

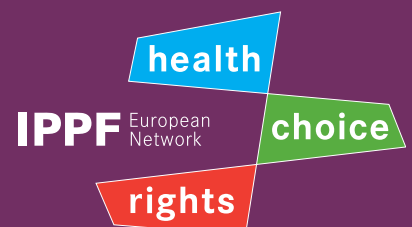
INTERNATIONAL PLANNED PARENTHOOD FEDERATION EUROPEAN NETWORK

FOCUSING ON THE FIVE AREAS OF GREATEST NEED



HIV/AIDS • ADVOCACY • ADOLESCENTS • ABORTION • ACCESS

A N N U A L R E V I E W 2 0 0 4



Who we are

The International Planned Parenthood European Network (IPPF EN) is one of six regions of the International Planned Parenthood Federation (IPPF), a worldwide voluntary organization comprising 147 national Member Associations working in the field of sexual and reproductive health and rights.

The IPPF European Network includes 39 Member Associations throughout Europe and Central Asia, as well as the Regional Office in Brussels, Belgium, who are committed to ensuring that the sexual and reproductive health needs of men, women and young people in Europe are met with adequate programmes, policies and resources.

Our vision

IPPF European Network envisions a world where every individual is healthy; where sex and sexuality are recognized as fundamental and precious parts of human life; where sexual and reproductive choices are respected; and where diversity is valued and celebrated.

Our values

IPPF EN believes that sexual and reproductive **health** is integral to an individual's physical, mental and social well-being.

IPPF EN is committed to ensuring that every individual has the opportunity and the power to make a personal and informed choice, free of coercion, on any matter relating to her or his sexual and reproductive life.

IPPF EN is committed to every individual having the moral and legal **right** to dignity, sexual autonomy and bodily integrity and the right to access the highest quality SRH services.

IPPF EN fully recognizes the tough reality for the poor, vulnerable and socially-excluded and the need to change existing power relations in order to eliminate **gender** biases and inequalities that influence women's, men's and young people's health, choice and rights.

IPPF EN is a democratic organization based on volunteer activism and leadership in the pursuit of its mission.

Our mission

To advance the basic human right of all people to make free and informed choices in their sexual and reproductive lives; and to fight for the accessibility to high quality information, education and health services regarding sexuality and sexual identities, conception, contraception, safe abortion and STI/HIV/AIDS.

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Strength amidst adversity

During 2004, volunteers and staff from the European Network focused on addressing the five sexual and reproductive health and rights areas of greatest need as identified in the strategic plan: Adolescents, Access, Abortion, HIV/AIDS and Advocacy (the Five A's). Many of our Associations are well on the way to developing their own strategic plans for the coming years, and are shaping their programmes to reflect the continually developing needs of the communities and people they serve.



Carine Vrancken

To help Associations carry out self-assessment and to monitor their programmes as well as their management and governance, IPPF developed an accreditation process designed to empower staff and volunteers. In 2004, seven Member Associations were reviewed and it is planned that all Associations in the European Network will be assessed by the end of 2008. Our goal is to develop IPPF EN as a sustainable and cohesive pan-European network, which is accountable and transparent in responding to the sexual and reproductive health and rights of all people in the region.

The Annual Review will continue to highlight activities in each of the key programmatic areas in order to both reflect upon the efforts made throughout the region in the Five A's, and to examine progress since the establishment of the Framework in 2002. We profile initiatives which focus on providing services to under-served communities such as sex workers and the Roma, activities to raise awareness of sexual health and rights among young people, and campaigns which have shaped political legislation and policies, as well as many other achievements.

The accession of ten countries into the European Union in May 2004 presented the opportunity to expand our political horizons and to focus our efforts on the development of strategies and campaigns that target sexual and reproductive health and rights. However, EU enlargement also catalysed opposition forces to become more active and coordinated, especially in countries with strong links to the Vatican. With conservative groups in the ascendant, we are witnessing a determined attempt to clamp down on the promotion of sexual rights as fundamental human rights.

From ongoing campaigns to diminish the contentiousness of these issues whilst keeping them at the forefront of the political agenda, to providing services and support to communities as diverse as adolescents from inner-cities to marginalised rural societies, we enthusiastically thank volunteers and staff for their commitment, their resilience and their conviction to the protection and promotion of sexual and reproductive health and rights throughout the European region.

