



Auckland
Women's
Health
Council



ANNUAL
REPORT
2025

Reflecting on 2025

The year has been marked by stress, constraint and, at times, a sense of despair within Aotearoa New Zealand's health system. Structural reform, funding constraints, workforce shortages, and increasing pressure on services, combined to create an environment in which access to timely, affordable and equitable care became increasingly uncertain. The gap between what is promised and the lived experienced has grown more visible.

Within this shifting landscape, the Auckland Women's Health Council continued its work as an independent voice for women's health, grounded in evidence, shaped by advocacy, and guided by a commitment to equity – particularly where inequities persist and deepen.

Public reporting throughout the year has pointed to a system under sustained pressure. Cost-cutting measures have been accompanied by hiring freezes, workforce reductions, and ongoing staff shortages. The effects are tangible: longer waits for specialist care, delays in diagnosis and treatment, and a workforce under increasing strain. These are not isolated issues but part of a broader pattern that speaks of a system struggling to meet demand.

For women, these pressures have not been felt equally. Longstanding inequities remain deeply embedded, particularly for Māori and Pasifika communities. Barriers to access persist, outcomes are poorer, and experiences of institutional racism continue to shape interactions with health services. These realities are not new, but in a constrained environment, and as acknowledgement and honouring of Te Tiriti o Waitangi is increasingly removed from legislation and regulation, they risk becoming more entrenched rather than addressed.

The Council has consistently drawn attention to these disparities, emphasising that equity must remain central to any meaningful reform.

In 2025, the Council's work, communications and collaborations provided a clear and consistent lens on these issues. In its submission on proposed amend-

ments to the Pae Ora (Healthy Futures) Act, the Council raised concerns about the direction of legislative change and its implications for equity, transparency, and public accountability. At the heart of this response was a simple but critical position: that a strong, publicly accountable health system must remain grounded in Te Tiriti and actively work to address inequities in health outcomes. This work also reflected the Council's role in ensuring that women's perspectives, including those of wāhine Māori and wāhine Pasifika, are not marginalised.

Our engagement online, especially social media, enabled more immediate and responsive communication, to respond quickly to emerging issues – workforce shortages, service changes, or gaps in care – while also sharing research, lived experiences, and informed commentary. These spaces have become a way to both reflect and connect, linking individual experiences to wider systemic concerns.

The picture that emerges from 2025 is of a health system at a crossroads. We can only hope our policy makers and decision makers will set us on the right path towards a patient-centred health system that will ultimately work towards health and well-being for all New Zealanders.

In this context, independent, evidence-based advocacy matters. It creates space for scrutiny and lived experience, and for uncomfortable truths to be named. We continue our work with clarity and purpose. By documenting pressures, challenging inequities, and advocating for structural change, together with other individuals and organisations, we have helped ensure that women's health remains on the agenda.

This 2025 annual report reflects that work. As we approach our 38th anniversary the task is clear: to contribute to making our health system equitable, accessible, responsive, culturally safe, affordable and accountable to all women in Aotearoa New Zealand.

We remain a voice for women, and a voice for change.

This Annual Report was presented at the Auckland Women's Health Council Annual General Meeting on the 26th of March 2026, and covers the 2025 calendar year.

Our Work

Newsletters

The [AWHC Newsletter](#) remained an important conduit between the Council and our constituency in 2025, functioning both as an advocacy platform connecting women across Aotearoa New Zealand with pressing health issues, and providing researched, evidence-based articles on specific women’s health concerns. The *Newsletter* also plays a unique role in translating complex health system challenges into accessible, pragmatic narratives for the women of Aotearoa New Zealand.

The [April edition](#) focussed on systemic concerns, questioning the direction of the health system and highlighting inequities in areas such as bowel cancer and regulatory oversight. [July’s edition](#) presented explicit advocacy, with coverage of endometriosis, workforce pressures, and the real-world consequences of government funding decisions, including long waitlists and disrupted care pathways for women.

