



**Sexual Wellbeing
Aotearoa**

Annual Report

Pūrongo ā Tau

1 November 2025 – 30 June 2026

Chief Executive and Board Chair Report

Te Pūrongo a te Tumu Whakarae
me the Heamana o te Poari

New Structure

On 1 November 2025, Family Planning legally became “Sexual Wellbeing Aotearoa Trust,” a charitable trust. For some time, Family Planning Council had been aware that an incorporated society was perhaps no longer the best fit for an organisation approaching its 10th decade. A review of possible options – remaining as an Incorporated Society, becoming a Charitable Company or a Charitable Trust – was undertaken. It was decided that becoming a Charitable Trust was the best fit with our values, history, kaupapa, and vision.

Retaining membership of the International Planned Parenthood Federation (IPPF) was another important consideration – a charitable trust met the IPPF membership requirements and allowed us to maintain this global connection.

Critically, the Charitable Trust structure provides the flexibility to grow services and income streams essential for financial sustainability and to ensure we can continue to deliver to our purpose – that people enjoy the best reproductive health and rights and our role, to use our expertise and courageous voice to advance equitable access to sexual and reproductive health services and information.

The structure changes means that we now have a Board of Trustees instead of a Council. Our former Council Members are now Trustees, and our former Council President is now the Chair of the Board of Trustees.

The change of structure saw **Andreas Prager's** time with us come to an end. Andreas was a former Council member, President and most recently Immediate Past President. We are grateful to him for his immense contribution to our governance and his commitment to sexual and reproductive health and rights over so many years.

This Annual Report covers the period from 1 November 2025 (our establishment date as a charitable trust) until the end of our financial year on 30 June 2026.



Andreas Prager
Immediate Past
President

Te Pou Whakarae
o MuaTonu Nei

Strategic Framework

From 1 July 2026 we are delivering to a new strategic framework designed to build on the new structure and to better position the organisation as an indispensable player in the health system. By taking steps to be financially strategic and creative, engage with a broad network of partners, harness our expertise to champion the issues that matter most, and pursue new digital innovations, we can boost the impact of the important mahi we already do and extend our reach to address unmet needs. This will help us increase equitable access to sexual and reproductive health services and information across Aotearoa New Zealand.

Our new structure positions us for success and our new strategic framework provides us with a road map for the next three years. We have made the deliberate decision for the framework to have a three-year lifespan, acknowledging the speed of change in the health sector, the rapid integration of artificial intelligence tools and the myriad systems underpinning health care and health promotion in New Zealand.

It is significant and deliberate that our new structure and our new strategic framework become real during the year of our 90th birthday. Times have changed immensely since 1936, when our organisation was established as the Sex Hygiene and Birth Regulation Society, although sexual and reproductive health and rights remain politicised and contested. While the future can seem uncertain or even scary sometimes, especially in the current global political environment, it is worth recognising our triumphs over the years and the challenges we have overcome.

It would be inappropriate to close this introduction without formally recording our thanks for the work of our staff and board members across this period of organisational change. We are grateful for the commitment, professionalism and the expertise you deliver every day.



Dr Jackie Percy

Board Chair

Te Heamana
o te Poari



Jackie Edmond

Chief Executive

Mana Whakahaere

Health Promotion

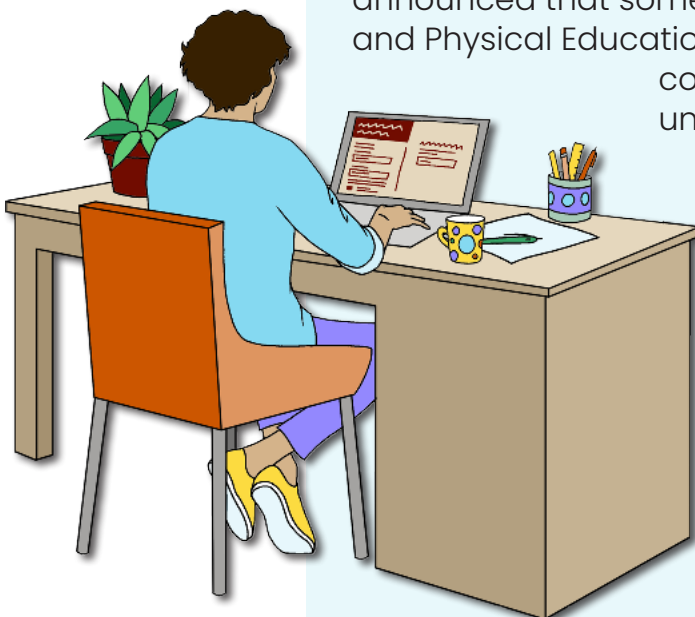
Te Whakatairanga Hauora

Changes to RSE curriculum

Young people's access to information and education relationships and sexuality has been in the spotlight with the Year 0-10 Health and Physical Education curriculum under review. We shared our concerns about diversity and inclusivity in the draft curriculum (which omits information about gender diversity, sexual orientation, and LGBTQIA+), clarity for teachers, and the timing of when information is introduced. Overall, our concern is that this new curriculum does not speak to the lived reality of young people in the 21st century and leaves them with significant gaps in their education that could have real world consequences for their lives and relationships.

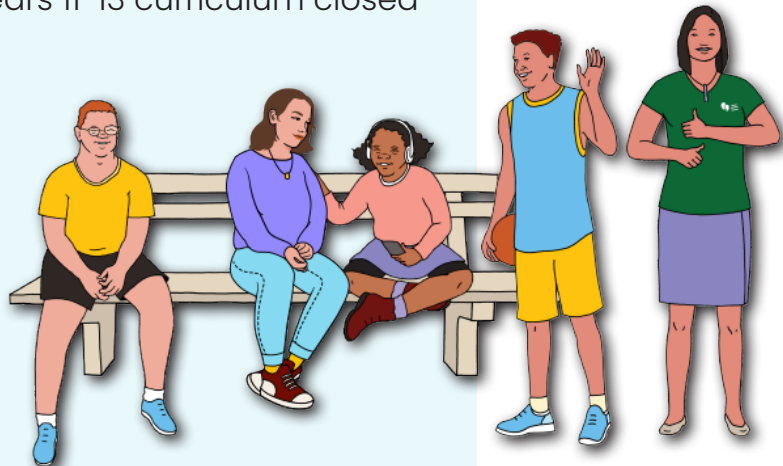
We hosted and moderated a special online panel of advocacy experts to share their expertise and ideas about how to effectively garner more interest and activity in the RSE advocacy space, ahead of submissions on the draft curriculum closing on 24 April. More than 70 people participated in the panel discussion – with conversation covering the proposed curriculum, gaps in content, advocacy ideas and much more.

Following widespread opposition to the proposed new national curriculum, the Ministry of Education announced that some learning areas – including Health and Physical Education, where sexuality education content sits – will not be mandated until 2029.



In May 2026, the new draft Years 11-13 curriculum was released. We welcomed development of a curriculum for the senior school, but believe it shares many of the same problems that plagued the Year 0-10 curriculum – it is fractured, misses key sexuality education content, and lacks an inclusive and trauma-informed approach. Consultation on the Years 11-13 curriculum closed on 15 June.

New programme for Tangata Whaikaha



Bodies, Boundaries and Being Me, a new resource and training programme for people supporting people living with an intellectual disability was published in September 2025. Bodies, Boundaries and Being Me was developed in conjunction with a disability support service, weaving together expertise and knowledge in both disability support and sexual wellbeing.

Events
attended

42

Direct
delivery
workshops

84

Professional
development
workshops

33

(including 4 workshops
in collaboration with
International Programmes
in Tonga)

Clinics Ngā tari Hauora

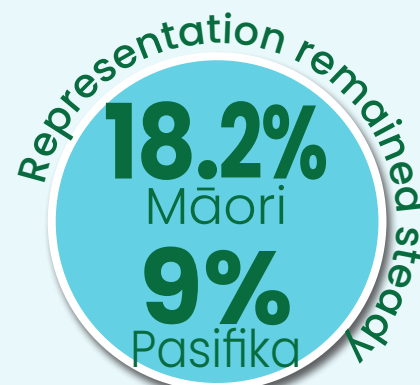
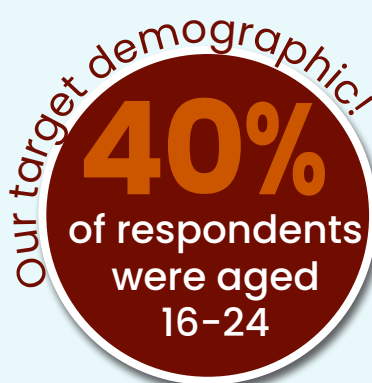
Clinics

In the period under review, some 21,411 **bookings were made online**, using the online booking system, with support from our fully bilingual avatar. This equates to 34% of all bookings. Clinic templates and timetables have been reviewed and reallocated to maximise the value that online booking offers, making more efficient use of client and clinician time.