Carine Vrancken
Regional President

Sexual and Reproductive Health and Rights in Europe: Challenges and Opportunities

While access to reproductive health services and supplies improved in many parts of Europe during 2004, in countries from the Balkans, the Caucasus, and those in Central Asia, millions of individuals still do not have access to high quality contraception and reproductive health care. Abortion rates remain high in some of these countries, often caused by a deeply-rooted tradition of relying upon abortion as a means of fertility regulation, and the lack of accessible and affordable contraceptives. The World Health Organization (WHO) in 2004 estimated the number of abortions per 1000 live births in Russia to be over 1,500. In those countries in Europe where abortion facilities are illegal or heavily restricted, women are faced with terminating a pregnancy unsafely and often at risk to their health. Although the number of abortions in some Western European countries remains significant, liberal laws regulating abortion, together with the fact that high quality services are provided by skilled and trained health care professionals, means that abortion is safe and that abortion-related morbidity and mortality is very low.

Improved access to anti-retroviral drugs in Western Europe suggests that although the level of HIV infection, especially through sexual transmission is on the rise, contracting HIV is no longer the swift death sentence it once implied. However, in Eastern Europe, rates have increased alarmingly. According to UNAIDS, 1.4 million people were living with HIV in Eastern Europe and Central Asia at the end of 2004, and though this figure itself is worrying, it is likely that the actual figure could be much higher, through under-reporting and the unavailability of recent statistics.

At the European political level, 2004 saw the advent of significant institutional changes. The most notable of these was European Union enlargement - the accession of ten new member states on 1 May, which included eight countries from Central and Eastern Europe together with Malta and Cyprus.

Upon signing of the EU Accession Treaties, some of the New Member States continued to defend their fundamentally conservative policies. Poland demanded that the treaty should contain a supplementary clause stipulating Poland's freedom to set its own abortion policy, and Malta similarly asked for a protocol stating that 'nothing in the Treaties shall affect the application on the territory of Malta of national legislation relating to abortion'.

This conservative stance was possible despite strong commitments over the past few years from EU institutions in support of Sexual and Reproductive Health and Rights (SRHR) – for example the Resolution on SRHR by MEP Anne Van Lancker, which was passed by the European Parliament in 2002. The Resolution brought the issue of SRHR as highlighted in the International Conference on Population and Development (ICPD) in 1994 to EU Member States' attention and requested the increased exchange of good practice in areas of sexuality education and abortion legislation. In addition, in October 2004, the Council of Europe voted on a report by UK MP Chris MacCafferthy on a SRHR Strategy for Europe.

Nevertheless, despite this persuasion, the EU remains powerless to actually enforce these recommendations in the EU Member States. Whilst it has recommended that, for example, in order to safeguard women's reproductive health and rights, abortion should be made legal and safe and accessible to all, it is unfortunately unable to legislate this in the EU. The subsidiarity principle means that any issue relating to health is dealt with at a national level.

The reluctance of a number of governments to translate these recommendations in national policies is partly due to increasing resistance to SRHR over the past few years. Opposition forces have grown in power in Portugal, Ireland and even in countries like Sweden and Norway. In addition to this, the European Parliament elections in 2004 brought an increasing number of conservative parliamentarians into EU governance.

However, on a positive note, it is worth mentioning that on the occasion of the tenth anniversary of ICPD in 2004, the EU confirmed its full support to ICPD and SRHR in the framework of its development policies, reinforcing European assistance for SRHR on an international level.

It is clear, despite committed efforts, there is still much work to do at both EU and national level. IPPF EN has to make sure SRHR remains firmly at the top of the political agenda. And since the EU institutions cannot fight the SRHR campaign at grass-roots level, it is up to the commitments of IPPF EN volunteers and staff and other like-minded NGOs to stay dedicated.

HIV/AIDS



Tackling the growing problem in Europe

HIV infections through heterosexual contact are increasing steadily throughout Europe, and women account for a rising proportion of HIV diagnoses. In Eastern Europe and Central Asia in particular, the number of people living with HIV has risen dramatically over the last few years. Efforts to highlight the gravity of the situation and to initiate policies and programmes to prevent the spread of the infection are urgently needed, as well as methods to combat stigma and discrimination associated with HIV/AIDS and STIs.



Raising awareness of HIV/AIDS

Many Member Associations took part in World AIDS Day activities, raising awareness of HIV and providing contraception information and supplies. Member Associations (MAs) conducted lectures, seminars and workshops on the prevention of HIV and STIs, and provided training to doctors and other health professionals on HIV/AIDS, while advocating for increased resources and access to care for those infected or affected by HIV/AIDS.

Linking HIV/AIDS with SRHR

A large number of Associations have now developed HIV and STI screening service in their clinics, integrating the work between SRHR and HIV/AIDS policies and programmes. The Irish MA developed new services for HIV/AIDS for both men and women in its clinics and the Bulgarian MA offered Voluntary Counselling and Testing (VCT) on HIV/AIDS in its clinics in Sofia and in the Roma district of Fakulteta.

