

IFPA ANNUAL REPORT 2011

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access choice & advocacy



Introduction

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SINCE ITS INCEPTION IN 1969, THE IRISH FAMILY PLANNING ASSOCIATION (IFPA) HAS TIRELESSLY PROMOTED THE RIGHT OF ALL PEOPLE TO CONFIDENTIAL AND AFFORDABLE SEXUAL AND REPRODUCTIVE HEALTHCARE. 2011 WAS ANOTHER IMPORTANT YEAR FOR THE IFPA'S WORK OF PROMOTING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS.

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In 2011, the Irish Family Planning Association provided sexual and reproductive services to almost 19,000 clients at our two clinics in Dublin. After many years of advocating, the IFPA was able to welcome the Irish Medicines Board's decision to grant emergency contraception over-the-counter status in Irish pharmacies nationwide. This decision meant women and girls can finally access emergency contraception without needing a doctor's prescription. The emergency contraceptive pill offers women and girls an important second chance to prevent pregnancy when a regular method has failed, no method was used or sex was forced. The improved accessibility of emergency contraception accounted for a reduction in the number of private clients attending IFPA clinics.

The economic recession continued to have a negative effect on people's finances throughout 2011. The IFPA was also affected by the recession with our budget being cut by 4.35%. The IFPA has been unable to meet the increased demand for services from medical card clients as a result of Health Service Executive budgetary cutbacks and has had to refer some medical card clients back to their GPs. The IFPA continued to work hard at ensuring our services remained accessible to women who were under financial pressure. However, the Irish Government needs to provide adequate resources for family planning services or risk a reversal of the many social and economic benefits women living in Ireland have enjoyed thanks to modern methods of family planning.

In 2011, our pregnancy counselling services provided information and support to over 4,000 women, girls and couples. The IFPA's training department continued to educate and train people on sexual and reproductive health through a number of programmes such as: the Speakeasy programme, Sexual Health Training programme, skills4life programme, and the Men Engage project.

Some 2,067 young people received HIV and sexual health education through our dance4life hip-hop programme. A further 32 carers and health workers availed of sexual health education through our Sexual Health Training programme, while over 90 doctors and nurses received accredited family planning training from the IFPA's medical team. Our Speakeasy programme, which educates parents on how to discuss sexual health issues with their children, was delivered to 84 participants from 10 different community groups.

As a lead member of the European Cervical Cancer Association, the IFPA partnered with CervicalCheck – the National Cervical Screening Programme – to promote European Cervical Cancer Prevention Week. As part of the awareness campaign, the IFPA distributed 22,000 Pearl of Wisdom information packs through 30 partnered associations.

In 2010, the European Court of Human Rights unanimously found that Ireland's restrictive abortion laws violate women's human rights. In June 2011 the Irish Government submitted an Action Plan to the Council of Europe and stated that it would establish an expert group to make recommendations to the Government on the implementation of the European Court's judgment. The IFPA awaits the expert group's report in 2012 and looks forward to substantive Government action to ensure women's reproductive rights are vindicated.

In October 2011, Ireland's human rights record was examined by other United Nations Member States at the Universal Periodic Review (UPR). Six States: France, Denmark, UK, Slovenia, Spain and the Netherlands made recommendations in relation to Ireland's restrictive abortion laws and called for firm timelines for the implementation of the judgment in the A, B and C v Ireland case. Although the Irish Government did not accept any of the recommendations relating to abortion, it made a commitment to implement the A, B and C judgment and meet its obligations under the European Convention on Human Rights.

Finally, we would like to acknowledge the support and hard work of current and former staff, board members, funders, supporters, clients and volunteers. We look forward to working with you all in 2012.

Niall Behan
CHIEF EXECUTIVE OFFICER

Kevin Baneham
IFPA CHAIRPERSON

About the IFPA

THE IRISH FAMILY PLANNING ASSOCIATION (IFPA) IS IRELAND'S LEADING SEXUAL HEALTH CHARITY. THE ORGANISATION PROMOTES THE RIGHT OF ALL PEOPLE TO SEXUAL AND REPRODUCTIVE HEALTH INFORMATION AND DEDICATED, CONFIDENTIAL AND AFFORDABLE HEALTHCARE SERVICES.

The Irish Family Planning Association (IFPA) is Ireland's leading sexual health charity. The organisation promotes the right of all people to sexual and reproductive health information and dedicated, confidential 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 IFPA has been to the fore in setting the agenda for sexual and reproductive health and rights both nationally and internationally.

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

The IFPA provides medical services from its clinics in Dublin city centre and Tallaght as well as crisis pregnancy and counselling services at 11 centres nationwide.

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

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

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

Vision

At the IFPA we envisage an Irish society where all people can enjoy a fulfilling sex life and can make informed choices in their sexual and reproductive lives; where there is full access to high quality information, education and health services regarding sex, sexuality, conception, contraception, safe abortion and sexually transmitted infections.



Medical Services

The IFPA is Ireland's leading sexual health provider. In 2011 the IFPA provided over 18,000 sexual and reproductive medical consultations at our clinics in Dublin city centre and Tallaght.

Founded in 1969 to challenge the State's ban on contraceptive services, today the IFPA offers a comprehensive range of sexual health services for women and men on a not-for-profit basis including contraceptive advice, vasectomy services, free cervical screening, sexually transmitted infection (STI) screening and treatment, free post-abortion medical check-ups, women's health checks, fertility and menopause advice and pregnancy testing.

The IFPA played a key role in the delivery of CervicalCheck – the National Cervical Screening Programme – with 4,206 women screened for cervical cancer at IFPA clinics in 2011. This represents a decrease of 15% on figures in 2010.

2011 was the fourth year the awareness campaign was run in Ireland. Following the establishment of a system of direct entry for eligible women in 2010, the service became much more accessible and allowed registered smectakers to use routine appointments as a means of recruiting women into the programme. The IFPA is pleased with the facilitation of ease of access to the service for women as a result of the change in route of referral.

The cervical cancer vaccination programme, which was first introduced in September 2010, saw an uptake of 82% in the number of school girls partaking of the programme. The HSE reported that out of this 82%, there had been a 97% completion rate of the three-dose vaccine schedule. For the following three years a catch-up programme for all sixth year girls will be in place, while the vaccine will continue to be offered to all first year secondary school girls.

In 2011, 1,763 screenings for STIs were carried out at IFPA clinics. A growing concern for the IFPA is the lack of access to STI screening services for young people and those on low incomes. Despite much public debate concerning the incidence of STIs in Ireland, there remains a failure to develop adequate and accessible screening services. STI screening is not covered under the medical card scheme and screening services for young people, the group with the highest incidence of STIs, are insufficient and inequitable.

Given that since 1995 the Department of Health has reported an annual increase in the number of people testing positive for STIs, the IFPA proposes that the Government provides every young person with a free chlamydia and gonorrhoea test and includes screening for these two infections in the standard STI screening protocol for pregnant women, which already tests for hepatitis B and C, HIV and syphilis. Considering the advent of highly accurate and inexpensive screening methods and the relative simplicity and effectiveness of STI treatment, STI screening is an extremely cost-effective public health measure.


In February, the IFPA welcomed the Irish Medicines Board's decision to grant emergency contraception over-the-counter status without the need for a doctor's prescription in pharmacies nationwide. For many years the IFPA strongly advocated for the increased availability of emergency contraception in Ireland and worked closely with pharmacies to ensure women and girls would be granted affordable access to this important method of emergency intervention.

