

IFPA ANNUAL REPORT 2013

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access choice & advocacy



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; where there is full access to high quality information, education and health services regarding sex, sexuality, conception, contraception, safe abortion and sexually transmitted infections.



About the IFPA

The Irish Family Planning Association (IFPA) is Ireland's leading sexual health provider. The organisation promotes the right of all people to sexual and reproductive health information and to dedicated, confidential and affordable health care services.

Motivated by the suffering caused by the State's blanket ban on contraception, the IFPA was established by seven volunteers in 1969. Since then the IFPA has been to the fore in setting the agenda for sexual and reproductive health and rights both nationally and internationally.

Today the IFPA offers a comprehensive range of services which promote sexual health and support reproductive choice on a not-for-profit basis.

The IFPA provides medical services from its clinics in Dublin city centre and Tallaght and pregnancy counselling services at twelve centres nationwide.

The IFPA delivers medical training to doctors and nurses and also provides education and training on reproductive health issues to service providers, young people, parents and community groups.

With a strong track record in providing high quality medical, pregnancy counselling and education services, the IFPA is a respected authority on sexuality and health and is regularly called upon to give expert opinion and advice.

The IFPA works with partner organisations and civil society to raise awareness of the importance of sexual and reproductive health at home and all over the world.

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.
- ➔ 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.

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Foreword

Speaking at the launch of the United Nations Population Fund (UNFPA) State of World Population Report 2013, former Tánaiste and Minister for Foreign Affairs and Trade Eamon Gilmore TD described the Irish Family Planning Association (IFPA) as “a heroic and hugely influential organisation since its foundation in 1969”, playing “a vital role in empowering Irish women and families and in the transformation of our society.”

This report reflects the commitment of the IFPA in continuing its role as Ireland’s leading sexual and reproductive health provider and advocate.

The following chapters offer a snapshot of the diverse services delivered to clients through the IFPA’s medical, pregnancy counselling, and education and training services. They also highlight the IFPA’s advocacy work in promoting sexual and reproductive health and rights at a national and international level.

In 2013, the IFPA Board continued to implement and review the Association’s Strategic Plan 2009-2014 and concluded that many of the targets contained in the Strategic Plan were met or surpassed.

During the year, the Board responded to the illegal recordings of IFPA counsellors at work by members of anti-choice groups with an independent audit of our counselling service. The audit found that the IFPA counselling service operates under protocols which take into account all legislative requirements. The Board also cooperated with the subsequent Health Service Executive audit of all pregnancy counselling services in Ireland and implemented four recommendations which were of an administrative nature.

These illegal recordings aimed to discredit the work of the IFPA in defending women’s reproductive health and rights. The Director of Public Prosecutions’ finding that no counselling service was involved in “any wrongdoing whatsoever” vindicates our services and is to be welcomed. However allegations and covert actions of this type are damaging to women’s health, as they affect women’s confidence in services which provide non-directive and unbiased pregnancy counselling.

In 2013, the IFPA continued its efforts to push for implementation of the European Court of Human Rights ruling in the case of A, B and C v Ireland. The IFPA raised its concerns regarding the restrictive nature of the Government’s proposed legislation and its compliance with human rights. While intended to provide for lawful access to abortion when a woman’s life is at risk, the Protection of Life During Pregnancy Act has made a restrictive legal regime of abortion even more restrictive.

Much remains to be done to ensure that the reproductive rights of women in Ireland are vindicated, particularly those women on whom the burden of the unavailability of abortion services falls most heavily. This includes women with travel restrictions who cannot freely exercise their right to travel to another state for an abortion. As highlighted in the chapter on travelling for an abortion, for decades the State has relied on the rights to travel and to obtain information as a means of avoiding the public health crisis that would otherwise ensue. However policy makers can no longer claim that travel is an option for all women.

In 2013, further cuts to state funding meant that the IFPA had to do more with less. IFPA clinics also saw a general reduction in the number of private patients, reflecting the continued economic climate where people are struggling to pay for sexual and reproductive health care. As highlighted in the Medical Services chapter of this report, while the IFPA worked hard to ensure its services remained accessible to clients in poverty or on low income, this situation is unsustainable. The Government must ensure that access to sexual and reproductive health services is central to the forthcoming National Sexual Health Strategy.

The effectiveness of the IFPA in promoting sexual and reproductive health and rights is directly proportional to the engagement and work of its staff, volunteers, funders, members and supporters. In particular, I wish to thank the team of dedicated staff. The contents of this report are a testament to their hard work, often in difficult and challenging circumstances.

Lastly, I would like to thank my fellow Board members for their hard work in 2013, I look forward to working with you in 2014.

Leslie Sherlock
CHAIRPERSON

Introduction

2013 was a successful year for the IFPA’s leadership in promoting sexual and reproductive health and rights.

The IFPA provided over 16,400 sexual and reproductive health services at our two medical clinics in Dublin. The economic recession continued to impact on health services and the IFPA was no exception. In 2013, the IFPA’s funding from the Health Service Executive for medical card clients was decreased by 5%. This greatly reduced our ability to respond to the sexual and reproductive health needs of clients on low income or in poverty. The forthcoming National Sexual Health Strategy is the ideal opportunity for the Government to show its commitment for sexual and reproductive services to be made available to all people in Ireland, irrespective of income.

In 2013, the IFPA provided information and support to almost 3,700 women, girls and couples experiencing an unplanned or crisis pregnancy. Our counsellors responded to the specific needs of women and girls, in particular those who most heavily experience the burdens imposed by being forced to travel abroad for abortion services.

During the year, the IFPA expanded the network of organisations to which we deliver education and training through a number of programmes, including our sexual health training and our Speakeasy programme for parents. We reached a total of 1,198 people through our education and training services, including young people, parents, adults with an intellectual disability, social care workers, community workers, nurses and counsellors.

2013 also saw the IFPA take an active role in ‘Keep Me Safe: Empowering Young People with Learning Disabilities’, a two year project supported by the European Commission which aims to develop best practice for the prevention of abuse against young people with intellectual disabilities.

The IFPA contributed its expertise on sexual health by delivering a lecture and workshop on sexual health for people with intellectual disabilities during Ireland’s second ever Sexual Health Awareness Week at the Royal College of Physicians.

In 2013, the IFPA continued to act as secretariat for the All Party Oireachtas Group on Sexual and Reproductive Health and Rights and Development. Members raised significant awareness of sexual and reproductive health and rights and development.

Another highlight in 2013 was the launch of the IFPA video ‘Women Have Abortions Every Day: It’s Just One Choice’ in September. Developed with the support of the International Planned Parenthood Federation, the video provides a new and creative tool to facilitate an honest dialogue on abortion. It also addresses the issue of stigma against women and girls who seek abortion services. The video was launched on the Global Day of Action for Access to Safe and Legal Abortion and has received over 72,000 views on the IFPA YouTube channel to date.

In 2013, the IFPA continued its efforts in calling for implementation of the European Court of Human Rights (ECtHR) ruling in the case of A, B and C v Ireland. This process began in 2009 when the IFPA supported three women, known as A, B and C, in challenging Ireland’s restrictive abortion laws at the ECtHR.

The IFPA was invited to participate in the oral hearings of the Oireachtas Committee on Health and Children, where we expressed our concerns regarding the restrictive nature of the proposed legislation and its potential impact on women and girls accessing life-saving abortion services. In July, the Protection of Life During Pregnancy Act was signed into law. Serious concerns have already been expressed about the restrictiveness of the Act, including by the United Nations Human Rights Committee. The IFPA will continue to highlight the impact of Ireland’s restrictive abortion laws, particularly on women and girls who already experience inequality and disadvantage.

Finally, as Chief Executive Officer of the IFPA, I would like to acknowledge the support and hard work of current and former staff, Board members, funders, supporters, clients and volunteers during 2013. I look forward to working with you all in 2014.

Niall Behan
CHIEF EXECUTIVE OFFICER

Medical Services

The IFPA is Ireland's leading sexual health provider, providing high quality sexual and reproductive health services to women, men and young people on a not-for-profit basis.

In 2013, our doctors and nurses provided over 16,400 sexual and reproductive health consultations at our medical clinics in Dublin city centre and Tallaght.

Services provided at our medical clinics include contraceptive advice, emergency contraception, sexually transmitted infection (STI) screening and treatment, free cervical screening, fertility advice, breast examination, menopause check-ups, pregnancy testing, free post-abortion medical check-ups and vasectomy. Free specialised care for women and girls who have experienced female genital mutilation (FGM) is also now available in our Dublin city centre clinic.