In collaboration with Swiss Help against Aids, PLANeS (Swiss MA) has developed the project Amorix, which offers a platform for information and discussion for sexual health professionals about AIDS prevention. The collaboration between PLANeS and Swiss Help against Aids helps to mainstream the prevention of HIV/AIDS into the global concept and work of SRHR. A website has been developed for this purpose: www.amorix.ch, which is available in French and German.

Young people and HIV/AIDS in Turkey

The Family Planning Association of Turkey's (FPAT) Central Office Youth Group organized two youth parties focusing on HIV/AIDS awareness in 2004. At the parties, the participants were informed about HIV/AIDS, and given HIV/AIDS booklets and a free pair of jeans donated by Levis. In addition, four members of the Youth Group and three physicians promoted HIV/AIDS and sexual health awareness at a rock festival. They gave over 700 young people HIV/AIDS and family planning brochures, key holders and pens bearing the logo and addresses of FPAT.



Counteracting the growing HIV prevalence rate in Russia

Russia now has one of the highest prevalence rates of people living with HIV. At the beginning of 2005 it was estimated that 23% were infected with HIV through sexual activity, whereas in some areas this figure is as high as 50-70%. A number of regions in Russia have already declared that the levels of HIV are now at epidemic proportions, and therefore the Russian Family Planning Association (RFPA)

increasingly incorporates HIV/AIDS issues in all its activities and initiatives. In 2004, the MA published articles on HIV/AIDS in its 'Family Planning' journal aimed towards policy-makers, health experts, and the mass media. They also produced a special fact card on HIV/AIDS for advocacy purposes, which was widely disseminated in Moscow and through RFPA branches in 48 regions of the country.

Uzbekistan: Targeting the vulnerable

Uzbekistan is witnessing progressively high prevalence rates of HIV/AIDS, particularly among vulnerable sections of society. To try and prevent the rates escalating further, the Uzbekistan MA implemented the project "decreasing the levels of HIV/AIDS among labour migrants in Fergana valley", with the support of the Peace Corps. Volunteers conducted two meetings with representatives of the Peace Corps in the branch office in Namangan, as well as holding five workshops and three focus groups with labour migrants.

HIV/AIDS/STI prevention campaign in Georgia

In 2004, Association HERA XXI, the Georgian MA, launched an HIV/AIDS/STI prevention campaign in the region where an oil pipeline is being constructed - a huge initiative which aims to transport crude oil from the landlocked Caspian Sea to the Mediterranean Sea. A campaign was introduced because the construction of the pipeline was likely to complicate the country's ability to cope with an already growing HIV/AIDS prevalence rate. Seasonal work migration is known to elevate the risk of HIV/AIDS and STIs, and the pipeline would potentially increase the numbers of sex workers along its construction route. There was also low access to HIV/STI-related information and contraceptives in the communities located along the pipeline route, and a lack of basic sexuality education and thus a high risk for youth to become involved with sex work. In addition to this, the local medical staff lacked resources to conduct HIV/STI prevention activities, and cultural and religious barriers restricted open dialogue on sexual issues.

A campaign to raise awareness of SRHR and in particular contraceptive methods and ways to prevent the transmission of STIs/HIV was introduced, targeting the six communities surrounding the pipeline construction camp sites. Direct beneficiaries of the work were local community medical workers, local community citizens (with an emphasis placed on youth) and sex workers. The campaign was not only a short-term measure, but will hopefully provide long-term methods to raise awareness and improve services due to the training of local medical staff and the provision of SRHR resources.

Establishment of the first NGO that supports people living with HIV/AIDS in Bosnia Herzegovina

Association XY has established the first Association for Support of People Living With HIV/AIDS (PLWHA) in Bosnia Herzegovina: APOHA. The NGO targets PLWHA and professionals interested in HIV/AIDS with activities on SRH and HIV/AIDS and will engage staff, health workers, PLWHA and their families in trainings and workshops. A campaign to fight prejudices towards HIV/AIDS and discrimination of PLWHA is planned, and will also provide PLWHA with reintegration and counselling help and will advocate for appropriate HIV/AIDS legislation and access to ARV therapies. By July 2005, APOHA aims to be a self-sustainable organization.

Face to face with HIV/AIDS in the Czech Republic

The Czech MA involves an HIV positive member of staff in its education activities with young people, since the 'real-life' experience of meeting someone who has HIV is often more influential and effective than other methods of teaching about HIV/AIDS. The role of supervisor is played by another member of the Association - a physician who is an expert on this topic.