IFPA Medical Director, Dr Caitriona Henchion said: "Making the emergency contraceptive pill available over the counter in all pharmacies will speed up access to this important emergency intervention for women and girls. Emergency contraceptive pills offer women and girls an important second chance to prevent pregnancy when a regular method has failed, no method was used or sex was forced."

The IFPA is looking forward to the availability in Irish pharmacies of the EllaOne contraceptive pill, which can be taken as a form of emergency intervention up to 5 days after intercourse. The IFPA continues to offer high-quality emergency contraception services at its Dublin clinics.

The recession continues to impact on women's contraceptive choices. At our clinics we regularly see women who are using less reliable and more expensive methods of contraception such as the oral contraceptive pill as they are unable to afford the initial outlay for more effective long-term contraception such as the implant or coil (€300).

Meanwhile, the IFPA has been unable to meet increased demand for services from some medical card clients as a result of cuts by the Health Service Executive (HSE). This lack of funding means that women with medical cards who sought our services could not be accommodated and were referred back to their GPs. Other medical card clients experienced significant delays.



“Making the emergency contraceptive pill available in all pharmacies offers women and girls an important second chance to prevent pregnancy when a regular method has failed, no method was used or sex was forced... The sooner emergency contraception is taken the more effective it is – the success rate reducing from 95% in the first 24 hours to 58% by the third day.”

DR CAITRIONA HENCHION, IFPA MEDICAL DIRECTOR

MEDICAL SERVICES

In 2011, 90 doctors and nurses availed of the IFPA's popular Certificate in Contraception Theory, which is designed to give family doctors, nurses and other medical practitioners the knowledge and skills necessary to provide a family planning service of high medical standard to their patients.

The post-graduate course comprises two days of theoretical training and six sessions of practical training. The programme is certified by the Reproductive & Sexual Health Committee of the ICGP and has An Bord Altranais Category 1 approval.

IFPA Audit Of Intrauterine Contraception

The last ten years have seen significant development in long-acting reversible contraception (LARC) methods. Intrauterine contraception, both hormonal and copper based devices, forms an important component of such methods.

LARCs have many advantages over other methods of contraception and give women greater choice when it comes to regulating their fertility. The IFPA believes that the use of LARC methods should be encouraged and promoted.

LARC methods are convenient for women (no pills to remember and far fewer doctor visits). Unlike oral contraceptives, they require little or no user action. LARCs are easily reversible and involve very low levels of serious risk. Their efficacy is not affected by gastrointestinal disturbance.

They are highly effective, with failure rates of 1 per 1000 or less. As they are not subject to user error, the failure rates for perfect use are the same as for usual use. By comparison, oral contraceptive failure rates vary from less than 1% for perfect use to 8% for usual use.

LARC methods are also very cost-effective. Although the initial insertion fee is high compared to the initial cost of other contraception, LARC methods are more cost-effective in the long term and require far fewer doctor visits than oral contraceptives.

LARC METHODS AND THEIR ANNUAL COST

METHOD	COST PER YEAR
Pill	150 -260
Injection	260
Implant	94
LNG IUS	65
Copper IUCD	65

Intrauterine methods, the LNG IUS (Levonorgestrel Intrauterine System) and Copper IUCD, are the most cost-effective and have the longest duration of all LARC methods. In addition, they have the advantage, in conjunction with injectable DMPA (Depot Medroxyprogesterone) of having no drug interactions that affect their efficacy.

Although intrauterine contraception has become increasingly popular over the past decade, there are some recognised risks. Significant menstrual changes often occur, and, although this may be perceived as beneficial by many women, other women find it unacceptable. It is also important to stress that no method can guarantee protection from pregnancy. And while pregnancy rates are very low in intrauterine contraceptive users, there are

particular problems which can occur during these pregnancies (higher miscarriage rates, including risk of late miscarriage if a device cannot be removed, and potentially higher-than-normal risk of ectopic pregnancy).

The most serious risk related to insertion of an intrauterine device is that of perforating the uterus, with resultant extrauterine placement of the device which would then require surgical removal. This risk is generally accepted as 1 in 500 and is related to the experience of the inserter.

Menstrual changes are common with both types of intrauterine contraception. LNG IUS devices may cause frequent bleeding to start with, but over time result in substantially reduced menstrual loss and pain. Copper devices may increase menstrual loss in some individuals. There is also a risk of pelvic infection in the 3 weeks following insertion, but this can be reduced by pre-insertion screening.

Another risk LARC users need to be aware of is expulsion of the device, which, if undetected, could lead to an unplanned pregnancy. For these reasons, it is essential that women are fully informed about risks and possible effects before they choose intrauterine contraception.

The IFPA's protocol for intrauterine contraception includes several measures to ensure clients are well informed about all of its effects, have low risk of complications comparable with best international practice, and are followed up appropriately.

All women who attend for LARC services have an initial visit at which intrauterine contraception, including its risks, are fully explained. A 'tick list' is read and signed by the woman and she is given written information to take home. Alternative methods may also be discussed or advised if thought to be more appropriate. Infection screening is offered and other contraception facilitated until the date of insertion.

All insertions are carried out by experienced doctors with a nurse always in attendance. Care is taken to rule out pregnancy at the time of insertion and analgesia and/or cervical priming is given beforehand. All women are advised about checking for the threads of the device and given a follow-up appointment at 6 weeks. They are also advised to contact the clinic at any time if they have any concerns.

Good continuation rates relate directly to provision of comprehensive pre-insertion counselling, experienced inserters and support through the post-insertion period.

From January 2011 to March 2012, the IFPA conducted an audit of our provision of intrauterine contraception services at our clinics in Dublin city centre and Tallaght. We wished to assess the level of adherence to the protocol, our complication rates, the continuation rate at follow-up and the management of post-insertion problems. We also wanted to determine whether intrauterine contraceptive usage was more widely used by women in specific age-groups.

THE FINDINGS INCLUDED:

- ➔ A total of 181 Intrauterine Contraceptive Insertions were recorded during the period.
- ➔ Pre-insertion counselling was recorded in all cases with a 'tick list' completed in 97% of cases. This tick list includes all important risks as well as mode of action and all other common effects.
- ➔ No perforations were recorded. (Acceptable rate is 1/500).
- ➔ Only 3 expulsions were recorded, giving an expulsion rate of 1.5%. (Acceptable rate is <5%).
- ➔ All partially expelled devices were detected at follow-up check.

In 67 cases a device was being inserted to continue intrauterine contraception (a replacement device). This accounted for 37% of all insertions and is indicative of a high rate of satisfaction among users.

REINSERTION RATE

REINSERTION	COUNT	PERCENTAGE
No	150 -260	60%
Yes	260	37%
Not Recorded	94	3%
Total	65	100%

The insertion was graded according to difficulty experienced by the inserter as either normal, normal; but with pain or vasovagal symptoms; use of dilators required; device had to be removed immediately afterwards or insertion had to be abandoned.

INSERTION DIFFICULTY

INSERTION DIFFICULTY	COUNT	PERCENTAGE
Normal	153	85%
Normal (Painful)	5	3%
Dilators	18	10%
Removed	1	1%
Abandoned	2	1%
Not recorded	2	1%
Total	181	100%

As can be seen, only 2 insertions were unsuccessful, reflecting a high level of inserter experience. Neither of these women experienced any subsequent sequelae.

