are offered in other community settings and through some secondary schools.



Our Whangārei team
(from left – Bronwyn Olson, nurse; Alivia Carrington-Hall, medical receptionist; nurses Holly Robinson and Shjara Darkin.

Funding for period products

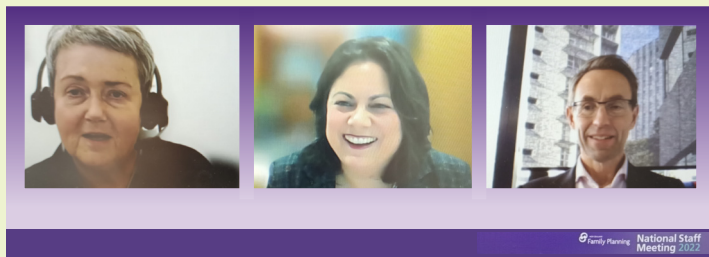
We made a successful application to a Public Trust Estate for bequest funding to continue offering free period products in seven of our highest need clinics - Whangarei, Manukau, Papakura, Tauranga, Gisborne, Whanganui and Porirua. This is the third year we have been able to offer these products to our clients at these clinics.

NZNO Collective Agreement

The Family Planning and NZNO Collective Agreement was settled. The term of the new agreement is from September 2021 until August 2023. The agreement means we are able to offer the new pay rates to staff who are members of the NZNO and covered by the Agreement.

National Staff Meeting

The first ever Family Planning National Staff Meeting was held entirely online on June 16 and 17. After a number of attempts to meet in person, each thwarted by a change in COVID alert levels, we made the call to hold the meeting online.



The meeting was opened by Associate Health Minister Hon Dr Ayesha Verrall and closed by former Director General of Health Dr Ashley Bloomfield. Our meeting had a focus on equity with practitioners, academics and researchers presenting.

Clinic survey

The pivot to online continued with our 2022 Client Experience Survey which was run entirely online for just over two weeks in June. The survey utilised our Indici patient management system to collect response from some 1058 responses.

We sent 5840 SMS messages with the survey link during the survey period. We received 1,058 responses to the 2022 Survey, giving a completion rate of 18.1%.

- Some 44 per cent of respondents to the survey were under the age of 24.
- Some 18.5 per cent of responses were from clients who identify as Māori.

Some 91.63% of respondents reported that it was easy to make an appointment with just 8.37% reporting that it was difficult. This question allowed for client comments and these responses highlighted that clients were concerned about delays with phone calls being answered and appointments being rescheduled. That said there were a significant number of comments which acknowledged the impacts of COVID/seasonal illness and that our service is under funded and staff are stretched.

On a five point Likert scale, our average rating was 4.2. Some 81% of respondents were either satisfied or very satisfied with the service they received from us.

Dr Katharine Bowden

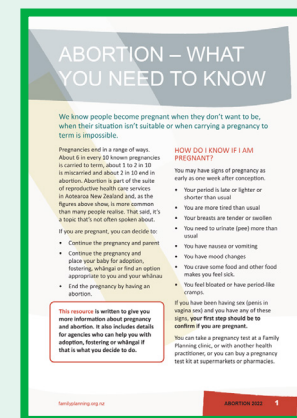
Also in June, we were saddened to learn of the death of another of our early pioneers. Dr Katharine Bowden was the third ever Family Planning doctor and the first doctor at our Whangarei Clinic. She passed away at the age of 93. Dr Bowden's medical career, including her time at Family Planning, is recorded on [Auckland University's Early Medical Women of New Zealand website](#).

Dr Bowden's family kindly agreed to have donations to Family Planning in lieu of flowers. We are grateful for their generosity at a difficult time for the family.

Abortion - What you need to know

Our Abortion - What you need to know publication was updated to align its content with DECIDE, the National Abortion Telehealth Service and the March 2020 changes to New Zealand's abortion legislation.

This is a free resource and can be [downloaded in PDF format](#) from the Resources section of the Family Planning website.



