

Registration number 28395

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

DIRECTORS' REPORT AND FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

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DIRECTORS AND OTHER INFORMATION

Directors	Natalie Mc Donnell (Resigned 10/09/18) Natasha O'Brien Fiona Tyrrell Ruth Fletcher Wendy Lyons Rosemary Wokocha Patricia Prendiville Jennifer Gargan Marianne Byrne Siona Cahill
Secretary	Niall Behan (Resigned 17/07/2018) Ben Howe (Appointed 17/07/2018)
CRO number	28395
CHY number	5694
CRA number	20008949
Registered office	42a Pearse Street, Dublin 2.
Auditors	KSi Faulkner Orr Limited Registered Auditors Behan House, 10 Lower Mount Street, Dublin 2.
Bankers	AIB Bank Business Centre, Westmoreland Street, Dublin 2.
Solicitors	Rutherfords 41 Fitzwilliam Square, Dublin 2.

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CHAPTER 1: ABOUT THE IFPA

The Irish Family Planning Association (IFPA)

Since 1969, the IFPA has worked to promote and protect basic human rights in relation to sexual and reproductive health, relationships and sexuality. The IFPA's vision is for an Irish society where all people can enjoy a fulfilling sex life and can make informed choices in their sexual and reproductive lives; where there is full access to high quality information, education and health services regarding sex, sexuality, conception, contraception, safe abortion and sexually transmitted infections.

Mission Statement

The IFPA, its members, affiliates and supporters:

Promote and protect individual basic human rights in reproductive and sexual health, relationships and sexuality.

Promote and defend the right of all persons, including young people, to decide freely the number and spacing of their children (if any), so that every child is a wanted child.

Are committed to obtaining equal rights for women and young people, and to their empowerment in obtaining full participation in, and benefit from, social, political and economic development.

Are committed to working in alliance with all those who share our aims, and in co-operation with interested government and non-governmental bodies.

The IFPA provides quality reproductive health care at its two medical clinics in Dublin and ten counselling centres across Ireland. Our services include non-directive pregnancy counselling, family planning and contraceptive services, free post-abortion medical check-ups and educational services. Since January 2019, the IFPA also provides early medical abortion. In 2018 the IFPA provided a total of 13,027 appointments, of which 5,162 were contraceptive services. The IFPA provides an annual contraception foundation course for nurses and midwives, which is approved by the Nursing and Midwifery Board of Ireland. We also provide medical training—including peer-to-peer training in long acting reversible contraception training for doctors—and sexuality education, including relationships and sexuality education workshops in secondary schools.

The IFPA maintains professional relationships with and draws upon the experience and evidence base of international standard-setting bodies, such as the World Health Organisation (WHO), the International Federation of Gynaecology and Obstetrics (FIGO) and the Royal College of Obstetricians and Gynaecologists (RCOG). The IFPA is an accredited member association of the International Planned Parenthood Federation (IPPF) and is the Irish collaborating partner of the UN's agency for sexual and reproductive health, UNFPA. The IFPA maintains membership of FIAPAC (the International Federation of Professional Abortion and Contraception Associates), the European Society for Contraception and Reproductive Health, the Irish Association of Sexual and Reproductive Healthcare Providers. The IFPA is the Secretariat to the All Party Oireachtas Interest Group on Sexual and Reproductive Health and Rights and is affiliated to the European Parliamentary Forum for Sexual and Reproductive Rights (EPF).

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From the time of its inception when the law banned all forms of contraception, the IFPA has worked and advocated for women's and couple's access to the means to avoid the risk of unintended pregnancy and to have access to care in cases of pregnancies that are unintended or become a crisis. This includes access to information and counselling and to a choice of quality services, including safe and legal abortion care and the full range of modern methods of contraception.

Overview of 2018

2018 was a monumental year for women's reproductive rights and health. The 8th Amendment of the Constitution was repealed and the law that commenced on January 1st 2019 operates in an entirely new legal context where abortion care is no longer excluded from the norms that apply to healthcare generally. Decision-making in relation to pregnancy in general, and termination of pregnancy in particular, no longer engages foetal rights under the Constitution in ways that ignore the health and silence the views of the pregnant woman. Although dominated by the referendum which led to the repeal of the 8th Amendment, 2018 also saw unprecedented attention to sexuality education policy and the promise by the Minister for Health to remove cost as a barrier to contraception. It was also a year in which the state's cervical cancer screening programme came under intense scrutiny. As a leading provider of sexual health services, the IFPA continued to provide a high level of services at our two Dublin medical clinics and ten pregnancy counselling locations across Ireland, including contraception advice and services; sexually transmitted infection (STI) screening and treatment; free cervical screening (the IFPA is a registered smertaker with CervicalCheck, the National Cervical Screening Programme); pregnancy and post-abortion counselling; fertility advice; pregnancy testing; free post-abortion medical check-up; menopause health check; breast check, occupational health screening; and free treatment for women who have undergone female genital mutilation (FGM). Abortion was not the only major reproductive health issue to dominate public, parliamentary and media attention: our services came under intense pressure with the demand for repeat cervical screening tests as the national smear test programme came under scrutiny.

A significant advocacy focus in 2018 was on the Department of Health proposals to introduce a free contraception scheme after the referendum. As a service provider, the IFPA is acutely aware that many unintended pregnancies arise from poor or inadequate information and misinformation about reproduction and contraception, from inadequate local access to services or from cost barriers which force women who wish to avoid pregnancy to use unreliable methods or no methods of contraception. Our particular concern with the Department of Health and in media interventions is that any free contraceptive scheme must include the most effective long-acting methods.

Governance & Management

The Irish Family Planning Association CLG is registered in Ireland as a Company Limited by Guarantee.

It is governed by Memorandum and Articles of Association. The Directors are elected at the AGM. Board members are recruited to ensure a mix of professional skills and personal experiences. One Board member retired during 2018. The Board met 7 times during 2018.

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Directors of the company

Current members of the Board (with attendance at Board meetings during the year):

	<i>Attendance</i>
Ruth Fletcher	3 / 7
Fiona Tyrrell	7 / 7
Jennifer Gargan	5 / 7
Natalie Mc Donnell (completed term 10/9/18)	3 / 5
Natasha O'Brien	6 / 7
Rosemary Wokocha	6 / 7
Wendy Lyon	5 / 6
Patricia Prendiville	4 / 7
Síona Cahill	4 / 7
Marianne Byrne	7 / 7

Meetings of the Board of Directors

The Directors and secretary who served during the year had no financial interests in the company.

Chief Executive, Niall Behan, attends all meetings of the Board and reports at these meetings on implementation of the organisation's Strategic Plan. Ben Howe, Financial Controller acts as the Company Secretary of the Association.

As required by the provisions of the Charities Act 2009, IFPA Board members are volunteers and do not receive remuneration. The only expenditure incurred in relation to the Board of Directors was the cost of sandwiches for Board meetings.

AGM

The 2018 annual general meeting was held in September. Natalie McDonnell completed her two-year term as Chair. We thank her for her service at a pivotal time in the organisation. Fiona Tyrrell was elected Chair.

Organisational capacity

There have been no changes in the organisation's leadership, governance or finances in this period. However, in recognition of the momentous changes brought about by the referendum, the Board has decided to engage in an organisational review, which will take place in 2019. This will include a review of the IFPA Memorandum and Articles and of management structures and systems.

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Subcommittees

There are currently two standing subcommittees, each of which is governed by terms of reference specifying the scope of its competencies and delegated authorities:

The members of the Audit, Finance and Risk subcommittee are Jennifer Gargan, Rosemary Wokocha and staff members Niall Behan (CEO) and Ben Howe (Financial Controller). The subcommittee oversaw the effective financial and risk management of the IFPA, including resource mobilisation, financial risks, borrowing and outlay of all monies required to fund its activities. During 2018, the subcommittee reviewed the quarterly management accounts, the annual budget and the draft financial statements for approval to the Board. The subcommittee met 4 times during 2018.

The members of the Governance subcommittee are Jennifer Gargan, Natasha O'Brien, Patricia Prendiville, and staff members Ben Howe (Financial Controller) and Liz Harper (Coordinator of Services). A key task for 2018 was to monitor compliance with the NGO Governance Code, which sets the minimum standards required in order to effectively manage and control an NGO. In 2019, this function will transfer to the Charities Regulator. The IFPA is committed to working with the Regulator to implement their Governance code. The subcommittee also oversaw the revision of the organisation's Safeguarding Policy and Safeguarding Statement, as well as the Recruitment and Staff Handbooks. The subcommittee met 4 times during 2018.

Codes of practice

The Board is guided in its governance by the IFPA Board Handbook and by other best practice principles, including the Dóchas Code of Corporate Governance and the Dóchas Guidelines for Annual Reports and Financial Statements, the Dóchas Code of Conduct on Images and Messages, as well as the Statement for Guiding Principles for Fundraising.

The IFPA is an accredited Member Association of the International Planned Parenthood Federation (IPPF). The IFPA Board upholds and promotes the IPPF Code of Good Governance, which includes 48 compliance standards that represent good practice in governance. In late 2017, the IPPF confirmed that IFPA complied with 46 of the 48 standards: in 2018, the IFPA Board took action to ensure that IFPA complied with all IPPF standards and IFPA will be fully IPPF-accredited in 2019.

In 2018, the IFPA continued the process of moving towards the Statement of Recommended Practice (SORP).

State regulation

The IFPA made the required lobbying returns to the Register of Lobbying maintained by the Standards in Public Office Commission (SIPO) three times during the year. During the referendum campaign, the IFPA registered with SIPO and deregistered once the referendum was over. In 2018, SIPO, which had opened an

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investigation into the IFPA after newspaper reports alleged the use of overseas funds for political purposes—an allegation the IFPA absolutely refutes—decided not to take action and closed its file.

IFPA Management Team

The IFPA management team is tasked with implementing the strategic plan. During 2018 the management team met seven times.