There were 62,545 **client consultations** during the review period – of this number, 21,512 were for young people under the age of 22.

Our Client Contact Centre took 64,917 calls while some 28,309 calls were managed through the self-service process.

Our Clients:

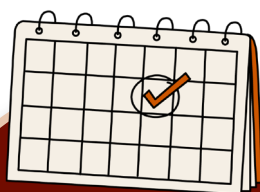


Satisfaction and experience



Client Survey

Every year we conduct a client survey to measure how well our services are meeting client need. We received just over 1000 responses to our 2025 Client Survey.



- More appointment availability
- Longer consults
- Clearer instructions
- Better privacy



Clients praised inclusive, respectful care – especially for trans and Māori clients.



Suggestions included better signage, weekend appointments and easier access to services like PrEP and IUD info.

Professional Training and Development Te Whakangungu me te Whanaketanga Ngaio

1984
Enrolments

1031
People

Clinical courses

In early 2026, we launched our external training programme focussed on long-acting reversible contraception. The programme Contraceptive Implant – Practical Training has an online pre-requisite.

International Programmes Ngā hōtaka ā-ao

Sexual Wellbeing staff hosted the Niu Vaka II Advocacy Workshop in Nadi, Fiji on 22–24 October. The International Planned Parenthood Federation (IPPF) Niu Vaka II strategy aims to come together and break through the barriers that limit sexual and reproductive health and rights (SRHR), thereby enabling quality SRHR to be realised for everyone in the Pacific.

Board of Trustees chair Dr Jacky Percy, youth representative Jack Ruddenklau and chief executive Jackie Edmond attended the International Planned Parenthood Federation (IPPF) General Assembly in Bali. We had a booth at the event for the first time and Jack presented the Youth Declaration on behalf of all young people at the event.

Hauora Māori and Equity

Hauora Māori, Mana Taurite



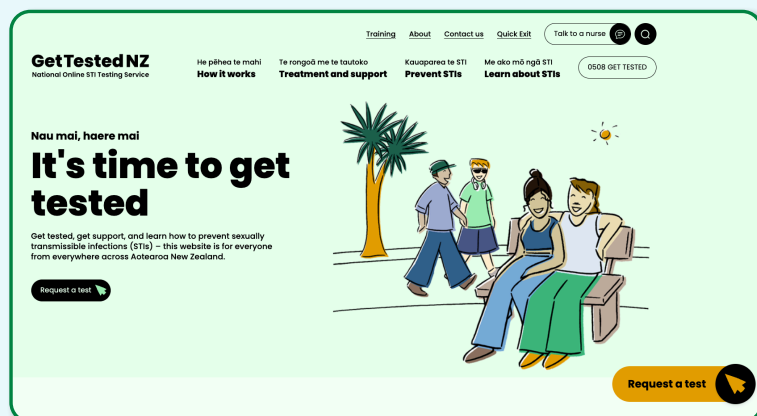
Waitangi Day – February 2026. We hosted our very first stall at the Waitangi Treaty Grounds, a meaningful opportunity for our kaimahi to connect with whānau and support Hauora in a space of deep cultural and national significance. We offered STI testing, emergency contraception, free pregnancy tests and condoms – and our new at-home HPV self-test for eligible people.

Te reo Māori course. Some 18 kaimahi attended an online te reo Māori course developed to improve confidence and fluency. The course, delivered by Riwai Brigham-Couch, was developed specifically for Sexual Wellbeing Aotearoa.

Youth engagement is a focus as we work with young people to identify ways to make our services and information more accessible. We hosted a Talanoa with Auckland Pasifika Health Initiative – Pasifika Student Association at the University of Auckland to better understand the needs of young Pasifika.

Other news

Ngā karere



Get Tested – goes live

Sexual Wellbeing was awarded a Health New Zealand – Te Whatu Ora contract to develop an innovative online STI testing service. GetTestedNZ was launched on 15 April 2026 with a website, allowing New Zealanders to discreetly order STI tests for chlamydia, gonorrhoea, syphilis, and HIV. Tests can be couriered directly to requestors or laboratory forms can be sent to the nearest testing facility.

Other news Ngā karere



At-home HPV test

In February 2026, we launched our new service to improve access to HPV testing. Our service allows zero-fees eligible clients to order HPV self-tests to be mailed to their home (or wherever they get mail delivered), along with a prepaid envelope to send their sample away themselves for testing. Extensive marketing for the service will begin once a payment option is added, allowing the service to be expanded to fee-paying clients.

Puberty blocker ban

In December 2025, the Government announced a halt on new prescriptions of puberty blocker prescriptions for youth with gender dysphoria, citing a “precautionary approach.” Cabinet agreed to the new settings until the outcome of a major clinical trial in the UK, expected in 2031. The puberty blocker ban began on December 19.

Our response to the ban is that healthcare decisions should always be made by healthcare professionals. Young people who are transgender have the right to decide, with their parents and doctors, about whether puberty blockers are right for them.

At the time this Annual Report was written, the ban was being challenged in the High Court by the Professional Association for Transgender Health Aotearoa (PATHA).

Legislation (Definitions of Woman and Man) Amendment Bill

In mid-June a member’s bill seeking to legally define “woman” as “an adult human biological female” and “man” as “an adult human biological male” received sufficient Parliamentary support to be considered by Select Committee.

Other news Ngā karere

The Bill was framed as a mechanism to protect women and girls' rights, freedoms and safety. In our submission, we noted our deep concern that the bill would:

- lay the groundwork for discrimination on the basis of sex and gender
- provide implicit permission to deny people the right to legal protection from discrimination, bullying and harassment on the basis of their gender identity
- create a dangerous, intolerant social context
- contradict existing legislation
- restrict access to healthcare and services for transgender, non-binary, takatāpui and intersex people
- raise concerns about bodily autonomy and privacy
- restrict access to reproductive healthcare, including abortion, for people under 20
- restrict access to cervical screening for trans, non-binary, and intersex people
- create legal confusion, leading to increased exclusion.

In our opinion, the true purpose of this bill needs to be clearly stated: it is the initial step in a much greater attempt to dismantle legal frameworks which protect the rights, freedom and safety of intersex, non-binary, transgender, and takatāpui, as well as women and girls.

Big Gay Out February 2026.

Health Promotion and Clinical teams in Auckland celebrated LGBTQIA+ Pride at Big Gay Out in Tamaki Makaurau by promoting Sexual Wellbeing services, sharing sexual and reproductive health information and offering clinical guidance and advice. This event was a wonderful opportunity to network with our partners in this space.

Fieldays – June 2026.

For the first time this year, we had a presence at Fieldays, the Southern Hemisphere's largest agricultural event and a unique opportunity for us to connect with rural New Zealand. Clinical and health promotion staff reported that attendees engaged openly and other rural health services expressed genuine excitement about seeing Sexual Wellbeing Aotearoa represented at Fieldays.

Financial Reporting Contents

Independent Auditor’s report..... 12

Statement of Service Performance.....14

Statement of Comprehensive Revenue and Expenses 24

Statement of Financial Position.....25

Statement of Changes in Net Assets /Equity 26

Statement of Cash Flows 27

Notes to the Financial Statements.....28

Independent Auditor's Report

To the Trustees of Sexual Wellbeing Aotearoa Trust

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of Sexual Wellbeing Aotearoa Trust (the "Trust") which comprise:

- the financial statements on pages 24 to 42 which comprise the statement of financial position as at 30 June 2026, and the statement of comprehensive revenue and expense, statement of changes in net assets/equity, statement of cash flows for the 8-month period then ended, and notes to the financial statements, including a summary of material accounting policies and;
- the statement of service performance of pages 14 to 22.

In our opinion, the accompanying financial report presents fairly, in all material respects:

- the financial position of the Trust as at 30 June 2026 and its financial performance and its cash flows for the 8-month period then ended; and
- the service performance for the 8-month period ended 30 June 2026 in that the service performance information is appropriate and meaningful and prepared in accordance with the Trust's service performance criteria.

in accordance with the Public Benefit Entity Standards issued by the New Zealand Accounting Standards Board ("applicable financial reporting framework").

Basis for Opinion

We conducted our audit of the financial statements in accordance with International Standards on Auditing (New Zealand) (ISAs (NZ)) and the audit of the service performance information and Trust information in accordance the ISAs (NZ) and New Zealand Auditing Standard (NZ AS) 1 (Revised) *The Audit of Service Performance Information*. 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 Trust in accordance with Professional and Ethical Standard 1 *International Code of Ethics for Assurance Practitioners (including International Independence Standards) (New Zealand)* issued by the New Zealand Auditing and Assurance Standards Board, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other than in our capacity as auditor we have no relationship with, or interest in, the Trust.

