# **IFPA ANNUAL REPORT 2018**

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# **Strategic Framework 2017 – 2022 Priority Objectives**

- 1 Ensure that the IFPA is governed in such a way that it effectively achieves its objectives.
- 2 Change IFPA clinical services from mostly family planning services to comprehensive sexual and reproductive health services.
- 3 Improve quality, planning, delivery, consistency and accountability in the provision of IFPA services.
- 4 Advance a health promotion approach to sex, sexuality, contraception and unplanned pregnancy through information, education and campaigns.
- 5 Promote positive public discourse on the right to access abortion services.
- 6 Hold the State accountable at the UN and European level to bring its laws and policies on SRHR, in particular abortion, into conformity with international human rights law and commitments under international agreements.
- 7 Secure support across the political, health and civil society spheres for access to abortion services in Ireland.

# Our Impact in 2018

Medical	•	Education an	d Training	
13,027	Sexual and reproductive health consultations, including:	24	Nurses and midwives trained in contraception	
973	STI screenings	8	Lectures on reproductive health	
3,349	Cervical screenings	6	Workshops on FGM	
1,589	Counselling sessions	121	Participants in Speakeasy programme:	
Pearl of Wisdon	m E	300	Secondary school students participate in RSE programmes	
30,000	Pearl of Wisdom packs distributed to promote cervical screening	Advocacy	•	
Media		8	Written submissions	
13	Press statements on a wide range of issues related to sexual and reproductive health and rights  Opinion pieces and clinical articles published	1	Presentation to Oireachtas Committee	
		2	Educational briefings for TDs and Senators	
8		5	Meetings with government ministers	
2	Press conferences			
		Changes in the Law  8th Amendment of the Constitution: Repealed		
		Distortion of Life During Disappares Act Described		

Regulation of Information (Services Outside the State For Termination of Pregnancies) Act: Repealed

## **About the IFPA**

The IFPA was established in 1969 by seven volunteers who were motivated by the suffering caused by the State's blanket ban on contraception. Since then, the IFPA has worked and advocated for women's and couples' access to the means to avoid unplanned pregnancy and to have access to care in cases of pregnancies that are unintended or become a crisis.

With every advance in reproductive rights and health in Ireland, the IFPA has been at the vanguard. When reproductive choice was suppressed, we provided care — supplying the contraceptive pill in exchange for a donation in the 1970s; selling condoms in a record shop in the mid-1980s; opening clinics in underserved communities; pioneering pregnancy counselling and abortion information.

Now in its 50th year, the IFPA is Ireland's leading sexual health provider, offering information and counselling and a choice of quality services at its two medical clinics in Dublin and ten counselling centres across Ireland.

Since January 2019, in addition to non-directive pregnancy counselling, family planning and contraceptive services, free post-abortion medical check-ups and educational services, we provide early medical abortion at our clinics in Tallaght and Dublin City Centre.

We also provide medical training. This includes peer-to-peer training in long acting reversible contraception training for doctors and an annual contraception foundation course for nurses and midwives.

We provide quality comprehensive sexuality education, including relationships and sexuality education workshops for secondary school students, parents, and health and social care workers.

The IFPA advocates for sexual and reproductive health and rights to be prioritised within Ireland's national health policy and in Ireland's overseas development policy. We advocate for the implementation of the state's obligations under international human rights law, for the achievement of the Sustainable Development Goals and the full implementation of the Programme of Action of the International Conference on Population and Development.

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 Gynecology and Obstetrics (FIGO) and the Royal College of Obstetricians and Gynaecologists (RCOG). Our foundation course in contraception is accredited by the Nursing and Midwifery Board of Ireland.

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 and 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).

### MISSION STATEMENT

The IFPA's mission is to enable people to make informed choices about their sexual and reproductive health and to understand their rights.

The IFPA, its members, affiliates and supporters:

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

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- 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.

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Are committed to working in alliance with all those who share our aims, and in co-operation with interested government and non-governmental bodies. Our vision: At the IFPA we envisage an Irish society where all people can enjoy a fulfilling sex life and can make informed choices in their sexual and reproductive lives, and where there is full access to high quality information, education and health services regarding sex, sexuality, conception, contraception, safe abortion and sexually transmitted infections.



IFPA board members. Left to right: Fiona Tyrrell, Megan Reilly, Natasha O'Brien, Rosemary Wokocha, Patricia Prendiville, Jennifer Gargan.

# **Chairperson's Foreword**

2018 – the IFPA's 50th year – was a momentous one for sexual and reproductive health and rights in Ireland.

The 8th Amendment of the Constitution was repealed.

Ireland has transformed from a country where women were shamed for their sexuality and denied control over their own fertility to a state whose citizens voted for reproductive rights by a landslide. In this new era, the IFPA still has a unique position in Ireland. Our clinics remain at the forefront of reproductive healthcare which now includes abortion care. Our trained and accredited pregnancy counsellors provide information and professional support through a national network of counselling centres. Our training programme provides quality comprehensive sexuality education at diverse locations throughout Ireland. Our advocacy department works with parliamentarians, healthcare providers and civil society to continue to advance reproductive rights in Ireland and abroad.

But as we reach 50, it's appropriate for the IFPA to reflect on how we got here. The referendum of 2018 was the culmination of decades of struggle during which the IFPA advocated for free, safe and legal abortion in Ireland – often as the sole voice.

