

IPPF-PROJECT (EUROPE REGION) 1981  
 Report on Family Planning in Spain  
 Produced by: Federico de Goyarts y Lam.

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This report comprises a number of sections, as follows:

I. Conclusions and recommendations.

An attempt is made to put forward a series of alternatives, based on the information received from this study, with reference both to the general impressions obtained, and the general contacts established over the course of the three trips.

II. The actual report. This covers the general situation, and shows the diversity of centres with respect to origin, context and structure (e.g. centres run by the Ministry as opposed to those run by the local authority). This is followed by the global data obtained. The report is concluded with an outline of the regional FPAs and other organisations covering family planning, indicating their current positions. A list of contraceptives is appended.

III. The list of centres, broken down by region, is given by way of a supplement. There is a brief introduction to each region, with considerations as to its state of autonomy or pre-autonomy, and a report on contacts established.

IV. Report on expenses incurred during the 6 weeks' work, together with the approved budget.

V. Specimen documents giving clinical background or information on specific centres. Two packets of contraceptives are also submitted: one packet contain sheaths obtained in "sex shops", and the other contains spermicidal creams. Also given are sheath makes available from FP centres and chemists.

Granada, 30th December 1981.

Federico de Goyarts y Lam.

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### CONCLUSIONS AND RECOMMENDATIONS

The current political situation offers only scant guarantees as to the continued existence of FP centres and activities relating to the provision of information and education in the fields of contraception, human sexuality etc. The centres in operation cover only a small portion of existing demand, and to a large extent neglect the need for assistance and information in the lower classes, due to the lack of resources and staff.

I frequently observed the following :

Lack of technical advice and training/further education for para-medical staff, "AS" and psychologists, particularly when acting as sexologists.  
 Sense of isolation in many centres outside the major cities.  
 Scarcity of funds and lack of institutional support virtually throughout.

The very fact of a visit being made to the centres with a view to producing a report on FP was extremely well received at all centres. The visits revealed the need for a national or interregional structure. Except in one case, there was no participation in this project.\* Virtually all persons interviewed agreed that a structure such as this would have to start from the FP centres themselves.

The impression is that a project of this kind would be welcome in all fields, even though it was not clear how it could be implemented.

#### Recommendations

The IPPF should favour or promote one of the alternatives listed below, based on the information collected over the visits and prior thoughts.

- I. Foundation of a Spanish FP association, not for individual members, but for the societies, organisations and institutions mentioned on pages 7 and 8, together with representatives of health councils and councillors from the major town/city councils.

The advantage of an organisation such as this would be the ease with which it could be founded, not requiring a high level of funding. The disadvantage would be its little operational effect in relation to requirements.

Legal advice would be required from the IPPF, together with finance for arrangements and meetings prior to the foundation of the Association. --

- II. Establishment of an organisation to act as a bridge between the present time and the final results of the 1983 elections, maintaining relations with the centres visited, collecting further data, and acting as a technical advisory office. A team of voluntary workers would be set up in a number of locations in Spain (Madrid, Barcelona, Bilbao, Valencia and Granada/Seville) with a small, permanent office staff, comprising a secretary and coordinator. This organisation, acting as a coordinating office, would prepare a basis for interregional liaison according to the general outline specified in Alternative III. The advantages are

\* Translator's Note : Sic.

## II.

clear, as the cost of a small office is not high, and the time gained would enable in-depth preparation with agreements with the various interested parties reached on a proper basis. This alternative does not exclude a series of activities in the field of advice, study work and training/extension.

The disadvantage lies in the fact that after the 1983 elections, creation of an FP structure would lack the interest it currently has.

On the part of IPPF, it would require financing a small office, giving a certain degree of representational authority to the coordinator, and establishing continued relations with him, and through him, with the teams.

III. Foundation of an interregional coordinating base for FP, starting from the existing FP centres, and comprising in addition a Governing Council of Experts and Specialists to act as an advisory and counselling body, with maximum representational authority.

This would have to be set up during the first quarter of 1982. Prof. Dr. Vicente Salvatierra would be in favour of this alternative. The requisite steps would be as follows :

1. Meeting between Prof. Dr. Vicente Salvatierra and the persons mentioned in the memorandum attached, to define the project. An IPPF advisor would be required to provide information at the meeting, and an additional advisor from the WHO would also be required.
2. Assuming agreement, contact would then be made with the representatives of the FP centres (shown as contact under the heading "List of FP centres by region"), requesting them to give a declaration of intent on the project, and announcing a forthcoming FP congress on matters of current interest.
3. The congress would be arranged for May/June, coinciding with existing plans in Madrid (council). The congress would provide the opportunity of setting up the above coordinating organisation, and the Governing Council.
4. The permanent office would then be set up: this would be in more or less the same form as the bridging organisation mentioned in the previous section, although it would also be involved in the daily running of the new structure.

Clearly, a coordinating organisation such as this would function in liaison with the Authorities (this, in the opinion of Prof. Salvatierra being an essential prerequisite): it would also ensure maximum operability.

By way of a disadvantage, mention might be made of the relative speed with which the various phases of the project have to be implemented, and the higher funding requirement than for projects I and II. On the other hand, the current interest in the project would be the best guarantee of rapid implementation.

This alternative would require a higher financial contribution from the IPPF, but this would be offset by earlier financial autonomy of the coordinating body.

Granada, 31st December 1981.

Author : Federico de Goyarts y Lam.

III. Appendix 1  
Conclusions & Recommendations

Discussion with Vicente Salvatierra Mateu on the proposed interregional family planning coordination organisation.

Duration of discussion : approximately one hour.

Extremely cordial welcome from the Professor.  
Now showing interest in the project.

I put forward the ideas which I had gradually formed over the period of the visits carried out for the 1981 IPPF report.

Coordinating body representing FP centres, approximate no. of delegates: 45/50.  
Governing Board to be made up of respected individuals from the highest levels of their professions.

Don Vicente could not see how the two criteria could be reconciled from the outset, but proposed an informal meeting between the persons he considered to be of decisive importance for a project of this magnitude.

Don Vicente suggested the following :

President of the Spanish Society of Gynaecologists	Prof. Uzandizaga
President of the Spanish Infertility Society	Dr. Pous
President of the Andalusian Family Planning Assn.	Prof. Bedoya
President of the Family Planning Section of the Academy of Medical Sciences	Prof. Glez Merlo
Representative from the Private Medicine sector	Dr. J. Ma Dexeus
President of the Spanish Society of Urologists	
Professor of Gynaecology, Madrid	Prof. Botella
Professor of Sociology	Prof. Morillo Ferrol
Representative from the Andrology Society	
A respected theologian (to be discussed)	[Prof. Benjamin Forcano*]
Representatives of the autonomous communities of	
Andalusia	
The Basque Country	Prof. Glez Piedrola
Cataluya	
Galicia.	

D. Vincente insisted that the Government authorities should be invited to participate.

Further action : See Dr. Victorino de Vincente  
Also approach the new Minister, Mr. Nuñez (Health).

Don Vicente suggested the following agenda :

1. Discussion on the desirability of setting up a central FP structure at the present time.
2. Desirability of becoming affiliated to IPPF Europe.
3. Relations with existing FP institutions.

21.XII.1981  
Federico Goyarts.

\* Translator's Note . Manuscript addition.

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## Introduction

This report has been produced in a relatively short space of time, viz. five weeks' travel over the whole of Spain (excluding the Canary Islands and the Balearics), followed by a period of ten days for data processing and report writing. Hence the figures contained in the report should be regarded as approximate only.

On the other hand, there would be little point in carrying out an exhaustive study at the present time, as the number of centres is still increasing (30 to 35 centres planned for 1982). In addition, the relatively short period of time for which the majority of the centres have been in existence, varying between a matter of months and two years, would permit only partial studies of certain centres or groups of centres. At the moment, it is difficult even to obtain exact figures on barrier contraceptive used and the increase in their use.

When reading this report, it should be borne in mind that when we refer to centres, these can be varying widely as regards :

- a) background and origin
- b) criteria by which governed from the outset
- c) degree of motivation of staff at the centre.

## I. Background and origin of the Family Planning centres

I.1 There are currently some 27 centres run or formerly run by the ex Ministry of Labour, Social Security and Health, hence for the past month by the Ministry of Health.

Initially, there were 21 centres established by the Ministry at the end of 1978, when contraceptives were legalised (November 1978). These were opened at the Provincial Centres, generally at the maternity clinics attended by women with no access to the national health (social security) services. Some maternity doctors were prepared to share the clinics with a gynaecologist, others would barely provide any family planning consultation, or refused to fit IUDs. In this framework, the state maternity doctor attended for a few hours a day, also having to attend at other locations. The new clinic required him to devote more time to such attendance.

Months went by, in fact the whole of 1979 went by, and none of the maternity doctors or para-medical personnel (generally midwives) received any payment. Many centres simply went out of existence. Only at the beginning of 1980 did the Ministry make payment for the work performed on the basis of numbers of women seen (clinical records kept), and at the same time ruled that the position of maternity doctor was incompatible with the position of FP gynaecologist. From the first quarter of 1980, FP centres were opened or revived, this time with staff on a year's contract, the contract in most cases having been renewed at the end of the year. In 4 centres, the maternity doctors supervise and even participate in the clinics. These are, in fact, the four most successful centres, run by motivated doctors (Valladolid, La Coruña, Granada, Guadalajara and probably also Tenerife, although we have no precise figures).

At the beginning of 1981, the centres received budgets with which to set up their own clinic facilities, formerly shared with the State

maternity doctor.

In general, the "family guidance" centre comprises a gynaecologist, an ATS, an AS (nurse/health visitor), and an administrative officer, and is located in the vicinity of a mental health clinic: they do not, however, work together in all cases. The FP clinics in the Health Centres now generally tend to be run in the mornings.

In the meantime, the first transfers to the autonomous communities began to occur at the beginning of the year, including the family guidance (= FP) centres run by the Ministry of Health. The transfers implemented were as follows :

- 4 centres transferred to the Galician "Xunta" [Regional Council]
- 3 centres transferred to the Basque government.
- 1 centre transferred to the Catalanian "Generalitat", although not operational (see correspondence)
- 4 centres transferred to the Andalusian "Junta" [Regional Council].
- 1 centre transferred to the Regional Council of Murcia.
- 1 centre transferred to the Regional "Junta" of Extremadura.
- 3 centres transferred to the "Consell" of Valenciã.

Hence a total of 17 centres were transferred. These now come under the regional authorities, with the various changes that this implies.

I had an interview with the current Director General of the above centres, Doctor Victorino de Vicente, of the Health Promotion Department of the Ministry of Health. He stated that he was against the IPPF, following a congress which he had attended in Nairobi, and he advised me that he was now obtaining satisfactory assistance from the WHO European Region. Nevertheless, the meeting was cordial, and Dr. de Vicente, when advised of the intention to produce this report, stated that he was prepared to discuss the matter. At the end of the interview, when I requested information on the centres, he advised me that he could not provide me with any information, a ban on the provision of information having been imposed by the Secretary of State, Dr. Sanchez Harengindey.

I also had discussions in due course with the Directors General responsible for health promotion within various of the regional governments or councils, viz. the Basque government, the Andalusian Council, the Regional Council of Murcia and the Consell [Regional Council] of Valenciã. With the exception of the Director of the Consell of Valenciã, all were in favour of the IPPF report, and would be prepared to participate in the establishment of an interregional FP structure in Spain.

