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IFPA Celebrates 40 Years

The IFPA celebrated its 40th anniversary in style at the Pillar Room in the Rotunda Hospital in Dublin at the end of November. IFPA supporters and board members and staff from the past and present gathered to celebrate the event. John Gormley, Minister for Environment, Heritage and Local Government and leader of the Green Party officiated at the event. IFPA Chairperson Anthea McTeirnan described how the founding members – doctors, gynaecologists, teachers and social workers – came together in an attempt to counter the suffering caused by the State’s blanket ban on contraception.

Speaking at the event IFPA Chief Executive Niall Behan described how the agenda laid down by the organisation’s founders was not yet complete. “The affordability of contraception is still a huge issue. Access to sexual health services is difficult for many, including young people, asylum seekers and people with disabilities. Sex education in schools is still patchy and inappropriate. Rogue agencies are allowed to intimidate women experiencing unplanned pregnancies, while women face life in prison for terminating a pregnancy in Ireland.”

Founding member Jim Loughran was in attendance and special tributes were paid to the other brave founders Dr Michael Solomons, Yvonne Pim, Joan Wilson, Robert Towers, Dermot Hourihan and Maire Mullarney. IFPA’s dance4life team performed a segment of the programme’s Hip Hop dance routine, which is used to engage young people in the issue of HIV and sexual health.

European Cervical Cancer Prevention Week

The IFPA is gearing up for European Cervical Cancer Prevention Week which will take place between 24th and 30th of January, 2010. During the week pearl of wisdom badges will be distributed to women around the country to encourage them to talk about cervical cancer and to raise awareness about how the disease can be prevented.

Cervical cancer is one of the leading causes of early mortality among Irish women under 44; with over 90 lives lost to the disease every year and 200 women newly diagnosed with the disease. Cervical cancer is highly preventable with early detection of abnormal cells.

In January the IFPA will team up with the Irish Hairdressers Federation and all 300 member salons will be issued with badges, posters and information leaflets about cervical cancer. The aim is to give a pearl of wisdom pin to every woman who has a hair appointment during the week. Many women consider a visit to a hair salon as “me-time”, a period when they have time to relax and reflect – an ideal opportunity to pass on some important messages about cervical cancer prevention.

NATIONAL NEWS

Ireland’s Restrictive Abortion Laws Under the Spotlight

Ireland’s restrictive laws on abortion were put under the spotlight at the European Court of Human Rights earlier this month representing a landmark for reproductive rights in Ireland. Three women living in Ireland (referred to as A, B & C) challenged Ireland’s ban on abortion on the grounds that the law jeopardised their health and their
The cases were heard before the European Court of Human Rights’ Grand Chamber of 17 judges, which is reserved to hear cases that raise serious questions affecting the interpretation of the European Human Rights Convention.

The experiences of the women are illustrative of the reality faced by thousands of women in Ireland. Since 1980, more than 138,000 women have been forced to travel abroad to access safe abortion services, enduring unnecessary and unjustifiable physical, emotional and financial hardship.

The fact that Ireland’s draconian laws on abortion have been put under the spotlight at this important human rights arena is a landmark for women living in Ireland, according to the IFPA’s Chief Executive Niall Behan. “Ireland's restrictions on abortion violate international human rights norms because they inflict such grievous harm to women's health and wellbeing. The IFPA believes that women and girls do not give up their human rights when they become pregnant nor should the State take these human rights away with impunity.”

**Emergency Contraception Survey**

Women are experiencing unnecessary delays in accessing emergency contraception, according to a survey undertaken by the IFPA. New research from the IFPA indicates that many women are accessing the emergency contraceptive pill outside the optimal 24-hour time frame.

