

A pair of hands is shown from the wrists up, holding a large, solid red heart. The hands are positioned on either side of the heart, with fingers slightly curled around its edges. The background is a solid, light teal color. The word "OPTIONS" is printed in large, white, sans-serif capital letters across the middle of the heart. To the right of "OPTIONS", the words "FOR SEXUAL HEALTH" are printed in smaller, white, sans-serif capital letters, stacked vertically.

OPTIONS

FOR
SEXUAL
HEALTH

**ANNUAL
REPORT
2024-
2025**



annual report

We acknowledge the Options for Sexual Health Provincial Office is within the ancestral, traditional and unceded territories of the xʷməθkʷəʔəm (Musqueam), Skwxwú7mesh (Squamish), and selílwitulh (Tsleil-waututh) Nations. Our clinics are located on the homelands of the more than 198 First Nations and 30 Métis charter communities throughout the province. We share our gratitude for the land keepers who have stewarded these lands for time immemorial. We recognize the oppression that persists against the Indigenous peoples in British Columbia and we are committed to activism around decolonization and oppression.

Annual report prepared by Options for Sexual Health. This annual report shares what we have been up to as an organization during the 2024-2025 Fiscal Year. We encourage readers to share this document as a means to facilitate others getting to know Options for Sexual Health.

If you have any questions about anything in this annual report, or about Options for Sexual Health, you can contact our Executive Director, Tiffany Melius at executivedirector@optbc.org

Thank you for reading!

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BOARD CHAIR UPDATE

Hello,

Thank you for being with us for another year at Options for Sexual Health. This past year has been one of movement—a time where we have been reminded just how deep our courage and conviction truly go.

In June 2024, following our 60-year anniversary, we welcomed Tiffany Melius into the role of Executive Director. In a short time, Tiffany has shown remarkable leadership, unflinching grit, and the kind of tactical prowess needed to carry Options forward in a rocky landscape. Under her direction, we've launched some of the most significant organizational reforms in our recent history.

We've been honest about the fact that we can no longer operate as we have—with the same budget, the same systems, or the same assumptions. That acknowledgement has marked a turning point. We also have reminded ourselves that at our core, we are an organization committed to excellence. And that our commitment to excellence means giving ourselves permission to do less in the future - if doing less can allow us to do it better, while compensating our employees more fairly.

Looking inward, we are finishing long, ongoing work with our policies, technologies and procedures to stabilize the organization. Looking outward, we are considering how Options can be positioned more strategically within today's British Columbia. We are paying close attention to shifting demographics, evolving AI technologies, changing responsibilities in the health care system, global threats to our core values, and the realities of underserved and geographically isolated communities in our province. And we're asking ourselves: what can we do best out of all this, and how? This year, we've formally entered into conversations—with government and other partners—about how Options might serve our mission

in new ways, while holding true to the values and history that brought us this far.

This work is ongoing and demanding. It asks all of us to hang tough for a while longer, to be compassionate with each other, to advocate fiercely, and to accept change. I want to thank our staff, volunteers, clients, and partners for bringing those qualities forward this year. We on the board have been humbled by your brave decisions, your tears of frustration, your commitments, and your unshakeable belief in the mission of Options.

To those who've been part of the Options community for years—and to those newly joining us—thank you. The work of advancing sexual and reproductive health in this province remains and always will be vital. We're determined to make sure we're still here to keep doing it, excellently.

With respect,

Kaye Hare, Ph.D

President of the Board, Options for Sexual Health



DID YOU KNOW?

This year, our directly managed Options for Sexual Health Clinics saw 14,000 patients. Despite limited hours of operation due to financial constraints, we continue to serve patients through our 31 directly managed clinics and 25 partner clinics.

EXECUTIVE DIRECTOR UPDATE



I was excited to join the incredible Options for Sexual Health team at the end of June 2024, and I hit the ground running.

I was warmly welcomed, and felt staff showing up honestly and authentically in describing their passions, frustrations, and aspirations. Listening to staff, Board, and stakeholders, it became quickly obvious that staff wages and clinic support were two major challenges Options needed to address.