From comments made by people of repute in the field of FP, the reservations on the part of the government authorities with respect to IPPF would appear to be related to its position on abortion, this, as is well known, being a subject of conflict: its political implications are clear.

## 1.2 Municipal family planning centres

In 1980, the first municipal family planning centres were opened, following the local government elections. These centres appeared primarily in areas with a socialist majority (PSOE). In many cases, these centres were originally set up by groups of women, in some cases feminists, and some centres are in fact run by them (a total of 4).

In most cases, the centres are called FP centres. In certain areas, they are of a different form, and have a different name :

1. The centres run by the city council of Madrid (11 in operation, 7 projected for 1982) are termed "Centros de Promoción de la Salud" [Health Promotion Centres]. Within these centres, FP is coordinated with other departments, particularly mental health (psychiatrists and psychologists).
2. "Centros de P.F. y Orientación Sexual" [FP and Sex Guidance Centres]. These centres pay particular attention to adult sex education and the provision of guidance by sexologists dealing with sexual problems.  
E.g. Baracaldo (Bilbao) and Cornellá (Barna), both centres being located in industrial suburbs.
3. "Centros Asesor de la Mujer" [Womens' Advisory Centres], with the emphasis on multidisciplinary advice for women.  
E.g. centres in Andalusia and Murcia, and at Fuenlabrada (Madrid). A relevant PSOE publication is available.
4. Finally, a pilot centre, still at project implementation stage (at the Provincial Hospital in Valencia), named the "Centro para la P.F. y las enfermedades de transmisión sexual" [FP and Sexually Transmitted Diseases Centre]!

The centres in Madrid and Barcelona were taken as the reference and guideline for other local authorities with similar projects. Certain of the municipal centres have also now taken on a teaching function (for family doctors and para-medical staff).

We calculate that some 60 municipal centres are in operation at the present time, a further 30 being scheduled to open in 1982.

In general, the centres have 1 or 2 gynaecologists, 1 or 2 "ATS" or midwives or auxiliaries, one AS, one administrative assistant, and a number of psychologists (including one who acts as a sexologist).

Postgraduate training in sexology is available at a private college, INCISEX - Efigenio Amezua - Madrid, and at a department of the Barna Teaching Hospital under Dr. Eudald Maideu.

The capacity of the centres varies between 10 and 20 women per day (few couples attend): this does not include check-ups, which increase in numbers the longer the centre has been in operation.

Once or twice a week, there is generally a talk on contraceptives and anatomy for small groups (10 to 20). Couples are also invited, and the talks frequently give rise to discussions between those attending, and the lecturer.

Only a limited number of centres have any activities outside the centre such as talks, courses, slide shows etc., and these are always started by motivated individuals, with the exception of one centre with an ad hoc structure, viz. the municipal FP centre at Mostoles (Madrid).

It should be mentioned that there is a certain link between these centres, via the Sectorial Policy Office of the PSOE, whose senior member is Ciriaco de Vincente, assisted by Carmen Mestre in her capacity as FP and "Women and Socialism" area coordinator. I had

lengthy discussions with both on different occasions, and received unconditional support for this report and for the idea of an interregional coordination base for FP centres. They provided me with addresses and introductions to local mayors, councillors, delegates and politicians, which greatly assisted me in my work.

### 1.3 FP centres within hospitals

Essentially gynaecology clinics in university hospitals (teaching hospitals) having introduced contraception in 1976/1977: initially for women having given birth to 3/4 children in these hospital centres, subsequently for hospital staff, and later still for women from outside, including those with no social security card, and the unmarried.

At the same time, other clinics are being developed to cover areas such as the early detection of cancer in women, sterility, endocrinology and motherhood education. Over the past few years, psychosomatic and sexology services have been added (e.g. in the Teaching Hospitals of Granada, Barcelona and Seville: Gynaecology Department). All of these services and clinics are interrelated and mutually supportive.

These arrangements are also being reflected in national health (S.S.) hospitals and certain of the provincial hospitals (probably as a result of transfer to the regional governments).

These clinics are gradually becoming known as FP and sterility clinics. They are highly specialised centres and have for some years been publishing numerous studies on contraception, sterility, early cancer detection and mothercraft.

At the present time we have some 20 hospitals of which 10 are university or teaching hospitals.

Clearly, a distinction must be made between what we would regard as a minimum expression of the FP function in a hospital centre, and a maximum expression.

A maximum function as defined above is found only in the following hospitals :

Barcelona Teaching Hospital, Gynaecology Department  
 Seville Teaching Hospital, Gynaecology Department  
 Granada Teaching Hospital, Gynaecology Department  
 Nation Health Maternity Unit, Granada, College of Nursing  
 National Health Maternity Unit, Bilbao ("las Cruces"),  
 outpatient clinics.

One expression of the FP function in a hospital centre is that in which the head of department or professor merely accepts contraception without taking any specific measures to promote it, the development of the function then being dependent on a group of motivated gynaecologists. In such instances clinics are not even termed FP clinics, and contraception is included within the framework of sterility or mothercraft clinics, in some cases even in early cancer detection. This applies to the following:

National Health Maternity Unit in Badajoz: Early cancer detection  
 and mothercraft clinics  
 National Health Maternity Unit in Valencia : mothercraft department.



Ditto in Alicante.

General Hospital at Santiago de Compostela: Outpatient gynaecology clinic.

Various National Health hospitals (maternity) in Madrid and Barcelona.

From a technical viewpoint, the medical care is excellent, even sophisticated, with respect to the high level of unsatisfied demand.

Professors of gynaecology and obstetrics having shown considerable interest in FP from the outset are :

Prof. Dr. Jesús Gonzalez Merlo, Professor of Gynaecology and Obstetrics  
 Prof. Dr. José Ma Bedoya, Professor of Gynaecology and Obstetrics  
 Prof. Dr. Vincente Salvatierra, Professor of Gynaecology and Obstetrics  
 Prof. Dr. Javier Iglesias Guiu, Professor of Gynaecology and Obstetrics

The following have more recently joined this initial group :

Prof. Dr. J.A. Uzandizaga, Chairman of the Spanish Society of Gynaecologists  
 Professors Bonilla (Valencia), Navarro (Valladolid) and Abad (Murcia).  
 Heads of Departments of Gynaecology and Obstetrics, Dr. Herruzo (Granada), Dr. FO Javier Rodriguez Escudero (the "Cruces", Bilbao), Dr. Zaragoza (Valencia, Provincial Hospital).

I had interviews with the majority of the above. Not only were the interviews cordial, they also revealed a considerable interest in the proposed interregional structure to coordinate FP throughout the country. On the other hand, however, no-one, apart from Prof. Dr. Vincente Salvatierra of Granada, could see how it could be done.

In a certain number of hospitals, the urology department collaborates on FP with respect to male sterilisation and sterility.

#### 1.4 Private FP centres (approximately 20 centres).

These centres are those of the FP pioneers in the full sense of the word (particularly the IMS and Pablo Iglesias in Madrid).

In this sector, a distinction is to be made between those centres which are built around eminent gynaecologists such as Dr. José Ma Dexeus (Inst. Dexeus, Barna), Dr. Ramón Casanyelas (Clinica Corachán, Barna), Dr. J.A. Hernández (Private gynaecology and sexology clinic in Madrid) .. and centres formerly maintained by political parties or feminist groups, now generally independent and in co-operative form. This applies primarily to 4 feminist centres, two founded under the instigation of the PCE (Dr. Angel Sopena), and three under the aegis of the PSOE.

These centres offer good counselling to women wishing to have abortions (in London and Amsterdam). The cost of the counselling is extremely reasonable, and considerable attention is paid to the human care aspect (500 to 700 ptas., with cytological screening, IUDs etc. supplied separately at cost).

The cost of consultations at the centres listed further above is extremely high, but the medical care given is extremely good.

Other systems

Other systems include a large group of centres providing information on FP and other women's subjects, located in the suburbs of the major cities. In many cases these centres were set up on the initiative of a group of women, in general evolving within the context of a local community association (culture or womens' meetings).

There are then the so-called "Centros Asesor de la Mujer" (Womens' Advisory Centres), founded first in Andalusia by a socialist representative, and then in other regions. These are generally run by autonomous communities, although sometimes also by local authorities. These centres deal not only with citizens' information and training, but also counselling in the various areas covered by present day womens' problems. It is interesting to note that a PSOE study ("Women and Socialism") has been produced on these centres.

To summarise, therefore, we have approximately:

60 Municipal centres, with around 20/25 projected for 1982  
 27 Ministry of Health centres, with 2 projected centres, and  
     17 transferred  
 20 Hospital centres  
 24 Private centres (including 4 feminist centres)  
     2/5 Women's Advisory Centres, with 3 projected  
 133/135 FP centres, with 30/35 scheduled to open in 1982.

II. Initial governing criteria

Clearly the criteria on which the Ministry centres are based are in no way the same as those of the municipal centres. They differ from the outset inasmuch as the Ministry was forced to comply with a parliamentary agreement, in which it essentially had no interest. In the local authorities, on the other hand, there were groups of individuals, primarily women, demanding that FP centres be set up, and forming certain governing criteria with respect to these centres. Government circles are not interested in family planning, not being a matter of interest to the electorate of the centre and right of centre, and are even less interested in the possible links they might have with the thorny problem of abortion. The influence of the official church is also an important factor in this situation.

With the above limitations, it is easy to understand that there are few guarantees of this type of centre functioning well, in spite of being run by highly motivated professionals.

The municipal centres frequently have two spheres of influence in which the plans and parameters for the proposed centres are defined. One sphere is the group of individuals having initiated the project, with a concrete demand and precise requirements as to medical care, which is highly dehumanised and on a production-line basis in the public services. The other sphere is the Sectorial Policy or Social Action office of the PSOE, its policy being in the process of definition in the area of FP as a whole, but without any clear position on the question of abortion. The socialist compromise brings with it a series of consequences which, in the long term, it will not be possible to elude.

FP in the hospital context provides good medical care but tends (with certain exceptions) to reduce FP to contraception, and nothing more. In future, these centres could act as specialist centres or clinics

supplementing the work of the primary centres.

Certain hospitals are still reticent with respect to the IUD.

For the moment, we are unaware of the number of female sterilizations carried out in hospitals: we believe, however, that it must be several thousand per year. The official standard is based on medical indications or the age of 35 years for a woman with 5 children. In practice, the standards are less rigid. The technique most frequently employed is that of laparoscopy and Pomeroy clips.

The private centres follow a more liberal policy with respect to sterilization, but nevertheless agree on the general outlines, following the guidance given by the gynaecology professors listed above.

The cooperative centres and feminist centres are those which declare themselves pro-abortion, supporting, at least, the legalisation of abortion. They also consider that to offer only medical assistance in the field of contraception is to provide a poor service to the woman, and to the couple: they consider sex education and sex guidance in consultations to be fundamental. Curiously enough, it is precisely in these centres that barrier contraceptives are promoted most, these being greatly ignored in the majority of the centres visited. Mention might perhaps be made of one particular exception, in spermicidal suppositories (Pharmatex) introduced onto the market through the gynaecology departments in a less than elegant manner, as the miracle solution to all problems!!

### III. Degree of motivation of staff at centres

During the course of my travels over the past few months, I found that whenever I came across a motivated and frank individual, their centres were not only run better, but also more quickly accepted. Possibly in itself this is not highly significant, but within the context of this particular country, it indicates that we are still in a period of adaptation, and the possibility of our turning back on ourselves is as great as that of our progressing.