AGE PROFILE OF WOMEN

	CATHAL BRUGHA STREET		TALLAGHT	
	AGE	GROUP COUNT	AGE	GROUP COUNT
Less than 20 years	1	1%	1	1%
20 to 29 years	33	45%	24	22%
30 to 39 years	17	23%	36	34%
40 to 49 years	20	27%	44	41%
50 plus years	0	0%	1	1%
Not recorded	3	4%	1	1%
Total	74	100%	107	100%

The survey shows that intrauterine contraception is used by women in all age groups, although rarely in those under 20 years of age. A reason for the low level of use amongst women below 20 years of age may be the substantial cost of initial insertion.

One noteworthy finding is that while only 12 insertions were in nulliparous women, none of these women experienced any problems either during insertion or at follow-up, illustrating that intrauterine contraception is a reasonable option for these women and should be considered as a method of contraception more frequently for this group.

The overall continuation rate in this cohort was 95%. Six devices were removed at or by the time of follow-up.

THE REASONS WERE AS FOLLOWS:

- ➔ 3 because of partial expulsion.
- ➔ 1 removed at a gynaecology appointment because of an unspecified 'ovarian' problem.
- ➔ 1 removed at follow-up because of dissatisfaction with bleeding pattern.
- ➔ 1 removed for unspecified reason following an ultrasound which confirmed the device to be in the correct position.
- ➔ There were also 2 abandoned insertions and 1 removed immediately after insertion because of persisting vasovagal episode.

Intrauterine contraception is a highly effective form of LARC. When it is provided in accordance with a comprehensive protocol, low rates of complications and unsuccessful insertions as well as good continuation rates can be expected. It is essential that pre-insertion counselling is comprehensive, inserters are adequately trained, all members of clinic staff are aware of and adhere to protocols and that follow-up support is made available.

Counselling Services

In 2011, the IFPA counselling department continued to deliver a professional and ethically driven service in 11 centres nationwide. We provided confidential, non-directive counselling and advice to 4,484 clients through our pregnancy counselling network and national pregnancy helpline. IFPA counselling services are offered to women and girls for free and are provided by professional accredited psychotherapists and counsellors. The IFPA counselling service delivered face-to-face counselling to 1,421 clients in 2011. This represents an increase of 20% on the previous year.

In 2011, the counselling department saw continued expansion of post-abortion care services with women attending for post-termination counselling accounting for 42% of the service's client base. The number of women presenting for post-abortion care grew by 85% in 2011 compared to the same figures from the previous year. Of this number 36.8% were new clients. This follows on from a 42% increase in 2010.

This increase in demand for post-abortion counselling is due to improved awareness of the availability of IFPA post-abortion counselling services, breakdown of stigma associated with the procedure and women's increasing willingness to discuss abortion. Access to important counselling services offered by the IFPA creates a space that allows women to speak about their experience which helps diminish the stigma associated with abortion and lessens the sense of isolation.

It is also interesting to note that almost half of face-to-face counselling clients (42% of client base) attended for pregnancy counselling with a support person (partner, friend, family member or health care professional). This growth in both post-abortion and overall counselling figures coupled with the presence of partners/family members at counselling sessions indicates an increased openness about crisis pregnancy in Ireland. It is clear that women are more willing to speak about their experiences of crisis pregnancy, are more open with their support network and are more likely to avail of services on offer.

In 2011, 35% of women had their first counselling session before the ninth week of gestation. A further 19% of clients had their initial counselling session between the ninth and thirteenth week of gestation.

The majority (45%) of clients presenting for face-to-face pregnancy counselling in 2011 were aged between 25 and 34. Just over one quarter (26%) of clients were aged between 17 and 24. Women aged between 35 and 44 accounted for 22% of our client base.

Each year there has been a steady increase in the number of clients attending IFPA counselling services with a support partner. In 2011, a key focus for the IFPA's counselling service was to ensure all counsellors successfully completed couples counselling training so that they could provide clients and their support partners with appropriate counselling services. This reflects our ongoing commitment to continuous professional development. All our accredited counsellors have committed personal time and resources to maintaining professional registration standards. The IFPA's counselling service is funded by the HSE - Crisis Pregnancy Programme.

GESTATION	2011	percentage
Under 8 weeks	497	35%
9-12 weeks	272	19%
13-16 weeks	147	10%
17-20 weeks	53	4%
Over 20 weeks	41	3%
Unknown	412	29%

AGE	2011	percentage
Under 17	58	5%
17-24	374	26%
25-34	632	45%
35-44	306	22%
44+	24	2%

KEY STATISTICS 2011

- ➔ 1,421 women, girls and couples received face-to-face crisis pregnancy counselling, an increase of 20% on last year.
- ➔ 518 women and girls received telephone pregnancy counselling.
- ➔ 3,054 callers to the IFPA national pregnancy helpline received advice and appointments.
- ➔ 36.8% of clients availed of IFPA post-abortion care services for the first time. This represents a 46% increase compared with a 42% increase in 2010 to 2010.
- ➔ 42% of clients attended with partner/friend/family member or health care professional.
- ➔ Average wait for appointment was two working days.

“Silence breeds stigma and the best way to combat stigma is to talk openly about abortion in every day terms. It is clear that the women and girls who access our counselling service are talking more about their experiences, thereby lessening the sense of stigma and isolation.”

EVELYN GERAGHTY, IFPA COUNSELLING DIRECTOR

IFPA COUNSELLING LOCATIONS NATIONWIDE

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



Education & Training Department

Training and education are key elements of the IFPA's mission to ensure all people have access to accurate and relevant information about their own reproductive and sexual health. The IFPA's Training Department offers a range of training and education programmes on sexual health. In 2011 the IFPA delivered sexual health training to a total of 1,107 people including students, carers, parents, health workers and individuals from community groups.

In 2011, the IFPA's popular Speakeasy programme was delivered to 84 participants from 10 different community groups. Speakeasy is an eight-week course designed to not only inform people on sexual and reproductive health, but also equip participants with the necessary skills to confidently discuss issues such as relationships and sexuality with their children. In partnership with Ruhama and with Pavee Point, 2011 saw the programme being delivered to women who are victims of sex trafficking, women with a history in prostitution, and also to male Travellers for the first time. The Speakeasy programme is supported by the Crisis Pregnancy Programme.

The IFPA offers a Sexual Health Training programme that covers the basics of HIV/AIDS and STI prevention as well as factual and up-to-date advice on contraception. This course is suitable for anyone who wishes to know more about sexual health, such as teachers, carers and youth workers. In 2011, this course was delivered to 32 participants – including HSE staff, teachers, social workers, youth workers, and students in services as diverse as the Irish Prison Service and AIDS West Galway. This programme was also delivered to 6 student welfare officers and 6 Spina Bifida Hydrocephalus Ireland support workers from across the country.

In 2011, the Training and Education Department delivered skills4life workshops to 1,067 young people in schools and youth groups as part of the dance4life programme (see dance4life for more). skills4life is a four-hour comprehensive HIV and sexual health comprehensive life skills programme at Irish second-level schools. The workshops are designed to equip young people with the skills and knowledge to protect themselves against HIV and other sexually transmitted infections.

In 2011, the Training and Education Department was invited by the Law Reform Commission (LRC) to provide an overview on the sexual health needs of people with intellectual disabilities in line with the work conducted at the IFPA. Following this, recommendations were made by the LRC on the sexual health needs of people with intellectual disabilities.

The Men Engage project is an awareness campaign to encourage men to take the lead on their own sexual health. In 2011, the IFPA recruited 18 men to participate in the initiative. These men helped the IFPA develop YouTube clips that provide sexual health information that specifically relates to men, such as male STI screening procedures, crisis pregnancy counselling and contraceptive information. In conjunction with the YouTube clips, the IFPA launched an interactive Men Engage web page to provide men with accessible and factual information relating to STIs, contraceptives, crisis pregnancy and sexual health. Men Engage is supported by the International Planned Parenthood Federation (IPPF).