For many years we faced the concerted opposition and hostility of the State. At times when abortion reform was not on the political radar, or was seen as politically toxic, the IFPA never wavered in its advocacy.

We engaged at all levels: making submissions to government departments, publishing reports and policy briefings, working with parliamentarians.

Two publications in the late 1990s – Facing up to Reality and Always & Never, made the case that the public interest could only be served by addressing abortion as a practical health issue, which required repeal of the 8th Amendment and decriminalisation of abortion. In 2000, we published The Irish Journey, a series of testimonies of women who travelled to the UK to access abortion care.

When the Irish State refused to listen to women, the IFPA gave voice to the experience of our clients by providing evidence to UN human rights monitoring bodies. We supported women w to challenge the State's denial of reproductive rights, including before the European Court of Human Rights.

In 2007, the IFPA launched the Safe and Legal Abortion awareness raising campaign. In 2013, we presented evidence to the Oireachtas Health Committee during its discussions on the ruling in A, B and C v Ireland. In 2017, we addressed the Citizens' Assembly and the Joint Oireachtas Committee on the 8th Amendment.

In parallel, the IFPA was creating spaces where healthcare providers and civil society could come together to discuss reform of Ireland's abortion laws. Each meeting, each seminar, each briefing document, each connection made, each critical report by human rights bodies helped to build the momentum and the political will to bring Ireland's laws into line with its changing society and norms.

After decades of dedicated work by IFPA staff and board members, it was inspiring to see the extraordinary mobilisation and the cross-party political consensus of the referendum campaign.

### The work is not yet done

IFPA staff – our receptionists, nurses, doctors, pregnancy counsellors, clinic managers, the education and training, advocacy and communications officers and the senior management team – and the committed and dedicated volunteers who serve on the Board, have been instrumental in this process of change.

In 2017, we set out seven Strategic Objectives within our Strategic Framework (see inside cover). We have made significant advances on all of these. Objective 7 — secure support for access to abortion services — in particular is almost completely achieved, but there is unfinished business in relation to all seven.

Our successes have motivated us to work even harder now to achieve the IFPA's vision: a society where all people have the power to make informed choices about their own sexual and reproductive lives.

Particular thanks to my predecessor as Chair, Natalie McDonnell, who stepped down from the Board in 2018. With her passion for social justice, her warmth, wit and intellect, Natalie made an enormous contribution to the IFPA.

Fiona Tyrrell

"Ireland has transformed from a country where women were shamed for their sexuality and denied control over their own fertility to a state whose citizens voted for reproductive rights by a landslide. In this new era, the IFPA still has a unique position in Ireland. Our clinics remain at the forefront of reproductive healthcare, which now includes abortion care."



Fiona Tyrrel

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# Chief Executive's Overview

2018 was a highly significant year for women's reproductive rights and health. Dominated by 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.

The IFPA continued to provide a high level of services at our medical clinics and pregnancy counselling locations in 2018: contraception advice and services; sexually transmitted infection (STI) screening and treatment; cervical screening; pregnancy and post-abortion counselling; fertility advice; pregnancy testing; free post-abortion medical check-up; menopause health check; breast check; occupational health screening; and treatment for women who have undergone female genital mutilation (FGM).

It was also a year in which the State's cervical cancer screening programme came under intense media and political scrutiny, leading to high demand for repeat cervical screening tests.

The final months of 2018 saw our clinics preparing for our early medical abortion service.

In parallel, we were engaging with Ireland's voluntary national review of implementation of the Sustainable Development Goals and in the consultation in relation to a new international development policy. And we launched UNFPA's State of World Population report 2018.

#### **Abortion law reform**

Once the 8th Amendment was repealed, the government announced that legislation would be enacted *and* services introduced by the end of 2018.

Enormous pressure was placed on healthcare providers to rush through the development of guidance. Unfortunately, while the political will to make services available quickly was not in doubt, there was little sign of leadership or consultation until well into the autumn. When the IFPA and other healthcare experts were eventually convened to assist in the development of the model of care, the process was complicated by the very short timeframe and the pressure to develop a care pathway while the legislation was still going through the Oireachtas.

At the same time, in the ensuing rushed and, in the IFPA's view, inadequate process of parliamentary scrutiny of the legislation, an opportunity to frame the Health (Termination of Pregnancy) Act in alignment with international human rights law and best law reform practice was sacrificed to political expediency. The Heads of Bill included an inflexible mandatory waiting period, retained criminal provisions and lacked a clear and explicit provision to centre the law on women's right to equitable access to quality care. Regrettably, in spite of our efforts, none of these flaws was resolved in the law enacted in December.

In this context, it was a real achievement and a testament to the dedication and commitment of the IFPA's team that, as 2018 ended, we were ready to begin offering early medical abortion care in January 2019.

### Many challenges remain

The full integration of abortion services into sexual and reproductive health services requires that abortion stigma and barriers to access to care in practice are addressed.

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- As a service provider, the IFPA is acutely aware that many unintended pregnancies arise from inadequate information and misinformation about reproduction and contraception. Lack of local access to services is also a barrier. And cost barriers can force women who wish to avoid pregnancy to use unreliable methods or no methods of contraception.
- We are continuing to advocate for the introduction of a free contraception scheme that covers all modern methods and for comprehensive sexuality education.

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- ➡ The law does not fully address the unmet need for abortion services in Ireland. Women whose pregnancies exceed 12 weeks, but do not involve risk to life or of serious harm to health or a fatal foetal anomaly, are excluded from eligibility under the law. This is unacceptable.
- The IFPA's conscientious commitment to women and girls in Ireland is that we will continue to advocate until every person in Ireland who needs reproductive healthcare, including abortion care, has equitable access to quality services.

