

HSE Crisis Pregnancy Programme Annual Report 2010





## HSE Crisis Pregnancy Programme Map Of Counselling Services







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# FOREWORD FROM ASSISTANT NATIONAL DIRECTOR, HEALTH PROTECTION

January 2010 saw the former Crisis Pregnancy Agency's integration into the Health Service Executive to become the HSE Crisis Pregnancy Programme. As a result the last twelve months have been a challenging and exciting period of change for the Crisis Pregnancy Programme.

The integration came about as part of the Government's Programme for Rationalisation of State Agencies. The functions of the former Agency were transferred and legally vested with the Health Service Executive through the Health (Miscellaneous Provisions) Act 2009. A primary focus of the Programme's work in 2010 was to ensure the transition had a minimal impact on service providers and service delivery and the final year of the National Strategy would be implemented in full. These aims were supported by a Deed of Understanding agreed by the Agency, the HSE and the Department of Health and Children in 2009. The aims were also supported by a Transition Monitoring Group made up of representatives from the HSE, Department of Health and the former Chairperson of the Agency. This group was set up for two years and was tasked with monitoring progress on transition activities and ensuring transition targets set out in the Programme's annual business plan are met.

For most of 2010, the Programme was located in Children and Family Social Services Care Group in the Integrated Services Directorate and reported to Assistant National Director for Children and Family Social Services. The Programme commenced the process of forging links and relationships within the wider HSE and with services which support and add value to the work of the Programme. The Programme also made efforts to identify areas where it could share its expertise in the areas of crisis pregnancy and sexual health. In the latter part of 2010, the Programme was moved to Public Health with the aim of improving the alignment of the Programme to achieve better integration and create more opportunity to synchronise approaches with other related parts of the health service and to work more effectively at long term integration and planning 2012 - 2016.

In the space of 8 years the former Crisis Pregnancy Agency had a dramatic positive impact in the area of crisis pregnancy prevention, reduction of abortion, sexual health promotion and service development and improvement. Evaluation of the Agency's work in terms of outputs and impacts demonstrate significant achievements in tackling its mandate through evidence based initiatives in its funding, programmes and communications and research and policy arms. It is my vision that these achievements will be sustained and improved in the context of the HSE. We have to acknowledge we have a strikingly different fiscal and operating environment at this time. In acknowledging, this I will be working with the Programme to ensure we make efficiencies where we can but also to further increase the impact of the programme by extending its reach through other arms of the health service.

I would like to thank the Acting Director, Dr. Stephanie O'Keeffe, former Director Caroline Spillane, and the Programme's staff for their commitment, hard work and for embracing the change agenda. Responding effectively and efficiently to the evolving needs of a changing society will require a focus on research, evaluation, partnership, communications and service improvements. Within Public Health the Programme is in an excellent position to successfully address these needs.

Dr. Kevin Kelleher Assistant National Director, Health Protection



# INTRODUCTION AND OVERVIEW OF 2010 BY THE ACTING DIRECTOR

2010 was a significant year of challenge, change and adaptation for the HSE Crisis Pregnancy Programme. It was the first year of working within a new organisational structure, with new reporting relationships and different governance arrangements. It was characterised by a parallel focus on progressing transition requirements and integration projects but also driving the implementation of an ambitious service plan and delivering outputs across a broad range of projects. As with other areas within the public service, it was also a year characterised by a reduction in staffing numbers and ongoing requirements to consolidate activities and seek more efficient ways of delivering on our mandate and legislative requirements.

The Crisis Pregnancy Programme also delivered on an ambitious service plan in 2010, focusing on developments in service quality, training and education, information, research, communications and support. Our partnership with the Department of Education and Skills (DES), formalised in a Memorandum of Understanding signed in 2008, facilitated further progress, with the finalisation of a report examining schools' use of 'outside facilitators' to facilitate Relationships and Sexuality Education (RSE) delivery in the context of Social and Personal Health Education (SPHE). This report provides comprehensive data that will assist the Programme and the DES in improving standardisation and coordination in this area and will contribute to improved implementation levels of RSE/SPHE.

Increasing awareness and implementation of RSE through engagement with teachers, youth workers and health professionals also remained a key focus. This work is complemented by the Programme's continued funding for sexual health projects that bring about improvements in the provision of sex education for young people in community settings. Blanchardstown Youth Cafe, The Zone Youth Health Advice Cafe and the Exit Youth Health Cafe are examples of these.

At the end of 2010, the Programme had 37 service agreements in place with organisations operating throughout the country. Critical to these services are crisis pregnancy counselling services which play a very important part in the national strategy to reduce crisis pregnancy. The graduation took place of the third round of intakes from the NUI Maynooth certificate-level training course in 'Crisis Pregnancy Counselling Skills'. From this course, designed to improve standards in the field, came the development of the first alumni seminar which was held in November 2010. The impact of crisis pregnancy, not only on a woman, but also her partner and family, make it imperative that this issue is addressed holistically. This is a particularly difficult challenge for people with an intellectual disability who experience crisis pregnancy. In 2010, the Programme published a research report with the National Disability Authority (NDA) that describes international best practice and outlines how service providers, policy-makers and legislators in different jurisdictions address these challenges.

In addition, the Programme and the NDA hosted a seminar and workshops which provided a forum to discuss, debate and recommend a series of actions that can be progressed to ensure the sexual health, pregnancy, decision-making and parenting support needs of people with intellectual disability are met.

Influencing policy through partnerships and collaboration plays a central role in the implementation of our strategic objectives. Working in partnership ensures that the experience and capability of organisations, statutory or voluntary, are combined to achieve common goals. I would like to thank all of our funded service providers, Departments of State, professional bodies, statutory agencies, Universities and HSE colleagues for all their efforts in increasing and improving the quality of outputs from the Programme.

While the abortion rate for women giving Irish addresses, as collated by the UK Department of Health, continued to fall for the ninth successive year in 2010, crisis pregnancy is still a reality for thousands of women, their partners and families every year. The Health (Miscellaneous Provisions) Act, 2009 directs that the HSE has a responsibility to develop and implement a national strategy to address crisis pregnancy.

A significant development in late 2010 saw the commencement of a process of consultation and review to develop a third national strategy. This will follow from the outgoing strategic plan and ensure impacts made to date in this area are sustained over the period 2012 -2016. The Transition Monitoring Group has been extremely helpful in assisting and advising the Programme on its integration efforts and I would like to thank representatives from the Department of Health and Children, the HSE, and in particular, the former Chair of the Crisis Pregnancy Agency, Katharine Bulbulia, for their support and commitment in this regard.

The Programme has a new 22-member Advisory Group which met twice in 2010 and I thank each member for their insight and advice.

I would like to particularly thank the Assistant National Director for Health Protection, Dr. Kevin Kelleher for his interest, expertise, guidance and advice. Dr. Kelleher has been hugely supportive since the Programme was positioned into his area and he is committed to achieving efficiencies, synergies and greater impacts in 2011 and beyond.

Finally, I wish to thank the Programme's staff for their dedication and incredibly hard work during a challenging year of change. Their commitment to the priorities of the Programme, particularly during the transition period, has ensured that the strategy for 2007 - 2011 is nearing full implementation.

The Programme is ready to embrace all new opportunities and efficiencies that will arise when developing a new strategic plan in the context of the broader health service. This task will be made possible through maintaining and extending our strong partnerships with organisations and individuals and benefiting from their experience and expertise. The Programme is now firmly embedded within the HSE and looks forward to fostering future relationships and improving implementation in the HSE, with the support of the Assistant National Director for Health Protection.

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Dr. Stephanie O'Keeffe Acting Director, HSE Crisis Pregnancy Programme

## ROLE OF THE PROGRAMME

The HSE Crisis Pregnancy Programme (formerly Crisis Pregnancy Agency) was originally established in October 2001 under the Health (Corporate Bodies) Act, 1961, and was governed by the Crisis Pregnancy Agency (Establishment) Order 2001 (S.I. No. 446 of 2001), as amended by the Crisis Pregnancy Agency (Establishment) Order 2001 (Amendment) Order 2007 (S.I. No. 175 of 2007). In January 2010, the former Agency transitioned to the Health Service Executive (HSE) under the Health (Miscellaneous Provisions) Act, 2009 which provides, inter alia, that a number of important functions previously vested in the Crisis Pregnancy Agency are legally vested in the HSE.

The primary function of the Crisis Pregnancy Programme, as set down in the Statutory Instrument, and vested in the Health Service Executive as provided for by the Health (Miscellaneous Provisions) Act, 2009 is to prepare and implement a Strategy to address the issue of crisis pregnancy, in consultation with relevant Departments of State and with such other persons as are considered appropriate.

The purpose of the Programme is to bring strategic focus to the issue of crisis pregnancy and so to add further value to the work of existing service providers. The Programme's second Strategy - 'Leading an Integrated Approach to Reducing Crisis Pregnancy 2007 - 2011' was developed and published in 2007. In 2010, the Programme commenced work on its third national strategy 2011 - 2016.

#### The Strategy and Mandates of the Programme

The Strategy is the mechanism by which the Programme achieves the objectives set out in the three mandates specified in the Statutory Instrument.

Mandate 1: A reduction in the number of crisis pregnancies by the provision of education, advice and contraceptive services.

Mandate 2: A reduction in the number of women with crisis pregnancies who opt for abortion by offering services and supports which make other options more attractive.

Mandate 3: The provision of counselling services, medical services and such other health services for the purpose of providing support, after crisis pregnancy, as may be deemed appropriate by the Programme.

## The Programme's Way of Working Vision

Through the Strategy, the Programme works to achieve its Vision for a future where:

- Pregnancy and parenting are a welcomed and positive experience for women, their partners and families.
- Crisis pregnancies are experienced less often, but when they do occur, women can face and manage the crisis without fear for the future because appropriate support is available, no matter what choice they make.

#### Mission

The Programme was established to:

- Develop and support the implementation of a national Strategy to address the issue of crisis pregnancy, in consultation and partnership with Departments of State and relevant agencies and stakeholders.
- Work in partnership with the appropriate agencies and stakeholders to promote and co-ordinate the attainment of the objectives contained in the Strategy.
- Promote the development by the Departments of State and appropriate agencies of an operational plan to implement the Strategy in its own sphere of responsibility. Monitor and review the attainment of the objectives of such operational plans.
- Produce periodic reports on progress and propose remedial action where required.

