Australian Academy of Health & Medical Sciences

2025-2026

ANNUAL REPORT









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About the Academy

The Australian Academy of Health and Medical Sciences is Australia's authority on, and trusted voice of, health and medical science.

Our Fellows are the very best of Australia's health and medical researchers and clinician scientists.

We serve the public good by drawing on this expertise and our ability to bring together the right people across research, policy and practice to provide independent, evidence-based advice on the issues that shape Australia's health – to government, health leaders and the community.

The Academy is a bridge between science and society – connecting the best evidence and expertise to the decisions that matter so that research and innovation translate into better policy, better practice, and better health outcomes.

The Academy is registered with the Australian Charities and Not-for-profits Commission and endorsed as a deductible gift recipient.

www.aahms.org

Acknowledgements

The Academy is grateful for the gifts, donations, grants, partnerships, sponsorships and other contributions that support our charitable activities.

We particularly acknowledge the significant contribution made by our Fellows, Associate Members and other experts, who generously contribute their time and expertise to the Academy's work.

We are grateful for the support of organisations that provide financial and in-kind support for our programs and activities, including the Australian Government.

The views expressed in Academy reports, publications and activities do not necessarily reflect the views of the Australian Government.

President's Welcome



It is my great pleasure to welcome you to the 2025-26 Annual Report of the Australian Academy of Health and Medical Sciences.

This has been an important year for the Academy, marked by growing impact, ambition and influence. We have launched a new five-year Strategic Plan, strengthened our contribution to national policy, expanded our work to support the health and medical sciences workforce, and continued to recognise and harness the extraordinary expertise of our Fellowship.

Our new Strategic Plan 2026-2030 reflects both how far the Academy has come and the role we want to play in the years ahead. At its heart is our purpose: to improve health outcomes by providing independent, evidence-based leadership that bridges science to policy, practice and public understanding.

That role has been particularly visible in our policy work this year.

The Academy has contributed evidence and advice across issues ranging from the National Health and Medical Research Strategy and Australia's research and development system to human tissue laws, misinformation, public trust, autism, microplastics and PFAS.

Our work on microplastics and other contaminants provides a particularly strong example of the influence our Fellowship can have. The Senate inquiry drew extensively on evidence provided by the Academy and recommended that a national human biomonitoring program be developed through the Australian Centre for Disease Control in conjunction with the Academy and other stakeholders. This builds on a similar recommendation from the previous Senate inquiry into PFAS.

We also launched Australia's first Decadal Plan for Women in the Health and Medical Sciences, setting out a ten-year roadmap for achieving greater equity across our sector. It was a substantial undertaking involving expertise from across health, research, government and industry, and provides a foundation for work that will continue well beyond this reporting period.

Supporting the next generation remains equally important. Our Life as a Clinician-Scientist program attracted more than 1,500 registrations this year, while our mentorship and leadership programs continue to provide opportunities for emerging leaders to learn from some of Australia's most accomplished health and medical researchers.

As I conclude my term as President in October 2026, I am enormously proud of what the Academy has achieved and of the institution it continues to become. It has been a privilege to serve an organisation whose Fellows contribute so much to health and medical science in Australia and internationally.

I thank our Fellows, Council, Executive, Associate Members, partners, supporters and Secretariat for their contribution over the past year. I also congratulate Professor John Prins FAHMS as incoming President and look forward to seeing the Academy continue to grow its influence and impact under his leadership.

With best wishes,

Professor Louise Baur AM PresAHMS
President, Australian Academy of Health and Medical Sciences

CEO's report



This has been a year of real progress for the Academy. We launched a new Strategic Plan and a national plan for women in the sector, and spoke out on some of the issues that matter most for public trust in health and medical science.

The publication of our 2026-2030 Strategic Plan was one of the year's most important milestones. Reflecting how far the Academy has come in scale, standing and the strength of our relationships across government and the sector – it is our first five-year plan, succeeding the three-year plans of our earlier years. At its heart is a clear statement of purpose: to improve health outcomes by providing independent, evidence-based leadership that bridges science to policy, practice and public understanding. The first of its four pillars, translating evidence into policy and practice, is where Academies, as trusted and independent advisers to government, play a distinctive and vital role.

Trust has been a defining theme of our work this year. It underpins everything from vaccine uptake to people's willingness to take part in research, and we all know that it cannot be taken for granted. Trust was the theme of our 2025 Annual Meeting in Canberra, where we were delighted to welcome the Minister for Health and Ageing, the Hon. Mark Butler MP, to speak at our Gala Dinner. Building on the meeting's discussions, we published Understanding Trust, a policy explainer that examines how trust shapes health behaviours, public policy and clinical practice, and lays the foundations for our broader work that will explore how trust can be measured and which policy levers could strengthen it. Working with the Australian Academy of Science, we also produced a report for the Australian Government's National Science and Technology Council on how people's physical and mental health can shape resilience to misinformation – adding a health dimension to a national conversation that often focuses more on technology and education.

Trust is tested most acutely where science meets public anxiety, and where misinformation can travel faster than evidence. Over the past 12 months, a high profile example of this was the impact of unevidenced claims connecting prenatal paracetamol use and childhood vaccination to the development of autism is one such area. Having tracked the construction and intensification of this narrative, the Academy was able to publish an evidence brief within hours of these claims being publicised. Our brief sets out clearly what the evidence shows: there is no causal link between autism and paracetamol, or between autism and vaccines.

Environmental contaminants such as microplastics and PFAS, (i.e. 'forever chemicals'), raise similar challenges – where we see genuine public concern and where the science is still emerging, leaving ample room for misinformation. Issues like these clearly demonstrate why the independent, expert advice that Academies provide is so important. Our evidence brief set out what is known – and, importantly, what is not yet known – about the potential effects of microplastics on human health, and what this means for policy. That analysis has clearly been valued: the Senate inquiry into microplastics and toxic chemicals drew extensively on our evidence and recommended that the Australian Centre for Disease Control work with the Academy to establish a national human biomonitoring program. It is the second Senate committee to make this recommendation, following the 2025 inquiry into PFAS.