IFPA senior management team:

Niall Behan, Chief Executive
Dr. Cairtriona Henchion, Medical Director
Ben Howe, Financial Controller
Maura Leahy, Director of Counselling
Maeve Taylor, Director of Advocacy & Communications
Annette Smith, Clinic Manager
Deirdre Jones, Clinic Manager
Liz Harper, Co-ordinator of Services

Staff changes

In 2018, Maura Leahy, Director of Counselling, and long-serving counsellors, Áine Ward, Evelyn Dickinson and Sharon Day left our counselling team. Dr Mary Boushel and Nurse Elaine Pedan left our Tallaght clinic. They will be missed by both colleagues and clients.

Project Assistants Áine Kavanagh, Kate Tierney and Communications Assistant Leah Murphy successfully completed short-term contracts. Three interns volunteered with the advocacy team in 2018: Brian Donnelly, Shannon Glaspy and Mackenzie Piper all made significant contributions to our global development and domestic policy work.

The Board and Management of the IFPA would like to thank them for their work and the significant impact they made during their time with the Association.

We were delighted to welcome counsellors Brigid Nee and Margaret Lenihan, receptionist Jackie O'Reilly, doctors Siti Sulani and Lakshmi Parameswaran and nurses Lorraine Glesson, June Flood and Rachael Groves to our staff team.

Organisational development

Protocols, policies and procedures

In light of the new legislation and the development of the “model of care” for termination of pregnancy services, all IFPA counselling protocols, policies and procedures were reviewed in 2018. A review of the IFPA pregnancy helpline was completed and implementation of recommendations commenced.

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A new reporting system was developed to meet the new Sexual Health and Crisis Pregnancy Programme (SHCPP) requirements. All IFPA counsellors completed the HSE e-learning child protection course.

Training for staff

In November and December a series of workshops was held for counsellors, medical personnel and administration staff to discuss the provision of abortion services in Ireland. In December the IFPA held workshops for clinic staff based on the HSE's model of care for women requesting abortion services.

Quality assurance

Throughout this period, we continued to add to our evidence base while delivering high quality pregnancy counselling. We completed one item in our Quality Improvement Plan—the helpline review—and continue to progress the documentation and evaluation of clients' experiences and the development of memorandums of understanding with third parties.

Youth panel

In September we began the development of an IFPA youth panel. We successfully applied for funding from the IPPF to support staff participation in a programme aimed at developing youth-centred approaches. IFPA Coordinator of Services Liz Harper and IFPA volunteer Laura Lebreton took part in online coaching sessions, completed checklists and, in November, attended a two-day workshop hosted by IPPF member association, Pro Familia, in Frankfurt, Germany which led to the development of an action plan for youth-centred approaches within the IFPA.

Funding

The IFPA's clinic services are funded through a combination of fees from private clients and funding from the Health Services Executive (HSE) through its National Social Inclusion Office, Sexual Health and Crisis Pregnancy Programme (SHCPP) and National Screening Service. This supports the IFPA to provide medical and pregnancy counselling services to women and girls in Ireland, regardless of income or residency status. It ensures that women and girls have a choice of reproductive healthcare provider. HSE funding means that the IFPA can provide programmes such as a migrant clinic specialising in the treatment of women who have undergone female genital mutilation (FGM); run the Pearl of Wisdom cervical cancer health promotion campaign; and provide sexuality education, training and capacity building.

In addition, the IFPA also received funding in 2018 for research, organisational development, human rights advocacy and international development advocacy. The European Society for Contraception provided a grant for a research project entitled *Incorporating WHO Safe Abortion Guidelines*. A grant was received from the Irish Human Rights and Equality Commission for a project entitled *Putting the public sector equality and human rights duty into practice through advancing a rights based and patient-centred approach to the provision of abortion care in Ireland*. In August 2018, the Open Society Foundations provided the IFPA with an organisational support grant. A grant was received from the Wellspring Philanthropic Fund to support us in the development of abortion care services and the document of our advocacy and service delivery practice. Grants were received from the International Planned Parenthood Federation Europe Region Office for a

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number of initiatives, including organisational development, our Reframing and Sharing the Learning Projects, and work within the Countdown2030Europe Consortium on international development funding. UNFPA, the UN's sexual and reproductive health agency, supports our work on raising awareness of sexual and reproductive health and rights in the context of the International Conference on Population and Development and the Sustainable Development Goals. The final tranche of funding was received from the Development Cooperation Division of the Department of Foreign Affairs (Irish Aid) for a three-year project: "Migrants and Citizens: Promoting the Sexual and Reproductive Health of Youth in Bolivia". The IFPA retained 2% only of the grant for this project, which is implemented by Bolivian NGO, CIES (the centre for research, education and services) with technical support from the International Planned Parenthood Federation Western Hemisphere Regional Office.

During the 2018 campaign to repeal the 8th Amendment, the IFPA set aside a dedicated fund drawn from unrestricted domestic income reserves to cover the costs of involvement in campaigning. No funding from other sources was used for campaigning purposes.

CHAPTER 2: OUR WORK IN 2018

Medical services

Overview

In 2018 we provided a total of 13,027 appointments, of which 5,162 were contraceptive services to women and girls aged between 16 and 58. Of these appointments 3,986 were for women over the age of 24 and 1,176 appointments were for women under the age of 24. In addition, 973 STI services were provided.

Cervical screening

2018 saw an increase of 17.5% in uptake of cervical screening. In the wake of the publicity surrounding the screening programme in early 2018, the IFPA responded immediately to the demand for repeat smear tests. Before the Department of Health put financial arrangements in place for the provision of repeat tests, the IFPA was providing this service free to our clients. In addition, IFPA doctors dedicated extensive additional time to allaying the concerns of smear test clients and counselling women through the process, well in advance of any fees being agreed by the Department of Health. The feedback from our clients was that this level of support and care was greatly appreciated.

IFPA migrant women's clinic and FGM treatment service

The IFPA provides a treatment service for women and girls who have experienced female genital mutilation (FGM). Since the establishment of this dedicated clinic in 2014, the IFPA's work in this area has expanded significantly. What began as a project specifically focused on FGM has evolved into a service which meets the broader sexual and reproductive health needs of a vulnerable and under-served cohort, while also maintaining a core FGM treatment service. In 2018, sexual and reproductive health outreach with asylum-seeking women continued to be a priority and, in addition, we increasingly engaged in capacity-building work with frontline healthcare service providers, educators and professional healthcare bodies in relation to FGM. At the same time, the IFPA continued to work with other civil society organisations to highlight the

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need for a government-led inter-agency committee tasked with responsibility for the development of a national action plan to effectively address FGM.

Outreach to communities affected by FGM

Women's health information meetings were held at the following locations in 2018: Hatch Hall Accommodation Centre, Dublin 2; Clondalkin Towers Accommodation Centre, Dublin 22; and Ocean View House Accommodation Centre, Co. Waterford. In addition, the IFPA provided an information stall at the Migrant Information Fair, an annual event jointly organised by New Communities Partnership and the International Organization for Migration (IOM), the UN Migration Agency. The event was held at the Irish Human Rights and Equality Commission in Dublin in December 2018.

Research into good practice in abortion services

During 2018, the IFPA engaged in a significant body of work on international best practice in the delivery of abortion care. An in-house research project brought together the expertise of the advocacy and medical teams. Under the supervision of the IFPA's medical director, project assistant Áine Kavanagh carried out an in-depth review of the evidence provided to the Joint Oireachtas Committee on the 8th Amendment and a review of international literature on best healthcare practice, and also abortion stigma and refusal of care. The findings and learnings from this research project were brought into the IFPA's work on preparing for the development of abortion services.

Pearl of Wisdom Cervical Cancer Campaign

In January 2018, the IFPA ran its 10th Pearl of Wisdom campaign to raise awareness of the importance of cervical screening for the prevention of cervical cancer. The campaign was run in coordination with and partly funded by the National Screening Service.

While the importance of cervical screening remained the main message, this year the campaign emphasised that eliminating cervical cancer requires a two-pronged approach, including HPV vaccination for schoolgirls. This was particularly important given sustained misinformation around the HPV vaccine and the subsequent drop in vaccination rates.

During the campaign we distributed 30,000 Pearl of Wisdom pins to partners around the country – the highest number ever. These were accompanied by information leaflets with details on how to avail of cervical screening and what it entails. In planning the distribution, there was a particular focus on the five counties with the lowest take-up rate of cervical screening.

We also engaged in face-to-face awareness-raising activities. Staff of the IFPA clinic in The Square Shopping Centre in Tallaght promoted the campaign through information stands, digital display screens and social media. Media interest in the campaign was significant. Our campaign ambassadors and Dr Henchion were featured and interviewed across multiple outlets, including the Irish Times Women's Podcast, Ireland AM, VIP magazine, national daily papers and local radio. On launch day the campaign hashtag #ShareTheWisdom was trending.

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Pregnancy counselling

Overview

Pregnancy counselling was still governed throughout 2018 by the Regulation of Information Act 1995 and the Protection of Life During Pregnancy Act 2013, which were not repealed until the Health (Termination of Pregnancy) Act was passed into law in December. Our counsellors supported and provided information to women who had opted not to continue a full pregnancy and were considering or had decided to travel to the UK or elsewhere for abortion care or to access medical abortion medication online.

The IFPA made one child protection report to Tusla in the period.

Impact of the referendum

For many weeks in early 2018, anti-abortion campaigners used posters and billboards to communicate stigmatising messages that were offensive to women who opted to have abortions. During that period there was a significant demand for IFPA counselling services: 2018 saw a 34% increase in calls to the IFPA helpline and a 65% increase in the number of clients who booked counselling appointments with IFPA counsellors, compared with the previous year. A significant proportion of this increase (90%) related to clients who presented for post-abortion counselling, in many cases because of issues raised during the referendum campaign.

In December, our pregnancy counsellors began seeing clients who were seeking advice in order to decide whether to travel for abortion or wait for the introduction of services in January. It was clear that the definition of pregnancy used in the legislation, which is based on last menstrual period, was a cause of confusion about eligibility for abortion on a woman's own indication.