Women's Health Strategy

A women's health strategy is one of four targeted strategies required under the health system reform legislation, [the Pae Ora Healthy Futures Bill](#). Family Planning joined many other organisations in calling for a women's health strategy in our submissions on the Pae Ora Bill and we are pleased to see it explicitly referenced in the legislation.

In our submission we recommended there be a statutory requirement to develop a women's health strategy alongside the other required strategies (NZ Health Strategy, Hauora Māori Health Strategy, Pacific Health Strategy and Disability Health).

“Sexual violence, intimate partner violence, gender inequity and stereotypes contribute to poorer health outcomes for women and girls. Gender inequity has also resulted in the marginalisation of women's health services in the health system resulting in inequitable access to a range of services including contraception and abortion, menstrual management and maternity care.

Wāhine Māori, Pacific women and girls, and women and girls with a disability are disproportionately impacted by gender inequity because it is compounded by racism and other forms of discrimination. A national strategy, similar to the Australian Women's Health Strategy is necessary to provide leadership, direction and accountability for improving women's health and wellbeing in Aotearoa New Zealand, particularly women and girls currently experiencing the poorest health outcomes.”

At the National Staff Meeting in June, Minister Verrall also spoke in favour of a Women's Health Strategy.

“A health system and new services must address the needs of patients and support the health sector delivering it. This is where a women's health strategy comes in. Women and those who identify as women are a diverse group with different needs, backgrounds and challenges. There are some experiences in the health system that we share. This includes difficulty accessing appropriate health services and treatments such as for menopause and for pelvic health and a disconnect between services like contraception and Abortion.

A specific strategy for women would set our direction, it would empower the voices of all women, wāhine Māori, Pasifika, Rainbow and non-binary communities and women of future generations. To meet our aspirations, a women's health strategy needs to go deeper and tackle the causes of inequities and bias against women.”

Call for residence pathways

Family Planning along with Whānau Āwhina Plunket called on Immigration Minister Kris Faafoi to reconsider fast-tracked residence pathways for overseas nurses and midwives. We noted that [neglecting to include nurses from the fast-tracked residence pathway](#), when there is a national shortage of health professionals, is short-sighted and sends a clear message that our Government doesn't appreciate the importance of our nursing workforce.

Ironically, the announcement about immigration reforms was made the same week as International Nurses Day, where [we acknowledged the work of our nurses](#) as critical to improving access to services in sexual and reproductive health, and as valuable front-line health care providers.



“Happy International Nurses Day. Every day our nurses deliver excellence in sexual and reproductive health care.”

Jackie Edmond
Chief Executive

familyplanning.org.nz

New Pride Progress Flag

We have incorporated a new pride flag design in our collateral this year. The Progress Pride Flag was developed in 2018 by non-binary American artist and designer Daniel Quasar. Based on the iconic rainbow flag from 1978, the redesign celebrates the diversity of the LGBTQI+ community and calls for a more inclusive society.

We contacted Daniel as part of our work on the new www.DECIDE.org.nz website and they graciously gave us permission to use the flag in our work. Daniel says “the arrow effect in the flag shows forward movement and illustrates that progress (towards inclusivity) still needs to be made.”



New West Auckland clinic

Our new Henderson Clinic opened on Monday 9 May, building on the services offered in West Auckland through our New Lynn Clinic.

The Henderson Clinic is a five-day-a-week clinic and is located at Level 2, 362 Great South Road.

Opening the new clinic was a significant challenge for the clinic team due to restrictions imposed by COVID.

Violent extremism gender and sexuality

The Government is taking steps to address and combat violent extremism in all its forms following the Mosque shooting in Christchurch. Extremism and violence related to gender, sexuality and sexual orientation are not uncommon. Extremist views about gender and sexuality have underpinned horrific acts of violence including those directed at LGBTQI+ individuals and communities, abortion providers, people seeking abortion and other sexual and reproductive health services, and sex workers.

Family Planning was asked by the Department of Prime Minister and Cabinet to convene a meeting of people and organisations with an interest in gender and sexuality so these issues are included in the work programme.

Over 70 organisations and individual stakeholders attended the meeting to have their say and share their experiences. We are glad to have had the opportunity to contribute to this conversation.