We embarked on two key projects that would help us identify our place within the health care landscape of BC; a patient survey and an environmental scan. These two projects showed us where we were in our patients' eyes, and also where others - including researchers, stakeholders, and funders - see us now and in the future.

Within 3 months we were facing clinic closures, after not receiving a contract increase in 12 years. Much of my time over the holidays was spent focusing on lobbying and advocacy, to drive home how important Options' clinical services are, and what the impact would be of their loss. The community support for this work was heart warming and heart breaking – validating the value that Options and our dedicated staff bring everyday. With over 275 comments from our community folks, we recognize just how much of an impact our clinics have throughout the province, both in urban centres, and in rural and remote communities.

Ultimately we were supported by the Ministry of Health with bridging funds for the 2025-26 fiscal year, while

undergoing a strategic review in partnership with the Health Authorities to determine the future of Options clinics. That process is still underway. Our intention was to engage in strategic planning early this year, however, this is on pause as we work with the Ministry of Health on the strategic review.

Due to the strong advocacy work, we were able to implement wage increases for the majority of staff, based on a compensation review which benchmarked us against comparable market wages.

Additionally, we have been strengthening community partnerships with organizations like Foundry, BC Rural Health Network, and Action Canada, and expanding our Community Engagement activities through formalizing CE activities within their own program.

In a time of financial constraint and geopolitical instability, with declining donor dollars, health system review, and an over-dependence on Government funding, Options continues to do the best we can with what we have. And our best is pretty amazing.

Our team is at the forefront of so many of the issues and trends affecting our work – whether rural care, abortion access, educator training, or combating misinformation to name a few – we are everyday championing and celebrating the sexual health of all people in BC.

To our staff – your passion is inspiring.

To the board – thank you for being brave.

To our many, many supporters, in many, many forms – we couldn't do what we do without you.

Together, we will shape a world that honours sexuality in all its diversity.

DID YOU KNOW?

Sex Sense has operated since 1996! Originally called the Facts of Life Line, Sex Sense has answered hundreds of thousands of questions about sex, sexuality, and sexual health in the past 29 years.



Sex Sense continues to be a valued resource for over 5,000 British Columbians. These are people who often cannot get their questions answered elsewhere, or do not feel safe doing so. The questions we receive are often highly significant in the lives of the askers - they are high-stakes topics with regards to life-changing decisions, and Sex Sense provides evidence-based information and local referrals to defend against the mis- and dis- information that is so readily available online.

Sadly, we continue to see a general decrease in call and email volumes, a trend that began in 2019. In past annual reports we have spoken to the myriads of contributing factors, such as new website that severely impacted search engine optimization; the pandemic; restricting our 1-800 number to Canada only; improving boundaries with inappropriate callers; improved phone trees that cut down on clinic and non-relevant calls going through to Sex Sense.

In July 2024, we also switched our phone company which was unfortunately not a smooth transition. As a result of numerous bugs in the new systems, for quite some time callers were unable to leave voicemails, and some calls were dropped or not able to get through. This impact plays out in our call volume for that quarter as calls went down by 27% from the previous quarter but bounced back in the following quarter once most of the bugs were worked out. This also meant our staff often had to use their valuable time on the line to troubleshoot calling issues and took time away from our own legwork for Sex Sense promotions.

We believe that the declining numbers are also speaking to the fact that that phone and email is increasingly not the preferred form of contact for the younger generations; to address this we are investigating the possibility and cost of adding either text or chat features as we believe that would better serve younger folks.

Targeted Sex Sense advertising on transit has been key to our promotions over the years since Sex Sense began; we investigated tripling our Sex Sense transit ads across the province but the increase in price to extend our reach in that manner was impossible with our current budget. We have instead taken a multi-pronged approach to promoting Sex Sense in other ways: connecting with community partners, targeting outreach, and doing widespread Sex Sense business card and poster mail-outs.