- Take such measures and engage in such activities as it considers necessary to address the issue of crisis pregnancy.
- Draw up codes of good practice for consideration by agencies and individuals involved in providing services to women with crisis pregnancies.
- Promote and commission research into aspects of crisis pregnancy as considered necessary.
- Furnish advice, whenever it is so required by the Minister or on its own initiative, to the Minister or other Ministers of the Government on issues relating to crisis pregnancy.
- Perform any other functions in relation to crisis pregnancy that the Minister may from time to time assign to it.

The functions of the Programme are as follows: The Health (Miscellaneous Provisions) Act, 2009 provides for the administration and business in connection with the performance of the following functions to be transferred to the HSE. These functions are those vested in the Programme under Article 4 (i), (ii), (v), (vi), (vii), (viii), (ix) and (x) of the Crisis Pregnancy Agency Establishment Order<sup>[1]</sup>.

The functions of the Programme are as follows:

- (i) in consultation with Departments of State<sup>[2]</sup> specified in the schedule and with such other persons as considered appropriate to prepare a strategy to address the issue of crisis pregnancy, this Strategy to provide, inter alia, for;
  - (a) a reduction in the number of crisis pregnancies by the provision of education, advice and contraceptive services
  - (b) a reduction in the number of women with crisis pregnancies who opt for abortion by offering services and supports which make other options more attractive
  - (c) the provision of counselling services, medical services, and such other health services for the purpose of providing support, after crisis pregnancy, as may be deemed appropriate by the Programme

(ii) to work in partnership with the appropriate agencies to promote and co-ordinate the attainment of the objectives contained in the Strategy;

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- (v) to produce periodic reports on progress and to propose remedial action where required;
- (vi) to further the attainment of the objectives specified in Articles 4(i)(a), 4(i)(b) and 4(i)(c), in co-operation with such other persons as may be considered appropriate by the Programme by;
  - (a) promoting public awareness
  - (b) developing, promoting and disseminating information and information material, and
  - (c) fostering the provision of education and training to include;
  - (i) the commissioning of media advertising campaigns
  - (ii) the commissioning of electronic media campaigns
  - (iii) the development of resource materials, promotional materials and training materials
  - (iv) the dissemination of these materials and/or
  - (v) such other methods as the Programme shall seem appropriate for the purpose of performing its functions under paragraph (vi) of this article
  - (vii) to draw up codes of best practice for consideration by agencies and individuals involved in providing services to women with crisis pregnancies
  - (viii) to promote and commission research into aspects of crisis pregnancy, as considered necessary
  - (ix) to furnish advice, whenever it is so required by the Minister or on its own initiative, to the Minister or other Ministers of the Government on issues relating to crisis pregnancy
  - (x) to perform any other functions in relation to crisis pregnancy that the Minister may from time to time assign to it

<sup>&</sup>lt;sup>[1]</sup> S.I. No. 446 of 2001 Crisis Pregnancy Agency (Establishment) Order, 2001

<sup>&</sup>lt;sup>[2]</sup> Department of Health and Children, Department of Education and Skills, Department of Environment, Heritage and Local Government, Department of Justice and Law Reform.

### STRUCTURE OF THE PROGRAMME The Health Service Executive

The Health (Miscellaneous Provisions) Act 2009 provides for the administration and business in connection with the performance of the functions of the former Crisis Pregnancy Agency to be transferred to the Health Service Executive (HSE) as part of the Government's programme for the rationalisation of State agencies. The transfer came into effect on 1st January 2010 and the former Agency became known as the HSE Crisis Pregnancy Programme.

For almost all of 2010, the Crisis Pregnancy Programme was located in the Integrated Services Directorate of the HSE, reporting to Children and Family Social Services. In November 2010, the Programme's reporting relationship was realigned to Public Health, also in the Integrated Services Directorate.

The Programme developed strong links and synergies with Children and Family Social Services during 2010 and will continue to do so into the future. The Programme also looks forward to forging strong working links and the development opportunities that will be open to it through working within Public Health in 2011 and beyond.

#### Transition Monitoring Group

Following the agreement of a Deed of Understanding governing the transfer of the Programme to the HSE, the Transition Monitoring Group was established with responsibility for monitoring the successful integration of the Programme into the HSE.

The group achieves this by ensuring that the Programme has the financial and human resources necessary to implement its Strategy and that the strategic objectives and responsibilities to stakeholders, including funded services, are carried out. The Monitoring Group met twice in 2010.

#### Advisory Group

The Advisory Group, modelled on the former Consultative Committee of the former Agency, is a multidisciplinary forum and is made up of a variety of stakeholders from Government Departments, the HSE, funded service providers and other representatives from the health and social sectors.

The Group acts as a forum for organisations that have an interest in the work of the Programme to present their views. Its function is "to advise the Programme in relation to (a) any matters pertaining to crisis pregnancy as are referred to it by the Programme and (b) any other matters coming within the remit of the Programme".

The Group met to discuss the following topics during 2010:

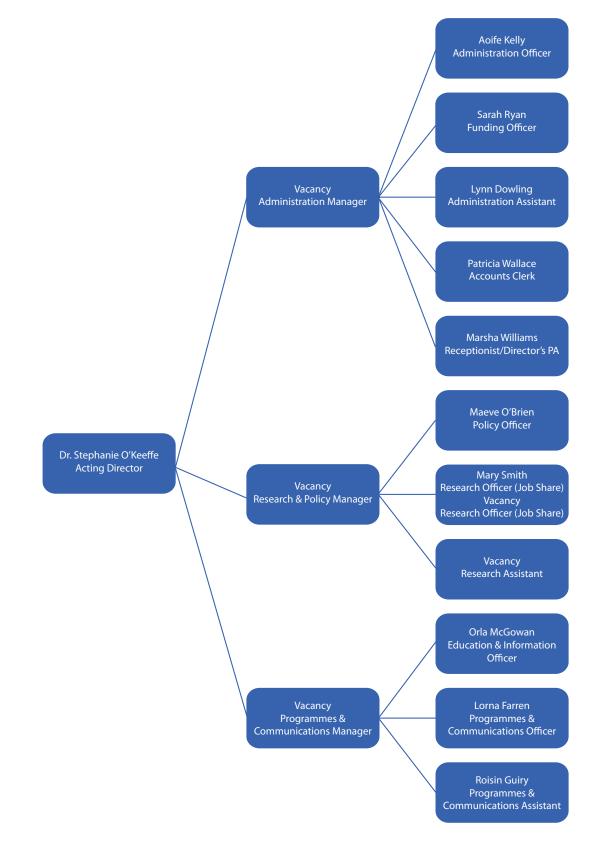
- Addressing the role of outside visitors in the delivery of relationships and sexuality education in the home, school and community settings: how can the Crisis Pregnancy Programme, in partnership with the Department of Education and Skills, address matters arising.
- Sexual responsibility, fatherhood and discourses of masculinity among socially and economicallydisadvantaged young men in Ireland: how can vulnerable fathers be better supported.

A full list of Advisory Group members is given in Appendix 2.

#### Staff of the Programme

The Programme has 14 members of staff - the internal structure is outlined in Figure 1.

Figure 1 - Staff members are current as at 31st December 2010.



Details of other staff members who held positions for part of the year are included in Appendix 3.

### STRATEGIC OBJECTIVES

In 2007, the Crisis Pregnancy Agency (now HSE Crisis Pregnancy Programme) developed and launched its strategic plan for how it would address the issue of crisis pregnancy in Ireland, building on the positive work that had been done under the Agency's first Strategy (2004 – 2006).

The approach the Agency took in developing the Strategy was to identify a number of strategic priorities that would help it to address three central objectives which derive from its mandates:

- To reduce the number of crisis pregnancies.
- To reduce the number of women choosing abortion as an outcome of crisis pregnancy.
- To safeguard women's physical and mental health following termination of pregnancy.

For the five-year period of the Strategy, the Crisis Pregnancy Programme is focusing its work around seven key priorities:

## 1. Knowledge about Relationships and Sexuality for Adolescents

Achieving measurable improvements in knowledge about relationships and sexuality among adolescents through home-, school- and community-based education.

#### 2. Contraception

Improving access to and information on contraception and contraceptive services – particularly for groups at risk of crisis pregnancy.

#### 3. Communications

Conducting effective and innovative communications campaigns to promote positive behavioural and cultural changes regarding sexual attitudes, choices and behaviour.

#### 4. Crisis Pregnancy Services

Improving access to and delivery of crisis pregnancy counselling services and post-abortion medical and counselling services.

#### 5. Continuation of Pregnancy

Improving the range and nature of supports central to making continuation of pregnancy more attractive. Ensuring that women, their partners and families are fully informed about these supports.

#### 6. Research

Strengthening understanding of the contributory factors and solutions to crisis pregnancy. Using research findings to promote evidence-based practice and policy development.

#### 7. Policy Influence

Influencing policy-makers and key players regarding prevention of crisis pregnancy, reproductive decisionmaking and crisis pregnancy outcomes.

#### Development of a successor national Strategy to reduce crisis pregnancy 2012 - 2016

The Programme initiated a new process and co-opted support toward the end of 2010 to set out the tasks and phases required to develop a new strategic plan, as required by legislation.

This new Strategy will be fully aligned with HSE structures and priorities. The process was approved and established in late 2010 and will continue into 2011.

#### **Internal Strategic Priorities**

The Programme also identified a number of internal strategic priorities to ensure that support systems are in place to deliver the Strategy successfully.

All functions of the Programme (Administration, Funding, Programmes and Communications, Research and Policy) contribute to the development and implementation of projects that fulfil the strategic objectives.

The 2010 Annual Report is structured to show how the Programme has made progress against priority areas during the year.

### **STRATEGIC PRIORITY 1** Knowledge about Relationships and Sexuality for Adolescents

To achieve measurable improvements in knowledge about relationships and sexuality among adolescents through home, school and community-based education

Relationships and sex education (RSE) plays a critical role in preventing crisis pregnancy and the HSE Crisis Pregnancy Programme has placed a large degree of its strategic focus on improving knowledge levels around relationships and sexuality among young people both in school and out-of-school settings.

#### Relationships and sex education in post-primary schools and the use of 'outside visitors' to assist with delivery of the programme.

In 2010, the Programme completed another significant project in its Memorandum of Understanding with the Department of Education and Skills (DES). In conjunction with the Department, the Programme completed an audit of the use of 'outside visitors' in post-primary schools to assist with the delivery of Relationships and Sexuality Education (RSE).