The [September edition](#) further strengthened the *Newsletter’s* role as a watchdog, presenting a double feature on “Healthy Futures” alongside critiques of patient safety failures and systemic opacity. This emphasis on accountability reinforced the Council’s commitment to amplifying consumer voices within a complex and often unresponsive health system.

The [December edition](#) brought the year to a close by focusing on overlooked and gender-specific health risks, including the failure of the health system to educate consumers and doctors about women’s experience of heart attacks, and structural gaps in national health data, while also linking issues like stalking to broader health outcomes.

At a time when the news in the health sector is often disheartening and depressing, our regular column, Celebrating Our Wāhine Toa, gives us cause to highlight the achievements of some amazing women in the health sector in Aotearoa New Zealand.

Collectively, the 2025 *Newsletters* illustrate the AWHC’s roles as both a provider of quality women’s health information and influential advocate reaching policy makers, members of the wider health work force, and other non-profit organisations and consumer advocates. By combining research, lived experiences, and policy critique, the *Newsletter* informs and empowers women, reinforcing its importance as an important communication channel in advancing women’s health equity in Aotearoa New Zealand.

The newsletters are freely available on [the website](#), and people can subscribe free of charge and have the *Newsletter* sent to their email inbox as soon as they are published. We continue to produce a low vision accessible version of the *Newsletter* (posted on the website).



Submissions

Submissions on proposed legislation or legislative amendments, and on public consultations undertaken by a variety of health agencies, are central to the Auckland Women's Health Council's advocacy strategy.

We use formal submissions to speak directly to policymakers, regulators, and government agencies, and the professional bodies that represent or govern the health workforce. Our submissions have a "watchdog" function, ensuring women's voices are not overlooked in official decision-making and are recognised for being independent, critical, and grounded in women's lived experience, and the consequences of poor regulation and systemic neglect.

In 2025, we made written submissions on the:

- The Regulatory Standards Bill;
- Medical Council consultation on regulating doctors performing cosmetic procedures;
- Medical Council consultation on revised accreditation framework for prevocational medical training;
- Healthy Futures (Pae Ora) Amendment Bill.

The Council's work continues to contribute to a wider movement calling for stronger protections for health consumers, especially in the context of legislative changes such as the Healthy Futures (Pae Ora) Amendment Bill and the ongoing reforms to, and impacts of, Government policy on the health and disability sector.

Advocacy and the Consumer Voice

Consumer advocacy remained central to the work of the Council throughout 2025. The experiences of women are often overlooked or marginalised, and a significant part of our work is to ensure their voices are audible, heard, and taken seriously. This work included formal submissions, collaborative advocacy, public commentary, and online engagement, creating a layered and responsive approach to amplifying the consumer voice.

A key part of this work involved supporting collective advocacy efforts. Through the year we continued to support Health Consumer Advocacy Alliance (HCAA) petition requesting the establishment of an independent Patient Safety Commissioner, and Sue Claridge represented the Auckland Women's Health Council on the HCAA. Through our involvement with HCAA we helped strengthen the visibility and influence of consumer perspectives on patient safety in our health system.

The Council's submissions (see above) are a critical avenue for consumer advocacy, translating lived experience and evidence into formal responses that can influence decision-making. In all submissions we emphasise that consumer voices must remain central to legislation and regulation, and the design and delivery of health services, rather than being treated as an afterthought.

Beyond formal submissions, the Council's *Newsletters* (see page 3) provided an important platform for amplifying consumer perspectives. Articles published during the year highlighted gaps in care, delays in access, and the real-world consequences of system pressures. These pieces often connected individual experiences with broader structural issues, illustrating how policy decisions are felt at the level of everyday life. In doing so, the *Newsletters* served not only as a source of information, but as a record of lived experience and a tool for advocacy.

In addition, we continue to provide one-on-one assistance to individuals who contact us on a wide variety of women's health issues. These include: people seeking advice or information on personal health matters, or where or how to seek help; journalists wanting information, comment on current issues, and interviews; and occasional requests from students and health professionals requesting material or information.