Niall Behan

CHIEF EXECUTIVE OFFICER

"The IFPA's conscientious commitment to women and girls in Ireland is to continue to work to ensure that every person in Ireland who needs reproductive healthcare has equitable access to quality services with dignity.

We will continue to advocate for the introduction of a free contraception scheme that covers all modern methods, for evidence-based comprehensive sexuality education and for reform of the abortion legislation so that no one is left behind."



Niall Behan

# **Clinical Services**

2018 was another busy year for our clinics. 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 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.

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). Established in 2014, this has expanded to provide broader sexual and reproductive health services to migrant women, particularly those living in direct provision, while maintaining a core FGM treatment service.

We provide capacity-building for frontline healthcare service providers, educators and professional healthcare bodies in relation to FGM. Participants in 2018 included trainee GPs, attendees at the Spring Conference of the Institute of Obstetricians and Gynaecologists and attendees at the IFPA's one-day sexual health training course.

In 2018, the IFPA held four outreach sessions with women from affected communities. In addition to workshops in direct provision centres in Dublin and Waterford, we provided a stall for the Migrant Information Fair, an annual event jointly organised by New Communities Partnership and the International Organization for Migration (IOM), the UN Migration Agency.

We continued to work with other civil society organisations to highlight the need for a government-led inter-agency committee tasked with responsibility for the development of a national action plan to effectively address FGM.

### **Pearl of Wisdom**

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.

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 about cervical screening. In planning the distribution, there was a particular focus on the five counties with the lowest take-up rate of cervical screening.

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, Aisling and Aoife O'Regan, and Dr Caitríona 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.

"Access to a choice of contraceptive methods is critical to women's ability to plan the number and spacing of any children they choose to have. It is critical to their participation in education, employment and public service. And it is central to the right to health and ensuring that as far as possible, women and girls have the means to prevent unintended pregnancy and the need for abortion care."

DR CAITRÍONA HENCHION, PRESS CONFERENCE WITH MINISTER SIMON HARRIS, MAY 2018



Dr Lakshmi Parameswaran at the IFPA's clinic in Dublin city centre

# **Planning for Abortion Care**

## **Planning for abortion care**

In June 2018, the Minister for Health announced that abortion care services would be introduced by January 2019. In addition to regular clinic operations, the IFPA began planning our own services, developing protocols and organising training for staff. By the end of the year, issues such as access to scanning facilities and anti-D and the care pathways to hospitals for women and girls who might need these were still uncertain and unclear. The Health Services Executive (HSE) guidance on early medical abortion was not issued until the legislation was enacted in late December.

The IFPA was well prepared to bring our expertise into the development of the model of care at national level. However, there was little or no consultation with healthcare providers, professional bodies or other experts until the autumn of 2018.

When the Department of Health and the HSE began to convene healthcare practitioners and professional bodies, 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 lack of a clear implementation plan or strategy.

#### **KEY ACTIONS**

- An in-house research project on international best practice in the delivery of abortion care funded by the European Society for Contraception. The learnings from this research project were brought into the IFPA's work with the policy makers and healthcare providers in the development of the model of care for early medical abortion.
- Held a meeting with the British Society of Abortion Care Providers, for doctors from Ireland at the FIAPAC conference held in Nantes, in September.
- Between October and December, IFPA's Medical Director was involved in weekly collaborative meetings organised by the HSE with key future abortion care providers.

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IFPA Medical Director and CEO participated in monthly stakeholder meetings on implementation with the Minister for Health and the Chief Medical Officer.

- In October 2018, held a meeting at the IFPA clinic with Dr Peter Boylan, national clinical lead on abortion.
- Liaised closely with colleagues within the professional bodies (the Institute of Obstetricians and Gynaecologists and the Irish College of General Practitioners [ICGP]) the maternity hospitals and women's health centres to coordinate in relation to access to care and patient safety.
- Delivered a presentation on the abortion legislation to a training seminar organised by the ICGP and the British Society of Abortion Care Providers.

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Input to a consultation by the Ethics Working Group of the Medical Council in relation to revisions to its professional guidance on abortion.

To ensure that our service delivery would be guided by best international healthcare practice and by the requirements of the right to health, the IFPA liaised with experts from the Department of Reproductive Health and Research of the World Health Organisation to plan a series of workshops to explore best practice in the implementation of abortion care.

The IFPA began offering early medical abortion (EMA) service in January 2019. That we were in a position to do so was a testament to the commitment, professionalism and dedication of the IFPA team and the clinic staff to the provision of quality care to pregnant women and girls.

While many logistical issues were ironed out relatively quickly, women and girls are still facing challenges. We are seeing EMA clients from all parts of Ireland, many of whom are unable to access care locally. We have developed protocols for minors who seek abortion care. Access for women from Northern Ireland is still problematic: Despite the political promise that women from Northern Ireland would have access to care, the referral pathway to a hospital, should this be necessary, is still unclear.

The IFPA began offering early medical abortion (EMA) service in January 2019. That we were in a position to do so was a testament to the commitment, professionalism, dedication and hard work of the IFPA team throughout 2018.



# **Pregnancy Counselling**

Pregnancy counselling has been a core element of the IFPA's services since its foundation. We have decades of experience offering women and girls — as well as their partners and families — a non-directive, non-judgemental, safe space in which to discuss their personal situation.

