

2023

# ANNUAL REPORT



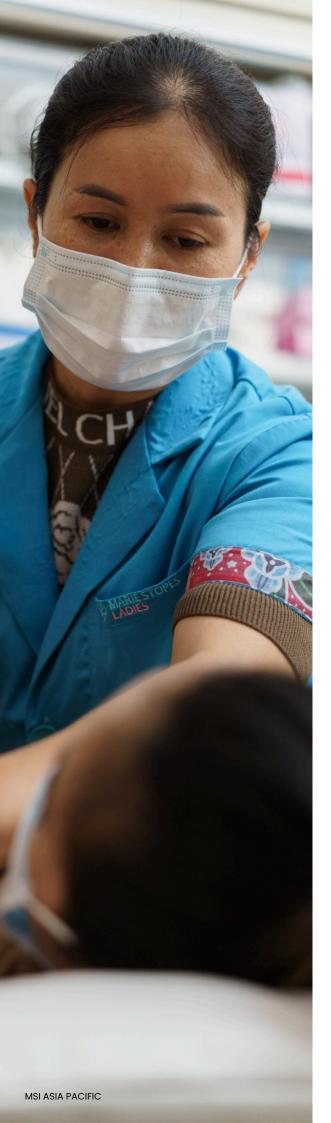
## ACKNOWLEDGEMENT OF COUNTRY

MSI Asia Pacific wishes to acknowledge the Traditional Custodians of the land on which we work, learn and live. We pay our respects to Elders past and present.

In 2024 and beyond, MSI Asia Pacific is committed to reflecting on its own history and practices in the context of meaningful recognition of Aboriginal and Torres Strait Islander people, including their communities' expertise in promoting holistic health and wellbeing.



All names and identities within this report have been changed for privacy and safety.



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The past year demonstrated that there is no post-pandemic 'Business As Usual' for MSI Asia Pacific: many of the countries we work in are still feeling the flow-on effects of the COVID-19 pandemic. Through the RESPOND project, we've built on innovations that began in response to the pandemic, including the infrastructure to provide flexible methods of service delivery.

We know that around 140 million women and girls across the Asia Pacific region lack access to modern contraception; this represents nearly 55 percent of the global unmet need. We will continue to creatively adapt our partnership models, service delivery frameworks and funding arrangements so we can respond to this urgent need with agility.

The coming decades will likely see the intensification of climate-related events, which pose a risk to the rights of women and girls everywhere. Operating in a region particularly vulnerable to the effects of climate change, MSI Asia Pacific is working hard to understand how we can best support communities to uphold reproductive rights and access in times of precarity.

When we imagine a world in which nobody is left behind, we are also vocalising our commitment to the Asia Pacific's most vulnerable people, including children, people with disabilities, and people experiencing sexual and gender—based violence. We recognise that access and choice aren't cookie—cutter concepts, and that consideration must be given to those least likely to have both. In 2023, we successfully implemented enhanced measures to protect vulnerable clients and ensure the accessibility of our services to all. We will continue to partner with organisations and lived experience advocates in this space.

I'm very proud of our passionate team, who work collaboratively to enhance sexual and reproductive health in the Asia Pacific and beyond. I'd like to acknowledge the hard work of our country teams who achieve incredible impact, often under very challenging circumstances. I'd also like to thank our Board, which provides the governance expertise needed to do this work sustainably, and key partners including the International Planned Parenthood Federation.

Into the future, I will work with the MSI Asia Pacific team to advance its role as a leader in sexual and reproductive health. We will always champion choice, bodily autonomy and rights as central to our approach. We will continue to partner, develop solutions and advocate for our vision: by 2030, no abortion will be unsafe and everyone will have access to contraception.

My sincere thanks to our donors and supporters, without whom this work would not be possible.





Since its inception in 1976, MSI has now served over 200 million clients – women who would otherwise not have access to critical family planning and women's health services. I'm proud to see how far we've come, humbled by knowing how much more there is to do, and excited for the developments that lie ahead.

In 2023 the Board of Directors made the strategic decision to shift the organisation's focus to leveraging more resources for our regional and global work. This shift was catalysed by several changes to the development landscape, including a greater recognition that program management should be locally led wherever possible. Merewyn Foran, our new Executive Officer, has led our strong team through these changes over the last year and we are excited about the energy and commitment they are bringing to our mission.

The Cambodia, Timor-Leste and Papua New Guinea programs are now managed in-country with regional oversight from the MSI Asia Support Team. We're pleased to see highly capable and experienced leaders applying local knowledge to program management.

This also means that MSI Asia Pacific acts as a support office and regional hub, with a greater focus on stakeholder and partner engagement, income generation, advocacy and raising awareness of the importance of reproductive health and rights in our region and globally.

Our shift has also enabled a greater focus on high—quality project management of funded activities for our donor partners including the Australian and New Zealand Governments and private donors. This focus helps us increase our capacity for scaling up our impact to meet an urgent need for reproductive healthcare, both regionally and globally.

In 2023 MSI Asia Pacific also took some important steps toward diversifying its funding sources in support of the work of our in-country partners, including leveraging our existing supporter base and reputation as an impactful organisation. We've invested in the team's fundraising capacity so that we can grow our networks of Australian supporters who align with our vision and values.

I genuinely believe that MSI's courageous approach makes a huge difference to the lives of women and their families. On behalf of the Board, I would like to thank our donors, partners, and supporters for making this essential work possible.

I'd also like to acknowledge the commitment and work of our teams both in Australia and our country partners. I'd like to thank my fellow Directors of the Board for their commitment to guiding MSI's strategic direction with integrity.

I have always felt very privileged to be part of this work. I hope that before long, and with your support, we will see a future where every single child comes into this world by choice, not by chance.



By the time you read this page, 48 women will have resorted to an unsafe abortion and 14 will have complications requiring urgent care.

When women can't access contraception or safe abortions, they pay with their health, potential, and even their lives.

We know that providing reproductive choice:

#### **PROTECTS HEALTH**

In countries where MSI works, our programs can reduce maternal deaths by 15%.

### BUILDS A GENDER-EQUAL WORLD

MSI has supported hundreds of millions of women's futures, giving them opportunities historically only accessed by men.