For the moment, the centres are lacking in continued institutional support, and similarly lack a minimal level of co-ordination. Reference points are taken at random; the criteria for admission and competition for posts are frequently arbitrary.

The fact of our having to depend on motivated individuals of good will, whom we have to thank for what we do have, is a serious matter both for the individuals involved and for the future of FP in Spain.

As a result, no doubt, of this situation, many professionals, and particularly the non-medical or para-medical staff outside major cities, complain of their isolation both at interprofessional and global level from one centre to another, and with their respective councils, boards or managements.

### FP or FP-related associations and societies

Mention might usefully be made here of endeavours made within the field of FP associations.

In 1977, Dr. José Manuel Roncales, together with a number of other doctors, set up the governing committee of the Spanish FP Federation in Zaragoza. This date coincided with a recently acquired freedom, viz. the freedom to

meet and to set up associations. In 1978, a further meeting was held, and a uniform wording established for the byelaws of the regional associations (Madrid, Barcelona, Valencia, Murcia, Andalusia, the Basque Country; Dr. Roncalés did not then reappear on this committee, being in the process, with other doctors, of making preparations for the running of the Ministry centres). In 1979, virtually all associations had their byelaws legalised, although only with considerable efforts on their part.

In 1980, and with the assistance of the IPPF, Europe region, the committee met on a number of occasions and tabled the byelaws of the Spanish Federation of Regional FP Associations. With the passage of time, however, the initial enthusiasm in setting up associations had gradually disappeared, and only a few groups of highly motivated individuals remained, as in the case of the FP Associations of the Basque Country and Andalusia. The other Associations are non-existent. Dr. Asunción Villatoro, under whose instigation the '77 and '78 beginnings augured well, particularly with a view to the relations established with the IPPF, finally withdrew from the Catalanian FP Association, and from the Governing Board.

All that now remains from these efforts is contact and collaboration between the following individuals: Begoña Arrieta, secretary of the Basque FP Association, Federico Goyarts, General Secretary of the Andalusian FP Association, Dr. Juan Trujillo, FP Centre, Granada, Dr. Amadeo Enriquez, FP Area Coordinator for the local authority centres run by the Council in Madrid, Remei Margarit of the local authority centre in Barcelona in the Plaza de España.

With respect to societies maintaining some level of relations with FP, mention should be made of the following :

Spanish Society of Gynaecologists, current President Dr. J.A. Uzandizaga  
 Spanish Infertility Society, current President, Dr. L. Pous Invern  
 Spanish Obstetric Psychoprophylaxis Society: one of the current  
 Vice-Presidents is Dr. Amadeo Enriquez  
 Spanish Society of Andrologists, currently in the process of foundation.

In addition, the Academy of Medical Sciences in Catalonia is setting up an FP section. The governing body includes all of the above-mentioned individuals plus the gynaecologists who have for some time been working in the field of FP, such as Dr. Eugeni Castell, Dr. Joan Carreras, Dr. Iglesias Cortit, Dr. Lenti Paoli etc.

In a similar manner, although with greater success than the FP associations, regional associations of sexologists were founded, and recently the Spanish Federation of associations of sexologists was created. The legislation was passed without difficulty. The majority of the members of the FP associations also became members of the sexologist associations. Attempts were made by myself and others mentioned above to merge the two associations, but to date this has not been effected.

Other organisations involved in the subject of FP are the midwives and ATS' colleges, particularly with respect to the training of para-medical personnel and the criteria for admission to the relevant positions.

The College of Psychologists is interested in the subject of FP for similar reasons.

The use of contraceptives in Spain

Given the lack of time and resources available, I was unable to collect data on the number of IUD's fitted, contraceptive pills prescribed etc.: in addition, the majority of the centres had no precise data available. We have therefore to be content with global and approximate (estimated) figures.

There is, however, one exception. This relates to the data provided by the Gynaecology Department of the Clinic Hospital in Granada, headed by Prof. Dr. Vincente Salvatierra. The head of the FP department, Dr. Miguel Dolz, explained that existing studies in the field of contraception are in all cases partial, and for the moment none are based on the overall situation of any one FP centre or group of centres.

The FP centre at the Clinic Hospital has been in operation since 1977, but global data has been collected only since 1979. This department is currently working in conjunction with the department of early detection of cancer in females and with the psychosomatics/sexology department.

As will be seen from the figures, a specification has been prepared with respect to functional gynaecology and the use of contraceptives :

	1979	1980	1981
No. of women	5884	6764	7331
Family planning	4020	4855	5402
Sterility	765	730	741
Endocrinology	678	701	795
Post abortion	421	488	404
Pill, 1st visit	485	485	494
check-up	795	956	1070
IUD, 1st visit	486	426	506
check-up	948	1542	1868
Guidance	188	249	193
Spermicides	81	125	153
Sheaths	16	6	15
Ogyno Knaus	9	4	20
Tubal ligation	-	32	38
Under investigation	803	1135	1185

In addition to the head, the department also has two assistant and resident doctors, three clinic auxiliaries, and two administrative officers.

As will be seen from the above figures, the numbers of IUDs fitted and pills prescribed are similar. This data is largely line with that provide by other hospital, private and local authority centres. In the Ministry FP centres, on the other hand, and in the cooperative centres, the number of IUDs fitted was much lower.

In the hospital centres, the most common ages were 22/28 and 34/40, whilst in the other centres, the age emphasis was 16/26, with the exception of the Ministry centres (where there is a considerable variation from one centre to another).

The proportion of IUDs and pills in comparison with barrier methods is significant for the hospital centres and certain Ministry and local authority centres. Certain centres considered these methods to be inadvisable due to their lower effectiveness. Diaphragms are simply not included (a waste of time, according to comments).

Demographic data

The demographic data that follows was provided by Dr. Fernando Fernandez Gutierrez of the Department of Geography of the University of Granada.

On 1st May 1981, the population of Spain totalled 37,682,355. This represents an increase of 10.7% in relation to the last census carried out, in 1970. The death rate has shown a slight decrease in spite of the general increase in the age of the population: the birth rate has fallen drastically over recent years.

The number of children per woman has fallen from 2.79% in 1970 to 2.16% in 1980.

The total number of women of childbearing age (15-44) is estimated to be 7,867,000, and the total number of married women, 4,594,000. Only 3% of married women are in the 15-19 age group. It is estimated that 51% of married women (aged 14 to 44) use contraceptives. 31% are thought to use the traditional methods (i.e. the rythm method, abstinence, douching), with 18% using current methods such as the condom, the pill, the IUD, spermicides, the cap. 3% have resorted to tubal ligation.

Global data relating to birth control methods and makes

According to data provided by Dr. Jacinto Custodio, Marketing Director of ORFI-WYETH Española, the distribution figures are as follows :

1979, approximately 10,000,000 pills  
1980, approximately 8,000,000 pills  
1981, around the same quantity.

With respect to IUDs, the figures for fitting are estimated to be

1979, approximately 20,000  
1980, approximately 100,000  
1981, approximately 150,000.

These sources of information assume some 5,000,000 women using some method of contraception, either themselves or through their partner.

J. Custodio considered the most commonly used method of contraception to be coitus interruptus, followed by the condom.

We, for our part, from adding together the data received from the FP centres, estimate that there must be some 275,000 to 300,000 sets of clinical records opened within this area. This would mean that 5 to 6% of the 5,000,000 women (see demographic data) have had access to a family planning service, the average length of existence of the centres still not-- having reached 1.5 years.

A high proportion of these women belong to the middle and lower upper classes. Only a small proportion of women come from the lower class.

From a number of surveys carried out, it would appear that many women take contraceptive pills on their own account: some attend their general practitioner. There are, in every town, chemists who will issue pills without a prescription. According to Dr. Santiago Dexeus, there must be some 300,000 women with contra-indications who are taking the pill (cf. Progr. RTVE Channel I, 2 XI 81, "Mano a Mano", 23.45: debate on FP, Santiago Dexeus and Javier Gafo).

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At the present time, there is a marked tendency towards the micro-dose types (Microgynon, Ovoplex 30/150, Ovovesta).

Pills are marketed by the following companies :

Schering supply 55% (Neogynona, Microgynon etc.)  
Orfi-Wyeth supply 45% (Ovoplex, Ovoplex 30/150 etc.)  
Organón, Searle and Sintex supply 10%.

The following makes of IUDs are distributed in Spain:

Nova T (Kabi and Schering)  
Copper T (Kabi)  
Multiload, 3 sizes (Organon)  
Gravigard 7 (Searle).

It would appear that the use of contraceptive pills has stabilised: the IUD, on the other hand, is still on the increase.

As regards the use of the condom, no data is available. It would appear that no-one requested by me to make investigations in this area was able to obtain information or even to locate the LRC office. However, semi-clandestine and uncontrolled distribution continues. Information on condom packets is not even printed in Spanish.

At the present time there are only very few makes registered with the health authorities, distributed exclusively by chemists:

Pharmelac (with spermicide)  
Profil (RFSU)  
Supratex.

The makes most frequently found on the market are:

Above all: Durex Gossamer, Fetherlite and recently Extra-Safe.  
Prime, Stimula and Samoa (Arnell)  
R-3 Plus (Rimbacher Gummiwerke)  
Corisan (ditto)  
Tahiti  
Dandy  
Big 7 (Hatu, retardant effect)  
Tronikiki

These makes are primarily purchased from kiosks.

Other less commonly found makes, sold in sex shops, are :

Lord's Leal  
Androtex  
Safari  
Watson  
Coronet Gold  
Super Reina K 12  
Sayuki Extra Fine.

Diaphragms, with the exception of the those distributed by the IPPF, and subsequently by AAPF/COANPRO until stocks ran out (Durex Interplan), were not available until relatively recently. Now, however, there are various companies distributing them, though demand is low and even on the decline:

Pharmatex (Lab. Lanzas)  
Kabi (Ortho)  
NVSH (through AAPF).

With respect to spermicidal products, apart from those supplied by IPPF Despatch Centre (Duracreme), the following makes are now known:

Pharmatex : minisuppositories and spermicidal cream.

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Lacer : Avolen, in suppository and cream form.  
 Inst. Llorente Madrid: Yadalán, vaginal tablets and creams.  
 Holland Rantos Cie. USA, spermicidal creams.  
 Dr. Raul Hermitte : Vivisant Gel.  
 NVSH Holland : Contracep groen y rood (cream) and effervescent vaginal tablets.

Use of the diaphragm appears to be restricted to "thinking" couples, but it is not impossible that there might be an increased demand within the next few years: the same may be expected with respect to the condom.

The Pharmatex mini-suppository distributed by Lab. Lanzas has been the subject of studies by 5 departments of gynaecology. Initially it was introduced as a contraceptive in its own right, but it would appear that it is now used in combination with the IUD.

According to information from Dr. Miguel Dolz of the FP department of the Clinic Hospital of Granada, the product is effective: of a total of 300 women (from 1979 onwards) there have been 3 failures, 2 of whom were discounted on grounds of inadequate use, with one for whom there was no explanation.

As regards female sterilisation, no figures are available. Tubal ligation may be considered the most popular, in accordance with current legislation. In general, it is carried out for medical reasons or where a woman is 35 or over and has a minimum of 5 children. In national health hospitals, sterilisation is carried out with a greater or lesser degree of freedom depending on the opinion of the Professor or head of department. At the "La Macarena" national health hospital, Prof. Bedoya refers to some 500, whilst at the Granada Teaching Hospital, the total is around one hundred. On 1st October (Madrid national health hospital), as also in a hospital in Barcelona, the figure was said to be 500. At all centres visited, I found that many ligations were carried out on a private basis: the cost varied between 40,000 and 75,000 pesetas (laparoscopy).