In 2025, our work reflected a sustained commitment to consumer advocacy in multiple forms, ensuring that the consumer voice remains present in conversations where it otherwise be absent.

The Website

The [AWHC website](#) is an important source of independent, evidence based, researched information on women's health issues. It acts both as a resource hub and as a record of our long-standing activism, especially following the legacy of the Cartwright Inquiry.

The website maintains a commitment to medical ethics and health consumer advocacy, and emphasises informed consent, transparency, and patient rights. AWHC regularly publishes formal submissions to government bodies (e.g. Ministry of Health, Parliament on new bills, the HDC and other health agencies), which are posted in full for public access. These documents include critical analysis, policy critique, and patient-centered recommendations.

The website directly links past abuses (such as the unconsented cervical cancer treatment studies at National Women's Hospital) to modern issues (e.g. medical device regulation, therapeutic products law). This continuous thread helps keep healthcare accountability firmly grounded in real-world history. There is a strong, consistent focus on equity and patient-centered care, and articles and resources particularly advocate for women who have been harmed by systemic failures in healthcare, something that is often overlooked by official health agencies and their online resources.

Website visitors statistics for 2025:

- 4787 visitors from 88 countries;
- 74% were from Aotearoa New Zealand;
- the next four countries with the greatest number of visitors were the US (10% of visitors); Australia (4%); Germany (2%); and the UK (1.5%). The remaining 8.5% were from 83 other countries.

The Auckland Women's Health Council website is currently the most comprehensive online repository for information on the Cartwright Inquiry into allegations concerning the treatment of cervical cancer at National Women's Hospital in the 1960s and 70s, and the subsequent Gisborne Cervical Screening Inquiry in 1999 and 2000.

The importance of the website as a repository for information on the Cartwright Inquiry and related information is made clear when considering the top 12 pages/ topics that visitors were visited in the last year:

<i>Topic/article/page</i>	<i>Number of visits</i>
The Cartwright Inquiry and related pages/topics/articles	1236
Home page	693
AWHC History/Our people/Herstory/Annual Reports	494
Abortion/contraception/hysterectomy	431
Essure permanent contraceptive device	410
Cervical Screening and cervical cancer	407
Inequities and disparities/Māori and Pasifika health	219
Endometrial ablation	207
The HDC, the Code of Health Consumer Rights, and the right to appeal	200
<i>Newsletters</i>	187
Surgical mesh and medical devices	185
Breast cancer/breast screening/breast implants	81

Facebook

Our Facebook page acts as a fast-moving, public-facing extension of our work; more immediate, interactive, and activist-focused than our website. It is used to share information, call for action, highlight issues in our health system, and promote events related to women's health rights in Aotearoa New Zealand. It engages with the wider community, including our collaborators and other women's health organisations, by providing feminist commentary and analysis of current health issues for women.

In 2025, we made 46 posts (down 16%). In addition, we:



reached 11,176 people
(up 17% on 2024)



had 571 page followers at
the end of the year, up
10% from 2024.



had 189 post clicks,
(down 16% on 2024).



had 338 post interactions
(reactions, comments and
shares).

The AWHC Facebook page is a dynamic advocacy tool — keeping women's health rights visible in public conversations, urging action, and keeping historical memory alive, especially around informed consent, research ethics, and systemic health reform.

Collaborators and Networking

Collaboration and connections with other organisations within the health sector are vital to the effectiveness of our work and those we work with. While the closeness of these relationships waxes and wanes depending on the issues we are responding to or advocating for, we value all the organisations with which we have close connections. We are all pulling in the same direction, fighting for the same things for all the women/wāhine in Aotearoa New Zealand — safe, accessible, effective, evidence-based, equitable and safe health care that enables women/wāhine to live their best, healthiest lives.