Awareness raising of pregnancy counselling services

During 2018, in particular in the final quarter of the year, there was a high demand for IFPA pregnancy counsellors to participate in local meetings and provide information on our services. These came mainly from third-level institutions and family resources centres. IFPA counselling staff met with GPs in Sligo, student support services in Limerick Institute of Technology and Limerick University as well as Family Resources Centres in Cashel and Clonmel.

Policy concerns

Pregnancy counselling at no cost to women was the only positive and progressive policy development in relation to abortion in Ireland during the years that abortion was criminalised. In December, the CEOs of the IFPA and the Dublin Well Woman Centre met with Minister for Health Simon Harris to make the case for the offer of professional, accredited face-to-face counselling as an important part of the model of care under the new law. The Minister reassured us that face-to-face counselling would remain a key element of services for women and would not be replaced by telephone counselling.

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Supporting the development of good practice in healthcare

Clinical training and outreach

In May, the IFPA's annual Contraception Foundation Course for nurses and midwives was held. Twenty-four participants attended this two-day course, which is approved by the Nursing and Midwifery Board of Ireland and caters to the specific needs of nurses and midwives. Facilitated by IFPA Medical Director with input from field experts, the course consists of both theoretical and practical elements. Course content includes hormonal contraception, emergency contraception, intrauterine contraception, permanent contraceptive methods, crisis pregnancy, menopause, heavy menstrual bleeding and sexually transmitted infections, including HIV.

The clinical and policy expertise of IFPA Medical Director, Dr Caitríona Henchion was in high demand during 2018. In January, she gave a lecture on crisis pregnancy during the Irish College of General Practice (ICGP) contraception theory course, lectured on the ICGP's "Practical Contraception" course in March and made a presentation on crisis pregnancy at the ICGP AGM on May 25th, the day of the referendum on the 8th Amendment. She also made a presentation on "Early medical abortion: practical aspects" for the Irish Association of Sexual and Reproductive Healthcare Providers and lectured at the Rotunda Hospital's contraception update for midwives. Dr Henchion presented on crisis pregnancy at NUI Galway's diploma course in women's health and delivered training at the Scales Course Contraception Update for doctors returning to general practice in October and delivered a practical session on long acting reversible contraception in November. Dr Henchion also led the IFPA's capacity-building work with frontline service providers: working closely with Policy Officer Alison Spillane, she delivered workshops on FGM to the following cohorts, chosen because of the potential to deliver multiplier effects: trainee GPs on the North Dublin City GP training scheme; obstetricians and gynaecologists attending the IOG Spring Conference (Dr Henchion gave a joint talk, with consultant gynaecologist Dr Maeve Eogan); GPs taking the Women's Health in Primary Care Module, NUI Galway; attendees of the IFPA's One Day Sexual Health Training, Dublin; students of the HSE Foundation Programme in Sexual Health, Ardee, Co. Louth (both spring and winter modules).

Policy development and abortion law reform

In March the IFPA convened a meeting of leading healthcare providers to discuss the proposed policy on future abortion care that had been published in advance of the referendum campaign. Held at the National Maternity Hospital in Holles St, Dublin, the meeting was a confidential Chatham House Rule style roundtable of international experts including Professor Sharon Cameron, Consultant Gynaecologist and Lead for Sexual Health Services NHS Lothian, and Co-director of the Clinical Effectiveness Unit of the Faculty of Sexual and Reproductive Healthcare UK, Representatives of the Department of Reproductive Health and Research and the Maternal and Perinatal Health and Preventing Unsafe Abortion Team of the World Health Organisation also participated and presented the WHO Safe Abortion Guidelines and their application to the Committee's proposals. Participants included OBGYNs from the three Dublin maternity hospitals and from one of the regional hospitals, GPs, midwives and IFPA counsellors and doctors. Officials from the Department of Health were invited, but did not attend. This was one of a series of such events held by the IFPA in anticipation of law reform since 2015, as part of a strategic initiative to build knowledge, confidence and create a community of conscientious and committed reproductive healthcare providers who would bring an understanding of women's human rights into law reform, policy development and clinical practice.

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Notably, most of the healthcare practitioners who have attended these events went on to become leading advocates during the referendum campaign and continued their rights-based advocacy into the development and delivery of services.

Sharing the learning with international partners

In early 2018, IFPA CEO Niall Behan made a presentation at a seminar organised by the Irish Council for Civil Liberties and the International Network of Civil Liberties Organizations (INCLO) on “Abortion Laws and Human Rights - Global Experiences”. IFPA Director of Advocacy and Communications Maeve Taylor participated in a workshop with the national and international advocates convened for the event.

Since the referendum, the IFPA has participated in a wide range of events and meetings to share our experience with civil society organisations in countries that are grappling with law reform processes. These include presentations at the IPPF Regional Management Meeting in Belgium in June, a keynote opening address at the Eurongos Conference in Ghent in October and presentations by Niall Behan at a Centre for Reproductive Rights Colloquium on Abortion Law Reform for European Civil Society in Dublin in November. Maeve Taylor spoke at an international meeting of the International Planned Parenthood Federation in June in Windsor, UK; a Sexual Rights Initiative side-event at the Human Rights Council, in Geneva and the launch of the IPPF I Decide report in Oslo in September. Policy Officer Alison Spillane spoke at SOLIDARNA Foundation and the Platform for Reproductive Rights workshop, Zagreb, Croatia and took part in a panel discussion at the Emerging Ireland festival of progressive politics in UCD. Former Chair Catherine Forde addressed a SEXed event for Global Action Day for Safe Abortion organised by IPPF member association Hera Macedonia in Skopje, Macedonia. IFPA Board member and President of the Union of Students in Ireland, Síona Cahill, spoke at the Power of Pink Volunteer Convening of 3,000 Planned Parenthood US volunteers in Detroit, USA.

Communications

New website

The IFPA website was completely redesigned and relaunched in 2018. The website is mobile-friendly, more accessible, more secure and more streamlined, and puts access to services to the fore in anticipation of the new abortion service.

Media presence

The IFPA had an important media presence in 2018. IFPA staff were interviewed and quoted by numerous outlets for articles on the topics of post-abortion counselling, rogue pregnancy agencies, cervical screening, contraception, fertility and FGM. We had particular success in reaching new younger audiences with, for instance, an appearance by Dr Caitríona Henchion on the her.ie podcast Girls With Goals. We also engaged in peer-to-peer clinical communications. Dr Henchion contributed expert articles on FGM to the ICGP magazine Forum, and on LARCs to GP Ireland magazine.

The 2018 State of World Population launch drew significant media interest, including prominent coverage by The Times Ireland Edition and an in-depth interview with UNFPA representative Jacqueline Mahon on the Irish Times Women’s Podcast.

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In October, The Examiner published an IFPA op ed, entitled, ‘Frame abortion law in terms of access, not criminality’. We also published letters to the editor in the Irish Times, the Evening Echo, and the Topic newspapers (four Midlands papers). The IFPA’s announcement in late December that we were ready to provide abortion care from the second week of January got significant media attention

International publications

In July, the IFPA’s Maeve Taylor, published a blog for the website of FIGO, the International Federation of Obstetricians and Gynaecologists, entitled ‘Removing the shackles of abortion restrictions in Ireland’, co-written with Professor Sabaratnam Arulkumaran. She also contributed an article for the Indian news site The Leaflet, entitled ‘Ireland’s resounding Yes vote is a clear rejection of reproductive coercion’, co-written with Dr Alvaro Bermejo, Director General of the International Planned Parenthood Federation (IPPF).

In September, the IPPF commissioned a journalist to spend two days in Dublin to interview several members of staff as well as IFPA allies and associates: 11 audio and written pieces were produced with accompanying photographs, telling the story of the 8th Amendment through the eyes of the IFPA.

Development of patient information material

A major focus in late 2018 was on the development of accessible patient information material in readiness for the new abortion care service. Two single-page, infographic-style patient information leaflets were designed: one with clear instructions on how to take the medication at home; one with easy to understand information on what to expect during a medical abortion.

Education and training

Speakeasy programme

In 2018, the IFPA delivered specialist relationship and sexuality education for people with an intellectual disability; parents and carers of people with intellectual disability; staff of organisations working with people with intellectual disability; and secondary school students. The Speakeasy and Speakeasy Plus programmes equip parents, carers, guardians and service providers with the confidence and knowledge to support informed and comprehensive sexual health development.

In total the training department delivered the programmes to 121 participants in Sligo, Letterkenny, Mullingar, Blanchardstown, Navan, Tullamore and Dublin City. Interactive information stands were provided at third level colleges during SHAG (Sexual Health and Guidance) Week and a specialised sexual health programme for migrant women was delivered to 20 women living in direct provision.

One-day sexual health course

University students, health and social care professionals, and other professionals interested in pursuing a career in sexual health participated in our revised one-day sexual health workshop. Relunched in 2018, the course included new elements such as female genital mutilation (FGM) and was delivered in association with HIV Ireland.

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Sexuality education in secondary schools

The IFPA also provides life-skills workshops for young people to educate and explore comprehensive sexual health, including issues lacking in mainstream education. Almost 300 secondary school students in Malahide and Kanturk took part in the comprehensive RSE programme. While the IFPA had an existing relationship with the Malahide School and has provided RSE workshops there in previous years, the students of Kanturk had identified gaps in their RSE curriculum and approached the IFPA in their search for a comprehensive RSE programme.

The level of requests for training was extremely high and, while we did our best to accommodate as many as possible, not all the demand could be met.

Sexual Health Display Kit

2018 saw the launch of the IFPA's new Sexual Health Display Kit. Replacing the previous contraceptive display kit, this resource is designed to assist sexual health educators—e.g. health and community workers, GPs and other health professionals, secondary school teachers and counsellors—to provide accurate information about safer sex and contraceptive methods. Learners have the opportunity to engage with sexual and reproductive health by discussing, seeing and handling a range of contraceptive methods. Launched on World Contraceptive Day in September 2018, the kit immediately sold out.