Male sterilization is only just being introduced, and reaction is strong from both men and women. In Madrid, a number of centres indicated that vasectomies were being carried out on a small scale.

Sexually transmitted diseases are not really handled, and even less efficiently combatted, outside the municipal and private FP centres.

Abortion, which is illegal in Spain, is still carried out secretly. Centres have been closed, e.g. in Bilbao, Seville and Valencia: given the precarious conditions, they have eventually been persecuted. There are a certain number of doctors prepared to carry out abortions at a price, varying between 50,000 and 100,000 pesetas. At 50,000 pesetas, a woman can go to London or Amsterdam to get an abortion. The number of women obtaining abortions in these locations is now decreasing, since there are many doctors in Portugal who will perform abortions, although frequently under precarious conditions and with serious gynaecological consequences. I transmitted the complaints of many centres to the current President of the Portuguese FP Association. Finally there are two clinics in Tangiers which perform abortions on women from Andalusia.

At the present time, the subject of abortion is being raised in public debate, and frequently the press carries articles for and against. Feminist groups are exerting considerable pressure on members of parliament of the left. It is impossible to foresee at this stage whether or not abortion will be legalised in a few years' time.



As regards sterility, this again is covered within the area of FP. It should be noted that major progress has been made over recent years. As was stated above, the sterility departments work in close conjunction with FP or come within the FP framework. Doctors Portuondo (Bilbao), Cortes Prieto (Madrid), Pous Invern (Barcelona), Vergara (Granada) etc. might be regarded as the outstanding figures in this field.

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By Federico de Goyarts y Lam.

PART TWO

EXAMINATION OF FP CENTRES BY REGION

FP centres by region or province

When considering the FP centres and their specific features, it must be borne in mind that Spain in 1981/1982 is a country in the course of reorganisation into autonomous regions.

This autonomisation process is proceeding full pace, and for the field of FP, it represents a diversification of planning, models and accountabilities from one region to another.

The autonomy situation is currently as follows:

The Basque Country and Catalonia already have their own governments and parliaments. Andalusia and Galicia are due to have theirs in 1982. Valencia, Murcia, Extremadura, Cantabria, Asturias, Rioja, Navarre, Aragón, Castilla León, Castilla La Mancha, the Canary Islands and the Balearics are still at a pre-autonomy stage (with regional "Juntas" [Councils]).

Both in the autonomous and in the pre-autonomous communities (all in 1982), there have been transfers in the health field, this including family planning and sex education. Madrid has not yet defined its autonomy: we therefore have to refer to the City Council on the one hand and the Provincial Congress on the other.

In the regions, congresses will, to simplify matters, be included in the regional governments or juntas (indeed, the Presidents of regional congresses will "de jure" be part of these latter organisations).

..... Provincial boundary  
 \_\_\_\_\_ Major geographical  
 area boundary.  
 AUTONOMOUS AND  
 PRE-AUTONOMOUS REGIONS

Regional map of Spain  
 Levante = Murcia Alto Ebro = Rioja  
 The "Región Cantábrica" is divided into Cantabria and Asturias.

FP in Andalusia

The region of Andalusia comprises 8 provinces, with a population, in 1982, of around 7,000,000. Together with the two Castilles, it is the largest region with the highest population, followed by Catalunya, with approximately 6,000,000 inhabitants and Madrid, capital and province, with approximately 5,500,000 inhabitants. Madrid, Barcelona and the Basque Country (Guipuzcoa, Vizcaya) = 2,700,000 inhabitants, are the regions with the highest population density.

In 1978, the Andalusian Junta set up four Womens' Advisory Centres, these having operated from the outset in close collaboration with the other FP centres in existence (Consejería de Cultura [Cultural Council], D. Rafael Román). In 1980, it received the centres run by the Ministry of Health, viz. Seville, Granada and Málaga. In 1981, the Consejería de Sanidad [Health Council], headed by Prof. Dr. Gonzalez Piedrola, set up further centres in Huelva, Jaén and Almería.

Due, perhaps, to this initiative and to the satisfactory running of the hospital centres (Granada, Seville, Málaga), the local authorities did not, with the exception of Cadiz (November 1981), set up FP centres of their own, even though the majority of the local authorities have a predominance of parties of the left, and the demand for FP and sex education is high.

The above individuals have been informed of this report and of the associated thoughts.

Members of the FP teams in Granada, Seville and Malaga hold FP clinics in the relevant provinces once a week or once a fortnight.

Centres by province

Almería : Only one FP information centre run by the Health Council.  
Contact : Dr. José Antonio de Velasco, Gynaecologist and  
And. FP. Ass. (AAPF) delegate

Dr. Velasco is implementing an FP centre project in the Provincial Hospital, where he is head of section.

Jaén : Information centre, with weekly FP clinic, run by the Health Council.

Contact : Doña Carmen Pozo Luque, ATS, AAPF delegate.

Córdoba : No FP centre, but local authority have plans for one. The Womens' Advisory Centre closed in February 1981 due to lack of funds. This was performing an important FP information and guidance function.

Contact : Dr. Angela Aparici, PSOE councillor.

Huelva : FP centre run by the Health Council, so far having barely operated although has now been given over to Dr. Praexedes Carreto Alba, who is in contact with the FP team in Seville.

Contact : Doña Concepción Cabellero, Municipal Government AS,  
and AAPF delegate.

Cádiz : Local authority FP centre, under the name of the Womens' Advisory Centre, has just been opened. This has an ATS, a psychologist, a secretary/co-ordinator and two gynaecologists who attend in the afternoons/evenings from the national health residence at Jerez de la Frontera.

Contact : Pilar Borrego, Women's Advisory Centre FP coordinator,  
and member of the AAPF.

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Seville : FP in the capital has a central figure in the person of the Professor of Gynaecology, Prof. Dr. José Ma Bedoya. A major FP centre has been operational in his department for 2 years, under Dr. Silvia de los Reyes. Professor Bedoya's team has been setting up a series of centres in Seville and the surrounding areas, on closure of the three incipient local authority FP centres (following the denunciation of a feminist centre - "Los Naranjos" - which was carrying out abortions. The professor personally supervises the centros, viz:

- 3 centres within the city (Rochelambert, Cruz del Campo, Fabié No. 20)
- 3 centres in towns adjacent to the capital (Camas, Dos Hermanas, San Juan de Aznalfache).

In addition to these centres, there is also an FP centre run by the Health Council, under the charge of Dr. Fco Diaz Arcas. The centre has been in operation since 1979.

Finally, there is a Womens' Advisory Centre, primarily devoted to the provision of information and sex education in the province. It also holds a sexology clinic.

**Contacts:** Prof. Bedoya, President of the AAPF  
 Dr. Silvia de los Reyes  
 Dr. Fco. Diaz Arcas, Vice President of the AAPF  
 D. José Antonio Monge Bernal, member of the AAPF.

Málaga : In Málaga, the FP activity centres on Doña Hortensia Gutierrez del Alamo, head of the Womens' Advisory Centre. Under her instigation, an FP centre has been set up on a co-operative basis. This centre operates with two gynaecologists and 10 advisers trained by courses organised in collaboration with AAPF and the PSO Sectorial Policy organisation.

Both gynaecologists carry out tubal ligations at the Provincial Hospital. For abortions, the women are sent to Tangiers (Dr. Mohamed Nesh Nash). Doña Hortensia is a feminist and belongs to the PSOE "Women and Socialism" group.

At the present time, she is making preparations with her team for the operation of a weekly clinic in Marbella, Coín, Velez Málaga and Antequera.

There is an FP centre at the Hospital San Lázaro under Dr. Isidro Arjona, but this is barely operational. There is also another in the Jefatura Provincial de Sanidad [Provincial Health Centre] (the Health Council) which has in the past been run very badly but is now in the hands of a new and young gynaecologist.

Since the National Health Maternity Hospital Centre was opened, an FP service has been run under the instigation of Dr. Fernando Jiménez Torres, together with other young gynaecologists.

**Contacts :** "Dr. Jaime Vera" FPC gynaecologists  
 Hortensia G. del Alamo, AAPF member and provincial delegate.

Granada : At the instigation of Prof. Dr. Vincente Salvatierra, the FP service was started in the Teaching Hospital: the relevant data is given on page 9. In 1979, an FP clinic was started in the national health Maternity Unit at the instigation of the maternity education section (Drs. Cabrera and Parilla). All clinics were subsequently grouped together in the same building (early cancer detection, sterility, endocrinology,

sexology).

Since 1978, the Womens' Advisory Centre has been set up on the one hand, with the Ministry FP Health Centre on the other (subsequently transferred to the Junta (Regional Council) and these have worked in close collaboration. The respective heads of the services are F. Goyarts and Juan Trujillo, gynaecologist. The Womens' Advisory Services closed its doors in February 1981, but the FP and sexology clinic and guidance activities were moved to the AAPF secretariat.

Contacts: Prof. Dr. Vincente Salvatierra, Honorary President of the AAPF.

Dr. Juan Trujillo, Provincial Delegate for Granada, AAPF.

Dr. Fco Parrilla, member of the AAPF, and technical consultant

Federico Goyarts, sexologist and General Secretary of the AAPF.

AAPF's activities in the province consists of information talks on FP and sexuality, sex education classes in schools/colleges; it also holds a weekly FP clinic at Almuñecar, in conjunction with the town council, and the provincial Health Council.

The AAPF also has a small contraceptives distribution outlet (diaphragms, spermicidal creams, cf. transfer from Despatch Centre in Sloane Street), and an FP research and advisory centre.

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FP centres in the Murcia region

The region of Murcia comprises a single province, but covers a large and widely varying area.

The Regional Council has a PSOE majority, and the FP centres are run by the Health Council. The Director General is Doña Concepción Cebrián, a feminist, and a member of the PSOE "Women and Socialism" group.

The Murcia FP centre constitutes a combined effort based on the Ministry of Health centre, transferred to the Regional Council, together with the Town Council.

The Lorca centre is located at the national health clinic, and is operated in conjunction with the town council.

The Yecla centre represents a combined effort on the part of the town council and congress, and the projected centre for Cartagena will follow the same lines.

The centres are known as Centros Asesor de la Mujer y de la Familia (Womens' and Family Advisory Centres), following the Andalusian model. In addition to the contraception clinic, they also have child psychology, sex guidance, psychology and legal advice clinics.

C. Cebrián's team also give information talks on FP, sexuality and legal questions.

At the national health "Virgen de la Arizaca" infirmary, Prof. Dr. L. Abad, Head of the Department of Gynaecology and Obstetrics, is promoting an FP clinic combined with early cancer detection (Dr. Marín Musó).

Contacts : Doña Concepción Cebrián  
Dr. Marín Musó (President of the Murcian FP Association).

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### FP Centres in the region of Valenciá

The President of the Valencian FP Association, Dr. José A. Díaz García Donató, in a telephone conversation, showed little interest in the IPPF Europe report, and said that he had spoken about the IPPF at the John Hopkins Hospital, and had been told that it was not worth talking to them. It might be mentioned in passing that this association did not return the balance of the IPPF funds reclaimed repeatedly by Begoña Arrieta in 1980, claiming that they had been sent in consolidating the Association.

Having rung him in advance, I did not meet Dr. Díaz G.D., and I left a message for him to call me ....