The IFPA's comprehensive range of sexual health resources continued to be in demand in 2011. Among the most popular was the IFPA's Sex Education Teaching Kit for teachers, trainers and health professionals.

The kit contains a user manual with information on Irish law, tips for providing sexual education classes and activities to use with groups. It also includes a range of IFPA leaflets along with samples of 10 contraceptive methods and a condom demonstrator.

2011 TRAINING OUTCOMES:

- ➔ For the first time Sexual Health Training was delivered to male Travellers, women who are victims of sex trafficking and women who have a history in prostitution.
- ➔ Lifeskills training to 24 people affected with spina bifida and hydrocephalus at the Spina Bifida annual general meeting in Wexford

SPEAKEASY

Speakeasy is an eight-week course designed to provide parents with the information, skills and confidence needed total to their children about relationships and sexuality.

Topics covered include:

- ➔ Puberty and reproduction
- ➔ Influences on sexuality from inside and outside the home
- ➔ Relationships and sexuality education in school
- ➔ How to answer your child's questions
- ➔ Sexually transmitted infections
- ➔ Contraception
- ➔ Keeping children safe from harm

“Speakeasy was helpful to me as it gave me the opportunity to learn about sex and relationships by using everyday words.

The course showed me how to talk to my family in a simple way. I was part of a relaxed group. Speakeasy is definitely a group effort.”

NORA MC DONAGH, CLONDALKIN TRAVELLERS GROUP – PARTICIPANT IN THE IFPA'S SEXUAL HEALTH TRAINING PROGRAMME.



Youth Initiatives

The IFPA promotes the right of all young people to sexuality education and confidential and affordable sexual healthcare services. The IFPA also promotes the right of young people to make informed choices and decisions regarding their sexual and reproductive health. Through our clinical, educational and advocacy services, the IFPA provides straightforward information, advice and support to young people about sexual health and sexual relationships.

2011 saw the IFPA continue to be a lead partner in the SAFE II project, which is funded by the European Commission and co-ordinated by IPPF's European Network. The IFPA's involvement in this three year project centred on the improvement of sexual health policies for young people in four countries – Ireland, Cyprus, Slovakia and Portugal.

The IFPA also engaged with key stakeholders through the Training and Education Working Group and Sexual Health Working Group of the Royal College of Physicians in Ireland (RCPI) on young people's sexual and reproductive health. The IFPA made a submission to the RCPI which resulted in the inclusion of reference to young people and sexual health services in the RCPI's policy statement.

2011 also saw the IFPA begin working with the RCPI's Education Subcommittee to develop better guidelines for sexual health education in primary schools throughout Ireland. The IFPA and the RCPI advocated for a relationship and sex education (RSE) programme which is: consistent, compulsory, integrated and prioritised within the school curriculum. The RSE programme should also be monitored and evaluated and available in all primary and post-primary schools.

The IFPA was consulted by the Law Reform Commission (LRC) during the drafting of its report: 'Children and the Law-Medical Treatment'. The report recommended legislative reforms that would allow for the views of mature teenagers to be taken into account in the context of consenting to medical treatment, including surgery and contraception. However, the proposed legislation states that a young person under 16 will be able to consent to such treatment without the involvement of his/her parents only in "exceptional circumstances". It is the IFPA's view that young people taking responsibility for their own sexual health is a relatively frequent occurrence and could not be considered as "exceptional". Lack of clarity on this point could result in unnecessary barriers to young people accessing sexual health services.

In September, the IFPA organised the seminar, 'Young People and Access to Contraception: the Case for Reform.' The event included key-note briefings in relation to the LRC's report: 'Children and the Law-Medical Treatment' by barrister Natalie MacDonnell and 'Young People & Access to Sexual Health Services' by the IFPA's Medical Director, Dr Caitríona Henchion. The IFPA's survey and analysis of young people and access to contraception was launched at the event.

The IFPA continued to have strong links with the Union of Students Ireland (USI) with the IFPA's Medical Director Dr Caitríona Henchion officially launching USI's SHAG Week (Sexual Health Awareness & Guidance Week). The aim of the campaign week is to open up conversation among students about sex and sexuality.

Throughout 2011, the IFPA continued its partnership with the youth clinic at St. James' Genito Urinary Medicine & Infectious Diseases (GUIDE) clinic. The partnership involves referral pathways between the GUIDE clinic and IFPA clinics offering at-risk young people contraceptive services, STI testing, access to social workers and crisis pregnancy counselling in a youth-friendly, accessible manner.

In January the IFPA's youth-led advocacy group ASK launched a campaign video entitled 'Keep your promises to young people around the world'. The video is part of ASK's Keep Your Promise campaign which aims to raise awareness of the United Nations Millennium Development Goals (MDGs) among young people in Ireland.

OTHER HIGHLIGHTS:

- IFPA's Director of Counselling Services, Evelyn Geraghty, delivered a presentation entitled 'Sexual Education in Schools: The Irish Experience' at the International Conference on Youth, Rights and Reproductive Health in Portugal.
- The IFPA welcomed the commissioning of the Crisis Pregnancy Programme's research project, 'Sexual health and sexual education needs assessment for young people in Ireland.'
- The IFPA worked with the Irish Pharmacy Union on guidelines on access to emergency contraception for young people under the age of consent.

“Young people should not have to face uncertainty about service provision, while health care professionals should be entitled to the protection of the law when they provide services to a young person, which after careful assessment, they deem to be in a young person's best interests”

CAITRÍONA HENCHION, MEDICAL DIRECTOR IFPA AT THE LAUNCH OF SHAG WEEK, 2011.



Caitríona Henchion, Medical Director IFPA, and USI members at the Launch of SHAG Week, 2011.

2011 saw significant growth of the IFPA's dance4life programme. The HIV and sexual health programme was delivered to a total of 2,067 young people in 33 schools and youth groups across Ireland. Ten of these groups were new to the programme.

dance4life is an international initiative which uses dance and workshops to help young people engage in the issue of HIV and their own sexual health. The programme is active in 27 countries and is offered in Ireland free of charge by the IFPA, funded by the European Commission.

At the heart of the programme is the dance4life drill, a hip-hop dance that is taught to young people in all of the participating countries, which is delivered by a team of volunteers. Due to expansion of the programme, a recruitment drive in spring 2011 saw 18 volunteers trained to deliver the programme. Young people also participate in a skills4life workshop which equips them with the skills and knowledge to protect themselves against HIV and other sexually transmitted infections. These workshops also focus on how HIV affects the lives of their peers in the developing world. This is delivered by the IFPA's Training and Education Department (see Training & Education for more).

Finally, the outreach advocacy programme act4life, which consists of young people who received dance4life training, helped young people by sharing the knowledge they gained through the dance4life initiative with their peers (see Advocacy Highlights for more).

The programme was delivered to 16 secondary schools across the country, from Cork to Monaghan. Delivery was predominately to transition year students, but in some schools, the programme was also given to fifth and third year students.

During 2011, particular emphasis was placed on maximising the number of young people who were in receipt of the programme. This was achieved by recruiting and training more volunteers to help with direct programme delivery, which has proven extremely cost effective and beneficial to the development of the service. An open-space training method was also developed as the programme often had to be delivered to over 100 students in one sitting, this proved very effective and allowed for the simultaneous collaboration of a number of schools in receiving skills4life training.

dance4life also continues to work with marginalised or hard to reach groups. In 2011 the programme was delivered to the Garda Protection Unit in the Cloyne Diocese Youth Service in Cobh, Co. Cork. The service was also delivered for the first time to girl Travellers through the Traveller advocacy group, Pavée Point.