### "In 2010, the Programme delivered a number of key actions including the completion of a research project on the use of outside facilitators in the delivery of school-based RSE."

In 2010, the Crisis Pregnancy Programme delivered a number of key actions including the completion of a research project on the use of outside facilitators in the delivery of school-based RSE. The Programme also funded a range of services connecting young people with opportunities for relationships and sexuality education. These included sexual health and crisis pregnancy prevention information and support for teachers, parents and youth workers in delivering RSE in the home, school and out-of-home settings.

#### Key actions in 2010 included:

- Continued funding services to connect with young people e.g. Youth Health Cafes and Teenage Health Initiative
- Contributions to the delivery of RSE programmes in post-primary schools
- Supporting the National Parents' Council Primary to deliver Team Up training on the RSE programme
- Progressing the roll-out of the TRUST resource for teachers through the Department of Education and Skills

The impetus for the audit was the findings from a previous research project commissioned by the Department of Education and Science (DES) and the former Crisis Pregnancy Agency (CPA). The report, entitled 'Relationships and Sexuality Education in the context of Social, Personal and Health Education: An Assessment of the Challenges to the Full Implementation of the Programme in Post-Primary Schools' identified barriers and facilitators to full RSE delivery.

Findings from the report showed that 40% of schools reported using 'outside facilitators' to teach RSE/SPHE and that 80% of schools in the study thought that having more outside facilitators would help enhance future RSE/SPHE delivery. Government-level respondents interviewed for this study felt the role of 'outside facilitators' merited further development and expansion.

While findings from the earlier study helped highlight the role played by 'outside facilitators' or 'visitors', little was known of the range, scale and nature of such services – their similarities and differences.

The Programme commissioned and completed a research project in 2010 to address these gaps, with the report due for publication in 2011. The report is significant in that it provides useful data, available for the first time, that the Programme and the DES will use to progress best practice in the area. The Programme, with its key partner the Department of Education and Skills, is committed to achieving higher implementation levels of RSE in all schools.

#### Funding services to connect with young people

The programme engages with young people through a variety of different settings and using different means. One way it does this is through its funding programme. Funding and supporting services that provide essential relationship and sexual health education opportunities to young people is a core priority.

#### Youth Health Cafés

In 2010, the Programme continued to input into and provide funding to support the delivery of Blanchardstown, The Zone Youth Health Cafés, the Exit Youth Health Café (Tallaght) and Squashy Couch Youth Health Café in Waterford. In 2010, these services provided a variety of opportunities through which information and education was delivered to young people on relationships and sexuality topics. Through its evaluations, the programme has found that youth health cafés are an innovative way to engage with young people in an informal, supported, out-of-school setting.

In 2010, youth health cafés provided young people with information and assistance on a variety of health issues, particularly in relation to sexual health and crisis pregnancy support for young people who have a crisis pregnancy.

These projects are designed to also engage teenagers who are at risk of crisis pregnancy, for example, low income families, single parent families, adolescents with weaker education abilities, low self-esteem, living with guardians, susceptible to peer pressure and siblings who had children in teenage years. The target age group of the cafés is 14 - 19 years.



Squashy Couch, Waterford

Teenage Health Initiative (THI) for young males Throughout 2010, the Programme continued to work with Blanchardstown Youth Service - Foróige on the delivery of the THI for young males. This programme is focused on personal development and aims to engage with young males in making informed responsible lifestyle choices. Research consistently finds that teenage men at risk of leaving school early have sexual health knowledge and information needs that are not met.

This service was funded by the Crisis Pregnancy Programme as it addresses knowledge gaps in relationships and sexuality education in young people aged 13 to 17 years, many of whom are early schoolleavers or those at risk of becoming early school leavers. This is done through a variety of games, information sessions, discussions and role play. Some of the malespecific health issues which are covered in the programme include information on health and hygiene, sexually transmitted infections (STIs), contraception, teenage pregnancy and teen parenting. There is also a focus on assertiveness and communication skills.

### "Funding and supporting services that provide essential relationships and sexual health education opportunities to young people is a core priority."

This programme focuses on male participants with the target group, young men aged 13 to 17. Young males are recruited to the programme through the youth health cafés, various local youth projects, Garda Youth Diversion Projects and Early School Leavers projects.

All information and supports provided are youth-friendly, and participants are given informative health education material, with particular emphasis on STI prevention, contraception and pregnancy. These resources were developed specifically for young males and are used during each of the THI groups.

In 2010, the Programme funded a range of training initiatives to achieve measurable improvements in knowledge about relationships and sexuality among adolescents. These include:

- The Programme continued to provide funding to support The National Parents' Council Primary (NPC Primary) to deliver the 'Team Up' training for parents on the 'Relationships and Sexuality Education' programme that forms part of the SPHE curriculum. In 2010, 30 'Team Up' programmes/information sessions were delivered to 394 parents across the country with the training continuously evaluated by the NPC Primary. It is planned to rebrand and repackage the programme to clearly identify the content for parents and there will be an additional emphasis on training for parents of children with special needs.
- Ongoing support was provided to Letterkenny Women's Centre, Donegal, for the delivery of a comprehensive and holistic sexual health and personal development education pilot programme for young women experiencing social exclusion in the County.

- Continued funding was provided to Pact to deliver an RSE programme as part of outside facilitation in RSE in a school setting. Expanded to areas outside Dublin including Cavan and Wicklow, the service will focus on extending this programme to out-of-school settings during 2011.
- The Programme continued to work with Pavee Point on the roll-out of the pilot project to up-skill trainers and deliver training to young travellers and their parents. This training focused on the areas of sexual health and information, healthy relationships, traveller culture surrounding these topics and selfesteem. Included in this is a research component into attitudes and behaviours among this group. An evaluation of this project is due to be completed in 2011.
- The National Youth Council of Ireland (NYCI) continued to receive funding to deliver sexual health and relationships training for those who work with young people in a youth work, out-of-school or non-formal education setting. This training explores the concept of delaying early sex amongst young people as part of the Programme's 'b4udecide.ie' education initiative. The NYCI also developed policy and procedure workshops for those who work with young people and who deliver sexual health information, to be delivered during 2011.

- Following successful evaluation, the IFPA received continued funding for the delivery of education and personal development courses for parents on relationships and sexuality matters through the 'Speakeasy Programme' (IFPA, regional delivery). Over the period 2009 - 2010, the programme was delivered to 76 participants in 10 groups, with each group receiving 8 three-hour training sessions.
- There was continued provision of The 'Real Deal' sexual health and personal development programme for early school leavers or those at risk of becoming early school leavers during the academic year 2009 -2010. Following a successful evaluation of this phase of the programme, continued funding was granted to support the delivery of the programme over 2010 -2011 to male-only groups of early school leavers or those at risk of leaving school early.
- The South-West Counselling Centre, through Youthreach and schools in County Kerry, continued to deliver the 'Getting Real', a personal development programme for adolescents who are at risk of becoming early school-leavers or who are early school-leavers. This programme was successfully evaluated during 2010.



The launch of 'Real Deal' sexual health and personal development programme

#### Supporting parents, teachers and youth workers to provide relationships and sex education in the home, school and out-of-home settings

The implementation of Relationships and Sexuality Education (RSE) is supported by the development of resource materials that acknowledge the reality of adolescents' social experiences and the challenges they face. A significant effort was made in 2010 to reach key target audiences of parents, teachers, youth workers and those working with parents to assist them when talking to children about relationships and sex.

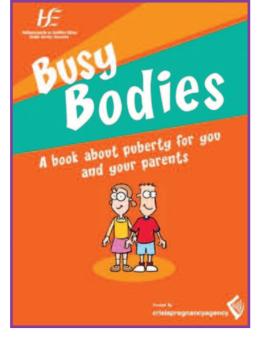
The Programme continued to work with the Department of Education and Skills by progressing the roll-out of the Talking Relationships, Understanding Sexuality Teaching (TRUST) Resource for teachers of senior-cycle students. The resource is available through training to teachers and youth workers and was used as part of the RSE training of 297 teachers in 2010.

In addition to rolling out the TRUST resource, the Programme has developed a number of information and education resources for parents and those who work with parents. The Programme distributed these resources to parents through a range of channels such as regional papers, healthpromotion.ie, the SMS freetext service and training.

The Programme also disseminated 800 sexual health information packs to youth workers, parents, STI clinic nurses, and guidance counsellors through conferences and promotion via radio. A further 340 sexual health information packs were distributed to teachers who participated in relationships and sexuality education training courses organised through the DES Regional Managers for Social Personal and Health Education (SPHE).



'Tips for talking to older teenagers': supplement for parents of 15-17 year olds



Busy Bodies': Booklet and DVD for parents of 10-14 year olds



'You can talk to me': DVD and booklet for parents of 11-15 year olds



'The Facts': DVD for parents of 15-17 year olds

## STRATEGIC PRIORITY 2 Contraception

To improve the access to and information on contraception and contraceptive services, particularly for groups at risk of crisis pregnancy

In 2010, a number of actions were taken to improve access to and information on contraception and contraceptive services. New and innovative distribution channels were designed and implemented to deliver Think Contraception Protection Packs (consisting of a neatly packaged condom and sexual health leaflet) to the target audience, 18 to 24 year olds. This included coordinating the distribution of protections packs at Oxegen music festival and in towns and cities around the country.



New Think Contraception Protection Packs

In 2010, an on-line interactive Think Contraception game was also developed to engage the target audience. In relation to contraceptive service provision, the Programme funded a number of services aimed at improving access to contraception and to increase the range of contraception available nationally.

#### Key actions in 2010 included:

- New innovative channels for distribution of Think Contraception Protections Packs developed in 2010:
  - Think Contraception branded Eco Cabs accompanied by trained staff travelled all over Ireland distributing Protection Packs to 18-24 year olds outside pubs and clubs
  - New interactive game developed to engage 18-24 year olds with Think Contraception message during nationwide distribution
  - Think Contraception packs distribution and engagement with festival goers at Oxegen 2010
- Funded services aimed at improving access to contraception and to increase the range of contraception available nationally

## Think Contraception Eco Cabs – new and innovative method to distribute Protection Packs

In 2010, Eco Cabs branded with the Think Contraception message were used as a new and innovative method of communicating the Think Contraception message and distributing Think Contraception Protection Packs to 18-24 year old men and women. Eco Cabs travelled to pubs and clubs in Dublin, Cork, Galway, Limerick, Kilkenny and Waterford over the Christmas period, accompanied by trained promotional staff. The initiative set out to highlight to the target group the importance of using contraception every time they have sex to prevent unplanned pregnancies and protect against sexually transmitted infections (STIs).