In 2013, the IFPA continued to play a key role in the delivery of CervicalCheck, the National Cervical Screening Programme. 4,190 women received cervical screening at IFPA clinics, while January marked our fifth year delivering the Pearl of Wisdom Campaign. This campaign highlights European Cervical Cancer Prevention Week and is delivered in partnership with CervicalCheck. See Key Events for more.

Through CervicalCheck, all women aged 25 to 60 can avail of free cervical screening. However uptake of the IFPA's cervical screening service indicates that women aged over 45 are less likely to attend for screening. As women reach the menopause, there is a perception that they no longer need sexual health services. However women over 45 are still at risk of developing cervical cancer and should continue to avail of free screening until the age of 60.

In 2013, some women over 50 who initially attended IFPA clinics for free cervical screening returned for other health services, including sexually transmitted infection (STI) screening and menopause check-ups. Sexual health and well being continue to be an important part of people's lives as they age. Some people find themselves starting new relationships and may not be aware of safer sex practices due to little formal sex education. Some women who reach the menopause may not be aware of health risks and the importance of a medical check-up.

In 2013, 2,051 screenings for STIs were carried out in IFPA clinics. In August, Lloyds Online Doctor launched an STI home testing service in partnership with the IFPA. The easy to use and confidential service provides a further option for people concerned they may have contracted an STI or for anyone unable


to access screening in clinics. The standard kit tests for genital chlamydia and gonorrhoea, which account for the majority of STIs in Ireland, while an enhanced kit also tests for HIV.

In 2013, the recession continued to have a direct impact on people's ability to access sexual and reproductive health services. Since 2011, IFPA clinics have seen a fall of more than 20% in private client attendance, with people simply unable to pay for sexual and reproductive health care.

As in previous years, continued cuts to funding has resulted in the IFPA being unable to meet increasing demand for services from medical card holders. In 2013, the IFPA's funding from the Health Service Executive for medical card clients was reduced by 5%. This greatly reduced the IFPA's ability to respond to the sexual and reproductive health needs of clients on low income.

Many medical card clients could not be accommodated and were referred back to their GPs, despite the fact that many of these clients were initially referred to the IFPA because their GP was unable to provide specialist sexual health or family planning services. Other medical card clients were placed on a waiting list and experienced significant delays in accessing services.

While the IFPA worked hard to ensure its services remained accessible to clients on low income, this situation is unsustainable. Sexual and reproductive health care, in particular STI screening and contraception, is a low cost and extremely high impact public health measure that should be prioritised in the forthcoming National Sexual Health Strategy.



“As people age, there is a perception that sexual health is less relevant. However sexual health and well being continue to be an important part of people's lives as they grow older. It is important that health professionals support people to take care of their sexual health as they age.”

DR CAITRIONA HENCHION, IFPA MEDICAL DIRECTOR

MEDICAL TRAINING

The IFPA has provided training to medical professionals since 1977.

In 2013, 67 doctors and nurses completed the IFPA's Certificate in Contraception Theory. This programme gives doctors, nurses and other medical professionals the knowledge and skills necessary to provide a family planning service of high medical standard. It comprises two days of theoretical and practical training and is approved by the Reproductive and Sexual Health Committee of the Irish College of General Practitioners and An Bord Altranais.

Counselling Services

The IFPA provides safe, confidential and non-directive pregnancy counselling services to women, girls and couples who are experiencing an unplanned or crisis pregnancy.

The IFPA is the only nationwide counselling service that provides accurate and clear information about all three options – abortion, parenting and adoption. IFPA counsellors are trained and accredited, and support a woman's choice in all circumstances. The service is free and funded by the HSE Crisis Pregnancy Programme.

In 2013, counselling was provided to almost 3,700 women, girls and couples at the IFPA's 11 pregnancy counselling locations across Ireland and through the IFPA National Pregnancy Helpline.

Face-to-face counselling was delivered to 1,372 clients, almost half (48%) of whom were new clients, while 208 clients received follow-up telephone support. 2,119 calls were made to our National Pregnancy Helpline for information, advice and support.

In recent years, the IFPA has seen high demand for its post-abortion care services. In 2013, women and couples seeking post-abortion counselling accounted for almost half (45%) of all counselling clients. Women attend post-abortion counselling for many reasons, increasingly to express their frustration at being forced to travel to another state to access abortion services. This continued demand also shows a high awareness of and confidence in the IFPA counselling service.

In 2013, migrant women represented 11% of our counselling clients. Many of these women were unable to travel freely to another state to access abortion services. In addition to travel restrictions, many of these women experienced other difficulties in exercising their right to travel for an abortion, including lack of economic resources, language barriers and lack of familiarity with counselling services. These obstacles can cause significant delays in accessing an abortion and seriously impact on women's physical and mental health. IFPA counsellors assist women as much as possible in overcoming these barriers but are restricted in the support they can give by the current legal and constitutional framework on abortion.

Women attending the IFPA's counselling service due to a diagnosis of foetal anomaly accounted for almost 3% of our clients in 2013. Most of these clients were referred by maternity hospitals, indicating that the IFPA service is trusted by medical professionals nationwide.

As in previous years, the majority of clients (40%) in 2013 had their first counselling session before the thirteenth week of gestation. This demonstrates an improved awareness of the IFPA's services, allowing women to access information at an early stage of their pregnancy. Just under 12% of clients had their first counselling session in the second or third trimester of pregnancy.

The majority (42.6%) of clients were aged between 25 and 34. Women aged between 35 and 44 accounted for 29% of clients, while women aged 44 and above accounted for almost 4%. This represents a combined increase of 7% of clients aged 35 and over compared to 2012.

KEY STATISTICS 2013:

- ➔ 1,372 women, girls and couples received counselling and support.
- ➔ 208 women, girls and couples received follow-up telephone counselling and support.
- ➔ 2,119 callers to the IFPA National Pregnancy Helpline received information and support.
- ➔ 45% of clients attended for post-abortion counselling.
- ➔ 11% of clients were migrant women. Many of these women were unable to travel freely to another state to access abortion services.
- ➔ Just under 3% of clients received a diagnosis of foetal anomaly.
- ➔ 29% of clients attended with a partner/friend/family member or health care professional.
- ➔ 40% of clients had their first counselling session before the thirteenth week of gestation.

GESTATION	2013	percentage
Less than 8 weeks	264	19.2%
9 to 12 weeks	293	21.3%
13 to 16 weeks	113	8.2%
17 to 20 weeks	35	2.5%
Over 20 weeks	19	1.4%
Unknown	121	9%
No Gestation	527	38.4%

AGE	2013	percentage
Under 17	39	2.8%
17-24	300	21.9%
25-34	584	42.6%
35-44	399	29%
44+	50	3.7%

“In 2013, women aged 35 to 44 represented just under a third of the IFPA's counselling clients, while the number of our clients aged over 44 more than doubled. Many of these women were in a relationship or marriage. This highlights how an unplanned pregnancy, or a pregnancy which becomes a crisis, can happen to a woman at any stage of her life. Our counselling service allows women a space to explore their feelings and options in a safe and non-judgmental environment. This allows women to make a conscientious and informed decision that is right for them.”

EVELYN GERAGHTY, IFPA COUNSELLING DIRECTOR

IFPA COUNSELLING LOCATIONS NATIONWIDE

- | | |
|-----------------------|--------------|
| 01 LETTERKENNY | 07 GOREY |
| 02 SLIGO | 08 WATERFORD |
| 03 TUAM | 09 CORK |
| 04 DUNDALK | 10 LIMERICK |
| 05 DUBLIN CITY CENTRE | 11 GALWAY |
| 06 TALLAGHT | |



What Right to Travel?

For decades the Irish State has relied on the rights to travel and to obtain information as a means of avoiding the public health crisis of illegal and unsafe abortion that would otherwise ensue.

However policy makers who have depended on the 'safety valve' of proximity to the UK to take care of Ireland's abortion problem can no longer claim that travel is an option for all women.

Women who cannot travel for an abortion are an increasing cohort of the IFPA's clients. While the Constitution guarantees the right to travel for abortion, many women – women in poverty or on low income, young women, women in state care, women experiencing domestic violence, women with travel restrictions – cannot exercise this right due to an array of legal, social and economic barriers.

There has been much media attention on the case of Ms Y, who was a client of the IFPA. It is not the purpose of this chapter to repeat what has already been reported. However, Ms Y's situation highlighted the often insurmountable obstacles that women asylum seekers face when they seek abortion services.