Gender, SRHR and sustainability

We celebrated Earth Day on 22 April with a statement acknowledging the growing recognition of the links between gender, sexual and reproductive health and rights and a sustainable future. At a fundamental level, people need control over their bodies and their lives, including their sexual and reproductive health and rights, to be able to adapt and respond to the impacts of environmental damage.

Pollution and climate change can be damaging to sexual and reproductive health and rights. For example, environmental disasters can weaken health systems and access to sexual and reproductive health services and supplies. Pollution can reduce access to clean water and healthy food – both necessary for good sexual and reproductive health – and crisis often follows a natural disaster. We know gender-based violence is worse in a crisis.

Family Planning has taken some steps toward being a more environmentally sustainable and aware organisation. Our 2021-2026 Strategic Framework includes a commitment to being sustainable, reducing waste and considering the environmental impact of our work.



New National Health Promotion Advisor

Helen Topham was appointed as our new National Health Promotion Advisor in March 2022. Helen has a Masters Degree in Public Health. She has been a senior health promoter for Regional Public Health, and held a number of roles at the Ministry of Health, the most recent was Principal Advisor and Programme Manager Primary Health Care. Before coming to Family Planning, Helen had finished a contract with the World Health Organisation working on a project in the Pacific. Helen is a member of the Senior Leadership Team.

DAA Audit

In March we received a report from DAA on the first stage of our audit which was done virtually over two and a half days in February. DAA's in-person visits to clinics and to National Office were delayed due to COVID restrictions.

DAA's report says that all mandatory criteria reviewed have been rated as marked achievement (MA).

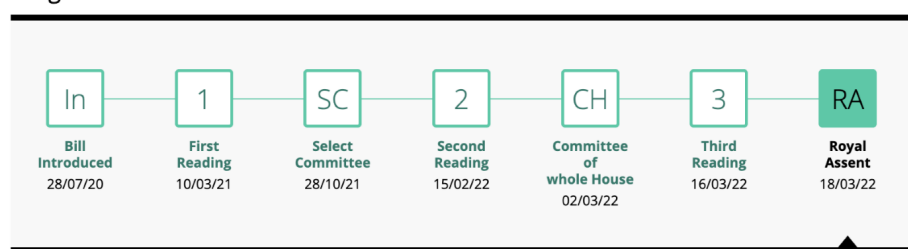
Good progress has been made in addressing recommendations, with several now closed and the rest being 'work in progress'. Several aspects were not able to be verified without visiting clinic sites. These will be reviewed during the next stage of the periodic review process.

DAA commended Family Planning on our innovative and flexible approaches to supporting clients and staff through the COVID-19 challenges.

Safe Areas Legislation passes

The passage of the **Contraception, Sterilisation and Abortion (Safe Areas) Amendment Bill** in mid-March was so low key you may have missed it. This is a significant law, which helps safeguard people’s access to abortion services by allowing abortion providers to request a 150 metre safe zone around their service. While Family Planning has experienced minimal interference from protestors to date, this law creates a tool for us to use in the event that protesting outside of our clinics becomes problematic.

Progress of the bill



Critical Worker Exemption

In early March 2022, we applied for and were granted Critical Worker Exemption by the Ministry of Health. This exemption allowed us to support our critical workers (doctors, nurses, and medical receptionists) to come to work in circumstances where they were a household contact of a positive case. COVID and the conditions imposed to manage the pandemic put significant pressure on our ability to offer clinical services. Tools like this exemption supported us to offer services throughout the pandemic.

Positive shift in abortion attitudes

The **National Council of Women of New Zealand** published the third gender attitudes survey in March 2022. One standout result of the survey was the change in attitudes toward abortion. In the 2017 survey, 66% of respondents believed a woman has a right to choose whether or not she has an abortion. In 2021, this percentage climbed to 74%, a significant shift in support for the right to have an abortion, and evidence of abortion being destigmatised.

84% of respondents believe both men and women have responsibility for contraception.