Submission on comprehensive sexuality education

In 2018, the IFPA made a written submission to the Joint Oireachtas Committee on Education and Skills as part of its review of sexual health and relationship education. This was followed by the delivery of an oral presentation to the Committee by Niall Behan and follow-up with the office of Minister of State for Higher Education Mary Mitchell O'Connor. IFPA Training Coordinator, Breanna Coyle, participated in a consultative workshop organised by the National Council of Curriculum and Assessment as part of a major review of Relationships and Sexuality Education which is due to be completed in 2019.

All Party Oireachtas Interest Group on Sexual and Reproductive Health and Rights

The APG was chaired in 2018 by co-Chairs, Jan O'Sullivan TD and Marcella Corcoran Kennedy TD. Senator Alice Mary Higgins, continued to sit on the Executive of the European Parliamentary Forum on Sexual and Reproductive Health.

Advocacy on FGM

Considerable work on FGM policy was undertaken by the APG throughout the year, led by Deputy Corcoran Kennedy, following her participation in a high level international meeting on FGM convened by the UNFPA, the UN's reproductive health agency. Deputy Corcoran Kennedy made a presentation on FGM to the Fine Gael parliamentary party to coincide with Zero Tolerance Day in February. The meeting was attended by the Taoiseach, who directed the Minister of State for Health Promotion to examine the issue and report back. The IFPA and a representative of the APG met the Minister in April to brief her on the issues involved. The IFPA hosted a meeting between the Minister and the FGM National Steering Committee of NGOs and continues to work within this group to advocate for a government-led interagency FGM strategy.

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Referendum

In January and March 2018, prior to the referendum campaign, the IFPA supported the APG to host two educational briefings for TDs and Senators on the recommendations of the Joint Oireachtas Committee on the 8th Amendment. In addition to the IFPA Medical Director, parliamentarians heard from Dr Cliona Murphy, Chair-Elect of the Institute of Obstetricians and Gynaecologists; Dr Maeve Eogan, Medical Director of Sexual Assault Treatment Unit (SATU) at the Rotunda Hospital and National SATU Services; and Dr Mark Murphy, GP and lecturer in General Practice at the Royal College of Surgeons in Ireland (RCSI) about the importance of implementing the Committee's recommendations to enable the provision of well-regulated, safe and legal abortion services so that women and girls can access care from doctors and nurses in their own country.

However, as the APG is an educational and awareness-raising entity, the group suspended its activities during the referendum campaign proper and the IFPA suspended its role as secretariat. These were resumed in June 2018. During the campaign, the members of the APG were actively involved in advocating for SRHR within their own party structures and in their own regions. Some members were involved with the Women's Health in Ireland campaign group.

Post-referendum work of the APG

Following the referendum, key APG members who had been part of the Women's Health in Ireland grouping (including Senators Ivana Bacik and Colette Kelleher and Jan O'Sullivan TD) joined others from civil society in a reflection session on learning from the referendum campaign and taking forward SRHR issues into the future.

Advocacy in relation to overseas development policy

In July, the APG met with the Minister for Foreign Affairs in relation to the overseas development aid (ODA) budget and the new ODA policy being prepared by the Department of Foreign Affairs. The APG made a submission to the public consultation in relation the new policy. Throughout 2018, Senator Ivana Bacik and Deputy Maureen O'Sullivan TD raised the issue of family planning/reproductive health regularly at meetings of the Joint Oireachtas Committee on Foreign Affairs, and within the Select Committee. The Committee published a review of the Irish Aid programme in February and highlighted the devastating impact of failure to provide for sexual and reproductive health and rights, the importance of family planning and the need for increased funding to UNFPA.

APG in international forums and study tours

Two APG members participated in a major international gathering, the International Parliamentarians Conference in Ottawa, and raised awareness of the successful cross-party working that was so instrumental to the successful constitutional change and new positive attitude to SRH. Senator Catherine Noone, who chaired the Joint Oireachtas Committee on the 8th Amendment, was a speaker in a plenary session at the event, and shared the learnings from the repeal process with 320 parliamentarians from across the world. Media support was provided to Senators Noone and Clifford Lee by IFPA Communications Officer, Siobhán Silke. Senator Clifford Lee participated in an EPF study tour of parliamentarians to Tanzania in the summer.

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Parliamentary awareness-raising

During 2018, the IFPA, raised awareness with parliamentarians through one-to-one briefings of ways in which the provisions of the abortion legislation could contravene international human rights law and the best international practice of the World Health Organisation by creating barriers to access to care, particularly for vulnerable women. Health spokespeople of all parties were briefed to discuss potential barriers that could be caused by the legislation, as was the Chair of the Joint Oireachtas Committee on Health.

2018 UNFPA State of the World Population report

Launch overview

A highlight of the year was the launch of the 2018 UNFPA State of the World Population (SWOP) report ‘The Power of Choice: Reproductive rights and the demographic transition’ in October. Appropriately, in the year of repeal of the 8th Amendment, this was our biggest SWOP launch yet and the event was attended by representatives from civil society organisations, the healthcare sector, media outlets, government departments and parliamentarians. The report was presented by Ms. Jacqueline Mahon, UNFPA Representative in Tanzania. Mr. Simon Coveney TD, Tánaiste and Minister for Foreign Affairs and Trade, officially launched the report. Minister Coveney spoke about Ireland’s consistent support for UNFPA, and announced an additional contribution of €700,000 in core funding for 2018. Additionally, he noted that Ireland’s international development policy is undergoing changes, and with the help of submissions from many of the civil society organisations represented at the event, gender equality will be central to the new policy. Finally, Minister Coveney drew connections between sexual and reproductive health and rights and the achievement of many other Sustainable Development Goals (SDGs).

Post-launch seminar

Following the launch, Deputy Marcella Corcoran Kennedy moderated a panel discussion. Jacqueline Mahon was joined by Professor Anne Matthews (DCU School of Nursing and Human Sciences and Chair of the Irish Forum for Global Health), Ms. Sarah McGrath (Director of Irish Aid’s Multilateral Unit), Ms. Síona Cahill (President of Union of Students in Ireland and IFPA Board Member), and Ms. Siobhán McGee (CEO of ActionAid Ireland). Key themes of this discussion were the interlinkages between health, health services, and health rights in Ireland and overseas and the need for a multi-sectoral and multi-layered approach to the realisation of reproductive rights.

Global development advocacy

New Irish overseas development policy

The government began work on a new international development policy in 2018. The IFPA participated in the public consultation on this new policy by developing a detailed written submission on the importance of sexual and reproductive health and rights in international development and by supporting the All Party Group with the development of their submission. In a pre-budget submission to the Department of Foreign Affairs in

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early October, we argued for increased investment in SRHR as part of Ireland's overseas development assistance.

Sustainable Development Goals

In mid-2018, Ireland's progress in implementing the sustainable development goals (SDGs) was reviewed at the United Nations. As a member of Coalition 2030, the civil society SDG coalition, the IFPA actively engaged in this process from the beginning of the year, through participation in workshop consultations, contribution to a civil society shadow report and making a written submission to government in response to its draft National Implementation Plan for the SDGs. This resulted in a stronger emphasis on SRHR in the civil society report and, in his speech at the United Nations, the Minister with responsibility for SDG implementation referenced sexual and reproductive health as a priority area for intervention under the new international development policy. The government's report reiterated Ireland's commitment to promoting universal access to reproductive healthcare, including family planning services.

Membership of Dóchas

The IFPA is a member of Dóchas, the umbrella group of NGOs in Ireland and sits on the Policy Working Group. We participated in consultations organised by in relation to the development of the new White Paper on Irish Aid and the VNR of the SDGs.

Post-repeal: Ireland in the international arena

Following the repeal of the 8th Amendment, we held meetings with representatives of the Netherlands, Denmark, New Zealand, Canada, Norway and Belgium to discuss Ireland's role in the intergovernmental arena in relation to SRHR.

Engagement with Irish Aid

In September, the IFPA's CEO, Director of Advocacy and Communications and Policy Officer held a meeting with the Director of Irish Aid's Policy Unit, Irish Aid's Health Specialist and Gender Focal Point. This was an extremely positive and productive meeting and strongly signalled a new, open and progressive approach to SRHR. With both the Minister for Foreign Affairs and Irish Aid, we highlighted the opportunity of an increased aid budget to redirect funding to UNFPA supplies and to increase core funding and introduce multiannual modalities.

CHAPTER 3: REPEAL OF THE 8TH

Repealing the 8th Amendment: laying the groundwork

On May 25th 2018, the 8th Amendment, article 40.3.3 of the Constitution was repealed by a two thirds majority of 1,429,981 votes, paving the way for the Oireachtas to legislate for the provision of abortion care.

Decades of advocacy

The insertion of the 8th Amendment in 1983 framed an anti-abortion standpoint as a national moral position. The IFPA advocated for decades for the introduction of free, safe and legal abortion in Ireland—often as the

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sole voice and for many years in the face of significant and concerted opposition by and hostility from the State. We worked through strategic litigation, including to the European Court of Human Rights, through human rights advocacy before every international expert body we could access. Human rights advocacy opened a space where the experiences of our clients were given deep consideration and the harms they experienced were taken seriously. The condemnations by successive human rights bodies garnered intensive media attention and illuminated the role of the Constitution in reproductive coercion: the ill-treatment of those who were denied abortion care, the stigma related to criminalisation of abortion and the complex ways in the 8th Amendment caused discrimination against vulnerable women and girls. This framing of abortion as involving significant harms to the health and serious violations of the human rights of women and girls that demanded response from the state as a moral and legal imperative made a significant contribution to the achievement of repeal and of the introduction of the 2018 abortion law.

Working with healthcare practitioners

In parallel to human rights advocacy, the IFPA worked for years with healthcare providers to build a community of medical experts with a commitment to women's human rights. Ultimately, healthcare practitioners had a significant influence on both public opinion and the perspectives of legislators in situating abortion in a wider context of reproductive health. The evidence that healthcare providers—doctors and psychiatrists in particular—could bring into the public domain about the impact of the law on women's lives and health and the ethical dilemmas posed to doctors who were required to implement the law provoked a degree of moral outrage that policy makers could not ignore. Most importantly, whereas those who advocated for the retention of the 8th Amendment could only promote a status quo based on a narrative of national identity that no longer resonated with Irish citizens, the IFPA and other healthcare providers highlighted the harms caused by the 8th Amendment and pointed to a clear moral resolution: its repeal and the introduction of comprehensive reproductive healthcare, including abortion.