Sex Sense callers and emailers have increasingly complex needs and often need multiple referrals/resources, as noted with our increased average duration by 17% to 11.6 minutes, and total duration steady at just over 1000 hours. Many contacts identify that they do not have a family doctor. Sex Sense has become an invaluable navigator and liaison for those without ready access to sexual health care. Rampant misinformation on the internet means an increase in the number of complex questions within one call.

We continue to be able to maintain excellent coverage on Sex Sense. In this fiscal year one Sex Sense Associate retired, and two shifted to Emergency Coverage positions from their Associate roles. We hired three new Sex Sense Associates, and each received substantial training and orientation to best succeed in their roles. We also welcomed a new volunteer to provide support to Associates, including updating our extensive Resource Manual, drafting emails, and assisting with promotions tasks. Additionally, the Sex Sense Coordinators were promoted to Managers in early 2025 in recognition of program needs.

Sex Sense continues to be a valuable resource for accessing sexual health information and care in BC. Our staff are proud of the work we do and the continued positive responses and thank you notes we receive from clients provide ample feedback that our services are needed and appreciated.

EDUCATION UPDATE

In our annual report, I often get to brag about our school-based sexual health education programs. I love to talk about Hayley, our field educator, who is such a skilled connector. Whether she's talking to preschoolers about their bodies, middle schoolers about puberty, or secondary students about decision-making and healthy relationships, Hayley makes talking about sexuality accessible and fun. We pride ourselves in delivering current and inclusive sex ed which follows the Ministry of Education's content and learning standards, and we do it like nobody else. This year, more than 7000 elementary and secondary students got to learn from Hayley, across 26 schools. One classroom teacher said it best: "I wish I got this kind of sex ed when I was in school!" All students in British Columbia are supposed to receive up-to-date and comprehensive sexual health education while they're in school. We'll never stop advocating for people's right to information, and we're fiercely proud of the work we do in BC classrooms.

Part of our whole-community approach means making sure that families and community members also get access to current information and best practices. Between Hayley and I, we delivered 7 parent/caregiver workshops and 4 professional development days for teachers, supporting folks who missed out on their own sexual health education and are now hoping to better support the young people in their lives. We also got a chance to create some bespoke training for nurses and for foster parents who were looking to upgrade their skills and knowledge.

This year I'd like to highlight our Sexual Health Educator Certification (SHEC) program, which is entering its 20th year of delivery. One of the most common questions people ask me is how I became a sexual health educator, and the truth is that it can be quite challenging to cobble together all of the proficiencies that are needed: a strong knowledge base about sexual development including childhood, puberty, adolescence, adult and senior years; niche knowledge about body parts that most people haven't studied; up-to-date clinical knowledge about things like contraception and sexually transmitted infections; comfort and confidence with managing discussions about sexuality; the knowledge and skills needed to include a range of folks' perspectives and experiences; amazing class management skills; and an excellent sense of humour. Since 2006, our SHEC program has been the only place for professionals to gain these skills, and practice them. This year we graduated our 26th cohort of students. The SHEC program is taken by nurses, teachers, clinical counsellors, midwives, social workers, and even the occasional physician. These are folks who are dedicated to developing their strongest professional practice, and we're so proud to have helped train more than 300 exceptional sexual health educators over the years.

Kristen Gilbert, Education Director

Did you know?

Options for Sexual Health (Options) provides informative presentations for all different kinds of groups and individuals on a variety of sexual and reproductive health issues. Our workshops offer comprehensive, nonjudgmental information in our accessible, signature style. We create the workshop you are looking for.

CLINICS UPDATE

Submitted by Nicole Pasquino, RN, Azin Pourlashkari, and Dr. Emma Herrington

This past year has been a turning point in recognition in BC around the importance and impact that Options for Sexual Health Clinics continue to have in the delivery of sexual health care across communities in BC, bridging the gap for service providers that are unable to meet the sexual health needs of their communities.