## New interactive game developed to engage 18-24 year olds with 'Think Contraception' message

In 2010, the Programme developed a new on-line interactive game, which set out to engage 18 to 24 year olds while delivering the 'Think Contraception' message and included information on ways to protect themselves from STIs and unplanned pregnancies. The interactive game was promoted outside pubs and clubs in 2010 when Protection Packs were being widely distributed. This offline activity was promoted online with winners



Think Contraception branded Eco Cabs. Staff travelled all over Ireland distributing Think Contraception Protection Packs outside pubs and clubs.

from each county being announced on thinkcontraception.ie, a key educational tool which provides information on all aspects of sexual health in an interactive and user-friendly manner. Thinkcontraception.ie received approx 100,000 visits in 2010.

#### Think Contraception distribution and engagement with festival goers, students and health professionals grows in 2010

The Think Contraception Protection Team was onsite at Oxegen in 2010 distributing Think Contraception Protection Packs and interacting with festival goers through quizzes and film interviews.

The Think Contraception Protection team engaged with festival goers by asking them quiz questions during the distribution of 10,000 Think Contraception Protection Packs and stickers. Each Protection Pack consisted of a drawstring bag containing a sexual health education leaflet and an individually-boxed condom.

Festival goers filmed by the team were asked about their top tips for a safe and fun



An interactive game engaged the target audience with the 'Think Contraception' message whilst also providing information on ways to protect themselves from STIs and unplanned pregnancy.

weekend, how to deal with pressure and how to discuss difficult subjects with a partner. The interviews were posted on thinkcontraception.ie to encourage sexually-active young adults to plan ahead and avoid risk-taking behaviour. Festival goers were encouraged to visit thinkcontraception.ie to view the interviews.

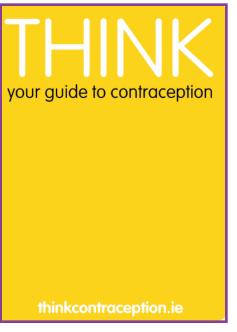
In total in 2010, 70,000 Think Contraception Protection Packs were distributed through a range of channels such as outside pubs and clubs during the Christmas period, the Oxegen music festival, during Sexual Health & Awareness Week (SHAG) and Freshers' Week in Colleges and Universities nationwide. Protection Packs were also distributed to STI Clinics and GP surgeries.

111,000 Think Contraception leaflets were distributed to students through Freshers' and SHAG Week packs, to health professionals through healthpromotion.ie and to youth workers and teachers through training.

## Improving access to contraception for at-risk groups

ICGP training course in Long Acting Reversible Contraception (LARC) In 2010, the Programme continued to fund the Irish College of General Practitioners (ICGP) to develop and pilot a national training programme for primary health care professionals in methods of and use of LARC. Research from the UK found that LARC can be effective in terms of preventing unwanted pregnancies.

The pilot represents the initiation of the first such accredited training programme in Ireland and aims to work towards the development of an education programme that will result in the awarding of an Advanced Certificate in Family Planning.



<sup>111,000</sup> Think Contraception leaflets were distributed in 2010

The IFPA/Guide 'Young Person's Clinic' - service for at-risk U18s In 2010, the Programme continued to fund the IFPA and the Guide Clinic in St. James' Hospital to provide free contraceptive and sexual health medical consultations and services to socially-excluded young people via the weekly 'Young Person's Clinic'. In recognition of the fact that young people attending the Guide Clinic for STI testing had very poor access to contraception, the project was established to target sociallyexcluded sexually-active young people considered to be at a high risk of a crisis pregnancy.

The service model involves coordinating referrals between the IFPA and the Guide Clinic with the

aim of providing at-risk youths with comprehensive sexual and reproductive health services in a youthfriendly and accessible manner.

## "In total in 2010, 70,000 Think Contraception Protection Packs and 111,000 Think Contraception leaflets were distributed to key target groups."

## The Youth Health Service's (YHS) family planning service

In 2010, the Programme continued its ongoing funding of the YHS in Cork for the provision of free sexual health consultations, contraceptive prescriptions and pregnancy testing to young people below the age of 21. These services have been funded by the Programme since 2005, during which time a total of 2,721 young people have accessed the service.

The YHS is a HSE South-led project in partnership with Ógra Chorcai and Cork City Development Board. The service provides a range of different services for young people under one roof including drug and alcohol counselling, health promotion information, supports around a range of youth issues and support to access welfare information services. AkiDwA sexual and reproductive health workshops In 2010, AkiDwA (national network of African and migrant women living in Ireland) was provided with funding to continue to deliver a series of sexual and reproductive health workshops in five new locations (Athlone, Monaghan, Sligo, Ballyhaunis and Waterford) and to deliver two-day workshops in three areas that were previously visited in 2009 (Dun Laoghaire, Cork and Galway).

The aim of the project was to provide sexual and reproductive health information to women seeking asylum in Ireland and to link them with the local relevant services, including crisis pregnancy and contraceptive services in a culturally-sensitive, informed and appropriate manner.

## STRATEGIC PRIORITY 3 Communications

To conduct effective and innovative communications campaigns to promote positive behavioural and cultural changes regarding sexual attitudes, choices and behaviours

Developing and delivering relevant and effective health education programmes is a core activity of the HSE Crisis Pregnancy Programme. All campaigns are evidence-based, non-judgemental and focus on empowering individuals to make informed choices about their sexual health. During 2010, the main focus was on the re-development of the Positive Options campaign to communicate the benefits of counselling and the support it can provide to women experiencing a crisis pregnancy. The Crisis Pregnancy Programme also worked on expanding its dissemination channels to reach key target audiences in a variety of settings and actively promoted the b4udecide.ie education initiative at numerous events.

#### Key actions in 2010 included:

 Re-development of the Positive Options campaign to clearly communicate the benefits of counselling and the support it can provide to women experiencing a crisis pregnancy

- Expansion of dissemination channels to reach key target groups
- Education sponsor partnership with Young Social Innovators

#### The Positive Options campaign was re-developed to clearly communicate the benefits of counselling and the support it can provide to women experiencing a crisis pregnancy

In 2010, the Programme re-developed the Positive Options campaign which aims to highlight the fact that there is always a supportive listener available to help during a crisis pregnancy, in the form of highly-trained crisis pregnancy counsellors.

New television, radio, print and online advertisements were created with the new campaign message that if you are dealing with an unplanned pregnancy, talking to a counsellor can help. The Positive Options leaflet, wallet card and poster were re-designed in line with the new campaign.



New television, radio, print and online advertisements were created communicating the new Positive Options campaign message.

Positive Options has proven to be a strong brand, as is indicated by the high awareness levels, with 74% of the target audience recalling the main message of the campaign, according to independent market research. The Positive Options campaign, while trusted by the target audience, needed to shift its focus to clearly communicate the benefits of counselling and the support it can provide to women experiencing a crisis pregnancy. Counselling offers an opportunity for people to explore their feelings about a pregnancy with someone who is not personally involved, while counsellors can also provide practical information on rights and entitlements and referrals to specialist services, if required.

> I'm too young. I'm too old. I didn't plan it. It's the wrong time. What about work? I don't know what to do... Unplanned pregnancy? Talking to a counsellor can help.



51,000 'Positive Options' leaflets and 42,000 Positive Options wallet cards were distributed, primarily to GP surgeries and pharmacies. The website www.positiveoptions.ie received 65,000 visits. "Non-judgemental crisis pregnancy counselling services, promoted through the Positive Options campaign, are available at over 50 locations around the country"

In 2010, 51,000 Positive Options leaflets and 42,000 Positive Options wallet cards were distributed, primarily to GP surgeries and pharmacies. The website positiveoptions.ie received 65,000 visits, while approximately 19,000 text messages were received requesting crisis pregnancy counselling information.

The Programme continued to place regionalised Positive Options advertising in the Golden Pages nationwide to promote crisis pregnancy counselling services under the Positive Options banner and to ensure it continued to have a strong presence in these directories.



To ensure a strong and continued presence, a heavyweight Positive Options campaign appeared in the Golden Pages nationwide.

# Expansion of dissemination channels to reach key target groups with an outstanding 592,000 information and education resources distributed

The Programme has a variety of information and education resources which are available to the general public and those who deal with the prevention and management of crisis pregnancy in the course of their work. Ensuring that these resources are widely and easily accessible is key to enabling people to make informed decisions about their sexual and reproductive health. The Programme expanded its dissemination channels in 2010 to reach key target audiences such as health professionals, youth workers, teachers, parents and young people.

#### Healthpromotion.ie becomes primary method for communication and dissemination of all of the Programme resource materials

Between August and December 2010, over 32,000 information and education resources were ordered and disseminated through healthpromotion.ie.

The Programme worked with HSE Health Promotion to make all Programme resources available through healthpromotion.ie in 2010.

This website is the central HSE information and dissemination portal for all health-related materials and can reach large numbers of health professionals, youth workers and teachers. The most popular leaflets ordered in 2010 were the Think Contraception information leaflet and the 35-55 Contraception information leaflet.

#### Other innovative channels for distribution

A further 560,000 information and education resources were disseminated through a variety of events, health promotion activities, newspapers, SMS service, training and conferences in 2010. These included the women's mini-marathon goodie bags; Freshers' Week and SHAG Week in colleges; the National Ploughing Championships; Young Social Innovators; and large-scale dissemination in the 'Sunday World' newspaper.

# "592,000 information and education resources were distributed to key target audiences nationwide"



Between August and December, over 32,000 resources were ordered and disseminated through healthpromotion.ie

#### Young Social Innovators (YSI) programme -Education Sponsor Partner

In 2010, the Programme became an Education Sponsor Partner to the Young Social Innovators (YSI) programme. YSI is a key setting for reaching large numbers of young people all over Ireland. In 2010, over 5,500 young people participated in over 350 youth-led team-based action projects.

This partnership enabled the promotion of the Programme's education resources through the YSI network of schools, teachers and young people. YSI disseminated 183 of the Programme's information packs to YSI guides at YSI trainings. The Programme sponsored a new challenge within the overall 'Health and Well Being' category in the area of relationships and sexual health. 2010 saw a significant increase in projects relating to relationships and sexual health. b4udecide.ie receives over 80,000 visitors in 2010 b4udecide.ie is an education initiative which aims to encourage teenagers to make healthy, responsible decisions about relationships and sex. The Department of Education and Skills, Health Promotion, Parentline, the National Youth Council of Ireland and teenagers continue to collaborate with the Programme on the b4udecide.ie education initiative.