ADVOCACY



Advocates for change

Volunteers and staff work hard to strengthen the recognition of sexual and reproductive health and rights (SRHR) throughout Europe, and to campaign for the priority of these issues in national and international policies and legislation. IPPF is increasingly recognized as the lead NGO advocating for SRHR in Europe. In 2004, ten countries joined the EU, and IPPF EN remained dedicated in urging these countries to acknowledge the International Conference on Population and Development (ICPD) Programme of Action, despite conservative and religious-based opposition forces increasingly challenging the notion that SRHR are a fundamental human right for all.



Raising awareness among politicians and the public

During 2004, IPPF EN has been active in campaigning to stress the importance of SRHR among the general public, whilst working in partnership with civil society to influence governments and encourage changes in legislation. Advocating at EU level has influenced the EU Presidencies to implement commitments made at the ICPD. Following the activities of the European Commission and European Parliament was vital, especially at the time of the elections where it was important to persuade members to recognize and prioritize sexual and reproductive rights both nationally and internationally.

Working together with national parliaments

Member Associations such as those from Bosnia Herzegovina, Finland and Germany established collaboration with their national parliaments and formed parliamentary groups focusing on population and development in 2004. The groups aim to raise the importance and recognition of SRHR on the development agenda and through national policies.

Developing advocacy strategies in Europe

Each year the Regional Office organizes a Regional Advocacy workshop, bringing together Member Associations from the donor countries with the purpose of developing common approaches and strategies on advocacy, whilst promoting the sharing of expertise and knowledge. In March the workshop was extended to include eight of the countries in Central and Eastern Europe which were joining the EU in May. The workshop focused on activities surrounding the tenth anniversary of ICPD, as well European advocacy activities at a national and international level.

The workshop provided a clear indication on where advocacy efforts needed to focus over the year and how to coordinate both Regional Office and MA activities to best promote SRHR issues in 2004.



Capacity building of MAs in EU New Member States

In coordination with the Regional Advocacy workshop, the Regional Office organized a Capacity Building workshop involving eight representatives from the Accession countries which were soon to join the European Union. The workshop provided participants with knowledge about the EU in general (structure and processes) and the EU's development policy in particular. Focus was placed on the significance of SRHR and HIV/AIDS policies in the EU development framework. Many of the participants have now become lead advocates for SRHR in international development in their countries, and have implemented micro-projects to promote SRHR in international development.

Campaigning for improvements in national policies

Spain

The Spanish Member Association (MA) was strongly influential in shaping Spain's policy on SRHR and HIV/AIDS as well as generating interests and consensus for these issues in the Spanish parliament. This was achieved under difficult conditions, in particular under a law adopted in 2003 encouraging religious education and downplaying the importance of sexuality education. Nonetheless, the Association was able to influence the introduction of reproductive health as one of the priorities of the Catalan government's international development priorities for 2003-2006 and has obtained "consultative" status in the Catalan parliament.

Portugal

In support of a draft 'Resolution on Female Genital Mutilation' (FGM) by the CDS-PP (Peoples Party), the Portuguese MA sent all the political parties in Portugal a letter asking for support for the resolution, and for their acknowledgement that women need to be involved in the legislative process concerning FGM. As a result of this, the political parties not only declared that FGM was a crime but also agreed that more specific language outlawing FGM was required. They also decided that prevention programmes and a code of conduct for health professionals were needed, and that women's NGOs, the Ministry of Foreign Affairs and the Ministry of Health and Education should be involved in the development of these. In their support for the draft resolution, all political parties referred to the Portuguese MA's study on FGM.

Israel

In 2004, the Israeli MA worked with the Israel Civil Rights Association in its campaign to include contraceptive pills as part of the official list of government-covered prescription medicines. The MA obtained backing from the National Council for Women's Health Promotion and with this strong support, it was able to influence the government to start providing girls up to 20 years with free contraceptive pills.

Ireland

The Irish MA (IFPA) was active in developing the priority positions regarding HIV/AIDS for Dóchas (the Irish non-governmental development organizations' platform), ensuring broad support for a reaffirmation of ICPD during the Irish Presidency of the European Union. One of the highlights of these efforts was the inclusion of reference to SRHR in the Dublin Declaration on HIV/AIDS. IFPA and the Regional Office worked with European NGOs by sharing drafts of the Declaration, working to ensure maximum NGO participation and in the coordination of responses. It was evident that sexual health and rights were not featured in the drafts of the Declaration. However, following effective campaigning, the final draft of the Declaration recognized the importance of sexual and reproductive health care and sexuality education in the fight against the pandemic, reaffirming the Programme of Action of ICPD and of ICPD +5 as well as the Beijing Platform for Action.