Faced with the realization that without a commitment from funders to multi-year sustained funding, - part of which included ensuring adequate wages for our staff - Options would need to close many of our sites, this last year was spent ensuring we captured and reported every detail around the services we provide and actively engaged with our staff every step of the way. Our front-line staff and volunteers rose to the challenge, even with looming uncertainty and staffing challenges, to provide the exceptional, patient centered, non-judgmental and inclusive care that Options is known for. We saw nearly 14,000 visits over the year, with the continued trend of STI testing as our top service provided. Options continued to play a key role in STI screening and early detection across the province with over 3800 tests for gonorrhea and chlamydia administered. Requests for long acting contraception (LARCs), particularly IUDs, continues to rise. With RN scope of practice expansion for IUD insertion on the horizon, Options is poised to play a vital role in access to LARCs, especially in rural and remote communities.

It is a true testament to the dedication of our clinicians that over 35% of our providers have been with Options for longer than 10 years! Options staff continue to advocate for quality care for all clients and uphold Options' mission of championing and celebrating sexual health.

Because of our devoted and highly skilled nurses, doctors, support staff and volunteers, our clinics remain a safe place for all folks accessing sexual health and reproductive healthcare services.

Options sites continue to be sought out and relied on for educational opportunities for external RNs employed at Health Authorities, Medical Residents and Nursing Students. In addition to providing exceptional care, Options clinicians provided 101 placements with 1822 clinical teaching hours to external learners in our clinics across 2023 & 2024 – all while maintaining full patient loads, often with one clinician on-site, and with no additional budget support.

Entering into the next fiscal year we feel re-energized and committed to continuing to provide a high standard of care, supported by our funders and our many health and community partners and allies. Our goal is to help secure a future where all British Columbians have equitable access to patient-centered sexual health care.

Here's one of the comments we received from patients in regards to our potential clinic closures:

"I feel strongly that these clinics remain open for both personal reasons and for the community in which I work with. An abortion saved my life. I was not a victim of rape, incest, or had medical reasons for my abortion. I was a 35 year old single mom and at the time was at risk of losing access to my child due to addiction. Three weeks after that abortion I had my last drink. I have now been sober for 8 years. I am fully present in my child's life, I have gone back to college and graduated nursing school, and today I have a job that allows me to give back to my community. Had I not had access to a safe legal abortion I don't know where my life would be today. Just today I referred someone to your center. I work in a population of international college students, and the ability for these women to have options is life changing. Some of their stories are traumatic, and I fear some of their stories may become traumatic if they do not have SAFE options when faced with an unplanned pregnancy. Thank you for the work you do."

To read more comments from our community, go to page 12

COMMUNICATIONS UPDATE

This past year marked a period of growth, resilience, and deep strategic engagement for the Communications Department. With the addition of a new staff member, Ashpreet Thind, we transitioned from a one-person operation to a two-person team, significantly increasing our capacity to deliver consistent, thoughtful communications across our organization. Ashpreet has quickly become part of the Options family and has taken on much of the management of our reinvigorated Community Engagement team. Planning for the upcoming year is also well underway, where we will be working with our clinic staff and volunteers in rural and remote communities to establish satellite outreach teams.

As mentioned above, one of the major highlights over the past year for the Communications team was the reignition of our Community Engagement Volunteer team. The CE team was largely on hold during COVID, and events have been somewhat slow to return in a post-COVID world. As a result, the team needed to be rebuilt from the ground up. We are now excited to share that we have a 12-person team of volunteers who have been actively engaged in Community Engagement, which includes attending outreach events, supporting staff at the Provincial Office, creating blog posts, social media posts, and book review content, and more. Expanding our Community Engagement beyond in-person events into the digital and social realms has been a work in progress for quite a while, and this team of volunteers has helped with this exponentially. We have made connections with several organizations to reach new communities and populations that we don't typically engage with on a daily basis. This rejuvenation has laid the groundwork for even deeper partnerships in the year ahead. Volunteers participated in the online volunteer training, as well as in-person training, attended five community engagement events, and contributed to many blogs, social media campaigns, and biweekly book reviews.

Despite these internal gains, we continued to face ongoing challenges with social media platforms. Algorithmic suppression of our content—particularly posts related to sexual and reproductive health—remains a significant barrier to promoting our services, providing low barrier access to information and education, and advocacy. We responded with a multi-pronged approach, experimenting with content formats, adjusting posting strategies, and even sharing a post related to the censorship of our content. While progress has been incremental, we remain committed to finding creative ways to work around these constraints and ensure our messaging reaches those who need it most.