I went to see Dr. José Ma. Castell of Orfi-Wyeth, who provided me with data relating to the FP centres in the provincial capital, Valencia. I did not wish to visit any of the centres myself, feeling that this might further complicate a situation which was already somewhat tense.

The political situation with respect to the Valencian "Consell" [Regional Council] is again particularly tense and confused. It might be added that the above doctor has until now occupied the position of health promotion coordinator for the PSOE's Health Council.

The region of Valenciá, still under a pre-autonomy system, is made up of three provinces, viz: Valencia, Alicante and Castellón de la Plana. In principle, it has a socialist majority, but the opposition, although in the minority, is extremely strong.

Dr. José Ma Castells, responsible for marketing in the south of Spain and sales delegate for the Levantine coast, D. José Daniel Ribes (both outstanding promoters of education in the field of contraception, FP and sexuality) (talks, slide shows and short courses for adolescents and adults) complained of the confused situation in the field of family planning. According to them, the socialist town councils have no clear policy with respect to FP, or in fact with respect to public health. As far as FP is concerned, there is considerable resistance on the part of private medicine, conservative per se. National health hospitals and clinics tend to be run by the very doctors who are at the same time defending "cloak and dagger" private medicine.

At the Gynaecology Department of the Provincial Hospital, the Head of Department, Dr. Zaragoza, allows contraception to be dealt with in outpatient consultations, although this is not advertised (Dr. J.A. Díaz García Donato and Dr. Alejandro Navarro).

At the same time, at the "La Fe" national health hospital, Maternity, Drs. Vincente Martínez Sensor y Planes started to provide contraception services to women having given birth, both having started an obstetric prophylaxis service. The hospital nurses then began to attend. The clinic is not termed an FP clinic.

In the University Hospital, nothing was done for 6 months, when the new Professor, Dr. Francisco Bonilla Musoles (Bonilla Jr.) decided, after a year, to devote his activities to FP within the context of a preventive medicine service, following the model of Seville (Prof. Bedoya). Finally, independently, in another national health hospital, the "San Jorge", they have for the past year been active in contraception within the context of existing outpatient clinics, although not advertised as such (Drs. Lázaro and Miguel).



Finally, there are three Ministry of Health centres which have been transferred to the Regional Council, viz. those of Alicante, Valencia and Castellón de la Plana. As the Health Council has still not taken up any position with reference to FP, the situation of these centres is highly precarious, with the exception of that at Castellón, where a motivated gynaecologist has gathered together a team of suitable staff, and is collaborating with a sexologist/physician, Dr. Juan José Borrás Valls. This does not, however, remove the uncertainty as to the future of this centre, and the sense of isolation (one reason why my visit was particularly welcome).

According to information given and statements made by Dr. J.A. Diaz García D. himself, a pilot centre is about to be opened, to be run under the aegis of the Regional Council, located in the Provincial Hospital. This is to be named the "FP and Sexually Transmitted Diseases Centre".

Finally, it should be mentioned that a group of feminists in Valencia two years ago opened an FP centre in Pza Cuquer, this having been closed 5 months ago on grounds of abortions having been performed; in effect, they had been carrying out abortions in private houses, using the Karman method; in general the women on whom the abortions were performed were feminists: the staff and subsequently the gynaecologist working in the centre, were arrested: they were then bound over and released. It would appear that the centre has now started up again in another location. A similar centre is operational in Alicante.

#### FP centres in the region of Valencia

##### Health Council centres:

Región Sanitaria Valencia [Valencia Health Region] FP Centre, calle Nicer Mosco, 31. This centre is essentially run thanks to the midwife, Doña Concha (aged 50), who, in addition to preparations for labour, has also become involved in FP. Once a month, she organises a talk by Messrs. Castell and Ribes (of Orfi-Wyeth) for 30/35 women having received assistance during the month.

Región Sanitaria Castellón de la Plana [Castellón de la Plana Health Region] FP Centre, Av. del Mar no. 3. Dr. M<sup>o</sup> Fey Aybar. This has been operating in the mornings since May 1981, with one ATS, one AS, an administrator, and a doctor/sexologist. There is no collaboration with the national health hospital, and for gynaecological problems which cannot be handled by the centre or for tubal ligations, women have to go to Valencia or Barcelona.

Región Sanitaria de Alicante [Alicante Health Region] FP centre, Berenguer de Marquina 7. This has been in operation for 2 months, a young gynaecologist (Dr. Matias Fraile Garcia) now having taken charge of the centre. Until that time, the centre barely functioned.

##### Valencia :

Centro de Medicina Integral [Centre for Integrated Medicine], which runs an FP service (private/cooperative), at Plaza Xuguer, 4. Valencian group of feminists.

This centre was closed down on orders of the Guardia Civil (an unusual situation), on registration in July 1981.

The volume of work carried out was quite substantial (6500 records): they

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were seeing between 15 and 20 women per day. It is not, at the present time, known whether there will be any legal proceedings or not. The facts referred to above do not help the cause of FP in the region.

FP Centre at the Provincial Hospital of Valencia (outpatient gynaecology clinics). Not advertised as such, under Drs. J.A. Diez G.D. and Alejandro Navarro.

Centro Municipal de Salud (Municipal Health Centre). Currently at project stage: further information available from Carmen Macián, PSOE Sectorial Policy organisation.

Red Cross FP centre (calle Flora, 7) run by Dr. Fco Valls. According to information received from the IPPF Europe secretariat, this is non-existent.

Preventive Medicine Centre at the Valencia University hospital. Early cancer detection, endocrinology, sterility and FP services under the direction of Prof. Dr. Fco Bonilla Musoles. This has been operational for 6 months. The Professor advised me through Dr. José Ma. Castell that he is extremely interested in the IPPF report and in the associated project. In principle, I am to see him in February 1982, as he was away at the time of my visit to Valencia.

Centro de Educación Maternal [Motherhood Education Centre], College of Nursing, "La Fe" national health infirmary, Valencia.

As stated on p. 20, Drs. Sonsor and Planas became involved in providing contraception services for women having recently given birth, and for infirmary personnel, although the service was not advertised as such. They have a space problem, which as yet is not resolved. The head of the Gynaecology and Obstetrics Department is Dr. Gamiz.

"San Jorge" national health hospital. Outpatient gynaecology clinics. Doctors Lazaro and Miguel attend women on contraceptive matters on their own account. Both are motivated doctors, supported by the para-medical staff.

Manisses Municipal FP Centre. Free information, but assistance is deficient.

#### Alicante:

Municipal Health Centre. At project stage, to include FP. Ditto in Elche (FP surgery, Callio Mario Sempere, which acts as the administrative body for the future centre).

Alicante national health infirmary, Mothercraft Education Department. Dr. Ignacio Onate attends women having recently given birth and hospital staff on contraception matters. Has been in operation for a year.

Alcoy. Municipal FP centre at project stage.

At the present time, it is difficult to know who the most suitable contacts would be: this is consequently being investigated with Messrs. Castell and Ribes of Orfi-Wyeth, Avda. Eduardo Bosca no. 26, Valencia, tel. 96-3699636.

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### F.P. Centres in Catalunya

The Catalan region covers 4 provinces, viz: Barcelona, Tarragona, Lérida, Geroña, and has its own government and parliament.

The Generalitat, the Catalan government, has a centrist majority (democratic alliance). With respect to FP, it has no clearly defined policy. In 1980, the Generalitat made preparations for a campaign, with a 3,000,000 pta. budget, and the posters from this campaign are still to be seen at many of the centres which I visited: one month prior to the start of the campaign, however, it was suspended, and no explanation given. The Generalitat has no FP centres, and the centre transferred from the Ministry of Health in Barcelona has been converted into an ante-natal clinic. The other centres of this type have never functioned properly.

Virtually all of the FP centres are municipal, as the major municipal authorities have a socialist majority.

An attempt is currently being made to coordinate these centres from Barcelona. Many of the individuals having been members of the Catalan FP Association support this regional coordination project. A series of meetings has been held in Barcelona, these now being extended over the entire region (monthly meeting).

The first municipal FP centres acted as a model for many centres established afterwards. In particular, the Paseo Maraguay and Plaza de España centres have frequently offered advice.

In parallel, the Academy of Medical Sciences of Catalunya, which has a sexological sciences society, has formed a committee with a view to setting up a scientific society for FP. This comprises firstly: Professors of Gynaecology, Gonzalez Merlo, Iglesias Guiu, and Dr. José M<sup>a</sup> Dexeus; and secondly the doctors having worked in FP to date, viz: Drs. Eugeni Castells, Santiago Dexeus, Joan Carreras, Iglesias Cortit, Calaf, Lenti-Paoli.

With the exception of Dr. Joan Carreras, who formerly ran FP with Dr. Asunción Villatoro at the San Pablo Hospital, all of the other doctors work in FP in a hospital context.

The basis will tend to be medical and technological.

The basis of the municipal centres is somewhat wider, since :

- the custom is to see women in groups, to provide them with information and initiate discussion
- special attention is paid to clinical records, which are prepared individually, and with the due expenditure of time
- detailed and documented information is provided on barrier contraception methods
- advice is given in the psychological, sex counselling and even legal fields
- sociological studies are carried out to determine the type of people being attended, and ways in which to assist those sectors of the population who are not being served at the present time.

The Plaza de España and Diputación (congress) centres perform a teaching function for general practitioners and para-medical staff.

Considerable importance is attributed to the training of staff within the municipal centres. Numerous short courses are organised. In February, the Catalunya College of Midwives is organising a one week course on obstetric prophylaxis and family planning (cf. interview with the President of the College, Doña Flora Menedez y Alvarez).

(The representative on the governing body of the National College of ATS, Doña M<sup>a</sup> Luisa Rodriguez Oscariz, has resigned her position and may be replaced by the Catalan president in the forthcoming elections).

In a general manner, it may be said that it is only Catalunya that has managed to organise FP properly, with its own byelaws, and in addition with the support of individuals of repute and the corresponding organisations (professorial chairs, hospitals, town councils, health councils).

Precisely for this reason, I did not wish to interfere in matters of internal administration, visiting centres and individuals on my own account. The persons responsible for making contact and for collecting data on the various centres were Doña Remei Margarit and Dr. Joan Carreras. Both work at the Municipal FP centre in the Plaza de España. With them, I visited a series of centres. As regards contact with counsellors, advisers, professors and other individuals, they suggested that I write a letter to these people to advise them of this report and the associated project. I did not wish to write the letter before having consulted the IPPF Regional Doctor, Julian Heddy, whom I shall be seeing in Madrid on 11th and 12th January 1982.

Dr. Eugeni Castells, with whom I spoke at length, declared himself prepared to provide any assistance required, and welcomed the IPPF's initiative in preparing a report.

#### FP centres in the city of Barcelona

The majority of the data is contained in the sheets attached, and I shall restrict my comments here to mentioning the centres in operation, and those scheduled to open in 1982, without going into further detail.

San Juan de Dios hospital, FP Centre.  
Belongs to a religious order: no IUD's fitted.

San Pablo hospital, FP clinic. No longer in operation.  
This centre was one of the first to come into operation in Barna (Dr. Villatoro and Dr. Carreras).

San Jordi hospital, suburb of San Andreu. Outpatient gynaecology clinic.  
Open in the afternoons/evenings, under the direction of Dr. Eugeni Castells (1979).

Barna teaching hospital (Prof. Dr. J. Gonzalez Merlo). Outpatient gynaecology clinic: Dr. Iglesias Cortit.

Maternidad de la Diputación Provincial [Provincial Congress Maternity Unit]  
FP clinic in operation since September 1979, coordinated with mental health and sex counselling clinic.