The second pillar of our Strategic Plan, building national capability, also took a significant step forward. At our 2025 Annual Meeting, the Hon. Rebecca White MP, Assistant Minister for Health and Aged Care and Assistant Minister for Women, launched Australia's first Decadal Plan for Women in the Health and Medical Sciences, developed by the Academy. The Plan sets out recommendations and actions for the whole sector. We are playing our part in implementing them, especially through the Inclusive Leadership Mentoring Program for health and medical research. The program was originally developed by Franklin Women, and following their closure at the end of 2025, we are proud to steward its next chapter in partnership with Serendis

Leadership. We are excited to be scaling this program up for national delivery with funding from the Australian Government's Women in STEM and Entrepreneurship (WISE) grant program.
Our third pillar, championing health in our region, reflects both where the Academy now stands and the world around us. Health is increasingly interwoven with regional stability, security and prosperity – from pandemic preparedness to the health impacts of climate change – and our growing standing and networks now place the Academy to contribute meaningfully to health diplomacy and collaboration across the Asia-Pacific. This is a new area of work and one you will see grow over the coming months and years as we deliver the Strategic Plan.

Finally, our fourth pillar, recognising and harnessing excellence, sits at the core of who we are. Warmest congratulations to the 29 new Fellows admitted at our 2025 Annual Meeting. I often say that the best part of my role is working with our Fellows, and the whole AAHMS team looks forward each year to welcoming a new cohort – and to working with more of Australia's leading researchers across every part of the Academy's work. As this Annual Report shows, their expertise runs through everything we do. Sincere thanks to all the Fellows who have contributed to our work over the past 12 months.

These achievements reflect a deliberate decision to invest in the Academy's growth. As planned, we are reporting a deficit this year, reflecting strategic investment in our policy and government relations work, in raising the Academy's profile, and in establishing a presence in Canberra alongside our Sydney and Brisbane offices. As this report shows, that investment is already delivering the benefits we intended. The Treasurer's report sets out our financial position in more detail.
Looking ahead, our direction aligns closely with the national agenda. The new National Health and Medical Research Strategy 2026–2036 and Ambitious Australia (the independent review of Australia's research and development system) both emphasise the crucial need to build Australia's research and innovation capability and to strengthen translation – areas at the heart of our Strategic Plan. The Academy is well placed to help turn these ambitions into practice.

None of this would be possible without our Executive, Council and staff, and I thank them all for their commitment. I would like to pay particular tribute to our President, Professor Louise Baur AM PresAHMS, who steps down at our AGM in October 2026. Louise's commitment to the Academy is second to none – she was a founding Fellow and has contributed across our programs, operations and policy work at every stage of our growth. It has been a privilege to work alongside her during her presidency. Congratulations to our incoming President, Professor John Prins FAHMS – I greatly look forward to working with him over the next three years, which will see much of our new Strategic Plan come to life.

All the best,

Catherine Luckin
Chief Executive Officer

Academy strategy 2026-2030

2025-26 marked the beginning of a new chapter for the Academy with the development of our Strategic Plan 2026-2030.

It is the Academy's first five-year Strategic Plan and reflects our growth in scale, standing and influence across government and the health and medical sciences sector.

Our purpose is:

To improve health outcomes by providing independent, evidence-based leadership that bridges science to policy, practice and public understanding.

Our work over the next five years is organised around four strategic pillars:

1. ### Translating evidence into policy and practice

   We will strengthen the Academy's role as an independent and trusted source of evidence, bringing the expertise of our Fellowship to the policy challenges that matter most for health and medical science.

2. ### Building national capability

   We will contribute to a strong, diverse and sustainable health and medical sciences sector, supporting the people, institutions and capabilities Australia needs for the future.

3. ### Championing health in our region

   We will grow the Academy's contribution to health collaboration and diplomacy across the Asia-Pacific, recognising the increasing connections between health, regional stability, security and prosperity.

4. ### Recognising and harnessing excellence

   We will continue to recognise outstanding achievement in health and medical science and harness the expertise, leadership and networks of our Fellowship to deliver impact.

2026-2030 STRATEGIC PLAN

Australian Academy of Health & Medical Sciences

The Australian Academy of Health and Medical Sciences is Australia's authority on, and trusted voice of, health and medical science.

Our Fellows are the very best of Australia's health and medical researchers and clinician scientists.

We serve the public good by drawing on this expertise and our ability to bring together the right people across research, policy and practice to provide independent, evidence-based advice on the issues that shape Australia's health – to government, health leaders and the community.

The Academy is a bridge between science and society – connecting the best evidence and expertise to the decisions that matter so that research and innovation translate into better policy, better practice, and better health outcomes.

Vision

A healthier Australia in a healthier world – driven by science, guided by evidence, and grounded in public trust

Purpose

To improve health outcomes by providing independent, evidence-based leadership that bridges science to policy, practice, and public understanding

Strategic pillars

Four strategic pillars translate our mission into action. Each represents a distinct area of focus, but they are deliberately interconnected – progress in one reinforces and strengthens the others.

Translating evidence into policy and practice

Provide independent, authoritative advice that improves health outcomes, strengthens health systems, and builds public trust by convening the nation's foremost health and medical experts alongside policymakers and other key stakeholders to connect the best available evidence with policy and practice.

Building national capability

Build Australia's health and medical science capability by nurturing talent, developing future leaders, strengthening career pathways and championing a health system with research at its core – to ensure that Australia is equipped to tackle current and future health challenges.

Championing health in our region

Use the Academy's national and international standing and networks to contribute to global health diplomacy and collaboration – supporting stronger health systems, greater research capacity, and the exchange of knowledge and expertise, with a particular focus on the Asia-Pacific.

Recognising and harnessing excellence

Recognise and celebrate outstanding achievement in health and medical science through Fellowship and Awards, and harness that collective expertise to advance Australia's health priorities – ensuring our recognition reflects the diversity of the communities we serve.

Cross-cutting commitments

Four cross-cutting commitments shape how we pursue each of our strategic pillars. They are not separate areas of work – they cut across everything we do.

Expert, impartial policy advice

We develop independent, evidence-based advice that is objective, non-partisan and grounded in expertise. Our focus is on what works for Australia's health and health system – and this shapes who we bring together, how we develop future leaders and the advice we provide.

First Nations health and wellbeing

We aim to embed First Nations partnership and leadership across our work. This spans the expertise we convene, the researchers we support, and the evidence and advice we provide – working in partnership with First Nations communities in Australia and Indigenous communities across our region.

Academia-health-industry interface

We are committed to strengthening the academia-health-industry interface. We connect diverse expertise and champion careers and collaboration across sectors – to promote the translation and impact that come from working across boundaries.

Diversity, equity and inclusion

Our work should reflect the diversity of the communities we serve. This means addressing issues that respond to the health needs of all communities, and ensuring diversity in the people we recognise, the expertise we draw on, the leaders we develop, and the perspectives that shape our advice and engagement.