During summer 2011, the dance4life programme was delivered to 50 young people from the Limerick Youth theatre. Visiting theatre members from Finland also received the dance4life programme during this summer project.

The highlight in the dance4life diary in 2011 was the World Aids event in December. The World Aids event consisted of a month long variety of events organised by young people who had participated in the dance4life programme. Some highlights of the month-long event included students from Portmarnock Community School organising a Christmas tree market with all funds going to the HIV programme in Lesotho, and the distribution of 6,000 condoms in campuses of third level institutions across the country.

dance4life looks on track to reach its target of delivering the programme to 4,500 young people over the three years of its initial plan. In 2011 alone, 2,125 young people received the programme, which is almost half of the programme's entire three year projection. The IFPA acknowledges that the recruitment of additional volunteers was vital in reaching so many young people with this important message.

ADVOCACY HIGHLIGHTS:

- ➔ act4life participants developed a dramatic performance which shared the dance4life message to students during a summer project.
- ➔ act4life participants further spread the dance4life message by helping in the publication of newspaper articles, and creating video projects for internal school websites.
- ➔ 30 students from Portmarnock Community School who were involved in the Christmas tree market to raise funds for the HIV programme in Lesotho have begun planning a study trip to Lesotho in spring 2012.

“Everyone loved dance4Life and the dancing really got you into it. The little brochures were written so that it wasn't just a list of facts, but so that someone my age would actually want to read it. I also think that it helped me to realise that even if a woman was on the pill or had other contraception that a condom is still very important and I didn't know how many different sexually transmitted infections there were.”

dANCE4LIFE PARTICIPANT, LIMERICK YOUTH THEATRE GROUP, CO LIMERICK.



dance4life participants practicing at Wexford Arts Centre

Communications, Campaigns & Publications

In 2011, the IFPA campaigns, communications work and publications brought positive messages about sexual and reproductive health and rights to a very wide audience.

Throughout early 2012, the IFPA provided advocacy and communications advice to Irish pharmacies in advance of the Irish Medicines Board granting over-the-counter status to emergency contraception in pharmacies nationwide. The IFPA also issued a press release supporting the initiative as it meant women and girls could now avail of emergency contraception in an affordable and accessible manner without requiring a doctor's prescription. The IFPA was involved in a significant amount of broadcast and print media coverage in relation to the launch.

In February, Dr Caitríona Henchion, Medical Director of the IFPA, launched the Union of the Students of Ireland's Sexual Health and Guidance Week (SHAG Week). The campaign distributed 40,000 information packs across colleges and universities throughout Ireland. The campaign was established to call on all political parties to make a firm commitment to develop a comprehensive national sexual health strategy with a well resourced action plan to include dedicated services, education and screening for young people.

In September, the IFPA launched the findings of a survey on young people's sexual health services in Ireland. A policy briefing event entitled; 'Young People & Access to Sexual Health Services: The Case for Reform', was held in the Shelbourne Hotel. Dr Henchion outlined the survey's findings in relation to young people attending Cathal Brugha Street clinic. Natalie McDonnell BL delivered the IFPA's response to the Law Reform Commission's proposals regarding legislation in this area. The event was attended by people from education, legal, medical and NGO sectors. The survey's findings garnered much media attention, with coverage in all major national newspapers and an interview with Dr Henchion on RTÉ Radio One.

The Criminal Justice Female Genital Mutilation (FGM) Bill, which had been recommended by the IFPA's (2008) National Action Plan to Address FGM in Ireland, was published in 2011. The IFPA campaigned extensively to ensure this practice was outlawed. The bill is supported by all parties and will be implemented in 2012.

Throughout 2011, the IFPA issued press statements on a range of issues relating to sexual health, from emergency contraception and young people, to statements calling for action on the implementation on the A, B and C v Ireland judgment and on the examination of Ireland by other UN member States at the Universal Periodic Review. Throughout the year, the media asked the IFPA to comment on a variety of news stories on topics including abortion, unplanned pregnancy, STIs, contraception, emergency contraception, HIV, young people's sexual health, sex education in Ireland, men's sexual health, cervical cancer, menopause, FGM and Irish aid overseas.

Key broadcast activities by IFPA representatives included interviews concerning the emergency contraceptive pill being granted over-the-counter status on RTÉ's 9 O' Clock News, and an interview on RTÉ Radio One News at One in relation to the findings of the IFPA survey on young people. IFPA representatives were also interviewed for the Colm Hayes Show on 2fm and the Ray D'Arcy Show on Today FM concerning emergency contraception and the ECCPW.

As a member of Dóchas (Irish Association of Non-Governmental Development Organisations), the IFPA is a signatory of the Dóchas Code on Images and Messaging and is committed to publishing images and messages that avoid stereotypes or sensationalism and maintain full respect for human dignity.

OTHER PUBLICATIONS:

- Launch of Men Engage YouTube clips – Range of clips highlighting the IFPA's appropriate and targeted sexual health services for men.
- Launch of "Keep Your Promise to Young People across the World", video campaign by Ask, IFPA's youth led advocacy group. Video aims to raise awareness of the United Nations Millennium Development Goals amongst young people in Ireland.
- IFPA Emergency Contraception Factsheet was updated and published following emergency contraception being granted over-the-counter status in Ireland.

“The Council of Ministers have sent a very strong message to the Irish Government that it can no longer ignore the imperative to legislate for abortion in certain circumstances. This decision clearly indicates that the Council of Europe will not be satisfied with yet another expert group whose legislative recommendations can be left to gather dust as was the case of the 2000 All-Party Oireachtas Committee on the Constitution, the 1999 Cabinet Committee and the 1996 Constitution Review Group.”

NIALL BEHAN, CEO IFPA, AFTER THE COUNCIL OF EUROPE REVIEW OF THE IRISH GOVERNMENT'S ACTION PLAN ON THE A, B AND C V IRELAND JUDGMENT, SEPTEMBER, 2011.



International Advocacy

In 2011, the IFPA had significant success in its mission to increase awareness of the importance of sexual and reproductive health at an international level.

The IFPA continued to act as the secretariat for the Irish All-Party Interest Group on Sexual and Reproductive Rights, Health and Development. This group is part of the European Parliamentary Forum on Population and Development (EPF), a Brussels-based parliamentary network of 27 All Party Groups throughout Europe that focus on improving sexual and reproductive health and rights.

Members of the All Party Group participated in international initiatives organised by the EPF and the United Nations Population Fund (UNFPA) in 2011. Deputy Olivia Mitchell TD, Chair of the All-Party Group, participated in a Global Summit of Parliamentarians held in Paris in May 2011. Entitled 'Girls & Population: The Forgotten Drivers of Development' the summit ended with an appeal by parliamentarians to the leaders of the G8 and G20 calling them to invest in the 600 million vulnerable women and girls in the developing world.

In August, Deputy Mitchell joined a group of five other women parliamentarians on a study tour to Indonesia, which was hosted by the Indonesian Forum of Parliamentarians on Population and Development (IFPPD) and UNFPA Indonesia and funded by the Countdown 2015 Europe and the UNFPA. The focus of the tour was family planning and reproductive health. In November, Deputy Ciara Conway TD represented the All Party Group at the Global Young Parliamentarians Dialogue in Thailand, which aimed to strengthen advocacy for mobilization of resources for sexual and reproductive health and rights within national budgets.