Raising awareness

Highlighting the issue of cervical cancer in Latvia

The Latvian MA completed its project in 2004 which aimed to raise awareness about the prevention, diagnostics and treatment of cervical cancer. A brochure on cervical cancer was published and distributed in public places and the media has been involved in highlighting this issue.

Adolescents



Getting involved

Young people lack access to reproductive health services in many parts of the region, and adequate information on sexual and reproductive rights is often absent in school programmes. As the abortion rate among young women in parts of Europe remains high, and STIs and HIV infections are now affecting a worryingly large proportion of young people throughout Europe, it is vital to increase access to modern contraceptives and provide youth-friendly sexuality education which will enable young people to make informed choices regarding their sexual and reproductive health.



Providing services for young people

Staff and volunteers improved accessibility of services for young people by creating projects focusing on sexuality education and counselling for young people, holding workshops and meetings raising awareness of sexual and reproductive health and rights, opening youth centres and empowering young people to make educated choices regarding their health.

Voice for questions, and a place for answers

Many Associations have set up successful telephone and online counselling services, offering information and confidential advice and support. Volunteers have also found ways to deliver sexual and reproductive information in a friendly, approachable manner through World AIDS day campaigns, music festivals, drama productions, and peer education workshops.

Young people on board

Member Associations are increasingly involving youth in their programmes, activities and in decision-making at all levels, reflecting the importance of including young people in the development and management of issues and programmes that affect them.

Creating youth-friendly services in the Balkans

The creation of good quality, youth-friendly services is vital for increasing access opportunities to SRHR services and information for young people. A project for improving these services was developed between EN staff members and local partners in Serbia, Montenegro, Macedonia and Bosnia Herzegovina (BiH) in 2004. In each country, a situation assessment of clinics and youth centres was carried out, looking at the medical environment and equipment, as well as other factors which indicated “friendliness” for young people. An orientation workshop was also organized to train local staff on the provision of high-quality services for young people. As a result of this project, IPPF members and partners in BiH, Macedonia and Serbia were able and ready to start providing youth-friendly services by the beginning of 2005.



Reaching out to all: Sexuality education for disabled youth

Rutgers Nisso Groep (Netherlands MA) developed a website for physically and/or visually disabled young people: www.zoenenenzo.nl, meaning "kissing and all that". The website offers sexuality education to young people living with physical and/or visual disabilities, or who suffer from a chronic disease. The website has been designed in such a way that is accessible to the blind and the visually impaired. Users do not need a computer mouse and there is a possibility to vary the appearance of the site in letter size and contrasting colours. A website for deaf and hearing impaired young people,

www.weetal.nl ("know it all") was also developed. All information on the website is in Dutch sign language, spoken Dutch, and (simply) written Dutch, and is accompanied by illustrations on information such as the body, contraceptives and sexuality.

The Family Planning Association of Cyprus designed an educational programme for young blind people in 2004, following a meeting and the realization that they needed to be properly educated about sexuality and reproductive matters.

Increasing youth participation and representation



Young people's opinions about SRHR are often disregarded in Association governance and programme development. This is misguided, since young people are often best in knowing what they need and are most effective in raising awareness amongst their peers. To address this, the Regional Office organized a workshop on youth and governance in April 2004. Following the workshop, the participating MAs developed project proposals for improving youth participation in the governance of their Association.

Lithuania and Kazakhstan

Both the Lithuanian and Kazakhstan Member Associations developed successful projects addressing youth representation and participation. The Lithuanian MA, reflecting that there was insufficient youth representation in governance, established a democratic system of electing youth representatives, and developed a web page on the Association website informing visitors about the initiative. The Kazakhstan MA organized a training workshop for 14 youth representatives from branches of the Association. The workshop provided participants with the knowledge and skills to take an active role in the Association. In addition, a Youth Committee was established, and an Association Youth Network will also be developed to increase communication between youth members in branches of the Association.

Girls out loud in the UK

The UK Member Association, fpa, published a new resource in 2004 called 'Girls Out Loud' – a video resource and workbook for professionals working with young women. It covers a broad range of subjects including body image, contraception, peer pressure, sexuality, sex and relationships. The publication was launched at a seminar in the House of Commons in London in November 2004, which was well attended by parliamentarians and professionals in the field.



Abortion



Recognizing the right while improving the service

Abortion remains a controversial and significant issue especially in some Central and Eastern European countries where restrictive laws, conservative forces and the lack of availability of modern contraceptive methods result in high numbers of unsafe and illegal abortions. These unsafe abortions often lead to a worrying level of morbidity and mortality in parts of Europe. Volunteers and staff remain strongly committed to defending a woman's right to choose and to have access to legal and safe abortion.



