

**FAMILY PLANNING ASSOCIATION
OF SOUTH AUSTRALIA INC.**



13th Annual Report

for the year ended 30th June, 1983

FAMILY PLANNING ASSOCIATION OF
SOUTH AUSTRALIA INC.

THIRTEENTH ANNUAL REPORT
FOR THE YEAR ENDED 30TH JUNE, 1983

The Family Planning Association of South Australia Inc., together with the other Family Planning Associations in Australia, is an autonomous affiliate of the Australian Federation of Family Planning Associations Inc. (AFFPA).

National Body

Australian Federation of Family Planning Associations,
Level 4, 70 George Street,
SYDNEY, N.S.W. 2000.
Tel: (02) 27 8222

State and Territory Family Planning Associations

A.C.T	Health Promotion Centre, Childers Street, Canberra City. Tel: (062) 47 3077
N.S.W	161 Broadway, Sydney. Tel: (02) 211 0244
N.T.	42 Stuart Highway, Darwin. Tel: (089) 81 5335
SOUTH AUSTRALIA	17 Phillips Street, Kensington. Tel: (08) 31 5177
QUEENSLAND	239 Brunswick Street, Fortitude Valley. Tel: (07) 52 5151
TASMANIA	73 Federal Street, North Hobart. Tel: (002) 34 7200
VICTORIA	259 Church Street, Richmond. Tel: (03) 428 1414
WESTERN AUSTRALIA	104 Colin Street, West Perth. Tel: (09) 321 2701

(ii)

"As members of a caring society and, particularly, as professional 'carers', we should all be concerned that each pregnancy that leads to a child should be the result of an informed, thoughtful and loving decision, as far as is humanly possible".

Dr. Elphis Christopher in
'Sexuality and Birth Control
in Social and Community Work',
Temple Smith, London, 1980.

Acknowledgements

The Family Planning Association of South Australia Inc., expresses gratitude and appreciation for financial assistance from both the Commonwealth and South Australian Governments and for the assistance and support of organisations and volunteers with which it has been connected.

THE FAMILY PLANNING ASSOCIATION OF SOUTH AUSTRALIA INC.

17 Phillips Street, Kensington, S.A. 5068.

VICE-REGAL PATRON - HIS EXCELLENCY THE GOVERNOR, SIR DONALD DUNSTAN

PATRONS - DR. WINIFRED WALL, A.M.
PROFESSOR LLOYD COX, A.M.

COUNCIL MEMBERS

1982 - 1983

OFFICE BEARERS

President	Dr. Karl Ball
Vice Presidents	Mrs. Janet Browning, O.A.M. Ms. A. Levy, M.L.C.
Hon. Secretary	Mrs. Celia Willing
Hon. Treasurer	Mr. Rod Wallbridge
Chairman of Council	Mrs. Janet Browning, O.A.M.

ORDINARY MEMBERS

Mrs. Yvonne Allen	Ms. Shirley Long (Staff Representative)
Dr. Aileen Connon (SA Government Representative)	Ms. Lindy Powell
Sr. Genevieve Gray	Mrs. Elizabeth Scholefield
Ms. Virginia Hall (Resigned 1983)	Mrs. Luise Sheehan
Dr. Chris Heinrich (AMA Representative 1983)	Mr. Wayne Turner
Dr. Peter Hoopmann	Ms. Louise Ward
Dr. Olive Johnston	Dr. David Williamson
Mr. David Kerr (Resigned 1983)	

NATIONAL COMMITTEE REPRESENTATIVES

AUSTRALIAN FEDERATION OF FAMILY PLANNING ASSOCIATIONS (AFFPA)

AFFPA Council (SA Representative) Mrs. Janet Browning (Deputy Chairman)

Biological Science Committee Dr. John Porter (Secretary)

INTERNATIONAL COMMITTEE REPRESENTATIVE

INTERNATIONAL PLANNED PARENTHOOD FEDERATION (IPPF)

Regional Council

Mrs. Janet Browning (Member)

THE FAMILY PLANNING ASSOCIATION OF SOUTH AUSTRALIA INC.

MEDICAL ADVISORY COMMITTEE

Professor Warren Jones
(Flinders University)

Dr. Robert N. Munday

Professor Lloyd Cox
(University of Adelaide)

Dr. David Williamson

Dr. Peter Hoopmann (Chairman)

TASK FORCE CO-ORDINATOR

-

Ms V. Hall (Resigned 1983)

STAFF MEMBERS AT JUNE 30TH, 1983

Dr. J. Porter - Director F/T

F/T = Full Time
P/T = Part Time

ADMINISTRATION

M. Bagshaw	Finance Officer F/T
B. Edward	Clerk P/T
C. Emmett	Maintenance P/T
R. Hubbard	Secretary F/T
S. Long	Typist P/T
J. Volpato	Switchboard Operator/Typist F/T

NURSING STAFF

J. Dolman	Principal Nursing Officer F/T
J. Bridger	Co-ordinator, Southern & Western Region P/T
M. Chambers	Home Visiting Nurse P/T
P. Cheesman	Nurse P/T
P. Cohen	Nurse P/T
J. Cox	Nurse Educator P/T
M. Cripp	Home Visiting Nurse F/T
E. Davis	Enrolled Nurse P/T
E. Edwards	Nurse P/T
G. Elliott	Nurse P/T
G. Gilbert	Nurse P/T
G. G. G. G.	Nurse P/T
G. G. G. G.	Nurse P/T
G. G. G. G.	Home Visiting Nurse P/T
G. G. G. G.	Nurse P/T
G. G. G. G.	Senior Nurse Educator P/T
G. G. G. G.	Home Visiting Nurse P/T
G. G. G. G.	Clinic Supervisor F/T
G. G. G. G.	Home Visiting Nurse P/T
G. G. G. G.	Co-ordinator, Northern Region P/T
G. G. G. G.	Enrolled Nurse P/T
G. G. G. G.	Nurse P/T
G. G. G. G.	Nurse P/T