The All Party Group held four meetings, including a meeting with Maimuna Kanyamala, Director of the Kivulini Women's Rights Organisation in Tanzania, and a meeting with Minister Jan O'Sullivan. Throughout the year, parliamentarians were briefed on the unmet need for contraception globally, the UN Commission on the Status of Women, the UN Commission on Population and Development, which focused on youth and adolescents, the review of the White Paper on Irish Aid, the first Irish Aid Annual Gender Monitoring Report, and the upcoming reviews of the Cairo Programme of Action and the Beijing Platform for Action. These briefings informed parliamentary questions and debate.

The IFPA works with a range of international partner organisations to develop a stronger commitment to and support for sexual and reproductive health and rights including the International Planned Parenthood Federation (IPPF), UNFPA, the European Cervical Cancer Association and EuroNGOs, the coalition of European non-governmental organisations working in the field of sexual health.

At home the IFPA is an active member of Dóchas, the Irish association of non-governmental development organisations. In 2011 the IFPA had input to the Dóchas submission in relation to the review of the White Paper on Irish Aid.

OTHER HIGHLIGHTS

- ➔ As a collaborating partner with UNFPA, the IFPA organised the launch of the 2011 State of the World Population Report which coincided with the world's population reaching 7 billion people. (See Key Events for more).
- ➔ The IFPA's partner in Bolivia, the Centro de Investigación, Educación y Servicios (CIES), completed the first year of its Irish Aid funded programme to deliver an outreach programme on sexual and reproductive health services to most at risk young people in six cities in Bolivia.



IFPA Chairperson, Kevin Baneham, Dr Nata Duvvury, NUIG, Minister Jan O'Sullivan, Jacqueline McMahon, UNFPA and Niall Behan, CEO IFPA at the SWOP Launch 2011.

“Providing women with access to reproductive health care is not just an end in itself. It can have a transformative effect on women’s vulnerability to poverty, hunger and economic and social discrimination. The choice to have smaller families allows for greater investment in each child’s health care, nutrition and education, improved productivity and better long-term prospects – for women, their families and their societies.”

MINISTER OF STATE FOR TRADE AND DEVELOPMENT, JAN O’SULLIVAN TD, SWOP LAUNCH 2011



Parliamentarians at the Global Parliamentarians' Summit – 'Girls and Population: the forgotten drivers of development', Paris, France



Deputy Olivia Mitchell, Chairperson of the APG, study tour of Indonesia 2011.

Policy Development, Submissions & Presentations

The IFPA is recognised as a respected source of expertise in sexual health thanks to its excellent track record in the provision of medical services, pregnancy counselling, education, training for healthcare professionals and policy development over the last four decades.

The IFPA is regularly called upon by statutory agencies, parliamentary committees, medical associations and service providers to give its expert opinion on a wide range of issues related to sexual and reproductive health and rights.

In June, the Irish Government submitted an action plan to the Committee of Ministers in response to the European Court of Human Rights' (ECHR) judgment in the A, B and C v Ireland case. Following this, the IFPA made a communication to the Council of Europe in August expressing dissatisfaction with the Irish Government's response to the judgment. The IFPA highlighted that the continued failure of the Irish Government to adequately address Ireland's restrictive abortion laws is a failure to vindicate women's constitutional rights, and signals a clear disregard by the State for its duty under both the ECHR and the Irish Constitution to make effective the rights guaranteed under article 40.3.3. The IFPA sent copies of the submission to An Taoiseach, An Tánaiste, the Minister for Health, and other members of the Dáil.

In May 2011 Ireland was under review at the 46th session of the UN Committee against Torture (CAT). The IFPA made a submission to the CAT which provided independent information concerning the rights protected in the International Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CIDT). The submission highlighted human rights violations of women and girls living in Ireland who are denied access to safe and legal abortion services in the State. At Ireland's review the CAT urged the Irish Government to broaden its access to abortion services.

Throughout the year, presentations on the IFPA's Counselling Services were delivered to key organisations and groups including student medical centres, youth workers, doctors and nurses.

The IFPA's Training and Education Department was also called upon to make a number of presentations throughout the year, including an invitation by the Law Reform Commission (LRC) to provide an overview of the sexual health needs of people with intellectual disabilities. Following on from this consultative process, recommendations were made by the LRC on the sexual health needs of people with intellectual disabilities.

The IFPA also provided a number of briefings to organisations relating to access to emergency contraception, the A, B and C v Ireland case at the European Court of Human Rights, the Irish Government's establishment of an expert group and the UPR process. The organisations that were briefed included the Department of Foreign Affairs, National Women's Council of Ireland, Catholics for Choice, Irish All-Party Group, Irish Council for Civil Liberties, Boots Pharmacies, United Left Alliance and the Irish Association of Social Workers.

Throughout the year the IFPA also provided policy briefings to students, researchers and other organisations on a range of topics relating to sexual and reproductive health.

PRESENTATIONS:

- ➔ Irish Medical Students for Choice conference, April, Dublin.
- ➔ Annual General Meeting of the Irish Women Lawyers Association on the A, B and C case.
- ➔ International Conference on Youth, Rights and Reproductive Health discussing sexual education in schools, October, Lisbon, Portugal.
- ➔ NUI Galway Global Women's Studies Programme: research seminar on Sexual and Reproductive Health and Rights, November 17, Galway.
- ➔ Banúlacht National Conference: Seeking Accountability for Sexual and Reproductive Health and Rights at the UN December 9, Limerick, Ireland.

“The IFPA views the response of the Irish government in relation to the implementation of the judgment as wholly inadequate to satisfy the requirements of the judgment. We contend that this continued failure to vindicate women's constitutional rights is disrespectful of the Court and signals a clear disregard by the State for its duty under both the ECHR and the Irish Constitution to make effective the rights guaranteed under Article 40.3.3.”

IFPA COMMUNICATION TO THE COUNCIL OF EUROPE, AUGUST 2011.

Key Events

STATE OF WORLD POPULATION REPORT LAUNCH

As collaborating partner of the United Nations Population Fund (UNFPA) in Ireland, the IFPA co-ordinated the Irish launch of the organisation's State of World Population Report which coincided with the world's population reaching 7 billion in October 2011.

The report was launched by Minister of State for Trade and Development, Jan O'Sullivan. Speaking at the event, the Minister said: "As the 2011 report so clearly states, governments that are serious about eradicating poverty should also be serious about providing the services, supplies, and information that women, men and young people need to exercise their reproductive rights."

Jacqueline Mahon, Senior Policy Advisor on Global Health and Health Systems UNFPA, paid tribute to the Irish Government and Irish Aid for their support of UNFPA. Dr Nata Duvvury, Co-Director of the Global Women's Studies Programme, NUI Galway, spoke of the critical importance of sexual and reproductive health and rights to gender equality and to poverty eradication.

Entitled 'People and Possibilities in a World of 7 Billion', the report explored the challenges in a world of 7 billion people. Drawing on research in nine countries - China, Egypt, Ethiopia, Finland, India, Mexico, Mozambique, Nigeria and the Former Yugoslav Republic of Macedonia - the report describes the obstacles people confront and overcome in trying to build better lives for themselves, their families, communities and nations.

The report made the case for investing in people, illustrating how the world can empower people to create sustainable communities which can fuel economic growth and development.

Guests at the event included ambassadors, diplomatic staff, academics, civil servants, NGO representatives, and politicians. Jacqueline Mahon was interviewed on RTÉ's Pat Kenny Show, while Minister O'Sullivan wrote an opinion piece for the Irish Times.



