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.
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 high quality, dedicated, and affordable healthcare 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 organisation 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 eleven centres nationwide.

The IFPA delivers medical training to nurses and midwives and sexual health training to service providers, young people, parents and community groups.

With a strong track record in providing high quality medical, pregnancy counselling and education and training services, the IFPA is a respected authority on sexual 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. The IFPA’s mission is to enable people to make informed choices about their sexual and reproductive health and to understand their rights.

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.
Our Impact in 2014 in Numbers

<table>
<thead>
<tr>
<th>category</th>
<th>statistic</th>
<th>description</th>
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</thead>
<tbody>
<tr>
<td><strong>Medical</strong></td>
<td>14,027</td>
<td>Sexual and reproductive health consultations</td>
</tr>
<tr>
<td></td>
<td>3,234</td>
<td>Free cervical screenings</td>
</tr>
<tr>
<td></td>
<td>1,238</td>
<td>Screenings for sexually transmitted infections</td>
</tr>
<tr>
<td><strong>Counselling</strong></td>
<td>3,565</td>
<td>Counselling to women, girls and couples experiencing an unplanned or crisis pregnancy</td>
</tr>
<tr>
<td></td>
<td>2,093</td>
<td>Information and advice to 2,093 callers to our National Pregnancy Helpline</td>
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<tr>
<td></td>
<td>1,300</td>
<td>Face-to-face counselling to 1,300 clients</td>
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<tr>
<td></td>
<td>172</td>
<td>Follow-up telephone support to 172 clients</td>
</tr>
<tr>
<td><strong>Advocacy</strong></td>
<td>5</td>
<td>Submissions to government departments and international human rights bodies</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Collective oral statement to UN Human Rights Committee on Ireland’s abortion laws</td>
</tr>
<tr>
<td><strong>Communications</strong></td>
<td>385,447</td>
<td>Hits on IFPA website</td>
</tr>
<tr>
<td></td>
<td>111,727</td>
<td>Views of IFPA videos on YouTube</td>
</tr>
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<td></td>
<td>1,841</td>
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<td></td>
<td>1,460</td>
<td>Followers on Facebook</td>
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<tr>
<td></td>
<td>17,000</td>
<td>Free Pearl of Wisdom packs delivered to women across Ireland to promote free cervical screening</td>
</tr>
<tr>
<td></td>
<td>295</td>
<td>Hits in national and local media</td>
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<tr>
<td></td>
<td>7</td>
<td>Press statements on a wide range of issues related to sexual and reproductive health and rights</td>
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<tr>
<td></td>
<td>5</td>
<td>E-newsletters with updates on the IFPA’s work</td>
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<tr>
<td></td>
<td>3</td>
<td>Opinion pieces on harmful effect of Ireland’s restrictive abortion laws on our clients</td>
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<tr>
<td></td>
<td>3</td>
<td>Videos on human rights advocacy</td>
</tr>
<tr>
<td><strong>Education and Training</strong></td>
<td>180</td>
<td>Range of sexual health training delivered to over 180 people, including parents, adults with an intellectual disability, support workers, nurses, student welfare officers and young people</td>
</tr>
<tr>
<td></td>
<td>40</td>
<td>Medical training (Certificate in Contraception) delivered to 40 nurses and midwives</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Sexual health information stands at 4 colleges across Ireland during SHAG Week</td>
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On behalf of the Board of Directors, it is my privilege to introduce the Irish Family Planning Association (IFPA) Annual Report for 2014.

Speaking at the opening of the IFPA’s specialist treatment service for female genital mutilation (FGM) in May 2014, Minister of State with Responsibility for Primary Care, Alex White TD, described the IFPA as “an acknowledged leader as a service provider as well as an advocate for women’s health”.

The following chapters illustrate this unique role of the IFPA as a health provider and advocate. They highlight the comprehensive range of services delivered through the IFPA’s medical, counselling and education and training services. They show how the IFPA shares evidence-based information on sexual and reproductive health with a wide range of audiences through new and traditional media. They also demonstrate the impact of the IFPA’s advocacy work in promoting the fulfilment of sexual and reproductive health and rights in Ireland and across the world.

While the contents of this report highlight a successful year for the IFPA in promoting sexual and reproductive health and rights, many challenges remain to the fulfilment of these rights in Ireland.

As noted in the report, private client attendance has fallen in IFPA clinics in recent years. This indicates the success of a key strategy of the IFPA in supporting GPs to provide family planning services. Indeed today it is difficult to find a GP that does not provide these services. However the decrease also highlights the continued effect of the economic recession, with many people unable to pay for sexual health services. The cost of screening for sexually transmitted infections in private clinics can be prohibitive, while the costs of contraception are also high. Ensuring access to comprehensive and affordable sexual and reproductive healthcare for all people in Ireland is a low cost and high impact public health measure. To realise this, the Government must provide adequate resources to primary care providers such as the IFPA, who are best placed to deliver such services.

Much also remains to be done to ensure that the reproductive rights of women and girls in Ireland are vindicated. Abortion remains the only area of healthcare where the Government discards its responsibility and forces women and girls to rely on the healthcare system of another country. As highlighted in this report, the unavailability of abortion in Ireland continues to have a harmful impact on the IFPA’s clients, especially on those women and girls unable to travel to access a safe abortion.

While intended to give effect to the constitutional right to abortion when a woman’s life is at risk, the Protection of Life During Pregnancy Act 2013 has made a restrictive legal regime even more restrictive. Ignoring the recommendations of international human rights bodies, the Government enacted legislation that holds the most restrictive possible interpretation of Article 40.3.3 of the Constitution. The Act creates a new criminal offence of the ‘intentional destruction of unborn human life’, with a maximum 14-year sentence of imprisonment, and imposes new legal barriers to accessing an abortion. In 2014, the IFPA raised these and other concerns with experts of the United Nations Human Rights Committee, who strongly criticised Ireland’s abortion regime and called on the Government to revise its laws, including the Constitution. The onus on the Government is now clear: reform its abortion laws or continue to be in violation of its human rights commitments.

In 2015, the Board will commence work on the IFPA’s new Strategic Plan. The IFPA has always placed a strong value on having a clear, well-articulated strategy that responds to the changing sexual and reproductive health environment in Ireland and secures the engagement of key stakeholders. It is my intention that the development of the new IFPA Strategic Plan will continue this practice.

Cuts in income and other funding in 2014 meant that the IFPA had to as much, or more, with less resources. This would not have been achievable without the hard work and dedication of its team of staff. As Chairperson, I am immeasurably proud of the achievements of the organisation and I look forward to working with staff and fellow Board members in 2015 to bring the IFPA from strength to strength.

Finally, our members are crucial to our work. I encourage everyone who supports the work of the IFPA to join us. Become a member, as a group or individual, and be part of Ireland’s leading voice for the advancement of sexual and reproductive health and rights.

Michelle Thomas
Chairperson
2014 was another successful year for the IFPA in promoting sexual health and supporting reproductive choice.

We provided more than 14,000 sexual and reproductive health consultations at our two medical clinics in Dublin city centre and Tallaght. Information and support was provided to over 3,500 women, girls and couples experiencing an unplanned or crisis pregnancy at our eleven pregnancy counselling centres across Ireland and through our National Pregnancy Helpline.

A key objective for the IFPA in 2014 was to develop Ireland’s first treatment service for female genital mutilation (FGM) in our Dublin city centre clinic. Opened in May, the service provides free specialist medical and psychological care to the more than 3,780 women and girls in Ireland estimated to be affected by FGM. Supported by the HSE, the service meets the healthcare goal of Ireland’s First National Action Plan to Address FGM, which the IFPA led the development of in 2008. In 2014, we carried out a range of outreach activities to promote the service, including information sessions with asylum seeking women living in direct provision, a clinic open day, and distribution of an information leaflet in three languages. We also promoted the service among medical professionals and began work with partners in developing Ireland’s Second Action Plan.

Another key objective of 2014 was to implement an online clinical management system. This was achieved in September, when the IFPA introduced a new management system that provides electronic records for all medical and counselling clients, as well as comprehensive reporting.

We continued our key role in the delivery of CervicalCheck, the National Cervical Screening Programme, with over 3,200 women availing of free cervical screening at IFPA clinics. 2014 also marked the sixth year of the Pearl of Wisdom, our national cervical cancer prevention campaign held in partnership with CervicalCheck during European Cervical Cancer Prevention Week.

We delivered sexual health and medical training to over 200 people, including parents, young people, nurses, midwives, support workers, student welfare officers and adults with an intellectual disability. In addition, we reached many young people through sexual health information stands in colleges and our wide range of educational resources. 2014 also saw our engagement in the final year of the two-year project Keep Me Safe: Empowering Young People with Learning Disabilities. Supported by the European Commission, this project involves thirteen International Planned Parenthood Federation (IPPF) member associations, including the IFPA, and aims to develop best practice for the prevention of abuse against young people with intellectual disabilities.