Almost half of women (46%) surveyed presented for emergency contraceptive services 24 hours or more after unprotected sex. The survey of 1,351 women also sheds light on the age profile of women presenting for emergency contraception services with over half of those surveyed aged 22 or older. This delay in accessing the emergency contraceptive pill (ECP) is a cause for concern and strengthens the case for making ECP available over the counter in Ireland, according to Dr Caitriona Henchion, Medical Director of the IFPA. “While, the emergency contraceptive pill is licensed for 72 hours after unprotected or under-protected sex, the sooner a woman takes it the more effective it is. The first 24 hours is regarded as the optimal time in which to take ECP,” she explains.

The survey analysed all new clients who presented to IFPA’s Dublin city centre clinic for emergency contraceptive services in 2008. ECP is currently available over the counter in 16 countries in the EU. The IFPA believes there is no medical reason why the emergency contraceptive pill should not be available over-the-counter in pharmacies in Ireland. “Requiring women to visit a doctor to get a prescription to access ECP causes an unreasonable delay in timely use. This unnecessary delay results in an increased risk of unplanned pregnancy.”

**Research Update: Parent-Child Communication about Relationships and Sex**

New research from the Crisis Pregnancy Agency sheds light on parent-child communication about sex and relationships in Ireland.

The report, entitled “Parents' approaches to educating their pre-adolescent and adolescent children about sexuality”, analyses how parents discuss relationships and sexuality with their pre-adolescent and adolescent children. A total of 43 parents were involved in the study (32 mothers and 11 fathers).

The research found that parents were often reluctant to discuss sexual matters, particularly about sexual intercourse, when asked questions by younger children for fear of compromising their innocence. Parents reported attempting to raise sexual issues with their teenage children, but these attempts were often blocked by the young people who were reluctant to talk about the topic. Issues such as contraception were often not discussed because parents believed that their adolescent was not sexually active, was not romantically involved or had acquired adequate information at school.
Even those parents who believed that sex education was the responsibility of both parents and schools tended to rely heavily on school to deliver that education. While many parents reported that they were 'open' about discussing issues of sexuality in the home, they tended to invite their children to raise issues with them, leaving the onus on the young person to initiate the discussion, according to the report.

**IFPA EVENTS**

**Conference: Reproductive Justice Movement**

The dynamic Loretta Ross was key note speaker at a reproductive justice conference in October, co-hosted by the IFPA and UCD's Women's Studies Centre.

The conference explored the issues of reproductive health and social justice.

Ross, founding member of the US women's movement SisterSong, gave a thought-provoking talk on the reproductive justice framework, which combines reproductive health and reproductive rights with social justice to analyse the intersecting issues of ethnicity, class, disability and sexual orientation.

Ross emphasised the importance of different organisations finding common ground. “When people think many different thoughts and move in one direction—that's a movement,” she stated.

The conference was chaired by Dr Katherine O'Donnell from the UCD Women's Studies Centre. Other panellists included Susan McKay, Director of the National Women's Council of Ireland; Senator Ivana Bacik; Rosaleen McDonagh, disability rights activist; Aoife Dermody, Lash Back and Catherine Conlon, UCD.

**Report: Women, Population and Climate Change**

Women are central to efforts to deal with climate change, according to a United Nations Report launched by the IFPA in October.

“Poor women in poor countries are among the hardest hit by climate change even though they contributed the least to it,” said United Nations Population Fund (UNFPA) Director of Human Resources Sean Hand at the launch.

The report, *Facing a Changing World: Women, Population and Climate Change*, illustrates how climate change threatens to exacerbate the gaps between rich and poor and amplify the inequalities between women and men.

The report set out how the battle against climate change is more likely to be successful if policies take into account the needs, rights and potential of women. It highlights how societies’ adaptation and resilience to climate change can benefit from greater gender equality and access to reproductive health care. This means empowering women, educating girls, improving health care and meeting the needs of the 200 million women living in developing countries who would like to space or prevent pregnancies, and who do not have access to reliable contraception. Minister of State for Overseas Development, Peter Power officiated at the event. Also in attendance were politicians and diplomats from many embassies.
World Aids Day: dance4life Celebrations

Over 400 young people marked World AIDS Day at a hip hop and sexual health event in Ballyfermot, Dublin on December 1.