Other information Other than the Financial Report and Auditor's Report thereon

The Trustees are responsible for the other information. The other information comprises the information included in the annual report but does not include the financial report and our auditor's report thereon.

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

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

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

Responsibilities of Those Charged with Governance for the Financial Report

Those charged with governance are responsible on behalf of the Trust for:

- the preparation, and fair presentation of the financial report in accordance with applicable financial reporting framework;
- the selection elements/aspects of service performance, performance measures and/or descriptions and measurement bases or evaluation methods that present service performance information that is appropriate and meaningful in accordance with the applicable financial reporting framework;
- the preparation and fair presentation of service performance information in accordance with the Trust's measurement bases or evaluation methods, in accordance with the applicable financial reporting framework;
- the overall presentation, structure and content of the service performance information in accordance with the applicable financial reporting framework; and
- such internal control as those charged with governance 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, the Trustees, on behalf of the Trust are responsible for assessing the Trust'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 those charged with governance either intend to liquidate the Trust or to cease operations, or have no realistic alternative but to do so.

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 ISAs (NZ) and NZ AS 1 (Revised) 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 the auditor's responsibilities for the audit of the financial report is located at the External Reporting Board's website at: <https://www.xrb.govt.nz/standards/assurance-standards/auditors-responsibilities/audit-report-18-1/>.

Restriction on use of our report

This report is made solely to the Trust's members, as a body. Our audit work has been undertaken so that we might state to them those matters which we are required to state in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Trustees and its members, as a body, for our audit work, this report or for the opinion we have formed.

Grant Thornton New Zealand Audit Limited



Wellington

22 October 2026

Statement of Service Performance

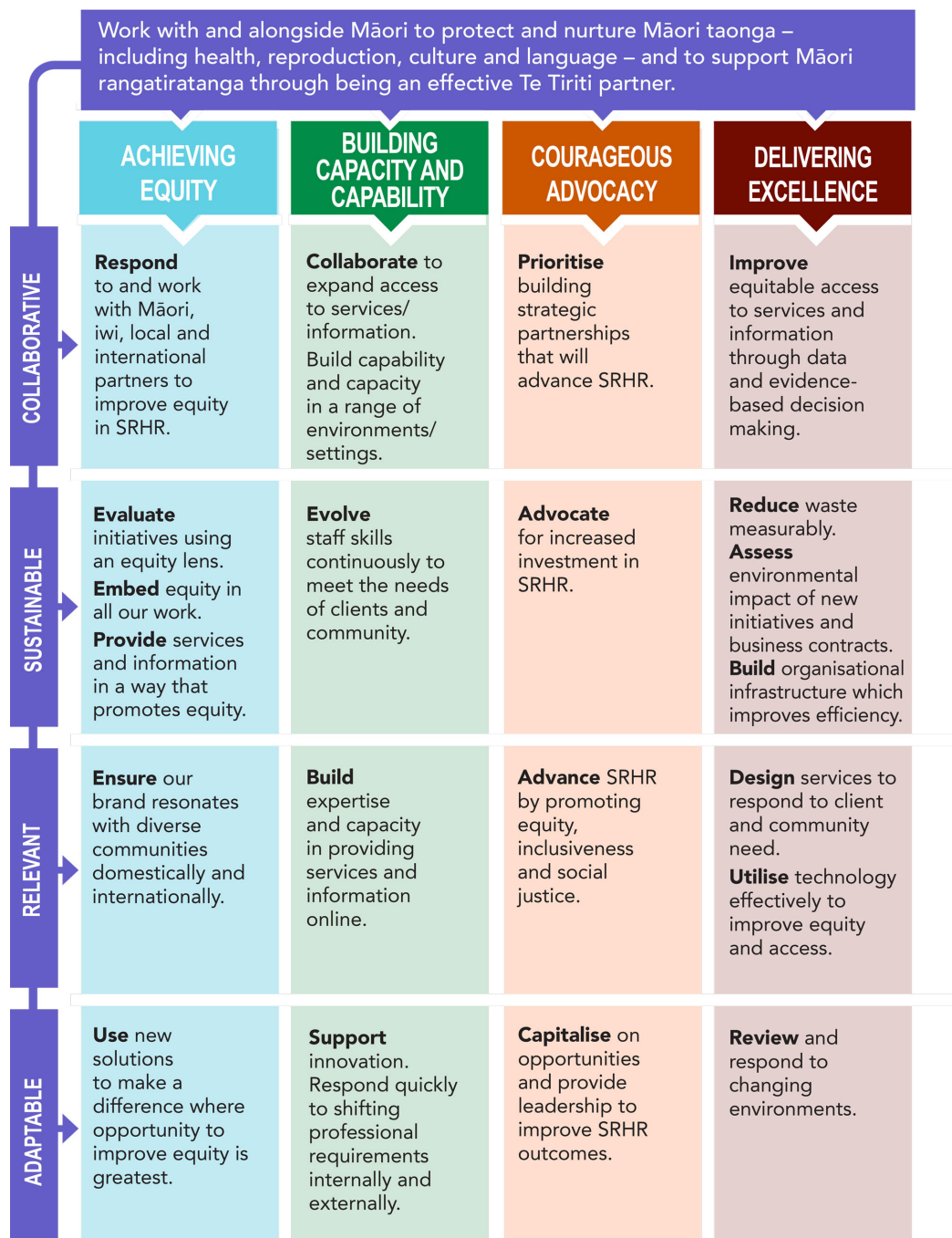
Our purpose

People enjoy the best sexual and reproductive health and rights.

Our role

To use our expertise and courageous voice to advance equitable access to sexual and reproductive health services and information.

Strategic Framework

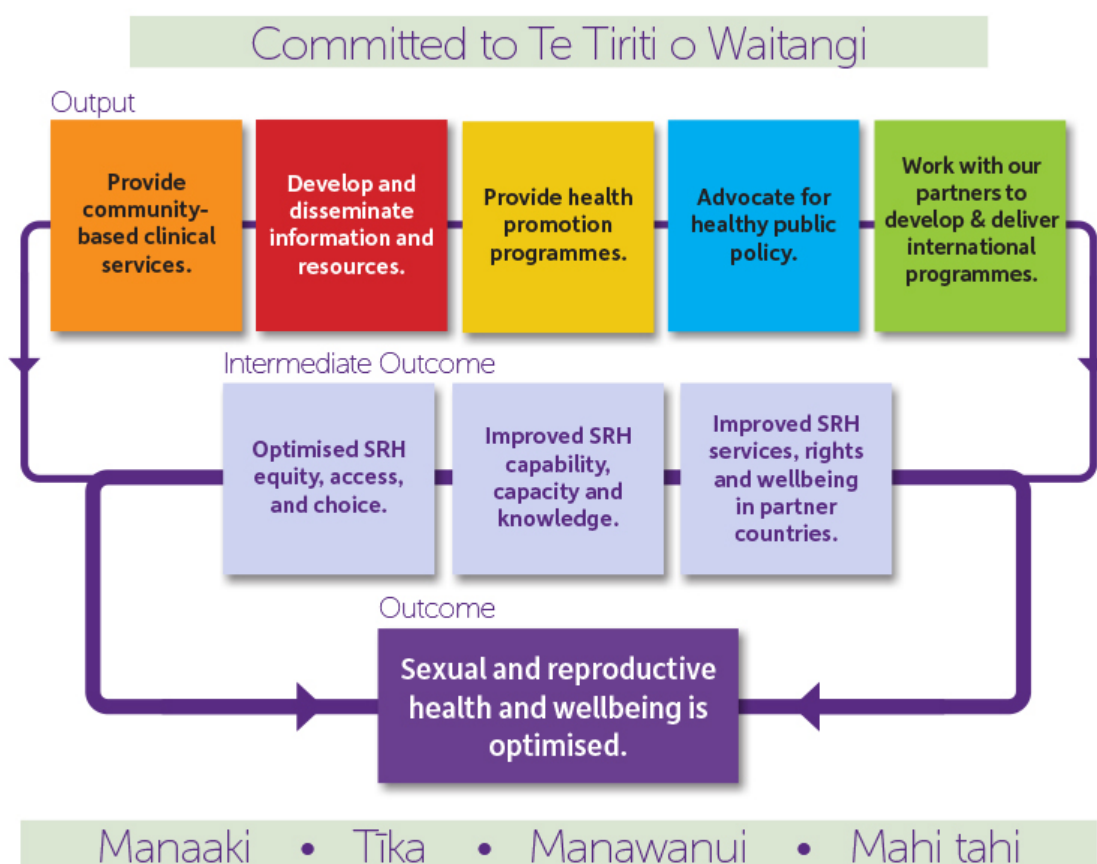


Non-financial results framework

Sexual Wellbeing Aotearoa Trust (Sexual Wellbeing Aotearoa) delivers services to achieve intermediate and long-term outcomes which contribute to optimised sexual and reproductive health and wellbeing in Aotearoa New Zealand and in partner countries. The outcomes are set out in the following framework together with our outputs. The outputs are the things we do to achieve our intermediate outcomes and ultimately contribute to the overarching outcome.