Jacqueline Mahon, UNFPA and Minister of State for Trade & Development, Deputy Jan O'Sullivan at Report Launch

IFPA & CENTRO DE INVESTIGACIÓN, EDUCACIÓN Y SERVICIOS (CIES), BOLIVIA

In 2009, the IFPA organised a study tour for three Irish politicians and two journalists to Bolivia to learn about the sexual and reproductive health and rights of vulnerable young people. The study tour was hosted by the Centro de Investigación, Educación y Servicios (CIES), which runs an outreach programme for street youth and other marginalised people in Bolivia.

One of the recommendations of the delegation was to support CIES to secure funding to continue its work with most at risk young people. In November 2010, Irish Aid announced multiannual funding for "Investing in Bolivia's Most Vulnerable Youth", a project that was established to empower young people to exercise their rights and enable them to access sexual and reproductive health information, sexuality education and high-quality services. The programme is delivered by CIES with support from the International Planned Parenthood Federation (IPPF/WHR) and the IFPA.

2011 saw the first year of Irish Aid funding for this highly successful programme. As a result of the funding, the project has been able to expand its programme and provide youth friendly health services to 20,725 adolescents and youth across Bolivia.

The centres also provided over 2,800 young people with counselling advice on sexual and reproductive health and gender-based violence, while a further 7,083 young people on the streets have received educational services that protect and improve their health, enhance knowledge, and teach life skills. The project now covers approximately 60% of the population of young street workers.

Beneficiaries are gaining life skills via workshops, peer-networking and personalised outreach programmes to improve their lives beyond merely seeking health services and information. Given this population's vulnerability to violence, and with 75% of people attending services at the centres being women, a significant focus of this project is on improving the situation of women in situations of physical abuse.



Members of CIES study tour, Cochabamba, Bolivia, March 2009

EUROPEAN CERVICAL CANCER PREVENTION WEEK

In January 2011, as a lead member of the European Cervical Cancer Association, the IFPA partnered with CervicalCheck – the National Cervical Screening Programme – to promote European Cervical Cancer Prevention Week which aims to inform women about cervical cancer prevention and encourage them to avail of a free smear test.

Cervical cancer is one of the leading causes of death among Irish women under 44 years of age. In 2010, cervical cancer claimed the lives of 89 women in Ireland, while an estimated 300 women are newly diagnosed with cervical cancer each year. The national screening programme is very important because the disease is highly preventable if abnormal cells are detected early.

The awareness week took place between January 23 and 29, with the IFPA distributing 22,000 Pearl of Wisdom badges and information leaflets to women across the country. The Pearl of Wisdom is the international emblem of cervical cancer prevention. The IFPA teamed up with the Irish Hairdresser Federation and all its member salons were supplied with Pearl of Wisdom badges, a display box, poster and cervical screening leaflets in advance of the week.

CervicalCheck ran a number of information sessions and information stands targeting hard-to-reach groups to tie in with the week. Key distribution partners included the National Women's Council of Ireland, Family Resource Centres, the National Council for the Blind, the Irish Deaf Society, the HSE Dublin North East Health Promotion Team, the National Traveller Women's Forum, Akidwa, the Irish Countrywomen's Association, Women's Aid and LGBT groups.

All female politicians were sent two Pearl of Wisdom badges as well as briefing information on the campaign.

Broadcaster Maura Derrane lent her support to the campaign and there was significant coverage of the awareness week in national and regional media outlets, including interviews on RTÉ's Four Live and the Ray D'Arcy Show on Today FM.



Broadcaster Maura Derrane with Pearl of Wisdom, international emblem of ECCPW

RESPONSES TO THE A, B AND C V IRELAND JUDGMENT

After the European Court of Human Rights (ECHR) ruling against the Irish State in the A,B,C case another woman, Michelle Harte, spoke out about the complications she experienced when she became pregnant while terminally ill with cancer. Doctors at the hospital advised her to terminate the pregnancy because of risks to her health. In spite of this Ms. Harte still had to travel to the UK for an abortion. Ms. Harte's journey to the UK to access abortion services placed unnecessary physical, emotional and financial strain upon her. She spoke out so that no other woman would have to leave the State to have an abortion to save her life.

Before the general election in February 2011 each of the main political parties set out their response to the Michelle Harte case and the ECHR judgment:

- ➔ Fine Gael proposed establishing an all-party committee, with access to medical and legal expertise, to consider the implications of the recent ECHR ruling and to make recommendations.
- ➔ The Labour Party proposed legislating in accordance with the Supreme Court judgment in the X case and the recent ruling by the ECHR.
- ➔ Fianna Fáil said that they would uphold the right of the Irish people, and the Irish people alone, to decide on Ireland's abortion laws. The party also proposed legislation in accordance with the Supreme Court judgment in the X case.
- ➔ The Green Party said it would leave it up to individual TDs to vote in accordance with their own conscience if any legislation was proposed.
- ➔ Sinn Féin said that the ECHR judgment made it clear that there is an onus on the State to legislate under the terms of the 1937 Constitution and the decision in the X case.

Following the general election, the new Fine Gael/Labour Coalition Government decided to establish an expert group to make recommendations to Government on how to implement the Court's judgment. The Government's expert group is expected to report in 2012.



Carmel Stewart, Julie F.Kay legal advisors for the applicants in A,B and C v Ireland, Rosie Toner, former Director of Counselling IFPA, & Niall Behan CEO IFPA at the European Court of Human Rights.

dANCE4LIFE -WORLD AIDS DAY EVENT

The theme for World AIDS Day in 2011 was 'getting it to zero'. This theme will continue to be used until 2015 and echoes the vision of UNAIDS: "Zero new HIV infections. Zero discrimination. Zero Aids related deaths."

2011's dance4life programme for World AIDS Day saw multiple and varied events take place all over the country. On the morning of World AIDS Day, an Irish dance4life volunteer led 800 young people in the dance4life dance drill supported by Irish volunteers via the internet. Meanwhile the dance4life team in Dublin teamed up with Mac Cosmetics to sing Christmas carols, with all funds being raised going to Open Heart House. Students from Portmarnock Community School set up a Christmas tree market to raise awareness of HIV/AIDS and all proceeds went towards a programme in Lesotho which supports those with and those at risk of contracting HIV/AIDS. Students from Portmarnock Community School along with a number of agents4change have begun organising a study trip to the Lesotho support programme in 2012.

The events were predominately organised by agents4change. agents4change is the term given to young people who have participated in the dance4life programme and then go on to organise events and information sessions to further promote the dance4life message.

agents4change were involved in the development of a website that promotes World AIDS Day and seeks support to stop the advance of AIDS in Ireland and across the globe. There was mass organised letter writing to TDs and Ministers to ensure HIV/AIDS prevention and care remains on the health agenda. This resulted in HIV/AIDS being discussed during Dáil question time.

There were also art competitions, red ribbon face painting and street collections, all of which were organised to reduce the stigma associated with HIV/AIDS and empower and enhance the lives of people living with the virus.



dance4life volunteers singing Christmas carols to raise funds for Open Heart House on World AIDS Day.

WASHINGTON ADVOCACY, ST PATRICK'S DAY

On St Patrick's Day 2011, IFPA Chief Executive Niall Behan travelled to Washington DC as part of an Irish delegation on reproductive health and rights. The delegation held an event on Capitol Hill entitled: 'When Irish eyes are smiling: The truth about abortion in Ireland', to draw attention to Ireland's restrictive abortion laws.