A significant portion of our efforts this year also focused on navigating the communications aspects of our potential clinic closures. This work required careful coordination, sensitivity, and rapid response planning. We developed adaptable communications frameworks and key messaging that prepared us to speak with clarity, transparency, and compassion—internally and externally—and were able to provide support through our digital channels for the Clinic team. Our efforts were definitely rewarded with the many positive, supportive, and heart warming messages we received from patients, clients, stakeholders, and community members who see infinite value in the work we provide.

As we look ahead, we remain focused on elevating our organization's voice, building trust in our communities, and supporting our teams through challenges and opportunities. With a stronger foundation and clear strategic direction, the Communications department is well positioned to continue delivering access to information, service information, and engagement opportunities in the year to come.

Ashleigh Turner, Communications Director

HUMAN RESOURCES UPDATE

In March 2025, Options for Sexual Health employed 163 staff members across British Columbia. The majority of our workforce (95%) work in part-time roles, reflecting the flexible and community-based nature of our services. Clinic Operations makes up the largest department, representing 84% of our employees, while programs such as Sex Sense (8%), Shared Services, Clinic Management/Support, and Education contribute essential expertise to our organization.

Our team is geographically diverse, with Vancouver (28%) being our largest hub, and strong representation in communities such as Nanaimo, Nelson, Penticton, Salt Spring Island, Abbotsford, and beyond. This spread allows us to provide sexual health services across urban, rural, and remote regions of the province.

Tenure at Options reflects a balance of new energy and long-standing commitment: 29% of employees have been with us less than two years, while nearly a quarter (24%) have dedicated more than a decade of service. This blend of fresh perspectives and experienced leadership ensures both innovation and stability in our work.



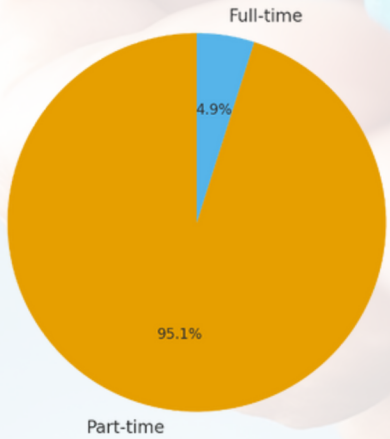
Top 10 Locations in number of employees

- Vancouver: 46 (28.2%)
- Nanaimo: 10 (6.1%)
- Nelson: 9 (5.5%)
- Penticton: 9 (5.5%)
- Salt Spring Island: 7 (4.3%)
- Abbotsford: 7 (4.3%)
- Kelowna: 6 (3.7%)
- Whistler: 6 (3.7%)
- Squamish: 5 (3.1%)
- Creston: 4 (2.5%)



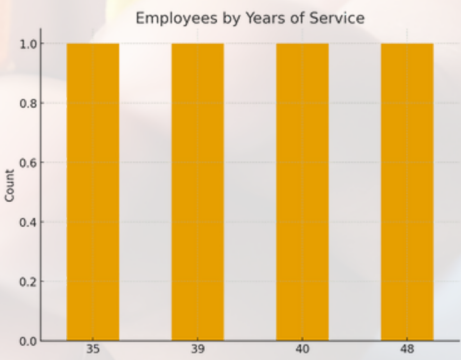
Departments

- Clinic Operations: 137 (84.0%)
- Sex Sense: 13 (8.0%)
- Shared Services: 5 (3.1%)
- Clinic Management/Support: 5 (3.1%)
- Education: 3 (1.8%)



Part-time

- Total Employees: 163
- Part-time: 155 (95.1%)
 - Full-time: 8 (4.9%)