Through its counselling services the IFPA knows that if a woman with travel restrictions presents at an early stage of gestation, it is possible for her to gather all the documents, access financial supports, and make her way to an abortion provider in another state, usually in the Netherlands.

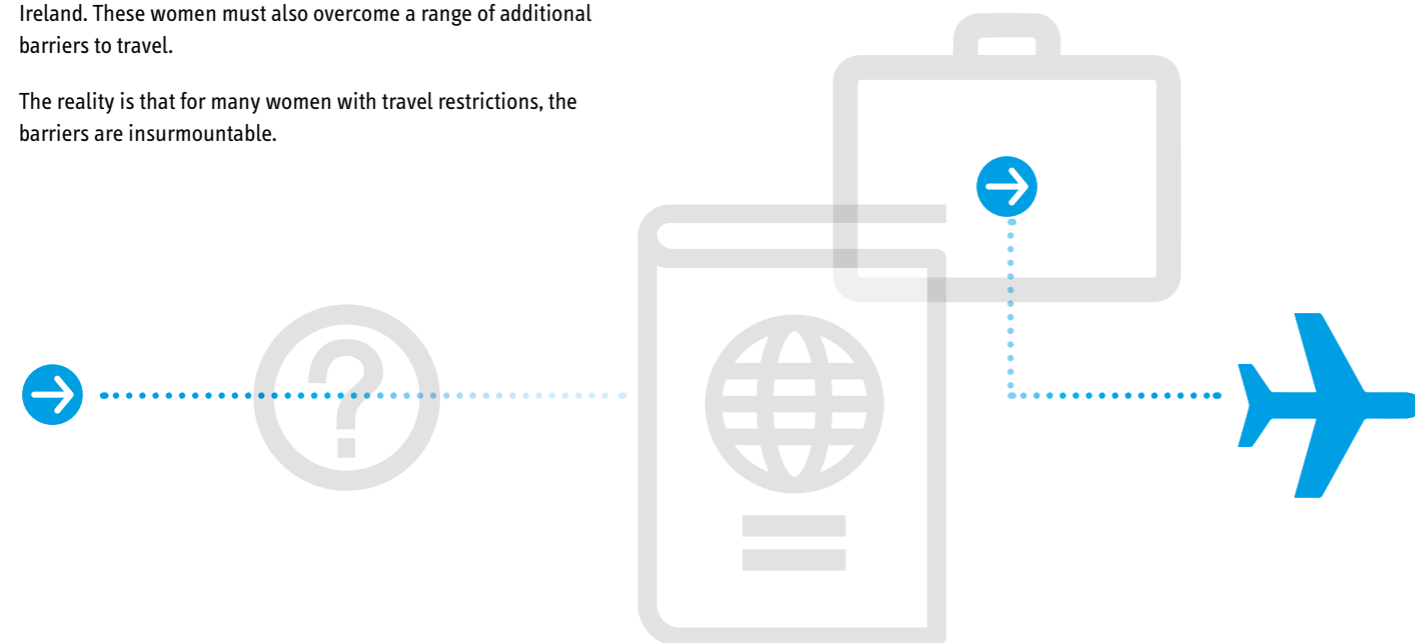
However, numerous obstacles stand in her way. Aspects of the process that can be relatively straightforward for most women can be problematic for women asylum seekers who are unfamiliar with Ireland. These women must also overcome a range of additional barriers to travel.

The reality is that for many women with travel restrictions, the barriers are insurmountable.

From September 2013 to September 2014, 26 women with travel restrictions attended the IFPA's counselling service and indicated that they wanted an abortion. Many of these women were asylum seekers living in direct provision. Others were women with restricted travel visas or permits.

Of these 26 women, at least five women continued with the pregnancy and parented against their wishes. At least four women were considering or had taken medication to self-induce an abortion.

17 women did not return to the IFPA. Apart from providing as much information and counselling as legally possible, the IFPA could do no more to assist them in accessing abortion services. It is not known if these women were able to obtain the documentation to travel, if they managed to travel without documentation, if they obtained medication to self-induce an abortion, if they were forced to continue with the pregnancy and parent against their wishes, or, in the case of women asylum seekers, if they were moved to a reception centre in another location. Further research is needed to better understand this occurrence.



“The resilience of women is amazing: in spite of all the obstacles, some women with travel restrictions manage to get to the Netherlands and access abortion services there. But the hardest part of a counsellor’s job is to explain to a woman who already has so much stacked up against her just how complex the process is. We cannot disguise the difficulties. We work with each client to give her all the information she needs and to support her through the process. But we do so knowing that ultimately she may have no option but to continue with the pregnancy and parent against her wishes.”

EVELYN GERAGHTY, IFPA COUNSELLING DIRECTOR



The barriers that women with travel restrictions face in order to access an abortion are numerous. They include legal, bureaucratic, financial, cultural and language barriers.

Accessing information

A woman must first make her way to a pregnancy counselling service to obtain information on how to access an abortion in another state. This is not always an easy task.

In the case of women asylum seekers, staff in reception centres may be unaware of counselling services available or may provide selective information. If a woman does access information, she may have to travel some distance to attend a counselling service in a town or city that she is unfamiliar with.

Travel documentation process

Many women need two travel visas – a re-entry visa to leave and return to Ireland and another visa to enter the country where the abortion provider is located. If a woman is undocumented and without a passport, she must apply for a temporary travel document before applying for a re-entry visa.

A re-entry visa must be applied for in person at the Irish Naturalisation and Immigration Service office in Dublin's Burgh Quay; an appointment cannot be made in advance. A woman must queue for several hours and there is a limited amount of appointments available each day.

A temporary travel document must be applied for in person at the Department of Justice and Equality. The twelve page application form must be stamped by a Garda. The form requires personal identifying details, immigration history, a letter confirming attendance at a counselling service, and four biometric passport photographs.

The issuing of a re-entry visa normally takes five working days, while a temporary travel document can take eight weeks to be issued. However, an application for a temporary travel document in order to travel for an abortion may be prioritised and issued within three weeks.

If the documents are issued, the second, and more complex, stage begins of applying for an entry visa for the country where the abortion clinic is located. In the IFPA's experience, the UK is less likely to issue entry visas to women with temporary travel documents. Therefore most women with travel restrictions try to travel to the Netherlands.

To apply for an entry visa, a woman must submit at least twelve pieces of documentation in person at the Dutch embassy. This includes an application form, a copy of a registration card of the Garda National Immigration Bureau, a current bank statement showing adequate funds, and a copy of medical travel insurance. Confirmation of a clinic appointment, accommodation and flight tickets are also required – all which can only be booked with a credit card. An entry visa can take in excess of four weeks to be issued.

All of the relevant government and embassy offices are based in Dublin, mostly outside the city centre. The Refugee and Integration Agency, which oversees the direct provision system in Ireland, has a policy of dispersing asylum seekers to reception centres at some distance from Dublin.

In total therefore, it can take more than eight weeks to organise travel documentation. Such delay has a significant impact on a woman's physical and mental health, particularly where a woman has an underlying health condition. Later abortions are also more expensive and invasive. In some cases, the legal time limits for the procedure may have passed.

We do not know if all women who apply for the documentation are successful, or what proportion, if any, are turned down.

Financial barriers

Adult asylum seekers receive a weekly allowance of €19.10 from the State. Yet in order to access abortion lawfully, a woman must pay many multiples of this amount for travel document application fees, transport to and from embassy and government offices, flights, abortion provider fees, accommodation and indirect costs, such as childcare.

A re-entry visa and a temporary travel document cost €60 and €80 respectively and must be paid with a bank draft or postal order. An entry visa to the Netherlands costs €60, a UK visa costs €100.

An abortion procedure can cost €600 to €2000, depending on the clinic and the stage of gestation.

No financial assistance is available from the State. Some support for flights and accommodation may be available from, for example, the Abortion Support Network, a UK-based voluntary group about which the IFPA gives information to clients who have no financial resources.

Limits facing service providers

IFPA counsellors provide all the emotional and practical information and support they can to women who are unable to travel freely to access abortion services. Counselling often takes place over numerous sessions and the counsellor's role involves working closely with other non-governmental organisations and health service providers.

However, despite their deep commitment to their clients, counsellors are restricted by the Regulation of Information (Services outside the State for the Termination of Pregnancies) Act 1995 in what support they can give.