### HELPS GIRLS STAY IN SCHOOL

MSI supports 2.3 million adolescents with their reproductive choices every year.

### CREATES SUSTAINABLE COMMUNITIES

Our global work supports climate resilience and is fast-tracking sustainable development goals 1, 3 and 5— No Poverty, Good Health and Wellbeing, and Gender Equality.

The effects of our work are wide—reaching. For some, it means the ability to complete their education and start a career. For others, it means the ability to leave violent relationships. For many, it means the security needed to ensure the health and wellbeing of their existing families. For everyone, choice means bodily autonomy and the freedom to determine a healthy future for themselves, their families and their communities.



When we invest in reproductive health, we invest in women's and communities' wellbeing. Enabling women and girls to make decisions about their futures is one of the most cost—effective ways to enable healthier and more sustainable societies around the world.

That's why sexual and reproductive healthcare is an evidence-based 'best-buy' in international development: every AUD \$1 invested in contraception generates over AUD \$120 in health and socioeconomic gains.

It's also a smart health system investment: for every AUD\$1 dollar spent on improving access to family planning in low— and middle—income countries, maternal and newborn healthcare spending is reduced by AUD\$3.

Globally, providing universal access to contraception and reproductive health services will result in 640,000 fewer newborn deaths, 150,000 fewer maternal deaths and 600,000 fewer children who lose their mothers.

This means that in a single generation, societies can enjoy a positive demographic dividend, wherein women have fewer dependents and are in the workforce, driving faster economic growth. Families and communities can enjoy greater economic stability, better health and more opportunities.



This is the ripple effect of putting a woman in the driver's seat of her own future.



#### **Our mission**

Children by choice, not chance.

#### Our vision

By 2030, no abortion will be unsafe, and everyone will have access to contraception.

#### **Our values**

Mission-driven Accountable Client-centred Courageous Resilient Inclusive

#### The challenge

More than 257 million women and girls in low— and middle—income countries have an unmet need for modern contraception. Without contraception, they have no reliable way of preventing unintended pregnancies that could deepen economic insecurity, push dreams beyond reach, or even threaten their health and lives.

For lack of other options, many of these women and girls will turn to unsafe abortions. Globally, around 45 percent of abortions are unsafe, and 97 percent of these occur in low— and middle—income countries. Unsafe abortion is a leading—but preventable—cause of maternal deaths and morbidities. It jeopardises the wellbeing of not only women and girls, but entire families, communities and health systems.

#### Our response

In a changing world, we are courageous and innovative providers of choice. We work across 36 countries, providing contraception, safe abortions and post—abortion care. We are committed to smashing stigma and breaking down barriers. We go further than anyone else to reach people who would otherwise go without access to quality sexual and reproductive healthcare. We believe this care, without exception, is an essential human right.

MSI Reproductive Choices has provided lifechanging sexual and reproductive healthcare to millions of people worldwide for over 45 years. MSI Asia Pacific consists of a Melbourne-based support office and a network of dedicated programs and providers across the region, with additional program support from a London-based team. As part of the MSI Reproductive Choices partnership, in 2023 MSI Asia Pacific provided sexual and reproductive health (SRH) services in Timor-Leste, Cambodia, Papua New Guinea, and the wider Asia Pacific region.

We prioritise working in partnership with others to deliver services that are holistic and sustainable. We look to the future to understand emerging population, political and environmental dynamics so we can ensure that our work meets not only existing needs but the needs of vulnerable people in increasingly complex situations. We work closely with communities who have intersecting needs to ensure our services are truly accessible.

With the support of the Australian Government's Department of Foreign Affairs and Trade (DFAT), the New Zealand Government's Ministry of Foreign Affairs and Trade, and our generous donors and partners, we are addressing the urgent need for life-changing sexual and reproductive healthcare through service delivery, health system strengthening, and testing and scaling up innovative approaches.

In a world where sexual and reproductive rights are not yet guaranteed, we drive the conversation forward to create a future in which no one is left behind.

### **How MSI delivers services**

#### **Centres**

MSI clinics, also known as Centres, are a safe and welcoming environment where women, girls and their families can access reproductive health services from experienced clinical service providers. For many who attend our Centres, these are the only sexual and reproductive health services available in their areas.





MSI's Centres in Cambodia provide a vital in-person access point, responding to a high level of need for safe abortions and other services. For women like Than, accessing a safe abortion at an MSI Centre whilst in high school has enabled her to complete her education and begin a family at the right time for her.

#### **Outreach**

Our outreach service providers travel long distances, often for days through difficult terrain, to reach underserved communities.

In Covalima, Timor-Leste, the Chief of Tilomar Community Health Centre commented on the dramatic improvement in the uptake of modern contraceptive methods following MSI's outreach work in the remote region. Mr. Emilio noted the scarcity of both contraception providers and products – a critical gap that MSI's outreach activities are filling.





#### **MSI Ladies**

The MSI Ladies model meets the reproductive health needs of women and girls in areas underserved by traditional healthcare systems. MSI Ladies are women working to provide high-quality family planning services for their own community through door—to—door services in homes or in nearby public health facilities.

In Myanmar, MSI Ladies work to ensure that women in remote and conflict-affected regions can still access effective contraceptive methods. Connecting with an MSI Lady in Bhamo means that Sandar, a mother of three and a sole income earner, can continue to look after the wellbeing of her family in a period of increased volatility.



#### <u>Public sector</u> strengthening

We work with local health systems to ensure the capability and sustainability of sexual and reproductive health services. We provide technical assistance, training and mentoring, as well as embedding MSI staff in local health departments and clinics to provide specialist family planning services.





In Papua New Guinea, in addition to our strong partnership with key officials at the National Department of Health, we strengthened relationships with Provincial Health Authorities to build the sustainability of high-quality sexual and reproductive health services.

#### **Contact centres**

We have contact centres in Cambodia, Papua New Guinea and Timor-Leste and beyond, where trained team members answer client questions and provide referrals for family planning, sexual and reproductive healthcare, and other services.

MSI's Timor-Leste team operates a toll-free hotline, which provides counseling, schedules clinic appointments, and refers clients to other MSI channels. The hotline is also a platform where clients can freely and confidentially ask questions that they may not be able to find answers for elsewhere.