One of our most significant collaborations in 2025 was with HCAA. We strongly supported their calls for an independent patient safety commissioner and promoted their patient safety campaign through the *Newsletter* and Facebook. Through our endorsement of a joint letter to government, the Council aligned with other advocacy groups and conveyed unequivocal support for the global Mandaluyong Patient Safety Declaration, together calling for action and underlining the shared commitment to making patient safety a cornerstone of healthcare in New Zealand.

We have strong long-term collaborative partnerships with the Health Consumer Advocacy Alliance, the Cartwright Collective and the Federation of Women's Health Councils, and are members of Health Coalition Aotearoa and the Consumer Health Forum Aotearoa.

In 2025 we reconnected with Women's Health Action Trust, a traditional ally and an organisation with which we have much shared history and much in common. We continue to network with the Maternity Services Consumer Council, and have forged closer links with Ovarian Cancer Foundation New Zealand.

In the coming year we plan to further strengthen our alliances and partnerships as it is clear that these relationships are vital for achieving more for the women/wāhine of Aotearoa New Zealand.



The Cartwright Collective



The Executive Committee

The Executive Committee is the engine room of the Auckland Women's Health Council. We hold a general working meeting each month to discuss the current projects the Council is working on; make decisions on particular health care and policy issues the Council is dealing with; discuss grant applications and financial matters pertaining to the operation of the Council; and to deal with the ongoing work of the organisation.

During 2025, a significant piece of work was ensuring that the Council was compliant with new requirements under the Charities Act 2005 and the Incorporated Societies Act 2022. This work was spearheaded by a Legislation and Governance sub-Committee (Cheryl, Pauline, Deborah and Sue). As this report is being completed, the Committee will be presenting the new Constitution to Council members at the AGM and recommending that the Council re-register as an Incorporated Society, bringing to a resolution months of important work to secure the future of the Council as a charitable entity.

The only other sub-committee during the year was the long-standing *Newsletter* review sub-committee (currently Deborah and Madeline), that provides vital peer review, feedback and comment on the draft of each *Newsletter* edition before production and publication.

As always, the Executive Committee remains enormously grateful to Cheryl Hamilton for her many years as Treasurer and for the work that she does managing the Council's finances, a largely invisible but critical role that ensures that the Council remains compliant with legislation and eligible for funding.

Since 2020, the Council has received considerably less funding than in the previous five years. In an effort to maintain the same output, Executive Committee members have had to take on more voluntary work, in particular in response to the recent changes to legislation that governs charities and incorporated societies. In total, Committee members contributed in the vicinity of 700 voluntary hours to the Council during 2025.



Members of the Committee at the annual 5th of August pilgrimage to the Spirit of Peace outside the old National Women's Hospital, in honour of the women harmed by unethical research on cervical cancer in the 1960s and 70s.

Our People

Cheryl Hamilton

Treasurer and Founding Member

Deborah Payne

Founding Member

Madeline Heron

Committee member since 2000

Pauline Proud

Committee member since 2007

Sue Claridge

Communications Manager,
Committee member since 2017

Nikki Power

Committee member since 2022

Mikayla Mackie

Committee member since 2025

Funding

The Auckland Women’s Health Council has no external income or direct Government funding for its work, and we are reliant on donations and community grants programmes. Without our funders – Lottery Community and COGS – our work wouldn’t just be harder, it would be impossible. We are immensely grateful for their ongoing funding and support, and also to the individuals who make donations to us.

Unfortunately, overall the funding we currently receive is significantly lower than it was five years ago. In 2025, we received approximately half the funding we received before the Covid pandemic. We understand the economic and social factors that have contributed to a greater number of worthy organisations competing for limited funds. However, the decreased funding has impacted on how much we can achieve for the women of Tāmaki Makaurau | Auckland. The health landscape in Aotearoa New Zealand remains difficult and our health system and workforce is under strain. This environment makes it even more critical for independent, patient-centred, consumer advocacy to stay strong, vocal, and visible, to ensure all women/wāhine have accessible, equitable, affordable, available, accountable and culturally appropriate health care services.

In 2025, we were thrilled that three of the four Auckland COGS committees awarded us multi-year funding, which offers us greater financial security for 2026 and 2027.