In 2014, our counsellors continued to see the harmful impact of Ireland’s restrictive abortion laws on our clients, in particular on women and girls without the legal and economic resources to travel to another state to access an abortion. During the fourth periodic review of Ireland by the United Nations (UN) Human Rights Committee, we highlighted this issue to the human rights experts. We also provided evidence about the failure of Ireland’s abortion laws, including the Protection of Life During Pregnancy Act 2013, to comply with the Government’s human rights obligations. The Committee’s criticism of Ireland’s abortion laws was trenchant. In its recommendations, it unequivocally called on the Government to revise its abortion laws, including the Constitution, to provide for abortion in cases of rape, incest, serious risk of health, and fatal foetal anomaly.

In 2014, the IFPA continued to raise awareness of sexual and reproductive health and rights (SRHR) at an international level. A capacity building project saw the IFPA share its human rights advocacy expertise with IPPF member associations in Georgia, Macedonia and Romania. We also continued to act as secretariat to the All Party Oireachtas Interest Group on SRHR and Development, with members highlighting the need for SRHR to be central to development policy.

Looking to 2015, the IFPA will continue to work to improve access to sexual and reproductive health information, education and services in Ireland, in particular for those most marginalised. We will also continue to highlight the harmful impact of Ireland’s abortion laws on our clients and the need for safe abortion services to be available in Ireland. I am also particularly looking forward to developing a new IFPA Strategic Plan and I am delighted that an experienced, dynamic and engaged Board of Directors will be overseeing this process.

Finally, the IFPA could not have had the impact that it did on sexual and reproductive health and rights in 2014 without its team of staff. As Chief Executive Officer, I would like to acknowledge their hard work, dedication and commitment to the organisation.

I look forward to continued work with you all.

Niall Behan
Chief Executive Officer
The IFPA is Ireland’s leading sexual health provider and provides a comprehensive range of sexual and reproductive health services on a not-for-profit basis.

In 2014, IFPA doctors and nurses provided more than 14,000 sexual and reproductive health consultations at our two medical clinics in Dublin city centre and Tallaght.

IFPA clinics offer a wide range of services, including contraception advice and services, sexually transmitted infection (STI) screening, free cervical screening, fertility advice, free post-abortion check-up, menopause check-up and occupational health screening. Since 2014, the IFPA also offers specialist care to women and girls who have experienced female genital mutilation (FGM).

In 2014, the IFPA continued to play a key role in the delivery of CervicalCheck, the National Cervical Screening Programme. Over 3,200 women received free cervical screening at IFPA clinics, while January marked our sixth year delivering the Pearl of Wisdom Campaign. This week-long national awareness campaign on Cervical Cancer Prevention takes place during European Cervical Cancer Prevention Week and is delivered by the IFPA in partnership with CervicalCheck. See Key Events.

A key highlight in 2014 was the opening of our treatment service for female genital mutilation (FGM). Based in our Dublin city centre clinic, the service provides free specialist medical and psychological care to women and girls affected by FGM. As a sexual health provider, the IFPA has consistently highlighted the barriers faced by women and girls who have experienced FGM in accessing appropriate healthcare. This service aims to address these barriers and to meet objectives in Ireland’s National Action Plan to Address FGM, which the IFPA led the development of in 2008. The service is funded by the HSE Social Inclusion Unit and supported by AkiDwA, the Migrant Women’s Network.

The IFPA carried out 1,238 screenings for STIs in 2014. We also continued to promote Lloyds Online Doctor’s home STI testing service as a further option for people seeking screening outside of a clinic. This confidential service tests for genital chlamydia and gonorrhoea, the most common STIs in Ireland, while an enhanced kit also tests for HIV. In 2014, uptake of the service was positive, with over 1,100 kits purchased in Ireland.

In 2014, the IFPA invested in a new electronic clinical management system. This system provides electronic records for all clients of the IFPA’s medical and counselling services and allows for comprehensive and anonymous data collection.

During the year, the IFPA was called on to share its medical expertise with a range of organisations and professional bodies. In May, IFPA Medical Director, Dr Caitriona Henchion, delivered a presentation on menopause to deaf and hard of hearing women at the Deaf Village in Dublin. In October, she delivered a contraceptive update to triage nurses at the Annual Telephone Triage Nurse Conference, focusing on emergency contraception provision. In 2014 Dr Henchion also supported the Irish College of General Practitioners with a range of educational activities.

Since 2011, our clinics have experienced a fall of 28% in private client attendance. This highlights the success of a key strategy of the IFPA in supporting GPs to provide family planning services. However it also indicates that the economic recession continues to have an adverse effect on access to healthcare, with many people unable to pay for services. The cost of STI screening in private clinics can be prohibitive, while contraception costs are also high. Ensuring access to high quality and affordable sexual and reproductive health services for all people in Ireland, in particular STI screening and contraception, is a low cost and extremely high impact public health measure, and one which primary care providers such as the IFPA are well placed to deliver.

The service was launched by Minister of State with Responsibility for Primary Care, Alex White TD, at a special event attended by healthcare professionals, representatives from non-governmental organisations, women from FGM-practicing communities and parliamentarians. See Key Events. During 2014, we raised awareness of the service among women in affected communities. We also promoted the service among medical professionals and began work with partners in developing Ireland’s Second National Action Plan. See Focus on FGM.
“While STI rates are on the increase, there remains a lack of affordable screening services. The cost of screening in private clinics can be prohibitive, in particular for young people and those on low incomes. This is a public health issue - it is well established that delayed STI diagnosis can increase complications and onward transmission. Primary healthcare providers such as the IFPA are ideally placed to provide low-cost STI screening and should be adequately resourced to do so.”

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**DR CAITRiona henchion, IFPA Medical Director**

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**Medical Training**

The IFPA has provided training to medical professionals since 1977.

Our flagship training, Certificate in Contraception, gives medical professionals the knowledge and skills to provide a family planning service of high medical standard. In 2014, we responded to feedback from previous training participants by adapting our Certificate in Contraception training to meet the specific needs of nurses and midwives. 40 participants completed the two-day course, which is accredited by the Nursing and Midwifery Board and comprises both theoretical and practical training.
Female genital mutilation (FGM) refers to any procedure that involves the partial or total removal of, or any other injury to, a woman’s external genital organs for non-medical reasons.

In most cases, FGM is performed on girls between infancy and 15 years of age. The World Health Organisation estimates that more than 125 million women and girls worldwide have undergone the procedure, mainly in the 29 countries in Africa and the Middle East where FGM is concentrated.

FGM is recognised as a severe violation of women’s and girl’s human rights. The procedure has serious health effects, many of which are long term. Short term health consequences can include severe pain, haemorrhage, injury to adjacent tissue, fracture and dislocation of limbs, infections such as tetanus and HIV, failure of the wound to heal, urine retention. In extreme cases, FGM can result in death. Long term health consequences can include dyspareunia (pain during sexual intercourse), dysmenorrhea (painful menstruation), infertility, difficulty conceiving, difficulties during childbirth, sexual dysfunction, recurrent urinary infection, pelvic inflammatory disease and psychological trauma.

In Ireland, an estimated 3,780 women and girls aged 15 to 44 have undergone FGM. A recent study from the European Institute for Gender Equality estimates that between 1 and 11% of the almost 14,600 girls aged 0-18 years in Ireland whose parents originate from FGM-practicing countries could be at risk of the procedure.

FGM has been illegal in Ireland since the enactment of the Criminal Justice (Female Genital Mutilation) Act 2012. This legislation created the criminal offence of performing or attempting to perform FGM or removing a girl from the country for the purposes of doing so. The maximum penalty under the Act is a fine of up to €10,000 or imprisonment for up to 14 years or both.

**IFPA’s Work on FGM**

As a service provider, the IFPA has consistently highlighted the barriers faced by marginalised populations in accessing sexual and reproductive healthcare, including women who have experienced FGM. As women and families from countries where FGM is prevalent continue to migrate to Ireland, there is a corresponding need for appropriate health services and policies.

In 2008, we led the development of Ireland’s First National Action Plan to Address FGM, in consultation with a steering committee of experts and stakeholders. This Plan was an important part of the advocacy that helped to secure the passing of the 2012 legislation. The Plan’s goals included prevention of FGM, protection of women at risk, and provision of specialised healthcare and support for women who have been affected. Following this, in 2010, the IFPA published a handbook on the sexual health needs of women seeking asylum in Ireland, including women affected by FGM. In 2014, we began work with partners in developing Ireland’s Second National Action Plan to Address FGM.

While the 2012 legalisation was crucial, criminalisation is just one aspect of an effective strategy to address FGM. Sustained and strategic education and awareness raising and the provision of specialised healthcare to women and girls who have undergone FGM are also essential. 2014 saw an important step forward in the latter, with the development of Ireland’s first FGM Treatment Service.

**FGM Treatment Service**

Opened in May 2014 in our Dublin city centre clinic, the IFPA’s FGM Treatment Service provides high quality medical and psychological care to women and girls in Ireland who have undergone FGM.

The service is free and funded by the HSE Social Inclusion Unit, with the support of AkiDwA, the Migrant Women’s Network. In developing the service, we consulted with a range of stakeholders, including women from FGM-practicing communities and medical professionals. Our medical and counselling staff received specialist training and visited FGM treatment services in the UK.