Reflections on the referendum campaign

Mutually reinforcing health and human rights discourses were critical over many years to building momentum towards reform of the law. The referendum campaign in the spring of 2018, however, drew on the former almost to the exclusion of the latter, and framed abortion less as a social good and a matter of women's autonomy and agency so much as a private concern between a woman and her doctor.

After decades of work, for the IFPA the successful campaign for repeal was a momentous achievement but we could not lose sight of the fact that the proposed legislation was flawed and insufficiently anchored in the principles of access and of acceptability to women, which derive from international human rights law. It was also problematic that the government framed some of the barriers as positive factors: for example, the mandatory waiting period was framed as a period of pause and reflection; the cut-off for eligibility under the proposed law was framed as a safeguard against "too much abortion". And the stories given overwhelming prominence were those of women perceived to be "innocent" or "tragic", rather than those of women exercising a choice to end a pregnancy that was unintended or had become a crisis. These women's stories tended to be lumped together into categories of "women who had to travel" or "women who accessed abortion pills online." It is impossible to know what impact these stories would have had if they had been more prominent.

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Referendum campaign

The IFPA engaged in extensive media and social media work during the campaign. During the campaign created short social media videos featuring Medical Director Dr Cairíona Henchion, Director of Counselling Maura Leahy, and project assistant Áine Kavanagh. These reached over 20,000 views. Dr Henchion joined Dr Mary Short of the Irish College of General Practitioners and the Minister for Health, Simon Harris, at a press conference on the need for implementation of the recommendations of the Joint Oireachtas Committee on the 8th Amendment in relation to contraception. Dr Henchion also participated in a special referendum edition of RTÉ's flagship current affairs programme, Prime Time, also focusing on contraception.

Just days before the vote, we organised a press conference with Professor Sir Sabaratnam Arulkumaran, former president of the Royal College of Obstetricians and Gynaecologists and Chair of the enquiry into the death of Savita Halappanavar. One of the world's most eminent and respected gynaecologists, the professor is a long standing friend of the IFPA and spoke at a number of IFPA events for parliamentarians and healthcare professionals in 2016 and 2017 to raise awareness of international best healthcare practice on abortion and contraception care. Professor Arulkumaran's engagement in the campaign attracted significant media interest. He was interviewed by a number of prominent outlets, including a live appearance on Morning Ireland prior to the press conference. Announcing the exit poll results, RTÉ's David McCullough cited the professor's intervention as a particularly important moment in the campaign.

We issued a press release on the morning of the referendum count stating the IFPA's commitment to providing abortion care in Ireland. This got wide media coverage and Niall Behan was interviewed on prominent national and local programmes including Ivan Yates on Newstalk, Matt Cooper on TodayFM, RTÉ Drivetime, and RTÉ Prime Time. The number of our social media followers grew by over a quarter in 2018, and engagement was especially high in the immediate lead up to the 8th Amendment referendum. We had almost 500,000 impressions on Twitter in the two weeks before the vote - a tenfold increase on the typical rate.

Participation in civil society campaigns

We also took part in a press conference hosted by Amnesty International on the harms of travelling for abortion care. The IFPA was a member of the Executive Committee and Strategic Advisory Group of the Together for Yes campaign. During May, we covered the IFPA head office at Solomons House with a Together for Yes banner and installed full vinyl window wraps calling for a Yes vote at our city centre clinic.

Alison Spillane, IFPA Policy Officer, worked with cross-party representatives and civil society to ensure good communication and coordination amongst Yes campaigners. In this capacity, the IFPA organised a briefing session for parliamentarians about the upcoming referendum, prospective legislation and future service provision. This event brought together a broad range of legal and medical experts as well as civil society organisations in support of a Yes vote, including those working on domestic and sexual violence, organisations representing Traveller women, lone parents, people with intellectual disabilities and parents who had terminated pregnancies due to fatal foetal anomalies.

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We wrote op-eds and informational pieces for two campaign newspapers, one published by the Trade Union Campaign to Repeal the 8th and one produced by the Women's Health in Ireland campaign. As well as articles by the IFPA's CEO and Medical Director, we facilitated contributions by prominent advocates for repeal including Professor Sir Sabaratnam Arulkumaran.

Involvement in such a major campaign can take a significant psychological toll: Director of Counselling, Maura Leahy, provided support to Together for Yes volunteers on how to deal with calls from women who were upset by the stigmatising language and imagery of the anti-abortion campaign.

Legislating for abortion care

The Heads of Bill published by the government proposed a right to access abortion care on a woman's own indication in the first 12 weeks of pregnancy, and thereafter on grounds of risk to health and life and in case of fatal foetal anomaly. Such broad access to abortion and the policy of community-based provision of early medical abortion are significant and necessary reforms. However, the legislative proposal fell short of meeting all the need for abortion care, excluding women whose pregnancy became a crisis after 12 weeks. Many women and girls who avail of pregnancy counselling are in those cohort, and are frequently those who experience vulnerabilities and disadvantage. Pregnancies involving risk to health not deemed serious and foetal anomaly not deemed fatal were also excluded from access. The Heads of Bill also included provisions criminalising doctors and others who assisted women to end a pregnancy outside the law and a mandatory waiting period that would fly in the face of best international healthcare practice.

Health (Regulation of Termination of Pregnancy) Bill 2018

The repeal of the 8th Amendment paved the way for the enactment of the Health (Termination of Pregnancy) Act 2018, which commenced on January 1st. The Act was signed into law on December 21st. The latter part of the 2018 saw the IFPA dealing with the challenges posed by this legislation and framing.

The 2018 Act provides the legislative framework for the provision of abortion care in defined circumstances. Early medical abortion is legally permissible on a pregnant woman's request where the pregnancy has not exceeded 12 weeks and provided that a three-day waiting period has elapsed. Abortion is also lawful for reasons of risk to a woman's life or of serious harm to her health, and in cases of fatal foetal anomaly. Care is free of charge to women who are ordinarily resident in the Republic of Ireland. The Protection of Life During Pregnancy Act 2013 is repealed by the 2018 Act, as is the Regulation of Information Act 1995. Healthcare providers no longer risk prosecution if they make referrals or appointments on a woman's behalf to abortion providers in countries where termination is lawful.

The law is an important step, but it falls short of human rights standards. The IFPA argued for the full decriminalisation of abortion and the insertion of a provision which would guarantee women's access to abortion care. We also warned against the inclusion in law of the mandatory waiting period: the rationale for this was political, rather than health-based, and the experience of other countries shows that it will create barriers to accessing care. Regrettably, the government was not open to taking the necessary steps to enact a truly visionary law.

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Preparing for abortion care

Overview

Working for a rights based and woman centred model of care for women seeking to terminate pregnancies was a major focus of our work in this period. Once the referendum passed, two unanticipated challenges had to be faced. Once the 8th Amendment was repealed, the government immediately announced that legislation would be enacted and services introduced by the end of 2018. However, this resulted in an inadequate level of parliamentary scrutiny to the passage of the legislation and the loss of opportunities to enhance the alignment of the legislation with international human rights law. At the same time, there was little or no consultation with healthcare providers, professional bodies or other experts until the autumn. And, once consultation began, the Department of Health initially excluded specialist reproductive health providers, such as the IFPA, and concentrated on developing a model of care based on general practitioners and hospitals only.

The final quarter of 2018 was among the most stressful and difficult periods in the IFPA's history. Because of the IFPA's expertise and its commitment to promoting women's health and rights and best international healthcare practice for all women in Ireland, the IFPA was necessarily engaged in the development of the model of care at national level.

Research by the WHO that was presented at a meeting in Dublin in September highlighted political will as the key factor in establishing or expanding access to safe abortion services. Factors facilitating the expansion of services include use of a public health frame, situating abortion as one component of a comprehensive reproductive health package, and including country-based health and women's rights organizations, medical and other professional societies, and international agencies and nongovernment organizations in the design and rollout of services.

The political will to make services available quickly was not in doubt: at that point, the political commitment to commencement of services by January 1st 2019 had been made, but there was no sign of leadership or consultation. When healthcare experts were eventually convened in October to assist in the development of the model of care, the process was complicated by the very short timeframe, the pressure to develop a care pathway while the legislation was still going through the Oireachtas and the unclear decision-making process between the Minister, the Department of Health and the Health Services Executive. Enormous pressure was placed on healthcare providers to rush through the development of guidance.

A first priority was to ensure that the IFPA and other women's health centres were included in dialogue with the Department of Health, along with the professional bodies and hospitals. The IFPA organised a number of meetings with key influencers and stakeholders. We organized a meeting with the British Society of Abortion Care Providers for Irish doctors present at the FIAPAC conference, held in Nantes, in September, at which IFPA Medical Director Caitríona Henchion was an invited speaker. Also in September, the IFPA participated in an international workshop on abortion reform organized by the World Health Organisation in Dublin: this was a key opportunity to highlight flaws in the legislative process, and also in the process of discussion of the

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model of abortion care, with key invited stakeholders from the Irish context, and to develop strategies to ensure joint ways of working.

Department of Health collaborative meetings

Between October and December, IFPA's Medical Director was involved in weekly collaborative meetings organised by the Health Services Executive (HSE) with key future abortion care providers. She and the CEO have also participated in monthly stakeholder meetings on implementation with the Minister for Health and the Chief Medical Officer.

Engagement with professional bodies

In parallel, Dr Henchion liaised closely with colleagues within the professional bodies—the Institute of Obstetricians and Gynaecologists and the Irish College of General Practitioners—the maternity hospitals and women's health centres to coordinate in relation to issues of concern from the perspectives of women's right to access care and patient safety. In October, a meeting was held at the IFPA clinic with Dr Peter Boylan, national clinical lead on abortion.