## Accreditation



As a member of the Australian Council for International Development (ACFID), MSI Asia Pacific is committed to upholding the standards of the ACFID Code of Conduct (The Code). MSI Asia Pacific adheres to the best–practice principles of The Code and the rigorous governance, financial reporting, management, and ethical practices required of it as an international development agency.

MSI Asia Pacific is accredited by DFAT, which is responsible for managing Australia's development program. To maintain accreditation, our systems, policies and processes are rigorously reviewed by the Australian Government. MSI Asia Pacific receives support through the Australian NGO Cooperation Program (ANCP).

Should you have any questions or feedback, please contact feedback@msiasiapacific.org.au



**Australian Government** 

**Department of Foreign Affairs and Trade** 





We're part of a global partnership achieving a huge impact for women and girls across the world. At MSI, we were proud to support over 93,000 women and girls with their reproductive choices every day in 2023.

## 2023 snapshot:

What MSI did in a year

23.3M

People accessed MSI's sexual and reproductive healthcare services 93,000+

People supported with reproductive choice every working day

4.6M

People supported with safe abortion or post-abortion care

2.3M

Adolescents reached at a critical juncture in their lives

37,500

Women's and girl's lives saved

16.5M

Unintended pregnancies prevented

**9M** 

Unsafe abortions prevented

13

High-impact reproductive rights policy wins

## Our latest Global Impact Report details our achievements



#### **We went further**

MSI's local teams served 12.8 million people with little or no prior access. Our outreach teams travelled on foot, by 4×4, and in boats to rural and poor communities where the need is greatest. Our pioneering geo-mapping enabled us to go to the very last mile.

#### We saved lives

4.6 million people turned to MSI for abortion or post—abortion care. In the countries where we work, pregnancy—related deaths would be 15% higher without our programs. In many MSI countries, unsafe abortion is a leading cause of pregnancy—related deaths. By offering abortion within the fullest extent of the law, as well as contraception and post—abortion care, MSI's providers are saving lives and protecting a woman's right to her own body.

## We enabled healthy futures

MSI supported 2.3 million adolescents. With sexual health information and care, we gave millions of young people the power to choose if and when to become pregnant, reaching them at a critical juncture in their lives.



## We provided choice in a changing world

MSI helped 4.5 million people who are living through climate disasters and conflict. Local MSI teams were on the frontlines of humanitarian crises in nine countries, from Ethiopia to Afghanistan. Our brave providers helped women avoid unintended pregnancy, distributed menstrual health kits and safe birth delivery kits, and provided care to survivors of sexual and gender-based violence.

## We planned for long-term transformation

We mentored 12,000 public sector workers. We're future-focused and innovating to build long-term access to reproductive choice. Last year, we partnered with 22 governments to train public sector workers — strengthening facilities, supply chains and national health systems.

For a copy of the full report, please contact info@msiasiapacific.org.au.



#### The challenge

Climate change is not just an environmental issue; it's a health crisis that disproportionately affects the most vulnerable members of society, particularly women and adolescent girls. The effects of climate change are already profoundly impacting the health and wellbeing of communities globally.

The Asia Pacific region faces particular vulnerabilities, including faster warming than the global average and an exceptionally high number of countries that are susceptible to sea level rises. For many of the women MSI serves, the climate crisis is an everyday reality.

Climate change escalates social, political, and economic tensions. It exacerbates existing inequalities, creating a significant risk to the livelihoods, health, and safety of women and girls. This compounds existing challenges in accessing SRHR services, leading to increased rates of maternal and infant mortality, unsafe deliveries, vulnerability to reproductive violence, unplanned pregnancy, and other reproductive health complications.

There is a significant overlap between populations who have an increased vulnerability to climate change and populations who face socioeconomic, cultural, and political barriers to the realisation of SRHR. The link between climate change and SRHR is an emerging area of research, which is only beginning to gain wider attention. Recognising and understanding these links is key to developing an effective climate response that prioritises gender equity and SRHR.

#### Our approach

MSI recognises the need to mitigate further changes to the climate, build adaptive resilience to change, and protect natural resources and biodiversity. Given the disastrous effect of climate change on health and inequity, as well as its disproportionate impact on women, girls, and vulnerable communities we serve in the Asia Pacific, addressing climate change is a key priority for MSI into the future.

While many of the global community's resources are rightfully directed toward climate change mitigation, MSI's efforts will be concentrated on supporting adaptation and resilience in the communities in which we work.

We firmly believe that population control or family planning programs that deny choice or place blame on underserved communities are unethical and undermine our mission.

MSI's contribution to the climate and conservation sector will be based on the provision of voluntary, quality SRHR services and as a champion for reproductive choice. We will focus on ways in which our work gives communities the agency to adapt and develop climate—resilient solutions. For example, with the support of ANCP, in Pakistan, we are partnering with organisations that have climate change expertise to deliver SRH information and resources to communities affected by the 2022 floods, and who are vulnerable to future disasters. This will support them to better prepare for future climate events and to proactively engage with climate adaptation/mitigation initiatives. Read more on page 26.

#### The benefit

Investments in SRHR support more resilient health systems, better health outcomes, and service delivery in the aftermath of disasters. The realisation of SRHR increases girls' and women's resilience to climate change.

Whether they are facing displacement or re-entering the workforce to support family income, reproductive choice supports women and girls to adapt. It puts them in control of their own reproductive choices and, by extension, their lives.

SRHR also has the potential to improve engagement in climate action. When women and girls can choose if and when they get pregnant, they will be more able to initiate and lead efforts in disaster preparedness, response and adaptation. Supporting the participation of local women and girls will enhance community resilience and ensure the prioritisation of women's health amidst climate challenges. It will also reduce barriers to taking on decision—making roles at higher levels, enabling women to sit at the table in finding climate solutions.

We're proud to be at the forefront of initial efforts to integrate SRHR into climate change adaptation, and we look forward to progressing our work in this space.





## **Project feature:**

### Partnering for Stronger Families

The Partnering for Stronger Families (PSF) project has been operating since 2017 and is now in its second phase. Funded by DFAT, PSF is managed through Abt Associates within the PNG Australia Transition to Health (PATH) Program.