At the FGM Treatment Service, clients are provided with a confidential medical consultation. This consultation includes an assessment and discussion on pain and infection management. Where necessary, antenatal and fertility advice is also provided. In cases where surgical intervention is required, clients can access the de-infibulation procedure (opening of Type 3) through a referral process between the IFPA and the Rotunda Hospital.
“The IFPA is an acknowledged leader as a service provider as well as an advocate for women's health and is particularly well placed to deliver an FGM treatment service. The development of this service is a unique example of primary care in action, addressing diverse health needs of our community. It is an example of real, responsive primary care that meets the health needs of women and young girls in an accessible setting, providing holistic, integrated care and support.”

MINISTER OF STATE WITH RESPONSIBILITY FOR PRIMARY CARE, ALEX WHITE TD, AT THE LAUNCH OF THE IFPA’S FGM TREATMENT SERVICE, MAY 2014
The waiting list for this service is significantly shorter than the routine gynaecological waiting list. Specialised counselling is also available to all clients, where women are provided with a safe and non-judgmental space to speak about their experience of FGM. Free professional translation services are also available on request.

The service can be accessed on a drop-in basis one day per week. Appointments outside of the drop-in clinic times can also be made through a confidential phone line or by referral from a GP or other healthcare professional. Clients are also invited to access our wider sexual health services, including cervical screening and contraception, ensuring comprehensive and holistic care.

Minister of State with Responsibility for Primary Care, Alex White TD, launched the service at a special event attended by healthcare professionals, representatives from non-governmental organisations, women from FGM-practicing communities and parliamentarians. See Key Events.

Uptake

The IFPA has carried out a range of outreach activities to promote the FGM Treatment Service. This has included information sessions with women living in direct provision, a clinic open day where women were invited to pay a visit and learn about our services, as well as distribution of the clinic leaflet in three languages. We have also worked with the Irish College of General Practitioners to promote the service among medical professionals.

To date, absolute numbers of women accessing the service have been low. Low uptake is common in the early stages of specialist healthcare. In addition, FGM is a sensitive issue and it is often difficult to access care due to stigma, language problems and other barriers associated with living in direct provision or belonging to a marginalised group. To address these issues, the IFPA has focused on raising awareness of the service through outreach with women from affected communities. It is hoped that these activities will contribute to increased levels of uptake.

Key Statistics

This section presents anonymous data from the service to date. Although based on a small sample, it provides useful information on the consequences of FGM and the importance of specialist care.

Ten clients have accessed the IFPA’s FGM Treatment Service to date. Many clients accessed the clinic multiple times to avail of a number of services, including medical care, counselling, and wider sexual health services.

There was a combination of referral methods. A significant proportion of women accessed the service following IFPA outreach to direct provision reception centres. Others were referred by healthcare professionals, while some women discovered the service through an online search or word of mouth.

The most common country of origin was Somalia, followed by Sudan, Liberia, Uganda and the Gambia. The majority of clients had recently moved to Ireland. Some were asylum seekers living in the direct provision system.

All clients were adult women who had FGM performed on them as children in their country of origin. Most women underwent the procedure between the ages of five and twelve years; one woman had the procedure as an infant. Over half had a family member who also experienced FGM.

A combination of FGM types was presented — Type 3 was the most prevalent, followed by Types 1, 2 and 4 respectively. In most cases, the procedure was carried out by a traditional circumciser outside of the family home. Local anaesthetic was used in some cases.

All clients suffered long term complications as a result of the procedure. This included severe pain, recurrent urinary infections, heavy bleeding, dyspareunia (pain during sexual intercourse), dysmenorrhea (painful menstruation), sexual dysfunction and problems conceiving. Half of clients experienced psychological trauma in the form of flashbacks.

The main motivation for accessing the service was to seek support with ongoing pain, infection and sexual dysfunction, including difficulties having sexual intercourse and conceiving. In some cases, clients experienced a physical inability to have sexual intercourse due to FGM. Several clients sought support as they were in a relationship, about to marry or were recently married.

In cases where surgical intervention was required, clients were referred to the Rotunda Hospital for specialist surgery.

On accessing the service, some clients returned to the clinic for other sexual health services such as cervical screening and contraception. This positive trend means that women affected by FGM can avail of free and comprehensive sexual healthcare they may otherwise have difficulty in accessing.

All clients held a negative attitude toward FGM. Most were aware of its detrimental health effects and its criminal status in Ireland. Clients also indicated that they would never approve of the procedure being performed on their own daughters. This is an encouraging indication of community-based attitudinal change, which is essential for the full eradication of FGM.
“The strength of the women who access our FGM Treatment Service is inspiring. Despite undergoing a traumatic procedure as children that left them with serious health complications for the rest of their lives, their resilience is relentless. They are determined to seek specialised care and support to improve their lives and they are determined that no other girl be subjected to FGM.”

IFPA MEDICAL DIRECTOR, DR CAITRIONA HENCHION
The IFPA provides free, confidential and non-directive pregnancy counselling to women, girls and couples who are experiencing an unplanned pregnancy or a pregnancy which has become a crisis.

The IFPA offers the only nationwide pregnancy counselling service that provides accurate and clear information on all three options—abortion, parenting and adoption. Our counsellors are trained and accredited and will support a woman’s choice in all circumstances. The service is supported by the HSE Crisis Pregnancy Programme.

In 2014, counselling services were provided to over 3,500 women, girls and couples at our eleven pregnancy counselling centres across Ireland and through the IFPA National Pregnancy Helpline.

Face-to-face counselling was delivered to 1,300 clients, almost half (47%) of whom were new clients. Information and advice was provided to 2,093 callers to our National Pregnancy Helpline, while follow-up telephone support was also provided to 172 clients.

In 2014, we continued to experience high demand for our post-abortion care services. 577 women, girls and couples attended for post-abortion counselling, accounting for 44% of our face to face counselling clients. This trend has been ongoing for a number of years and is due to multiple factors. Many women attend counselling to express their anger and frustration at being forced to travel to another state to access abortion services. Women also attend to discuss their experience of stigma as a result of seeking abortion. The high uptake is also due to an improved awareness of the IFPA’s post-abortion counselling service.

146 migrant women accessed our face to face counselling service, accounting for just over 11% of clients. Some of these women were unable to travel freely to another state to access abortion services due to travel or visa restrictions. Many also experienced additional barriers, such as lack of economic resources, language difficulties and lack of familiarity with Irish law. These barriers can cause significant delays in accessing abortion services and seriously impact on women’s physical and mental health. Our counsellors respond to the needs of women and girls most affected by the unavailability of abortion in Ireland by providing comprehensive information and sustained support, while working within a restrictive legal framework.

52 women and couples attended our face to face counselling service due to a diagnosis of foetal anomaly, accounting for 4% of our clients. This represents an increase of 26% compared to 2013. Many of these clients were referred to the IFPA by nurses and midwives in maternity hospitals, indicating that our counselling service is trusted by medical professionals nationwide. The IFPA provides specialised counselling to women and couples who receive a diagnosis of foetal anomaly, including practical information and emotional support. Counselling and support is provided during and after the pre-natal testing process and for as long as is needed.

In 2014, similar to previous years, where gestation was known, the majority of our face to face counselling clients (36%) attended their first counselling session before thirteen weeks gestation. This indicates that most women access information and support at an early stage of their pregnancy. Just under 10% of clients were in their second or third trimester of pregnancy.

Consistent with previous years, the majority (44%) of the IFPA’s face to face counselling clients in 2014 were aged between 25 and 34. Women and girls aged 24 and under accounted for 28% of clients, while 23% of clients were aged between 35 and 44. Women aged 44 and above accounted for 5% of clients, representing an increase of 38% compared to 2013. While an unplanned or crisis pregnancy can happen to a woman at any stage of her life, older women can be less informed about contraception than younger women. This highlights the importance of comprehensive sexual and reproductive health, information and services across all age groups.

In 2014, 32% of clients attended counselling with a partner, friend, family member or health professional.

**KEY STATISTICS 2014:**

- 2,093 clients received information through the IFPA National Pregnancy Helpline.
- 1,300 clients received face to face counselling.
- 172 clients received follow-up telephone support.
- 577 (44%) clients attended for post-abortion counselling.
- 146 (11%) of clients were migrant women.
- 52 (4%) clients received a diagnosis of foetal anomaly.
“Our clients are from all walks of life: they are girls, young women, older women, single women, women in a relationship or marriage, Irish women, migrant women... The reality is that an unplanned pregnancy, or a pregnancy which becomes a crisis, can happen to a woman at any stage of her life. At the IFPA, our counsellors are committed to understanding every client’s specific needs, to providing a non-judgmental space where they can openly discuss their feelings, and to offering comprehensive information and support so that they can make an informed choice.”