Values

Excellence | **Integrity** | **Trust** | **Relevance** | **Equity**

Translating evidence into policy and practice

The Academy significantly expanded its policy impact in 2025-26, providing independent, evidence-based advice on some of the most consequential health and medical science issues that Australia faces.

Our work ranged from major national reforms to rapidly emerging areas of public concern. Across these issues, we drew on the expertise of our Fellows to translate complex evidence into practical advice for governments, policymakers and the community:

Shaping Australia's health and medical research system

The Academy continued its sustained engagement in the development of **Australia's first National Health and Medical Research Strategy**.

In October 2025, we responded to the Australian Government's draft Strategy, identifying ten opportunities to strengthen it, including by embedding research in the health system, advancing biomedical discovery science, strengthening horizon scanning, building and supporting the workforce, and advancing diversity, equity and inclusion.

This built on the Academy's engagement throughout the Strategy's development and our broader advocacy for a more coordinated national health and medical research system. We were pleased to serve on the technical reference group, which advised Strategy Chair, Rosemary Huxtable, during the process.

Microplastics, PFAS and human biomonitoring

The Academy strengthened its position as a leading source of independent evidence on the potential health impacts of microplastics, PFAS and other environmental contaminants.

In March 2026, we published **Microplastics, forever chemicals and other contaminants: An evidence brief** and submitted it to the Senate inquiry into the impacts of microplastics and other toxics on human health. Academy experts subsequently appeared before the Senate committee to provide oral evidence.

The Academy was cited 22 times in the committee's final report, making it the **most cited organisation in the document**. Fifteen of these citations drew directly on our evidence brief, with a further seven drawing on our oral evidence, answers to questions on notice and broader policy work.

Four of the Academy's policy calls were reflected in the committee's 12 recommendations: nationally standardised measurement methods, a national human biomonitoring program, longitudinal cohort studies, and better public information about sources of exposure.

Importantly, the committee recommended that a national human biomonitoring program commissioned through the Australian Centre for Disease Control be undertaken in conjunction with the Academy and other relevant stakeholders. This was the second Senate committee to recommend the development of a national human biomonitoring program following evidence from the Academy.

Responding to misinformation with evidence

In September 2025, the Academy published an evidence brief on **autism, paracetamol and vaccination**, responding rapidly to prominent international claims about the causes of autism.

The brief reaffirmed what the evidence shows: available evidence does not establish a causal relationship between autism and vaccination, or between autism and paracetamol use during pregnancy.

The brief was subsequently selected by Australian Policy Online as its Top Report of the Week and was later referenced in the *Medical Journal of Australia*.

The work demonstrated an increasingly important role for the Academy: responding quickly and authoritatively when health misinformation enters public debate.

Understanding trust in health and medical science

Public trust was a major theme for the Academy throughout 2025-26.

Our 2025 Annual Meeting brought together leaders from research, healthcare, policy and the community to consider how trust in health and medical science is built, maintained and lost.

Building on this work, the Academy published the first version of **Understanding Trust in the Health and Medical Sciences**, establishing a framework for understanding what trust means in health and medical science and why it matters. The work provides a foundation for considering how trust can be strengthened across Australia's health and research systems.

The Academy also worked with the Australian Academy of Science to contribute health expertise to the National Science and Technology Council's work on information resilience. The resulting national synthesis report examined how Australia can strengthen resilience to misinformation, supported by Academy work exploring how physical and mental health affect people's ability to navigate complex information environments.

Women in the Health and Medical Sciences: Decadal Plan

The Academy launched Australia's first **Decadal Plan for Women in the Health and Medical Sciences**, providing a ten-year roadmap for structural change across the sector.

Developed through extensive consultation with organisations and senior leaders across health, research, government and industry, the Plan identifies systemic barriers to women's career progression and sets out actions to build a more equitable sector.

Importantly, the Academy has moved quickly from recommendations to implementation.

One recommendation called for government investment in an evidence-based leadership program for women approaching senior leadership roles. This provided the policy foundation for the Academy's successful application for **$1.7 million through the Australian Government's Women in STEM and Entrepreneurship (WISE) program** to scale the Inclusive Leadership Mentoring Program nationally from 2026 to 2031.

Contributing across the policy landscape

The Academy also contributed expert advice across a broad range of national policy processes during the year.

Our submissions to the Australian Law Reform Commission's Review of Human Tissue Laws examined the implications of reform for research. The ALRC subsequently cited the Academy three times in its discussion paper, including in its consideration of tissue donation for research.

We also contributed to the Senate inquiry into legislation establishing the Australian Centre for Disease Control, providing recommendations on governance, independence, data governance, public health surveillance and the social determinants of health.

Our submission to the Senate inquiry into funding and resourcing for the CSIRO considered its experience as a signal of broader pressures across Australia's research system, rather than an institution-specific issue.

Together, this work reflects the Academy's growing role as a source of independent advice across the health, research and science policy landscape.

Building national capability

Life as a Clinician-Scientist

The Academy's **Life as a Clinician-Scientist (LACS)** initiative continues to inspire and equip the next generation of clinician-scientists, supporting students, junior clinicians and early-career researchers to explore careers that combine research with clinical practice.



In 2025-26, we delivered seven events: three in-person symposia and four online events, attracting more than 1,500 registrations.

Our in-person symposia provide emerging clinician-scientists with opportunities to hear directly from established leaders about the realities of combining clinical and research careers. More than **80 spot-mentoring sessions** were delivered during the year, giving participants an opportunity to seek personalised career advice in one-to-one conversations with experienced clinician-scientists.

In 2026, we expanded LACS with the introduction of **Skill-Up**, a new webinar series designed to equip emerging clinician-scientists with practical skills to navigate their careers.

The first two Skill-Up webinars explored two very different but important parts of research careers. **Publishing Your Research – Strategies for Success** provided practical advice on navigating the publication process, while **Failing Forward – Setbacks, Pivots and What Comes Next?** opened an honest conversation about setbacks, changing plans and navigating careers that do not always follow a predictable path.

The initiative also continues to reach participants beyond individual events through **Hypothesis**, our dedicated clinician-scientist newsletter. Its audience has now grown to **more than 2,500 subscribers**.

Participant feedback reflects both the practical value of the initiative and its role in inspiring emerging researchers:

> "I left feeling inspired and motivated. It was good to be reminded what can be achieved."

"A very positive, and practically useful event. Thank you!"

"Excellent, practical advice!! Brilliant and genuine speaker!"

This is a clear year-on-year expansion. Last year the report recorded six symposia, more than 1,000 registrations, more than 86 spot-mentoring participants and 2,000 Hypothesis subscribers. The 2025-26 numbers therefore give us a strong growth story, particularly the increase to 1,500+ registrations and 2,500+ subscribers.