Under the Act, counsellors can only provide women with information on abortion in the context of a face to face counselling session. Information cannot be given online, by email, or over the phone.

In addition, information on abortion must be accompanied by information on parenting and adoption, even where a woman indicates that her decision is to have an abortion.

The Act limits the support that counsellors can give to a woman during the travel documentation process. Counsellors cannot accompany a woman to the relevant government or embassy offices, or to a Garda station, bank or post office. Counsellors cannot make an appointment with an abortion provider on a woman's behalf. They cannot provide financial assistance or apply for financial assistance on behalf of a woman, for example, the Abortion Support Network.

IFPA counsellors provide all the counselling, support, and information legally possible and assist women as much as they can in obtaining the required documentation. We operate within the law, but do nothing that steps beyond compliance or impedes women's access to health services.

However the IFPA cannot mitigate the lack of lawful abortion services or alter the fact that the law stands in the way of a woman exercising her considered, conscientious choice about her pregnancy.

The burden of arranging travel falls entirely on the pregnant woman.

She must apply for travel documentation in person at embassy and government offices. She must fill out the forms. She must collect the necessary documentation. She must pay the application fees. She must book and pay for flights, accommodation and clinic fees. She must seek financial assistance. She may have to arrange childcare. She must find her way to the abortion clinic in a city and country unfamiliar to her. She must arrange travel to and from the airport.

The IFPA has repeatedly raised concerns about the impact of Ireland's abortion laws on women who already experience disadvantage. Indeed the IFPA first raised the specific needs of women asylum seekers with an unplanned or crisis pregnancy in 2002. But little has changed since then.

In 2013 the IFPA made communications about the appalling treatment of women with difficulties travelling for an abortion to the United Nations Human Rights Committee and Committee Against Torture. The IFPA has also consistently highlighted serious concerns about Ireland's abortion laws to the Government and in the media.

We will continue to highlight the impact of the criminalisation of abortion until the reproductive health and rights of all women and girls in Ireland are vindicated.

Education & Training

The IFPA offers a range of education and training programmes on reproductive and sexual health aimed at empowering individuals to make informed choices in their sexual and reproductive lives.

In 2013, we reached a total of 1,198 people through our education and training services, including young people, parents, adults with an intellectual disability, social care workers, community workers, nurses and counsellors.

During 2012 and 2013, the IFPA's Speakeasy programme was delivered to ten community groups across Ireland, seeing a total of 88 graduates. Speakeasy is an eight week programme designed to provide parents with the information, skills and confidence to talk to their children about relationships, sexuality and keeping safe. It is the only course of its kind in Ireland and is supported by the HSE Crisis Pregnancy Programme (CPP). Self-rated evaluations completed before and after the programme by parents showed significant increases in levels of self-confidence and sexual health knowledge.

In 2013, the IFPA's sexual health training was delivered to 120 people, including adults with an intellectual disability, social care workers, HSE nurses, community workers and counsellors. This one day training covers the basics of sexual and reproductive health, including information on sexually transmitted infections (STIs), contraception, legislation and consent. Participants testified a higher understanding of sexual health and an enjoyment of the interactive and practical format of the training. The IFPA also delivered sexual health training to other organisations including Spunout and Accord.

Following on from 2012, the IFPA was again invited by the Royal College of Physicians in Ireland to participate in its second Sexual Health Awareness Week in 2013. The IFPA delivered a two hour lecture and workshop on sexual health for people with intellectual disabilities to a group of doctors, psychiatrists and community workers.

2013 saw the IFPA take an active role in 'Keep Me Safe: Empowering Young People with Learning Disabilities'. Supported by the European Commission, this two year programme from the International Planned Parenthood Federation aims to develop best practice for the prevention of abuse against young people with intellectual disabilities. A key objective of the project is to produce a best practice sexual health toolkit for professionals who work with young people with intellectual disabilities.

In November, the IFPA took part in a four day technical visit to Romania as part of the Keep Me Safe programme. The IFPA carried out a training needs assessment and met with SECS – the Romanian Family Planning Association – and other key stakeholders to prepare for a five day Training of Trainers workshop in 2014. The IFPA's work with Keep Me Safe during 2013 also involved assisting the UK Family Planning Association in compiling a best practice manual for professionals who work with people with intellectual disabilities.

In response to frequent questions asked about emergency contraception by our training participants, in 2013 the IFPA developed a video which presents factual and non-judgmental information on emergency contraception. The video was launched at the Women Deliver Conference in Kuala Lumpur, an annual global gathering on women's and girl's health and empowerment.

In 2013, the IFPA's comprehensive range of educational resources continued to be in demand. Among the most popular was the IFPA's Sexuality Education Teaching Kit for teachers, trainers and health professionals. This kit provides information on safer sex, contraception and STIs and includes samples of ten contraceptive methods and a condom demonstrator. The kit also contains information on Irish law, and tips and activities for facilitating sexuality education classes.

“We wanted a course that suited our parents who have been through periods of drug taking and are all early school leavers. Speakeasy was delivered using simple language that didn't faze the mothers. The facilitator also answered questions about contraception in great detail.”

NADINE, AESOG COMMUNITY INITIATIVE, SPEAKEASY PARTICIPANT 2013



IFPA Emergency Contraception Information Clip



IFPA Sexuality Education Teaching Kit



Participants of the IFPA's one day sexual health training



Graduates of the IFPA's Speakeasy programme in Blackrock Education Centre with IFPA Training and Development Manager Anita Ghafoor-Butt and CPP Funding Officer Janice Donlon

Youth Initiatives

The IFPA promotes the right of all young people to sexuality education, information and dedicated, confidential and affordable health care services. Through our medical, educational and advocacy services, we provide straightforward information, advice and support to young people about sexual health and relationships.

In 2013, the IFPA maintained its strong links with the Union of Students of Ireland (USI) by participating in the annual Sexual Health Roadshow as part of USI's Sexual Health Awareness and Guidance (SHAG) Week. The IFPA held information stalls in five college campuses, providing information and advice on sexual health to more than 1,500 students.

The IFPA was also invited by five independent colleges to deliver sexual health workshops and discussions as part of Sexual Health Week and reached over 1,500 students in doing so.

The IFPA delivered sexual health training to the Youth Action Panel of Spunout. Sexual health and life skills training was also delivered to students at Trinity Comprehensive School in Dublin.

Following on from 2012, the IFPA was again invited by the Royal College of Physicians in Ireland to participate in its second annual Sexual Health Awareness Week (SHAW) in 2013. The IFPA delivered a two hour lecture and workshop on sexual health for people with intellectual disabilities to a group of doctors, psychiatrists and community workers. The IFPA was also invited to act as adjudicator, alongside the HSE Crisis Pregnancy Programme (CPP), for one of the two youth competitions during SHAW. Transition Year students were invited to create an alternative expression piece on the subject 'What helps us make good decisions in our romantic lives?' The winner of the competition was student Kevin Daly from Ard Scoil Ris, Limerick.

Throughout 2013, the IFPA continued its partnership with the youth clinic at St. James' GUIDE clinic. Through this partnership, the GUIDE clinic refers young people to the IFPA for youth-friendly sexual and reproductive health services.

In 2013, the IFPA produced the video 'Women Have Abortions Every Day: It's Just One Choice' with the support of the International Planned Parenthood Federation. This video aims to dispel myths that stigmatise women who seek abortion services. As part of its development, the IFPA facilitated focus groups with young women to discuss how abortion stigma affects them and their peers. See Communications & Publications for more.

HIGHLIGHTS:

- Participation in the Union of Students of Ireland's Sexual Health Roadshow, providing information and advice on sexual health to more than 1,500 students in five colleges.
- Delivery of life skills and sexual health training to students of Trinity Comprehensive School in Dublin and to the Youth Action Panel of Spunout.
- Facilitation of youth focus groups to support the development of the IFPA video 'Women Have Abortions Every Day: It's Just One Choice'.

“Access to sexual and reproductive health information, education and services is essential for young people to move safely into adulthood and reach their full potential. Unbiased and evidence-based life skills workshops in young people's own settings can help them feel enabled, safe and empowered. By engaging and essentially owning the process of learning, young people can make healthy informed choices about their own sexual health and wellbeing.”

ANITA GHAFOOR-BUTT, IFPA TRAINING & DEVELOPMENT MANAGER



IFPA Trainer Breanna Coyle in Waterford IT during the Union of Students of Ireland's Sexual Health Roadshow 2013

Communications & Publications

In 2013, the IFPA used new and traditional media to bring messages promoting sexual and reproductive health and rights to a wide variety of audiences.