EVELYN GERAGHTY, IFPA COUNSELLING DIRECTOR

IFPA COUNSELLING LOCATIONS NATIONWIDE

01 LETTERKENNY
02 SLIGO
03 TUAM
04 DUNDEALK
05 DUBLIN CITY CENTRE
06 TALLAGHT
07 GOREY
08 WATERFORD
09 CORK
10 LIMERICK
11 GALWAY
Education & Training

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

2014 was a busy year, with the IFPA Education and Training Department providing training to over 180 people, and reaching many more through sexual health information stands and educational resources.

Our Speakeasy training was delivered to 91 participants. This eight week programme provides parents with the information and skills to talk to their children about relationships, sex and keeping safe. Participants included parents from Monaghan Family Resource Centre and South West Inner City Network in Dublin.

Building on Speakeasy, Speakeasy Plus supports parents or carers of a child with a disability to talk openly about sexual health and relationships. Speakeasy Plus was delivered to parents from Rathfarnham Educate Together School, Tallaght Education Centre and ABACAS Kilbarrack Special School. In line with the IFPA’s partnership approach, the training in Tallaght was delivered with RUA, Callan Institute, Saint John of God Hospitaller Ministries, and the training in Kilbarrack with Irish Autism Action. Both programmes are the only ones of their kind in Ireland and are supported by the HSE Crisis Pregnancy Programme.

Following the success of our Speakeasy programme delivered in Blackrock Education Centre in 2013, a collection of material on communicating sexual health with young people was made available in Deansgrange Library in Dublin in 2014. The collection features Speakeasy and other resources and is aimed at making sexual health communication more accessible to parents and carers in the community.

In 2014, our comprehensive one-day sexual health training was delivered to 36 people. This training covers the basics of sexual health, exploring issues such as consent, legislation, safer sex, contraception and sexually transmitted infections (STIs). Sexual health training was also delivered to Welfare Officers of the Union of Students of Ireland, HSE addiction nurses in Ballyfermot, Dublin, HSE nurses and counsellors in Waterford, and support workers at RUA, Callan Institute, Saint John of God Hospitaller Ministries.

Self-rated evaluations from all of the IFPA’s trainings delivered during 2014 were extremely positive, with participants testifying higher levels of self-confidence and knowledge on sexual health issues.

2014 saw the final year of the two-year project Keep Me Safe: Empowering Young People with Learning Disabilities. The first of its kind in Europe, the project aims to develop best practice for the prevention of abuse against young people with intellectual disabilities. Supported by the European Commission, it involves thirteen International Planned Parenthood Federation member associations, including the IFPA.

As part of the project, in February, IFPA Training and Development Coordinator, Anita Ghafoor-Butt, delivered a week-long training in Romania on sexuality and disability to support workers who work directly with people with intellectual disabilities. In April, she travelled to Latvia where she delivered training on communicating relationships and sexuality with people who have autism. Also in April, Keep Me Safe partners visited Ireland to examine first-hand our best practice training on sexuality and disability.

In June, the IFPA Education and Training Department concluded a seven-week training on relationships and sexuality with residents of Stewart’s Hospital in Dublin living with disabilities. The course was designed to support the participants’ move to independent housing. The IFPA’s Speakeasy training was delivered to social workers, occupational therapists and parents who supported the residents in their move. In December, Keep Me Safe partners gathered in Madrid to reflect on the achievements and outcomes of the project.

In 2014, the IFPA was invited to participate in a number of events related to sexual health. In June, we took part in the 26th Annual International Conference of the Irish Association of Teachers in Special Education by co-facilitating sessions on Relationships and Sexuality Education (RSE) for young people with intellectual disabilities. In November, we took part in Irish Autism Action’s annual Autism Exposition, where we held an information stand on sexual health for people with disabilities or extra support needs.

Our comprehensive range of educational resources continued to be in demand in 2014. Among the most popular was the IFPA’s Sexuality Education Teaching Kit. This resource provides information and resources on contraception, STIs and consent, as well as tips for facilitating sexuality education classes.
“The Keep Me Safe training had a very positive effect on all our service users. They have a much greater awareness and knowledge of all aspects of relationships including, how to stay safe in a relationship, assertiveness, and how to access help if required. Their confidence levels have grown, they feel more comfortable talking about relationships and are more open to discuss any concerns or issues they may have with family or support staff. The training developed positive relationships amongst the group and it has empowered them to exercise their rights.”

DEBBIE KELLEHER, INDEPENDENT LIVING COORDINATOR, STEWARDS CARE, KEEP ME SAFE TRAINING 2014
Youth Initiatives

The IFPA promotes the right of all young people to sexual and reproductive information and education, and high quality, confidential and affordable services. Through its medical, education and communications services, the IFPA provides clear and accurate information, advice and support to young people about sexual health, allowing them to make healthy and informed choices.

In 2014, we maintained our strong links with the Union of Students of Ireland (USI), the national representative body for students in third level education.

In February, we were a lead partner in the USI’s Sexual Health Awareness and Guidance (SHAG) Week, the aim of which is to promote positive sexual health among students. As part of SHAG Week, the IFPA Education and Training Department participated in the USI’s Sexual Health Roadshow by holding sexual health information stands in four colleges across Ireland: the National College of Ireland, Carlow IT, Galway Mayo IT and Dundalk IT. During the week, we provided information and advice on sexual health to students, including safer sex, contraception and sexually transmitted infections (STIs). Feedback was extremely positive. In particular, students enjoyed learning about correct condom use and testing their knowledge with a condom demonstration exercise. Some students used ‘beer goggles’ and experienced how perception can be altered by alcohol consumption and the need to remember this when practicing safe sex.

In August, we delivered a one-day sexual health training to eight Welfare Officers from the USI. The training aimed to build the capacity of the Welfare Officers in understanding and responding effectively to the sexual health needs of the students they support. Issues explored included sexual and medical consent, safer sex, STIs, contraception and unplanned or crisis pregnancies. The Welfare Officers then applied their learning in practical workshops. Self-rated evaluations were excellent. Every participant testified that their learning as a result of the training would support them in addressing students’ sexual health needs, while many also enjoyed the comprehensive and interactive nature of the training within a relaxed setting.

In September, the USI distributed 30,000 packs to first year students in colleges across Ireland during Fresher Week. The packs included sexual health information and an IFPA services leaflet.

As part of our engagement with young people, we deliver a Relationships and Sexuality Education (RSE) workshop to supplement the RSE curriculum in secondary schools. This five-hour comprehensive sexual health session covers everything from human reproduction to self-esteem and negotiation, contraception, STIs and HIV/AIDS. In 2014, we delivered an RSE workshop to Transition Year students at Malahide Community School in Dublin.

In 2014, we also continued our close partnership with the youth clinic at St. James’ GUIDE Clinic in Dublin. Through this partnership, the GUIDE clinic refers young people to the IFPA for youth-friendly contraceptive services and counselling for unplanned or crisis pregnancies.

HIGHLIGHTS:

- Participation in the Union of Students of Ireland’s Sexual Health Roadshow, providing information and advice on sexual health to students in four colleges across Ireland.
- Delivery of RSE/Life Skills to students of Malahide Community School in Dublin.
“The IFPA presented an incredibly practical and realistic guide to dealing with issues arising around sexuality and sex, appropriate for real world conversations. It was very educational and worthwhile for anyone dealing with young people, particularly in university or third level settings. The IFPA talked sense about sex.”

SIONA CAHILL, WELFARE OFFICER, MAYNOOTH UNIVERSITY, ONE DAY SEXUAL HEALTH TRAINING PARTICIPANT, AUGUST 2014
Communications & Campaigns

In 2014, 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, we teamed up with CervicalCheck, the National Cervical Screening Programme, to deliver the Pearl of Wisdom Campaign for a sixth consecutive year. Held during European Cervical Cancer Prevention Week, this national awareness campaign encourages all women aged 25 to 60 to prevent cervical cancer by availing of free cervical screening through CervicalCheck. The IFPA distributed over 17,000 Pearl of Wisdom pins, the international emblem of cervical cancer prevention, to women across Ireland through key health promotion networks, while RTÉ broadcaster, Maura Derrane, fronted our national media campaign, generating significant coverage. The campaign was also widely promoted on social media. See Key Events.

In March, we relaunched our quarterly e-newsletter, which provides information on the IFPA’s work on sexual and reproductive health and rights to over 1,000 subscribers.

In May, we launched the International Planned Parenthood’s I Decide campaign in Ireland, which calls for sexual and reproductive health and rights to be prioritised in the new development agenda that will replace the Millennium Development Goals after 2015. The campaign launch received substantial press coverage. See Key Events.

May also saw the opening of the IFPA’s treatment service for female genital mutilation (FGM). Based in our Dublin city centre clinic, the service provides free specialist care to women and girls affected by FGM. We hosted a press conference to introduce the service, during which IFPA Medical Director, Dr Caitríona Henchion, provided a comprehensive briefing. Representatives from the HSE Social Inclusion Unit, supporters of the service, and AkiDwA, the Migrant Women’s Network, also participated, while an FGM survivor shared her experience of FGM. There was significant media interest, with Dr Henchion taking part in print and broadcast interviews. Following the briefing, the service was opened by Minister of State with Responsibility for Primary Care, Alex White TD, at a special event for medical professionals, women from affected communities, parliamentarians and non-governmental organisations. See Focus on FGM and Key Events.