The Life as a Clinician-Scientist program is made possible through the generous support of our partners and sponsors.

Platinum partners

Gold partners

Program supporters

Mentorship for Advancing Research Leaders



The Academy's **Mentorship Program for Advancing Research Leaders** continues to support emerging leaders in health and medical science by connecting them with experienced Academy Fellows.

Successful applicants become Associate Members of the Academy for the three-year duration of the program and are paired with a Fellow who provides independent career advice, perspective and support.

In 2025-26, we welcomed **20 new Mentees**, bringing the total to **45 Mentees** participating in the program as of 30 June 2026.

Mentees who joined the program during 2025-26 were:

- Dr Joanna Achinger-Kawecka, Adelaide University
- Professor Ilana Ackerman, Monash University
- Professor Yvonne Anderson, Curtin University
- Associate Professor Laura Diamond, Griffiths University
- Associate Professor Kylie Dunning, University of Adelaide
- Dr Dustin Flanagan, Monash University
- Associate Professor Zongyuan Ge, Monash University
- Associate Professor Katherine Gibney, The Doherty Institute
- Associate Professor Amanda Gwee, Murdoch Children's Research Institute
- Professor Joost Lesterhuis, The Kids Research Institute Australia
- Associate Professor Gustavo Machado, The University of Sydney
- Professor Zachary Munn, University of Adelaide
- Professor Nicola Newton, The University of Sydney
- Associate Professor Mark Plummer, University of Adelaide
- Associate Professor Kim van Schooten, Neuroscience Research Australia

- Associate Professor Sonia Shah, The University of Queensland
- Associate Professor Janet Sluggett, The University of South Australia
- Associate Professor Lexine Stapinski, The University of Sydney
- Associate Professor Phoebe Williams, The University of Sydney
- Professor Kaylene Young, The University of Tasmania

Inclusive Leadership Mentoring Program

During 2025-26, the Academy assumed stewardship of the **Inclusive Leadership Mentoring Program**, following the closure of Franklin Women in late 2025.

Delivered in partnership with Serendis Leadership, the program supports women in health and medical sciences to progress into leadership. It also builds the inclusive leadership capability of senior leaders to create lasting organisational and sector-wide change.

The program directly advances the Academy's Decadal Plan for Women in the Health and Medical Sciences and provides a practical mechanism through which organisations can act on commitments made through gender equity strategies, leadership development and workforce plans.

Following the reporting period, the Australian Government announced **$1.7 million in funding through the Women in STEM and Entrepreneurship program** to support the Academy to scale the program nationally between 2026 and 2031. The five-year expansion will extend the program beyond its established NSW base and build national infrastructure to support women across Australia.



Recognising and harnessing excellence

New Fellows



2025 AAHMS New Fellows

Academy Fellows are elected by their peers in recognition of their outstanding achievements and exceptional contributions to health and medical science.

In October 2025, the Academy welcomed **29 new Fellows**, bringing together outstanding leaders from across the breadth of Australia's health and medical sciences.

The 2025 new Fellows were:

- Professor Gary Anderson FAHMS, The University of Melbourne
- Professor Tracy Burrows FAHMS, The University of Newcastle
- Professor Jayesh Desai FAHMS, Peter MacCallum Cancer Centre
- Professor Valsamma Eapen FAHMS, UNSW Sydney
- Professor Gregory Fox FAHMS, The University of Sydney
- Professor Peter Gibbs FAHMS, WEHI
- Professor John Greenwood FAHMS, Baker Heart and Diabetes Institute
- Professor Yuming Guo FTSE FAHMS, Monash University
- Professor Prue Hart FAHMS, The University of Western Australia
- Professor Natasha Harvey FAHMS, University of South Australia
- Professor Michael Kassiou FTSE FAHMS, The University of Sydney
- Professor Paul Kelly FAHMS, Australian National University
- Professor Glenn King FAA FAHMS, The University of Queensland
- Professor Peter Kistler FAHMS, The Alfred Hospital
- Professor Dan Lubman AM FAHMS, Eastern Health
- Professor Barend Marais FAHMS, The University of Sydney
- Professor Keith Martin FAHMS, The University of Melbourne
- Professor Rachel Neale FAHMS, QIMR Berghofer Medical Research Institute
- Professor Belinda Parker FAHMS, Peter MacCallum Cancer Centre
- Professor Jose Polo FAA FAHMS, The University of Adelaide
- Professor Enzo Porrello FAHMS, Murdoch Children's Research Institute
- Professor Helen Reddel FAHMS, Woolcock Institute of Medical Research
- Professor Susan Sawyer AM FAHMS, The University of Melbourne

- Professor Alta Schutte FAHMS, UNSW Sydney
- Professor Dan Siskind FAHMS, The University of Queensland
- Professor Wayne Tilley FAHMS, The University of Adelaide
- Professor Julian Trollor AM FAHMS, UNSW Sydney
- Professor Minghao, Zheng FAHMS, The University of Western Australia
- Professor David Ziegler FAHMS, UNSW Sydney

Their addition to the Fellowship took its number to 551 in total, including 465 Ordinary, 12 Overseas (Ordinary), four Corresponding, 13 Honorary, and 57 Retired Fellows.

Diversity and inclusion

The Academy remains committed to strengthening diversity and inclusion within our Fellowship, leadership, programs and activities.

Our Diversity and Inclusion Policy requires annual reporting to Council across the Academy's work, including Fellowship and Associate Member selection, committees, speakers and the Secretariat.

The proportion of women in the Fellowship continues to increase. As of February 2026, 35% of Fellows are women, including 36% among Ordinary Fellows.

31% of new Ordinary Fellows elected in October 2025 were women. Despite a decrease in the proportion of women in the candidate pool compared to previous years, women had a higher success rate than men (41% of women were elected, compared to 37% men). In addition, looking back over the past five years, we have elected exactly 50% and 50% women in total across this period.

We have good representation of women within the Academy's leadership. The Executive is 57% women and Council is 68% women. Across all Fellowship Selection Committees, 44% of committee members are women and 56% are men.

Honorific Awards



2025 Honorific Award Winners

The Academy's honorific awards recognise outstanding achievement, leadership and impact across health and medical science.

Through the Jian Zhou Medal, Outstanding Female Researcher Medal and Outstanding First Nations Researcher Medal, the Academy celebrates researchers at different career stages whose work is advancing knowledge, improving health and strengthening Australian health and medical science.