The overarching goal of PSF is to reduce maternal, infant, neonatal and under—five mortality in Papua New Guinea. Outcomes that will contribute to achieving this goal include increased coverage and uptake of high—quality sexual reproductive health (SRH) and family planning (FP) services amongst women, men and adolescents aged 15–19. The project also supports activities that improve access for people with disabilities and survivors of sexual and gender—based violence (SGBV).

Activities that support these outcomes include:

- Service delivery support, training and quality assurance through existing service delivery mechanisms, including the National Family Planning Training Program (NFPTP)
- Improving partnership, collaboration and capacity at national and sub-national levels with government and other partners
- MSI hospital embedded providers, also known as MSI Ladies
- · Outreach teams
- MSI's Papua New Guinea contact centre





PSF currently operates in eight provinces: Morobe, Madang, Western Highlands Province, Simbu, Sandaun, East New Britain, National Capital District and Central. This geographic coverage ensures communities in rural and remote areas will have increased access to SRH information and FP services.

Sustainability and partnership are key priorities of PSF. MSI is working with the public sector in Papua New Guinea to provide training, supervision and an updated curriculum to ensure the continuation of public sector development beyond the life of the project.

Through PSF, MSI is working to increase access for populations that historically lack access to family planning services.

This is being done through partnerships with Organisations for People with Disabilities, such as Cheshire Disability Services. MSI has also increased collaboration with local schools and universities to reach more adolescents with awareness—raising activities and services on campus.

PSF also aims to promote awareness and appropriate referrals for survivors of sexual and gender—based violence (SGBV) through the development of skills and processes for clinicians who receive disclosures of violence from clients.

#### Challenges and leasons learned

Infrastructure and geographical challenges continue to impact MSI's work in Papua New Guinea. Air travel is often the safest or only travel option for meetings and service delivery, which means that MSI teams and partners often work around the unreliability of domestic flights. Fuel shortages also further limited road travel in 2023. MSI mitigates these issues through flexible approaches to scheduling.

In 2023, social norms and attitude barriers continued to impact the ability of vulnerable groups to access SRH/FP services. MSI is working to reduce these barriers by delivering specialised training to service providers, and integrating inclusive approaches across all services and communication platforms. In 2024 MSI in Papua New Guinea will revise its Gender, Equity, Disability and Social Inclusion (GEDSI) strategy and integrate findings from its GEDSI impact assessment.

#### Key achievements for PSF in 2023 include:

- A total of 38,458 people accessed MSI services in the respective eight project provinces, exceeding the target by 190%.
- The number of family planning services provided in project provinces was 44,961, exceeding the target by 183%.
- Out of the total number of services provided, approximately 1,698 were adolescents aged 15–19.
- The total number of Couple Years Protection\* generated was 68,890.
- \* Couple years of protection (CYPs) is a measure that estimates the protection from pregnancy provided by contraceptive methods during a one-year period.









In Cambodia, the World Health Organisation estimates up to 16% of the population may live with disabilities. As in the rest of the world, in Cambodia, people with disabilities face complex challenges including systemic discrimination in access to education, employment, justice, transport, and healthcare.

Women and girls with disabilities also face additional discrimination and barriers when accessing services compared to men with disabilities.

Due to the intersection of gender and disability, they are especially vulnerable to SGBV. For all these reasons, timely access to high-quality SRH/FP is vital for girls and women with disabilities.

MSI is working to ensure that Cambodian women and girls with disabilities aren't left behind. On World Contraception Day in 2023, MSI hosted and live-streamed a radio show titled 'Family Planning and Women's Empowerment' to raise awareness about sexual and reproductive health and the rights of people with disabilities. The broadcast reached over 6,500 people. This activity was in collaboration with an organisation for people with disabilities, Voice of People with Disability (VPD).

MSI has also developed a partnership with Cambodian Disabled People's Organisation (CDPO) to provide fee waivers and transportation costs for people with disabilities who can't afford to pay for services. CDPO has strong links with communities across the country, including people with disabilities in rural areas. Through this partnership, MSI is also investing in disability—inclusive training for its staff and providers.

Working with CDPO and VPD enables MSI to better connect and communicate with people with disabilities, with expertise from trusted organisations.

#### Leakena's Story

"My name is Leakena. I'm 25 years old and I was born with a disability. I have a speech impediment, and my hands and feet are bent. I tremble when I walk, and I eat using my feet. I have no relatives to support me."

Leakena has no regular income and is supported by her community. She currently lives for free in the spare room of a generous homeowner.

She recently had a challenging experience, which left her in a difficult position.

"I met a man, and we had a ceremony to be recognised by everyone as husband and wife. After two months, he left me."

Leakena was two months pregnant and unwell. When her husband left her, she was at a loss for how to proceed.

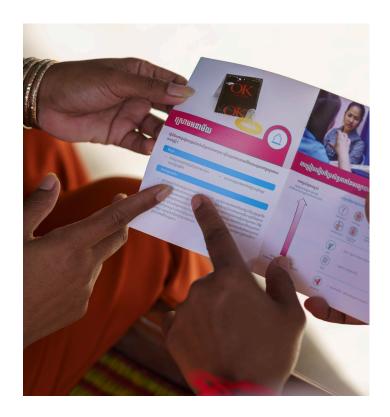


"I knew I couldn't take care of a child, because I'm relying on other people's kindness in giving me food."

After taking the brave step of speaking to community authorities and contacting an organisation that works with women, she was given 100,000 riel (AUD \$37) to access a safe abortion. The organisation took her to an MSI clinic in Siem Reap, which provided her with a safe and empathetic service even though she couldn't pay the full fee.

"I am so grateful for the MSI Clinic for providing services without any discrimination to women with disabilities like me because without MSI's help, I don't know how I would survive."

MSI is proud to support women with disabilities like Leakena, who deserve to live with dignity, security and choice.



## **Project feature:**

## Supporting Sexual and Reproductive Health and Rights



The Supporting Sexual and Reproductive Health and Rights in Papua New Guinea and Timor-Leste (SSRHR) project is funded by the New Zealand Ministry of Foreign Affairs and Trade (MFAT). It aims to prevent unintended pregnancies and support people to achieve their desired family size.