MEDICAL STAFF

S. Caton	Senior Medical Officer P/T
J. Giles	Senior Clinic Doctor P/T
M. Armitage	Medical Officer P/T
S. Broad	Medical Officer P/T
G. Graham	Medical Officer P/T
M. Harrington	Medical Officer P/T
A. Isaacs	Medical Officer P/T
R. Joffe	Medical Officer P/T
M. Kearney	Medical Officer P/T
M. Moody	Medical Officer P/T
T. Mudge	Medical Officer P/T
P. McEvoy	Medical Officer P/T
H. Nathaniel	Medical Officer P/T
A. Neoh	Medical Officer P/T
T. Turnbull	Medical Officer P/T
B. Weller	Medical Officer P/T

RECEPTIONISTS AND CLINIC OFFICE

H. Sims	Office Co-Ordinator F/T
B. Bates-Brownsword	Receptionist P/T
A. Borillo	Receptionist P/T
R. Butler	Receptionist P/T
J. Heijkoop	Receptionist P/T
J. Oats	Receptionist P/T
B. Sayers	Receptionist P/T
A. Urban	Receptionist P/T
J. Versteegen	Booking clerk/Receptionist F/T
P. Wall	Receptionist P/T

EDUCATION

G. Brooking	Education Officer F/T
H. Murphy	Assistant Education Officer P/T
S. Bartholomaeus	Health Educator P/T
P. Cox	Librarian & Resource Centre Assistant F/T
R. Earl	Health Educator P/T
A. Fortanier	Teacher/Trainer P/T
M. Hagan	Health Educator P/T
H. Hagen	Health Educator P/T
W. James	Health Educator P/T
S. Kahn	Health Educator P/T
R. McKeegan	Health Educator P/T
J. Robertson	Health Educator P/T
K. Slaytor	Health Educator P/T
J. Tottman	Health Educator P/T
J. Twomey	Health Educator P/T
J. Watts	Health Educator P/T

EDUCATION (cont'd)

R. Downs	Country Health Educator, Mt. Gambier P/T
E. Hammond	Country Health Educator, Whyalla P/T
J. Hoiles)	
M. Inglis)	Country Health Educator, Pt. Pirie P/T
D. Martin	Country Health Educator, Riverland P/T

SOCIAL WORK

J. Potts	Senior Social Worker F/T
E. Hicks-Maitland	Social Worker P/T
W. Willow	Social Worker P/T

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LOCATIONS OF CLINICS OF THE FAMILY PLANNING
ASSOCIATION OF SOUTH AUSTRALIA INC.

FAMILY PLANNING CENTRE

17 Phillips Street, Kensington.

NORTHERN REGION

ELIZABETH	Lyell McEwin Hospital, Haydown Road, Elizabeth Vale.
SALISBURY	Women's Rest Centre, 12 James Street, Salisbury.
ST. AGNES	St. Agnes Community Health Centre, 1244 North East Road, St. Agnes.

SOUTH AND WEST REGION

BEDFORD PARK	Flinders Medical Centre.
CHRISTIES BEACH	Christies Beach Community Health Centre, 88 Dyson Road, Christies Beach.
PORT ADELAIDE	Central Mission, 70 Dale Street, Port Adelaide.

INTRODUCTION

As reported in detail later in this report, during the current financial year the numbers of participants in education and training programs continued to increase. Conversely, the slight annual decrease in clinic client numbers, since 1979, continued.

During the year there has been a reappraisal of the Family Planning Association's activities. A small group of staff called the "Ginger Group" was convened by the 1982 staff representative to Council. This group reviewed the activities of the FPA and recommended that a large promotion campaign, aimed at sexually active teenagers, should be undertaken. This recommendation was accepted by Council, but it was thought that such a large campaign could not be run by the FPA alone.

The Association approached a variety of agencies, which showed interest and wished to be involved. The Health Promotion Services of the S.A. Health Commission (SAHC) were then approached and were requested to undertake a promotion with the assistance of those agencies. They are still considering funding for this and are about to undertake some initial research about the target group.

Another focus for the financial year has been the country. In Whyalla, workshops for teachers and other professionals on "Communicating about Sexuality", a program for pharmacy assistants, a seminar for pharmacists, visits to local medical practitioners and TV appearances, have been made during the year. It is envisaged that such programs will extend to the other country areas.

The Director, in the capacity of Secretary of the AFFPA Biological Science Committee, was responsible for the organisation of the Symposium on "Latest Developments in Contraception" which was held at Thredbo (NSW) in February 1983. It was extremely well attended and generally well received by the participants.

There have been some major changes in the allocation of premises during the year. The old Resource Centre was vacated by the Education Section after it became too small for them. The Library/Resource Centre and Education Section moved to the then Clinic II building, which has provided more much needed space. The "old" Resource Centre was then converted into the "Counselling Centre". This has lowered ceilings, a pleasant waiting room, rooms for the social worker, nurse and doctor and a large room which can be used by students and groups. The pregnancy counselling clinics are now held in this building.

This has also been the year of "high technology". The old telephone system was most inconvenient and with telephone extensions connected to a plug and cord switchboard from five buildings, it was frequently difficult to find members of staff, and for people to obtain outside lines. This has changed with the purchase of a Telecom "Commander" system which incorporates both telephone and intercom facilities. Also, a word processor, an IBM Displaywriter, has been purchased for the administration section. This is already proving to be a boon, as the boring and repetitive typing of numerous drafts of articles, papers and books, has given way to simple corrections.

FEATURE ARTICLE

FUTURE CHALLENGE!

by Celia Willing, Honorary Secretary

Many readers will recall the feature article by Dr. John Porter in our 11th Annual Report, or may remember his talk on the same theme in September 1981. I draw your attention to his summary of the Heinrichs Model of the stages of transition of planned parenthood. Dr. Porter hypothesised that the then current status in South Australia was at Level III and raised the question of achieving Stage V (planned parenthood integrated in society) either through our own efforts or through a Stage IV in which government took over many FPA functions.