Promoting safe abortion

Together with WHO and Ipas, the Regional Office held a meeting to assist five Member Associations from Central Asia and Eastern Europe in the development of policies and programmes to improve access to safe abortion within the law and the availability of quality abortion services. The assistance was based on the use of the WHO Strategic Approach, which is a three stage process that countries can use to assess reproductive health needs and priorities, test interventions to address these needs and scale up successful interventions. The workshop was a key step in implementing the abortion component of IPPF EN's strategic plan, and in helping MAs to shape their own strategic plans. It was noted that abortions performed under unsafe conditions continue to represent a major public health concern across the region, although the situation varies considerably from country to country. During the two days of the workshop, the participants worked effectively together to find creative and innovative ways to promote access to safe abortion.

Entre Nous magazine: Abortion in Europe

The Regional Office provided financial and editorial support to the WHO 'Entre Nous' (the European magazine for sexual and reproductive health) issue on abortion in Europe. The publication outlined the situation of abortion throughout the region ten years after the ICPD meeting in Cairo. The magazine has been translated in Russian and several other European languages. More information is available from www.euro.who.int/entrenous

Improving abortion services in Central Asia

In January, a regional workshop was held in Almaty, Kazakhstan, with the aim of training health professionals from five Central Asian countries on safe abortion practices. Films were shown of abortion services in Europe and a visit was organized to a local abortion clinic, which allowed the participants to see the differences between abortion services in European countries and Central Asia, and to learn how to make a SWOT analysis of an organization. At the end of the initiative, participants stressed the usefulness of the workshop and its relevance for Central Asian countries. In response to the workshop, the Kazakhstan Member Association held a national workshop in February to train health professionals from Kazakhstan on safe abortion practices. The workshop programme included information on international standards for safe abortion. Participants were educated on methods of protecting the abortion rights of marginalized people as well as improving access to abortion services for these communities.



Proposing changes in Portugal's abortion law

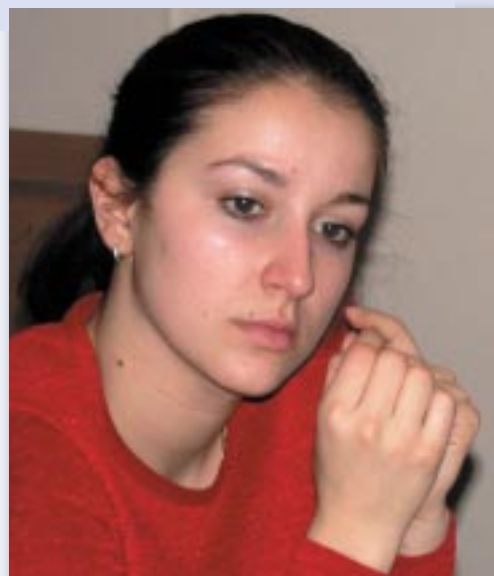
In March 2004 the Portuguese MA published a statement on its proposals within the context of the debate on abortion and sexual and reproductive health. This document presented the Association's position and proposals on changes in the abortion law, the referendum on abortion, primary health care and sexuality education in schools. The Association had meetings with all the parliamentary groups where this proposal was presented, and participated in four parliamentary hearings on these issues.

Russia: Fighting opposition to abortion

Active opposition to women's right to abortion continued in 2004. In October a forum on "the spiritual and moral basis of the demographic development of Russia" was organized by the Russian Orthodox Church. The forum advocated for measures to stop the declining birth rate in Russia. At the forum, the Russian Family Planning Association (RFPA) was criticised for preventing an increase in the birth rate. Representatives of the opposition repeatedly spoke about RFPA as an organization that harmed the interests of Russia. In November, in reply to activities of the Church, RFPA, together with the Union of Journalists of Russia, held a round table discussion on "whether abortions will be forbidden in Russia?". The aim was to highlight the importance of women's reproductive rights, and in particular women's right to abortion. Approximately 40 people attended, including policy-makers, health professionals and journalists.

Offering an alternative: The campaign for medical abortion in Lithuania

The Lithuanian MA continued its campaign in 2004 to legalize medical abortion in Lithuania. The Association questioned members of the general public on whether they would like the opportunity to have a medical abortion as an alternative to surgical abortion. Over 60% of the respondents agreed that medical abortion should be legal in Lithuania. In addition, the Association asked 200 women who were about to have a surgical abortion on their views about medical abortion. An overwhelming 85% of them replied that they would prefer to have a medical abortion if it was legal. Unfortunately, the Lithuanian Ministry of Health did not pay attention to these statistics or to WHO recommendations on safe abortion, and did not take any steps towards the legalization of medical abortion. The campaign continues to keep medical abortion in the spotlight.