The five-year project is implemented through MSI in Papua New Guinea and Timor-Leste. It is part of MFAT's larger five-year (2022-27), multi-country \$30 million NZD investment titled Supporting Improved SRHR for People in Pacific Island Countries. This overarching investment is intended to support improved health outcomes through Pacific peoples' full realisation of SRHR.

Through SSRHR, MSI Timor-Leste is collaborating with the Ministry of Health to provide high-quality SRH education and services in the Municipality of Manatuto via an MSI Lady, who is embedded at the Community Health Centre. It also provides services in the remote Municipality of Covalima via an Outreach team, which holds mobile clinics to enable access for underserved communities.





MSI in Papua New Guinea is working collaboratively with the government, local partners and civil society organisations to deliver services at clinics in Lae and Port Moresby. These clinics typically serve urban and peri–urban clients. Through SRHR, five MSI Ladies also work in the Enga, Kimbe, Kavieng, Arawa and Buka provinces.

The MSI Ladies are embedded within the post-natal wards of main referral hospitals, where they typically reach clients who are more rural or remote and may otherwise lack access.









## Challenges and leasons learned

Recognising a high level of demand at service delivery sites across Covalima, MSI in Timor—Leste will be recruiting an additional provider in 2024. This will enable MSI to better meet demand for services and will allow providers to undertake regular training without gaps in service delivery.

In Papua New Guinea, challenges associated with supplier contracts, including for the refurbishment of the Lae Centre, resulted in delays. Moving forward, MSI in Papua New Guinea plans to hire external support for work outside of standard operations to increase capacity and reduce delays where possible.

#### Key achievements for PSF in 2023 include:

- 4,892 family planning services were provided.
- An estimated 11,675 CYPs were generated.
- SSRHR services contributed to averting an estimated 5,443 unintended pregnancies, 717 unsafe abortions, and five maternal deaths.







#### The challenge

MSI faced many challenges in providing support for SGBV survivors in Timor-Leste. Firstly, the social stigma related to SGBV discourages clients from openly talking about their experiences or seeking support, which has a large impact on MSI's ability to provide much-needed basic frontline care and referrals to survivors.

With limited formal training, service providers lacked knowledge of how to identify and respond to SGBV cases. Available tools for reporting and information management needed further development.

Additionally, staff found it challenging to prioritise SGBV responses given their many other important areas of work.

At the start of these donor-funded activities, there were low numbers of reported SGBV conversations and referrals, even though there are high country-level estimates of gender-based violence in Timor-Leste: over half of Timorese women aged 15–49 are believed to have experienced physical or sexual violence by a male partner.

The MSI team in Timor-Leste reflected on this situation and adapted their approach to training, community engagement and awareness raising over the project's life, resulting in an increase in the number of SGBV referrals reported and support being offered to SGBV survivors.

## Developing team and organisational capacity

In Timor-Leste, MSI has incorporated training and capacity-building of gender, equality, disability and social inclusion (GEDSI) and SGBV to all service delivery channels, especially for Outreach and MSI Ladies under the RESPOND Project. The training focused on how to identify, record and support clients who disclose SGBV using the World Health Organization (WHO) LIVES counselling approach.

An emphasis was also placed on better understanding staff experiences with SGBV in their work to ensure any training is fit for purpose. During monthly team meetings, the Clinical Quality team emphasised the importance of SGBV services and reporting. It also held discussions to better understand the challenges Timor—Leste staff faced in this work.

Based on these discussions, refresher training on SGBV was provided to build service providers' capacity and confidence. Through MSI's ongoing supportive supervision, providers were offered guidance on how best to encourage survivors to disclose in a respectful and 'do no harm' approach. Additionally, a refresher training on the importance of accurately recording SGBV data within organisational information management systems was provided.

Service providers, particularly those reporting higher numbers of SGBV cases, facilitated cross—team learning by sharing their experiences on how to successfully support survivor disclosures and referrals, with a focus on sensitive communication, client rights and needs.

At an organisational level, the MSI GEDSI and SGBV focal points in Timor-Leste coordinated with service delivery channel leads and regional coordinators to ensure that SGBV was included in annual goalsetting for providers and teams.

## Increasing community knowledge

At a community level, SGBV sessions were delivered as part of mother's support groups and youth groups. Participants learned about SGBV and their right to live free from coercion or violence. They were also provided with contact information for specialist SGBV services, should they or members of their community experience SGBV.

During one youth engagement with a large group, staff noted the influence of social norms in relation to SGBV, particularly for male participants. These resulted in limited involvement from some members, as they appeared to consider SGBV a normal part of relationships. This experience provided important context for Timor—Leste staff around tailoring approaches to future work with young males.

However, during the training, six cases of SGBV were safely disclosed. The majority related to psychological and emotional violence, speaking to the high level of need within the community.

Overall, with an increase in staff skills and knowledge, and using tools such as the WHO LIVES approach and MSI SGBV referral cards, providers saw a 245% increase in the number of clients safely disclosing SGBV, receiving counselling and referral information for specialised care.







#### **Looking forward**

The SGBV training and focus have been crucial to building service providers' knowledge, capacity and organisational focus. Service providers now know how to best support survivors and refer them to specialist services.

However, SGBV survivors still struggle to disclose incidents and take referrals for specialised support. Most clients disclose emotional abuse but will often deny physical violence due to the social stigma that surrounds SGBV. To address this ongoing challenge, MSI will continue to educate community members and raise awareness about SGBV, whilst providing on—the—job SGBV training and guidance for service providers.

At a sector level, MSI in Timor-Leste will continue to be an active member of the GBV national network, taking a sector-wide approach to tackle the ongoing challenges related to SGBV through collaboration with partners, and sharing of learnings and expertise. It will continue to advocate at the national level for strengthening SGBV prevention and response mechanisms.

## **Project feature:**

## Australian NGO Cooperation Program

The Australian NGO Cooperation Program (ANCP) is a unique model focused on enabling innovative program design and activities. To participate, Australian NGOs must be accredited by DFAT, which is a rigorous process with strong compliance requirements.

MSI's ANCP projects operate in Cambodia, Nepal, Pakistan and Papua New Guinea.

#### Cambodia

Expanding telehealth access and demand

In recent years, MSI Cambodia's healthcare providers have observed increases in the number of women seeking post—abortion care, and in the number of clients travelling a large distance to access a safe abortion.