The Jian Zhou Medal

Awarded annually to rising stars within 15 years of their PhD who are making a significant impact in translational health and medical sciences, this year the Jian Zhou medal was awarded to two outstanding researchers:

Professor Britta Regli-von Ungern-Sternberg AM FAHMS – Chair of Paediatric Anaesthesia at The University of Western Australia and Consultant Anaesthetist at Perth Children's Hospital, has been recognised for her groundbreaking work to improve the safety of anaesthesia in children, particularly those at highest risk.

Professor Francine Marques – Head of the Hypertension Research Laboratory at Monash University, has been recognised for her pioneering work exploring how diet and gut microbiome influence blood pressure.

The Outstanding Female Researcher Medal

This award recognises women researchers whose ground-breaking discoveries have advanced health and medical sciences and whose careers demonstrate sustained excellence. In October 2025, the Outstanding Female Researcher Medal was awarded to:

Professor Ingrid Scheffer AO FRS FAA FAHMS– Laureate Professor in Paediatric Neurology Research at The University of Melbourne, who was recognised for her groundbreaking work in epilepsy genetics. Working alongside a team of renowned researchers and molecular geneticists, she identified the first epilepsy gene and has contributed to the discovery of many more. These advances have transformed diagnosis, treatment and genetic counselling, improving the lives of countless patients and families worldwide.

The Outstanding First Nations Researcher Medal

In celebration of an outstanding mid-career Aboriginal and Torres Strait Islander researchers making significant contributions and providing leadership in health and medical sciences, the Outstanding First Nations Researcher Medal was awarded in October 2025 to:

Professor Raymond Lovett AM FAHMS – Director of the Mayi Kuwayu Study and a Senior researcher at the Yardhura Walani Centre, Australian National University, has been recognised for his pioneering research into the cultural and social determinants of health, work that has redefined how evidence can be generated in service to community.

Governance (as of 30 June 2026)

Academy Executive and Council

The Executive (Board)

Professor Louise Baur AM PresAHMS
President | Director since 2023

Professor John Prins FAHMS
Vice President | Director since 2024

Professor Cheryl Jones FAHMS
Treasurer and Public Officer | Director since 2023

Professor Susan Davis AO FAHMS
Director since 2023

Professor Bronwyn Kingwell FAHMS
Director since 2017

Professor Don Nutbeam AO FAHMS
Director since 2025

Professor Paul Scuffham FAHMS
Director since 2022

State Branch Chairs (and Council Members)

Professor Asha Bowen OAM FAHMS
Chair, WA State Branch since 2025

Professor Sue Walker AO FAHMS
Chair, VIC & TAS since 2025

Scientia Professor Rebecca Ivers AM FAHMS
Chair, NSW & ACT State Branch since 2025

Professor Helen Marshall AM FAHMS
Chair, SA & NT State Branch since 2022

Professor Emeritus Michael Francis Good AO FTSE FAHMS
Chair, QLD State Branch since 2025

Ordinary Council Members

Professor Gabrielle Belz FAHMS
Council Member since 2020

Distinguished Professor Elizabeth Elliott AM FAHMS
Council Member since 2020

Professor Russell Gruen FAHMS
Council Member since 2023

Professor David Mackey AO FAHMS
Council Member since 2023

Distinguished Professor Dianne Nicol
Council Member since 2022

Professor Helena Teede AM FAHMS
Council Member since 2023

Professor Maree Teesson AC FAHMS FASSA
Council Member since 2024

Standing Committees (as of 30 June 2026)

Finance, Audit and Risk Committee

Professor David Adams FAA FAHMS

Professor Louise Baur (ex officio) AM FAHMS

Professor Gabrielle Belz FAHMS

Professor Susan Davis AO FAHMS

Professor Stephen Nicholls FAHA FAHMS

Professor John Prins FAHMS

Professor Kathryn Refshauge FAHMS

Professor Andrew Scott AM FAHMS

Associate Professor Janet Sluggett

Ms Meron Wolde (independent member)

Mr Trevor Zimmermann

Mentorship Committee

Professor Gail Risbridger AM FAHMS

Professor David Mackey AO FAHMS

Professor Christopher Maher AM

Professor Louise Maple-Brown FAHMS

Professor Claire Rickard FAHMS

Professor Ingrid Scheffer AO FRS FAA FAHMS

Policy Advice Committee

Professor Paul Scuffham FAHMS

Professor Harriet Hiscock FAHMS

Professor Jo Salmon FAHMS

Professor Louisa Jorm FAHMS

Distinguished Professor Dianne Nicol FAHMS

Professor Scott Bell FAHMS

Professor Don Nutbeam AO FAHMS

Professor Elizabeth Elliott AO FAHMS

Professor Louise Baur AM FAHMS

Professor Jana Vukovic

Associate Professor Sudarshini Ramanathan

Secretariat (as at 30 June 2026)

Ms Catherine Luckin, Chief Executive Officer

Mr Khaled Chakli, Deputy Chief Executive Officer & Director of Policy and Communications

Dr Carla Muma, Fellowship Manager

Dr Ruby Guyatt, Policy Manager

Ms Leila Hutton & Dr Jocelyne Mulangala, Programs and Events Manager

Ms Ida Gambaro, Awards Manager

Ms Kassandra Brown, Communication and Events Officer

Dr Apurva Kashyap, Policy and Communications Officer

Treasurer's report



The Academy has reported a deficit of $124,477 for the financial year ending 30 June 2026 and is solvent. This was broadly in line with the budgeted deficit of $98,000, which was approved by the Executive as an investment from our strategic reserves (shown in the notes to the accounts). The small difference from the budgeted figure is largely attributable to employee leave liabilities, which we are actively working to bring down.

The strategic investment funded work to further build our profile, invest in our policy and government relations activities, and establish a Canberra presence (in addition to our Brisbane and Sydney offices). It has yielded demonstrably beneficial outcomes over the past 12 months – outlined in our annual report. A further strategic investment of approximately $65,000 in total over the next two years was approved as part of this plan and we expect a surplus within three years, if not before.

During 2025/26, we continued to receive valuable support from the Australian Government through the Higher Education Research Promotion (HERP) scheme that funds Australia's Learned Academies. Our grant ($594,722 this year) remains significantly lower than those received by the other Academies – we receive less than 10% of the total HERP funding distributed by the Government. This means that our other income sources remain crucial. Fellows' subscriptions, in particular, are significant and important source of income ($509,397 this year). Donations remain modest, but they present a real opportunity for Fellows and other stakeholders to support our work and help us grow our impact.