In January, the IFPA teamed up with CervicalCheck, the National Cervical Cancer Screening Programme, for a fifth consecutive year to deliver the Pearl of Wisdom campaign during European Cervical Cancer Prevention Week. Women aged 25 to 60 were encouraged to avail of free cervical screening to prevent cervical cancer. 22,000 Pearls of Wisdom – the international emblem of cervical cancer prevention – were distributed to women across Ireland through local health promotion networks. Broadcaster Maura Derrane lent her support to the campaign for a fourth year, generating significant media coverage. See Key Events for more.

In September, the IFPA produced the video ‘Women Have Abortions Every Day: It’s Just One Choice’. Developed with the support of the International Planned Parenthood Federation, the video aims to facilitate an open and honest dialogue on abortion and to eliminate stigma against women who seek abortion services. As part of its development, the IFPA facilitated focus groups with young women to discuss how abortion stigma affects them and their peers. The video was launched on the Global Day of Action for Access to Safe and Legal Abortion and has received over 72,000 views on the IFPA YouTube channel to date.

Throughout 2013, the IFPA issued press statements on a wide range of issues related to sexual and reproductive health and rights. This included implementation of the European Court of Human Rights (ECtHR) ruling in the case of A, B and C v Ireland, the Protection of Life During Pregnancy Bill, statistics on the number of women in Ireland accessing UK abortion services, and sexual and reproductive health and development issues. The IFPA’s expert view was also sought on news stories related to contraception, abortion, sexually transmitted infections (STIs), cervical cancer screening, and unplanned or crisis pregnancy.

Key broadcast activities in 2013 included interviews regarding the Protection of Life During Pregnancy Bill on RTÉ Radio One’s Drivetime and FM104, and interviews on cervical cancer screening and adolescent pregnancy on RTÉ 2FM’s Colm Hayes Show. The IFPA discussed rising STI rates and the need for improved screening services nationally on RTÉ Television’s Morning Edition, RTÉ Radio One’s News At One and TV3’s MIDDAY. The IFPA was also interviewed regarding Ireland’s restrictive abortion laws for a documentary produced by TV5 in Germany.

Key publications included opinion pieces by the IFPA on implementation of the ECtHR ruling in the case of A, B and C v Ireland and the Protection of Life During Pregnancy Bill published in the Irish Times and Irishhealth.com.

As a member of Dóchas, the Irish Association of Non-Governmental Development Organisations, the IFPA is a signatory of the Dóchas Code of Conduct on Images and Messages. As such, the IFPA is committed to promoting solidarity, justice and dignity through all its communications, images and messages.

OTHER PUBLICATIONS:

- ➔ Production of leaflet on the IFPA’s vasectomy service and updating of IFPA Contraception Factsheets.
- ➔ Launch of IFPA Emergency Contraception Information Clip, presenting clear, factual and non-judgmental information on emergency contraception. See Education & Training for more.

“It is critical that the proposed legislation and guidelines assure medical service providers that accessible and appropriate services will be put in place and that women whose lives are at risk can have confidence that their decision will be respected, free of discrimination, coercion or stigma, and that their rights will be vindicated in full. Once the proposed legislation is in place and the European Court of Human Rights is satisfied that its judgment is implemented, the Government must consider the wider dimensions of the complex question of abortion.”

NIALL BEHAN, CHIEF EXECUTIVE, IN AN OPINION PIECE ON THE PROTECTION OF LIFE DURING PREGNANCY BILL, JANUARY 2013



IFPA video 'Women Have Abortions Every Day: It's Just One Choice'

Policy Development & Submissions

With a strong track record in providing high quality medical, pregnancy counselling and education and training services, the IFPA is recognised as a respected authority on sexual and reproductive health. The IFPA is regularly called upon by statutory agencies, parliamentary committees and medical associations to give expert opinion on a wide range of issues related to sexual and reproductive health and rights.

Having supported three women, known as A, B and C, in challenging Ireland's restrictive abortion laws at the European Court of Human Rights (ECtHR), in 2013 the IFPA focused its efforts on implementation of the ruling. The IFPA raised concerns on the Government's proposed legislation to implement the ruling and its compliance with human rights. The IFPA also continued to highlight the wider impact of Irish abortion law, particularly on those women and girls who most heavily experience the burden of the unavailability of abortion services in Ireland.

In January, the IFPA was invited to make an oral submission to the Oireachtas Committee on Health and Children during a three day public hearing on implementation of the ECtHR ruling. The IFPA highlighted that women and girls whose lives are at risk must have access to timely and appropriate services. The IFPA also described the difficulties facing doctors in only being able to intervene to preserve a pregnant woman's life as distinct from her health. During the year, the IFPA provided the Committee with further submissions regarding the implementation process. The IFPA also made three submissions to the Committee of Ministers of the Council of Europe, the body charged with overseeing implementation of judgments from the ECtHR.

In May, the IFPA held a press briefing regarding the Protection of Life During Pregnancy Bill. The IFPA welcomed the draft legislation as a first step in making abortion services available to women whose lives are at risk and outlined its concerns with restrictive provisions. This included the threat of 14 years prison hanging over women and their doctors, the medically unworkable distinction doctors faced in determining a risk to a woman's life as opposed to her health, the lack of referral pathways to ensure timely access to abortion services, the excessive barriers women with mental health problems faced to seeking an abortion, and the failure to allow for abortion in cases of foetal anomaly.

In August, the IFPA made a submission to the United Nations Human Rights Committee and the Committee Against Torture on the failure of Irish abortion law to comply with the State's human rights obligations. The IFPA also provided a submission to the Irish Human Rights Commission to inform its Right to Life review.

In November, the Law Reform Commission issued a report on the law on sexual offences and capacity to consent. The IFPA had called for reform of this law for many years and provided a submission to the Commission on the issue. The IFPA welcomed the Commission's proposal of a new right based law based on empowerment and protection from abuse for vulnerable people. The IFPA also welcomed the proposal of national standards of sex education in this area.

In December, the IFPA held a legal seminar, 'Human Rights and Abortion Law Reform in Ireland'. A panel of national and international experts analysed abortion law in Ireland through the lens of equality, human rights, stigma and criminalisation and explored ways forward to advance reform. See Key Events for more.

During 2013, the IFPA also provided policy briefings and expert opinion to other agencies on a wide range of sexual and reproductive health and rights related issues.

“Once the European Court of Human Rights is satisfied that its judgment is implemented, the Oireachtas Committee on Health and Children must look beyond this current role and consider the wider dimensions of the complex question of abortion. This needs to be done before the next tragic case arises, or before further cases are brought before the national and international courts. The abortion issue is far more complex and requires a range of responses from the law and the health service that go beyond the scope of the current proposed legislation.”

IFPA WRITTEN SUBMISSION TO THE OIREACTHAS COMMITTEE ON HEALTH AND CHILDREN ON THE PROTECTION OF LIFE DURING PREGNANCY BILL, JANUARY 2013



Speaker Julie Kay at IFPA seminar 'Human Rights and Abortion Law Reform in Ireland'



Speaker Rebecca Cook at IFPA seminar 'Human Rights and Abortion Law Reform in Ireland'

International Advocacy

Raising awareness of sexual and reproductive health and rights at an international level is an important part of the IFPA's mission.

During 2013, the IFPA continued to act as secretariat for the All Party Oireachtas Group on Sexual and Reproductive Health and Rights and Development. With members from all parties in the Dáil and Seanad, this group focuses on advancing sexual and reproductive health and rights, with a particular focus on overseas development policy.

The All Party Group highlighted sexual and reproductive health and rights issues in meetings of the Foreign Affairs Committee, in three topical debates and through parliamentary questions, with an emphasis on Ireland's role in the presidency of the European Union (EU).

In March, the All Party Group focused on the United Nations (UN) Commission on the Status of Women (CSW), the UN's pre-eminent discussion forum for women's human rights. In 2013, the theme of the CSW was violence against women. The All Party Group highlighted the need for the CSW to recognise the links between violence against women and sexual and reproductive health and rights.

In June, All Party Group Chair Olivia Mitchell TD participated in an international meeting of All Party Groups held in London and organised by the European Parliamentary Forum. In November, Deputy Mitchell represented the Government at the UK Department for International Development Call to Action High Level Event on Violence Against Women and Girls in Emergencies.