National Council of Women
Gender Equality Survey 2021

74% of respondents believe a woman has the right to choose whether or not she has an abortion - a significant shift in support for the right to have an abortion.

National Council of Women
Gender Equality Survey 2021

DECIDE – National Abortion Telehealth Service



Associate Health Minister Dr Ayesha Verrall announced the letting of the contract for the National Abortion Telehealth Service. In partnership with Magma, Family Planning won the contract to deliver this service. For Family Planning, the first key date of this project was 26 April when we delivered the website (www.DECIDE.org.nz) and 0800 number (0800 DECIDE) as Phase 1 of the project.

A week before the Minister's announcement, the [Conversion Practices Prohibition Legislation Bill](#) pass last week, with almost universal cross-Party support. Family Planning made a written submission on the Bill to the Justice Select Committee in September last year in support of the legislation.

COVID-19

In February, we successfully applied to the Ministry of Health to be included on the list of critical services to enable access to Rapid Antigen Tests (RATS) and reduce isolation periods.

During the Traffic Light Red setting, some 42 per cent of appointments were managed virtually. Some 2,913 people had an appointment this way between January 23 and February 14. A further 3,900 people had a face-to-face visit (total 6,813).

By way of comparison, virtual appointments made up just 9.4 per cent of consultations in the same period in the previous year - 6,016 people for face-to-face appointments and 622 via virtual appointments (total 6,638).

Free pregnancy tests

In February we began offering pregnancy tests, for contactless pickup, free of charge. Clients wanting a pregnancy test are advised to go to their local Family Planning clinic to pick one up and are sent an SMS message with a link to an advice page on the Family Planning website.

If a client does not have access to a Family Planning clinic, they are given the option for a lab form to be sent directly to the collection centre where they can go to do the test.

While this process was developed as part of our COVID response, we can continue to offer it as part of our work to remove barriers to service.

Senior Human Resources Appointment



In late January, Hayley Hachey returned to Family Planning as Head of People and Capability. Hayley is a member of our Senior Leadership Team. She had previously worked as our HR Manager and worked in a range of roles at a large Government agency before returning to Family Planning.

Hayley Hachey, Head of People and Capability
Pou Tangata, Āheitanga hoki

Honour for Honorary Life Member



Former MP and Family Planning life member Hon Steve Chadwick was awarded a Queen's Service Order for her contribution to the community and as a Member of Parliament in the New Year's Honours.

Hon Steve Chadwick, QSO.

Wellness Day

In an unprecedented move, we closed all our Auckland and Hamilton Clinics and Offices on Thursday 2 December for our Wellness Day. This acknowledged that staff in these locations had had a difficult and demanding year with COVID and with lockdowns, but had continued to provide services.

The commitment and professionalism of our staff is critical to delivery of our services – our Wellness Day was a chance to say thank you and to encourage them to take some time for themselves.

Annual General Meeting

We moved online for our 2021 Annual General Meeting in early December. The change allowed for a higher turnout than had been the case for some time. There were changes to our Council at the meeting with Dr Jacky Percy succeeding Andreas Prager as president at the completion of his term in office.

Madeleine Hawkesby was confirmed as deputy president and we welcome three new Council members: Dr Nina Bevin, Ian Olan and Manihera Te Hei.

Dame Catherine Tizard

Former Governor General and former Family Planning Patron Dame Catherine Tizard died in November at the age of 90. When she stood down as our Patron in 2002, she was made an honorary vice president of Family Planning. Former Prime Minister Helen Clark wrote a moving tribute to Dame Catherine, joining a chorus of others who paid their respects.



Dame Catherine Tizard,
4 April 1931 – 31 October 2021.

“Cath’s voice was always a progressive one across the spectrum of human rights and for sexual and reproductive health and rights. Many young women of my generation saw her success in public life and knew that that door could open for us too. We admired her forthrightness and directness - no one would walk away from a conversation wondering what Cath thought about the issues discussed.”

Rt Hon Helen Clark, tribute.

Mandatory vaccination

The Government announced mandatory COVID19 vaccination for health and disability workers and those working in the education system. We decided that because all our staff work in spaces where there is a clinic, or meet the requirements of working in schools, that all Family Planning staff will be required to be COVID19 vaccinated.