Sponsorships and partnerships increased again. This reflects our expanding program of work, in particular the Inclusive Leadership Mentoring Program, which we took on from Franklin Women after it closed in late 2025. We stepped in here to ensure that a program that is greatly valued by the sector continued to run. While the fees for the program have covered the direct costs of delivery, we have invested secretariat time to ensure its success this year. We were delighted that in July 2026, Minister for Science, Senator the Hon. Tim Ayers announced that we had been awarded a grant of $1.7M under the Women in STEM and Entrepreneurship (WISE) scheme to support the national scale up of this Program.

Our approach to financial management remains prudent to ensure we have the resources to navigate economic uncertainties and continue to invest in strategic initiatives that align with our mission. As part of our new Strategic Plan 2026-2030, we are also working on plans to generate additional income to support the delivery of this strategy.

The Academy's Executive (Board), with advice from the Finance, Audit, and Risk Committee, has decided to increase Fellowship fees in 2027 by 2.5%. This modest increase reflects rising operating costs, while also remaining mindful of the pressures Fellows themselves face; it helps ensure we have the resources to sustain our work – of which, as noted, fees are a crucial component. Standard Fellowship fees in 2027 will increase from $1,407 to $1,442 (including GST), with other fees adjusted accordingly. The salary threshold for Fellows eligible to pay the discounted fee rate will also increase by 2.5%, to $230,000.

The Academy will continue to maintain a low-risk and short-term investment strategy, regularly reassessed in collaboration with the Finance, Audit, and Risk Committee, to ensure the financial stability of the organisation. This involves keeping some investments in term deposits (less than 12 months) and the rest in an immediate access investment account.

Balances as of 30 June 2026:

- **Total Equity**: $1,234,524
- **Income from Memberships**: $509,397
- **Total Operating Costs for the Year Ending 30 June**: $1,523,272

The Academy's General Purpose Financial Report is provided below for the year ending 30 June 2026 for a more detailed breakdown of income and expenditure.

I would like to take this opportunity to remind Fellows of the importance of paying your Fellowship fees on time. This greatly assists the Academy with our financial planning and in delivering our activities. Fellows have a financial obligation to pay fees in accordance with the Academy's Constitution and By-Laws. Those who are unable to pay should contact me or our CEO, Catherine Luckin, as soon as possible for a confidential discussion.

I am grateful for the ongoing support of the Finance, Audit, and Risk Committee, the Executive (Board) and the dedication of our secretariat, especially our CEO, Catherine, and our Company Secretary, Diana Melham.

Sincerely,

Professor Cheryl Jones FAHMS
Treasurer and Public Officer

Australian Academy of Health & Medical Sciences Ltd

ABN: 55167124067

Financial Statements

For the year ended 30 June 2026

Australian Academy of Health & Medical Sciences Ltd

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AUSTRALIAN ACADEMY OF HEALTH AND MEDICAL SCIENCES LTD
ABN 55 167 124 067

AUDITOR'S INDEPENDENCE DECLARATION UNDER SUBDIVISION 60-C SECTION 60-40 OF THE AUSTRALIAN CHARITIES AND NOT-FOR-PROFITS COMMISSION ACT 2012 TO THE DIRECTORS OF AUSTRALIAN ACADEMY OF HEALTH AND MEDICAL SCIENCES LTD

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2026 there have been:

I. no contraventions of the auditor independence requirements as set out in the *Australian Charitie and Not-for-profits Commission Act 2012* in relation to the audit; and

II. no contraventions of any applicable code of professional conduct in relation to the audit.

C.W. Stirling & Co

CW STIRLING & CO
Chartered Accountants

for A Phillips

John A Phillips
Partner

Dated this 29th day of September 2026 Melbourne, Victoria

Australian Academy of Health & Medical Sciences Ltd

Statement of profit or loss and other comprehensive income

For the year ended 30 June 2026

	Note	2026 $	2025 $
Revenue	5	509,397	457,308
Finance income	6	45,048	47,957
Grants and other income	5	844,350	800,863
Total income		1,398,795	1,306,128
Depreciation and amortisation		(8,664)	(3,830)
Employee benefit expenses		(1,050,226)	(917,853)
Finance expenses	6	(222)	-
Other expenses		(459,478)	(393,260)
Doubtful debts expense		(4,682)	(4,732)
Total expenses		(1,523,272)	(1,319,675)
Surplus/(deficit) before income taxes		(124,477)	(13,547)
Income tax		-	-
Surplus/(deficit) from continuing operations		(124,477)	(13,547)
Total comprehensive income for the year		(124,477)	(13,547)

The accompanying notes form part of these financial statements.

Australian Academy of Health & Medical Sciences Ltd

Statement of financial position

As at 30 June 2026

	Note	2026 $	2025 $
Assets			
Current assets			
Cash and cash equivalents	8	1,790,136	1,364,371
Trade and other receivables	9	62,132	83,826
Inventories	10	62,000	64,050
Other assets	12	49,566	46,779
Total current assets		1,963,834	1,559,026
Non-current assets			
Property, plant and equipment	11	11,675	20,025
Right-of-use assets	13	10,997	-
Total non-current assets		22,672	20,025
Total assets		1,986,506	1,579,051
Liabilities			
Current liabilities			
Trade and other payables	14	126,284	73,822
Employee benefits	16	111,162	100,241
Lease liabilities	13	3,433	-
Other liabilities	15	254,750	23,400
Total current liabilities		495,629	197,463
Non-current liabilities			
Employee benefits	16	30,700	22,588
Lease liabilities	13	7,603	-
Other liabilities	15	218,050	-
Total non-current liabilities		256,353	22,588
Total liabilities		751,982	220,051
Net assets		1,234,524	1,359,000
Equity			
Retained earnings		965,567	992,043
Reserves	17	268,957	366,957
Total equity		1,234,524	1,359,000

The accompanying notes form part of these financial statements.

Australian Academy of Health & Medical Sciences Ltd

Statement of changes in equity
For the year ended 30 June 2026

2025	Retained Earnings $	Other reserves $	Total equity $
Opening balance	1,005,590	366,957	1,372,547
Surplus/(deficit) for the year	(13,547)	-	(13,547)
Closing balance	992,043	366,957	1,359,000

2026	Retained earnings $	Other reserves $	Total equity $
Opening balance	992,043	366,957	1,359,000
Surplus/(deficit) for the year	(124,477)	-	(124,477)
Transfers to/(from)	98,000	(98,000)	-
Closing balance	965,566	268,957	1,234,523

The accompanying notes form part of these financial statements.

