

Ipas Meeting with Share-Net Members

15 April 2010

Presenting on behalf of Ipas: Elizabeth Maguire, President and CEO; and Barbara Crane, Executive Vice President

Ipas began with a short presentation about the history of their organization, which will be available on the Share-Net website (the receipt of the presentation has been delayed by the chaos resulting from the volcanic ash). In short, Ipas started when the US congress decided that USAID could no longer fund abortion activities. At that time, the main focus of Ipas was the distribution of manual vacuum aspirators, the devices used to perform abortions and treat complications of unsafe abortions.

Since then, the organization has grown to address comprehensive abortion care – including choice, access, and quality. To achieve this, they have a major focus on bringing together partners, from large international organizations to small grassroots movements. Ipas also carries out advocacy work on all levels: global, regional, national, and sometimes local. Ipas has also recently launched a new non-profit subsidiary, WomenCare Global LLC, which aims to expand the availability of abortion technologies and contraceptives worldwide.

A few points from the discussions:

- Ipas selects countries based on the magnitude of (unsafe) abortion, level of government commitment, presence of interested partners, potential for donor support, and by looking for countries in which Ipas has something distinct to offer.
- Ipas itself has faced fewer attacks from anti-abortion opposition than some other organizations, primarily because they are not service providers themselves. However, there have been some instances where US-supported opposition has targeted Ipas offices and staff. What is most important when dealing with opposition is to have foresight, in order to anticipate where conflicts may arise and defuse them in advance. In its policy work generally, Ipas has also found it helpful to build and call on strong relationships around the world (for instance with local partners and Ministries of Health) and also to call on UN and regional human rights bodies.
- In all of its programs, Ipas includes post-abortion contraception. In a few countries, like Ethiopia and Ghana, Ipas has a more comprehensive program addressing family planning needs through training of providers and provision of a variety of contraceptive methods, including long-term methods. These are cases where the Ministry of Health requested involvement of Ipas and there is a supportive donor.
- Ipas recently left Vietnam after handing the work over to the Ministry of Health and other local partners – the goal of the project had been to improve the quality of abortion care and post-abortion counselling, primarily through training providers. When it became clear that the in-country capacity was sufficient, they handed over the project over the course of three years to the local partners.
- A major cross-cutting theme for the coming years will be abortion and young people, especially sensitizing providers to youth needs and building youth leadership.
- And finally, should ICPD be reviewed in 2014? There is no official Ipas stance on this, but the general sentiment was that if the process is very well prepared (as was ICPD), and organized with strong leadership from UNFPA, then it could be very valuable to bring people together, face-to-face, again. However, if it is not well prepared, or if the leadership is weak, then there is a risk that the agenda will move backwards instead of forward; planning for 2014 must be approached very carefully.

Share-Net would like to thank Elizabeth Maguire and Barbara Crane for taking their time to meet with Share-Net members, and we hope you will visit us again soon! We would also like to thank Elly Leemhuis and Shantih van Hoog at the Ministry of Foreign Affairs for arranging the visit.