Throughout 2014, we highlighted the harms caused by Ireland’s restrictive laws on abortion. In June, we responded to annual statistics on the number of women and girls from the Republic of Ireland accessing abortion services in the UK. Also in June, following the review of Ireland’s human rights record by the UN Human Rights Committee, and the Committee’s call on the Government to reform its abortion laws, IFPA Chief Executive, Niall Behan, published an opinion piece in The Irish Times. In September, to mark the Global Day of Action for Access to Safe and Legal Abortion, the Chief Executive published an opinion piece in TheJournal.ie on the huge challenges facing women asylum seekers in Ireland in trying to access abortion services in another state. In December, we again highlighted the difficulties facing women with travel restrictions in travelling for abortion services. The issue was highlighted on the front page and inside of The Irish Times, featuring interviews with the IFPA.

Throughout 2014, the IFPA’s expert view was sought for news stories on a range of issues related to sexual and reproductive health and rights, including sex education, contraception, vasectomy, sexually transmitted infections, unplanned pregnancy, abortion, fertility, cervical cancer, menopause and FGM. The IFPA featured in at least 300 hits in print, online and broadcast media outlets. Key broadcast activities included interviews on TV3 News, TV3’s Ireland AM and Midday, RTÉ’s Morning Edition, RTÉ Radio News At One and 2FM’s Colm Hayes Show.

The IFPA is a signatory to the Dóchas Code of Conduct on Images and Messages. As such, we are committed to promoting respect, dignity throughout all our communications and avoiding images and related messages that promote stereotypes and inequality.

OTHER HIGHLIGHTS:

- Production of factsheets on sexual and reproductive health and rights and the post-2015 development framework to support the All Party Oireachtas Interest Group on Sexual and Reproductive Health and Rights and Development. See International Advocacy.


- Production of leaflet ‘Women’s Health Service’ outlining the IFPA’s FGM Treatment Service. The leaflet is available in English, French and Arabic and can be downloaded from the IFPA website or requested from the IFPA Head Office.
“We spoke to over 350 women during the week and had a very positive response, with many women admitting it was an issue they needed to address. It was a great opportunity to make women aware of the importance of a simple smear test in the early detection and treatment of cervical cancer. We saw it as an opportunity to promote the issue using a positive and proactive message of maintaining wellbeing and a healthy lifestyle.”

SUSAN FOLEY, COLPOSCOPY NURSE SPECIALIST, KERRY GENERAL HOSPITAL, PARTICIPANT IN THE PEARL OF WISDOM CAMPAIGN 2014
Policy Development & Human Rights Advocacy

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

In 2014, we focused on the fourth periodic review of Ireland’s implementation of the International Covenant on Civil and Political Rights (ICCPR) by the United Nations (UN) Human Rights Committee. We provided evidence to the Committee about the failure of Ireland’s abortion laws to comply with the Government’s human rights obligations and the harms caused to women and girls as a result of the denial of abortion services in Ireland.

In July, IFPA Senior Policy Advocacy Officer, Maeve Taylor, travelled to Geneva for the two-day hearing to provide information to the Committee on the impact of Ireland’s restrictive abortion laws. In addition to joining a lunchtime briefing session organised by the Irish Council for Civil Liberties (ICCL) and the Geneva-based Civil and Political Rights Centre, she met with a number of Committee members individually, prior to and during the review. A key IFPA strategy was to ensure that a strong collective statement was made on behalf of a number of women’s, human rights and reproductive rights organisations during the hearing. See Key Events.

During its dialogue with the Government delegation, Committee members were highly critical of Ireland’s abortion laws and of the Government’s attempts to justify its failure to provide abortion services. Committee Chair, the former UN Special Rapporteur on Torture, Professor Nigel Rodley, was particularly trenchant in his criticism. He criticised how Irish abortion law distinguishes between the life and health of pregnant women. He also expressed disbelief in a system where prenatal life prevails over the primary right to life of a woman, describing women in Ireland pregnant as a result of rape and denied abortion as “treated as vessels and nothing more”.

In its Concluding Observations, the Committee called on the Government to revise its laws on abortion, including the Constitution, to provide for abortion in cases of rape, incest, serious risk to the health of a woman, or fatal foetal anomaly. IFPA Chief Executive, Niall Behan, responded to the recommendations in an opinion piece in The Irish Times. See Communications & Campaigns.

In September, the IFPA made submissions to the UN Committee on Economic, Social and Cultural Rights in advance of its review of Ireland’s human rights record in 2015, and to the Council of Europe regarding implementation of the 2010 ruling of the European Court of Human Rights in the case of A, B and C v Ireland. The IFPA expressed concern at the inadequacy of the 2013 Act to give effect to the right to abortion where a pregnant woman’s life is at risk.

Also in September, IFPA Chief Executive, Niall Behan, participated in the Building a Coalition to Repeal the Eighth Amendment Conference. In his speech, he highlighted the impact of the criminalisation of abortion and the need for legal reform that goes beyond legislating for abortion in exceptional cases and ensures that all women and girls in Ireland have access to abortion services.

In 2014, the IFPA also made a submission to the Department of Foreign Affairs and Trade in relation to the second Irish National Action Plan on Women, Peace and Security, calling for more attention to sexual and reproductive health and rights in the second Plan. We also made a submission to the Department of Justice and Equality in relation to its review of Section 5 of the Criminal Law (Sexual Offences) Act 1993. The IFPA highlighted how the current law falls short of human rights standards and recommended that its replacement focus on informed consent and access to sexual health information and services for people with intellectual disabilities.

During 2014, the IFPA also provided policy briefings and expert opinion to other agencies and organisations on a wide range of sexual and reproductive health and rights related issues.
“We know that referendums and bills to deal with exceptional circumstances will get caught up in definitions, ideology and political compromises— just like the Protection of Life During Pregnancy Act 2013. Like the 2013 Act, legislation designed to exclude all but particular groups of women will fail to allow access to abortion to all of the women it aims to include. The prohibition and criminalisation of abortion in Ireland, and the equal right the Constitution affords to the life of the unborn with that of a pregnant woman is the problem—and there lies the solution.”

IFPA Senior Policy and Advocacy Officer, Maeve Taylor, addressing United Nations Human Rights Committee members during the Committee’s fourth periodic review of Ireland, Geneva, July 2014
International Advocacy

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

In 2014, the IFPA continued to act as Secretariat to the All Party Oireachtas Interest Group on Sexual and Reproductive Health and Rights and Development. The All Party Group was established in 2000 with the purpose of ensuring that the landmark Programme of Action of the 1994 International Conference on Population and Development (ICPD) would be central to Irish development policy. With members across all parties in the Dáil and Seanad, the group works to advance sexual and reproductive health and rights (SRHR), with a particular focus on overseas development policy. In 2014, the All Party Group focused on initiatives to highlight the need for SRHR to be central to the new global development framework, the Sustainable Development Goals, which will replace the Millennium Development Goals when they expire after 2015.

In March, the All Party Group marked the 20th anniversary of the ICPD with a photographic exhibition ‘Putting Reproductive Health at the Heart of Development Policy’. 22 All Party Group members participated. Each chose a photograph highlighting an aspect of sexual and reproductive health—for example, child marriage, maternal mortality, the feminisation of HIV/AIDS, reproductive health in emergencies—and wrote a personal response. The exhibition was launched by the Minister for Development and Trade, Joe Costello TD, at the Mansion House to coincide with International Women’s Day. It was subsequently displayed for a month in the Irish Aid Volunteering and Information Centre, where it was viewed by almost 1,000 visitors.

Inspired by the photographic exhibition, the All Party Group went on to develop a series of factsheets on the importance of SRHR in the Sustainable Development Goals. The factsheets provide comprehensive and up-to-date information on the crucial role of SRHR in four key areas - young people, education, health and family planning, and gender equality.

In April, three All Party Group members—Senator Jillian van Turnout, Ciara Conway TD and Marcella Corcoran Kennedy TD—participated in the 6th International Parliamentarians’ Conference on the Implementation of the ICPD Programme of Action in Stockholm. Over 260 parliamentarians from 134 countries gathered for the conference, the major outcome of which was the Stockholm Statement of Commitment. This statement represents the strongest call by parliamentarians to date to implement the ICPD Programme of Action. Influenced by the conference, in May, All Party Group members Senator Jillian van Turnout and Ivana Bacik introduced an amendment to Irish law in relation to child marriage, a major focus on the conference. The amendment would remove a provision allowing minors to marry following a court exemption. A small inter-departmental group was set up to examine all options for amendment.

In August, All Party Group member, Helen McEntee TD, joined a group of parliamentarians from seven countries on a study tour to Ghana and the Ivory Coast to learn about sexual and reproductive health in the West African countries. During the visit, which was organised by the European Parliamentary Forum, the group visited a number of innovative projects and witnessed some of the greatest challenges facing both counties in the promotion of sexual and reproductive health.