Australian Academy of Health & Medical Sciences Ltd

Statement of cash flows

For the year ended 30 June 2026

	Note	2026 $	2025 $
Cash flows from operating activities:			
Receipts from customers		1,870,322	1,294,154
Payments to suppliers and employees		(1,444,559)	(1,342,835)
Net cash flows from/(used in) operating activities	21	425,763	(48,681)
Cash flows from investing activities:			
Purchase of property, plant and equipment		-	(16,213)
Net increase/(decrease) in cash and cash equivalents		425,763	(64,894)
Cash and cash equivalents at beginning of year		1,364,373	1,429,267
Cash and cash equivalents at end of financial year	8	1,790,136	1,364,373

The accompanying notes form part of these financial statements.

1. Introduction

The financial report covers Australian Academy of Health & Medical Sciences Ltd as an individual entity. Australian Academy of Health & Medical Sciences Ltd is a not-for-profit Company, registered and domiciled in Australia.

The functional and presentation currency of Australian Academy of Health & Medical Sciences Ltd is Australian dollars.

Comparatives are consistent with prior years, unless otherwise stated.

2. Basis of preparation

The financial statements are general purpose financial statements that have been prepared in accordance with the Australian Accounting Standards - Simplified Disclosures and the *Australian Charities and Not-for-profits Commission Act 2012*.

The financial statements are based on historical costs modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities.

Material accounting policy information is consistent with prior reporting periods unless otherwise stated.

3. Material accounting policy information

a. Income tax

The Company is exempt from income tax under Division 50 of the *Income Tax Assessment Act 1997*.

b. Goods and services tax (GST)

Revenue, expenses and assets are recognised net of the amount of goods and services tax (GST), except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO).

Receivables and payable are stated inclusive of GST.

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

c. Cash and cash equivalents

Cash and cash equivalents comprises cash on hand, demand deposits and short-term investments which are readily convertible to known amounts of cash and subject to an insignificant risk of change in value.

d. Inventories

Inventories are measured at the lower of cost and net realisable value.

3. Material accounting policy information (continued)

d. Inventories (continued)

Inventories acquired at no cost, or for nominal consideration are valued at the current replacement cost as at the date of acquisition, which is the deemed cost.

e. Property, plant and equipment

Each class of property, plant and equipment is carried at cost less, where applicable, any accumulated depreciation and impairment.

i. Depreciation

Property, plant and equipment, excluding freehold land, is depreciated on a straight-line basis over the asset's useful life to the Company, commencing when the asset is ready for use.

At the end of each annual reporting period, the depreciation method, useful life and residual value of each asset is reviewed. Any revisions are accounted for prospectively as a change in estimate.

f. Employee benefits

Provision is made for the Company's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits that are expected to be wholly settled within one year have been measured at the amounts expected to be paid when the liability is settled, plus related on-costs.

The Company carries a liability for personal leave, based upon estimates of the likelihood of personal leave being incurred plus related on-costs.

4. Critical accounting estimates and judgements

The responsible persons make estimates and judgements during the preparation of these financial statements regarding assumptions about current and future events affecting transactions and balances.

These estimates and judgements are based on the best information available at the time of preparing the financial statements, however as additional information is known then the actual results may differ from the estimates.

The significant estimates and judgements made have been described below.

a. Key estimates - receivables

The receivables at the reporting date have been reviewed to specifically provide for any debts which are considered irrecoverable. The remaining debts have been subject to expected credit loss testing based on the history of the association with the counterparty, the current economic climate and any future expectations relating to the industry and circumstances of the counterparty.

5. Revenue and other income

a. Revenue from continuing operations

	2026 $	2025 $
Revenue from contracts with customers (AASB 15)		
Member subscriptions	509,397	457,308
	509,397	457,308

b. Other income

Grant revenue
Government grants are recognised at fair value where there is reasonable assurance that the grant will be received and all grant conditions will be met. Grants relating to expense items are recognised as the expenditure is incurred. Grants relating to assets are credited to deferred income at fair value and are credited to income over the expected useful life of the asset on a straight-line basis.

Other income
Other income is recognised on an accruals basis when the Company is entitled to it.

	2026 $	2025 $
Other income		
Grants - Commonwealth (Operating) - Recurrent	594,722	580,784
Donations Received	5,050	26,750
Sales	45,260	35,359
Fee for Service	10,500	12,797
Sponsorship & partnerships	188,818	145,173
Total Other income	844,350	800,863

6. Finance income and expenses

	2026 $	2025 $
Interest income		
Other interest income	45,048	47,957
	45,048	47,957

Finance expenses	2026 $	2025 $
Interest expense	222	-

7. Auditor's remuneration

Remuneration of the auditor, CW Stirling & Co:	2026 $	2025 $
Auditing the financial statements	12,000	11,000

8. Cash and cash equivalents

a. Cash and cash equivalent details

	2026 $	2025 $
Cash at bank	1,390,136	964,371
Short-term deposits	400,000	400,000
	1,790,136	1,364,371

b. Reconciliation of cash

Cash at the end of the financial year as shown in the statement of cash flows is reconciled to items in the statement of financial position as follows:

	2026 $	2025 $
Cash and cash equivalents	1,790,136	1,364,371

9. Trade and other receivables

Current	2026 $	2025 $
Trade receivables	70,732	92,858
Provision for impairment	(8,600)	(9,032)
	62,132	83,826

The maximum exposure to credit risk at the reporting date is the fair value of each class of receivable in the financial statements.

10. Inventories

a. Inventory details

Current	2026 $	2025 $
At cost		
Merchandise	62,000	64,050

11. Property, plant and equipment

a. Property, plant and equipment details

Summary	2026 $	2025 $
Office equipment		
Computer Equipment	25,076	25,076
Accumulated Depreciation on Computer Equipment	(13,401)	(5,051)
Total Computer equipment	11,675	20,025

2026	Office equipment $	Total $
Opening balance	20,025	20,025
Depreciation	(8,350)	(8,350)
Closing balance	11,675	11,675

12. Other assets

Current	2026 $	2025 $
Prepayments	49,566	46,779

13. Leases

a. Company as a lessee

The Company has a Right of Use lease over an office space in Canberra.

	2026 $	2025 $
Right of use lease asset	11,311	-
Right of use lease asset accumulated amortisation	(314)	-
Total carrying value	10,997	-

i. Terms and conditions of leases

The Canberra lease expires in May 2028 at a rental of $4000 per annum with 3.5% annual increases, with a one year option extension which is expected to occur.