Changes in LIUS starts since funding

Following on from research published in the New Zealand Medical Journal in July 2021, our research team along with the University of Otago Wellington and Te Whāriki Takapou had a letter to the editor published in the New Zealand Journal of Medicine titled, How has long-acting reversible contraceptive provision at Family Planning clinics in Aotearoa New Zealand changed since PHARMAC funded intra-uterine systems for contraception?

The letter reported that there have been huge increases in LIUS use and also looked at changes by ethnicity. The letter also highlighted the need for further research into differences in contraceptive starts that cannot be explained by cost alone.

New finance system – on time and under budget

Our finance team delivered a new finance system from 1 October 2021. The project to implement NetSuite came in on time and under budget.

One of the key outcomes in our strategic framework is to ‘accelerate service development through greater efficiency and effectiveness’. To achieve this, we need to ensure our internal systems are working efficiently and are providing our managers with accurate and timely information. Implementation of a new finance system will enable us to accomplish these goals.

Eighty-five and still sexually active

Tuesday 5 October 2021 marked our 85th birthday – it was 85 years since the meeting in Wellington at which we were officially founded. We acknowledged the event by launching publicly the results of our Why Us survey. The survey, modelled on one done by the Guttmacher Institute in the United States, was essentially about why people choose Family Planning, what matters most in relation to our services and what clients value about us. We heard from more than 1200 clients

The top two reasons for visiting Family Planning among all clients were: **staff treat me respectfully** (89%); **staff know about contraception and sexual health** (84%). The third and fourth reasons were the same for young clients and all clients: **I can get the contraception I want**; and **services are confidential; no one needs to know**.

Here's a [link to the report](#) we produced from the survey.

Minister visits Gisborne Clinic

Associate Health Minister Hon Dr Ayesha Verrall visited Gisborne Clinic during October to meet with staff and talk about some of the issues they face. Minister Verrall posted on her Facebook page after her visit:

“I had the chance to visit Family Planning New Zealand in Tairāwhiti yesterday, to talk with them about their important work providing Kiwis with clinical sexual and reproductive health services. That includes things such as cervical screening, contraception, testing and treatment for sexually transmitted infections, and treatment for endometriosis. In Budget 2021 we set aside \$3.7 million for Family Planning so they can continue to invest in technology and service improvements, and provide even better access to the services their communities need.”

Kiribati project

Level 4 lockdown couldn't stop the Healthy Families Project Governance Committee meeting going ahead. Key SRHR players including the Kiribati Ministry of Health's Director of Public Health and Reproductive Health Coordinator, KFHA's Executive Director, the Ministry of Foreign Affairs and Trade (NZ), Family Planning's chief executive and international team all came together, albeit remotely for those in New Zealand.

It was great to be able to speak directly with the Kiribati Ministry of Health and discuss project successes and future activities, with the aim of continual collaboration to improve SRHR access for people in Kiribati. We all continue to look forward to when these meetings are able to happen again in person!

Te Whāriki Takapou CE steps down



Dr Alison Green.

Dr Alison Green (Ngāti Awa, Ngāti Ranginui) announced that she is stepping down from her Chief Executive role at Te Whāriki Takapou, an organisation that provides policy and advisory services to help build healthy public policy. Examples include advocating for Māori-responsive public health policy, assisting organisations to reorient services, and working with the media to inform Māori communities.

Te Whāriki Takapou's work on The Aotearoa Statement is particularly relevant as it aims to close the gap on STIs and BBV among Indigenous Peoples of Australasia to promote equitable sexual health outcomes.

Dr Green has been a staunch and committed advocate for Māori health and wellbeing during her tenure at Te Whāriki Takapou.

Vanuatu project

Our partners at Vanuatu Family Health Association (VFHA) ran a five-day clinical training in September 2021. The clinical training was facilitated by two senior VFHA nurses but was supported remotely by Family Planning New Zealand nurse Joy Pitcaithly, who helped to develop training materials and Zoom the facilitators beforehand.