Improving abortion facilities in Georgia

Hera XXI, the Georgian MA, campaigned in 2004 against unsafe abortion and endeavoured to ensure that individuals who perform abortions or treat abortion complications receive the appropriate training and equipment to carry them out safely. As a consequence of successful negotiations between the Ministry of Health (MoH) of Abkhazia and a governmental pre-natal centre, the Association conducted a two-day training session for medical professionals from Georgia on abortion. The objective of the training was to build support among sympathetic medical personnel to assist family planning centres in collecting information on the problems of unsafe abortion, to improve the referral system and to work towards training of trainers in the regions of Georgia.

Access



Addressing the need

While some countries in Europe have high rates of modern contraceptive use, they remain very low in many countries in Eastern Europe and Central Asia. This is due to limited methods of contraception and increasing levels of conservatism restricting the introduction of modern methods such as emergency contraception. These barriers especially affect the poor, rural and socially-excluded members of society, who are increasingly ignored when it comes to the provision of sexual and reproductive health services.



Improving services for the vulnerable and socially-excluded

Throughout 2004, IPPF EN volunteers and staff have focused on the needs of the vulnerable by providing sexuality education, contraceptives, and SRHR services. The knowledge and skills of those providing these services has been improved through training workshops held throughout the region.

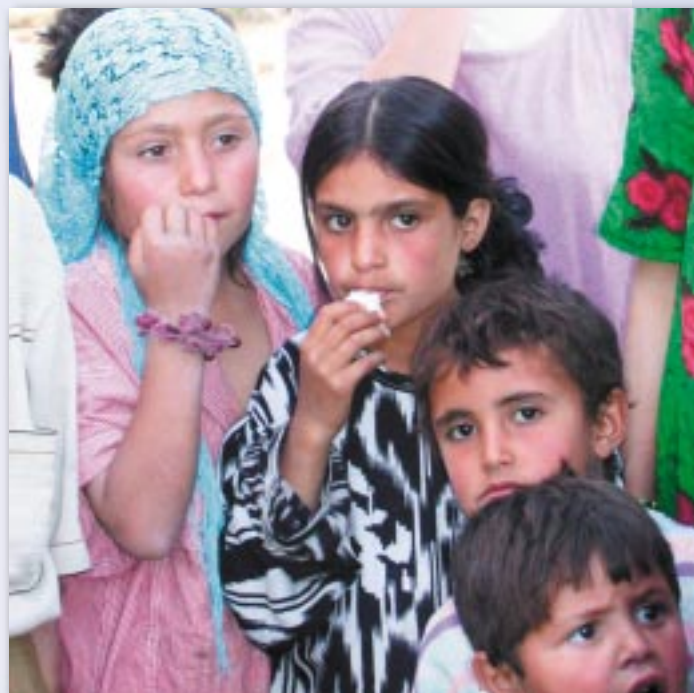
Protecting the sexual and reproductive rights of ‘people on the move’

The ‘People on the Move’ project, which was implemented in the five Central Asian countries of Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan, aimed to improve the sexual and reproductive health and rights of refugees, returnees, internally displaced persons (IDPs) and migrants through the provision of high quality, accessible sexual and reproductive health information and services.

One of the major successes of the project was the building of sound, operational partnerships between the participating MAs and local organizations. In addition to enlisting broader institutional support for the project, this strategy facilitated access to the most vulnerable groups among the target population such as orphans and sex workers. At the same time, the project was innovative in breaking new ground in each of the participating countries and demonstrated an effective approach for working with people on the move. The project brought about recognition of previously ignored groups and their needs, and empowered them to mobilize to improve their own reproductive health and rights and develop their self-esteem.

Campaigning against the trafficking of women and girls in Albania

The campaign against trafficking in Albania is an ongoing partnership between the Albanian Centre for Population and Development (Albanian MA) and the Greek Mediterranean Women's Studies Centre, which aims to raise awareness of the problem of trafficking in Albania and find ways to prevent women being sexually exploited in this manner. As part of the project, a task force, which included members from the Anti-Trafficking Unit at the Ministry of Order, was created in order to establish an action plan. To highlight the situation of trafficking, workshops were held with students and Association staff were trained on ways of preventing girls and women becoming victims of trafficking.



Including men in the equation: The Men's Moment project in Finland

Modern welfare services in many Nordic countries are focused on women. These services often fail to meet men's problems and often exclude or prohibit men from getting help. The Finnish MA, Väestöliitto, created the 'Men's Moment' project which aims to improve male access to SRH services and raise awareness of the sexual health and rights of men.