The tables following the framework, provide measures of our success during the period.

Our values are key in describing the behaviours that drive our culture and the way we provide services to our clients. We are committed to the principles of Te Tiriti o Waitangi to achieve equitable outcomes.



Intermediate outcome:
Optimised sexual and reproductive health equity, access, and choice

Sexual Wellbeing Aotearoa is New Zealand’s only national provider specialising in sexual and reproductive health services in primary care and health promotion. Our clinical staff are trained specialists and provide comprehensive sexual and reproductive health care with services provided virtually and in person across Aotearoa New Zealand. Our objectives are to provide access to sexual and reproductive health information and services in ways that improve equity outcomes, particularly for Māori, Pacific peoples, and those with disabilities. Additionally, we aim to improve accessibility to our services for clients who hold a Community Services Card and those who fall into Quintile 5¹.

Provide Community-based clinical services

Measures	Actual 2026 (eight months)
Number of:	
Locations	20
Outreaches	7
Virtual consultations	7,104

The Hawera clinic has been re-established following the requirement last year to vacate the facility being leased. The clinic opened 17 June 2026 and is proving to be very popular with the Hawera community. The outreach clinic in Regent Training centre in Whangarei has been closed.

At 30 June, nationally, there are 20 full or part-time clinics in addition to seven outreach clinics. Outreaches are demand driven and frequently reviewed to ensure they are viable and meet the needs of the community.

Clinics by Region	# Base clinics	# Outreaches/Schools
Northland - Whangarei	1	Kaikohe
Waitemata – Takapuna, Henderson	2	
Auckland – Newmarket	1	
Counties Manukau – Manukau, Papakura	2	
Waikato - Hamilton	1	Huntly
Bay of Plenty – Tauranga	1	Katikati
Tairāwhiti – Gisborne	1	
Taranaki – New Plymouth	1	Hawera
Whanganui	1	
Lower North – Lower Hutt, Wellington, Porirua	3	
Nelson / Marlborough – Blenheim	1	

¹ New Zealand uses an IMD (Index of Multiple Deprivation) tool to identify geographical concentrations of deprivation in New Zealand. The concentrations are divided into quintiles. Quintile 5 represents geographical areas where there is a high concentration of deprivation.

Clinics by Region	# Base clinics	# Outreaches/Schools
Canterbury – Christchurch, Rangiora	2	Hornby, Aranui, Ashburton
South Canterbury – Timaru	1	
Southern – Dunedin, Invercargill	2	
Totals	20	7

While a Reimagining the Client Journey project was completed in December 2025 improvements are ongoing to ensure service delivery models meet client need including equity, access and choice. The key deliverables of this project have been successfully implemented and are now considered business as usual, including online booking, review of Client Contact Centre systems and processes, appointment type and length. Did Not Attend (“DNA”) management initiatives have reduced DNA rates, and we are consistently achieving lower DNA rates.

The implementation of open access scheduling and enabling same-day booking of appointments has allowed easier access to face-to-face appointments. This supports our commitment to improving access to services for our clients.

The introduction of open-access templates is expected to positively influence client satisfaction. By simplifying processes and improving accessibility, this initiative may help address the current inability to move clients on a same day basis to an alternative clinician when the original clinician is unexpectedly away.

Intermediate outcome:**Improved sexual and reproductive health and wellbeing capability, capacity, and knowledge.**

Sexual Wellbeing Aotearoa provides training programmes, courses and teaching resources to health professionals, community groups and schools. These programmes and resources directly impact recipients' capability and knowledge and increase the capacity of health professionals to improve Aotearoa New Zealand's sexual and reproductive health and wellbeing.

Information on sexual and reproductive health and wellbeing is also available to the public from Sexual Wellbeing Aotearoa's website.

The content of the programmes and resources are developed and reviewed by specialist professionals to ensure they reflect best practice and any new health information.

Though a small part of our work, we also provide submissions on public health policy and advocate for policy that continually improves sexual and reproductive health outcomes for Aotearoa New Zealand and internationally.

Develop and disseminate information and resources

Measures	Actual 2026 (eight months)
Number of people registered for online learning (HP & PTD)	2,864 enrolments 1,584 people
Number registered for professional training	604 enrolments 588 people
% Māori	15%
% Pasifika	2%
Percentage of professional training clients who are at least satisfied with training resources and engagement (HP & PTD)	96%
Percentage of health promotion settings that meet health equity criteria	54% Nov – Dec 2025 78% Jan – June 2026
Website:	
Number of page views	2,969,685
Users	386,327

The number of people registered to attend our professional training workshops increased by 45 from November 2025 to June 2026. At the end of funding period, we successfully allocated all places funded by Te Whatu Ora to eligible learners.

There has been a notable increase in enrolments in the Conduct Cervical Screening Course during the period, which is funded by learners and/or their employers, reversing the dip in enrolments experienced after the launch of HPV self-testing.

The percentage of Māori and Pasifika engaged in professional training remains constant at 15% and 2% respectively.

Customer satisfaction with delivery of our training remains very high at 96%.

Revenue from the launch of the Long-Acting Reversible Contraception (LARC) course, Contraceptive Implant - Practical Training is anticipated to increase. 119 health professionals have expressed interest, and a new booking system has been set up to match enrolments to appointments where an internal Sexual Wellbeing trainer will train external clinicians with consenting clients over two days.

Over the period, there's been an interesting pattern emerging due to the use of artificial intelligence (AI). Research shows that web users are heavily reliant on AI summaries and AI-powered search assistants and that about 60% of searches are now ending without users clicking through to a website. As a result, websites are seeing significant decreases in organic traffic, and Sexual Wellbeing Aotearoa's websites have not been immune to this phenomenon.

Preliminary research on AI-powered search engines shows that the site is well referenced for relevant queries. This explains a drop in traffic to certain pages, such as the unprotected sex page, as it is likely users are finding what they need for this informational search within the search results themselves.

Provide health promotion programmes

Measures	Actual 2026 (eight months)
Number of teaching resources provided to schools National total	55
Number of education sessions delivered to high priority community groups	
Alternative Education	46
Disability groups	1
National total	84

Health Promotion continued to support schools through the delivery of Navigating the Journey (teacher's resource for supporting relationship and sexuality education), including offering a train-the-trainer model, as well as other workshops and consultation opportunities to upskill teachers and professionals supporting young people with their sexual wellbeing. Demand for the Navigating the Journey resource declined as schools continue to navigate uncertainty surrounding changes to the Relationships and Sexuality Education curriculum.

Alternative Education settings continued to represent the largest priority group for direct delivery education, reflecting our ongoing commitment to supporting young people experiencing inequitable health outcomes.

Consistent with our community mobilisation approach, there has also been an ongoing focus on professional development and capability building to support sustainable delivery by schools and community organisations, alongside direct education delivery. Community engagement continues to be guided by our equity and triaging framework.

While the table above highlights selected priority community groups for the period, the national total includes education sessions delivered across all high priority community groups, including those not highlighted in the list.

Advocate for healthy public policy

Measures	Actual 2026 (eight months)
Number of submissions on public policy:	6
Number with equity focus	4
Number where there has been change that aligns with Sexual Wellbeing Aotearoa's positions	0
Social media:	
Number of followers	23,667
Reach (unique individuals/audience)	645,410
Impressions (total number times people viewed our content)	4,223,934

While 6 submissions on public policy have been made during the period, the outcome has not yet been made known. So, it is uncertain whether a change that aligns with Sexual Wellbeing Aotearoa's position has been achieved.

Social media continues to be challenging as platforms continuously change rules and reporting. Our determination to provide accurate information, for instance, using correct language, can result in content being censored or shadowbanned. There has been particular success during the review period for posts profiling staff. Social media users are engaged by content which highlights expertise, especially in clinical practice.

Intermediate outcome:
Improved sexual and reproductive health services, rights, and wellbeing in partner countries.

As an organisation we are committed to championing sexual and reproductive health and rights domestically, as well as regionally and on the global stage. Our international work increases local sexual and reproductive health services in partner countries, helps to build local capacity, raise awareness and advocate for sexual and reproductive rights. This work is funded by New Zealand’s Ministry of Foreign Affairs and Trade (MFAT), International Planned Parenthood Federation (IPPF), and United Nations Family Planning Association (UNFPA).