In 2018, the IFPA saw an increased demand for counselling appointments across the ten pregnancy counselling centres. We experienced a 34% increase in calls to the IFPA helpline. Over the year, the number of sessions booked increased by 39%, with a particular increase in post-abortion counselling during the period of the referendum campaign.

Counselling is available to any client who requests early medical abortion at our clinics. Towards the end of 2018, our clients included women who were considering accessing abortion care once it became lawful in January 2019.

The IFPA offers counselling as an element of best practice. While the change in the law has made abortion available to most women who need it, it has not done away with the need for supports for women experiencing an unintended pregnancy or a pregnancy that has become a crisis.

In addition to pregnancy counselling and post-abortion counselling for those who access the IFPA's early medical abortion service, the IFPA offers a specialist counselling service to those affected by foetal abnormality, including those excluded from access to termination services on the grounds that the anomaly is not considered fatal.

We also support women and girls whose pregnancy is the result of rape or other forms of coercion. Our counsellors have extensive experience in supporting migrant women and girls who are living in direct provision. We provide counselling, information and support to those who are ineligible under the legislation and must therefore travel outside the country for abortion care: women whose pregnancy exceeds 12 weeks — or will do so after the waiting period has passed — and whose pregnancy is not deemed to involve risk to life or serious harm to health.

When minors present with a crisis or unintended pregnancy, they are seen by our counsellors either before they meet with the doctor or during the three-day wait. This practice has been adopted by IFPA to ensure that the young person is safeguarded and as a measure to prevent possible coercion. In these cases the counsellor acts as advocate on behalf of the young person to ensure that she is supported in her decision. Counsellors

frequently mediate and facilitate honest and constructive communication between the young person and her family.

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.

### Impact of the referendum

For many weeks in early 2018, anti-abortion campaigners used posters and billboards to communicate stigmatising messages that could be offensive or upsetting to women who opted to have abortions. During that period there was a significant demand for IFPA counselling services: in many cases because of issues raised during the referendum campaign.

At the same time, then Director of Counselling, Maura Leahy, provided support to Together for Yes volunteers on how to deal with calls from women who were angry at the stigmatising language and imagery of the anti-abortion campaign.

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. Progressive realisation of the right to health requires that there is no regression in access to healthcare. In December, Minister Harris reassured us that face-to-face counselling would remain a key element of services for women.

With decades of experience and knowledge of the benefits to women of non-directive, non-judgemental professional counselling, the IFPA is firmly of the view that it must be part of the care offered to women who experience unintended or crisis pregnancies and will advocate to ensure that it remains so.

"Pregnancy counselling at no cost to women was the only progressive policy development in relation to abortion during the years that abortion was banned in Ireland.

The option of non-directive, non-judgemental professional counselling must be part of the care offered to women who experience unintended or crisis pregnancies.

The IFPA will advocate to ensure that it remains so."

NIALL BEHAN, IFPA CEO



Head Counsellor and Supervisor, Róisín Venables,

# **Capacity Building and Outreach**

The IFPA is committed to supporting and developing best practice in reproductive health in Ireland. We prioritise sharing our expertise in order to build the knowledge and enhance the capacity of healthcare providers in Ireland.

In May, we ran our annual Contraception Foundation Course for nurses and midwives. 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 Caitriona Henchion 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.

Dr Henchion's clinical and policy expertise was in high demand in 2018. In January, she gave a lecture on crisis pregnancy during the Irish College of General Practice (ICGP) contraception theory course; she 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 delivered a presentation on early medical abortion to 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.

She 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 Institute of Obstetricians and Gynaecologists (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; and 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 on Holles St in Dublin, the meeting was a confidential Chatham House Rule style roundtable of international experts: Professor Sharon Cameron, Consultant Gynaecologist, and Lead for Sexual Health Services NHS Lothian, Co-director Clinical Effectiveness Unit of Faculty of Sexual and Reproductive Healthcare UK, Reader University of Edinburgh; 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 Dublin and regional hospitals, GPs, midwives and IFPA counsellors and doctors.

This was one of a series of such events held by the IFPA over a number of years in anticipation of law reform. This 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 has been very successful. Most of the healthcare practitioners who participated were leading advocates during the referendum campaign and continued their rights-based advocacy into the development and delivery of services.

The IFPA is committed to supporting and developing best practice in reproductive health in Ireland. By sharing our clinical and policy expertise, we are building the knowledge and enhancing the capacity of healthcare providers across Ireland.



IFPA Medical Director Dr Caitríona Henchion delivers contraception training to nurses and midwives

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# **Education and Training**

The IFPA is a leader in the development of comprehensive sexual health education for all.

We specialise in the provision of relationships and sexuality education for people with an intellectual disability.

Our unique Speakeasy and Speakeasy+ programmes equip participants with essential life skills. We empower parents, guardians, service providers and teachers to support their children and clients as they navigate puberty and begin experiencing relationships and sexuality.

While relationships and sexuality education (RSE) in mainstream schools is too often woefully inadequate, pupils themselves are reaching out to the IFPA for guidance.

As well as delivering our own RSE programme to hundreds of pupils every year, the IFPA is actively campaigning for the introduction of an inclusive, comprehensive RSE curriculum so that all young people in Ireland have access to high-quality RSE.