During the Irish presidency, the All Party Group Chair also focused on EU level development policy, with particular emphasis on the development framework that will replace the Millennium Development Goals in 2015. Under Ireland's leadership, the EU Council's conclusions on the post-2015 development framework included strong references to sexual and reproductive health and rights.

In February and June, All Party Group members engaged in topical issues debates in the Dáil on the implementation of the Programme of Action from the International Conference on Population and Development (ICPD). The unmet need of contraception globally was also highlighted in topical issues debates on national issues, e.g. a debate in November on prescription charges.

As collaborating partner with the UN Population Fund (UNFPA), the IFPA organised the launch of UNFPA's 2013 State of World Population Report, *Motherhood in Childhood: Facing the Challenge of Adolescent Pregnancy*, in October. The then Tánaiste and Minister for Foreign Affairs and Trade Eamon Gilmore TD launched the report, which examines the impact of adolescent pregnancy on girls' human rights and explores what can be done to address the issue. See Key Events for more.

As a member of *Countdown 2015 Europe*, a consortium of 16 European organisations that work on sexual and reproductive health and rights, the IFPA monitored Irish Aid policy and funding for family planning and reproductive health and engaged in advocacy in relation to the post-2015 development process. The IFPA also provided a submission to the European Commission regarding its public consultation on the post-2015 development framework.

At home, the IFPA is a member of Dóchas, the Irish association of non-governmental development organisations. In 2013, we provided input on a Dóchas briefing on population and development entitled *Population and Development – People are Assets, not Liabilities*.

OTHER HIGHLIGHTS:

- In October, All Party Group member Ciara Conway TD participated in a parliamentary delegation to the CSW and attended a Young Parliamentarians' Consultation on the International Conference on Population and Development and the Post-2015 UN Development Agenda.
- The IFPA welcomed Ireland's new overseas development policy *One World One Future*. Published in May, the policy states: "Consistent with the 'Cairo Programme of Action', we will support efforts that reduce maternal and infant mortality, and promote universal access to reproductive healthcare, including ante-natal care and family planning services." The policy also includes contraceptives among essential commodities.

“There are no ‘magic bullets’ in human, economic and social development. We know that from our own experience. And there is no single solution to the problem of adolescent pregnancy. We need to focus on human rights, on empowering women and girls, on improving overall health including nutrition and sexual and reproductive overall health. And we need to ensure continued access to quality education and genuine economic opportunities to lift youth out of poverty.”

FORMER TÁNAISTE AND MINISTER FOR FOREIGN AFFAIRS AND TRADE EAMON GILMORE TD, LAUNCH OF UNFPA STATE OF WORLD POPULATION REPORT, 30 OCTOBER 2013



Former Tánaiste and Minister for Foreign Affairs and Trade Eamon Gilmore TD at the launch of the State of World Population Report 2013

Focus on Youth & Development

IFPA's Partner Empowering Youth of Bolivia

In 2013 the IFPA and its Bolivian partner Centro de Investigación, Educación y Servicios (CIES) received good news from Irish Aid: a grant of €250,000 to fund a two-year project 'Strengthening Investment in Bolivia's Most Vulnerable Youth'.

CIES is a non-governmental organisation that is committed to ensuring that all people in Bolivia have access to high quality sexual and reproductive health information and services. CIES operates sixteen clinics and four mobile health units in remote rural areas and in some of Bolivia's toughest cities.

The IFPA and CIES have a longstanding partnership. In 2009, the IFPA led a study tour to Bolivia which allowed parliamentarians and journalists in Ireland to witness first hand CIES' innovative approach to improving the sexual and reproductive health and rights of vulnerable young people.

In 2010, the IFPA entered into a partnership with CIES to implement a three-year project 'Investing in Bolivia's Most Vulnerable Youth' (2010 to 2013).

With this support from Irish Aid's Civil Society Fund, CIES is going from strength to strength. In 2013, CIES provided over 50,000 services, including contraception and sexually transmitted infection (STI) screening to vulnerable youth – a more than 50% increase over the number of services provided in 2011.

CIES not only delivers services, it also empowers and supports young people to become advocates and trains them on issues of sexuality, leadership and advocacy. Many youth join the *Red Nacional de Jóvenes Tú Decides* (You Decide National Youth Network), a network that is unique in its inclusion of youth from a wide range of backgrounds. Through this network, CIES has created a sustainable group of young people that continuously advocate for the State to take responsibility for fulfilling their rights to sexual and reproductive health services and education.

In the voices of the young people themselves:

"Young people look for a place where they can get treatment without discrimination. CIES is never going to point you out or say you are doing something bad, they simply help you."

— YOUTH LEADER, MALE, 21 YEARS

"I have undergone a big change because before I was really closed up and now I can talk really easily about condoms and STIs. I'm not like I was before. My friends from before now see me and are so surprised, they say 'you have changed!' CIES helped me a lot in that sense, especially Freddy (Educational Coordinator)."

— YOUTH LEADER, FEMALE, 18 YEARS

"I want others to see how I have changed, how I have learned to take care of myself, how I have learned about rights and how my self-esteem has gone up. I don't want that others feel like I did, so closed off. Just a short while ago, I didn't even want to leave my house. I want to share my stories so that others know, so they realise that things can change... and they have a place to go. They can go to CIES."

— YOUTH LEADER, FEMALE, 18 YEARS



From left to right: CIES staff members Saúl Mareño (Youth Educator) and Carmen Astulla (Gynaecologist)



CIES empowers marginalised young people throughout Bolivia. Here are Ana and Juan's stories.

ANA

Ana is learning to make a wool jumper with friends from her knitting programme. Just over a year ago, she left a life of violence behind to protect her son and to provide them both with a better life.

In 2013, Ana and her young son visited the CIES clinic in Cochabamba seeking health care. She was a sex worker – the family's only source of income – and was experiencing domestic violence. Ana had also experienced violence through her work and was forced several times to have unprotected sex.

With just over 600,000 inhabitants, Cochabamba is one of the largest cities in Bolivia. Thanks to support from Irish Aid, hundreds of young people in Cochabamba receive free sexual and reproductive health care and counselling from CIES, allowing them to acquire the knowledge and confidence to build different lives.

At the CIES clinic Ana received STI and HIV screening, information on contraception and safer sex, and non-judgmental support. Ana and her son were diagnosed as HIV positive and were able to access antiretroviral drugs, support and counselling at the clinic.

CIES also put Ana in touch with a support organisation for sex workers, which provided her and her son with safe accommodation. The organisation helped Ana to leave sex work by securing her a place on a knitting training programme.

Today Ana lives with her mother and her son and is free from violence. Ana and her son continue to receive free care and support in the CIES clinic. Through her knitting, Ana is able to support her family. Ana also encourages other vulnerable young women to seek support and exercise their rights in order to receive a second chance in life – as she herself did.

JUAN

During a workshop for young people in the CIES youth centre in Cochabamba, Juan approached one of the educators. He was worried and scared. He needed someone who would listen but not judge.

Thanks to Irish Aid, hundreds of vulnerable young people in Bolivia receive information and support on sexual and reproductive health and rights through workshops delivered by CIES. The workshops take place in CIES' youth centres, where young people can talk about their feelings in a safe environment.

Juan eventually confided in the CIES educator that he was being sexually assaulted in the shelter where he lived. The abuser had threatened to hurt him if he ever reported what was happening.

With the support of CIES, Juan became empowered to turn his life around. He received free medical and psychological care at CIES and reported the sexual assaults to the authorities.

Juan was also able to speak about his sexuality in a safe and non-judgmental space and learned that his sexual orientation was not 'a sin' as he had always been told.

Today Juan lives a life free of fear and violence and is an activist for gay rights. Juan is also committed to ensuring that all young people in Bolivia are supported to exercise their rights to access sexual and reproductive health information and services.



Cover image of *Improving the Sexual and Reproductive Health and Rights of Most at Risk Adolescents*, report of the IFPA's 2009 study tour of Bolivia.

Key Events

PEARL OF WISDOM CAMPAIGN

2013 saw the fifth year of the IFPA's coordination of European Cervical Cancer Prevention Week in Ireland. As the lead Irish member of the European Cervical Cancer Association, the IFPA once again partnered with CervicalCheck – the National Cervical Screening Programme – in the delivery of the annual Pearl of Wisdom campaign held in January.

Cervical cancer is the second most common cancer affecting women worldwide and is one of the leading causes of death among women under 44 in Ireland. However it is also highly preventable through vaccination and screening programmes. The Pearl of Wisdom, the international emblem of cervical cancer prevention, is a global campaign that advocates for the implementation of these programmes worldwide.