Work with our partners to develop and deliver international programmes

Measures	Actual 2026 (eight months)
Number of engagements ² with stakeholders to promote awareness and funding for international SRHR	26
Number of people trained ³	96

During the period, there were five international programmes run by Sexual Wellbeing Aotearoa. The two biggest projects are based in Kiribati and Vanuatu. The newest project started in Tonga in June 2026. All these projects are working in partnership with local organisations on the islands. These programmes aim to improve sexual and reproductive health services and information by training local health providers in country, and enabling outreach services, awareness, and advocacy sessions among different communities. Work continues with IPPF to implement their regional strategy, Niu Vaka II, with a focus on Sexual and Reproductive Health and Rights advocacy, and to provide secretariat support to the New Zealand Parliamentarians’ Group on Population and Development (NZPPD) – a cross-party parliamentary group that champions sexual and reproductive rights in the Pacific.

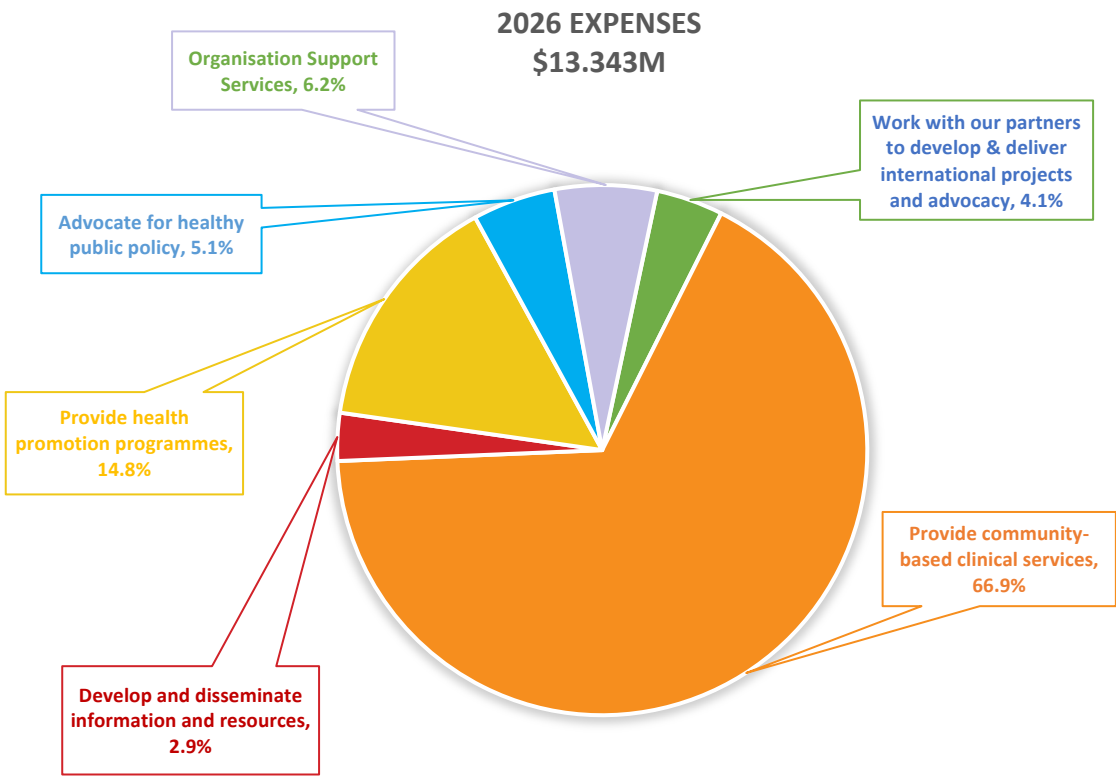
² Engagements are defined as forums or events attended by Sexual Wellbeing Aotearoa staff or partners under our projects, such as NZPPD members. Both domestic (same location as attendee) and international engagements are displayed in the combined figure.

³ Includes village health workers, project staff, nurses, community health promoters and youth volunteers across the projects in Kiribati, Tonga and Vanuatu

Statement of Compliance

This Statement of Service Performance has been prepared in compliance with Financial Reporting Standards 48 (FRS 48).

Expenses



Statement of Comprehensive Revenue and Expenses

For the eight months ended 30 June 2026

	Note	2026 Eight months
Revenue from non-exchange transactions		
Government contracts	7	11,757,862
Clinical fees		1,096,731
Grants revenue	8	600,035
Donations	9	1,086,546
Other non-exchange revenue	10	243,405
Revenue from exchange transactions		
Training fees		167,995
Rental revenue		14,898
Finance revenue	11	92,357
Other exchange revenue	12	53,901
Total Revenue		15,113,731
Expenses		
Employee costs	13	9,039,574
Clinical and programme delivery costs		346,846
Contracted services		62,588
Grants and community funding		292,686
Occupancy and facilities costs		1,398,210
Audit fees		68,875
Administration and support costs		1,554,312
Travel and meetings		225,591
Asset and credit impairment costs		354,523
Total Expenses		13,343,206
Net Comprehensive Revenue and Expenses		1,770,525

The accompanying notes form part of, and should be read in conjunction with, these financial statements.

Statement of Financial Position

As at 30 June 2026

	Note	2026
ASSETS		
Current assets		
Cash and cash equivalents	14	9,688,754
Term Investment	15	2,000,000
Funds held in trust		120,000
Accounts receivable	16	221,184
Accrued interest revenue		10,871
Prepayments		186,414
Inventories		16,860
GST receivable		349
		12,244,432
Non-current assets		
Plant and equipment	17	750,233
Intangible assets	18	23,147
		773,380
TOTAL ASSETS		13,017,812
LIABILITIES		
Current liabilities		
Accounts payable	19	781,656
Income in advance	20	1,620,141
Employee entitlements	21	1,088,278
		3,490,074
Non-current liabilities		
Long service leave	21	22,963
		22,963
TOTAL LIABILITIES		3,513,038
NET ASSETS		9,504,775
EQUITY		
Accumulated comprehensive revenue and expense		9,504,775
TOTAL EQUITY		9,504,775

The accompanying notes form part of, and should be read in conjunction with, these financial statements.

Statement of Changes in Net Assets /Equity

For the eight months ended 30 June 2026

	Note	2026 Eight months
Opening balance as at 1 November 2025		0
Transfer of Net Assets from the Incorporated Society		7,734,250
Net comprehensive revenue and expenses for the period		1,770,525
Total net assets as at 30 June 2026		9,504,775

These Financial Statements were approved for issue by the Sexual Wellbeing Aotearoa Trust on 20 October 2026.



Dr Jacquelyn Percy

Chair of Board of Trustees



Ian Olan

Chair of Assurance & Risk Committee

Statement of Cash Flows

For the eight months ended 30 June 2026

	Note	2026 Eight months
Cash flows from operating activities		
Fundraising, donations, and bequests		51,536
Government contracts		11,991,903
Receipts from grants and subsidies		287,486
Receipts from other goods and services provided to customers - non-exchange transactions		1,061,880
Receipts from other goods and services provided to customers - exchange transactions		236,794
Interest received		194,891
Payments to suppliers		(3,747,600)
Payments to employees		(9,057,864)
Grants, contributions, and sponsorships paid		(292,688)
Net cash flows from operating activities		726,338
Cash flows from investing activities		
Purchase of plant and equipment	17	(29,473)
Gross Receipts from / (Deposits into) term deposits		5,376,208
Net cash flows from investing activities		5,346,736
Net increase/(decrease) in cash and cash equivalents		6,073,073
Cash and cash equivalents at beginning of period		3,615,679
Cash and cash equivalents at end of period	14	9,688,753

The accompanying notes form part of, and should be read in conjunction with, these financial statements.

Notes to the Financial Statements

For the eight months ended 30 June 2026

1 Reporting Entity

The financial statements presented are those of Sexual Wellbeing Aotearoa Trust (the “Trust”) for the eight months ended 30 June 2026. The Board of Trustees believe that the statements contained in this report accurately reflect the overall performance of Sexual Wellbeing Aotearoa Trust for the period.

On 1 November 2025, Sexual Wellbeing Aotearoa Trust was established as a charitable trust to continue the charitable activities previously undertaken by New Zealand Family Planning Association Incorporated (the Society).

Pursuant to a Deed of Gift, the Society transferred its assets, liabilities contractual rights and obligations, and operating activities to the Trust as part of a change in legal structure from an incorporated society to a charitable trust. The Trust assumed responsibility for the Society’s ongoing charitable activities including the provision of sexual and reproductive health services, education, training, advocacy, and research.

Assets and liabilities transferred to the Trust were recognised at their carrying values immediately prior to transfer. Property, plant and equipment and intangible assets were transferred at net book value based on the assessment undertaken as part of the transition process.

As this is the Trust’s first reporting period, the financial statements cover the period from 1 November 2025 to 30 June 2026 and no comparative information has been presented.

The Trust is a Registered Charity under the Charities Act 2005 and domiciled in New Zealand. It is a Tier 2 public benefit entity for the purposes of financial reporting in accordance with the Financial Reporting Act 2013.

The overall goal of the Trust is to provide a range of services including sexual and reproductive health information, clinical services, education and training, and research.