#### Municipal FP centre :

Passeig Maragall : In operation since September 1979 (2 gynaecologists)

Plza España : In operation since January 1981 (2 gynaecologists)

Las Corts : Open Monday afternoons/evenings only.

Canyelles : Mondays and Thursdays only.

Porta : Tuesdays.

San Gervasi : Ditto.

Barcelona province :

Cornellá : Centro para el control de la natalidad y orientación sexual [Birth control and sex guidance centre]. Ex "Dr. Jaime Vera" centre, run by feminists, and moved to the city council's first aid centre, on agreement of the two parties. This centre also runs activities outside the centre, in the form of information talks on contraception and sexuality. It has 5 consultants, and one sex counsellor.

Cornellá : National Health Clinic. Morning and afternoon gynaecology/FP clinic, but with limited assistance restricted to contraception only.

Hospitalet : Municipal FP centres.

Hospitalet centre : Wednesdays and Mondays only.

Saint Eulalia (suburb) : Wednesdays.

Ripollet Municipal Health Centre : Secretary - José Grau. Open on Mondays and Thursdays. Ripollet has a population of 27,000, mainly immigrants from Andalusia, Extremadura and Galicia. It provides a mental health service (with 2 psychiatrists), and a sex counselling and childbirth preparation service, with 3 consultant psychologists working in a team with the gynaecologist.

Sabadell Municipal FP Centre : Has been open for a year, operating in the evenings.

Sardinyola Municipal Health Centre : Has only recently come into operation, and works in liaison with the Ripollet centre. Open every evening.

National Health Prat de Llobregat clinic : Contraception only at gynaecology clinic. Open evenings.

Rubí Municipal Health Guidance Centre : FP consultations on request: birth control information.

S. Feliu de Llobregat Municipal FP Centre : Open Tuesdays and Fridays.

Molins del Rey : Municipal FP Centre : Open Tuesdays and Thursdays.  
Coordinator : Pilar Roig, Principal Secretary of the Catalan FP Association.

Vila Franca del Penedes Municipal FP Centre : Coordinator Neus Martí, Second Secretary of the Catalan FP Association.

Sant Boi de Llobregat FP Centre : Open Tuesdays and Thursdays.

Moncada y Reixach national health clinic : Gynaecology clinic Mondays and Fridays, 18.00 hrs to 20.00 hrs.

Manresa Municipal FP Centre : Open Tuesdays and Wednesdays.

Castelldefels Municipal FP centre at project stage.

Sant Joan Despí Municipal Health Centre

Began operation relatively recently.

Sant Adrià de Besòs : Municipal FP Centres :

Calle Dr. Barraguer : Sees few women.

Centre civil de la mina [Miners' civil centre] : Wednesdays and Fridays.

Mollet Municipal FP Centre : Provides information only; for attention - "Mutua".

Granollers: Clínica del Valles (private clinic), open in evenings.

Badalona: FP centre transferred to the Generalitat: no information.

Municipal FP centre projected for Sta Coloma/Sta Perpetua.

No centres in the province of Lérida, although a municipal FP centre is about to open in the capital (see interview with Carmen Valdecarcel).

"Mitja Lluna" municipal FP centre, Tarragona

This centre started operation three months ago, and had pre-existing contacts with other centres (Ripollet, Plaza España, Pa Maraguay). The centre is the result of protracted negotiations and preparations pursued by the Feminist Block of Tarragona, whose spokeswoman is Rosa Queralt (attended the meeting in Zaragoza back in 1977). At the present time they are working without pay, and on extremely limited funds. The centre provides an information service, holds courses on preparation for childbirth, gives talks on birth control and sexuality; the gynaecology clinic has a small cytology laboratory; the "AS" takes prepares the clinical records and guides the woman on the basis of the information she is given; there is a sex guidance clinic, and once a week an assistant consultant comes to attend to couples.

Contact : Rosa Queralt (telephone number of centre : 223712, evenings).

National Health Infirmary, outpatient maternity clinic, Tarragona

Head of Department : Dr. Herraz. Head of section : Dr. Angulo. Both doctors are against family planning, although they accept women being attended at clinic no 12, the "Sterility" clinic. This clinic is run thanks to the efforts of two motivated doctors: Dr. Ignacio Perez Villa, and Dr. Rosa Vidal. Both may be regarded as contacts. They liaise with the "Mitja Lluna" municipal centre, and Rosa Vidal runs the gynaecology clinic.

Gerona : National Health Clinic: gynaecology clinic.

This is not advertised as an FP clinic, but is attended by women who require family planning assistance. We have no further information on this centre.

It should be mentioned that the impetus for majority of the municipal centres came from feminist groups. Many centres have representatives from these groups. Unfortunately, once inside the centres they have on many occasions hampered operations. In some places they even endeavoured to do without professionals, causing unnecessary reactions and sanctions.

Private centres worthy of special attention

The Dexeus Institute : Dr. José Ma Dexeus and colleagues.

This has undeniable prestige in the field of family planning, and has been carrying out tubal ligations for some years (having performed almost one thousand to date).

The Corachán Clinic : Dr. Ramón Casanelles, undoubtedly another pioneer in FP in Catalunya.

The Wilhelm Reich de Figueras Centre (Gerona).

Drs. Carlos Frígola and Robert Friedman (USA), homeopath. FP clinic, with individual and group psychotherapy and sex counselling. It was at this centre, which has been in operation since 1977, that I heard mention for the first time of lunar contraception. Considerable preparation will be required before this can be implemented.

Genus Institute, Barcelona

Dr. Federico Boix, sexologist. Various services, including gynaecology, oriented towards sex education and guidance, F. Boix being one of the first sexologists in Spain. The centre has been in existence since 1975.

### FP Centres in Aragón

Aragón comprises three provinces: Zaragoza, Huesca and Teruel. At the present time, it is still in the pre-autonomy phase. The Regional Council has a centrist majority (UCD). The city council of Zaragoza, however, is socialist. This is an extremely large area. Feminists have tried to set up an FP centre, but failed.

Dr. José Manuel Roncalés, former director general of the Ministry of Health (MTSS) Centros de Orientación Familiar [Family Guidance Centres], is no longer active among the doctors promoting FP in Zaragoza. He is currently devoting his energy to obstetric psychoprophylaxis.

According to information, the outpatient gynaecology clinic of the maternity unit of the national health infirmary attends women with a minimum of three children on matters of contraception.

In the other provinces not even this is done, and contraception is handled by private medicine only.

The MTSS Family Guidance Centre located at the Provincial Health Centre and which is not advertised as such (still not having been transferred), operates a few hours in the afternoons/evenings, with two gynaecologists (Drs. Miñona and Casamayor), a midwife, an "AS", and one administrator. There is little dynamism, and it is difficult to get IUDs fitted.

I had an interview with the socialist councillor, María Rondó (Tel. 0976-224838, ext. 242) of the Zaragoza City Council. She assured me that there a project was in hand to open a municipal FP centre in 1982, under the charge of a group of PSOE "Women and Socialism" women. The woman responsible for the group is Pilar de la Vega (tel. 253743 after 3pm).

Overall, the family planning and sex education picture is somewhat bleak.



## FP Centres in the Basque Country and Navarre

Although the two groups of provinces can to a certain extent be regarded as a single region, the three Basque provinces together form the Basque Country, which has its own Government and Parliament, whilst Navarre is a totally separate political entity. Part of Navarre considers itself to be Basque, whereas the other part does not. There is a pre-autonomy Regional Council, coinciding with the Diputación Foral [Judicial Congress](Las Instituciones Forales [Judicial Institutions]), of Navarre, in Pamplona, the capital.

Distances within this region, however, are relatively short, the two capitals being at a distance of only one and a half hours by road. There is, in addition, a network of modern and well-maintained roads and airlines, all of which assists communication and mutual feedback. With the exception of Catalunya and Valenciá, this situation does not apply in the other regions.

The Basque Country comprises three provinces : Guipuzcoa (capital San Sebastián), Vizcaya (capital Bilbao), and Alava or Araba (capital Vitoria, the seat of the Basque Government).

My first interview was with Luis Monasterio, the current president of the Basque and Navarrese FP Association. Given the operational nature of this FPA, I requested them to collect data from the centres on my behalf. Accompanied by Luis Monasterio, I visited a number of centres and had an interview with Dr. Francisco Javier Rodriguez Escudero, Head of the Maternity Department of the "Cruces" Infirmary in Bilbao (Baracaldo), who expressed interest in the IPPF report and project initiative. He stated that he would be prepared to assist, and recalled the short course on FP for doctors which he had followed in London, organised by the IPPF.

I also had an interview with the two PSOE and PCE councillors who supported the creation of the Baracaldo Municipal FP Pilot Centre, this having been followed by a press conference at which I explained the reasons for my visit and the associated objectives.

At the suggestion of the councillors and Luis Monasterio, I went to the Basque Government Health Council to speak to the Director General of Health Planning, Dr. Gabriel Aranguren, but the interview had to be cancelled at the last minute.

In the Basque Country, there are three centres transferred from the Ministry of Health in 1980, now run by new, young staff; a representative of the Basque FPA is to be found at each centre.

San Sebastián and Bilbao both have projected Municipal FP or Health Centres (both Councils are socialist, and I had interviews with the respective councillors).

In Navarre, I had an interview with Begoña Arrieta, secretary of the Basque and Navarrese FPA, and the contact with the IPPF at the time of the project for a Spanish Federation of Regional FPA's: she attended as an observer at the C.R. before last in Oslo. She provided me with the record cards of the different centres. The prospects for FP in Navarre are good, and the Instituciones Forales [Judicial Institutions] of Navarre have a clear policy in view (see document attached: unusual to date = "Bases de Educación Sexual y Orientación Familiar" [Fundamentals of Sex Education and Family Guidance]). We recently received (at the AAPF-CEAPF) a request to advise on preparations for 10 citizens' sex education and family guidance

centres (cf. conversation with José Cáceres).

Centres transferred to the Basque Government:

Bilbao : The transfer was made in December 1980, and the centre was opened in August 1981.

This is run in the afternoons/evenings by a team (comprising a gynaecologist, an ATS, and AS, and an administrator). There is a firm intention to set up a system of coordination between the various centres and with others (Baracaldo, Chantrea).

San Sebastián : Dr. José Luis Fernandez Riva.

The centre was opened in 1980, and transferred in February 1981.

Vitoria : This centre has only just opened, and is run on a team basis. Its staff is young and enthusiastic and organises outside activities such as talks and short courses in the suburbs.

Municipal Pilot Centre for Sex Information and Guidance and Family Planning in Baracaldo (Bilbao).

The centre is governed by a mixed committee, and run by a team of workers comprising a gynaecologist, an ATS, 2 advisers, an AS, a psychologist/sexologist and a team of assistants (Basque FPA). They hold clinics and information/training meetings for people from the local area. The centre is located within an estate of apartment blocks forming part of the "Cruces" working class area in which the hospital is also located.

Maternity department gynaecology outpatient clinics ("Cruces" national health infirmary). A number of clinics are devoted to FP and sterility; the Head of Section is Dr. Portuondo, who is, however, a specialist in sterility problems. The volume of work is considerable.

Chantrea Andraize FP Centre

This centre was started by the Chantrea Womens' Group, who provided the staff. It is the fruit of protracted negotiations with the Town Council and Congress: both institutions provide the centre with grants. It is run on a team basis with a gynaecologist, an ATS, a psychiatrist, a sexologist, two FP advisers and 8 assistants from the Womens' Group.