In 2010, the b4udecide.ie website received over 80,000 visitors with young people looking at on average 3.5 pages per visit. The website features quizzes, polls and video interviews with young people on forming healthy relationships and dealing with peer pressure. A section on the website called the 'facts' deals with the age of consent, contraception, STIs and crisis pregnancy.

Further awareness of b4udecide.ie among young people was promoted by attending two youth-focused events during 2010:

**1. The Young Social Innovators' Annual Showcase** young people engaged with b4udecide.ie through quizzes and polls on the website. Students who developed projects relating to crisis pregnancy were also filmed and their interviews were posted on the b4udecide.ie website.



**2. Dail Na Nóg,** the National Youth Parliament for young people aged 12 -18 years - young people engaged with b4udecide.ie through quizzes and polls on the b4udecide.ie website.



### "b4udecide.ie received over 80,000 visitors in 2010"

#### Other communications programmes

- The Programme's website, crisispregnancy.ie, contains comprehensive information relating to crisis pregnancy and is frequently updated with research, press releases and information resources. The website received over 20,000 visits in 2010.
- The Minister for Health and Children in 2010, Mary Harney, T.D., launched the Programme's 2009 Annual Report.
- The Programme gave inputs into various courses on sexual health including the HSE Teenage Health Initiative training, USI Welfare training, Irish Foster Carers' Association training, Guide Clinic conference and National Parents' Council - Post Primary briefing. The Programme also placed exhibition stands at a number of events including the Young Social Innovators' Showcase, Dail Na Nog and the Institute of Guidance Counsellors' annual conference.
- The Programme engaged in a number of initiatives including the ongoing publication of an e-newsletter, regularly issuing press releases on the work of the Programme, responding to ongoing media enquiries and briefing journalists and relevant stakeholders on emerging issues with respect to crisis pregnancy.

### STRATEGIC PRIORITY 4 Crisis Pregnancy Services

To improve access to and delivery of crisis pregnancy counselling services and post-abortion medical counselling services

This strategic priority is related to the HSE Crisis Pregnancy Programme's second mandate - to provide services and supports for women experiencing crisis pregnancy. This is primarily addressed through the provision of crisis pregnancy counselling and the support and input of the many services which engage with women and their families on a daily basis. It is also addressed in funding services and supports for new parents and those considering adoption. The latter services are covered under strategic priority 5.

In 2010, the Crisis Pregnancy Programme's focus was on developments in enhancing standards in crisis pregnancy counselling, promoting the availability of free nonjudgemental crisis pregnancy counselling services and working through health professionals to ensure women continue to be aware of and access services.

#### Key actions in 2010 included:

- Continued support for Certificate in Crisis Pregnancy Counselling Skills at NUI Maynooth (NUIM)
- Supported continuing professional development programmes for those involved in crisis pregnancy counselling
- Promoted Positive Options campaign via 50 centres nationwide
- Continued funding for organisations contracted to provide post-abortion counselling services

## Working to improve and maintain standards in crisis pregnancy counselling skills

**Certificate in Crisis Pregnancy Counselling Skills, NUIM** In 2010, the Programme celebrated seventeen people graduating from the certificate course in crisis pregnancy counselling skills at a ceremony at NUI Maynooth on 22nd November. 2010 was the third year in which the Programme funded the Department of Adult and Community Education, National University of Ireland Maynooth (NUIM), to roll out the certificate-level training course in 'Crisis Pregnancy Counselling Skills'. Graduates in 2010 completed the year-long, skills-based programme and were made up of crisis pregnancy counsellors and support staff. The aims of this course are to:

- Define and explore key aspects of crisis pregnancy counselling
- Enhance crisis pregnancy counselling skills in the context of a reflective practice
- Define a model of learning
- Position crisis pregnancy in an inter-cultural context
- Explore core professional issues underpinning crisis pregnancy counselling
- Examine ethical, legal and professional issues in crisis pregnancy counselling

The Programme aims to support individuals working in a paid or voluntary capacity to further enhance their counselling skills in this unique field of counselling and to set standards of good practice in their organisations.

The fourth year of the course commenced in September 2010 with 16 representatives from eight funded services due to participate over the academic year 2010 – 2011.

"The Programme sought to work with NUIM in developing a series of master classes for professionals who encounter crisis pregnancy as part of their overall brief but who are not in a position to take on the whole NUIM Certificate Course."

## Alumni seminar and continuing professional development

The Department of Adult and Community Education, National University of Ireland Maynooth (NUIM), convened its first seminar on Leadership for graduates of the NUIM Certificate in Crisis Pregnancy Counselling. This seminar was developed following feedback from graduates which indicated a need for on-going professional development opportunities. A strong theme to emerge from consultations with graduates was the area of leadership and the need for counsellors and counselling organisations to be proactive in addressing the needs of clients in the face of rapidly changing social and cultural contexts.

The seminar brought together graduates to reflect on the impact of the course on their service provision and the challenges currently experienced in their client work and sought to devise imaginative and creative responses to these challenges.

The seminar focused on a model of leadership that promotes the idea that everyone has the capacity to take a leadership initiative in their work. The seminar was very successful, with over 30 graduates in attendance.

#### Master classes

A further development to the NUIM Certificate Course was examined and planned in 2010. The Programme sought to work with NUIM in developing a series of master classes for professionals who encounter crisis pregnancy as part of their overall brief but who are not in a position to take on the whole NUIM Certificate Course.

Examples of these professionals include doctors, nurses, teachers, counsellors, youth workers and care workers. Master classes were planned to address a number of pressing themes including: termination and dealing with complex issues; working with minors and the role of the father. These master classes will be delivered over the course of 2011.

## Crisis pregnancy counselling services promoted through positiveoptions.ie

The Programme funds a wide range of services to provide free crisis pregnancy counselling, which consists of the provision of counselling, information and support to women who are experiencing a crisis pregnancy. The service is also available to partners and families affected by crisis pregnancy. Fifteen services are promoted through the Positive Options Campaign and offer crisis pregnancy counselling at over 50 centres nationwide.

Crisis pregnancy counselling services are delivered through a variety of service-delivery models and range from services that operate out of one location to services that have a national spread. The range of service provisions facilitated by the Programme provides clients with a choice based on the level and type of service they need, in addition to geographic preferences.

## Case study: Midlands Crisis Pregnancy Counselling Service

The Midlands Crisis Pregnancy Support Service (Mayo CPSS) is one of 15 service providers contracted by the Programme to provide crisis pregnancy counselling and related supports. This service was established and funded by the Programme in 2003.

The Midlands Crisis Pregnancy Support Service is delivered across six locations in the HSE Midlands area – Mullingar, Tullamore, Edenderry, Longford, Portlaoise and Athlone. There are six accredited counsellors available to deliver the service, which equates to one whole-time equivalent post. There are slight variances in service delivery across the region, for example, some are based in a GP practice, local health centre or within the Adult Counselling services.

Complementary to the delivery of crisis pregnancy counselling, post-termination counselling and medical check-ups are also delivered through the service. A key strength of this service is that it is easily accessible particularly for those living in rural communities, with appointments usually given within 48 hours. The staff members delivering the counselling are accredited counsellors with a high level of training. The counsellors work closely together as a team and meet fortnightly. While the service is mainly delivered on a nine-to-five basis, appointments can be made after hours. In addition to this, the positioning of the service within the wider HSE Adult Counselling Service provides opportunities for referrals and a more holistic delivery of services. The location also provides the opportunity for cross-referrals and close linkages with related HSE medical services.

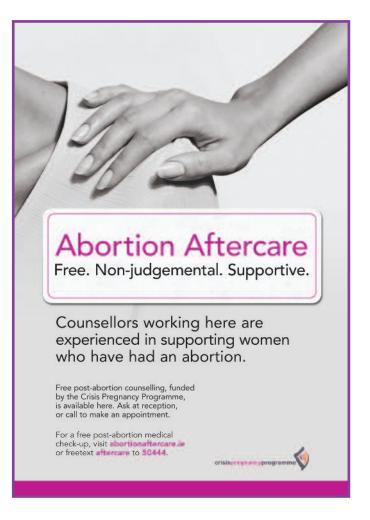
#### Post-abortion services

Post-abortion counselling services are provided by 15 voluntary and statutory organisations under contract with the Programme. Details of services delivered through the funded organisations are provided in the Abortion Aftercare leaflet, freetext service and on the abortionaftercare.ie website.

The provision of free post-abortion medical check-up services is also funded by the Programme. These services were provided by the following organisations in 2010:

- Bray Women's Health Centre
- The Well Woman Centre, Dublin
- Femplus Clinic, Blanchardstown
- Tralee Women's Health and Family Planning Clinic
- Midlands Crisis Pregnancy Counselling Service
- Irish Family Planning Association
- The Sexual Health Centre Cork
- Limerick Family Planning Service
- Cork Family Planning Centre
- Youth Health Service Cork

The Programme continues to roll out a campaign to increase awareness among women that post-abortion services are available in Ireland. The Abortion Aftercare campaign, which consists of targeted online and print advertisements, encourages women who have had an abortion to attend for post-abortion medical check-up and promotes the availability of free-post abortion counselling.



A poster from the Abortion Aftercare campaign increasing awareness of post-abortion services available in Ireland.

## STRATEGIC PRIORITY 5 Continuation of Pregnancy

To improve the range and nature of supports central to making continuation of pregnancy more attractive. To ensure that women, their partners and families are fully informed about these supports

The Programme works to ensure that women and men experiencing crisis pregnancy, and their families, are given access to supports that are aimed at alleviating the sense of crisis and addressing these concerns. We know from research and feedback from service providers that a broad range of factors contribute to crisis pregnancy experience.

Recent research demonstrated that for women in paid employment, workplace factors can contribute to the experience of crisis pregnancy for up to a third of women. A woman may feel unable to cope, be concerned about money or about the relationship with her partner. Key to addressing these concerns is the provision of high quality face-to-face supports and information, through a variety of mechanisms that are accessible and client-centred and assist women who need ongoing supports to continue with a pregnancy and to parent.