#### Services in 2018

In 2018 we delivered the Speakeasy+ programme to 121 participants in Sligo, Letterkenny, Mullingar, Blanchardstown, Navan, Tullamore and Dublin City. We provided interactive information stands at third level colleges during SHAG (Sexual Health and Guidance) Week. We also delivered a specialised sexual health programme for migrant 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. Relaunched in 2018, the course included new elements such as female genital mutilation (FGM) and was delivered in association with HIV Ireland.

### Sexuality education in secondary schools

The IFPA also provides life-skills workshops for young people to explore sexual health issues, including issues lacking in mainstream education. Almost 300 secondary school students in Malahide and Kanturk took part in the comprehensive RSE programme in 2018. 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 relationships and sexuality education programme.

The number 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 — 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.

"The IFPA is the only organisation in Ireland providing specialist relationships and sexuality education for people with an intellectual disability. We are dedicated to ensuring that all young people have access to high-quality comprehensive, inclusive, evidence-based relationships and sexuality education."

BREANNA COYLE, IFPA TRAINING COORDINATOR





IFPA Training Coordinator delivers Speakeasy training

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# **All Party Oireachtas Group**

The IFPA acts as Secretariat to the All Party Oireachtas Interest Group on Sexual and Reproductive Health and Rights, which was formed in 2000.

Between the referendum on the 8th Amendment, and the accompanying focus on contraception and sexuality education at the national level, and its work on global development advocacy work, the All Party Group (APG) had one of its busiest years in 2018. In recognition of the workload, a decision was taken to adopt a co-chair mode of working, and Jan O'Sullivan TD (Labour), Chair since 2016, was joined as Co-Chair by Marcella Corcoran Kennedy TD (Fine Gael). Senator Alice Mary Higgins continued to sit on the Executive of the European Parliamentary Forum on Sexual and Reproductive Health.

### **Advocacy on FGM**

Following her participation in a high-level international meeting on FGM convened by the UNFPA in 2017, Deputy Corcoran Kennedy took an active role in advocacy on FGM, beginning with a presentation to the Fine Gael parliamentary party for Zero Tolerance Day in February. As a result, Minister of State for Health Promotion, Catherine Noone TD, took on a particular role in relation to FGM. In April, the APG met the Minister, with the IFPA, 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 advocate for a government-led interagency FGM strategy.

## **National advocacy**

Prior to the referendum campaign, the APG hosted 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 expert gynaecologists — Dr Cliona Murphy, Chair-Elect of the Institute of Obstetricians and Gynaecologists and Dr Maeve Eogan, Medical Director of Sexual Assault Treatment Unit (SATU) at the Rotunda Hospital — and from GP, Dr Mark Murphy.

During the campaign, the members of the All Party Group were actively involved in advocating for sexual and reproductive health and rights (SRHR) within their own party structures and constituencies, and some were involved with the Women's Health in Ireland campaign group. However, as an education and awareness group, the APG suspended its activities and did not campaign collectively during the referendum campaign proper and the IFPA suspended its role as secretariat. These were resumed in June 2018.

During 2018, the IFPA raised awareness with parliamentarians on international human rights law and the best international practice of the World Health Organisation. 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.

### **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 planned new ODA policy. The APG made a submission to the public consultation in relation to the new policy. Throughout 2018, Senator Ivana Bacik and Deputy Maureen O'Sullivan TD raised the issue of reproductive health and the role of UNFPA regularly at meetings of the Joint Oireachtas Committee on Foreign Affairs.

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.

#### International forums

Two APG members, Senators Catherine Noone and Lorraine Clifford Lee, participated in the International Parliamentarians' Conference in Ottawa in October: a major international gathering of over 300 parliamentarians from across the globe. Senator Noone addressed a plenary session at the event, focusing on the Joint Oireachtas Committee on the 8th Amendment, of which she was Chair, and its role in bringing about the repeal of the 8th Amendment. Media support was provided to Senators Noone and Clifford Lee by IFPA Communications Officer, Siobhán Silke.

Senator Clifford Lee also participated in an EPF study tour of parliamentarians to Tanzania in the summer.

We are concerned that despite the gains made in the past 24 years, there is a rising inequality within populations where a considerable number of people continue to live in conditions of extreme poverty, without the fulfillment of their human rights and fundamental freedoms.

We recognize that the provision of sexual and reproductive health services, including family planning, leads to a country's social and economic progress.

FROM THE STATEMENT OF COMMITMENT OF THE INTERNATIONA PARLIAMENTARIANS' CONFERENCE, OTTAWA, OCTOBER 2018.



Senators Catherine Noone and Lorraine Clifford-Lee meet with UNFPA Executive Director Dr Natalia Kanem at the International Parliamentarians Conference in Ottawa, Canada, in October 2018.

# **Global Development Advocacy**

2018 saw significant advances in the incorporation of sexual and reproductive health and rights in Ireland's overseas development assistance. Throughout the year, we highlighted the opportunity of an increased aid budget to redirect funding to UNFPA supplies and to increase core funding to UNFPA and introduce multiannual modalities.

A highlight of the year was the launch of the 2018 UNFPA State of World Population (SWOP) report 'The Power of Choice: Reproductive rights and the demographic transition' in October. Launching the report, Tánaiste and Minister for Foreign Affairs & Trade, Simon Coveney TD, announced an additional contribution of €700,000 in core funding to UNFPA for 2018 − a 25% increase over 2017.

In his speech, the Tánaiste drew connections between sexual and reproductive health and rights and the achievement of the Sustainable Development Goals (SDGs).