During the year, All Party Group members raised SRHR issues within the Dáil and Seanad, including during meetings with the Joint Committee on Foreign Affairs and the Committee on Health and Children. A parliamentary question to the newly appointed Minister of State for Overseas Development Assistance, Trade Promotion and North South Co-operation, Seán Sherlock TD, elicited a positive statement of the Government’s ongoing commitment to the ICPD agenda.

Throughout 2014, the IFPA shared its expertise in promoting the fulfilment of SRHR through human rights advocacy with member associations of the International Planned Parenthood Federation (IPPF) in Georgia, Macedonia and Romania. See Advocacy in Action.

OTHER HIGHLIGHTS:

- As collaborating partner with the UNFPA, the IFPA organised the Irish launch of the UNFPA State of World Population Report 2014, The Power of 1.8 Billion: Adolescents, Youth and the Transformation of the Future. Minister of State for Overseas Development Assistance, Trade Promotion and North South Co-operation, Seán Sherlock TD, launched the report, which explores the potential of young people to transform countries’ futures, provided sexual and reproductive health and rights are realised. See Key Events.

- As a member of EuroNGOs, the European network of NGOs on sexual and reproductive health and rights, population and development, the IFPA participated in the EuroNGOs Annual Conference 2014 in Madrid, Putting the Puzzle Together: Sexual and Reproductive Health and Rights (SRHR) in a Post-2015 World. The conference focused on strategies to advance SRHR in the post-2015 development process.

- As a member of Countdown 2015 Europe, a consortium of 16 European organisations working on sexual and reproductive health and rights and development, the IFPA monitored Irish Aid policy and funding on reproductive health, and engaged in advocacy with Irish Aid and other stakeholders in relation to the post-2015 development process.
“Education is the great liberator for girls worldwide. It liberates the mind to achieve its potential and liberates girls from poverty and exploitation. Education empowers girls to find their voice in their own households and communities and in the decisions that affect their lives. Education also reduces the likelihood of child marriage and delays childbearing, leading to healthier birth outcomes.

Education is indestructible.”

AODHÁN Ó RÍORDAÍN, TD, ‘PUTTING REPRODUCTIVE HEALTH AT THE HEART OF DEVELOPMENT POLICY’, MARCH 2014

The Berhane Programme, Ethiopia, which provides economic and other incentives for girls to stay in school. © Mark Tuschman/UNFPA
The IFPA has for many years used human rights mechanisms to highlight the impact of regressive laws and policies on women’s and girls’ sexual and reproductive health and rights (SRHR). We have presented evidence to United Nations (UN) human rights bodies that oversee human rights covenants and conventions. In 2014, we shared our human rights advocacy experience through a project funded by the International Planned Parenthood Federation (IPPF).

The initiative saw the IFPA support IPPF member associations in three countries—Georgia, Macedonia and Romania—that were due to be reviewed by UN human rights committees. Each country has in common regressive SRHR policies, cuts in funding for essential SRHR services and little or no comprehensive sexuality education. Georgia and Macedonia have also seen the introduction of new procedural barriers to access to abortion. In addition, the particular cultural, economic and political environment in each country is causing or contributing to failures to realise rights that are guaranteed by national laws and under international human rights norms.

Like the IFPA, our partner organisations in those states are committed to rights based laws, policies and practices that ensure women’s dignity and respect women’s reproductive autonomy.

Georgian organisation HERA-XXI has 6 clinics that provide services to the regions where the need for sexual and reproductive health services is most acute. Health Education and Research Association (HERA) Macedonia is the leading national NGO working on HIV and SRHR, and advocates for sexuality education and for access to safe abortion services. The Romanian Society for Education on Contraception and Sexuality (SECS) promotes public awareness of SRHR and provides training to sexual and reproductive health personnel.

Georgia was due for review by two UN Committees, the monitoring bodies for the ICCPR and the CEDAW. For Nino Tsuleiskiri, Executive Director of HERA-XXI, burning issues included the Georgian Government’s failure to address the prevalence of forced and child marriage and the introduction of new legal barriers to abortion. New procedural barriers to access to abortion services and the impacts on women were also a priority concern for HERA Macedonia Programme Director, Drasko Kostovski, as his country’s review on implementation of the ICCPR
approached. Dr Borbala Koo, Executive Director of SECS focused on Romania’s review by the Committee on Economic, Social and Cultural Rights: she aimed to highlight the state’s failure to provide quality sexuality education and effective to access to contraception.

The project began with a three-day workshop in Dublin. The IFPA advocacy team was joined by Soizick Martin from the IPPF European Region office in Brussels. We were fortunate to also have the participation of international SRHR experts Leah Hoctor of the International Commission of Jurists and Johanna Westesen and Katrine Thomasen of the Centre for Reproductive Rights (CRR). The group also met Deirdre Duffy of the Irish Council for Civil Liberties, Anastasia Crickley, a member of the UN Committee on the Elimination of Racism, Senator Ivana Bacik and Ciara Conway TD.

The participants left Dublin equipped with knowledge of human rights standards and monitoring processes, and with ideas about how to present evidence of their states’ failures to uphold human rights obligations. Over the following months, each prepared an advocacy strategy, and, with technical support from the IFPA, drafted written submissions, summary documents and oral statements—and finally made their case directly to the experts at the UN in Geneva.

Georgia was reviewed by the HRC and the CEDAW in July. Accompanied by IFPA Senior Policy and Advocacy Officer, Maeve Taylor, Ms Tsuleiskiri made powerful oral statements to both Committees and held a number of face-to-face meetings with Committee members. She explained that access to abortion in Georgia is increasingly difficult, in particular for rural women and women living in poverty. Yet use of contraception is low, due to lack of political will, insufficient funding, inadequate access to information, and myths and stereotypes about contraceptive use. She highlighted discrimination against people with HIV/AIDS in access to services. She presented research by HERA-XXI documenting the serious consequences of child marriage and early pregnancy and childbirth for girls’ health and access to education.

Romania was the next country to be reviewed. SECS worked closely with Romanian NGOs, in particular the Euregional Center for Public Initiatives (ECPI), to ensure that SRHR was highlighted by the Committee. In their oral statements and briefings, SECS representative Florin Buhuceanu and ECPI’s Lustina Ionescu explained that Romania’s high rate of teenage pregnancy is linked to lack of access to sexuality education and contraception. While vulnerable women are entitled to free contraception, the Government has failed to allocate funds for their procurement since 2013. And since family planning services are predominantly located in the urban areas, rural women tend to be deprived of quality services and information.

Prior to Macedonia’s review by the HRC, the IFPA set up a meeting for Drasko Kostovski with a former member of the Committee and conducted a mock Committee session via Skype. Once in Geneva, a well-prepared Mr Kostovski explained to the human rights experts that the new provisions of the abortion law—mandatory dissuasive counselling, written request, a three-day waiting period and greatly increased fines for providers who infringe any of the new procedures—have no health benefits for women, and are not in line with standards of the World Health Organisation. He presented case studies on the impacts on women of the new waiting period. He also showed the Government’s anti-abortion campaign materials, which stigmatises women who seek abortion services.

All three advocacy initiatives were successful.

Both expert committees that examined Georgia called for urgent measures to address early, forced and child marriage, lack of access to sexuality education and contraception, and for public awareness campaigns to tackle the root causes of sex selective abortion.

The CESC called on Romania to adopt a national strategy on SRHR, to implement a mandatory programme of sexuality education in schools, and to ensure that abortion and contraception services are available, accessible and affordable without discrimination, including to adolescents.

In its observations to Macedonia, the HRC called on the State to end its anti-abortion campaign and eliminate procedural barriers that would lead women to resort to illegal and unsafe abortion. These recommendations give the organisations’ advocacy the status of international human rights standards, and will be a powerful tool for NGOs in the three countries as they work for sexual and reproductive health and rights.

The IFPA gave support, advice and encouragement throughout the advocates’ journeys from Dublin to the UN in Geneva: from initial training, to development of advocacy strategies, to making sure our partners’ information was presented as effectively as possible to each Committee. The administrative and financial support of the IPPF allowed the organisations to participate fully. Geneva-based human rights organisations, such as the CRR and the Centre for Civil and Political Rights were also generous with assistance.

But the success of the project was only possible because of the advocacy skills of the three organisations, and their commitment to seeking accountability for women’s reproductive rights.
Key Events

Pearl of Wisdom Campaign

In January, the IFPA teamed up with CervicalCheck, the National Cervical Screening Programme, for a sixth consecutive year to highlight European Cervical Cancer Prevention Week in Ireland with the Pearl of Wisdom campaign.

Cervical cancer is the second most common cancer affecting women worldwide. In Ireland, approximately 300 women are diagnosed with cervical cancer each year and over 90 women die from the disease. However it is also one of the most preventable cancers through regular screening. The Pearl of Wisdom campaign encourages all women aged between 25 and 60 in Ireland to prevent cervical cancer by availing of free regular screening through CervicalCheck.