Navarre :

Ministry of Health Family Guidance Centre, Pamplona

This has not, as yet, been transferred and does not operate as such, instead being run as a maternity clinic. There is no outside activity or information within the centre, even though the gynaecologist respects the freedom of users.

Maternity unit of the Navarre Hospital, FP clinic

This service is in the process of reorganisation: it has been in operation for two years, and comes under the general gynaecology administration. The clinic is the responsibility of the head of department and three assistant doctors, 2 "ATS", 4 clinic auxiliaries and two administrators.

Hospital Comarcal, Estella, Family Guidance Centre :

Centre set up by the Ministry of Health (MTSS) in 1979: it did not, however, operate as such until a change of staff took place in 1980: they are hoping for transfer to the Judicial Congress. The current team comprises three gynaecologists, an ATS, and AS and an administrator.

FP Centres in the Castilla-León region

The region of Castilla-León is one of the larger regions. It is still at the pre-autonomy stage: capital status has been given to the small town of Tordecillas, which is more or less equidistant from the main provincial capitals of Valladolid, Zamora, Salamanca, Segovia, Burgos, Avila, Palencia, Soria and León. It covers a total of 9 provinces. Given the considerable distances involved, I was not able to visit all of the capitals.

I spoke to the person responsible for regional level social services planning, D. Deogracias Montesdeoca, of the PSOE. He explained that at the present time, each capital has a social services planning delegation. Certain of the capitals, such as Salamanca, Burgos, Zamora, have a project for a municipal health centre, to cover family planning (cf. telephone conversations).

As regards the political situation, the majority at regional level is centrist; some of the capitals have socialist city councils, e.g. Salamanca. The region has a total population of 4,500,000 and accounts for 16% of the total area of Spain.

List of centres by province :

Salamanca : The National Health Infirmary provides contraception assistance only to women with 4 children.

FP Centre (Felix Lopez, sexologist, linked to the University). Private co-operative system; so far assistance provided has been deficient. They are to receive advice from the IMS in Madrid.

Ministry of Health Family Guidance Centre : set up in 1979, not operational, and currently suffering considerable difficulties, under the charge of Dr. Ester. Has no assistance from any hospital for cytology or other complementary services. Extremely isolated, although highly motivated.

Valladolid : Maternity unit at National Health Infirmary: Prof. Dr. Navarro.

FP clinic under Dr. Albert. Has been fitting large quantities of IUDs for 1½ years. Consultations limited to contraception.

Ministry of Health FP centre, opposite the national health hospital. This centre, together with Granada and La Coruña, is one of the exceptions, having worked well from the outset, thanks to the motivation and ideas of the state maternity doctor, who is still working at the centre with his assistant, viz. Drs. Manuel Sánchez del Río and Ignacio Gayette. These two doctors complement one another extremely well, and work in a team with the midwife, the AS, and the administrator. There is liaison with the "mental health" function, this clinic being in the same lobby. Numbers of women seen are high, but each woman is nevertheless given as much time as is required.

Salamanca and Valladolid are both university towns. The persons mentioned above stated themselves to be prepared to assist with any inter-regional coordination base project which might be put into effect.

F.P. Centres in the Castilla-La Mancha region

This is another extremely vast region. At the present time, it is at the pre-autonomy stage. The region currently has a centrist majority.

As far as FP is concerned, virtually everything still has to be done in the area.

The region comprises 4 provinces, viz. Guadalajara, Toledo, Ciudad Real and Albacete.

The autonomisation process has not yet reached a stage at which a health policy is called for. There is nothing more than that which has always existed - national health infirmary gynaecology clinics, with the customary limitations, e.g. dictated by the doctor, or for women with 3 or 4 children who demand FP assistance. For the remainder, FP is limited to private medicine, other than the exceptions listed below :

Guadalajara :Ministry of Health Family Guidance Centre

This centre is under the charge of Dr. Fernando Romero, and operates in conjunction with the national health hospital maternity department with respect to tubal ligatures (the criteria adopted being relatively broad, thanks to Dr. Javier Martínez Salmeán, also a doctor with the Instituto Ginecológico, Calle Genova, Madrid, formerly having worked at the "Pablo Iglesias" centre).

Toledo : Ministry of Health Family Guidance Centre.

Not advertised as such, but operates with the customary limitations.

Talavera de la Reina: Centro Nacional de Demonstración Sanitaria [National Health Demonstration Centre]. This centre provides health courses, and has held an FP course organised by the WHO European Region, for state maternity doctors and midwives, for the past year no longer in the Ministry (MTSS) family guidance centres for reasons of incompatibility.

Ciudad Real : Project in hand to set up a family planning centre, on the initiative of Dr. Juan Angel del Rey Castellanos and with the assistance of Dr. José M<sup>a</sup>. Castells de Valencia and his team.

Albacete : Municipal FP centre projected to open in 1982. The arrangements are in the hands of a team of women.

Further enquiries are required to identify the most suitable contacts.

FP Centres in Cantabria

This is a single province region, its capital being Santander. I had an interview with the person responsible for Sectorial Policy in the PSOE, Dr. Ma Angeles Ruiz Tagle (the sister-in-law of the current President of the Regional Council of Andalusia, D. Rafael Escuredo), who stated that she would be prepared to act as a contact in her capacity as President of the Health Committee of the City Council of Santander.

There is a project in hand to set up a municipal FP centre in 1982. There was at one time a family guidance centre which worked relatively well, but for reasons which are still unknown, the Ministry of Health shut down the centre; compensation was claimed for the staff, but to date no reply has been received.

FP Centres in Asturias

Asturias is another single province region at pre-autonomy stage. Here, the political majority at provincial level is split between the PSOE and PCE: this situation is similar in both of the major towns, Oviedo and Gijón.

I had a meeting with Paz Fernandez Felgueroso, "AS" and lawyer, of the "Women and Socialism" group, who was optimistic with respect to FP prospects. According to her, these centres should be modelled on the Andalusian and Murcian Womens' Advisory Centres. She was involved in the publication of the PSOE study on womens' advisory centres mentioned earlier. I also had the opportunity to speak to the President of the Gijón Council Health Committee, Dr. Marcel Palacios; we spoke, among other things, of projects in the field of health promotion and staff selection and admission criteria in this area.

Centres within the Region :Municipal FP Centre in Gijón, Muro de San Lorenzo, First Aid Station

This centre has been in operation for 5 months, following 5 months' preparation under the charge of the current staff and a group of women (Paz Fernandez and team). It is operated on a team basis (an ATS, a psychologist, an AS and an administrator, the gynaecologist currently being engaged by them on a contract basis until such time as a suitable person is found). The preparatory period prior to opening was used to carry out a series of visits to other centres and to prepare leaflets (which are highly successful for a centre - see documents attached). The centre is one of the best equipped/fitted that I have seen.

National health infirmary, maternity department, outpatient gynaecology clinic, Oviedo

This provides contraception assistance and serves a relatively high number of women. Tubal ligatures can be obtained only through private medicine (65,000 ptas).

There are two projects for municipal FP centres in Alavés and Oviedo. Both are scheduled to open in the immediate future.

As regards contacts, I would suggest Paz Fernandez F. and Pilar Alonso of the Gijón Municipal FP Centre.

FP Centres in Galicia

Galicia will, within a matter of months, have its own government and parliament. The region comprises 4 provinces : Coruña (capital Santiago de Compostela), Pontevedra, Lugo and Orense. According to latest data from the 1981 census, the population of Galicia is 2,791,914. The elections held this year for the Galician parliament gave an unexpected victory to the right wing AP party. It is highly probable that FP in Galicia will have to get through a difficult period, as the AP does not approve of modern methods of contraception such as the IUD (which, according to the AP, is a micro-abortive system), and the contraceptive pill. The Galician Regional Council has had 4 FP centres transferred from the Ministry of Health, only one of which is working well.

Centres :

Vigo : Transferred FP centre, located at the Provincial Health Centre, under Dr. Testa. Not advertised as such, and shows little movement.

National Health Infirmary, Mother and Baby Department, Outpatient Gynaecology clinic (Dr. Bonifaci), offering contraception assistance.

Transferred FP Centre, Orense : Dr. Demetrio Gonzalez. Advertised as "Family Guidance", and does not operate as it should: does little business.

Transferred FP Centre, Lugo : Under a gynaecologist, having received no preparation. Does not fit IUDs, and merely serves those women who happen to turn up.

Provincial Hospital, Gynaecology Department, 5th floor, Santiago de Compostela, Dr. Raul Morillo Gonzalez (Ecuadorian) has converted the gynaecology clinic into an FP clinic. He works in a team with the two midwives and administrator. According to him, there are motivated people seeking to set up an FP centre in Santiago de Compostela. They are in negotiations with the City Council, putting forward a project. R. Morillo attributes considerable importance to the human assistance to be given to women and couples wishing to plan their families. He is prepared to act as a contact. He also advised me that there is a project in Vigo, in the hands of a group of feminists, aimed at setting up a centre (according to him, a technical advisory centre).

FP Centre (transferred) located in the Provincial Health Centre, La Coruña, Dr. Quintela Bustos and assistant, with his team ("ATS", "AS", Auxiliary and Administrator), together with two sexologists who attend twice a week (individual and couple consultations, group counselling). The centre is located on the first floor of a new building, next to "Mental Health" and "Ante-natal": there is a certain degree of co-ordination between these centres.

One particular feature of this centre is that the State Maternity Doctor is continuing to operate, together with his assistant, opposite the centre, inspite of the incompatibilities. The team is highly motivated and active, and some months ago organised a symposium in which none less than Dr. Timothy Rutter took part, giving a lecture on abortion. It is understood that this was not to the liking of Dr. Victorino de Vincente, who expressed his view by letter.

Raul Morillo G. and Dr. Quintela Bustos, Joaquín Villar Calvo, sexologist, would be prepared to act as contacts.

FP Centres in Extremadura

The Regional Council of Extremadura is still in a pre-autonomy phase: the prevailing political tendency is centrist. It comprises two provinces; Badajoz and Cáceres, and like Galicia is one of the more isolated regions with the worst communications, and one of the poorest regions of Spain. Many people from this region, as in the case of Galicia and Andalusia, have been forced to emigrate to the Basque Country, to Cataluya, Madrid or outside Spain, in order to be able to support themselves.

There is only one transferred centre: the other, in Cáceres, exists only on paper (and not even the Maternity Department in Cáceres provides contraception counselling or assistance). The one operational centre is the FP centre in Badajoz, located at the Provincial Health Centre, and not advertised as such. The person in charge of the centre neglects the clinic in favour of his own private clinic ...

There is a group of feminists (Francisca Cosco, "ATS" at the National Health Infirmary) with a project in hand to open a centre in Badajoz.

Those organisations which are at the moment providing good contraception assistance are :

Outpatient "1" and early cancer detection clinics at the Maternity Department of the National Health Infirmary. Not advertised as FP, and was started up from a mothercraft education service (Dr. Luis Garcia Taradellas), in close collaboration with Dr. Matias Martinez Pereda, Head of the early cancer detection section. At the present time, the latter doctor is preparing a doctoral thesis on the side-effects produced by the IUD, based on 700 IUDs fitted. In the meantime, Dr. Luis Garcia Taradellas two years ago transferred to the National Health Clinic, where he is continuing to provide contraception assistance (2000 clinical records).

Both doctors are PSOE militants. Dr. Matias Mtnez Pereda has declared himself prepared to act as a contact.