The IFPA’s dance4life team joined forces with The Base Youth Centre, Ballyfermot, to deliver the dance4life AIDS and sex education programme to 420 young people from schools and youth organisations in the west Dublin area.

The dance4life programme uses dance, music, film and workshops to help young people engage in the issue of HIV/AIDS and their own sexual health.

At the event young people from local schools learned the dance4life hip hop choreographed drill and participated in sexual health workshops. The event will be followed up with further sexual health workshops in the coming months. This dance is the same dance taught to the 680,000 young people around the world who are also engaged in the dance4life programme. The programme is operating in 27 different countries, from places as far apart as Russia, Sierra Leone and Moldova. In the last three months the dance4life programme has been delivered to nearly 1,200 young people in schools, youth organisations and third level institutions across Ireland.

FOCUS ON

Non Contraceptive Benefits of Oral Contraception, by Dr Caitriona Henchion

When the combined oral contraceptive pill (COCP) first became available in Ireland in 1963 it was introduced as a “cycle regulator” rather than a contraceptive to side step the staunchly conservative attitudes of the time. Now, 46 years on we are a little less shy about what COCP actually does. However, scientific research continues to throw up the beneficial side effects accrued to women who take it. From decreased menstrual disorders to reduced risk of developing a number of forms of cancer, it’s clear that the little old contraceptive pill does a lot more than prevent pregnancy.

First up is how COCP regulates a woman’s menstrual cycle. This benefit is well documented. COCP is well known for its ability to alleviate Menorrhagia (abnormally heavy and prolonged menstrual period at regular intervals). The Mirena intrauterine system is an even more effective treatment for menorrhagia and has largely replaced hysterectomy for this condition. What is less well known is that women who take COCP develop fewer functional ovarian cysts and fewer symptomatic fibroids. Women who take the COCP, or use Mirena, Implanon or Deprovera also have reduced risk of experiencing an ectopic pregnancy, a life-threatening pregnancy that develops outside the uterus, often in a fallopian tube.

Some combined oral contraceptives which contain non androgenic progestogens are actually licensed for the treatment of acne such as Dianette and Yaz. COCP has been linked to cancer, however recent reviews of the data suggests that on the whole, it has an overall protective function when it comes to cancer.

Research produced by the Royal College of General Practitioners in the UK states that pill-users have a 12% reduction in their risk of developing any form of cancer. As far as we know, COCP reduces your chance of getting cancer of the ovary (reductions of up to 50%), cancer of the womb (a 40% reduction after three years of use) and possibly bowel cancer. Much of the focus to date has been on breast cancer and the most recent research indicates that the pill is associated with only a slightly increased risk of the development of breast cancer. COCP is also associated with reduced risk of benign breast disease. COCP has again only been associated with a small risk of developing cervical cancer. Pelvic inflammatory disease may be reduced by all progestrone containing contraceptives although it is important to note that there is no protection against sexually transmitted diseases with any of the hormonal contraceptives.
While women's knowledge of reproduction and contraception has significantly improved since the pill's introduction, many misconceptions about it still exist, such as weight gain. The only form of contraception that has been scientifically associated with weight gain is the long-term injectable contraceptive Depo-Provera. There is no evidence to support a causal association with weight gain and any other contraceptive.

INTERNATIONAL

HIV Discrimination a Significant Challenge in the UK

New research shows physical and verbal harassment are a common reality for people living with HIV in the UK. Research conducted this year by the International Planned Parenthood Federation (IPPF) and released in advance of World Aids Day analysed the experiences of people living with HIV. The key findings of the study undertaken shows that people living with HIV face significant stigma and discrimination. 21% of the 867 participants reported verbal abuse. A further 12% said they had been physically harassed because of their HIV status in the previous 12 months. 17% of participants reported that they were denied health services because of their HIV status at least once in the previous 12 months. 18% stated that it was clear to them that their medical records were not being kept confidential. On a positive note the research indicated that people living with HIV are at the forefront of confronting prejudice and challenging stereotypes. 45% of those surveyed had personally confronted, challenged or educated people who were stigmatising them.