In response to these trends and with the support of DFAT's RESPOND program, MSI in Cambodia began a pilot in November 2021 providing abortion and short–term FP services via telemedicine. This Contact Centre model proved to be viable and meeting an important need, including acting as a vital access point for in–person SRH services.

ANCP funding has supported MSI in Cambodia to scale up and permanently integrate the Contact Centre model into its strategic approach.

Funding from a private donor (G Smith) was utilised to meet the ANCP matched funding requirement, and as such, this project is considered co-funded.



Since the project began, ANCP and a private donor have enabled a transition toward sustainability and enabled MSI to establish two new Centres in Cambodia. It has also supported service diversification through equipment and laboratory facility upgrades, and capacity building of clinical staff. In addition, it has supported MSI's fee—waiver system, which promotes health equity by ensuring access to SRH/FP for marginalised groups.

MSI Cambodia's Centres now operate as a social enterprise, which aims to be financially self–sustainable by 2028.

Notably, with the support of ANCP funding, MSI's program in Cambodia achieved a huge milestone in its complete transition to Cambodian leadership.



#### Nepal

Advancing the sexual and reproductive wellbeing of remote Nepalese communities: a sustainable approach

In Nepal, the rate of contraceptive prevalence has stagnated due to a significant accessibility gap, including an urban/rural divide. Rural women have fewer opportunities to access SRH/FP services. Cervical cancer – the most common form of cancer among Nepalese women aged 34–64 – too often remains undiagnosed and untreated. Rural women in Nepal also experience higher rates of uterine prolapse.

With support from ANCP, MSI in Nepal is addressing these issues by increasing access for people living in Nepal's remote communities. Activities include training and resourcing MSI Ladies and Youth Mobilisers, supporting high—quality service delivery through government health facilities via MSI's public sector strengthening channel, and improving the ability of MSI's Nepal contact centre to provide SRH/FP information and referrals to clients.



#### **Pakistan**

Building climate-resilient communities and meeting SRH needs in Pakistan

With a population of over 240 million, Pakistan is the world's fifth most populous country. With one of the highest rates of urbanisation in South Asia, it is extremely vulnerable to floods and other climaterelated disasters.

This ANCP project is supporting MSI in Pakistan to develop community resilience in areas prone to flooding and other climate disasters.

In collaboration with a local organisation that has expertise in climate change, the project is delivering joint education sessions on climate change and SRH/FP in Larkana district, a community impacted by floods in the monsoon of 2022 and vulnerable to future climate—related disasters.

MSI-trained health educators and service providers are supplying menstrual hygiene kits and SRH/FP services, empowering community members to better adapt to the impacts of climate change. Together, both organisations will advocate for the inclusion of SRH/FP in future climate change response activities while building evidence around the importance of SRHR in climate change adaptation and resilience.

#### **Papua New Guinea**

Sustainable and accessible SRH information and services in Port Moresby and Lae

MSI's Port Moresby and Lae Centres are critical to meeting the huge need for high-quality SRH/FP and allied services in the country. The organisation's strategic vision includes these centres as premier 'Centres for Excellence' in Papua New Guinea.

With the support of ANCP, MSI in PNG undertook a transformation of both centres to achieve state-of-the-art facilities with enhanced service capabilities.

Despite ongoing impacts of the COVID-19 pandemic, the project achieved significant results. Under this project, MSPNG has relocated the Lae Centre to a new site and refurbishments are underway to establish a laboratory service for a full range of services. The Port Moresby Centre was transformed into a state-of-the-art clinic, which is working toward achieving financial sustainability.

To improve awareness and access for vulnerable groups, MSI built partnerships with organisations that support people with disabilities and SGBV survivors, establishing cross-referral pathways. Additionally, a disability access audit was conducted for both Centres, and a disability action plan was developed. ANCP funding also supported clients who were unable to cover the full cost of services through MSI's fee-waiver system for post-abortion care (PAC) and other core services.



## **Project feature:**

#### RESPOND

The RESPOND project (Responding with Essential SRHR Provision in New Delivery Mechanisms) is a multicountry project, implemented and managed by MSI in partnership with the International Planned Parenthood Federation (IPPF). Under RESPOND, MSI has implemented activities in Timor-Leste, Bangladesh, Papua New Guinea, Vietnam, Cambodia, Pakistan, Myanmar and Nepal.

RESPOND began in 2021 and was designed to run for a two-year period. It was funded under the Australian Government's Indo-Pacific SRHR COVID-19 Surge Response (C-SURGE) program. RESPOND sought to address SRH/FP challenges brought about by the COVID-19 pandemic and the critical gaps that emerged in burdened health systems across the Asia Pacific region.



The project concluded in Timor-Leste and Bangladesh in mid-2023, while Nepal and Pakistan concluded in January 2024. Activities in other participating countries have continued into 2024 under an extension.

In 2023, with the support of RESPOND, MSI has continued its focus on delivering high-quality, equitable, and accessible SRH/FP services across the Asia Pacific region. It has also prioritised expanding access to services for marginalised and high-impact clients. For example, in Vietnam, MSIV focuses on engaging youth and adolescents, hosting dedicated youth engagement activities such as SRHR information sessions for university students to discuss gender equality, dispel misconceptions about family planning methods, and strengthen SGBV prevention in a judgement-free environment.

MSI's programs in Myanmar, Cambodia, Nepal and Vietnam delivered capacitybuilding activities for healthcare providers to improve clinical skills in areas such as antenatal care, cervical cancer screening, and STI testing.

These activities also focused on building non-clinical skills and knowledge, including SGBV and mental health support, through training, for example, in Papua New Guinea and Pakistan.

During 2023, all MSI country programs promoted accurate and reliable SRH/FP information via an effective mix of online and offline activities. Project activities helped to combat misinformation, dispel misconceptions about SRH/FP, and promote the uptake of services. In Pakistan, Female Heath Educators conducted door—to—door visits in key communities to raise awareness and refer clients for FP services at Suraj Primary Healthcare Clinics—an MSI social franchise brand.