The event, which was organised by Catholics for Choice and hosted by Congresswoman Louise Slaughter and Congresswoman Diana DeGette, involved an NGO briefing session and one-to-one political briefings with Members of Congress. The event aimed to inform Senators, Members of Congress and non-governmental organisations about how 150 year old laws are applied to deny women and girls access to safe and legal abortion services in the most extreme circumstances. Attendees learned that each year over 4,000 women and girls are forced to leave the Republic of Ireland and travel to the United Kingdom to access health services they need.

Speaking at the event Niall Behan, Chief Executive of the Irish Family Planning Association said: "Today, when all eyes are on Ireland, we wish to remind Americans of the historic commitments to equality and human rights made in 1998 Belfast Good Friday Agreement and highlight the urgent need to apply these principles to women's reproductive rights."

The short film, 'Discrimination and Denial: Abortion Law in Northern Ireland' was launched at the event. The film features interviews with leading Northern Irish health professionals and politicians on the difficulties they face trying to provide quality healthcare in a State that does not offer women access to legal and safe abortion services.

Other members of the delegation included: Dawn Purvis, Member of the Legislative Assembly in Northern Ireland, Liz McManus, former Deputy Leader of the Labour Party in the Republic of Ireland and Audrey Simpson, Director of the Family Planning Association in Northern Ireland.



Capitol Hill, Washington DC

MEN ENGAGE

In 2011, the IFPA continued to develop the Men Engage project, which aims to enable men to make informed choices about contraception and their fertility by providing services and information.

The IFPA recruited 18 advocates who were actively involved in the development of three YouTube clips aimed at breaking down some of the barriers experienced by men when it comes to accessing sexual health services. The clips focus on providing information that specifically relates to men, such as male STI screening procedures, vasectomies, contraceptive use and men's general sexual health. As part of the project, the IFPA launched an interactive Men Engage web page, which provides understandable and factual information relating to STIs, contraceptives, crisis pregnancy and sexual health from a male perspective.

The IFPA developed the Men Engage project because of the continued increase in STI notifications amongst the Irish public. According to the 2009 Health Protection Surveillance Centre's (HPSC) report on STIs in Ireland, in 2008 men accounted for 52.2% of STI notifications, while women accounted for 45.1%. The report also states that of the 395 cases of HIV diagnoses in 2008, 41.8% were among men who have sex with men (MSM), while 47.3% of diagnoses were among heterosexual men.

In Ireland there is still a lack of a systematic policy and a recognised process in terms of Relationships and Sexuality Education in primary and secondary schools. The absence to date of a national sexual health strategy means that policy development on sexual health in Ireland has been ad hoc and inconsistent. It is clear from the rise in STI notifications amongst Irish men that sexual health services need to address the particular barriers to men's engagement.

The Men Engage project is supported by the International Planned Parenthood Federation (IPPF).



Men Engage model

UNIVERSAL PERIODIC REVIEW

The IFPA campaigned to ensure Ireland's restrictive abortion laws would be to the fore when Ireland's human rights record was examined by other United Nations (UN) Member States at the Universal Period Review (UPR) in October 2011.

Six States: Norway, Denmark, UK, Slovenia, Spain, and the Netherlands made recommendations in relation to the restrictive abortion regime in Irish law and called for firm timelines for the implementation of the judgment of the European Court of Human Rights in A, B and C v Ireland. A further three States—Finland, France and Germany—sent advance questions to the Irish Government or asked questions about abortion in Ireland during the UPR.

Although the Irish Government declined to accept the recommendations on abortion, the Government reiterated its commitment to implement the judgment "expeditiously". Minister for Justice, Alan Shatter, stated that the A, B and C judgment would be addressed in an "adequate and comprehensive" manner in order to "meet our obligations under the Convention on Human Rights".

In advance of the review, the IFPA undertook extensive lobbying and held meetings with a number of member States at their embassies in Dublin and permanent missions to the United Nations in Geneva. The IFPA submitted a Stakeholder Summary Report to the UPR Working Group in March 2011 which focused on the violations of the human rights of women and girls living in Ireland who are denied access to safe and legal abortion services within the State.

The IFPA is a member of the Cross-Sectoral Steering Group of the Your Rights Rights Now Campaign which is convened by the Irish Council for Civil Liberties. The IFPA contributed to the submission made by the Your Rights Right Now Campaign, an educational short film on the UPR process and a side event organized by the campaign.

The UPR was established in 2006 to assess how individual States respect their human rights commitments.



Rights Groups outside Liberty Hall, Dublin, in the lead up to the UPR process, 2011

Financial Report

INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2011

CONTINUING OPERATIONS	2011	2010
	€	€
Income	2,297,444	2,856,072
Expenditure	(2,349,331)	(2,877,541)
(Deficit) / Surplus on ordinary activities before interest	(51,887)	(21,469)
Interest payable and similar charges	(17,737)	(17,570)
Deficit for the year	(69,624)	(39,039)

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

BALANCE SHEET AS AT 31 DECEMBER 2011

FIXED ASSETS	2011	2010
	€	€
Tangible assets	385,826	398,521
CURRENT ASSETS		
Stocks	24,152	18,520
Debtors	57,845	70,720
Cash at bank and in hand - unrestricted	255,965	238,275
Cash at bank - restricted	195,000	—
	532,962	327,515
Creditors: amounts falling due within one year	(797,336)	(514,518)
Net current liabilities	(264,374)	(187,003)
Total assets less current liabilities	121,452	211,518
Creditors: amounts falling due after more than one year	(94,830)	(109,087)
Capital Grants	(36,449)	(42,634)
Net assets	(9,827)	59,797
RESERVES		
Revenue reserves account	(9,827)	59,797

ON BEHALF OF THE BOARD: KEVIN BANEHAM CHAIRPERSON HELEN CORNELISSEN DIRECTOR

Board of Directors

Kevin Baneham / Anthea McTiernan (resigned 27/09/11) / Helen Cornelissen / Danny Dunne (resigned 10/5/11) / Karen Ciesielski / Kelly Mackey / Leslie Sherlock / Linda Kelly / Sonya Donnelly (resigned 27/9/11)

Staff

In 2011 the IFPA had a staff complement of 50 people. The organisation welcomed new staff members and said goodbye to others. The IFPA was also assisted in its work by a number of interns and a vibrant team of volunteers.

IN 2011 THE HEADS OF OUR MAIN DEPARTMENTS WERE:

CHIEF EXECUTIVE: Niall Behan

MEDICAL DIRECTOR: Caitriona Henchion

COUNSELLING DIRECTOR: Evelyn Geraghty

FINANCIAL CONTROLLER: Ben Howe

TRAINING COORDINATOR: Anita-Ghafoor-Butt

CLINIC MANAGER, TALLAGHT: Annette Smith

CLINIC ADMINISTRATOR, CATHAL BRUGHA STREET: Deirdre Jones

Who We Work With

KEY PARTNERS & FUNDERS:

Banúlacht	European Parliamentary Forum on Population & Development (EPF)
Catholics for Choice	Family Planning Association Northern Ireland
Centro de Investigación, Educación y Servicios, Bolivia	Health Service Executive
CervicalCheck – National Cervical Screening Programme	International Planned Parenthood Federation (IPPF)
Countdown 2015	Irish Aid
Crisis Pregnancy Programme	Irish Council for Civil Liberties
dance4life International	National Women's Council of Ireland
Doctors4Choice	Restless Development, UK
Dóchas	Sexual Health Centre, Cork
EuroNGOs	St James's GUIDE Clinic
European Union	United Nations Population Fund (UNFPA)
European Cervical Cancer Association	Women's Human Rights Alliance



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**CODE OF
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