Research Update: Improved Access to Contraception Results in Fewer Abortions Worldwide

Increased contraceptive use has led to fewer abortions worldwide, but deaths from unsafe abortion remain a severe problem, killing 70,000 women a year, according to the Guttmacher Institute. A major global survey of contraceptive use conducted by the US organisation reveals that worldwide, the unintended pregnancy rate declined from 69 per 1,000 women aged 15-44 in 1995 to 55 per 1,000 in 2008. The proportion of married women using contraception increased from 54% in 1990 to 63% in 2003. Increases also occurred among sexually active single women. Increases in global contraceptive use have contributed to a decrease in the number of unintended pregnancies and, in turn, a decline in the number of abortions, which fell from an estimated 45.5 million procedures in 1995 to 41.6 million in 2003. The report, Abortion Worldwide: A Decade of Uneven Progress, also revealed that restricting the availability of legal abortion does not appear to reduce the number of women trying to end unwanted pregnancies. The survey of 197 countries indicates that 19 countries had liberalised their abortion laws over the last 10 years, compared with tightening of restrictions in only three countries. Thirty-six countries permit induced abortion only when the woman’s life is threatened, according to the report, and only one of these 36 countries — Ireland — is in a developed region.
IFPA in the Past: Former IFPA Chairperson Dr Andrew Rynne recalls Ireland’s first vasectomy

In the spring of 1974 the IFPA announced that it had performed four vasectomies in its Mountjoy Clinic. Obligatory gasps of shock and horror, not to mention the background din of crosier rattling, spread across Ireland. Was it not bad enough that this association was promoting sex outside of marriage and encouraging adultery? Now it was mutilating men as well!

The introduction of vasectomy into Ireland was truly revolutionary stuff. For liberals it was quite exquisite. It broke all the rules. For me it represented an excellent opportunity to extract myself from the morass in which I was then floundering. I had just returned from a five-year sojourn in Canada, where I had been seeing 70 patients a day, and was now sitting in a cold damp old Dispensary house in Clane twiddling my thumbs and seeing no patients. While in Canada I had learned how to do vasectomies. It was normal at that time in remote areas of Canada, for general practitioners to do surgery like tonsillectomies and vasectomies. So here I was back in Ireland where nobody could or would perform a vasectomy and the IFPA had to fly in a female surgeon from the UK to do the job.

In that first year I did 34 vasectomies under local anaesthetic at the IFPA’s Synge Street clinic. By 1978 that figure had jumped to 414 vasectomies. We were the only show in town and we had men coming from all over Ireland. That same year my local parish priest called to my house. He seemed anxious to set me straight on the immorality of my behaviour. “Mutilation”, he muttered. I politely showed him the door.

Then in 1979, came Mr Haughey’s bombshell – the so-called Health, Family Planning Bill, which made non-medical contraceptives (condoms) a matter for a doctor’s prescription and a dispensing pharmacist. It was the doctor’s job to ensure that condoms were only being used for “bona fide” family planning purposes i.e. only married couples.

In 1982 I had the honour of being elected Chairperson of the IFPA, a position I held for the next three years. By now, the IFPA was employing the services of a full-time pharmacist and prescriptions for condoms were being written and signed by a doctor in blocks of one hundred. We were complying in principle with the Act.

In 1983 I wrote to the DPP and told him that I was breaking the law and selling condoms directly to my patients at weekends when the local pharmacist was closed. In due course the local sergeant arrived into my surgery and I handed over samples of condoms and receipts and anything else needed to secure a conviction. A more compliant suspect would be hard to imagine. Clearly embarrassed, he thanked me profusely and took his leave. Two months later I received a £500 fine at Naas District Court. Clearly the Health, Family Planning Act was working nicely.