In Ireland, the campaign encourages all women aged 25 to 60 to avail of free cervical screening through CervicalCheck. In 2013, women over 45 were particularly encouraged to attend for cervical screening. Research shows that women in this age group are less likely to attend for screening than younger women, despite cervical cancer remaining a health risk at this age.

To highlight these messages, the IFPA distributed 22,000 Pearls of Wisdom to women across Ireland through participating health promotion networks. This included pharmacists, nurses, GPs, health promotion workers, family resource centres, Irish Cancer Society Daffodil Centres, and community organisations.

Broadcaster Maura Derrane lent her support to the Pearl of Wisdom campaign for the fourth year, receiving significant media coverage. Interviews were conducted on RTÉ One's Four Live and RTÉ 2FM's Colm Hayes Show. The campaign was also featured in The Irish Times, Irish Examiner and Irish Independent and other print, online and broadcast media.



Broadcaster Maura Derrane at the launch of the Pearl of Wisdom campaign 2013

IFPA MEETING WITH SWEDISH MINISTER FOR EU AFFAIRS

Also in January, former Swedish Minister for European Union Affairs, Human Rights and Democracy Ms Birgitta Ohlsson visited the offices of the IFPA to discuss Irish abortion law and implementation of the European Court of Human Rights (ECtHR) ruling in the case of A, B and C v Ireland. The meeting took place during Ireland's Presidency of the European Union.

Ms Ohlsson, accompanied by former Swedish Ambassador Ms Elisabet Borsiin Bonnier, was provided with a briefing on the implementation process of the ECtHR ruling. The IFPA expressed its concerns regarding the Government's proposed legislation and its compliance with human rights. The IFPA discussed the criminalisation of women and their doctors, the difficulties facing doctors in only being able to intervene to preserve a pregnant woman's life as distinct from her health, the lack of referral pathways to ensure timely access to abortion, the excessive barriers women with mental health problems faced, and the failure to legislate for abortion in cases of foetal anomaly.

The IFPA also highlighted the wider impact of Ireland's restrictive abortion laws to the Minister and Ambassador, particularly on those women and girls who most heavily experience the burden of the unavailability of abortion services in Ireland.



Former Swedish Minister for European Union Affairs, Human Rights and Democracy Birgitta Ohlsson with IFPA Chief Executive Niall Behan

CONSULTATION ON CERVICAL SCREENING PROGRAMME

In June, three senior health experts from the Republic of Moldova and Albania visited the offices of the IFPA for a consultation on national cervical screening programmes.

Dr Uliana Tabuica from the State Medical University 'N. Testemitanu', Republic of Moldova, Dr Diana Valuta from the National Health Insurance Institute, Republic of Moldova, and Dr Kozeta Filipi from the Albanian Institute of Public Health held a consultation with the IFPA, during which they discussed efforts to establish national cervical screening programmes in their respective countries. Almost 30,000 European women die from cervical cancer every year because they do not have access to high quality cervical screening programmes.

The health experts were provided with a briefing on the work of the IFPA in calling for a population based cervical screening programme, which resulted in the establishment of the government-funded national cervical screening programme CervicalCheck in 2008. CervicalCheck provides free cervical screening to all women in Ireland aged 25 to 60. Since 2008, it has provided over 1.65 million free screenings, with more than 875,000 women having had at least one screening.

Dr Tabuica, Dr Valuta and Dr Filipi were accompanied in their visit by Dr Philip Davies, Director General of the European Cervical Cancer Association (ECCA). The IFPA is the lead Irish partner of the ECCA.



Health experts Dr Uliana Tabuica, Dr Diana Valuta, Dr Kozeta Filipi and Dr Philip Davies with IFPA Chief Executive Niall Behan

LAUNCH OF STI HOME TESTING SERVICE

In August, Lloyds Online Doctor launched a new home testing service for common sexually transmitted infections (STIs) in partnership with the IFPA.

The service offers low cost and easy to use kits to test for genital chlamydia and genital gonorrhoea, which together account for the majority of STIs in Ireland. As both infections are often asymptomatic, testing is crucial to early diagnosis and treatment. An enhanced testing kit also tests for HIV.

The tests are analysed by a fully accredited laboratory and are clinically robust. They are available to purchase on Lloyds Online Doctor, a website administered by registered doctors in Ireland. Treatment advice is provided by doctors in the event of positive results.

On launching the service, IFPA Medical Director Dr Caitriona Henchion described how STI rates in Ireland have risen significantly in recent years, particularly among young people aged 20 to 29. She highlighted how the home testing service provides a further option for people concerned they may have contracted an STI or for people unable to access screening services in clinics.

Dr Henchion added that in the case of pain or other obvious symptoms, a person should visit a sexual health clinic or GP immediately. People who are sexually active should also attend for a full STI screening in a clinic twice each year.



STI Home Testing Service by Lloyds Online Doctor in partnership with the IFPA

Key Events

IRISH AMBASSADOR VISITS IFPA BOLIVIAN PARTNER

In 2013, former Ambassador Mr James McIntyre of the Irish Embassy in Buenos Aires visited the offices of the IFPA's Bolivian partner CIES (Centro de Investigación, Educación y Servicios).

The visit followed the awarding of a grant of €250,000 to the IFPA and CIES to fund a new two-year project 'Strengthening Investment in Bolivia's Most Vulnerable Youth'.

CIES is a non-governmental organisation that is committed to ensuring that all people in Bolivia have access to high quality sexual and reproductive health information and services. The organisation operates sixteen clinics and four mobile health units in remote rural settings and in some of Bolivia's toughest cities.

The IFPA and CIES have a longstanding partnership. In 2009, the IFPA led a study tour to Bolivia which allowed Irish parliamentarians and journalists to witness first hand CIES' innovative approach to improving the sexual and reproductive health and rights of vulnerable young people.

In 2010, the IFPA entered into a partnership with CIES to implement a three-year project 'Investing in Bolivia's Most Vulnerable Youth' (2010 to 2013). See Focus on Youth & Development for more.



Former Irish Ambassador Mr James McIntyre visits CIES staff and youth leaders

LAUNCH OF STATE OF WORD POPULATION REPORT

As collaborating partner with the United Nations Population Fund (UNFPA), the IFPA organised the launch of the UNFPA State of World Population Report 2013. Former Tánaiste and Minister for Foreign Affairs and Trade Eamon Gilmore TD launched the report, entitled *Motherhood in Childhood: Facing the Challenge of Adolescent Pregnancy*.

The report highlights how every day, 20,000 girls under 18 give birth in developing countries. The report examines the impact of pregnancy on girls' human rights – including girls' health, autonomy, education and future opportunities – and proposes solutions to address the issue.

Speaking at the launch, Eamon Gilmore stated: 'We need to focus on human rights; on empowering women and girls; on improving overall health including nutrition and sexual and reproductive health.'

He also commented on the role of the IFPA as an advocate of sexual and reproductive health and rights: "The IFPA has been a heroic and hugely influential organisation in Ireland since its foundation in 1969. It has played a vital role in empowering Irish women and families and in the transformation of our society."

Deputy Director of UNFPA Technical Division Dr Mona Kaidbey explained that adolescent pregnancy occurs due to complex factors, including poverty, low value placed on girls' education and child marriage – issues which must be tackled in order for girls to make informed decisions about their lives.

The event received significant media coverage including on RTÉ One's Morning Edition, RTÉ 2FM's Colm Hayes Show, the Irish Times and other print, online and broadcast media.



Former Tánaiste and Minister for Foreign Affairs and Trade Eamon Gilmore TD and Deputy Director of UNFPA Technical Division Dr Mona Kaidbey at the launch of the State of World Population Report 2013

IFPA PARTICIPATES IN SEXUAL HEALTH AWARENESS WEEK

Following from last year, the IFPA was again invited by the Royal College of Physicians in Ireland (RCPI) to participate in its second annual Sexual Health Awareness Week (SHAW) in November.

The aim of SHAW is to promote better sexual health nationally. The theme of the week in 2013 was communication and sexual health, highlighting how honest and inclusive communication is a vital part of sexual health. The week consisted of free public lectures, workshops and other events.

The IFPA contributed its knowledge and expertise by delivering a two hour lecture and workshop on sexual health for people with intellectual disabilities. Positive feedback was received from participants, which included doctors, psychiatrists and community workers.