## Challenges and lessons learned

In Myanmar, escalating civil conflict disrupted FP services provided by MSI Ladies in conflict—affected areas like Lashio, Nangkham, and Muse. The MSI Ladies operating in these areas mitigated the disruption to service delivery by adapting their approach, including providing longer—lasting contraception to clients and creating greater flexibility in their operating hours. The MSI Ladies also conducted informal SRH/FP awareness sessions for the community, seeking to bridge healthcare gaps caused by the conflict.

MSI in Myanmar also continues to focus on reaching people digitally, using social media to disseminate crucial SRH/FP information.

The team has observed higher impact with online SRHR content that uses visually engaging and interactive materials. This understanding has allowed MSI to drive increased engagement and expand reach across its online platforms.

In Vietnam, MSI continues to engage with local civil society organisations (CSOs) to promote SRH service provision and disseminate communication on SRH, SGBV and gender equality. MSI has observed that open coordination between MSI and CSOs fosters trust and a willingness to develop collective solutions. In addition, these strong and collaborative relationships provide opportunities to leverage local financial and operational resources to support SRH service provision, and to improve access for marginalised people such as SGBV survivors, people from diverse ethnic groups, and people with disabilities.



#### Key achievements for RESPOND in 2023 include:

- From February 2023 to January 2024, participating country programs averted an estimated 159 maternal deaths and prevented an estimated 108,381 unsafe abortions.
- 574,921 SRH services were provided to clients across the same period.

As the RESPOND project moves into its final months in 2024, MSI will continue efforts to enhance the sustainability of project achievements, including strengthening the capacity of local and national staff and healthcare providers, advocating for an enhanced focus on SRH/FP in national health priorities, and collaborating with government and civil society organisations for enhanced SRH/FP access in response to high unmet need across the region.



## Project feature: SUPPORT/EQUI-T+



The Government of Timor-Leste, in its National Health Sector Strategic Plan 2011-2030, identifies maternal health as a key priority area due to a high maternal mortality rate in the country. Key objectives set by the Government of Timor-Leste in its plan to achieve its national health goals include strengthening health system management, ensuring access and quality of primary health services (with a particular focus on the needs of children, women and other marginalised groups), and investing appropriately in health infrastructure such as health facilities, medical equipment and supplies.

The SUPPORT project currently supports MSI's Dili Centre, its Contact Centre, Outreach teams and MSI Ladies. It also supports Public Sector Strengthening across sites in Dili, Viqueque, Ermera and the Special Administrative Region of Oecussse Ambeno (RAEOA).

The project is funded by DFAT via the Australian Government's Australia Timor-Leste Partnership for Human Development (PHD) program.

Aligned with the objectives of the Government, SUPPORT is strategically designed to enhance the quality, accessibility, and inclusiveness of Timor-Leste's primary health care system by building the capacity of facilities to deliver high-quality and equitable SRH/FP services throughout Timor-Leste.

The EQUI-T+ project, also funded by DFAT, shared the objective of reducing maternal deaths by ensuring universal access to reproductive health services for women in Timor-Leste. As the project finished its activities in June 2023, the remaining funding was then integrated into the SUPPORT project, allowing it to continue operations as one cohesive program.

Some of the achievements of the EQUI-T+ project during 2023 include the successful delivery of a 'Clinical Quality in Health Systems' workshop by MSI for stakeholders from Timor-Leste National Public Institute for Health, Ministry of Health, and Partnerships for Human Development, and the training of Community Health Volunteers in community mobilisation for SRH/FP in Ermera, Viqueque and the RAEOA. MSI also strengthened relationships with the Maternal and Child Health Chief of Department.





## Challenges and lessons learned

In July 2023, a new Timor-Leste national government was sworn in, with a primary emphasis on enhancing community health services. While MSI's operations in municipalities have continued as planned, an ongoing restructuring process for the Ministry of Health has necessitated an agile approach to national coordination and strategic discussions.

To enhance its PSS work, MSI in Timor Leste continues to actively engage all levels of government. MSI recognises the pivotal role of District Public Health Officers (DPHO) in SRH/FP training and actively involves them wherever possible. This serves as a strategic approach to build capacity and engagement at all levels of government, and to cultivate a sense of ownership among DPHOs, contributing to the overall success of SRH and FP programming.

#### Key achievements for SUPPORT/EQUIT+ in 2023 include:

- 54,056 family planning services were provided through an MSI-supported service delivery point.
- 66,579 CYPs were generated.
- 37,121 client visits were conducted, through which a client received an family planning service.

Notably, in 2023, MSI in Timor-Leste successfully transitioned its outreach services in RAEOA to government providers, meaning that services at these five Community Health Centers and 17 Health Posts are now exclusively managed by the government. MSI's Public Sector Strengthening program provides ongoing support.



### **Fast Finance**



MSI Asia Pacific is part of the global MSI Reproductive Choices partnership, which generates income primarily composed of grants from institutional donors and private foundations and revenue generated from the partnership's commercial operations.

In 2023, MSI Asia Pacific secured total revenue of \$15.5m. DFAT and Other Australian grant income made up 88% of total revenue. Donation income decreased to \$712k from \$1.16m in 2022. MSIAP will focus on growing public donations income and renewing key institutional funding contracts in 2024.

MSIAP recorded total expenditure of \$14.8m. International Programs expenditure accounted for 92% (\$13.6m) of total expenditure. MSIAP continues to maintain low support office costs, with Administration costs accounting for 3% of total expenditure and fundraising costs accounting for 4% of total expenditure. MSIAP expects to increase fundraising costs and associated public donation income in 2024.

In 2023, MSI Asia Pacific secured total revenue of \$15.5M

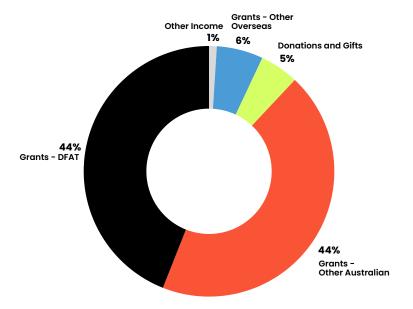
Total equity has increased to

\$4.8M

Due to MSIAP reporting a surplus of \$760k in 2024. Restricted reserves are not available for general use as they represent prior year donations that are tied to project implementation in future years.