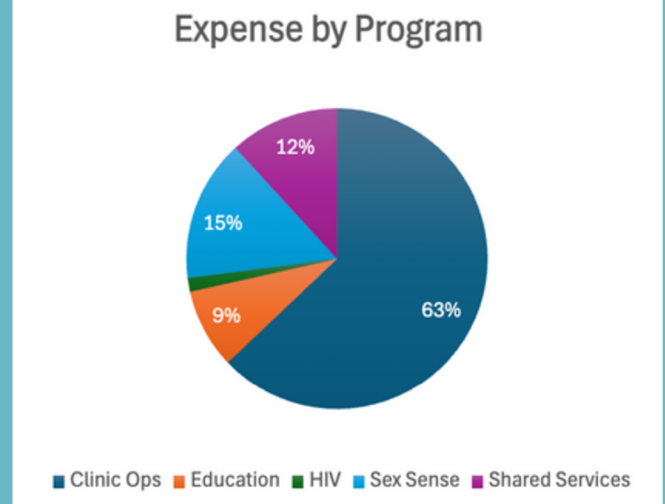
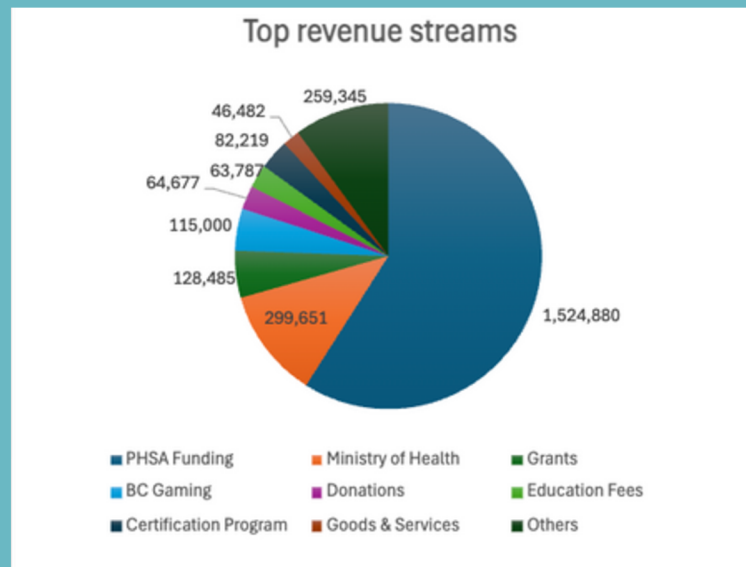
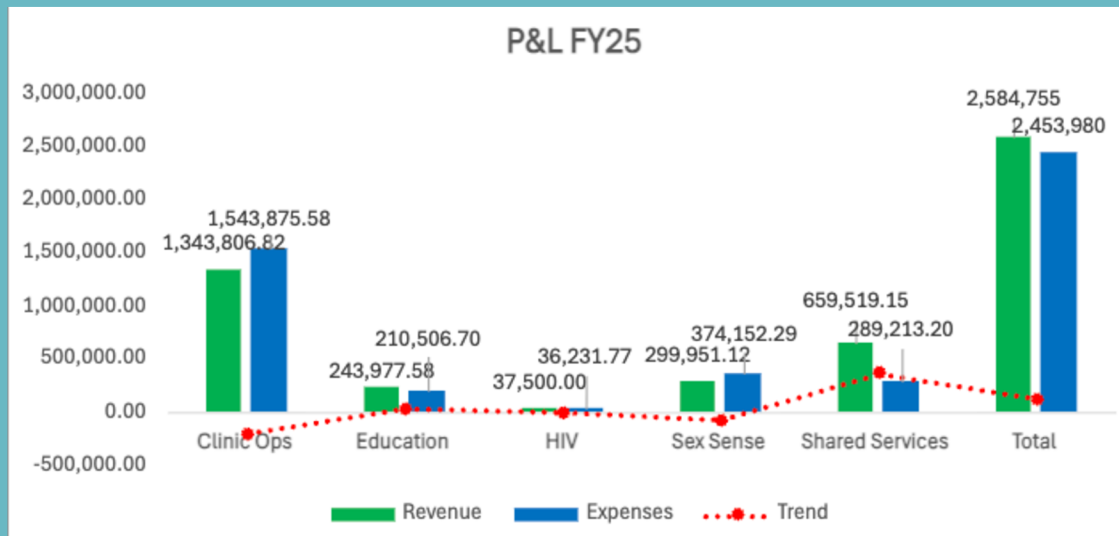