The IFPA also acted as adjudicator, alongside the HSE Crisis Pregnancy Programme (CPP), for one of the two youth competitions of SHAW. Transition Year students were invited to create an alternative expression piece on the subject 'What helps us make good decisions in our romantic lives?' The winner of the competition was student Kevin Daly from Ard Scoil Ris, Limerick.



IFPA training materials used during a lecture and workshop on sexual health for people with intellectual disabilities delivered during Sexual Health Awareness Week 2013

HUMAN RIGHTS AND ABORTION LAW REFORM IN IRELAND

In December, the IFPA convened a legal seminar 'Human Rights and Abortion Law Reform in Ireland'. Key national and international human rights experts analysed Irish abortion law and explored strategies to advance legal reform. The seminar was organised as part of the IFPA's Abortion Stigma project, which is supported by the International Planned Parenthood Federation.

Barrister and former IFPA Chairperson Catherine Forde presided over a panel of speakers that included Ruth Fletcher of Queen Mary University of London, Rebecca Cook of the University of Toronto, Julie Kay, Lead Counsel in the case of A, B and C v Ireland, Siobhán Mullally of University College Cork and Mark Kelly, Director of the Irish Council for Civil Liberties.

Julie Kay analysed the importance of the European Court of Human Rights ruling in the case of A, B and C v Ireland and highlighted how the right to access safe and legal abortion is central to "women's ability to participate in society, to control their lives, their dignity, their health."

Siobhán Mullally and Mark Kelly examined the jurisprudence of human rights monitoring bodies, where there has been increasing recognition that the right to access safe and legal abortion is an issue of gender equality and of the right to be free from inhuman and degrading treatment.

Rebecca Cook described criminal law on abortion as "a wrong in and of itself, not only because of the public health consequences, but because of how it destroys women and the meaning of women in society" and analysed the effect of stigma on women who seek abortion services.

Ruth Fletcher highlighted how criminalising abortion is "a form of privatising public responsibility [as] it asks women rather than the state to bear all the weight of the public duty to vindicate foetal life".

A video with highlights of the seminar was published on the IFPA's website.



Panel of speakers at IFPA seminar 'Human Rights and Abortion Law Reform in Ireland'

Financial Report

INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2013

CONTINUING OPERATIONS	2013	2012
	€	€
Income	2,398,663	2,271,445
Expenditure	(2,362,642)	(2,243,961)
(Deficit) / Surplus on ordinary activities before interest	36,021	27,484
Interest payable and similar charges	(10,371)	(15,664)
Surplus for the financial year	25,650	11,820

NO RECOGNISED GAINS OR LOSSES OTHER THAN THE SURPLUS OR DEFICIT FOR THE ABOVE TWO FINANCIAL YEARS.

BALANCE SHEET AS AT 31 DECEMBER 2013

FIXED ASSETS	2013	2012
	€	€
Tangible assets	261,678	323,499
CURRENT ASSETS		
Stocks	22,021	20,679
Debtors	54,632	48,247
Cash at bank and in hand - unrestricted	167,192	334,051
Cash at bank - restricted*	-	195,000
	243,845	597,977
Creditors: amounts falling due within one year	(418,771)	(829,607)
Net current liabilities	(174,926)	(231,630)
Total assets less current liabilities	86,752	91,869
Creditors: amounts falling due after more than one year	(35,030)	(59,612)
Capital Grants	(24,079)	(30,264)
Net assets/(liabilities)	27,643	1,993
RESERVES		
Revenue reserves account	27,643	1,993
Members' funds	27,643	1,993

*Funds received from Irish Aid for Bolivian non-governmental organisation Centro de Investigación, Educación y Servicios (CIES) project "Investing in Bolivia's Most Vulnerable Young People"

ON BEHALF OF THE BOARD: KELLY MACKEY AND RUTH CARROLL

Board of Directors

BOARD OF DIRECTORS

Kevin Baneham **CHAIRPERSON**
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 Karen Ciesielski (resigned 02/12/2013)
 Jennifer De Wan (resigned 29/05/2013)
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 Aoife Dermody
 Cliona Doyle
 Laura Harmon
 Linda Kelly
 Kelly Mackey
 Leslie Sherlock

MEETING ATTENDANCE

9/9
 5/7
 8/9
 0/4
 3/4
 8/9
 6/9
 4/4
 8/9
 8/9
 9/9

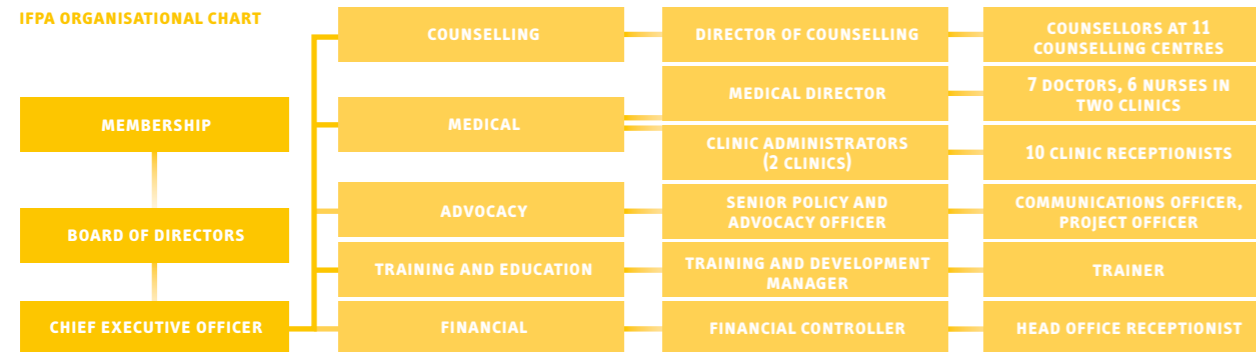
Staff

IN 2013 THE STAFF OF OUR MAIN DEPARTMENTS WERE:

CHIEF EXECUTIVE: Niall Behan
MEDICAL DIRECTOR: Caitríona Henchion
COUNSELLING DIRECTOR: Evelyn Geraghty
SENIOR POLICY & ADVOCACY OFFICER: Maeve Taylor
TRAINING & DEVELOPMENT MANAGER: Anita Ghafoor-Butt
COMMUNICATIONS OFFICER: Patrick Heffernan/Grace Wilentz/Denise Ryan
CLINIC ADMINISTRATOR, DUBLIN CITY CENTRE: Deirdre Jones
CLINIC ADMINISTRATOR, TALLAGHT: Annette Smith
FINANCIAL CONTROLLER: Ben Howe

IFPA staff members are based in the organisation's head office in Dublin city centre, medical clinics in Dublin city centre and Tallaght, and pregnancy counselling centres across Ireland. In 2013 the IFPA had a staff complement of 42 people. The organisation welcomed new staff members and said goodbye to others. The IFPA was also assisted in its work by dedicated and vibrant volunteers and interns.

IFPA ORGANISATIONAL CHART



Who We Work With

KEY PARTNERS:

Action Canada for Population and Development
 Catholics for Choice
 Center for Reproductive Rights
 Centro de Investigación, Educación y Servicios (CIES), Bolivia
 Countdown Europe Consortium 2015
 Dóchas
 Dublin AIDS Alliance
 European NGOs for Sexual and Reproductive Health and Rights, Population and Development (EuroNGOs)
 European Cervical Cancer Association
 European Society for Contraception
 European Parliamentary Forum on Population & Development
 Family Planning Association Northern Ireland
 Irish Autism Action
 Irish Council for Civil Liberties
 National Women's Council of Ireland
 RUA, Callan Institute, Saint John of God Hospitaller Ministries

Restless Development
 Royal College of Physicians of Ireland
 Sexual Health Centre, Cork
 St James's GUIDE Clinic
 Union of Students of Ireland
 Women's Human Rights Alliance

KEY FUNDERS:

CervicalCheck – The National Cervical Screening Programme
 Crisis Pregnancy Programme
 European Union
 HRA Pharma Foundation
 Health Service Executive
 International Planned Parenthood Federation
 Irish Aid
 National Lottery – HSE
 Schering Plough Pharma
 United Nations Population Fund (UNFPA)

Get involved

Become a member and sign up to our newsletter: www.ifpa.ie

Follow us on Twitter: [@IrishFPA](https://twitter.com/IrishFPA)

Like us on Facebook: [irishfamilyplanningassociation](https://www.facebook.com/irishfamilyplanningassociation)

Watch us on YouTube: [irishfamilyplanning](https://www.youtube.com/irishfamilyplanning)

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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



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