John's article is as relevant now as it was two years ago; we remain at Level III and there are no indications of achieving Levels IV or V. If, as an organisation, we wish to advance and achieve a situation in this state of full integration of planned parenthood into our society, we should be looking ahead and discussing ways and means of achieving this end.

It is my opinion that little will be achieved by pursuing policies designed to have the government take over clinic services. In a large part this was Heinrichs' Stage IV, but it also includes acceptance of planned parenthood philosophies and ideals by government. The latter, I believe, we are achieving.

We have not the money, power or influence to successfully 'go it alone' without the help of government. However, in these financially critical times it is a reasonable assumption to feel that any services taken over by government will result in a corresponding loss of revenue to the organisation. We are all aware that clinic numbers are not increasing and it could become a futile exercise to hand over the clinics, and accept a reduction in budget when we may well decide to change our clinic operations or emphasis in the not-too-distant future, and move funds accordingly. My own view is that while clinics are meeting a need for the community we should maintain them. Clinics also serve as the training grounds in which professional staff can perform their practicum.

It is thus my view that apart from financial and policy support, our organisation should demand little from government and attempt to achieve the aim of fully integrated planned parenthood in South Australian society through our own efforts.

Since 1970 the Association has come a tremendously long way due to the dedication of a small number of people. The progress and achievements are laudable and we have reached a stage of national and international recognition. One of the benefits of such recognition is that we have access to research, activities and techniques from around the world. There is perhaps much that we can learn from other countries, especially in the use of professional and volunteer staff, in training techniques and in the benefits that may accrue from liaison with government bodies.

To this end, viz. fully integrated planned parenthood in South Australian Society, I ask you to consider the possibilities; over what period should we seek to achieve Stage V - the next five years in the next decade? What strategies should we use to achieve this aim? Should we adopt experience from other countries or attempt to devise our own? Where do we place our emphasis? Which of our services need an increase? Which can be run down? Before we ask these questions do we need more research into South Australian society? If so, should we be funding it or is this something to be pursued by the Department of Health?

In this article I have attempted to ask you all to look hard at our organisation, its purpose and how this should be achieved. It is a fairly easy task to maintain the status quo, it is quite another issue to pursue a future for the Association that will effect our community at large. I believe that within the next 12 months we should have been able to make decisions about a corporate plan for achieving Heinrichs' Level V.

INFORMATION AND EDUCATION

This year, 1983, marks the Eleventh Year of activities of the Family Planning Association's education section. This has been a year of consolidation and assessment of future needs. Again there has been a growth in demand for services in all areas, in direct contact teaching, as resource people for health professionals developing programs, and in the use of resource material from the print and film library.

Services in country areas, Port Pirie, Whyalla, Minlaton, Mount Gambier, and the Riverland, have been well-utilised and programs reflect the diversity of requests for services in various geographical areas.

The move from the "old" Resource Centre to the "new" Resource Centre in the building formerly used as Clinic II, has created a vastly improved working environment for staff and visitors alike. The Library has been extended since the move, in both space and content.

School-based programs have continued to consume a large part of the Association's resources and the on-going liaison between the Education Department staff and the Health Education Project Team has been valuable.

In the 1982 calendar year the Association conducted programs in 70 high schools throughout the State reaching over 13,000 school students.

The work of the teacher/trainer appointed in 1982 has increased the contact with teachers who wish to develop sex and family life programs in their schools. The response from country areas has been enthusiastic with workshops being held in Whyalla, Port Pirie and the Riverland towns.

To support the training programs for teachers and health professionals, the Association engaged the South Australian Film Corporation to produce two video tapes. They are based on the teaching model used by family planning educators and provide illustrations of teaching techniques, content and process. Each tape which is complete in itself, is twenty minutes long and provides a synopsis of the key points of each program. The tapes are entitled "Relationships - A Person is a Person" and "Planned Parenthood - Choosing, Prizing, Acting".

Although the demand for school-based programs is high, the education section has maintained its philosophy of endeavouring to reach a wide range of community groups, especially those who are considered to be in need and at risk. Programs of differing formats have been held with the following:-

- . parents of students attending FPA programs in schools;
- . parents of adolescents "Communicating with your Teenager";
- . parents of young children - primary school, kindergartens, playgroups;
- . adolescents in residential care;
- . adolescents in out of school youth groups;
- . transition education students in TAFE-funded programs;
- . unemployed youth - EPUY, CYSS;
- . people with disabilities attending special schools and sheltered workshops;

- . students undertaking tertiary education;
- . community groups based at community health centres, family services centres, etc.
- . students of the Fort Largs Police Academy;
- . apprentices' training courses;
- . Aboriginal health workers.

The reformation of the Education Committee with representation from Council and the full-time and sessional education staff has proved to be a valuable link between Council and staff. The Committee meets five times per annum and provides a forum for discussion of new and current projects.

The ever increasing demand for "new projects" and repeat programs is seen as an expression of confidence in the standard of work that the community has come to expect of the educators. As in past years, the staff have worked with enthusiasm and responsibility.

In view of this increased pressure, it has been decided to submit an alternative budget for 1983/84 showing a complete staff restructuring and an increase in hours for sessional staff. This restructure would include an extension of library/resource centre and teacher-training staff. It would also enable an extension of the work being done by community-based educators in areas such as Christies Beach, Port Adelaide and in the North East metropolitan area. In view of the support given by the South Australian Health Commission to previous requests for education funding, it is hoped that the alternative budget submission will be accepted.

SOCIAL WORK - (Counselling Services)

During 1982/83 social work staff have continued to deliver counselling services to clients presenting at FPA with unplanned pregnancies, sexual, family or relationship difficulties. Although referrals from other agencies have remained stable, referrals to the social work service from FPA clinics have decreased, reflecting the general fall in clinic client numbers at the agency. It is believed that the community, including FPA clients, could be more aware of the availability of the social work service and its role.