We will be looking at other potential sources of funding in the coming year in an effort to increase funding levels to ensure that we can continue to provide the advocacy, evidence-based independent information and support to women that we have been know for, for almost 38 years.



Income and Expenditure

	Income	2025	2024
Lottery Community		10,000	10,000
COGS		9,000	7,750
Donations		395	260
Interest		127	434
Total Income		19,522	18,444
	Expenditure	2025	2024
Communications Manager		6,686	12,151
Newsletter Production		6,580	6,810
Office Rent		2,220	2,220
Phone, internet & website hosting		1,347	1,074
Travel		–	48
PO Box		243	–
Publications		27	–
Conferences/hui		110	–
Google Workspace (incl meeting & cloud storage)		156	238
Charities Services Annual Report Fee		51	51
Total Expenditure		17,420	22,592

Subscription to our *Newsletter* and membership of the Auckland Women’s Health Council remain free of charge. People can subscribe to the *Newsletter* without becoming a member and receive the *Newsletter* directly into their email inbox. We strongly believe in the importance and value of the information that we provide, the analysis and gendered perspectives on health, and we want all women/wāhine to have access to this without the burden of cost.

Looking Forward

More than a quarter of the way through the 21st century, it is hard not to wonder where the women's health activism of the late 20th century has gone. The activism that led to the Cartwright Inquiry into the unethical research on women at National Women's Hospital, that in turn led to the establishment of the National Cervical Screening Programme and the Health and Disability Commissioner, and the implementation of the Code of Health and Disability Services Consumers' Rights.

A number of factors (including the cost-of-living crisis, long-term underfunding of the health workforce, and international health workforce shortages) have coalesced to impose the greatest stresses on our health system for decades. Our health system is in crisis and our health workforce is under significant stress; never has the ability of people to take responsibility for their own health and well-being been so important. The Aucklanders who face the greatest barriers to both accessing health services and positive health outcomes – including women, particularly wāhine Māori and Pāsifika, those from migrant and refuge communities, and those living with disabilities – need help and support to navigate the health system, to access evidence-based information on health-care services, and to understand their rights as patients and health consumers.

We know from our discussions and work with our allies and collaborators, that there is no lack of concern for what is happening in our health system. There is no lack of passionate, dedicated New Zealanders working incredibly hard in underpaid or voluntary positions to effect change and create a functional health system that places health consumers at the centre. In this we include very many members of the health workforce, doctors and nurses who are so overworked and burnt out that they feel they have no option but to take strike action, to ensure that their very real concerns about the well-being and safety of New Zealanders in our health system are heeded by those with the power to make better, fairer, more equitable decisions.

The global stresses that we all face as we write this annual report – the state of the world, the standing and place of our nation in that global environment – can all too easily lead to a sense of powerlessness. It can all too easily lead us to acquiesce to the sometimes overwhelming need to hunker down and ensure the safety and security of our own families, rather than put energy into fighting for a better system for all.

The Auckland Women's Health Council was founded almost 38 years ago, in the aftermath of devastating revelations about the harm to women in one of our hospitals. While there have been changes and improvements since then, in recent years there has been a sense of going backwards in healthcare; that we are falling behind other developed nations. We cannot overstate the importance of standing up and using our voices for the women/wāhine of Aotearoa New Zealand; the importance of having influence and exercising it wherever and whenever we can. We understand that we can't change the world overnight, or even just our small corner of the world. But we must take power and energy from every time we make a difference in any woman's life. We must join together with others who are also working for better outcomes, to achieve affordable, accessible, safe and best-practice health care.

Continued advocacy for the right to provide informed consent to health and disability services, for better health outcomes for women, for greater engagement in health care issues, and greater participation of women in setting policy, sees slow, incremental changes. While there is still work to be done for the women/wāhine of Aotearoa New Zealand and their health and well-being, we plan to be there and be part of that work.

*This is how we will make a difference — not by waiting for,
but by insisting on change.*

We remain a voice for women's health.