During my time as its Chairperson, the IFPA was much preoccupied with the task of establishing a tubal ligation service for Irish women. No Irish maternity hospital offered this service to women, even to those for whom a further pregnancy might be life threatening. Most women at that time seeking tubal ligation went to England. The IFPA was looking for a place, like a nursing home, where we could tack on a small operating theatre to facilitate our needs. However, it was all in vain. No such place was available in Dublin.

It was this frustrating experience and more than anything else that prompted me to establish Clane General Hospital in 1985. Today Clane Hospital is a thriving surgical unit employing 160 people. Very few people realise today that its conception sprang from the IFPA.

Writing this has reminded me yet again, of just what an important part the IFPA has played in shaping my life. Younger people may not realise what a hostile place Ireland used to be for those of liberal bent. Thank you Irish Family Planning Association. You have given me much. I hope I have given something in return.

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A Day in the Life: Kate Keeney, IFPA Crisis Pregnancy Counsellor

I have been working as a crisis pregnancy counsellor for the IFPA in Letterkenny since 2003. The service is based at the Women’s Centre on Port Road. Aside from this centre in Letterkenny, the IFPA provides crisis pregnancy counselling services at 10 other centres throughout Ireland. Our other centres can be found in Cork, Tallaght, Dublin city centre, Dundalk, Galway, Gorey, Limerick, Monaghan, Sligo and Waterford.

All our counsellors offer a safe and confidential space for anyone who wishes to explore their feelings around an unwanted or unplanned pregnancy. These services are offered for free. As a pro-choice organisation we offer women information on all their options – abortion, parenting and adoption. Some of the women who come to me already have children so they understand what is involved in parenting. Very few women consider adoption as an option for them. In a session, if required, I will provide my clients with information on how to access abortion services overseas.

There is a lot of confusion around the legal status of abortion in Ireland. Some women are worried that travelling abroad to get an abortion is illegal. Others think that they can access abortion services in Northern Ireland, which they can’t.

Every woman is different. Some women are very clear from the word go that they want an abortion, others are not sure what they want. What ever the decision, I support the woman’s own choice in all cases. I advise every woman who decides to have an abortion to book a post abortion check up.

The secrecy surrounding abortion in Ireland can be a real burden for women. Most women do not have negative feelings surrounding the decision to have an abortion itself, but have emotional problems dealing with the secrecy surrounding abortion. Many report feelings of guilt or regret that they can’t tell family or friends about the abortion. Others report strong fears of being judged. Confidentiality is a major issue for all my clients.

The fact that women living in Ireland have to travel to access termination services is an additional financial, emotional and physical stress. Getting to airports and clinics outside of the country adds to the strain of the situation. For some women getting the money together to make the journey delays the termination by a number of weeks. In my time working as a crisis pregnancy counsellor I have worked with two women who did not succeed in getting the money together to travel abroad.

Then of course there are those women who have encountered rogue crisis pregnancy agencies. These are very sinister operations, whose sole purpose is to prevent women from having abortions. There are a number operating in the north eastern region. In many instances, they misinform and intimidate women to achieve their aim. Women describe being harassed, bullied and given blatantly false information.

Abortion is a very emotive issue. Lots of women who come to me say that they never thought that they would find themselves in this position. Some of my clients would have thought that they were anti abortion until they find themselves, through different circumstances, making the decision to have an abortion.

I think what I do is really important for the women of Donegal. Before this service was established women had to travel to Derry to access crisis pregnancy counselling. I get huge support from the Women’s Centre where the IFPA’s service is based. The centre operates from a feminist perspective and provides a caring and empowering setting for crisis pregnancy counselling.

IFPA National Pregnancy Helpline 1850 49 50 51

SEASONS GREETINGS

2009 has been a busy year for the IFPA and we would like to take this opportunity to thank our staff, board members, clients and partners for their support over the last 12 months.

40 years after the foundation of the IFPA there is still much work to be done to achieve the vision of our founder members – an Irish society where all people can enjoy a fulfilling sex life and can make informed choices in their sexual and reproductive lives.

We wish everyone a happy and peaceful Christmas break and look forward to another busy and successful year in 2010.

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