With the renovations to the Counselling Centre, facilities for pregnancy clinics and social workers have been much improved. As well as social workers' offices, there is now accommodation for social work students on placement with the FPA. This room can also be used for small groups and meetings. Pregnancy clinic staff find it easier to function as a team within the setting of the Counselling Centre where other agency functions are not being carried out concurrently.

With the extended facilities it has become more feasible to consider offering group services to clients. This year, two groups have been run for women who are pre-orgasmic and who wish to develop greater awareness of their sexuality. It is felt that the group setting has been a far more effective way of offering help than individual counselling, and it is hoped that this can be an ongoing service.

Social Workers continue to be involved in FPA training programs for nurses and doctors. Supervision of social work students completing fieldwork placements has also continued this year. Liaison with other social welfare agencies is possible through active involvement with regular health social work seminars.

Improving public awareness of the availability and nature of social work services at FPA is felt to be an important goal for the next year. This will be best achieved through extending publicity about the service through media, through FPA clinics and continued information to other agencies.

NURSING REPORT

This has been a year of streamlining clinic sessions and clinical activities. In November 1982, Clinic II became the Resource Centre. Thus, clinical sessions are now held in the main clinic building.

After completion of renovations in May 1983, pregnancy counselling clinics were moved from the main building to the Counselling Centre.

Since the installation of the "Commander" telephone system, the old switchboard room in the main clinic has been used as the dispensary. All contraceptive supplies are now kept in a central area, which has led to a reduction in time-wasting counting and refilling drug cupboards. Less cupboards for contraceptives has also led to less errors in stock counting. One nurse on each clinic session now supplies and teaches contraceptive methods, checks clients' financial status and performs telephone counselling. This has ensured a smoother flow of clients, and time is not lost waiting for a nurse to teach the various methods.

Client waiting times have always been a problem, and in an effort to alleviate this, two Express Clinics have been introduced. The clinics are held on Tuesdays between 3.00 and 6.00 p.m. and Thursday evenings from 7.00 till 9.30 p.m. The clinic team consists of one doctor, two nurses and a receptionist, and bookings are available for up to 30 clients. These clinics are for repeat visit clients who have no problems with their present methods of contraception. Careful explanation is given by telephone to the clients to ensure that they understand that if they have problems they may use another session. Both Express Clinics are usually well patronised and very positive feedback has been received from clients. All evening and morning clinic appointments have been restructured and some evenings reduced (due to nursing staff hours reduction), in an effort to alleviate client waiting times. The changes appear to be working well, and the nurses are able to continue with high quality client care.

All telephone counselling is performed by registered nurses in the clinics. It is an extremely worthwhile and busy service offered to FPA clients and to anyone in the community who may care to use it. There were approximately 10,000 such calls in 1982/83, even though the service is not widely advertised. The service is seen as being most important and constructive, not only as an information and education service, but also a good public relations exercise.

Counselling varies from simple education and information about contraception to pregnancy counselling and complicated issues dealing with sexuality and sexual difficulties. Other callers include doctors, nurses, social workers and various health professionals, both in hospital and community settings, telephoning for information or advice. Referrals are made from other community agencies such as Lifeline, Department of Community Welfare (DCW), and the Child, Adolescent and Family Health Service (CAFHS).

Suburban clinics, generally continue to be well patronised. The Christies Beach clinic, once threatened by closure due to low attendances, has greatly improved and, it is hoped, will continue as a permanent clinic.

Home Visiting Nursing Service Report

The home visiting service has continued to be extremely busy with many clients presenting with multiple social, financial and relationship problems.

The main source of referral is from CAFHS, hospital-based and DCW social workers, women's shelters, existing clients, Vietnamese Health Workers and FPA staff. Most metropolitan women's shelters, family refuges and mothering units are visited on a weekly basis and as requested. Other organisations visited include sheltered workshops.

Many of the women seen at the shelters have very little knowledge of how their bodies function, of contraception, of sexuality and of general health issues; therefore, the home visiting nurse often holds an impromptu and informal session concerning these topics. Other more structured education sessions are offered by FPA community educators as requested.

The two Vietnamese Health Workers have continued their excellent interpreting service, working in close liaison with the home visiting nurse in the north western area of Adelaide. The health workers are also available for the Port Adelaide and Kensington clinics.

Various health professionals, such as Sturt College student nurses and medical and social work students, have gained valuable knowledge and insight from accompanying the home visiting nurses.

TRAINING REPORT

Nurse Training

The post-basic courses for Registered, Enrolled and Mothercraft nurses which are conducted over a period of eight weeks, continue to provide the major commitment in nurse education. In addition, the provision of information and clinical training for the many nurses (basic and post-basic) who visit the Association has continued. Placements continue to play an important role and the Nurse Educators, as in previous years, have continued to act as resource personnel for the various programs and in-service training held by the Association.

The 8-day Intensive Course which is offered to nurses from country areas has been over-subscribed this year; many more applications have been received than places available. Nurses have also been trained from Broken Hill, Kangaroo Island, Port Pirie, Mt. Gambier and Western Australia.

To enable more time to be allocated to issues relating to women's health and sexuality, it has been necessary to increase the length of the theoretical component of the 1984 courses. This has also enabled more time for existing lectures and tutorials than have been previously available. Participant evaluations have proved this to be a most successful change. The theory component of the course is now conducted over a period of two weeks (Monday and Tuesday) making a total of four days.

The Association was pleased to re-establish ties with the Queen Victoria Hospital. Miss Cantello, Director of Nursing, approached the nurse educators requesting two places to be held at each intake for members of the nursing staff. Most of these nurses work in the out-patient clinics at the hospital, and have found the family planning information invaluable to their work situation.