In 2014, the IFPA distributed over 17,000 Pearl of Wisdom packs to women across Ireland through health promotion networks in five target areas: Dublin Inner City, Cork, Kerry, Waterford and Limerick. The packs, which included Pearl of Wisdom pins, information leaflets, display boxes, and posters, were sent to pharmacists, hospitals, Irish Cancer Society Daffodil Centres, GPs, primary health care projects and community organisations. Pearl of Wisdom pins were also sent to all female parliamentarians. Several TDs supported the campaign on social media, while MEPs Nessa Childers and Phil Prendergast issued a press release.

RTÉ broadcaster, Maura Derrane, once again lent her support by launching the campaign. The campaign received at least 50 hits in national and local press, including in the Irish Times, Irish Independent, Irish Examiner and other publications. IFPA Medical Director, Dr Caitriona Henchion, also conducted several broadcast interviews, including on TV3’s Ireland AM and Midday, RTÉ One’s Morning Edition, 2FM’s Colm Hayes Show and many local radio stations.

Sexual Health Awareness and Guidance Week

An important part of the IFPA’s work is promoting the right of all young people to sexual and reproductive information and education, and high quality and affordable services. This allows young people to make healthy and informed choices about their sexual health and wellbeing.

In February, following on from previous years, the IFPA was again invited to participate in the Union of Students of Ireland’s Sexual Health Awareness and Guidance (SHAG) Week. The aim of SHAG Week is to promote positive and healthy attitudes towards sex among students in Ireland and to raise awareness on all aspects of sexual health.

To highlight the week, the IFPA Education and Training Department took part in USI’s Sexual Health Roadshow, visiting four colleges - the National College of Ireland, Carlow IT, Galway Mayo IT and Dundalk IT - with sexual health education stands. IFPA trainers provided information and advice to students on a range of issues related to sexual health, including safer sex, contraception, sexually transmitted infections and unplanned pregnancy. The IFPA’s Sexuality Education Teaching Kit was a key resource used at the stand – this kit provides information on all aspects of sexual health and includes a number of contraceptive samples for practical learning.

Feedback from students at the four colleges was extremely positive. In particular, students enjoyed learning about correct condom use and testing their knowledge with a condom demonstrator. Some students used ‘beer goggles’ during the exercise and experienced how perception can be altered by alcohol and the need to remember this when practicing safe sex.
I Decide My Future: one of the four key rights of all women and girls highlighted in the IPPF's I Decide campaign launched in May 2014

In May, the International Planned Parenthood Federation (IPPF) launched the I Decide campaign, which urges world leaders to prioritise women’s and girl’s sexual and reproductive health and rights. As IPPF’s Irish partner, the IFPA launched the global campaign in Ireland.

I Decide focuses on four key rights of all women and girls: the right to decide who they live with; what happens to their bodies; the size of their family (if, when and how many children they have); and to determine their own futures. The campaign is calling for these basic rights to be prioritised in the new global development framework that will replace the Millennium Development Goals when they expire after 2015, the Sustainable Development Goals. A petition aiming to collect one million signatures is to be presented to United Nations Secretary General Ban Ki Moon in late 2015. The campaign forms part of IPPF’s Vision 2020 - a call to action consisting of ten steps that global leaders can take to ensure that sexual and reproductive health and rights are central to the Sustainable Development Goals and become a reality in every community around the world.

The IFPA launched I Decide in Ireland by issuing a press release and promoting the campaign on social media. The campaign received extensive coverage, including in The Irish Times, TheJournal.ie and the Irish Medical News. Several TDs, Senators and MEPs showed their support on social media and the campaign was highlighted in the Seanad by Senator Jillian van Turnhout during a debate on violence against women globally. During 2014, the IFPA continued to highlight the campaign and encourage supporters to sign the I Decide online petition.

Inspired by the exhibition, in late 2014, the All Party Group developed a series of factsheets on the importance of sexual and reproductive health and rights for the Sustainable Development Goals. See International Development.

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**REPRODUCTIVE HEALTH AND DEVELOPMENT**

The All Party Oirechtais Interest Group on Sexual and Reproductive Health and Rights and Development, of which the IFPA acts as Secretariat, works to advance sexual and reproductive health and rights, with a particular focus on overseas development policy.

In March, the All Party Group marked the 20th anniversary of the Programme of Action of the 1994 International Conference on Population and Development with a photographic exhibition ‘Putting Reproductive Health at the Heart of Development Policy’. 22 All Party Group members participated in the exhibition. Each selected an image that resonated with them and wrote a short personal text highlighting the need for the issue to be addressed in development policy.

The exhibition images, most of which were donated by the United Nations Population Fund, presented different aspects of reproductive health. The images depicted not only challenges, but how reproductive health is linked with women’s empowerment.

The exhibition was launched at Dublin’s Mansion House by the Minister of State for Development and Trade, Joe Costello TD, at a special event for parliamentarians and development agencies. Minister Costello highlighted that sexual and reproductive health “is central to the rights of women and children” and must be at the heart of the post-2015 development framework, the Sustainable Development Goals. Following the launch, the exhibition was displayed for a month at the Irish Aid Volunteering and Information Centre, where it was viewed by almost 1,000 members of the public.

Inspired by the exhibition, in late 2014, the All Party Group developed a series of factsheets on the importance of sexual and reproductive health and rights for the Sustainable Development Goals. See International Development.

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**I DECIDE CAMPAIGN**

In May, the International Planned Parenthood Federation (IPPF) launched the I Decide campaign, which urges world leaders to prioritise women’s and girl’s sexual and reproductive health and rights. As IPPF’s Irish partner, the IFPA launched the global campaign in Ireland.

I Decide focuses on four key rights of all women and girls: the right to decide who they live with; what happens to their bodies; the size of their family (if, when and how many children they have); and to determine their own futures. The campaign is calling for these basic rights to be prioritised in the new global development framework that will replace the Millennium Development Goals when they expire after 2015, the Sustainable Development Goals. A petition aiming to collect one million signatures is to be presented to United Nations Secretary General Ban Ki Moon in late 2015. The campaign forms part of IPPF’s Vision 2020 - a call to action consisting of ten steps that global leaders can take to ensure that sexual and reproductive health and rights are central to the Sustainable Development Goals and become a reality in every community around the world.

The IFPA launched I Decide in Ireland by issuing a press release and promoting the campaign on social media. The campaign received extensive coverage, including in The Irish Times, TheJournal.ie and the Irish Medical News. Several TDs, Senators and MEPs showed their support on social media and the campaign was highlighted in the Seanad by Senator Jillian van Turnhout during a debate on violence against women globally. During 2014, the IFPA continued to highlight the campaign and encourage supporters to sign the I Decide online petition.

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Inspired by the exhibition, in late 2014, the All Party Group developed a series of factsheets on the importance of sexual and reproductive health and rights for the Sustainable Development Goals. See International Development.

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**I decide... my future**

Global Day of Action 13 May 2014

I Decide My Future: one of the four key rights of all women and girls highlighted in the IPPF’s I Decide campaign launched in May 2014.
Key Events

OPENING OF FGM TREATMENT SERVICE

In May, a treatment service for female genital mutilation (FGM) was opened at the IFPA’s Dublin city centre clinic. The first of its kind in Ireland, the service offers free specialised medical and psychological care to women and girls in Ireland who have experienced FGM.

Funded by the HSE Social Inclusion Unit and supported by AkiDwA, the Migrant Women’s Network, the service provides high quality medical care and counselling. Clients can also avail of wider sexual health services such as contraception and cervical screening.

Following a press conference led by the IFPA, Minister of State with Responsibility for Primary Care, Alex White TD, opened the service at a special event for healthcare professionals, women from affected communities, parliamentarians and non-governmental organisations. Minister White highlighted how the IFPA’s service addresses the specific healthcare needs of women and girls affected by FGM, as well as reaffirming the role of primary care providers: “The development of this service is a unique example of primary care in action, addressing diverse health needs of our community. It is an example of real, responsive primary care that meets the health needs of women and young girls in an accessible setting, providing holistic, integrated care and support”.

Diane Nurse, HSE National Lead for Social Inclusion, Dr Comfort Momoh MBE, FGM and Public Health Specialist in the UK, Salome Mbugua, Director of AkiDwA, and IFPA Medical Director, Dr. Caitriona Henchion, also spoke at the opening. There was significant media interest in the service, with Dr Henchion taking part in interviews with RTÉ, TV3, The Irish Times and other publications.

During 2014, the IFPA carried out a number of outreach and communication activities to promote the service among healthcare professionals and women from FGM-practicing communities.

UN REVIEW OF IRELAND’S ABORTION LAWS

During the fourth periodic review of Ireland by the United Nations Human Rights Committee in July, a collective statement was made by the IFPA, the Irish Council for Civil Liberties, the Abortion Rights Campaign, Doctors for Choice, the Women’s Human Rights Alliance, Lawyers for Choice, Termination for Medical Reasons, Ipas and the Centre for Reproductive Rights:

"Under the Protection of Life During Pregnancy Act 2013 abortion is permitted only where there is a risk to a pregnant woman’s life. [The Act] introduces significant barriers to accessing a lawful abortion, which discriminate against women with mental health problems.