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 Irishwoman, Jacqueline Mahon, UNFPA Representative in Tanzania, an inspiring and thought provoking speaker and champion of reproductive health and rights.

### 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), Sarah McGrath (Director of Irish Aid's Multilateral Unit), Síona Cahill (President of Union of Students in Ireland and IFPA Board Member), and 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.

### New Irish overseas development policy

The government began work on a new international development policy in 2018. The IFPA made a detailed written submission on the importance of sexual and reproductive health and rights in international development. In a pre-budget submission to the Department of Foreign Affairs in 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.

In September, the IFPA's CEO, Director of Advocacy and Communications and Policy Officer held a positive and productive meeting with the Director of Irish Aid's Policy Unit, Irish Aid's Health Specialist and Gender Focal Point.

The IFPA is a member of Dóchas, the umbrella group of NGDOs in Ireland and sits on the Policy Working Group. We participated in a number of events organised by Dóchas during 2018.

The IFPA is one of eight SRHR organisations from states across Europe that work together in the Countdown 2030 Europe Consortium, which is convened by the IPPF. The analysis, information and technical expertise we access through the collective work of this consortium is invaluable to the IFPA's work in Ireland.

"We recognise that access to quality maternal and reproductive health care, supporting safe motherhood and allowing women to control their own fertility is central to women's empowerment and the health of nations."

SIMON COVENEY TD, MINISTER FOR FOREIGN AFFAIRS AND TRADE, AT THE LAUNCH OF THE UNFPA STATE OF WORLD POPULATION REPORT 2018.



At the launch of the State of World Population Report 2018: Jan O'Sullivan TD; Jacqueline Mahon, UNFPA; Minister Simon Coveney TD; IFPA CEO Niall Behan; Marcella Corcoran Kennedy TD; IFPA Director of Advocacy Maeve Taylor

# **Referendum Campaign**

### The long struggle for abortion reform

The IFPA advocated for decades for the introduction of free, safe and legal abortion in Ireland. On May 25th 2018, 1,429,981 Yes votes paved the way for the Oireachtas to legislate for the provision of abortion care.

The insertion of the 8th Amendment in 1983 framed the teaching of the Catholic Church on abortion as a national moral position. The IFPA's work over many years focused on reframing abortion as an indispensable aspect of women's healthcare and the religious moralising that found its way into the Constitution in the 8th Amendment as a cause of significant harm to women.

Perhaps the most difficult period was from 2002 to 2010. In 2002, the Fianna Fáíl government held a referendum to remove suicide risk from the grounds for legal abortion, so that a pregnancy could only be terminated on grounds of physical health. The referendum failed, but the political will to address the unmet need for abortion failed with it. It was clear that the imperative for change would have to come from outside the Oireachtas.

The IFPA took the decision to work through strategic litigation, including to the European Court of Human Rights, and through human rights advocacy before every international expert body we could access. The IFPA supported three women, known as A, B and C, to take a case to the highest human rights body in Europe, the European Court of Human Rights, challenging the denial of abortion services to women in Ireland. This case opened the way for abortion to be considered a matter of women's health and human rights, rather than an issue of ideology.

We highlighted the harms to women's health before treaty monitoring bodies of the United Nations, including the Human Rights Committee, the Committee Against Torture, the Economic, Social and Cultural Rights Committee and the Committee on the Elimination of Discrimination Against Women. We raised the issue of criminalisation and prohibition of abortion during Ireland's first and second Universal Periodic Reviews. At a time when the State's response was to tolerate abortion so long as women left the State to access it, 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 which the 8th Amendment caused discrimination against vulnerable women and girls.

This balance of healthcare analysis with human rights discourses was critical to building momentum towards reform of the law.

# VOTE 25 May COS

Every day thousands of people saw the IFPA's call for a Yes vote as they passed our Dublin City Centre headquarters, Solomons House



Even before vote counting began, it was clear that the Irish people had voted overwhelmingly to repeal the 8th Amendment. IFPA staff were at the RDS count centre for the historic day

### Participation in civil society campaigns

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. The IFPA also took part in a press conference hosted by Amnesty International on the harms of travelling for abortion care and was part of the Women's Health in Ireland campaign.

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, former president of the Royal College of Obstetricians and Gynaecologists and Chair of the enquiry into the death of Savita Halappanavar.

Within Together for Yes, 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.

### **Our campaign activities**

The referendum campaign to repeal the 8th Amendment ran from March to May 2018.

The IFPA engaged in extensive media and social media work during the campaign. We created short social media videos featuring key IFPA staff and highlighting medical and counselling perspectives. These reached over 20,000 views.

Medical Director, Dr Caitríona Henchion, joined Dr Mary Short of the Irish College of General Practitioners and Minister for Health, Simon Harris TD, 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 RTE's flagship current affairs programme, Prime Time, also focusing on contraception.

Days before the vote, we organised a press conference with Professor Sir Sabaratnam Arulkumaran. The Professor is one of the world's most eminent and respected gynaecologists, and a longstanding friend and mentor to the IFPA.

Announcing the exit poll results, RTÉ's David McCullough cited the professor's intervention as a particularly important moment in the campaign.

On the morning of the referendum count, we reiterated the IFPA's commitment to providing abortion care in Ireland.