The training covered a range of SRHR topics such as STIs, contraception and adolescent health care, and had external speakers including from the Vanuatu Women's Centre.

Family Violence Survey

We completed a survey of our clinicians to understand their comfort and confidence at screening our clients for family violence. The results show most feel comfortable undertaking routine enquiry for family violence in consultations, however many do not in their consults for various reasons. Around two-thirds of clients are asked if violence is an issue for them.

Comments made in the survey have provided valuable suggestions for improvement and reaffirmed our work to do more to support staff to routine enquire and feel confident around family violence disclosures. This also includes supporting staff who may have a lived experience of family violence themselves.

Submissions, submissions, submissions....

In August and September 2021, Family Planning made a number of submissions.

- **Sixth Periodic Report by the Government of New Zealand 2021 on the Convention of the Rights of the Child:** Family Planning made a submission to the Ministry of Foreign Affairs and Trade to inform the government report to the Child Rights Committee. The Committee, for the first time, asked that the New Zealand government report on sexual and reproductive health among young people as part of its review.
- **Conversion Practices Prohibition Legislation Bill:** Family Planning made a submission to the Justice Select Committee in support of a Bill that would ban conversion practices (conversion therapy). Conversion therapy is practices which seek to change a person's sexual orientation, gender identity or gender expression. The Bill became law in February 2022.
- **Inquiry into Supplementary Order Paper 59 on the Births, Deaths, Marriages and Relationships Registration Bill:** Family Planning made a submission in support of changes to our laws which would allow a person to change their sex and gender markers on birth certificates through self-identification rather than a court process.

An essential service in Level 4

The move to Level 4 in mid-August 2021 meant a pivot to the way we offered services. We closed clinics nationwide for 24 hours before reopening again and offering as many services as possible over the phone. We offered in person appointments for Depo Provera injections, implant and IUD insertions and clients were screened ahead of their appointments.

We also decided during Level 4 that we wouldn't be charging clients for their appointments at that alert level. This was partially in response to infection control measures but also reflected the reality that incomes were limited for many of our clients during lockdowns and alert level restrictions. Removing the price barrier was a practical step to make access as easy as possible and part of our ongoing work to have clients at the centre of our processes.

Contraception research published

Our 2019 Margaret Sparrow Research Grant was published in the New Zealand Medical Journal. Family Planning staff Dr Beth Messenger, Amy Beliveau, Mike Clark, with statistician Caroline Fyfe, and Dr Alison Green from Te Whāriki Takapou were the research team who completed the project and got the paper accepted for publication.

The research looked at how the provision of contraception in our clinics changed between 2009, 2014 and 2019.

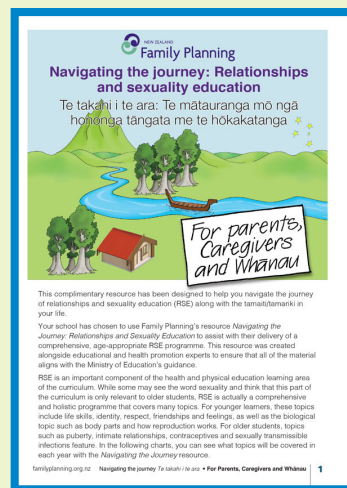
[How has contraception provision at Family Planning clinics in Aotearoa New Zealand changed between 2009, 2014 and 2019: a cross sectional analysis.](#)

New parent resource in support of NtJ

In early July we published our new [Navigating the Journey \(Ntj\) for parents.](#)

The resource draws from the suite of Ntj resources to provide parents with an overview of what their young people will be learning if their school has chosen to use the Ntj resources.

It's available on the website as a free downloadable resource and is included in the material that is sent to schools when they purchase Ntj.



Our People

Ko mātou

Staff Anniversaries

Congratulations and thank you to the staff below who have celebrated anniversaries in the year 1 July 2021 to 30 June 2022.

20 years

Jackie Edmond, Chief Executive. Started 6 August 2001.

Nelma Pearce, PTD administration, National Office. Started 18 February 2002.