Years of Service


- 0–2 years: 48 (29.4%)
- 3–5 years: 40 (24.5%)
- 6–10 years: 35 (21.5%)
- 10+ years: 39 (23.9%)

Our workforce data highlights the unique strength of Options for Sexual Health: a dedicated, province-wide team of professionals who bring both experience and fresh perspectives to their roles. With the majority of our employees based in clinics across British Columbia, supported by shared services and specialized programs like Sex Sense, we are able to deliver accessible, high-quality care to diverse communities. The blend of long-standing staff and new team members ensures continuity, innovation, and resilience as we move forward.

FINANCIAL UPDATE



Our audited financials are available on request.



This year, Options was grateful to receive multiple generous legacy gifts. We want to extend our gratitude to the

Carrie Smith Legacy Fund and Carol Taylor Fund, both held at Vancouver Foundation, Maureen Robinson Memorial Fund, Theatre Under the Stars in honour of Helen Dawson and

Cynthia Lawrence's estate.

Their generosity enable us to support our programs and continue to provide our services throughout the province.

Options would like to establish an endowment fund to support future sustainability through legacy gifts.

If you or a loved one would like to make Options part of your legacy, please speak to your estate planner, or email executivedirector@optbc.org

In 2024 our clinical services had reached a critical financial state due to historical funding constraints. Our supporters shared what our services mean to them, and what it would be without Options' services in their communities. Here's some of the comments we received.

I am currently 5 days post-operation as treatment for cervical cancer. If I did not have access to a sexual health clinic in my area, I am confident I would still not know I had cancer. Cervical cancer is almost symptom free in its early stages, but it is crucial to treat in this stage. Therefore, the only way to find it is to do regular PAP screenings. In my case, the pap was unusable due to side effects from cancer so it was the in-person screening and observation that tipped the doctor off. As one of many without a primary care physician, I don't like to think what would have happened to me had I not had access to this health centre.

Options clinics provide crucial services for so many members of the community. I have been on a waitlist for a doctor since I moved to Nelson three years ago, and I don't imagine I will get one. Walk-in clinics have recently closed as well. Options is one of the only places that people can get care on short notice and it is clear that these services are needed as the clinic is always busy. I have used their services several times, and it gives me peace of mind to know that it is accessible weekly, without an appointment. I know that many of my friends also rely on Options clinics to seek medical attention. Where are people supposed to go if these clinics close as well? The emergency rooms are already overwhelmed. Small communities rely so much on Options clinics and it would be shocking to me if our government refuses to support such a critical resource for the people of British Columbia.

I am a school counsellor in a rural area near Nelson B.C. The closure is going to have profound impacts on my students and the community. Many of my students do not have access to a doctor and going to the emergency room would be the only way to get sexual health care. Furthermore, this clinic provides a safe and confidential way to access sexual health care and this is very important for teenagers who need to be able to access this resource on their own.

I don't have a primary health care provider, and haven't for most of my adult life. I've accessed a home cervical swab kit. If that kit shows the need for a PAP smear, I am reliant on Options clinics for that screen. I can't get a PAP anywhere else without a family doctor. I'm trying to be responsible and use the lowest burden option, but if I need follow up screening I need to go to a physical clinic with professionals.

Without Options clinics, and with no primary provider, where am I supposed to go? The hospital for PAP smear? That's absurd, and an unnecessary strain on hospital resources.

For more of our impact statements, visit
<https://www.optionsforsexualhealth.org/impact/share-the-impact-comments>

**Thank you for reading our
Annual Report.**

**We want to extend our gratitude to the
many donors, partners, and
community members, who have
supported Options for Sexual Health
to provide sexual and reproductive
health services, care, information, and
education to people from all walks of
life throughout the province. We look
forward to many more years of serving
British Columbia!**

OPTIONS FOR
SEXUAL
HEALTH