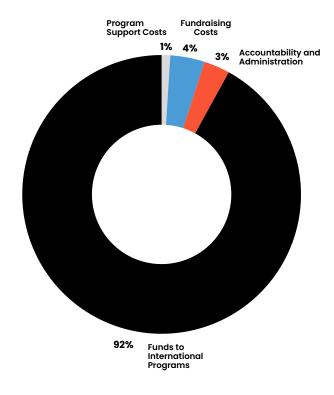
The Board and management at MSIAP will continue to monitor the organisation's financial situation, ensuring both a healthy level of equity while maximising our contribution to the global mission.

#### Revenue in 2023



REVENUE		2023
Donations and Gifts	5%	\$711,984
Grants - DFAT	44%	\$6,881,465
Grants - Other Australian	44%	\$6,869,121
Other Income	1%	\$226,710
Grants - Other Overseas	6%	\$849,593
Total Revenue		\$15,538,873

#### **Expenditure in 2023**



EXPENDITURE		2023
Program Support Costs	1%	\$131,113
Fundraising Costs	4%	\$525,836
Accountability and Administration	3%	\$520,434
Funds to International Programs	92%	\$13,623,968
Total Expenditure		\$14,801,351

The above revenue and expenditure graphs represent our various components of income and expenditure as a proportion of the totals. Each category is adapted from the summary financial statements on the following page and is based on the definitions described in the Australian Council for International Development (ACFID) Code of Conduct.

#### Income Statement for the Year Ended 31 December 2023

REVENUE	2023\$	2022\$
Donations and gifts		
Monetary	711,984	1,155,846
Grants		
DFAT	6,881,465	10,398,757
Other Australian	6,869,121	5,137,175
Other overseas	849,593	662,523
Investment income	223,572	223,606
Other income	3,138	201,925
Total Revenue	15,538,873	17,779,832

EXPENDITURE	2023\$	2022\$
International Aid and Development Programs Expenditure		
Funds to international programs	13,623,968	22,798,266
Program support costs	131,113	924,464
Fundraising costs		
Public	343,688	427,800
Government, multilateral and private	182,148	259,099
Accountability and administration	520,434	1,833,089
Total International Aid and Development Programs Expenditure	14,801,351	26,242,718
Exchange rate (gain)/ loss	(22,837)	(56,981)
Impairment of branch		1,256,906
Total Expenditure	14,778,514	27,442,643
Excess / (shortfall) of revenue over expenditure	760,359	(9,662,811)
Other comprehensive (loss) / Income		104,971
Total Excess / (shortfall) of revenue over expenditure	760,359	(9,557,840)

These figures above and on the next page have been extracted from the Audited Financial Statements for the year ended 31 December 2023. For a copy of this report, please call us on 1300 478 486 or email <a href="mailto:info@msichoices.org.au">info@msichoices.org.au</a>.

These financial statements comply with the presentation and disclosure requirements of the ACFID code of conduct. Please refer to the ACFID Code of Conduct for more information. Further financial information is available at the Australian Charities and Nonprofits Commission (ACNC).

#### Balance Sheet as at 31 December 2023

ASSETS	2023\$	Restated 2022 \$
Current assets		
Cash and cash equivalents	5,279,691	4,134,057
Trade and other receivables	219,033	197,524
Other financial assets	8,000,000	12,500,000
Total Current Assets	13,498,724	16,831,581
Non-Current Assets		
Property, plant and equipment	9,681	18,617
Total Non-Current Assets	9,681	18,617
Total Assets	13,508,405	16,850,198

LIABILITIES		
Current liabilities		
Trade and other payables	3,793,033	4,111,509
Unearned grants	4,478,823	8,146,521
Provisions	120,703	468,564
Total Current Liabilities	8,662,559	12,726,594
Non-Current Liabilities		
Provisions	37,799	75,916
Total Non-Current Liabilities	37,799	75,916
Total Liabilities	8,700,358	12,802,510
Net Assets	4,808,047	4,047,688

EQUITY		
General Reserves	0	(40,552)
Restricted Reserves	38,209	177,785
Retained Earnings	4,769,838	3,910,455
Total Equity	4,808,047	4,047,688

#### Statement of Changes in Equity for the Year Ended 31 December 2023

	Retained Earnings \$	Foreign Currency Translation Reserves \$	Designated Funds Reserves \$	Total \$
Balance at 31 December 2022	3,910,455	(40,552)	177,785	4,047,688
Items of other comprehensive income				
Excess of revenue over expenses	760,359			760,359
Other amounts transferred (to) from reserves	99,024	40,552	(139,576)	0
Balance at 31 December 2023	4,769,838	0	38,209	4,808,047

## Independent auditor's report





#### REPORT OF THE INDEPENDENT AUDITOR ON THE SUMMARY FINANCIAL STATEMENTS TO THE MEMBERS OF MSI ASIA PACIFIC

#### Opinion

The summary financial statements, which comprise the summary balance sheet as at 31 December 2023, the summary income statement and the summary statement of changes in equity for the year then ended, are derived from the audited financial report of MSI Asia Pacific for the year ended 31 December 2023.

In our opinion, the accompanying summary financial statements of MSI Asia Pacific are consistent, in all material respects, with the audited financial report, in accordance with the basis described in the summary financial statements.

#### Summary Financial Statements

The summary financial statements do not contain a summary statement of cash flows or all the disclosures required by Australian Accounting Standards-Simplified Disclosures. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial report and the auditor's report thereon. The summary financial statements and the audited financial report do not reflect the effects of events that occurred subsequent to the date of our report on the audited financial report.

#### The Audited Financial Report and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial report in our report dated 31 December 2023.

#### Directors Responsibility for the Summary Financial Statements

The Directors are responsible for the preparation of the summary financial statements that gives a true and fair view in accordance with Australian Accounting Standards and for such internal control as the Directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are consistent, in all material respects, with the audited financial report based on our procedures, which were conducted in accordance with Auditing Standard ASA 810 Engagements to Report on Summary Financial Statements.

SW Audit

Chartered Accountants

Hayley Underwood

Partner

Melbourne, 13 May 2024

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## Support our work

If you would like to support our work, please visit msichoices.org.au or call 1300 478 486. All donations of AU\$2 or more are tax deductible.

## Get in touch

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