10 years

Joanne MacDonnell, Nurse, Timaru. Started 23 June 2011.

Hilary Thorne, Health Promoter, Tauranga. Started 17 October 2011.

Karen Qiao, Nurse, Manukau. Started 17 October 2011.

Chantal Kyle, Locality Nurse Advisor, Wellington. Started 9 January 2012

Alice Zwart, Doctor, Porirua. Started 10 January 2012.

Robyn Olliver, Medical Receptionist, Manukau. Started 19 March 2012.

Te Kaunihera

Family Planning Council:

Te Pou Whakarae **President**

Dr Jacky Percy

Te Pou Whakarae Tuarua **Vice President**

Madeleine Hawkesby (until March 2022)

Te Kaunihera **Council**

Dr Waimarama Matena,

Elizabeth McLean,

Jackie Curtis,

Manihera Te Hei,

Dr Nina Bevin,

Ian Olan.

Te Pou Whakarae o Mua Tonu Nei

Immediate Past President

Andreas Prager

Te Tira Whakahaere Matua

Senior Leadership Team:

Mana Whakahaere **Chief Executive:**

Jackie Edmond, MNZM

Tumuaki ā-Motu Ratonga Haumanu

National Director Operations and Deputy Chief Executive:

Kirsty Walsh

Kaitohutohu Hauora ā-Motu **National Medical Advisor:**

Dr Beth Messenger

Kaitohutohu Tapuhi ā-Motu **National Nursing Advisor:**

Rose Stewart

Kaiwhakatairanga Jauora ā-Motu

National Health Promotion Advisor:

Helen Topham (from 14 March 2022)

Pou Tangata, Āheitanga hoki **Head of People and Capability:**

Hayley Hachey (from 31 January 2022)

Tumuaki, Ratonga Rangatōpū **Director Corporate Services:**

Elizabeth Lowndes (from 18 July 2022)

Tumuaki, Hauora Māori, Mana Taurite

Director Hauora Māori and Equity:

Maria Halligan (from 3 August 2022)

Kaitohutohu Tauwhitiwhiti **Communication Manager:**

Sue Reid

Honorary Vice Presidents

Dr Katharine Bowden MNZM (deceased 1 June 2022), Dame Silvia Cartwright PCNZM, DBE, QSO, Dr Margaret Catley-Carlson, Rt Hon Helen Clark, Margaret Dagg, Hon Lianne Dalziel, Hon Christine Fletcher QSO, Dame Jenny Gibbs DNZM, Professor John Hutton, Dame Areta Koopu DNZM, CBE, Professor Malcolm Potts, Dean Reynolds, Rt Hon Dame Jenny Shipley DNZM, Dame Margaret Sparrow DNZM, MBE, Hon Judith Tizard, Dame Catherine Tizard ONZ, GCMG, GCVO, DBE, QSO, (deceased 31 October 2021), Dame Marilyn Waring CNZM, Dame Fran Wilde DNZM, QSO.

Honorary Life Members

Dame Sue Bagshaw DNZM, Daphne Bell MNZM, Dr Katherine Bowden MNZM (deceased 1 June 2022), Jan Brown, Hon Steve Chadwick QSO, Candis Craven ONZM, Margaret Dagg, Helen Eskett MNZM, Sue Farrant, Dame Jenny Gibbs DNZM, Dr Maxine Gray, Dr Gill Greer MNZM, Naomi Haynes, Peggy Kelly, Dr Win Kennedy, Dr Elspeth Kjestrup QSO, Jean Lawrie, Gill Lough, Jan Lockyer, Linda Penno ONZM, Dean Reynolds, Dr Helen Roberts, Dame Margaret Sparrow DNZM, MBE, Sheila Stancombe, Dawn Wardle, Glenys Wood MNZM, Valda Woods, Simon Woolf.

Looking for a meaningful way to support our work?

Become a Family Planning member and join our loyal base of supporters and advocates who care about the sexual and reproductive health and rights of New Zealanders. You can easily sign up online. Visit familyplanning.org.nz/support-us/become-a-member and become a Family Planning member today.

Your support is greatly appreciated.