A series of sexuality education guides focused on men were published with the aim of not only improving men's sexual health, but also increasing women's knowledge of male sexuality. A website to accompany the project was established, providing a real-time one-to-one counselling service for men, which has proved to be very successful (www.seksuaaliterveys.org).

Improving sexual and reproductive health for sex workers in Uzbekistan

The Uzbek Association on Reproductive Health continued its project in 2004 for improving access to SRH for sex workers in Uzbekistan. Most are young women, who are at high risk of STI/HIV, unwanted pregnancies, drug abuse and violence. A branch clinic in Samarkand provided confidential reproductive health services for more than 800 sex workers, as well as 69 young people and 77 women. In addition, more than 6000 condoms, 220 HIV/AIDS tests (6 positive results), 197 pregnancy tests (30 positive results), 1000 oral and 60 contraceptive injections were provided.

Breaking down barriers in the UK

The fpa expanded its 'Speakeasy' project in 2004, a project which offers a non-threatening group-based opportunity for parents to learn together and acquire the confidence and skills they need to talk to their children about sex and sexuality. The main aims of the project are to encourage parents to provide positive sexuality education in the home and to encourage parents to take on the role of 'sex educator'. Backed up by fpa's training resources and training expertise, the course offers a flexible and relaxed way to gain greater confidence in an area that can cause embarrassment and awkwardness for parents and carers. Creative methods are used within groups including role play and games as well as more traditional written work. The emphasis is on making the courses as accessible as possible for those who will benefit.

Creation of a clinic for young people with disabilities in Israel

In 2004, the Israel Family Planning Association (IFPA) opened a centre for providing free sexuality education and counselling services for young people with physical or mental disabilities. The services are also available to families, teachers, and other individuals who live or work with people with disabilities. IFPA has trained 20 health professionals to volunteer as staff for this "Open Door" service, and this included training in sexual issues specific to people with disabilities. The centre has been made possible through a partnership between IFPA and the Re'ut Medical Center. The World Health Organization (WHO) has recognized "Open Door" as one of the world's best preventive health programmes.

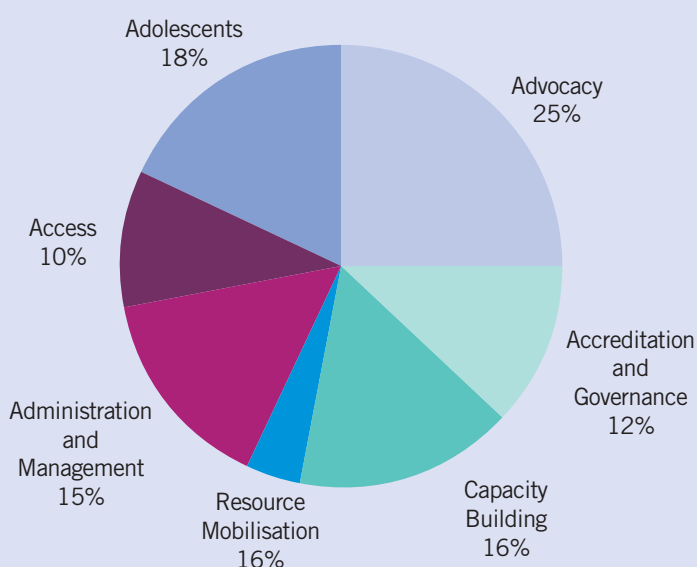
Financial Statement 2004

This financial statement represents a summary of the 2004 income and expenditure of the Regional Office, IPPF European Network, and the Member Associations in the region. It is not the statutory accounts. Copies of the audited annual accounts of IPPF are available from IPPF, Central Office, Regent's College, Inner Circle, Regent's Park, London, NW1 4NS, UK.

The IPPF European Network is a network of 39 Member Associations. These Associations are autonomous and report independently; therefore their accounts are not incorporated in these figures.

IPPF EN's main source of funding was provided by IPPF through its distribution of government contributions between the Regional and Central Offices via the Resource Allocation System.

The Regional Office's activities by IPPF Strategic Priorities and Supporting strategies can be broken down as follows:



IPPF and its members

IPPF provided core funding to 12 Member Associations in Eastern and Central Europe and supported projects in other countries throughout the region.

In 2004, the 12 grant-receiving Member Associations were:

- Albania
- Armenia
- Bosnia Herzegovina
- Bulgaria
- Georgia
- Kazakhstan
- Kyrgyzstan
- Lithuania
- Moldova
- Poland
- Russia
- Uzbekistan

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 European Commission
 IPPF Vision 2000
 Planned Parenthood Federation of America
 Population Action International
 SIECUS
 The Wallace Global Fund
 The William and Flora Hewlett Foundation

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Photos credits

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