#### Key actions in 2010 included:

- Continued funding Information Officer post at the Treoir service for unmarried parents
- Supported the provision of pre-natal accommodation and outreach support for women experiencing a crisis pregnancy
- Funded development of information handbook for student/expectant parents in third level education
- Continued support for the Cura post-natal support service



Treoir, Young Parents' Survival Guide, 2nd Edition

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The following are examples of the kinds of services and projects that receive grant funding to address this strategic priority:

#### Treoir Information Officer

Treoir provides a free, confidential and up-to-date information and referral service for unmarried parents and those involved with them through its specialist National Information Service. The Treoir Information Officer post was funded by the Programme initially in 2003. encouraging, supportive and confidential. It provides an opportunity for clients to feel supported while considering their options in relation to their future and that of their baby. There are also support facilities while the client is within the hospital/maternity service.

The post-natal accommodation is for mothers who require some assistance and support to adapt to their new responsibilities as a parent and to enable them to return to work/training/college.

### "In 2010 the Treoir information service handled over 2,300 enquiries by telephone, e-mail, written and also face-to-face. Over 30 information sessions were delivered to organisations nationally."

The Information Officer handles the steady stream of calls and queries to the information centre and delivers workshops and information sessions to service providers across the country.

In 2010 the service handled over 2,300 enquiries by telephone, email, letter and also face-to-face. Over 30 information sessions were delivered to organisations nationally. The Information Officer is also responsible for keeping the resources developed by Treoir up-to-date, in particular 'The Information Pack for parents who are not married to each other'.

This resource provides information on a large variety of topics that are relevant to unmarried parents so that they can make informed decisions regarding their situation. The production of this resource is also funded by the Programme and is updated annually with budgetary and legislative changes which arise during the year.

#### Limerick Social Services Council

This service provides supportive accommodation for women and their babies during and after a crisis pregnancy.

The pre-natal accommodation aims to provide accommodation and support during pregnancy in an environment that is welcoming, respectful, safe, There are a total of 10 pre- and post-natal places available for women in this service. In addition to providing muchneeded accommodation in a supportive and welcoming environment, Limerick Social Services Council provides access to workshops or support programmes either on site or through local agencies. The training and supports provided may take the form of parenting support programmes, workshops on financial management or other practical information on rights and entitlements. The service provides sessional crèche facilities and clients can also avail of a counselling/advocacy service and supports to access external services.

The service provides preparation/assistance to move on to other supportive accommodation or independent living services and also provides ongoing outreach support to former clients, as required, to alleviate the sense of isolation that some clients may feel after moving on to independent living.

In addition to these services, the Programme also funds the provision of outreach support to residents who are moving on to other accommodation. This service is also available to former residents who have moved onto independent living and require further supports as part of this transition.

#### Mary Immaculate - student/parent handbook

In addition to providing continued support for the post of Student/Parent Coordinator in Mary Immaculate College, the Programme provided funding for the development of an information handbook for student/expectant parents in third level education. This handbook will familiarise student/expectant parents with third level policies and procedures, 'decipher' academic terminology, and inform student/expectant parents in a user-friendly manner of the academic rules and regulations relevant to their situation.

The Student/Parent Coordinator has liaised closely with the Programme and Communications team in the development of this resource which is expected to be finalised and disseminated during 2011.

#### Cura post-natal support service

The Cura Post-Natal Support Service was piloted to encourage young mothers who had experienced crisis pregnancy to seek support in the early stages following the birth of their child. This service aims to provide support to new mothers to deal with challenges they may face. It provides new mothers with practical supports and information, for example, on rights and entitlements, registering the baby's birth, decisions about returning to work or education, managing finance etc.

The service also provides information on other services based locally which may be relevant to the clients and their circumstances. The aim of this service is to complement existing post-natal services and provide counselling and information and to link the mother into other support services as required. All Cura's counsellors have received training to provide this additional support service. Clients may self-refer or be referred through other services and all clients who receive crisis pregnancy counselling through Cura are encouraged to return to take up this service following the birth of their child.

## Ongoing services supporting the continuation of pregnancy

In addition to those examples of services outlined, the Programme continued to fund a broad range of different projects that provide support, training and information to parents throughout the country, including the following:

- Limerick City Slickers Programme a parenting support group for young parents residing in Limerick City and immediate environs who are socially excluded or at risk of social exclusion, targeting those at risk of a second/subsequent crisis pregnancy delivered by Limerick Social Services Council in conjunction with the Teen Parent Support Programme Limerick.
- 'Parents First' a parenting education programme for both first time parents and parents who feel unsupported due to geographic or social disadvantage which consists of group work, workshops and one to one information and support sessions. This programme is delivered to parents in Co. Kerry through the South West Counselling Centre.
- Student Parent Coordinator in Mary Immaculate College to provide support and information to student/expectant parents.
- Counselling, information, education and training delivered by One family in Dublin
- The provision of a short term foster service for mothers considering adoption delivered by Cúnamh Dublin
- Support for Grandparents and traveller teen parents through support networks and training delivered through Barnardos/Teen Parent Support Programme North Wexford
- Accommodation services for women experiencing crisis pregnancy and needing accommodation and other supports delivered with Bessborough Centre, Cork, Limerick Social Service Council and Spring Gardens Housing Association, Waterford.
- The production by Treoir the National Federation of Services for Unmarried Parents and their Children, of high-quality resources, including 'Information Pack for parents who are not married to each other', 'Information for Young Parents in Education' and 'The Young Parent Survival Guide' (2nd Edition), 'Being there for them, a booklet for grandparents of children whose parents are not married to each other'. Funding was also provided to Treoir to allow the evaluation of distribution channels to improve information dissemination to their target audiences.

## STRATEGIC PRIORITY 6 Research

To strengthen understanding of the contributory factors and solutions to crisis pregnancy; to use research findings to promote evidence-based practice and policy development

The HSE Crisis Pregnancy Programme has a tradition in the effective delivery of evidence-based solutions to address its mandates. This tradition has been longsupported and is driven by outputs from the Research and Policy function. In 2010, the Crisis Pregnancy Programme continued to strategically invest in commissioned research, in areas where it was apparent that in-depth investigation was required. The Research and Policy function commissioned and managed several research projects and partnerships over the year. It provided advice and support to the Programme and Communications and Funding functions in its work including the design and management of the effective evaluation mechanisms.

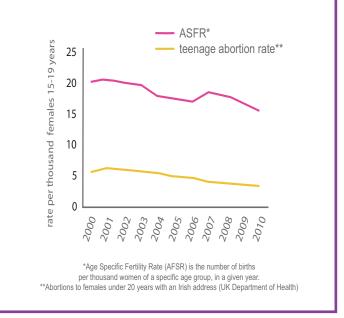
2010 marked a new ten-year low in the number and rate of birth to teenagers in Ireland. Teenage births in Ireland have decreased by 35% since 2001.

2010 also saw the number and rate of abortions decrease for the ninth year, down by 38% since 2001.

#### Key actions in 2010 included:

- Commissioning of new research to address information gaps around the sexual health and fertility needs and experiences of non-Irish national women living in Ireland
- Fieldwork for Irish Contraception and Crisis
  Pregnancy Study fully completed using a representative sample of the Irish population
- Reports from the Pregnancy at Work study submitted for final review

#### Age Specific Fertility Rate (ASFR) and Abortion Rate for females aged 15-19 years, 2000-2010

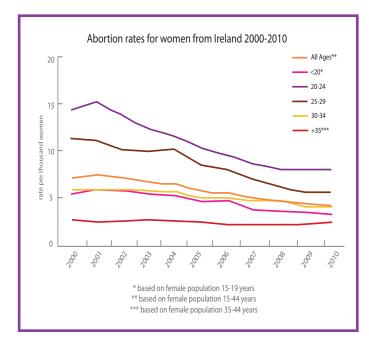


Age Specific Fertility Rate (ASFR) and Abortion Rate (for those giving an Irish address in the UK), for females aged 15-19 years, 2000-2010

# "Teenage births in Ireland have decreased by 35% since 2001."

#### New research with non-Irish national women living in Ireland on attitudes to fertility, sexual health and motherhood

The experience of non-Irish national women, particularly in relation to their sexual health and reproductive experiences, has not been well researched or documented in Ireland. Responding to this knowledge gap, the Programme commissioned a research project in 2010 to identify issues that are relevant to these women in relation to fertility control, sexual health and motherhood and to understand experiences, perceptions and decisions around crisis pregnancy.



Abortion rates for women from Ireland 2000-2010. Figures include UK and Netherland numbers; note - no abortions before 2005 in significant numbers for women from Ireland in the Netherlands

The findings from this very important research project are much anticipated and are expected to be available late in 2011. It is expected that they will provide valuable insights for service planners, policy-makers and health care providers around the experiences and the expectations from non-Irish national women and how they view and access sexual health and crisis pregnancy services and supports.

The research will also include a comparative element, comparing the experiences of Irish women in Understanding How Sexually Active Women Think About Fertility, Sex and Motherhood (Murphy-Lawless et al, 2004 and 2006) with the experiences of minority ethnic women and relating the findings to the social and political backdrop of Ireland's changing demographic profile.

#### Irish Contraception and Crisis Pregnancy Study (ICCP II)

The Irish Study of Contraception and Crisis Pregnancy II is a sizeable and valuable nationally-representative research project, exploring knowledge, attitudes and behaviours among the Irish population relating to contraception, sexual behaviour and crisis pregnancy. The project's key aim is to assess the impact of the Programme's work on behaviour, attitudes and knowledge since 2003. "2010 also saw the number and rate of abortions decrease for the ninth year, down by 38% since 2001."

In 2009, a research team from the Royal College of Surgeons in Ireland (RCSI), led by Professor Hannah McGee with involvement and expertise from the Economic and Social Research Institute (ESRI) and Amárach Research, was successfully commissioned to undertake the important and complex task of designing and implementing this research project.

The Project's Advisory Group, including representatives from the Equality Authority, the Health Protection Surveillance Centre and the Department of General Practice, NUI Galway, worked closely with the research team and the Programme, providing valuable expertise throughout the planning and design process. By the end of 2010, the fieldwork was successfully completed with 3,317 individuals having participated.

The Programme is greatly anticipating the findings, with the final report expected in September 2011. It will provide important information on new phenomena and trends that have developed over time, concerning risk behaviours and sexual health, with a particular focus on the experience of crisis pregnancy and its outcomes.