The IFPA made a presentation on the legislation to a major training seminar organised by the Irish College of General Practitioners and the British Society of Abortion Care Providers, which was attended by Minister Harris. The IFPA also made an input to a consultation by the Ethics Working Group of the Medical Council in relation to revisions to its professional guidance on abortion, focusing on duty of care and principles of rights based access.

Developing the IFPA's abortion care service

At the same time, in addition to the regular clinic operations, the IFPA had to plan our own services, organise training for staff and develop protocols etc., none of which could be finalised until the HSE's guidance was issued in late December. Issues such as access to scanning facilities and anti-D and care pathways to hospitals for women and girls who might need these were still uncertain and unclear at the end of year. That we were in a position to provide services in January was a testament to the commitment, professionalism and dedication of the IFPA team and the clinic staff in particular to the provision of quality care to pregnant women and girls.

In parallel, the IFPA engaged in advocacy in relation to the removal of cost as a barrier to access to contraception and to the improvement of sexuality education, commitments to which were made by the government during the referendum campaign.

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CHAPTER 4: LOOKING AHEAD

New challenges and opportunities

Huge changes have taken place with respect to abortion. A national conversation about abortion has taken place and had an unprecedented impact in terms of normalising abortion as part of healthcare. There is undeniable public and political support for the new law. Abortion care is no longer excluded from the norms that apply to healthcare generally.

The achievement of repeal in the IFPA's 50th year finally ended the harms to women of a constitutional position that placed ideological beliefs above pregnant women's health and forced all women who opted not to continue a full pregnancy to leave the state to access abortion care. However, while we have achieved the provision of abortion services for most women who need them, rights-based access to abortion care has not yet been fully secured within Irish law. Regrettably the failure of the legislature to adequately scrutinise flawed draft legislation means that a law that could have been centred on rights-based access is framed as an enabling provision which provides defences to potential criminal offences. The impact of the mandatory waiting period, the clinical workability of the decision-making structures in relation to abortion over 12 weeks, the impact of the criminal offences and the harms experienced by women who cannot access services and of the rushed process of developing the model of care will require ongoing monitoring.

At the time of writing, the IFPA is delivering abortion care at our two clinics and these factors are already direct impacts on IFPA clients and on IFPA clinic staff. As a frontline provider, the IFPA offers women and girls the best possible service under the current law and within the model of care devised by the Health Services Executive and the Department of Health. And we are also committed to changing the law to address the outstanding issues of access.

Continued advocacy is needed to hold laws, policies and the decision-makers behind them to the highest possible standards in order to vindicate the reproductive rights of all. As an organisation that provides quality, professional counselling to women whose pregnancy is unintended or has become a crisis, the IFPA has serious concerns about the lack of reference to the offer of pregnancy counselling in public discourse in relation to the model of care for women seeking abortion services. A significant body of knowledge and expertise has been developed and we know from our services that the availability of counselling is something that women value and benefit from. The human rights principle of the progressive realisation of the right to health includes the obligation to prevent regression.

A consistent message from the State to healthcare providers was that the "perfect should not be the enemy of the good". The IFPA knows from five decades as a health service provider, that the good has many enemies: among them under-resourcing, poor planning, fragmented and contradictory leadership, rushed policy-making, flawed legislation and the sacrifice of quality to political expediency. The new law includes a review mechanism which will provide a crucial opportunity to assess its impact on women's access to care and examine whether the state is meeting the standards set by international human rights law.

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It is imperative that implementation of commitments to free contraception and reform of sexuality education is accelerated, on the one hand, and, on the other, that women who need abortion care, including those who are not eligible under the law, do not lose the access they currently have to free, non-judgemental and non-directive pregnancy counselling if they wish to avail of it.

We will be as vigilant in monitoring patient safety, equity and the provision of accessible, available, acceptable and quality abortion and contraception care under the new legal regime as we were for decades in highlighting the harms of the denial of abortion care to women under the 8th Amendment. Advocacy efforts must once again focus on the collection of robust public health data with the aim of continuing the reform effort so that all traces of the 8th Amendment are removed and access to abortion care and abortion rights is fully secured into the law.

2019 sees the 25th anniversary of the International Conference on Population and Development, held in Cairo in 1994. This is an opportunity for Ireland to review its policy on overseas development in light of the repeal of the 8th, and to integrate sexual and reproductive health and rights into global as well as domestic policy. UNFPA, the United Nations sexual and reproductive health agency, will convene a major international Summit in Nairobi, Kenya, in November 2019. The IFPA will engage in advocacy to ensure action at the national and intergovernmental levels to address the unfinished business of the Cairo Conference. We will support the aspiration of the Nairobi Summit: to ensure that the promise of Cairo is kept alive and that nobody is left behind, and that universal rights and choices are available for all.

CHAPTER 5

Financial Review

Income and expenditure

The financial results for the year ended 31 December 2018 are set out on pages 17 and 18 of the financial statements. These results show a net surplus of €22,184 (31 December 2017: surplus of € 37,173).

Income totalled €2,147,154, up 2.22% from 2017. Total resources expended amount to €2,124,970, up 3% from 2017.

The principal funding sources for the Irish Family Planning Association in 2018 are outlined in the table below:

Source of Funds	Amount	Type
Clinic income	€403,853	Unrestricted
HSE Crisis Pregnancy Programme	€605,764	Restricted
HSE CHO 9	€365,032	Restricted
HSE CHO 7	€149,914	Restricted
NCSS - Screening Service	€174,274	Unrestricted
NCSS - Pearls of Wisdom	€48,400	Restricted
Irish Aid	€120,000	Restricted
Open Society Foundation	€75,905	Unrestricted
IPPF	€100,014	Restricted
UNFPA	€46,551	Restricted

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Reserve Policy

Reserves are needed to fund asset replacement, shortfalls in income or unexpected expenditure. The Board considers that ideally 3 months of the estimated running costs should be held as a reserve in a liquid funds deposit account at any one time.

The IFPA is in the process of building up its unrestricted reserve in line with the above policy. The Management Team will be responsible for monitoring and growing reserves to the agreed level. The reserve policy will be reviewed annually by the Board of Directors. The IFPA's unrestricted reserve fund as at 31 December 2018 is €63,433.

Principal risks and uncertainties

The Directors consider that the following are the principal risk factors that could materially and adversely affect the company's future operating results or financial position:

- Changes in laws and regulations affecting the operating activities of the company.
- Loss of funding from major grant providers.

The company has organisational policies and structures in place to limit these risks. The Board of Directors and Management Team regularly review, reassess and proactively limit the associated risks insofar as possible.

Events since the balance sheet date

There have been no important events affecting the company since the year end.

Accounting records

The measures taken by the Directors to ensure compliance with the requirements of Section 281 to 285 of the Companies Act 2014, regarding adequate accounting records are the implementation of necessary policies and procedures for recording transactions, the employment of competent accounting personnel with appropriate expertise and the provision of adequate resources to the finance function. The books of account of the company are maintained at the Registered Office at 42a Pearse Street, Dublin 2.

Relevant audit information

As far as the Directors are aware, there is no relevant audit information of which the company's statutory auditors are unaware, and the Directors have taken all the steps that they ought to have taken as Directors in order to make themselves aware of any relevant audit information and to establish that the company's auditors are aware of that information.

DIRECTORS' REPORT FOR THE YEAR ENDED 31 DECEMBER 2018

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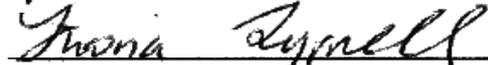
Auditors

The auditors, KSi Faulkner Orr Limited, have indicated their willingness to accept re-appointment under Section 383(2) of the Companies Act 2014.

This report was approved by the Board on 11/9/19 and signed on its behalf by



Natasha O'Brien
Director



Fiona Tyrrell
Director

**STATEMENT OF DIRECTORS RESPONSIBILITIES FOR THE
MEMBERS' FINANCIAL STATEMENTS**

FOR THE YEAR ENDED 31 DECEMBER 2018

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The directors are responsible for preparing the Director's Report and financial statements in accordance with applicable Irish law and Generally Accepted Accounting Practice in Ireland including the accounting standards issued by the Financial Reporting Council and promulgated by the Institute of Chartered Accountants in Ireland.

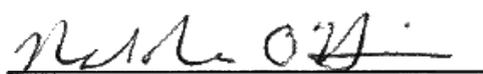
Irish company law requires the directors to prepare financial statements for each financial year. Under the law, the directors have elected to prepare the financial statements in accordance with the Companies Act 2014 and accounting standards issued by the Financial Reporting Council including FRS 102 The Financial Reporting Standard applicable in the UK and Ireland (Generally Accepted Accounting Practice in Ireland) as modified by the Statement of Recommended Practice "Accounting and Reporting by Charities" effective 1st January 2015. Under company law, the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the assets, liabilities and financial position of the company as at the financial year end date and of the surplus or deficit of the company for that financial year and otherwise comply with the Companies Act 2014.

In preparing those financial statements, the directors are required to:

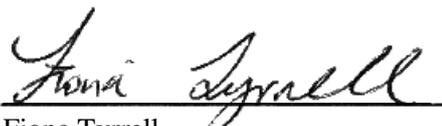
- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether the financial statements have been prepared in accordance with applicable accounting standards, identify those standards, and note the effect and the reasons for any material departure from those standards; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

The directors are responsible for ensuring that the company keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the company, enable at any time the assets, liabilities, financial position and surplus or deficit of the company to be determined with reasonable accuracy, enable them to ensure that the financial statements and the Directors' Report comply with the Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

On behalf of the board



Natasha O'Brien
Director



Fiona Tyrrell
Director

Date:

21/9/19

Opinion

We have audited the financial statements of Irish Family Planning Association CLG for the year ended 31 December 2018 which comprise the Statement of Financial Activities, the Balance Sheet, the Cashflow Statement and the related notes. The financial reporting framework that has been applied in their preparation is the Companies Act 2014 and accounting standards issued by the Financial Reporting Council and promulgated

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF
IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE
FOR THE YEAR ENDED 31 DECEMBER 2018

by the Institute of Chartered Accountants in Ireland (Generally Accepted Accounting Practice in Ireland), including FRS 102 The Financial Reporting Standard applicable in the U.K and Republic of Ireland as modified by the Statement of Recommended Practice "Accounting and Reporting by Charities" effective 1st January 2015.