In the municipal context plans are in hand for women's advisory centres at Don Benito and Mérida. Both centres are to have a gynaecology clinic to deal with contraception, together with psychology clinics. These centres are to open in the near future.

Given the proximity to Portugal, many women go into the neighbouring country to obtain abortions (at Elva and Lisbon). Unfortunately, the abortions are performed under precarious conditions of hygiene, and more than a few women return with serious gynaecological side-effects.

It is difficult to know what can be done in this area, as to call for a clear and decisive posture on the part of the Portuguese health authorities would be an even further step backwards for FP, already in a precarious position, according to Dr. Antonio Palha, current President of the Portuguese FPA.

Possibility of Portuguese FPA involvement in the FP co-ordination base project : the Governing Council stated that it was fully in favour of this possibility, although it would be necessary to study the manner in which the future coordination of the Iberian peninsula in the whole could be implemented.



### FP Centres in the city and province of Madrid

Although Madrid cannot be considered a region, nevertheless it is in the process of achieving self-government within the context of the autonomisation. There is a socialist majority (PSOE and PCE) at both capital and province level (City Council and Provincial Congress). The initial impulse since 1976, and earlier (feminists), came from the centres at that time run by the PSOE, the PCE or the Feminist Group of Madrid ("Federico Rubio"). Over the first few years, these centres, providing advice to women wishing to obtain abortions, were the subject of reprisals ultra-right wing groups, with the consent of the Ministry of the Interior.

These centres gained in support and extended the scope of the services required for full FP counselling and assistance, until finally they became co-operative private centres two years ago. Others have closed.

The feminists went out to the suburbs and are now active in community and similar associations, as FP advisers and counsellors.

In the meantime, the Health Council had started to implement an ambitious project, converting first aid centres into municipal health promotion centres. At the present time, 11 of the 18 first aid centres have been converted into Municipal Health Centres.

At the same time, FP or Health centres are being set up on the outskirts, where the councils are socialist. These dormitory towns have between 100,000 and 200,000 inhabitants.

The Provincial Congress is currently planning to set up an FP clinic in the provincial hospital, coordinated with and as an extension of the existing municipal centres. The clinic would have a gynaecology department, an obstetrics department and an FP department with a cytology and genetics laboratory. The clinic would be run by specialists in these areas, and in teaching and research, for which they would also be responsible. (Project organised by Drs. J.A. de Juan and A. Enriquez, General Director of the Municipal Health Centres of Madrid, and FP Area Coordinator, respectively).

The health centres are made up as follows :

Epidemiology department : two epidemiologists.  
 Pediatric department : two pediatricians and two ATS.  
 Mental Health department : two psychiatrists.  
 FP department : two gynaecologists and two midwives.  
 Child Psychology Department : two psychologists.  
 Two clerks and two administrators.

Apart from the team meetings on internal matters and on the running of the centre, every two weeks there is an area meeting, with the appropriate coordinator, for ongoing supervision and training purposes. Whenever thought suitable, meetings of all areas are called at the invitation of the Director General.

An attempt is being made to coordinate all of the municipal centres of Madrid, city and province.

In the private field, there are a number of centres, some of which I visited on grounds of their particular interest. Others are centres offering medical assistance, including contraception (with or without information back-up) through Medical Societies.

Centres in the city of Madrid :

Eleven municipal health promotion centres run by the City Council of Madrid, with seven due to open between now and 1983. FP Area Coordinator, Dr. Amadeo Enriquez López. He is, of course, the contact and representative in this area, as well as being a member of the "CEAPF" interdisciplinary team.

Hospitals :

"10 de Octubre", national health infirmary, gynaecology clinics (FP/Early Cancer Detection/Sterility).

Head of Department : Dr. Pedro de la Fuente.

Head of Section : Dr. Ruiz Balda. Latterly performing high number of tubal ligatures.

"Ramón y Cajal" National Health Hospital, Early Cancer Detection/Sterility/FP clinic.

Head of Section : Dr. Joaquín Cortes Prieto, former President of the Spanish Infertility Society.

"La Paz" National Health Infirmary, Outpatient Gynaecology Clinics (FP, Early Cancer Detection/Sterility). Dr. Sergio Fernandez Penela is responsible for the contraception service. He was formerly director of the family guidance centre in Vallecas, which acted as a pilot centre within the framework of the Ministry of Health (MTSS) centres: at the present time, this centre no longer exists as such, i.e.

Family Guidance Centre, c. Mtnes de la Riva, 57 Madrid 18 : In full swing until 1½ years ago: centre is closed, or about to be closed, as a municipal health centre has existed in the district for 1½ years.

Private FP centres :

Imsalus, Calle Ma de Molina, 64 Md-6

FP clinic: this centre offers assistance to affiliated members of Medical Societies.

FP Centre, Calle Pedro Texeira, 3-bajo, Md 20

Operates in conjunction with the Medical Societies. Price of consultation: 1,500 ptas.

Femsana, Calle Palencia 48, bajo, Md 20

FP clinic, free information, 1st consultation: 3,000 ptas, including cytology. 2 gynaecologists, administrative and para-medical staff.

FP Centres, calle Robles, 3-20, Md-20 (Wednesdays and Saturdays)  
calle Gravina, 10-1, Md-4 (Full clinic services, also covering sexual problems), cost of first consultation: 1,500 ptas.  
calle Zurbano, 71-20, Md, gynaecology clinic (1,500 ptas).  
calle Rios Rosas, 36-30, Md, Tuesdays and Thursdays (1,000 ptas).

Instituto Ginecológico, calle Genova, 23-20, Md-4

Consultation : 2,000 ptas; cytology: 1,500 ptas : colposcopy: 1,500 ptas; ultrasound; 2,000 ptas. 2 gynaecologists, one psychiatrist, one psychologist, one AS to take records, a receptionist, and clinic

auxiliaries. This centre is worthy of special mention in the private sector, its team being headed by Dr. Javier Martínez Salmeán, a gynaecologist having been involved in FP from the outset ("Pablo Iglesias" and subsequently as a maternity doctor in the Guadalajara Ministry of Health FP Centre). Together with his team, he performs tubal ligations on a private basis one afternoon/evening a week (5 to 10 women).

One member of the team is also setting up a further FP centre, known as "Concepción Arenal" (Dr. Renée Suarez).

It is difficult to know the extent to which these private centres will continue in existence as the municipal centres offer a service and assistance.

"Pablo Iglesias" FP Centre (Calle Juan de Mena, 21).

This centre is run on a co-operative basis. Consultations cost 800 ptas, as does cytology. The staff making up the team has for a number of years taken turns to carry out all of the various functions, with the exception of the gynaecologist and the sexologist. There is also a legal advice service for women. The members of the centre have links with the "Women and Socialism" movement of the PSOE. The centre is similar in structure and operation to the Womens' Advisory Centres in Andalusia and Murcia.

Instituto de Medicina Social (calle Lope de Rueda no. 13). Cost of consultation: 900 ptas. This is a similar centre to "Pablo Iglesias", run on a team basis, and although it is private, its administration is on a co-operative basis. Its Director, Dr. David Castañón, has initiated studies on the 30,000 clinical records made over the 6 years' existence of the centre. There are 3 gynaecologists, 2 psychiatrists involved in psychological and sex guidance and assistance for women and couples (Dr. Manuela Arribas). One of the major founders of the centre is the well-known gynaecologist and sexologist, Dr. Angel Sopeña. The institute is ideologically linked to the PCE. The centre is open from 9 am to 10 pm; there is also a legal advice bureau.

Dr. Castañón thought that 7% of users were using the diaphragm and that the sheath was once more on the increase. He also assured me that vasectomy was beginning to be accepted, at least within the type of public served by the institute (similar conclusions were drawn at "Pablo Iglesias"). Certainly, these conclusions are unusual, and are in part explained by greater experience and openness on the part of the staff, together with the type of image that this type of centre has with users (talking about sex in an extremely natural manner, relating to the more liberal couples and behavioural patterns, having given guidance from the outset on abortion, etc.).

There is also a womens' information centre (Ministry of Culture) providing information on FP.

Ditto, but from an extremely different viewpoint, Instituto de Ciencias Sexológicas, calle Lopez de Hoyos, 67, Md-2 (Efigenio Amezua). This training institute is involved in training family planning advisers and sexologists (post-graduates only). Virtually all of the psychologists/sexologists mentioned throughout this report have attended courses at this institute, with the exception of Barcelona, where there is a sexology section at the Teaching Hospital (Drs. Eudald Maideu and Farré). The institute is private and is not officially recognised.

It should be remembered that Madrid, like all major conurbations and capitals, must be considered a somewhat special case with respect to the subject of family planning as covered by this report. I refer here both to individuals' behaviour with respect to this urban situation (distances, habitat etc.), and to manifest liberalisation.

It is probable that the towns adjacent to the capital will, in the near future, form part of Greater Madrid.

Municipal FP Centre, Alcobendas (Coordinator : Carmen Dominguez). Has been in operation for 4 months, run by group of women.

Municipal Health Centre, S. Carlos Hospital, Aranjuez

Doctor: Dr. Sebastián Carton Gutierrez. Currently in the process of reorganisation on the initiative of Dr. Cartón. In 1982, a private centre is to be incorporated in the centre as an FP clinic (with a sexologist).

Municipal Centre, Fuenlabrada (Womens' Advisory Centre). The final location is still under construction. The centre operates in part in the national health clinic and in an apartment on a new estate, at some distance from the centre of the town. The coordinator, a feminist, together with her team, has undertaken a major task in making women aware in the fields of consumption, medicine, labour laws, sexuality and birth control. The centre provides legal, psychological, sex and contraception advice. Milagros Rodríguez Marín is the PSOE national coordinator for family planning matters, and forms part of the team headed by Dña Carmen Mestre of the PSOE Federal Executive.

Milagros sees the prerequisites for successful family planning as :

1. Social projection in the face of the danger of "dogooding"
2. Team work with compulsory ongoing training and supervision
3. Professional training of staff, and personal option of each with respect to FP objectives.

Getafe Municipal Centre, calle Perales 6

Coordinators: Demetrio and Dr. Ignacio Apolinaris (PSOE militants). Gynaecology service for contraception and psychology/sex guidance.

Leganés Municipal Health Centre

This has been in operation for a year, thanks to the initiative of the socialist counsellor, Isabel Espiega. The centre was set up by Dr. Amadeo Enríquez, and conforms to the same model as the health centres in the city of Madrid.

Leganés Social Studies Centre

This follows the same model as the IMS, and a number of professionals from the IMS provide assistance. It operates in a similar manner to the Fuenlabrada centre. Coordinator : Dr. Manuela Arribas.

Mostoles Municipal FP Centre

Doctor : Dr. Leonardo Hagel, gynaecologist. There are 2 gynaecologists, 2 auxiliaries, 2 psychologists/sexologists, 2 secretaries, and 9 advisers, working as a team. Monday is reserved for staff training, supervision, matters of internal organisation and the planning of external activities.

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The centre is located in an extremely spacious pilot apartment. Considerable importance is attributed to participation in community life, in offering a broad spectrum of information and education for women, adolescents and couples. There is also a paediatric department. Women coming to the centre for the first time attend a talk on sexuality and contraception, followed by discussion: they then have half an hour's individual consultation with guidance as to the services they require. A maximum number of consultations per day has been fixed.

There are still a large number of health centres scheduled to open in the periphery of Madrid in 1982/83 : Alcalá de Henares, S. Fernando de Henares, Majalahonda, Arganda, Alcorcón and Coslada.

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