The financial statements were authorised for issue by the Board of Trustees on 20 October 2026.

2 Basis of Preparation

i. Statement of compliance

The financial statements and the statement of service performance have been prepared in accordance with New Zealand Generally Accepted Accounting Practice (NZ GAAP). The Trust as elected to apply the Tier 2 Public Benefit Entity reduced Disclosure Regime (PBE Standards RDR) and have taken advantage of all applicable reduced disclosure concessions. Sexual Wellbeing Aotearoa Trust is deemed a public benefit entity for financial reporting purposes and has been established to achieve its overall goal rather than a financial return.

The Trust qualifies for Tier 2 reporting as it does not have public accountability and meets the size criteria prescribed by the External Reporting Board A1 Application of the Accounting Standards Framework (between \$5m and \$33m in operating expenditure).

ii. Measurement basis

These financial statements have been prepared on a historical cost basis, with the exception assets and liabilities that have been measured at fair value as described in the relevant accounting policies. The accrual basis of accounting has been used unless otherwise stated, and the financial statements have been prepared on a going concern basis.

iii. Functional and presentation currency

All dollar values are presented in New Zealand dollars and are rounded to the nearest dollar. There has been no change in the functional currency or any significant foreign operations during the period other than work in the Pacific as noted in the Statement of Service Performance. This work represents approximately 5% of our expenditure.

3 Significant accounting judgements, estimates and assumptions

The preparation of financial statements in accordance with NZ PBE IPSAS requires management to make judgements, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets, liabilities, income and expenses. Where material, information on significant judgements, estimates, and assumptions is provided in the relevant accounting policy or note disclosure.

The estimates and underlying assumptions are based on historical experience and various other factors believed to be reasonable under the circumstances. Estimates are subject to ongoing review and actual results may differ from these estimates. Revisions to accounting estimates are recognised in the year in which the estimate is revised and in future years affected.



Significant judgements, estimates, and assumptions are disclosed within each applicable note and are depicted by a symbol as shown left.

4 Significant accounting policies

The accounting policies set out below have been applied consistently throughout the period presented in these financial statements. There have been no changes to accounting policy during the period.



Significant accounting policies are disclosed within each of the applicable notes to the financial statements and are depicted by a symbol as shown left.

5 Income tax and other taxes

Income tax

Due to its charitable status, Sexual Wellbeing Aotearoa Trust is exempt from income tax.

Goods and Services Tax (GST)

Revenue, expenses, and assets are recognised net of the amount of GST except:

- When the GST incurred on a purchase of assets or services is not recoverable from the taxation authority, in which case the GST is recognised as part of the cost of acquisition of the asset or as part of the expense item, as applicable; and
- In the case of receivables and payables, which are stated with the amount of GST included.

Cash flows are included in the statement of cash flows on a gross basis and the GST component of cash flows arising from investing and financing activities, which is recoverable from, or payable to, the taxation authority is classified as part of operating cash flows.

6 Revenue Recognition



Revenue is recognised to the extent that it is probable that the economic benefits or service potential will flow to the Trust and the revenue can be reliably measured. Revenue is measured at the fair value of the consideration received or receivable, taking into account contractually defined terms of payment.

Rendering of services - subsidised

Rendering of services, Clinical fees, at a price that is not approximately equal to the value of the service provided by the Trust is considered a non-exchange transaction. This includes rendering of services where the price does not allow the Trust to fully recover the cost of providing the service (such as client consultations), and where the shortfall is subsidised by income from other activities, such as government contracts. Generally, there are no conditions attached to such revenue. Revenue from such subsidised services is recognised when the Trust delivers the services. Revenue is recognised at the amount of the invoice or bill, which is the fair value of the cash received or receivable for the service. Revenue is recognised by reference to the stage of completion of the service to the extent that the Trust has an obligation to refund the cash received from the service (or to the extent that the customer has the right to withhold payment from the Trust for the service) if the service is not completed satisfactorily.

7 Government contract revenue



Revenue from non-exchange transactions with the Government and government agencies is recognised when the Trust obtains control of the transferred asset (cash, goods, services, or property), and:

- it is probable that the economic benefits or service potential related to the asset will flow to the Trust and can be measured reliably; and the transfer is free from conditions that require the asset to be refunded or returned to the Government if the conditions are not fulfilled.
- Revenue from government grants and funding is measured at the fair value of the assets (cash, goods, services, or property) transferred over to the Trust at the time of transfer. To the extent that there is a condition attached that would give rise to a liability to repay the grant amount or to return the granted asset, a deferred revenue liability is recognised instead

of revenue. Revenue is then recognised only once the Trust has satisfied these conditions.

	2026 eight months
Health New Zealand – Primary Health Sexual and Reproductive Services	9,101,689
Health New Zealand – Sexual Health Promotion	1,993,770
Health New Zealand – National Abortion Telehealth Services	275,776
Health New Zealand – Zero Fees Screening	69,253
Health New Zealand – National Contraception Training	17,121
Health New Zealand – STI/HIV Online	300,253
Total Government contract revenue	11,757,862

In reporting period, nearly 78% of total revenue was received from two contracts from Health New Zealand. The Primary Health contract funds Sexual Wellbeing Aotearoa to provide clinical sexual and reproductive services at our clinics and outreach centres throughout New Zealand. It also provides some funding towards clinical training and development.

The Sexual Health Promotion contract concentrates on health promotion work, which provides programmes and courses on all aspects of sexual health and relationships.

8 Grants revenue



Grants revenue

Grants revenue includes grants given by other organisations and businesses, including funding by the Ministry of Foreign Affairs and Trade (MFAT) Where there are unfulfilled conditions attached to the grant and only where there are used or return clauses, the amount relating to the unfulfilled condition is recognised as a liability and released to revenue as the conditions are fulfilled.

Foreign exchange

Trade creditors or debtors denominated in foreign currency are reported at the statement of financial position reporting date by applying the exchange rate on that date. Exchange differences arising from then settlement of creditors, or from the reporting of creditors at rates different from those at which they were initially recorded during the period, are recognised as income or expenses in the period in which they arise.

Non-monetary items that are measured in terms of historical cost in a foreign currency are translated using the exchange rate at the date of the initial transaction. Non-monetary items measured at fair value in a foreign currency are translated using the exchange rates at the date when the fair value was determined.

	2026 eight months
Ministry of Foreign Affairs and Trade grant for Healthy Families projects in Kiribati	241,872
Ministry of Foreign Affairs and Trade grant for 'Planem gud family blong yumi' project in Vanuatu	174,886
Ministry of Foreign Affairs and Trade grant for 'Amanaki Lelei' project in Tonga	125,003
Supporting IPPF's Niu Vaka II strategy in the Pacific funded by the Ministry of Foreign Affairs and Trade	21,429
UNFPA New York 2024 grant for NZPPD Secretariat	35,117
IP – Extra	1,729
Total Grants revenue	600,035

9 Donations



Donation

Donations revenue includes a non-cash donation recognised on the transfer of assets, from the Incorporated Society to the Trust on 1 November 2025. The remaining balance relates to donations received in the ordinary course of operations during the period.

	2026 eight months
Non-cash donation on transfer of assets	1,071,815
Donations in ordinary course of operations	14,731
Total Other contracts revenue	1,086,546

10 Other non-exchange revenue

	2026 eight months
Other contracts revenue	206,600
Contributions and bequests	36,805
Total Other contracts revenue	243,405

11 Finance revenue



Finance income

Finance income comprises interest income on financial assets. Interest income is recognised as it accrues in surplus or deficit, using the effective interest method.

	2026 eight months
Interest income	92,357
Total Finance revenue	92,357

12 Other exchange revenue



Revenue from exchange transactions

Rendering of other services – full cost recovery

Revenue from the rendering of services (Professional Training & Development course fees) are recognised by reference to the stage of completion of the service. When the contract outcome cannot be measured reliably, revenue is recognised only to the extent that the expenses incurred are eligible to be recovered.

Sale of goods

Revenue from the sale of goods (such as educational resources and personal products) are recognised when the significant risks and rewards of ownership of the goods have passed to the buyer, usually on delivery of the goods, and when the amount of revenue can be measured reliably, and it is probable that the economic benefits or service potential associated with the transaction will flow to the Trust.

Rental revenue

Rental revenue arising from operating leases is accounted for on a straight-line basis over the lease terms and is included in revenue in the statement of comprehensive revenue and expenses due to its operating nature.

Other gains and losses

Other gains and losses include fair value gains and losses on financial instruments at fair value through surplus or deficit, unrealised fair value gains and losses on the revaluation of investment properties, share of surplus or deficit of associates and joint venture, and realised gains and losses on the sale of fixed assets held at cost.

	2026
	eight months
Resource sales	9,403
Other revenue	44,498
Total Other exchange revenue	53,901

13 Employee costs



Employee costs

Annual leave and long service leave expected to be settled within 12 months of reporting date, are classified as a current liability.