IFPA Medical Director Dr Caitríona Henchion brought her expertise to the campaign. Among other events, she spoke at press conferences organised by Fine Gael and Amnesty



IFPA counsellors were among the staff who lent their expertise to the campaign, briefing TDs and Senators on the impact of unintended pregnancy and the lack of access to abortion care in Ireland

# Healthcare Practitioners as human rights advocates

In parallel with health-focused 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. We knew that doctors would have a significant influence on both public opinion and the perspectives of legislators in situating abortion in a wider context of reproductive health.

The IFPA used its links with international organisations to invite leading health experts to speak in Ireland. One of the most influential was Professor Sabaratnam Arulkumaran. Former President of the Royal College of Obstetricians & Gynaecologists, UK, the British Medical Association and the International Federation of Obstetrics & Gynaecology, Professor Arulkumaran chaired the inquiry into the death of Savita Halappanavar in 2012. He 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. And he addressed the Joint Oireachtas Committee on the 8th Amendment in late 2017.

Motivated by his experience of chairing the enquiry into the death of Savita Halappanavar — when his insistence that the role of the law in her unnecessary death had to be acknowledged met with resistance — the professor's interventions were heartfelt, critical, challenging and inspiring.

At an event in 2016, the professor directly addressed leading Irish doctors present and challenged them to show leadership and campaign for the reform of laws that pose risk to women's 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 heath 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, which was based on an imposed moral position that no longer resonated with most Irish citizens, the healthcare framing pointed to a clear moral resolution: the introduction of comprehensive reproductive healthcare, including abortion.



Kate O'Connell TD, IFPA Medical Director Dr Caitríona Henchion, Professor Sabaratnam Arulkumaran and IFPA Director of Counselling Maura Leahy at the IFPA's pre-vote press conference in May 2018

Thanks are due to the friends and allies who have supported the IFPA — and women in Ireland — through the years: our colleagues in IPPF, in particular the Europe Regional Office; personnel of the World Health Organisation, who have supported our training and capacity building over the years; to the Centre for Reproductive Rights, the Guttmacher Institute, UNFPA, the European Parliamentary Forum and many more international organisations. We also wholeheartedly thank individual reproductive rights experts who have helped us to bring human rights analysis and health focused advocacy into discourse about reproductive rights in Ireland: health experts such as Professor Sabaratnam Arulkumaran, Professor Sharon Cameron and Gilda Sedgh and lawyers, such as Professor Rebecca Cook, Julie Kay, and Ruth Fletcher and Mairead Enright of Lawyers for Choice who have generously given of their time and expertise to support our work, especially in 2018.



Professor Rebecca Cook at the IFPA's 2016 seminar on abortion law reform

# **Communications**

In a year when abortion was the major topic of political, media and private conversation, communications was a critical aspect of our work. Clear information, expertise, and morally transparent framing and messaging were at the heart of our communications strategy.

Throughout 2018, IFPA staff were interviewed and quoted by numerous outlets for articles on the topics of abortion, postabortion 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 Medical Director 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.

### 8th Amendment advocacy

In May, Dr Henchion joined Dr Mary Short of the Irish College of General Practitioners and Minister for Health, Simon Harris TD, 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.

That same month, Dr Henchion participated in a special referendum edition of RTÉ's flagship current affairs programme, Prime Time, also focusing on contraception.

Days before the referendum vote, Professor Sabaratnam Arulkumaran, former president of the Royal College of Obstetricians and Gynaecologists and the chair of the inquiry into the death of Savita Halappanavar, travelled to Dublin to speak at a press conference organised by the IFPA. It attracted significant media interest and Professor Arulkumaran was interviewed by a number of prominent outlets, including a live appearance on Morning Ireland. His intervention was cited during RTÉ's exit poll announcement as a particularly significant moment in the successful campaign.

### **Post-referendum communications**

In July, the IFPA's Director of Advocacy and Communications, 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 Arulkumaran. She also contributed an article 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 the Autumn, the International Planned Parenthood Federation 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.

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.

# 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. We designed single-page, infographic-style patient information leaflets in multiple languages. One has clear instructions on how to take the medication at home; one has easy-to-understand information on what to expect during a medical abortion.

During the first half of the year, the advocacy and communications team had additional support from project assistants and reproductive health and rights activists, Leah Murphy and Áine Kavanagh.

### Online communications

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.

A key aspect of our public communications was our website, which 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.

"Today is a transformative day for women's health and reproductive rights. The people of Ireland have righted a historic wrong. The Yes vote ends decades of stigma, shame and coercion. It also sends the clear message to international policy makers, that when given the opportunity, the people will reject reproductive coercion in favour of reproductive freedom."

NIALL BEHAN, IFPA CEO, COMMENTING ON THE REFERENDUM RESULT, MAY 2018.



IFPA Advocacy and Communications team 2018: Siobhán Silke, Communications Officer; Alison Spillane, Policy Officer; Maeve Taylor, Director of Advocacy and Communications; Niall Behan CEO and Áine Kavanagh, Project Assistant.

# In Brief

#### 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.

Following the referendum on the 8th Amendment, the IFPA 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 included 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; at a Sexual Rights Initiative side-event at the Human Rights Council in Geneva; and at 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 in 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.

#### 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.

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

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In September IFPA Coordinator of Services, Liz Harper, began the development of an IFPA youth panel. She and Laura Lebreton, IFPA volunteer, successfully applied for funding from the IPPF to support their participation in a programme aimed at developing



Alison Spillane, IFPA Policy Officer



Laura Lebreton and Liz Harper at the Pro Familia workshop.

youth-centred approaches. They 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.