Medical Training

During the year, two postgraduate medical courses were held. Most of the participants were from the Adelaide metropolitan area. However, there were participants from Casuarina and Alice Springs (NT), Mount Gambier and Port Lincoln.

Eight sixth year medical students from the University of Adelaide each spent a week at the Association observing clinics, observing education programs and accompanying a Home Visiting Nurse on her rounds. Also, medical students from both the University of Adelaide and Flinders Medical Centre attend FPA clinics during their obstetrics and gynaecology terms.

The director acted as a tutor in the Community Medicine Course for third year medical students at the University of Adelaide and the Senior Medical Officer and the director were tutors in Human Sexuality for the fourth year medical students at Flinders Medical Centre.

Summary of Training Activities

<u>Program</u>	<u>Total Participants 1982/83</u>
POSTGRADUATE COURSE IN FAMILY PLANNING FOR MEDICAL PRACTITIONERS Two courses	29
POST-BASIC COURSE IN FAMILY PLANNING FOR NURSES Four Courses	84
INFANT WELFARE NURSES Two 2-day seminars	24
ENROLLED/MOTHERCRAFT NURSES COURSES Two courses each 17½ hours	42

OTHER PROGRAMS OFFERED FOR HEALTH PROFESSIONALS

<u>Enrolled Nurses</u> Glen Eden School of Nursing (Study Block)	98
<u>CAFHS Nursing Staff</u> 1-day seminar	7
<u>Sturt College Diploma of Applied Science</u> ½-day program	13

LECTURES

The Principal Nursing Officer has continued to present lectures and tutorials to student nurses, trainee enrolled nurses and student midwives. Lectures were presented to the Royal District Nursing Service, Glen Eden School of Nursing and the following hospitals:-

Adelaide Children's
Hampstead Centre
Lyell McEwin
Modbury
Queen Victoria
Repatriation General
Royal Adelaide
St. Andrews
South Coast District (Victor Harbor)

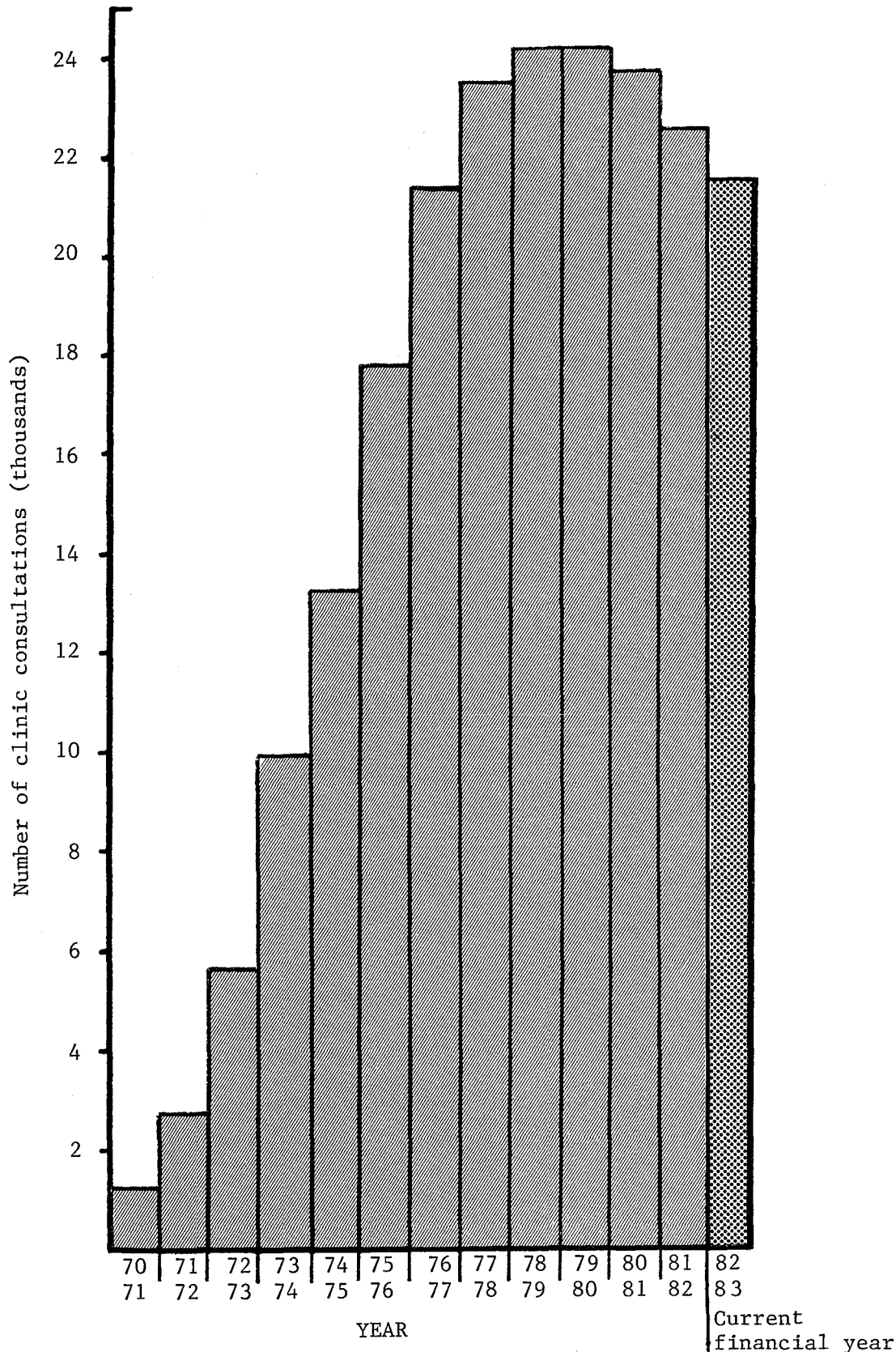
IN-SERVICE TRAINING

Two sessions on Counselling skills for the Association's medical practitioners and a workshop on Human Sexuality for FPA nurses were held during the year.