The accumulated long service leave expected to be settled longer than 12 months of reporting date, is classified as a non-current liability.

Salaries and annual leave

The employee costs are recognised when the services are rendered.

Long service leave

Employees of Sexual Wellbeing Aotearoa become eligible for long service leave after a certain number of years of employment, depending on their contract and collective agreements. The liability for long service leave is recognised and measured as the present value of expected future payments to be made in respect of services provided by employees up to the reporting date.

	2026 eight months
Wages and salaries	8,817,461
KiwiSaver employer contributions	247,984
Other employee benefits	(25,870)
Total Employee costs	9,039,574

14 Cash and cash equivalents

Cash and cash equivalents in the Statement of Financial Position comprise cash at bank and on hand with an original maturity of 90 days or less that are readily converted to known amounts of cash and which are subject to an insignificant risk of changes in value.

	2026 eight months
Cash on hand	1,570
Cash at bank	9,687,184
Total cash and cash equivalents	9,688,754

The Statement of Cash Flows is prepared exclusive of GST, which is consistent with the method used in the Statement of Comprehensive Revenue & Expenses. The following are the definitions of the terms used in the cash flow statement:

i. Operating Activities

Operating activities include all transactions and other events that are not investing or financing activities.

ii. Investing Activities

Investing activities are those activities relating to the acquisition and disposal of current and non-current investments and any other non-current assets.

iii. Cash and Cash Equivalents

Cash includes coins and notes both local currency, demand deposits and other highly liquid investments readily convertible into cash and includes all call investments as used by Sexual Wellbeing Aotearoa as part of day-to-day cash management.

The carrying value of cash and cash equivalents approximate their fair value.

15 Investments

For the purposes of the Statement of Cash Flows, funds invested longer than 90 days are classed as receivables at amortised cost.

	2026 eight months
Term deposits	2,000,000
Total investments	2,000,000

16 Accounts receivable



Receivables

Trade and other receivables are recorded at the amount due, less an allowance for credit losses. Sexual Wellbeing Aotearoa applies the simplified expected credit loss model of recognising lifetime expected credit losses for receivables. In measuring expected credit losses, trade and other receivables that are individually significant have been reviewed on an individual basis, the rest are reviewed on a collective basis as they possess shared credit risk characteristics. Trade and other receivables are written off when there is no reasonable expectation of recovery.

	2026 eight months
Receivables from exchange transactions	
Trade receivables	247,618
Other exchange receivables	182
Less Provision for impairment	(26,615)
Total Accounts receivable	221,184

17 Plant and equipment



Useful lives, residual values, and impairment

Useful lives, residual values and impairment of assets are assessed based on the following:

- The condition of the asset based on the assessment of employees of Sexual Wellbeing Aotearoa;
- The nature of the asset, its susceptibility and adaptability to changes in technology and processes;
- The nature of the processes in which the asset is deployed; and
- Changes in the market in relation to the asset.

Adjustments to useful lives are made when considered necessary.

Under the Deed of Gift, plant and equipment and intangible assets were transferred from New Zealand Family Planning Association Inc to Sexual Wellbeing Aotearoa. On 1 November 2025, the Trust used fair value as deemed cost for these transferred assets and they have been subject to accumulated depreciation and amortisation since this date.



All items of plant and equipment are shown at fair value or cost, less accumulated depreciation and any impairment losses to date. Cost includes the value of consideration exchanged, or fair value in the case of donated or subsidised assets, and the costs directly attributable to bringing the item to working condition for its intended use.

Subsequent expenditure relating to an item of plant and equipment is capitalised to the initial costs of the item when the expenditure increases the economic life of the item or where expenditure was necessarily incurred to enable future economic benefits to be obtained. All other subsequent expenditure is expensed in the period in which it is incurred.

Work in Progress is measured at its estimated stage of completion, and reliable measures of progress.



Depreciation

Depreciation is calculated using the straight-line method. The annual rates of depreciation applicable are based on the estimated useful lives as follows:

- | | |
|-----------------------------|--------------|
| • Leasehold improvements | 3 - 6 years |
| • Clinic & Office equipment | 3 - 10 years |
| • Furniture & fittings | 5 - 10 years |
| • Computer hardware | 3 - 5 years |

There are no restrictions on title of Plant and Equipment, nor are there any contractual commitments for the acquisition for such assets.

	Leasehold Improvements	Furniture & Fittings	Clinic & Office Equipment	Computer Hardware	Work in Progress	TOTAL
Cost or valuation						
As at 1 November 2025	625,755	25,154	85,142	306,644	0	1,042,695
Additions	0	0	5,112	24,333	0	29,444
Disposals	0	0	0	0	0	0
As at 30 June 2026	625,755	25,154	90,253	330,977	0	1,072,139

Accumulated depreciation

As at 1 November 2025	0	0	0	0	0	0
Depreciation for period	200,020	8,881	22,158	90,847	0	321,905
Disposals	0	0	0	0	0	0
As at 30 June 2026	200,020	8,881	22,158	90,847	0	321,905

Net book value

As at 1 November 2025	625,755	25,154	85,142	306,644	0	1,042,695
As at 30 June 2026	425,735	16,273	68,096	240,130	0	750,233

18 Intangible assets

Licenses and software are finite life intangibles and are recorded at cost less accumulated amortisation and impairment. The estimated useful lives are reviewed at the end of each reporting period.



Amortisation is calculated using the straight-line method. The annual rates of amortisation applicable are based on the estimated useful lives as follows:

- Computer software / Website 5 years

There are no restrictions on title of Intangible Assets, nor are there any contractual commitments for the acquisition for such assets.

	Website	TOTAL
Cost or valuation		
As at 1 November 2025	29,120	29,120
Additions	0	0
Disposals	0	0
As at 30 June 2026	29,120	29,120
Accumulated amortisation		
As at 1 November 2025	0	0
Amortisation for period	5,973	5,973
Disposals	0	0
As at 30 June 2026	5,973	5,973
Net book value		
As at 1 November 2025	29,120	29,120
As at 30 June 2026	23,147	23,147

19 Accounts payable

Trade and other payables represent the liabilities for goods and services provided to Sexual Wellbeing Aotearoa prior to the end of the period that are unpaid. These amounts are usually settled within 30 days, are non-interest bearing, and are initially recognised at their fair value and subsequently at amortised cost.

	2026 eight months
Trade payables	592,715
Other payables and accruals	188,940
Total Accounts payable	781,656

20 Income in advance

	2026 eight months
Health New Zealand – STI/HIV Online	433,035
Ministry of Foreign Affairs and Trade grant for Healthy Families projects in Kiribati	593,820
Ministry of Foreign Affairs and Trade grant for ‘Planem gud family blong yumi’ project in Vanuatu	319,717
Ministry of Foreign Affairs and Trade grant for ‘Amanaki Lelei” project in Tonga	63,250
Ministry of Foreign Affairs and Trade grant for supporting IPPF’s Niu Vaka strategy in the Pacific	(49,943)
UNFPA New York 2023 grant for NZPPD Secretariat	9,230
UNFPA New York 2024 grant for NZPPD Secretariat	53,766
IPPF – SHRIE Pacific	669
IPPF – Manaaki	110,000
Professional Training Course Fees in advance	70,171
Bequests	3
Funds Alice Bush Scholarship	4,399
Estate of Jonathan Stanley Eugene Griffin	9,085
Spinks Employer Support	1,440
Spinks Clinical/Cultural Supervision	1,500
Total Income in Advance	1,620,141

21 Employee entitlements



All employee benefits of Sexual Wellbeing Aotearoa are expected to be settled within 12 months of reporting date, with the exception of Long Service Leave, and are measured at nominal values based on accrued entitlements at current rates of pay in accordance with Holidays Act 2003. These include salaries and wages accrued up to reporting date, plus annual leave earned and accrued to, but not taken at reporting date.

Wages, salaries, annual leave and sick leave

Liabilities for wages and salaries (including non-monetary benefits), annual leave and accumulating sick leave are recognised in surplus or deficit during the period in which the employee rendered the related services, and are generally expected to be settled within 12 months of the reporting date. The liabilities for these short-term benefits are measured at the amounts expected to be paid when the liabilities are settled.

Expenses for non-accumulating sick leave are recognised when the leave is taken and are measured at the rates paid or payable.

Long Service Leave

Employees of the Trust become eligible for long service leave after a certain number of years of employment, depending on their contract. The liability for long service leave is recognised and measured by:

- Adjusting current pay rates for inflation using NZ Government Treasury forecasts;
- Using discount factors to calculate the present value of future payments in respect of service provided by employees up to the reporting date using the projected unit credit method. NZ Government Treasury bond rates have been used for discount factors.
- Assessing the likelihood of the entitlement being consumed. Probability factors were calculated based on length of service data from the Trust's payroll system.