Neither the Act nor the July 2014 guidance issued to doctors on its operation bring Ireland into compliance with the Covenant: pregnant women can be denied care; abortion remains criminalised. The threat of 14 years imprisonment hangs over pregnant women whose health is at risk, where there is a foetal anomaly, where pregnancy is the result of a crime, or in any other circumstances. This is cruel and degrading.

The State will tell you that the Act criminalises pregnant women and their doctors because this is necessary under the Constitution. However, Irish legal opinion on this matter is far from settled. And if this is the case, the State must call a referendum on this constitutional provision.

The State justifies its restrictive laws by permitting travel to and information about abortion in other jurisdictions. This abdication of State responsibility to treat women with dignity by providing necessary healthcare discriminates against women, who must carry the entire financial, practical and emotional burden of accessing services abroad. This burden falls most heavily on minors, women on low incomes, and women who cannot travel freely to another state."

See Policy Development & Human Rights Advocacy for more.
STATE OF WORLD POPULATION REPORT


Minister of State for Overseas Development Assistance, Trade Promotion and North South Co-operation, Seán Sherlock TD, launched the report, which explores the potential of the world’s 1.8 billion youth to drive economic and social development and transform their countries’ futures. The report highlights how this ‘demographic dividend’ can only occur if states ensure the right policies and investments in health and education are in place – including sexual and reproductive health.

In launching the report, Minister Sherlock stated that the unprecedented high proportion of youth in the world today is not a challenge but “an opportunity for the entire global population”. Deputy Director of UNFPA Technical Division Dr Mona Kaidbey presented the report’s findings and highlighted how Ireland’s economic transformation in the 1990s was accompanied by the right health and education policies. The event was chaired by Olivia Mitchell TD, Chair of the All-Party Oireachtas Group on Sexual and Reproductive Health and Rights and Development, who highlighted that sexual and reproductive health and rights must be central to development policy.

Guests at the launch included ambassadors, diplomatic staff, NGO representatives, representatives from Irish Aid and the Department of Foreign Affairs and Trade, and parliamentarians. The event received substantial media coverage, including interviews with Dr Mona Kaidbey on RTE One’s Morning Edition and Newstalk’s Pat Kenny Show, as well as coverage in The Irish Times, Irish Examiner, Irish Independent and other publications and online media.

IRISH AID FUNDING EMPOWERS VULNERABLE YOUNG PEOPLE IN BOLIVIA

A grant from Irish Aid in 2014 allowed the IFPA’s Bolivian partner CIES (Centro de Investigación, Educación y Servicios) to go from strength to strength. CIES is a non-governmental organisation that provides sexual and reproductive health services to some of Bolivia’s most vulnerable young people.

CIES uses the term “youth living in extremely difficult circumstances”, or YEDC, as a non-stigmatising way of describing its clients and believes that creating a culture of empathy and solidarity with street youth is essential for improving state health services.

Only 10 years ago, young homeless people were routinely refused access by state health services. CIES has worked with health personnel to understand the role of early trauma and poverty in shaping the behaviour of YEDC, and this greatly helps clinic staff to respond with greater sensitivity to YEDC and more appropriately to their health needs.

At a national level, CIES works for policy change to improve the treatment of young homeless people by the health services and for change in institutional culture in the public sector through the development of YEDC-friendly protocols.

A key advocacy tool is Bolivia’s Ley de la Juventud (Youth Law), which obliges service providers to treat young people living with HIV or substance addiction with respect. CIES works for the enforcement of this legal obligation. In the words of CIES Director, Dr Jhonny Lopez, “we must not be content to allow these transformative words to remain only on paper”.

Empowerment of YEDC is a critical strategy. CIES works through its National Youth Network, “Tú Decides” (You Decide) to facilitate adolescents to understand and demand their rights. A major achievement in 2014 was the guarantee of health insurance cover to YEDC in a new national health plan for adolescents.
**Financial Report**

**INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2014**

<table>
<thead>
<tr>
<th>CONTINUING OPERATIONS</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>Income</td>
<td>1,995,269</td>
<td>2,398,663</td>
</tr>
<tr>
<td>Expenditure</td>
<td>(2,012,786)</td>
<td>(2,362,642)</td>
</tr>
<tr>
<td>Surplus / (Deficit) on ordinary activities before interest</td>
<td>(17,517)</td>
<td>36,021</td>
</tr>
<tr>
<td>Interest payable and similar charges</td>
<td>(9,217)</td>
<td>(10,371)</td>
</tr>
<tr>
<td>Surplus / (Deficit) for the financial year</td>
<td>(26,734)</td>
<td>25,650</td>
</tr>
</tbody>
</table>

*No recognised gains or losses other than the surplus or deficit for the above two financial years.*
## BALANCE SHEET AS AT 31 DECEMBER 2014

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FIXED ASSETS</strong></td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Tangible assets</td>
<td>257,291</td>
<td>261,678</td>
</tr>
<tr>
<td><strong>CURRENT ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stocks</td>
<td>13,342</td>
<td>22,021</td>
</tr>
<tr>
<td>Debtors</td>
<td>60,285</td>
<td>54,632</td>
</tr>
<tr>
<td>Cash at bank and in hand - unrestricted</td>
<td>192,437</td>
<td>167,192</td>
</tr>
<tr>
<td></td>
<td>266,064</td>
<td>243,845</td>
</tr>
<tr>
<td>Creditors: amounts falling due within one year</td>
<td>(454,913)</td>
<td>(418,771)</td>
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<tr>
<td>Net current liabilities</td>
<td>(188,849)</td>
<td>(174,926)</td>
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<tr>
<td>Total assets less current liabilities</td>
<td>68,442</td>
<td>86,752</td>
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<tr>
<td>Creditors: amounts falling due after more than one year</td>
<td>(49,639)</td>
<td>(35,030)</td>
</tr>
<tr>
<td>Capital Grants</td>
<td>(17,894)</td>
<td>(24,079)</td>
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<tr>
<td>Net assets/(liabilities)</td>
<td>909</td>
<td>27,643</td>
</tr>
<tr>
<td><strong>RESERVES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenue reserves account</td>
<td>909</td>
<td>27,643</td>
</tr>
<tr>
<td>Members’ funds</td>
<td>909</td>
<td>27,643</td>
</tr>
</tbody>
</table>

On behalf of the board: Kelly Mackey and Natalie McDonnell
Board of Directors

**Board of Directors**

Kevin Baneham
Ruth Carroll
Siobhan Curran
Gráinne Denning
Aoiile Dermody
Cliona Doyle
Laura Harmon
Linda Kelly
Kelly Mackey
Natalie McDonnell
Leslie Sherlock **Chairperson**

**Meeting Attendance**

Kevin Baneham: 4/5
Ruth Carroll: 4/6
Siobhan Curran: 4/6
Gráinne Denning: 4/5
Aoiile Dermody: 1/2
Cliona Doyle: 5/6
Laura Harmon: 3/5
Linda Kelly: 5/6
Kelly Mackey: 6/6
Natalie McDonnell: 1/1
Leslie Sherlock: 6/6

**Staff**

In 2014 the staff of our main departments were:

- **Chief Executive**: Niall Behan
- **Medical Director**: Dr. Caitriona Henchion
- **Counselling Director**: Evelyn Geraghty
- **Senior Policy & Advocacy Officer**: Maeve Taylor
- **Training & Development Manager**: Anita Ghafoor-Butt
- **Financial Controller**: Ben Howe
- **Clinic Administrator, Dublin City Centre**: Deirdre Jones
- **Clinic Administrator, Tallaght**: Annette Smith

IFPA staff members are based in the organisation’s head office in Dublin city centre, medical clinics in Dublin city centre and Tallaght, and 11 pregnancy counselling centres across Ireland. In 2014, the IFPA had a staff complement of 43 people. The organisation welcomed new staff members and said goodbye to others. The IFPA was also assisted in its work by a number of dedicated volunteers.

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**IFPA Organisational Chart**

- **Membership**
- **Board of Directors**
- **Chief Executive Officer**
  - **Counselling**
  - **Medical**
  - **Advocacy**
  - **Education and Training**
  - **Financial**
  - **Director of Counselling**
    - **Medical Director**
    - **Clinic Administrators (2 clinics)**
    - **Senior Policy and Advocacy Officer**
    - **Training and Development Manager**
    - **Financial Controller**
  - **Counsellors at 11 Counselling Centres**
    - 7 Doctors, 6 Nurses in Two Clinics
    - 10 Clinic Receptionists
    - Communications Officer, Project Officer
    - Trainer
    - Head Office Receptionist

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**Who We Work With**

**Key Partners:**

- Action Canada for Population and Development
- Catholics for Choice
- Center for Reproductive Rights
- Centre for Civil and Political Rights
- Centro de Investigación, Educación y Servicios (CIES), Bolivia
- Countdown Europe Consortium 2015
- Dóchas – the Irish Association of Non-Governmental Organisations
- 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
- HIV Ireland
- International Planned Parenthood Federation (IPPF)
- International Commission of Jurists
- 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 – HSE
- European Union
- HRA Pharma Foundation
- Health Service Executive (HSE)
- 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
Like us on Facebook: irishfamilyplanningassociation
Watch us on YouTube: irishfamilyplanning