In our opinion the financial statements:

- give a true and fair view of the assets, liabilities and financial position of the company as at 31 December 2018 and of its results for the year then ended;
- have been properly prepared in accordance with FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland"; and
- have been properly prepared in accordance with the requirements of the Companies Act 2014.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (Ireland) (ISAs (Ireland)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the company in accordance with ethical requirements that are relevant to our audit of financial statements in Ireland, including the Ethical Standard issued by the Irish Auditing and Accounting Supervisory Authority (IAASA) Ethical Standard, and the provisions available for small entities in the circumstances set out in note 19, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which ISAs (Ireland) require us to report to you where:

- the directors' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the directors have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF
IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE
FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

Other Information

The directors are responsible for the other information. The other information comprises the information included in the annual report other than the financial statements and our Auditor's Report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2014

Based solely on the work undertaken in the course of the audit, we report that:

- We have obtained all the information and explanations which we consider necessary for the purposes of our audit.
- In our opinion the accounting records of the company were sufficient to permit the financial statements to be readily and properly audited.
- The financial statements are in agreement with the accounting records.
- the information given in the Directors' Report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- in our opinion, the Directors' Report has been prepared in accordance with the Companies Act 2014.

Matters on which we are required to report by exception

Based on the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified any material misstatements in the Directors' Report. The Companies Act 2014 requires us to report to you if, in our opinion, the disclosures of directors' remuneration and transactions required by sections 305 to 312 of the Act are not made. We have nothing to report in this regard.

Responsibilities of directors for the financial statements

As explained more fully in the Directors' Responsibilities Statement, the directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF
IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE
FOR THE YEAR ENDED 31 DECEMBER 2018**

..... continued

Auditor's responsibilities for the audit of the financial statements

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

A further description of our responsibilities for the audit of the financial statements is located on the IAASA website at:

http://www.iaasa.ie/getmedia/b2389013-1cf6-458b-9b8f-a98202dc9c3a/Description_of_auditors_responsibilities_for_audit.pdf.

This description forms part of our audit report.

The purpose of our audit work and to whom we owe our responsibilities

Our report is made solely to the company's shareholders, as a body, in accordance with section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the company's shareholders those matters we are required to state to them in an Auditor's Report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume any responsibility to anyone other than the company and the company's shareholders, as a body, for our audit work, for this report, or for the opinions we have formed.



Laura Fallon

for and on behalf of KSi Faulkner Orr Limited.

**KSi Faulkner Orr Limited,
Behan House,
10 Lower Mount Street,
Dublin 2.**

Date: _____

11/9/2019

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

STATEMENT OF FINANCIAL ACTIVITIES

FOR THE YEAR ENDED 31 DECEMBER 2018

	Notes	Continuing operations			2017 Funds Total €
		Unrestricted Funds €	Restricted Funds €	2018 Funds Total €	
Income from:					
Charitable Activities		683,852	1,463,302	2,147,154	2,100,369
Total Income		<u>683,852</u>	<u>1,463,302</u>	<u>2,147,154</u>	<u>2,100,369</u>
Expenditure from:					
Charitable activities		661,475	1,463,495	2,124,970	2,063,196
Total Expenditure		<u>661,475</u>	<u>1,463,495</u>	<u>2,124,970</u>	<u>2,063,196</u>
Net Income/(expenditure)		22,377	(193)	22,184	37,173
Transfer to fund deficit		(193)	193	-	-
Total funds brought forward		41,249	-	41,249	4,076
Total funds carried forward		<u>63,433</u>	<u>-</u>	<u>63,433</u>	<u>41,249</u>

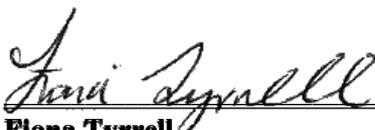
There are no recognised gains or losses other than the net income/(expenditure) for the above two financial years.

On behalf of the board



Natasha O'Brien

Director



Fiona Tyrrell

Director

Date: 11/4/19

The notes on pages 35 to 45 form an integral part of these financial statements.

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

BALANCE SHEET

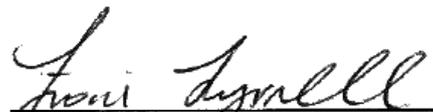
AS AT 31 DECEMBER 2018

		2018		2017	
Notes	€	€	€	€	€
Fixed assets					
Tangible assets	9		55,478		44,974
Current assets					
Stocks	10	14,660		20,225	
Debtors	11	47,402		64,558	
Cash at bank and in hand		353,159		132,781	
		<u>415,221</u>		<u>217,564</u>	
Creditors: amounts falling due within one year	12	(407,266)		(221,289)	
Net current assets/(liabilities)			<u>7,955</u>		<u>(3,725)</u>
Total assets less current liabilities			63,433		41,249
Net assets			<u>63,433</u>		<u>41,249</u>
The Funds of the Charity					
Unrestricted Reserves			63,433		41,249
Total Charity Funds			<u>63,433</u>		<u>41,249</u>

The financial statements were approved and authorised for issue by the Board on 11/09/19 and signed on its behalf by:



Natasha O'Brien
 Director



Fiona Tyrrell
 Director

The notes on pages 35 to 45 form an integral part of these financial statements.

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE
CASH FLOW STATEMENT**

FOR THE YEAR ENDED 31 DECEMBER 2018

	2018	2017
Notes	€	€
Reconciliation of net income to net cash inflow from operating activities		
Net income before interest and similar charges	28,583	46,503
Depreciation	32,645	76,131
Increases/(decreases) in stocks	5,565	(3,847)
Increases/(decreases) in debtors	17,156	(1,612)
Decreases/(increases) in creditors	185,977	(65,048)
Net cash inflow from operating activities	<u>269,926</u>	<u>52,127</u>
Cash flow statement		
Net cash inflow from operating activities	269,926	52,127
Returns on investments and servicing of finance	(6,399)	(9,330)
Capital expenditure	(43,149)	(6,083)
Increase/(decrease) in cash in the year	<u>220,378</u>	<u>36,714</u>
Reconciliation of net cash flow to movement in net funds (Note 17)		
Increase/(decrease) in cash in the year	220,378	36,714
Net funds at 1 January 2018	<u>132,781</u>	<u>96,067</u>
Net funds at 31 December 2018	<u>353,159</u>	<u>132,781</u>

The notes on pages 35 to 45 form an integral part of these financial statements.

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

1. Statement of accounting policies

The principal accounting policies adopted in the preparation of the financial statements are set out below and have been consistently applied within the same accounts.

1.1. Basis of preparation

The financial statements have been prepared on the going concern basis and in accordance with the historical cost convention as explained in the accounting policies below. Historical cost is generally based on the fair value of the consideration given in exchange for assets. The financial reporting framework that has been applied in their preparation is the Companies Act 2014 and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" issued by the Financial Reporting Council and promulgated by the Institute of Chartered Accountants in Ireland, as modified by the Statement of Recommended Practice "Accounting and Reporting by Charities" effective 1st January 2015.

The charity has applied the Charities SORP on a voluntary basis as its application is not a requirement of the current regulations for charities registered in the Republic of Ireland, however it is considered best practice. The directors consider the adoption of the SORP requirements as the most appropriate accounting practice and presentation to properly reflect and disclose the activities of the organisation.

1.2. Income

All incoming resources are included in the Statement of Financial Activities when the charity is entitled to the income, the amount can be quantified with reasonable accuracy and it is probable the income will be received. Income from Charitable Activities represents grants receivable from statutory and other bodies and amounts receivable in respect of the provision of goods and services excluding value added tax.

1.3. Expenditure

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes VAT where applicable and is reported as part of the expenditure to which it relates.

1.4. Tangible assets and depreciation

Tangible assets are stated at cost less accumulated depreciation and accumulated impairment loss. Cost includes all costs that are directly attributable to bringing the asset into working condition for its intended use.

Depreciation

Depreciation is provided on all tangible assets, at rates calculated to write off the cost less estimated residual value, of each asset systematically over its expected useful life, as follows:

Leasehold properties	-	Straight line over the life of the lease
Furniture and equipment	-	20 - 25% Straight line
Computer equipment	-	25 - 33 1/3% Straight line

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

1.5. Stock

Stock is valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items. Goods for resale are valued at purchase cost on a first-in, first-out basis.

Cost includes all costs incurred in the normal course of business in bringing the product or service to its present location and condition. Net realisable value is based on normal selling price, less further costs expected to be incurred to completion and all costs to be incurred in marketing, selling and distributing.

1.6. Trade and other debtors

Trade and other debtors are initially recognised at fair value and thereafter stated at amortised cost using the effective interest method less impairment losses for bad and doubtful debts except where the effect of discounting would be immaterial. In such cases the receivables are stated at cost less impairment losses for bad and doubtful debts.

1.7. Trade and other creditors

Trade and other creditors are initially recognised at fair value and thereafter stated at amortised cost using the effective interest rate method, unless the effect of discounting would be immaterial, in which case they are stated at cost.

1.8. The Funds of the Charity

The following funds are operated by the Charity:

Restricted Funds

Restricted funds represent grants and donations received which can only be used for particular purposes specified by the donor. Such purposes are within the overall aims of the charity.

Unrestricted Funds

Unrestricted funds includes general funds and fundraising which are expendable at the discretion of the Directors in furtherance of the objectives of the charity and which have not been designated for other purposes.

1.9. Leasing and hire purchase commitments

Leases are classified as finance leases whenever the terms of the leases transfer substantially all the risks and rewards of ownership to the company. Assets obtained under hire purchase contracts and finance leases are capitalised as tangible assets at their fair value and depreciated in the same manner as other tangible fixed assets. Obligations under such agreements are included in creditors net of the finance charge allocated to future periods. The finance element of the rental payment is charged to the statement of financial activities so as to produce constant periodic rates of charge on the net obligations outstanding in each period.