CLINIC STATISTICS

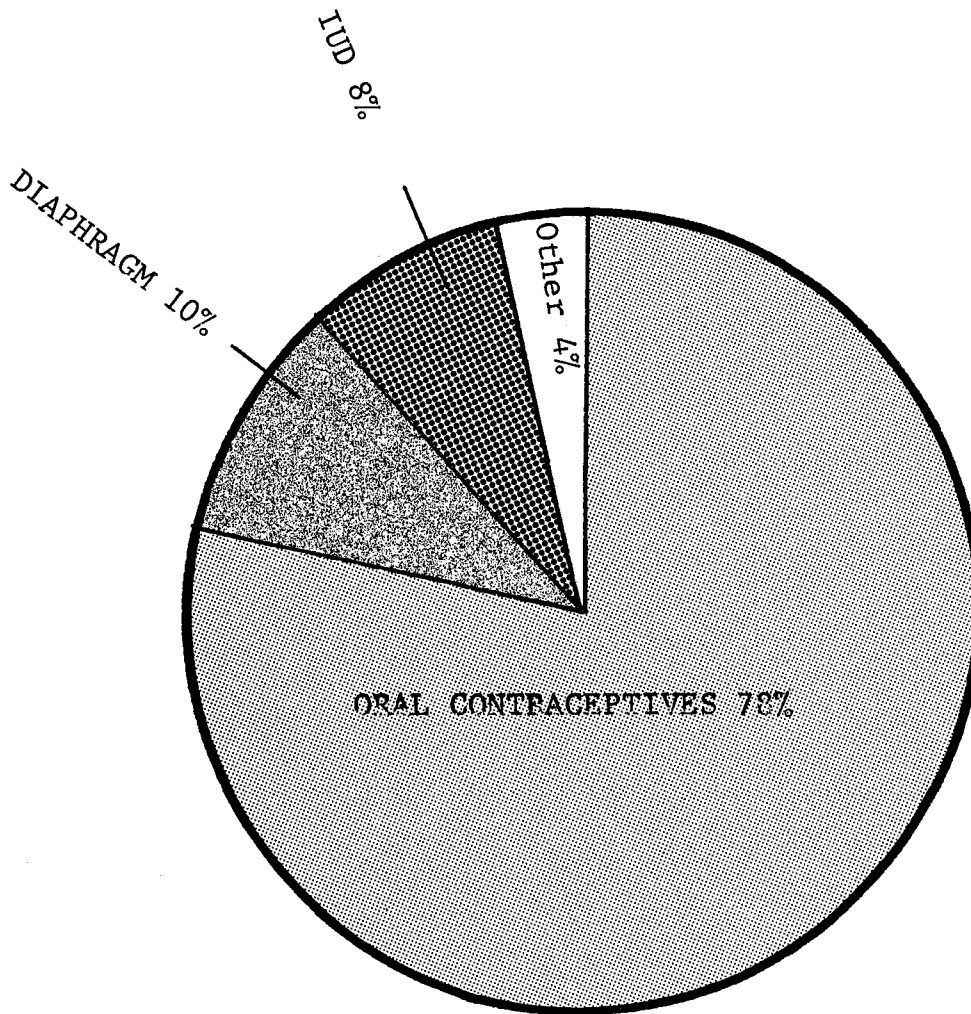
During the year 1982/83 the number of client visits to the Association's clinics was 21,400. This comprised 3,881 new client visits and 17,519 return visits. Once again, the total number of client visits was less than for the previous year (22,458). For the past three financial years there has been an annual 5% fall in total clinic visits.

Fig. 1 - Total yearly clinic consultations.



Of the 3,881 new clients, the majority presented for contraception. Approximately 29% of new client consultations were for services other than contraception i.e. advice and counselling. Of the remaining new clients, the methods of contraception chosen were as follows:-

Fig. 2 - Methods of contraception chosen by new clients*.



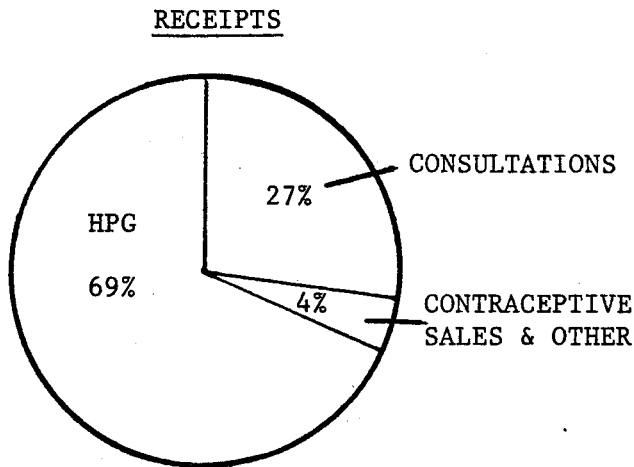
Of the approximately 4% who chose "other methods" the breakdown was as follows:-

Condoms	2%
Spermicides	1%
Depo-Provera	1%

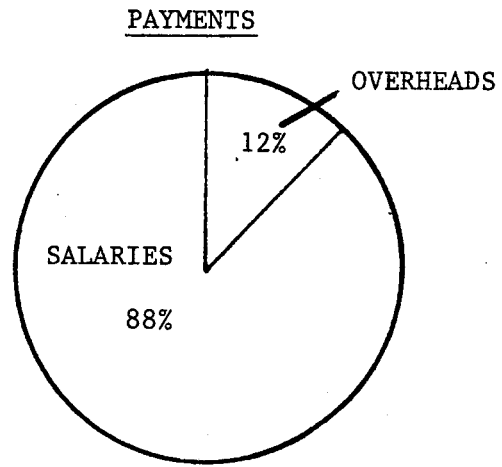
*These figures were compiled from a survey carried out over four months.