#### 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 Gleeson, June Flood and Rachael Groves to our staff team.

#### 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.

In addition, the IFPA 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 Incorporating WHO Safe Abortion Guidelines. A grant was received from the Irish Human Rights and Equality Commission for our project Putting the public sector equality and human rights duty into practice through a rights based and patient-centred approach to the provision of abortion care. In August 2018, the Open Society Foundations made an organisational support grant. A grant was received from the Wellspring Philanthropic Fund to support 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 organisational development, our Reframing and Sharing the Learning Projects, and work within the Countdown2030Europe Consortium. 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. Funding was received from the Development Cooperation Division of the Department of Foreign Affairs (Irish Aid) for the final year of a three-year project: Migrants and Citizens: Promoting the Sexual and Reproductive Health of Youth in Bolivia. The IFPA retained 2% of this grant, which is implemented by Bolivian NGO, CIES (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 clinic income reserves to cover the costs of involvement in campaigning. No funding from other sources was used for campaigning purposes.



IFPA staff at Pearse St Station, May 2018



IFPA Project Assistant, Áine Kavanagh.

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# **Financial Report**

STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 DECEMBER 2018

CONTINUING OPERATIONS		2018		2017
	UNRESTRICTED FUNDS	RESTRICTED FUNDS	TOTAL FUNDS	TOTAL FUNDS
	€	€	€	€
INCOME				
Charitable activities	683,852	1,463,302	2,147,154	2,100,369
Total Income	683,852	1,463,302	2,147,154	2,100,369
EXPENDITURE				
Charitable activities	661,475	1,463,495	2,124,970	2,063,196
Total expenditure	661,475	1,463,495	2,124,970	2,063,196
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	63.433	_	63,433	41,249

BALANCE SHEET AS AT 31 DECEMBER 2018				
FIXED ASSETS		2018		2017
	€	€	€	€
Tangible assets		55,478		44,974
CURRENT ASSETS				
Stocks	14,660		20,225	
Debtors	47,402		64,558	
Cash at bank and in hand	353,159		132,781	
	415,221		217,564	
Creditors: amounts falling due within one year	(407,266)		(221,289)	
Net current assets / (liabilities)		7,955		(3,725)
Total assets less current liabilities		63,433		41,249
Net assets		63,433		41,249
THE FUNDS OF THE CHARITY				
Unrestricted Reserves		63,433		41,249
Total Charity Funds		63,433		41,249

THERE ARE NO RECOGNISED GAINS OR LOSSES OTHER THAN THE NET INCOME / (EXPENDITURE) FOR THE ABOVE TWO FINANCIAL YEARS.

ON BEHALF OF THE BOARD: KELLY MACKEY AND NATALIE MCDONNELL

# **Strategic Framework**

The Irish Family Planning Association CLG is registered in Ireland as a Company Limited by Guarantee without share capital. It is governed by Memorandum and Articles of Association.

Members of the Board are volunteers with no financial interest in the IFPA.

BOARD MEMBERS IN 2018	MEETING ATTENDANC
Ruth Fletcher	3/
Fiona Tyrrell	7/
Jennifer Gargan	5/
Natalie Mc Donnell (resigned 10/9/18)	3/
Natasha O'Brien	6 /
Rosemary Wokocha	6 /
Wendy Lyon	5/
Patricia Prendiville	4 /
Síona Cahill	4 /
Marianne Byrne	7/

#### AGM

The 2018 annual general meeting was held in September. Natalie McDonnell stepped down after two years as Chair. Fiona Tyrrell was elected Chair for a two-year term.

### 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: Audit, Finance and Risk.

This 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. The subcommittee met 4 times during 2018; the subcommittee reviewed the quarterly management accounts, the annual budget and the draft financial statements for approval to the Board.

The Governance subcommittee met 4 times during 2018. 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. The subcommittee also oversaw the revision of the organisation's Safeguarding Policy and Safeguarding Statement, as well as the Recruitment and Staff Handbooks.

#### 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 the IFPA complied with 46 of the 48 standards: In 2018, the IFPA Board took action to ensure that the IFPA complied with all IPPF standards and the IFPA will be fully IPPF-accredited in 2019.

In 2018, the IFPA continued the process of moving towards the Standard 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 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 MANAGEMENT TEAM:

CHIEF EXECUTIVE: Niall Behan

MEDICAL DIRECTOR: Dr Caitríona Henchion

FINANCIAL CONTROLLER: Ben Howe

DIRECTOR OF COUNSELLING: Maura Leahy

**DIRECTOR OF ADVOCACY & COMMUNICATIONS:** Maeve Taylor

CLINIC MANAGERS: Annette Smith & Deirdre Jones

co-ordinator of services: Liz Harper

# **Get Involved**

Become a member: www.ifpa.ie
Follow us on Twitter: @IrishFPA

Like us on Facebook: irishfamilyplanningassociation

Watch us on YouTube: irishfamilyplanning

IFPA Head Office, Solomons House, 42A Pearse Street, Dublin 2 TEL 01 - 607 4456 EMAIL post@ifpa.ie www.ifpa.ie

IFPA Dublin City Centre Clinic, 5/7 Cathal Brugha Street, Dublin 1 TEL 01 - 872 7088

IFPA Tallaght Clinic, Level 3, The Square, Tallaght, Dublin 24 TEL 01 - 459 7685

IFPA National Pregnancy Helpline 1850 49 50 51