#### Pregnancy at Work Research Project

Pregnancy at Work is another groundbreaking research study that was commissioned in 2008 to explore the relationship between workplace culture, treatment at work and experiences of pregnancy, and to investigate whether certain working environments can contribute to a woman defining her pregnancy as a crisis. The project was initiated by the Programme in partnership with the Equality Authority, the statutory organisation mandated to promote equality and eliminate discrimination in the workplace. Dr Helen Russell, Dr Dorothy Watson and Dr Joanne Banks of the Economic and Social Research Institute (ESRI) were commissioned to design and implement the three-part research project involving a literature review, an analysis of legal decisions relating to pregnancy-related discrimination and a nationally-representative survey of mothers with young children.

Key outputs relating to this project in 2010 included the submission by the authors of final versions of two reports in the series. These include 'Pregnancy and Employment: A Literature Review', investigating issues relating to pregnancy in the workplace.

'Pregnancy Discrimination in the Workplace: Legal Framework and Review of Legal Decisions 1999 to 2008' provides an overview of the legal framework for maternity and employment protection in Ireland. When published, the report also presents a profile of pregnancy-related discrimination as set forth in the formal legal system through a study of 54 pregnancy-related discrimination<sup>3</sup> cases brought to the Equality Tribunal and Labour Court over a ten-year period, 1999 - 2008. The data for the third report, elicited from a national survey with 2,300 mothers in receipt of Child Benefit, was collected in 2009 and in-depth analysis of the data was ongoing in 2010. Valuable input into the data analysis phase and throughout the research process was provided by the Project's Advisory Group, comprised of Laurence Bond, Head of Research with the Equality Authority and Dr. Margret Fine-Davis of Trinity College, Dublin. The three reports are due for publication in 2011.

## Service and campaign evaluation - guidance and support

In 2010, the Research and Policy function provided valuable input and guidance in supporting the design, delivery and management of effective evaluation tools as a means of measuring the efficacy of the Programme's public health campaigns and funded services. The Research and Policy team worked closely with the Programme's and Communications team on the management of the annual Omnibus Research and other evaluations, by providing input into questionnaire development and data analysis and overseeing the delivery of final reports.

#### Research on **Crisis Pregnancy, Parenting and Employment Policy** For employers, employees, policy makers, HR managers and representative bodies.





Research on Crisis Pregnancy, Parenting and Employment Policy

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Research on Sexual Health

for GPs & practice nurses

Research on Sexual Health for GP's and practice nurses



Research on Teenage Sexuality for parents and people working with young people, such as youth workers and teachers

## STRATEGIC PRIORITY 7 Policy Influence

To influence policy-makers and key players regarding prevention of crisis pregnancy, reproductive decisionmaking and crisis pregnancy outcomes

Utilising a robust body of evidence gathered through commissioning high-level research over a nine-year period, the HSE Crisis Pregnancy Programme has an authoritative voice in policy matters relating to its mandates, including areas such as reproductive health, sexual health, service design and delivery and sexual health education.

In 2010, the Research and Policy function continued to make every effort to keep abreast of new and emerging behavioural trends; effectively managed and further developed positive relationships with established partners in other statutory organisations; organised and developed effective methods of knowledge transfer for stakeholders including policy events and implementing dissemination strategies, and continued to make written submissions to a range of statutory organisations and Departments on key issues related to the work of the Programme.

#### Key actions in 2010 included:

- The delivery of research into practice seminar and research summary for care-givers, health professionals and service providers working in the field of Intellectual Disability
- Formal signing of a Memorandum of Understanding with the Pharmaceutical Society of Ireland
- Policy submissions to a range of statutory organisations



Roisin Guiry, HSE CPP, Rosemary Grant, Coombe Women's Hospital, Joan O'Connor, Independent Research Author, Siobhan Barron, NDA, Mary Van Lieshout, NDA, Ruth O'Reilly, NDA, Dr. Stephanie O'Keeffe, HSE CPP

Research into practice seminar and research summary - intellectual disability and crisis pregnancy, parenting and sexual health for caregivers, health professionals and service providers In 2010, the Programme organised a working seminar for health professionals, service providers, care-givers and policy-makers in partnership with the National Disability Authority. The seminar had two key goals - the first was to launch and disseminate the findings from Literature Review on Provision of Appropriate and Accessible Support to People with an Intellectual Disability who are Experiencing Crisis Pregnancy<sup>4</sup>, a systematic literature review outlining international models of good practice relating to crisis pregnancy counselling and support services for women with an intellectual disability experiencing a crisis pregnancy, published in 2010.

The second was to provide a forum for service providers and professionals to interact, explore and discuss intellectual disability in the context of crisis pregnancy, relationships and sexuality education, supporting parents and legal requirements around assessing capacity to consent to sexual behaviour. The Programme also published and disseminated a summary of research on sexual and reproductive health and intellectual disability, summarising the key research findings from the literature review. Research on intellectual disability and crisis pregnancy, parenting and sexual health for caregivers, health professionals and service providers

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National Disability Authority Districts National Michanness

Summary of research on intellectual disability and crisis pregnancy, parenting and sexual health for caregivers, health professionals and service providers



Literature Review on Provision of Appropriate and Accessible Support to People with an Intellectual Disability who are Experiencing Crisis Pregnancy

<sup>[4]</sup> O'Connor, J. 2010, Literature Review on Provision of Appropriate and Accessible Support to Clients with an Intellectual Disability who are Experiencing Crisis Pregnancy. Crisis Pregnancy Agency and National Disability Authority. In press.

## Memorandum of Understanding with the Pharmaceutical Society of Ireland

In 2010, the Programme formally signed a Memorandum of Understanding (MOU) with the Pharmaceutical Society of Ireland (PSI) to facilitate collaboration between the two organisations in areas relating to sexual health and sexual health policy. The two bodies committed to sharing and working together on the provision of guidance for pharmacists, other stakeholders and the wider public, as appropriate.

Representatives from both organisations set out collaborative opportunities around a range of projects, including the provision of sexual health information to pharmacists and the public; identifying relevant research; initiation of scoping exercises and exploring possible areas to develop in pharmacist training.

#### Policy submissions to statutory organisations

The Programme attempts to share its knowledge and expertise where policy and legislation is being reviewed or developed. In 2010, the Programme made submissions to the following organisations:

- The Law Reform Commission, in relation to the Consultation Paper 'Children and the Law: Medical Treatment'
- The Children and Young People's Team in the Integrated Health Directorate, HSE on The National Data and Research Strategy on Children's Lives: 'Returns from Investing in Parenthood and Childhood Action Plan for the HSE'
- The Office of the Minister for Drugs in the Department of Community, Equality and Gaeltacht Affairs in relation to 'National Substance Misuse Strategy 2009 - 2016 - Development of Alcohol Policies'
- The Office of the Minister for Children on 'State of the Nation's Children: National Children's Data Strategy'.



President of the PSI, Ms Noeleen Harvey and former Chairperson of the CPA, Ms Katharine Bulbulia signing the Memorandum of Understanding in June 2010

### SUPPORTING THE STRATEGIC PRIORITIES OF THE PROGRAMME

As part of the process of producing the Strategy, a number of key areas where organisational capacity needs to be of a high quality to meet the objectives of the Strategy have been identified.

The Strategy identifies these areas as:

- Board structures
- Staff structure and skill base
- Core processes and systems
- Monitoring the implementation and impact of the Strategy
- Partnership
- Value for money

The HSE Crisis Pregnancy Programme completed a number of key projects under each area and significant progress was made during the year.

#### Internal Strategic Priority 1

#### Ensure the Crisis Pregnancy Programme has appropriate Board structures in place to ensure effective delivery of the Strategy

The Board of the former Crisis Pregnancy Agency was dissolved upon the transfer to the HSE in January 2010. However, the Programme has continued to ensure that there are appropriate HSE-aligned governance structures in place and that HSE management has a clear oversight and direction of the work of the Programme.

Throughout the year, the Programme worked closely with the HSE and the Transition Monitoring Group which is made up of representatives of the HSE, Department of Health and the Programme to ensure the smooth transition of the Programme into the HSE. During 2010, the Programme also met with a variety of functional areas of the HSE such as finance, payroll, human resources, information and communications technology and procurement to ensure appropriate systems and structures which support the transition are in place.

The Programme, HSE and Transition Monitoring Group ensured that all staff members, funded service providers, partners and stakeholders were made aware of plans, processes and structures put in place to facilitate the integration. Developments included adopting governance and financial regulations of the HSE to ensure that the Programme operates within HSE and legislative guidelines and continues to operate in a transparent and accountable manner. The Programme, in conjunction with the HSE, continued to oversee the operation of the Programme's risk management framework and risk mitigation activities. The existing detailed Risk Register for the Programme was revised and up-dated to ensure that any circumstances that might prevent the delivery of the Strategy are taken account of and addressed promptly.

#### Internal Strategic Priority 2

**Ensure staff structure and skills base enable the priorities in the Strategy to be addressed effectively** The Performance Management Development System (PMDS) aims to support staff and maximise productivity whilst ensuring employee objectives are linked to the Programme's Strategy. This is achieved through the development of individual role profiles that are firmly linked to the objectives of the Strategy.

The Programme continued to review the effectiveness of the PMDS through consultation with staff and then implemented improvements. Personal Training and Development Plans were drawn up for each staff member and allowed the Programme to identify the training and skills development needs of staff members. These training needs were then addressed through a combination of external training courses, coaching and on-the-job learning.

The Programme liaised with the Human Resources Department of the HSE to ensure that all staff received an induction to the HSE and that HSE HR policies and procedures were clearly communicated and understood by all staff. The Programme also liaised with HSE ICT to ensure that all staff can access information relating to HR and HSE structures through the HSE intranet.

Given that the Programme lost a number of key staff toward the end of 2010 a business case was developed to examine how the skills base in the programme can be maintained, along with adequate staffing levels to ensure statutory responsibilities can be fulfilled. In light of the difficult economic environment and the moratorium on recruitment, the Programme sought to address capacity concerns, re-allocate roles and responsibilities and consolidate the work of the programme.

#### Internal Strategic Priority 3

Strengthen the Programme's core processes and systems and ensure they are sufficient to implement the Strategy

The Programme continually reviews its core processes and systems to ensure that they reflect good practice and implements relevant HSE and external recommendations.

Throughout the year, the Programme facilitated the merger of its financial and payroll systems with HSE systems and continued to manage expenditure and produce accurate and timely monthly financial reports for the HSE Finance function.

As part of the ongoing development of the Programme's funding processes and procedures, the Programme implemented quality improvements based on the results of a self-assessment governance questionnaire which was developed and disseminated to all service providers in receipt of grant assistance from the Programme.