FINANCE REPORT

A. OPERATING RESULT - CLINICAL BUDGET



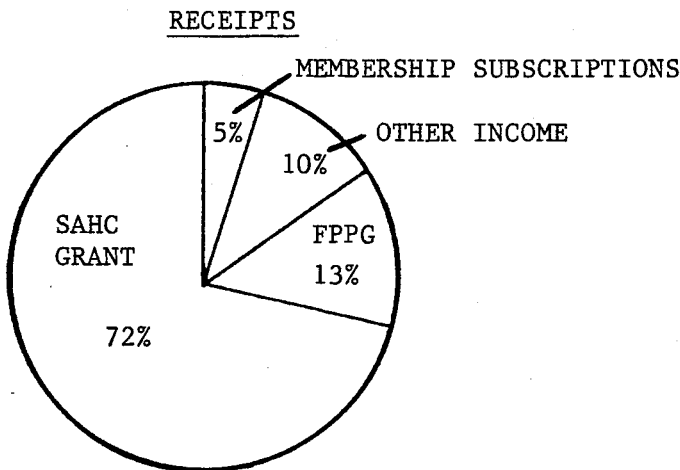
TOTAL INCOME \$599,687



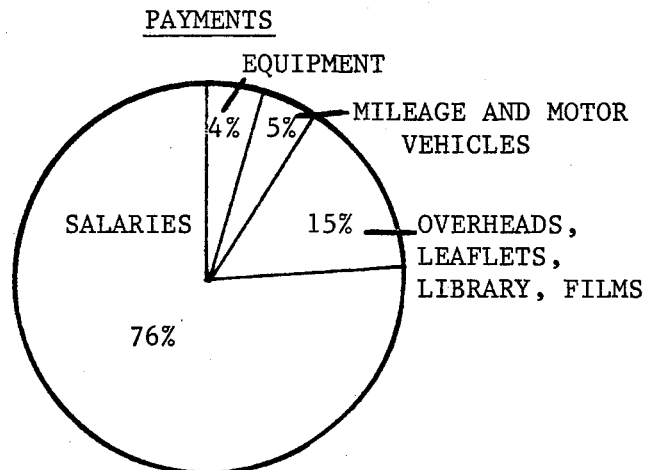
TOTAL EXPENDITURE \$599,687

A most satisfactory year! The Department of Health allowed the Association to offset \$4,343 against the purchase of a Telecom "Commander" System, thus enabling the income and expenditure to be balanced. Percentages are similar to 1981/82.

B. OPERATING RESULT - EDUCATION AND TRAINING BUDGET



TOTAL INCOME \$292,886



TOTAL EXPENDITURE \$292,905

This result also was very pleasing. A special grant of \$5,000 from the South Australian Health Commission enabled renovations to be made to the Counselling Centre. The cost to the end of this financial year is \$10,000, however a further payment of \$4,000 will be made from the Savings Investment Account early in the 1983/84 financial year.

- FPPG - Family Planning Program Grant)
- HPG - Health Program Grant) Commonwealth Department of Health
- SAHC - South Australian Health Commission

THE FAMILY PLANNING ASSOCIATION OF SOUTH AUSTRALIA INCORPORATED
STATEMENT OF RECEIPTS AND PAYMENTS FOR YEAR ENDED JUNE 30TH, 1983

1981/82	<u>RECEIPTS</u>	Clinical	Non-Clinical	Total
804,365	Total payments CARRIED FORWARD	\$ 599,687	\$ 293,706	\$ 893,393
	<u>GOVERNMENT GRANTS</u>			
385,000	Health Program Grant	417,200		417,200
37,000	Family Planning Program Grant		38,350	38,350
164,143	State Health Commission Grant		210,306	210,306
22,440	Special Grants		17,713	17,713
	<u>GENERAL REVENUE</u>			
140,586	Consultation fees	160,226		160,226
38,415	Surplus from sale of contraceptives	20,714		20,714
3,457	Surplus from sale of literature		787	787
5,121	Training courses	1,494	8,547	10,041
13,650	Annual subscriptions		13,592	13,592
-	Film hire		1,616	1,616
836	Reimbursement of wages and expenses		2,595	2,595
790	Sundries	53	181	234
811,438	Total Receipts	599,687	293,687	893,374
7,073	Surplus/(deficit) for year	-	(19)	(19)

FINANCIAL STATEMENT BY THE COUNCIL

The attached Statement of Receipts and Payments of the Family Planning Association of South Australia Incorporated in our opinion, is properly drawn up so as to exhibit a true and fair view of the transactions for the year ended 30th June, 1983.

DATED at ADELAIDE this Seventh day of September, 1983.