	2026 eight months
Current Liabilities	
Accrued salaries and wages	361,385
Annual leave	692,663
Long service leave	34,230
	1,088,278
Non-current Liability	
Long service leave	22,963
	22,963

Gains and losses on the long-term incentives are fully accounted for in the statement of comprehensive revenue and expenses.

22 Financial instruments



A financial instrument is any contract that gives rise to a financial asset of one entity and a financial liability or equity instrument in another entity. Financial instruments are comprised of trade debtors and other receivables, cash and cash equivalents, other financial assets, trade creditors and other payables, borrowings, and other financial liabilities.

Initial recognition and measurement

Financial assets and financial liabilities are recognised initially at fair value plus transaction costs attributable to the acquisition, except for those carried at fair value through surplus or deficit, which are measured at fair value and amortised cost. Financial assets and financial liabilities are recognised when the reporting entity becomes a party to the contractual provisions of the financial instrument.

Derecognition of financial instruments

Financial assets are derecognised when the contractual rights to the cash flows from the financial asset expire, or if Sexual Wellbeing Aotearoa transfers the financial asset to another party without retaining control or substantially all risks and rewards of the asset. A financial liability is derecognised when it is extinguished, discharged, cancelled, or expires.

Subsequent measurement of financial assets

The subsequent measurement of financial assets depends on their classification, which is primarily determined by the purpose for which the financial assets were acquired. Management determines the classification of financial assets at initial recognition and re-evaluates this designation at each reporting date.

All financial assets held by the Trust in the period reported have been designated into "amortised cost", being non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. After initial recognition these are measured at amortised cost using the effective interest method, less provision for impairment.

Subsequent measurement of financial liabilities

Financial liabilities are measured subsequently at amortised cost using the effective interest method, except for financial liabilities held for trading or designated at fair value through surplus or deficit, that are subsequently measured at fair value with gains or losses recognised in the surplus or deficit.

Sexual Wellbeing Aotearoa holds a number of financial instruments in the course of its normal activities. Details of the significant accounting policies and methods adopted, including the criteria for recognition, the basis of measurement and the basis on which income and expenses are recognised, in respect of each class of financial asset and financial liability are disclosed in the accounting policies.

Fair Value

The carrying amount of financial assets and financial liabilities recorded in the financial statements represents their respective fair values, determined in accordance with the Trust's accounting policies.

Liquidity Risk

Sexual Wellbeing Aotearoa manages its liquidity risk by managing cash flows and ensuring that adequate liquid funds are available at all times.

Credit Risk

Financial instruments which potentially subject the Trust to credit risk consist of bank balances, short term bank deposits and accounts receivable. The Trust does not require collateral or security to support financial instruments. The organisation's bank and short-term deposit accounts are held with ANZ, BNZ and ASB. Accounts receivable predominately comprise invoiced fees for services provided to clients and are considered fully recoverable.

Interest Rate Risk

Financial instruments which potentially subject the Trust to interest rate risk consist of bank balances and short-term bank deposits. Interest rate risk is limited by investing funds in term deposits for period where these funds are not required for liquidity purposes.

The table below shows the carrying amounts of Sexual Wellbeing Aotearoa's financial assets and financial liabilities:

	Carrying Amount		
	Financial assets		Financial liabilities
	Fair value	Amortised cost	Amortised cost
			Total as at 30 June 2026
Cash and cash equivalents	-	9,688,754	-
Term deposits	-	2,000,000	-
Receivables	-	221,184	-
Payables	-	-	(781,656)
	-	11,909,938	(781,656)
			11,128,282

23 Operating lease commitments

Sexual Wellbeing Aotearoa leases buildings across New Zealand for its clinics and National Office. Operating lease payments, where the lessors effectively retain all the risks and benefits of ownership of the leased items, are included in the Statement of Comprehensive Revenue and Expenses in equal instalments over the lease term. There are no assets acquired via finance leases.

Non-cancellable operating lease rentals are payable as follows:

	Premises 2026
No later than one year	1,209,650
Later than one year, but less than five years	1,476,927
Later than five years	303,328
Total	<u>2,989,905</u>

The premises leases are for up to 5 years. No leases contain contingent rental payments.

24 Related Party Transactions

Key Management Remuneration

Sexual Wellbeing Aotearoa classifies its key management as the Senior Leadership Team, including the Chief Executive.

Board members receive no remuneration.

	Remuneration 2026	No. of individuals 2026
Board of Trustees	\$0	8
Senior Leadership Team	\$1,024,201	8

25 Contingencies

Sexual Wellbeing Aotearoa has no contingent assets or liabilities as at 30 June 2026.

26 Subsequent events

There were no material subsequent events after the balance date.

Our people Ko mātou

Long serving staff members retire

- ▶ **Former National Nurse Advisor Rose Stewart** retired in September 2025 after a career with us spanning 38 years. She joined us as a nurse in 1988, served as National Nurse Advisor from May 2005–December 2022, then returned to her roots as a nurse at the Wellington Clinic until her retirement.
- ▶ **Sandie Halligan, our first Nurse Practitioner** and the first nurse in Aotearoa to receive Nurse Practitioner status in sexual and reproductive health, retired in July 2025. The Nurse Practitioner environment was very new and critiqued when Sandie qualified – so different to today when we have 5 Nurse Practitioners working across the organisation.
- ▶ **Senior Community Health Promoter Julia Drury** retired on 19 December 2025 after 34 years with us. Julia worked across the Waikato, anchored by her passion and enjoyment for education and community mobilisation.
- ▶ **Peg Pevats, the Senior Medical Receptionist** at our Whangarei Clinic, retired in April 2026 after 36 years working for us. Current and former staff attended a celebration of Peg’s long career.
- ▶ **Regional Manager for the Northern and Midland Region Rochelle Keane** left in April after working for us for more than 20 years. Rochelle began her career as a medical receptionist in our Hamilton Clinic, before becoming a Manager Clinic Services for the Midland Region and then moving on to the Regional Manager role.

New nurse practitioner – Carol Smith

- ▶ **Henderson-based Carol Smith** became our newest Nurse Practitioner in November 2025. Carol previously completed four years of study to gain her Master of Nursing and then worked alongside Doctor Shan McCann to advance her clinical practice.

New National Telehealth Manager

- ▶ **Marie Jupp** was appointed to the new role of National Telehealth Manager. Marie was previously our Quality and Compliance Advisor/Reimagining the Client Journey Project Manager. She brings a wealth of experience to this new role that puts her in a good position to continue growing our telehealth and Client Contact Centre services across the organisation.

Staff anniversaries

(year 1 July 2025 – 30 June 2026)

25 years

- ▶ Michele Grainger, Nurse – May 2026

20 years

- ▶ Beth Messenger, Medical Director – January 2026
- ▶ Vicki Grindley, Medical Receptionist – June 2026

15 years

- ▶ Joanne Macdonnell, Nurse – June 2026

5 years

- ▶ Sarah Bason, Clinical Information Specialist – January 2026
- ▶ Jaime Wiki, Nurse – March 2026
- ▶ Kimberley Hill, Nurse – May 2026
- ▶ Juliana Jones, Nurse – June 2026
- ▶ Rose Roberts, Nurse – July 2026

Board of Trustees

Te Poari Mana Kaupapa



► **Dr Jacky Percy.** Board Chair Te Heamana o te Poari



► **Dr Elizabeth McLean** (Waikato, Tainui, Ngāti Maniapoto, Ngāti Pukenga). Deputy Board Chair Te Heamana Tuarua o te Poari



► **Ian Olan**



► **Jackie Curtis**



► **Dr Nina Bevin** (Waikato, Tainui)



► **Stephanie Townsend**



► **Dr Geraldine Atchico**



► **Jack Ruddenklau** (Ngāti Tukorehe, Ngāti Raukawa, and Ngāti Raukawa ki te Tonga)

Senior Leadership Team

Te Tira Whakahaere Matu



- ▶ **Jackie Edmond.**
Chief Executive Mana Whakahaere
- ▶ **Kirsty Walsh.**
Director Clinical Services Hautū Ratonga Haumanu
- ▶ **Dr Beth Messenger.**
Medical Director Hautū Hauora
- ▶ **Julie Avery.**
Director of Nursing Hautū Tapuhi
- ▶ **Dr Tania Huria** (Ngāi Tahu, Ngāti Mutunga o Wharekauri).
Director Hauora Māori and Equity Tumuaki Hauora Māori, Mana Turite
- ▶ **Elizabeth Lowndes.**
Director Corporate Services/Director Health Promotion
Tumuaki, Ratonga Rangatōpū/ Tumuaki Whakatairanga Hauora
- ▶ **Hayley Hachey.**
Head of People and Capability Pou Tangata, Āheitanga hoki
- ▶ **Sue Reid.**
Communication Manager Kaitohutohu Tauwhitiwhiti