13. Leases (continued)

a. Company as a lessee (continued)

ii. Right-of-use assets

In addition to the Canberra lease, the company has entered two leases of office space to assist in meeting its charitable objectives. The lease commitments are substantially below market rates. The lease at University of Sydney expired on 31 December 2024 and payments are $1 per year. An extension is currently under discussion with the lessor. The lease in Brisbane has payments of $1 per year. As a not-for-profit charity, the company accounts for the two Right-of-use lease assets at cost.

iii. Lease liabilities

Right of Use Lease Liability	2026 $	2025 $
Current Liability	3,433	-
Total	3,433	-
Non-Current Liability	7,603	-
Total	7,603	-

14. Trade and other payables

Current	2026 $	2025 $
Trade payables	24,954	33,717
GST payable	74,224	22,605
Accrued expenses	24,634	17,500
Other trade and other payables	2,472	-
	126,284	73,822

Trade and other payables are unsecured, non-interest bearing and are normally settled within 30 days. The carrying value of trade and other payables is considered a reasonable approximation of fair value due to the short-term nature of the balances.

15. Other liabilities

Current	2026 $	2025 $
Grant funds received in advance	254,750	23,400

15. Other liabilities (continued)

Non-current	2026 $	2025 $
Grant funds received in advance	218,050	-

The non-current liability relates to grant funds received in respect of the 2027/28 year.

16. Employee benefits

a. Employee benefit details

Current	2026 $	2025 $
Annual leave	100,095	79,792
Other employee benefits	11,067	20,449
	111,162	100,241

16. Employee benefits (continued)

a. Employee benefit details (continued)

Non-current	2026 $	2025 $
Long service leave	30,700	22,588

17. General Reserves

	2026 $	2025 $
Other reserves	268,957	366,957

a. Other reserves

The General Reserve sets aside funds from past surpluses to provide working capital for possible future projects. The Executive approved use of $98,000 of the reserves in 2025/26 to enable a small restructure and investment in our policy, government relations and strategic communications activities. The restructure continues in 2026/27 and $50,000 from the reserves has been budgeted for the 2026/27 year.

18. Key management personnel remuneration

The totals of remuneration paid to the key management personnel of Australian Academy of Health and Medical Sciences Limited during the year are as follows:

	2026 $	2025 $
Total employee benefits	469,841	390,129

There were no transactions with related parties during the year, apart from a Director and the CEO being reimbursed for costs incurred on behalf of the company.

19. Members' guarantee

The Company is registered with the *Australian Charities and Not-for-profits Commission Act 2012* and is a Company limited by guarantee. If the Company is wound up, the constitution states that each member is required to contribute a maximum of $10 each towards meeting any outstanding obligations of the Company. At 30 June 2026 the number of members was 551 (2025: 525).

20. Contingencies

a. Contingent liabilities

Australian Academy of Health & Medical Sciences Ltd had the following contingent liabilities at the end of the reporting period:

The company has committed to holding an annual general meeting and Gala dinner in October 2026. The total cost of the event is estimated to be in the order of $25,000 with most sought to be recovered from sponsors and participants.

21. Cash flow information

Reconciliation of net income to net cash provided by operating activities:

	2026 $	2025 $
Deficit for the year	(124,477)	(13,547)
Add/(less) non-cash items:		
ROU lease interest	58	-
ROU lease adjustment	(334)	-
Depreciation and amortisation	8,664	3,830
Changes in assets and liabilities:		
(increase)/decrease in receivables	21,694	(12,874)
(increase)/decrease in inventories	2,050	(19,250)
(increase)/decrease in other assets	(2,787)	(12,674)
increase/(decrease) in payables	52,462	(11,092)
increase/(decrease) in employee benefits	19,033	16,027
increase/(decrease) in other liabilities	449,400	900
Cash flows from operations	425,763	(48,680)

22. Events occurring after the reporting date

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the Company, the results of those operations, or the state of affairs of the Company in future financial years.

23. Statutory information

The registered office of the Company is:

Australian Academy of Health & Medical Sciences Ltd
41 Boggo Road
Dutton Park QLD 4102
Australia

23. Statutory information (continued)

The principal place of business is:

Level 3 Ecosciences Precinct
41 Boggo Road
Dutton Park QLD 4102.

Australian Academy of Health & Medical Sciences Ltd

Responsible persons' declaration

The responsible persons declare that in the responsible persons' opinion:

1. There are reasonable grounds to believe that the company is able to pay its debts as and when they become due and payable.

2. The financial statements and notes satisfy the requirements of the *Australian Charities and Not-for-profit Commission Act 2012*.

3. The financial statements and notes comply with Australian Accounting Standards - Simplified Disclosures.

4. The financial statements and notes give a true and fair view of the financial position ot the company as at 30 June 2026 and of its performance for the year ended on that date.

Signed on behalf of all Responsible Persons by resolution of the Board in accordance with subsection 60.15(2) of the *Australian Charities and Not-for-profits Commission Regulation 2022*.

Director .....

Director .....

Dated: 29 September 2026

AUSTRALIAN ACADEMY OF HEALTH AND MEDICAL SCIENCES LTD
ABN 55 167 124 067

INDEPENDENT AUDIT REPORT TO THE MEMBERS OF
AUSTRALIAN ACADEMY OF HEALTH AND MEDICAL SCIENCES LTD

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of the Australian Academy of Health and Medical Sciences Ltd, which comprises the statement of financial position as at 30 June 2026, the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors declaration.

In our opinion the accompanying financial report of the Australian Academy of Health and Medical Sciences Ltd has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

(a) giving a true and fair view of the company's financial position as at 30 June 2026 and of its financial performance for the year then ended; and

(b) complying with Australian Accounting Standards – AASB: 1060 *General Purpose Financial Statements - Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2022*.

Basis for Opinion
We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the company in accordance with the ACNC Act, the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Directors for the Financial Report
The directors of the company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – AASB: 1060 *General Purpose Financial Statements - Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* and the *Australian Charities and Not-for-profits Commission Act 2012* 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.

In preparing the financial report, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations, or has no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report
Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

AUSTRALIAN ACADEMY OF HEALTH AND MEDICAL SCIENCES LTD
ABN 55 167 124 067

INDEPENDENT AUDIT REPORT TO THE MEMBERS OF
AUSTRALIAN ACADEMY OF HEALTH AND MEDICAL SCIENCES LTD

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the company's internal control.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by directors.

- Conclude on the appropriateness of the director's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the company to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

C.W. Stirling & Co.
Chartered Accountants

John A Phillips
Partner

Dated this 29th day of September 2026
Melbourne.



Australian Academy *of* Health & Medical Sciences

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