The Programme also ensured that its funding practices are in line with the HSE's National Framework for the Funding of Non-Statutory Agencies, through reviewing its service level agreements against HSE practice and carrying out ongoing reviews of evaluations submitted by services providers in accordance with the terms of their service level agreements.

Information and communications technology systems are key elements in supporting the achievement of the Programme's objectives and were developed throughout the year. A comprehensive change-over to HSE ICT systems took place which ensures the Programme can derive maximum benefit from HSE ICT systems and information.

The Programme's websites crisispregnancy.ie, abortionaftercare.ie, thinkcontraception.ie, positiveoptions.ie and b4udecide.ie were reviewed and developed to ensure that information remains up-to-date and accurate. The review and development of information and communications systems ensures the functions and Strategy of the Programme are supported by effective and consistent communications.

#### Internal Strategic Priority 4

Enable the Programme to monitor its implementation of the Strategy and to assess the impact of the Strategy on reducing the number of crisis pregnancies in Ireland The Programme developed an annual Business Plan in consultation with the HSE which includes a series of detailed objectives and key performance indicators that are derived from the Strategy. The Programme reports on progress against the Business Plan during the year and again at the year-end. The Programme continuously implements and monitors evaluation practices across all programmes of work and continues to monitor key indicators and statistics in relation to the prevalence of crisis pregnancy and abortion.

In 2010, the Programme worked towards developing metrics to support the Programme's quarterly reporting to the HSE and to ensure that reporting is in line with HSE reporting mechanisms and the Programme's annual business plan links with the HSE strategic planning processes.

#### Internal Strategic Priority 5

Enter into partnerships with complementary organisations to ensure that the full ambition of this Strategy can be realised

The Programme recognises that working in partnership with relevant HSE functional areas, a range of statutory and voluntary organisations and Departments of State plays a central role in the implementation of its strategic objectives. Working in partnership ensures that the experiences and capabilities of organisations, statutory or voluntary, are combined to achieve common goals.

In 2010, the Programme continued work on the development of the b4udecide.ie campaign with a number of agencies, including the National Youth Council of Ireland, the Department of Education and Skills, the HSE, Donegal Youth Council and Parentline.

The Programme continued its partnership with the National Disability Authority on a literature review and evaluation project which examines service provision and practice issues for crisis pregnancy services and counsellors working with women with an intellectual disability who experience a crisis pregnancy. In 2010, a seminar on this issue was held and a research summary was developed. In 2010, the Programme worked with the Irish Foster Carers' Association in holding workshops for foster parents in the provision of relationships and sexuality education for their foster children.

The Programme formally signed a Memorandum of Understanding (MOU) with the Pharmaceutical Society of Ireland (PSI) to facilitate collaboration between the two organisations. The two bodies have committed to sharing and working together on the provision of guidance for pharmacists, other stakeholders and the wider public as appropriate.

The Programme worked with the Irish Medicines Board and others to examine issues arising from the use of abortifacients in Ireland.

The Programme developed linkages with other HSE areas to identify new synergies across projects and work areas, e.g. Obstetrics and Gynaecology, Social Inclusion, Children and Families' Social Services, Public Health.

The Programme worked with the Department of Education and Skills on the Report on the Audit of Visitors for RSE at post-primary level in the context of ongoing work in the area of providing support for the development of RSE Visitor guidelines and protocols.

The Programme continued to work with commercial partners such as MCD and Durex in relation to promotional campaigns which involve the distribution of contraception advice and condoms at events such as the Oxegen festival. Collaborative work also commenced with the USI (Union of Students Ireland) on a new sexual health initiative for colleges.

#### Internal Strategic Priority 6 Provide value for money

The Programme is funded by Government through the Health Service Executive and continually strives to ensure it is accountable for its funding and to provide value for money to its stakeholders. As in previous years, the Programme prepared detailed budgets in order to enable it to monitor its expenditure carefully during the year. The Programme also produced regular financial reports, both internally and for the HSE.

The Programme continued to successfully manage its commercial contracts through ongoing performance reviews and monitoring value for money in relation to these contracts. The Programme worked to ensure that its procurement processes are in line with HSE procurement processes and to identify any areas where efficiencies can be made through existing HSE contracts or suppliers.

The Programme continually worked to achieve a reduction in its administrative costs through negotiating best price contracts and fully utilising internal expertise to ensure the proportion of administrative costs against service provision remained reasonable.

The Programme also continues to monitor closely the use of funding provided through the grant programme to other organisations. The Programme has Service Level Agreements (SLAs) in place with over 30 organisations. All SLAs contain detailed reporting requirements, including financial, statistical and qualitative reporting against key performance indicators. A sample of organisations is also selected each year for review by the Programme's internal auditors as part of this governance process.

### APPENDIX 1: Code of Ethics

The purpose of this Code of Ethics is to articulate the principles that guide the HSE Crisis Pregnancy Programme's decisionmaking in light of its responsibilities towards its diverse constituencies. These principles will guide the decisions that are made regarding the development, funding and support of projects and the Crisis Pregnancy Programme's research (including the research it funds). The principles will form part of the frame of reference when proposals for funding are being assessed.

In its approach to its work, and in supporting the work of others, the Programme will:

- be respectful of and non-judgemental regarding the choices made by women who face crisis pregnancy
- be respectful of a woman's autonomy and her right to privacy (within the constraints of the law)
- be guided by reliable research and good practice in all areas of its work
- endeavour to work collaboratively with agencies working in the field
- strive to promote policies that are respectful of the diverse experiences and viewpoints that exist on this issue
- be supportive of agencies which:
  - use professional approaches to counsel, educate and provide information to the public
  - fully inform clients of their organisation's ethos
  - promote informed decision-making in resolving issues regarding crisis pregnancy and related sexual health matters
  - use reliable research and responsible monitoring and evaluation methods to ensure accountability and good practice
  - work to promote equity of access and quality for clients
  - provide referrals when the information or service requested by the client is not available

### APPENDIX 2: Membership of the Advisory Group

#### Chairperson

Chairp	Chairperson				
Ms	Geraldine	Luddy	Principal Officer, Department of Health and Children*		
Members					
Ms	Alison	Begas	Chief Executive and representative of The Well Woman Centre		
Rev	Pierce	Bruce	Representative of Church of Ireland Bishops		
Ms	Ursula	Byrne	Education Officer and representative of An Bord Altranais		
Ms	Frances	Byrne	Director and representative of OPEN		
Ms	Bridget	Collins	Representative of Pavee Point and of the Traveller Community		
Dr	Mary	Condren	General Practitioner and representative of Irish College of General Practitioners		
Ms	Sherie	de Burgh	Director of Counselling and representative of One Family		
Ms	Jessica	Dempsey	Press and Communications Officer, The Chambers of Commerce of Ireland and		
			Employers representative		
Ms	Roisin	Dermody	Disabled Women's Working Group member and representative of people with		
			disabilities		
Ms	Margot	Doherty	Assistant CEO and representative of Treoir		
Ms	Catherine	Duffy	National Planning Specialist and representative of Primary Care, HSE West		
Ms	Triona	Fitzpatrick	Social Worker and representative of the Irish Foster Carers' Association		
Ms	Louise	Graham	National Co-ordinator and representative of CURA		
Mr	Fergus	Hogan	Lecturer Waterford Institute of Technology and representative on mens' health		
Ms	Julie	Kerins	Senior Social Worker, Cunamh and representative of Council of Irish Adoption Agencies		
Ms	Brenda	Kneafsey	Aftercare Network Support Co-ordinator and representative of IAYPIC		
Ms	Sunniva	McDonagh	Barrister-at-Law and representative of Irish Episcopal Conference		
Dr	Helen	McMillan	Representative of Institute of Obstetrics and Gynaecology		
Ms	Rebecca	Murphy	Welfare Officer and representative of the Students Union of Ireland		
Mr	Kevin	O'Hagan	Senior Project Officer, National Youth Health programme and representative of		
			the National Youth Council of Ireland		
Ms	Frances	Shearer	National Co-ordinator for SPHE and representative of the Education Sector		
Ms	Rose	Tully	Representative of the National Parents' Council Post Primary		
Ms	Alwiye	Xuseyn	Project Health Officer and representative of AkiDwA		

\* Geraldine Luddy held the position of Chairperson until November 2010.

### APPENDIX 3: Staff members not in post at year-end

Enda Saul held the position of Programmes and Communications Manager until July 2010, Caroline Spillane held the position of Director until September 2010 and Fiona Larthwell held the position of Administration Manager until December

### APPENDIX 4: Support Services

#### Crisis pregnancy counselling

Free, State-funded crisis pregnancy counselling is available at over 50 centres nationwide. For a list of organisations offering free, nonjudgemental crisis pregnancy counselling, members of the public can visit positiveoptions.ie or freetext the word LIST to 50444.

#### Abortion aftercare services

For information about free postabortion medical and counselling services funded by the HSE Crisis Pregnancy Programme, members of the public can visit abortionaftercare.ie or freetext AFTERCARE to 50444.

#### Contraceptive information

Thinkcontraception.ie is a comprehensive resource which contains interactive information on contraception, sexual health, fertility and sexually transmitted infections.

#### Resources for parents

The Crisis Pregnancy Programme has developed a number of resources to assist parents in providing ageappropriate information to their children on relationships and sex:

- 'Busy Bodies'- DVD and booklet for parents of 10-14 year olds. Parents can order a copy by freetexting BUSY followed by their name and address to 50444.
- 'You can talk to me'- DVD and booklet for parents of 11-15 year olds. Parents can order a copy by freetexting PARENT followed by their name and address to 50444.
- 'Tips for Talking to Older Teenagers'- Supplement for parents of older teenagers.
   Parents can order a copy by freetexting TALK followed by their name and address to 50444.
- b4udecide.ie a website for teenagers and their parents featuring quizzes, polls and video

interviews with young people on forming healthy relationships and dealing with peer pressure. The website also includes a section called 'The Facts' that deals with the age of consent, contraception, STIs and crisis pregnancy.

 'The Facts' - DVD for parents of 15-17 year olds - Contains information on fertility, contraception, sexually transmitted infections (STIs) and crisis pregnancy. Parents can order a copy by freetexting FACTS followed by their name and address to 50444.

## HSE Crisis Pregnancy Programme website

crisispregnancy.ie contains comprehensive information relating to crisis pregnancy and is frequently updated with research, press releases and information resources.

The Programme issues four newsletters per year. To subscribe please email info@crisispregnancy.ie



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