On behalf of the Council

.....[Signature].....
 HON. TREASURER.
[Signature].....
 HON. SECRETARY

THE FAMILY PLANNING ASSOCIATION OF SOUTH AUSTRALIA INCORPORATED

STATEMENT OF RECEIPTS AND PAYMENTS FOR YEAR ENDED JUNE 30TH, 1983

1981/82	<u>PAYMENTS</u>	Clinical	Non-Clinical	Total
	<u>OPERATING EXPENSES</u>	\$	\$	\$
637,180	Salaries and wages	491,851	205,797	697,648
22,606	Superannuation	12,152	7,296	19,448
30,347	Payroll Tax	23,301	10,084	33,385
1,695	Publicity and Advertising	559	447	1,006
780	Rent - outlying clinics	-	-	-
5,810	Medical supplies - consumables	6,518	-	6,518
868	Unbillable swabs	-	-	-
	<u>EQUIPMENT AND INFORMATION</u>			
1,104	Instruments and appliances	1,072	-	1,072
2,799	Library and films and video	-	7,578	7,578
2,891	Equipment	7,316	7,990	15,306
6,642	Pamphlets & Posters	-	5,208	5,208
	<u>CAPITAL EXPENDITURE</u>			
-	Motor Vehicle	-	4,371	4,371
7,105	Ubix Copier	-	-	-
	<u>ADMINISTRATION</u>			
1,350	Accounting and Audit	1,000	500	1,500
7,534	Cleaning and laundry	7,914	2,805	10,719
6,864	Fuel, Light and Power	5,200	2,598	7,798
5,970	Insurance	6,365	2,179	8,544
10,246	Postage and telephone	7,421	3,703	11,124
12,723	Printing and stationery (inc. Microfiche)	9,485	2,904	12,389
9,052	Maintenance and repairs - premises	5,124	8,273	13,397
3,016	Maintenance and repairs - equipment	2,363	1,039	3,402
15,940	Mileage & Motor vehicle maintenance	7,365	9,925	17,290
2,471	Rates and Taxes	2,060	1,030	3,090
461	Freight	-	707	707
7,849	Travelling & in-service seminars	804	5,847	6,651
517	Sundries	1,555	1,186	2,741
545	Advertising for staff	262	408	670
-	Sex education sets	-	1,831	1,831
804,365	Total Payments	599,687	293,706	893,393

AUSTRALIAN FEDERATION OF FAMILY PLANNING ASSOCIATIONS (AFFPA)

Janet Browning
Deputy Chairman

During 1982/83 the role and status of the Federation has developed into that of an important and professional national organisation. The consultations with the Commonwealth Department of Health and with Federal Ministers have been invaluable.

The Council and the State Executive Officers agreed unanimously to a small state levy to be paid to the Secretariat, and also to continued cost-sharing for national meetings.

National purchasing of contraceptives is to commence in the next financial year and the feasibility of national publication of some pamphlets is being studied.

AFFPA has published a new edition of "Choices" for sale in all pharmacies and a reprint of "The Control of Human Fertility". A second edition of the latter publication will be published in 1984 by Blackwell Scientific Publications. Another AFFPA publication "Teaching about Sex" will be launched in October 1983. Johnson and Johnson funded a survey through AFFPA, assessing attitudes, practice and habits of young women with regard to menstruation.

The National Medical Task Force, under the Chairmanship of Dr. Gabor Kovacs, produced the following reviews:-

1. Why do inadvertent pregnancies occur in oral contraceptive users? Ian Fraser and Robert Jansen.
2. A comprehensive review of the long-term sequel of vasectomy. Maureen Frances and Gabor Kovacs.

Both have been accepted for publication by the journal "Contraception".

A Nursing Task Force was appointed during the year to assess state training programs and make recommendations about standard training with national accreditation. Such a program was considered essential before any approaches could be made to the Federal Government for a medical benefits item number for a nurse consultation.

The Task Force established guidelines and made recommendations about these matters, which were discussed by State Associations, and followed by a joint meeting of state nursing advisors and Task Force members. It is anticipated that national accreditation will be introduced in the 1983/84 financial year.

The Council and Executive Officers agreed that there should be a National Family Planning Day in November 1983, and that an annual national "event" would enhance the image of a national organisation. Working with aboriginal and migrant people was considered the most pressing need for the Associations in the future, and that AFFPA should have a co-ordinating role in the projects.

AFFPA has continued and expanded its role in assisting FPAs in the South Pacific Islands and Papua New Guinea and is now a listed non-government organisation with the Australian Development Assistance Bureau.

The Federal Secretariat has been staffed by three people during 1982/83, and their performance and efficiency has been astonishing. They have helped to assist and advise all State Associations, and achieved excellent publicity nationally, organised and run all national and international meetings and task forces, and the Executive Officer has spent a significant amount of time lobbying Federal Parliamentarians. They must be congratulated for a very successful year.

INTERNATIONAL PLANNED PARENTHOOD FEDERATION (IPPF)

Janet Browning
AFFPA representative to IPPF Regional Council

The Australian Federation of Family Planning Associations accepted certain responsibilities from IPPF in 1982, in giving technical assistance to Papua New Guinea and some South Pacific Island Family Planning Associations. Mrs. M. Milburn (FPA/Queensland) has made visits to Papua New Guinea to assist with budget submissions and general administration, and Sr. K.Dunn (FPA/Victoria) has played a similar role in the Solomon Islands.

In January 1983, a consultative meeting was held in Sydney between IPPF/AFFPA/FPA-NZ to make an assessment of the financial and human resources required and the implications for AFFPA and the FPA-NZ of an increasing role in the South Pacific. This was followed by a workshop in June 1983, with participants from the FPAs of Papua New Guinea, Solomon Islands and Tonga, the delegates from Australia and New Zealand who were assisting these countries, and a member of the IPPF Field Office in Kuala Lumpur.

The Associated Country Women of the World, with the backing of the Australian Development Assistance Bureau (ADAB), have been involved with programs for women in a number of the South Pacific Islands, and in March 1983, AFFPA was invited to send a delegate to participate in this project. Sr. C. Knight (FPA-NSW) was chosen by AFFPA to work in the islands for six weeks. Following this work, a joint submission with the Red Cross was made to the Australian Development Assistance Bureau for the funding of a women's development project in Fiji. This AFFPA/Red Cross submission has been accepted, and the project will commence later in 1983.

At the Regional Council meeting in Kuala Lumpur in June, the former Regional Medical Committee and the Regional Communication Committee were abolished, and a small Regional Program Committee was established. There is provision for five members, but only three of the applicants were appointed (Korea, Thailand and Australia), with the Chairman of the Regional Council and the Regional Director, they have the power to co-opt two people if specific expertise is required.

China has been granted membership of IPPF and it is considered likely that they will request to be included in the East and South East Asia and Oceania Region.

A recommendation was made to Central Council from the Regional Council, that the Members' Assembly, which meets every three years, should, in future, meet only every five years, because of the costs involved. Council members agreed that all possible resources should go to the Associations for the delivery of family planning services.