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

2. Income

The total income of the company for the year has been derived from its principal activity wholly undertaken in Ireland. Income is comprised of grants and income received for the provision of contraceptives and medical services.

Included in 2018 income is an amount of €120,000 received from the Development Cooperation Division of the Department of Foreign Affairs, more commonly known as Irish Aid. This is the third instalment of a grant of €360,000 towards a three-year project entitled Migrants and Citizens: Promoting the Sexual and Reproductive Health and Rights of Bolivian Youth (CSF 12-16).

Beginning in July 2016, the project is implemented in Bolivia by CIES, a Bolivian NGO. The International Planned Parenthood Federation, Western Hemisphere Regional Office (IPPF WHR), provides extensive technical and management support, monitoring, evaluation and translation to the project. In 2018, the IFPA retained €2,500 of this grant for administrative expenses in Ireland. The remaining €117,500 was transferred to the project partners for the implementation of the project activities. (An amount of €100,000 was received from Irish Aid in 2015 for a previous project with CIES and IPPF WHR, entitled Strengthening Investment in Bolivia's Most Vulnerable Youth (CSF 010-1301.)

Income comprises the following:

	2018	2017
	€	€
Medical directorate	8,460	6,795
Sales - Contraceptives	35,916	44,207
Sales - Medical Services	542,210	526,638
Education	6,810	1,285
Members subscriptions	1,045	802
Talks programme	16,528	15,478
Grants	1,536,185	1,505,164
	2,147,154	2,100,369

3. Net income / (expenditure)

	2018	2017
	€	€
Net income/(expenditure) is stated after charging:		
Depreciation and other amounts written off tangible assets	32,645	76,131
	32,645	76,131

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

4. Interest payable and similar charges

	2018	2017
	€	€
Included in this category is the following:		
On bank loans and overdrafts	5,135	5,366
Lease finance charges and hire purchase interest	1,264	3,964
	6,399	9,330

5. Employees

Number of employees

The average monthly number of employees during the year were:

	2018	2017
	Number	Number
Medical	13	13
Administration	14	11
Management	8	8
Cleaner	1	1
Counsellors	11	11
	47	44

Employment costs

	2018	2017
	€	€
Wages and salaries	1,148,692	1,112,972
Social insurance costs	112,763	106,074
	1,261,455	1,219,046

The number of higher paid employees were:

	Number	Number
€60,000 - €70,000	1	1
€70,000 - €80,000	1	1
€80,000 - €90,000	-	1
€90,000 - €100,000	1	-
	1	1

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

6. Transactions with directors

There were no transactions with the directors or the company secretary during the period.

7. Tax on net income/(expenditure) on charitable activities

The organisation is registered as a charitable organisation (CHY 5694) with the Revenue Commissioners, therefore no provision has been made for corporation tax.

8. Expenditure on Charitable Activities

	Advocacy and Education €	Counselling and Medical Services €	Total 2018 €	Total 2017 €
Direct Costs				
Payroll costs	243,525	996,623	1,240,148	1,190,727
Other staff costs	1,450	26,659	28,109	31,313
Medical consumables	-	56,289	56,289	55,627
Programme activity costs	9,670	171,286	180,956	193,930
Office running costs	248,030	316,487	564,517	487,179
Legal and professional	4,733	7,947	12,680	17,876
Audit fees	2,084	7,542	9,626	10,413
Depreciation	5,858	26,787	32,645	76,131
	<u>515,350</u>	<u>1,609,620</u>	<u>2,124,970</u>	<u>2,063,196</u>

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

9. Tangible assets

	Leasehold improvements	Leasehold premises	Furniture and equipment	Website development	Computer equipment	Total
	€	€	€	€	€	€
Cost						
At 1 January 2018	767,380	174,471	452,333	-	434,066	1,828,250
Additions	9,508	-	1,337	13,718	18,586	43,149
At 31 December 2018	<u>776,888</u>	<u>174,471</u>	<u>453,670</u>	<u>13,718</u>	<u>452,652</u>	<u>1,871,399</u>
Depreciation						
At 1 January 2018	761,961	154,503	446,700	-	420,112	1,783,276
Charge for the year	2,272	10,666	2,258	2,417	15,032	32,645
At 31 December 2018	<u>764,233</u>	<u>165,169</u>	<u>448,958</u>	<u>2,417</u>	<u>435,144</u>	<u>1,815,921</u>
Net book values						
At 31 December 2018	<u>12,655</u>	<u>9,302</u>	<u>4,712</u>	<u>11,301</u>	<u>17,508</u>	<u>55,478</u>
At 31 December 2017	<u>5,419</u>	<u>19,968</u>	<u>5,633</u>	<u>-</u>	<u>13,954</u>	<u>44,974</u>

10. Stocks	2018	2017
	€	€
Stocks	<u>14,660</u>	<u>20,225</u>

There are no material differences between the replacement cost of stock and the balance sheet amount.

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

11. Debtors	2018	2017
	€	€
Trade debtors	13,292	11,735
Other debtors	1,437	1,395
Prepayments and accrued income	32,673	51,428
	<u>47,402</u>	<u>64,558</u>
12. Creditors: amounts falling due within one year		
	2018	2017
	€	€
<i>Other creditors</i>		
Trade creditors	55,866	46,315
Accruals	25,807	21,175
Deferred income	276,765	131,532
<i>Taxation creditors</i>		
PAYE/PRSI/USC	48,827	22,267
VAT	1	-
	<u>407,266</u>	<u>221,289</u>

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

13. Deferred income	2018	2017
	€	€
At 1 January 2018	131,532	146,063
Income received during the year	2,292,387	2,085,838
	<u>2,423,919</u>	<u>2,231,901</u>
Released in year	(2,147,154)	(2,100,369)
At 31 December 2018	<u>276,765</u>	<u>131,532</u>

Deferred income is comprised of the following:

	Deferred Income 2017	Receipts 2018	Deferred Income 2018	Income 2018
	€	€	€	€
Grants and Talks Programme				
HSE - Crisis Pregnancy Programme	52,451	570,546	(17,233)	605,764
HSE - National Cancer Screening Service	42,000	6,400	-	48,400
HSE - Core Funding	-	503,803	(26,419)	477,384
HSE - FGM	692	38,000	(1,130)	37,562
Irish Aid	-	120,000	-	120,000
Open Society Foundations	-	170,511	(94,606)	75,905
Wellspring	-	84,066	(78,115)	5,951
International Planned Parenthood Federation	36,315	115,072	(51,373)	100,014
Irish Human Rights and Equality Commission	-	6,094	(5,027)	1,067
United Nations Population Fund	2,712	43,839	-	46,551
Centre for Reproductive Rights	(7,500)	15,607	-	8,107
South Dublin Voluntary Groups	917	5,500	(917)	5,500
Other	-	(84)	70	(14)
HSE - Lottery Grant (Talks Programme)	-	16,527	-	16,527
Other Income				
Education Grants	(1,055)	7,865	-	6,810
Durex Grant	5,000	-	(2,015)	2,985
Medical Directorate	-	8,460	-	8,460
Sales of contraceptives	-	35,916	-	35,916
Sales of Medical Services	-	542,210	-	542,210
Members subscriptions	-	1,045	-	1,045
Other income	-	1,010	-	1,010
	<u>131,532</u>	<u>2,292,387</u>	<u>(276,765)</u>	<u>2,147,154</u>

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

14. The Funds of the Charity	Balance 31/12/17	Income	Expenditure	Transfers	Balance 31/12/18
	€	€	€	€	€
Restricted					
Charitable Activities	-	1,463,302	(1,463,495)	193	-
	<u>-</u>	<u>1,463,302</u>	<u>(1,463,495)</u>	<u>193</u>	<u>-</u>
Unrestricted					
Charitable Activities	41,249	683,852	(661,475)	(193)	63,433
Total funds of the Charity	<u>41,249</u>	<u>2,147,154</u>	<u>(2,124,970)</u>	<u>-</u>	<u>63,433</u>

15. Related party transactions

Key management includes the Chief Executive, Financial Controller, Medical Director, Directors of Counselling, Director of Advocacy and Communications, Clinic Manager and Co-ordinator of Services. The compensation paid or payable to key management for employee services is shown below:

	2018	2017
	€	€
Key management compensation		
Salaries and other short-term employee benefits	398,587	377,332
	<u>398,587</u>	<u>377,332</u>

**IRISH FAMILY PLANNING ASSOCIATION
COMPANY LIMITED BY GUARANTEE**

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

..... continued

16. Gross cash flows

	2018	2017
	€	€
Returns on investments and servicing of finance		
Interest paid	(5,135)	(5,366)
Interest element of finance lease rental payments	<u>(1,264)</u>	<u>(3,964)</u>
	<u>(6,399)</u>	<u>(9,330)</u>
Capital expenditure		
Payments to acquire tangible assets	<u>(43,149)</u>	<u>(6,083)</u>

17. Analysis of changes in net funds

	Opening balance	Cash flows	Other changes	Closing balance
	€	€	€	€
Cash at bank and in hand	132,781	220,378	-	353,159
	<u>132,781</u>	<u>220,378</u>	<u>-</u>	<u>353,159</u>
Net funds	<u>132,781</u>	<u>220,378</u>	<u>-</u>	<u>353,159</u>

18. Company limited by guarantee

The company is one limited by guarantee not having a share capital. The liability of each member, in the event of the company being wound up is €1.

**IRISH FAMILY PLANNING ASSOCIATION
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NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2018

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19. IAASA Ethical Standard - Provisions Available for Small Entities

In common with many other businesses of our size and nature we use our auditors to assist with the preparation of the financial statements.

20. Approval of financial statements

The board of directors approved these financial statements and authorised them for issue on

_____ 11/09/19 _____

IRISH FAMILY PLANNING ASSOCIATION
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