

the natural news

Quarterly newsletter of the Australian Council of Natural Family Planning

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www.ozemail.com.au/~acnfp

Spring 2001

My journey with Natural Family Planning

This reflection has been prepared by Yvette Nehme, from a family of seven where she is the eldest of a twin.

Raised in a traditional Lebanese environment, my parents did include the Australian culture in our lives in many ways, so I have been given the best of the Lebanese and Australian culture.

Having attained a theology degree (BTh), I now work with Wesley Mission as a personal carer for the seniors, with Maronite Community Centre as a Community Settlement Services officer and with the Maronite NFP clinic as an administrator and educator. I am also involved in the Saint Charbel Youth Group and the Maronite Youth Council.

Before getting into my journey with NFP, I thought I'd briefly inform you about what puberty, sexuality was to me before the NFP team came along to help me form who I am today.

The first time I ever came close to understanding puberty was in Year Nine, 1986. About 120 girls were gathered in a large hall at Mount Saint Joseph, Milperra. This is where we were supposed to learn the facts of life. All that I can remember from that day was the film we viewed. The film affected me in such a way that made me promise the only way I was ever going to have children was through adoption or if the male was going to miraculously start having children.

To me the film was a definite culture shock. Now I look back and laugh at how much of it I really never understood. Life went on as usual with the acceptance that mensens are part of life and we cannot do anything but deal with it. So like many other teenagers I just went on not asking any questions and accepting changes that came my way.

After graduating from school I worked in a medical practice where I came in contact with people from all walks of life and

all medical conditions. And yes, eventually curiosity did get the better of me. Questions that I never had thought of started to cross my mind.

So I would approach the Doctor I worked for and he would briefly answer the questions I asked. "How many ovaries do women have?", "The gluey stuff that passes through our vagina — is that always thrush?" You could just imagine how many other questions I would ask.

But it was Father Geoffrey Abdallah, the Maronite Youth Chaplain, who was responsible for my journey with NFP beginning. How it happened was quiet bizarre. In 1999 I was having a pizza with a group of youths along with Father Geoffrey. We were chatting about marriage, sexuality and the teachings of the church. I just stated "wouldn't it be great to teach others about their bodies and the church supporting you?"

Father's response was that yes, it is possible and that "At the moment we are looking for Natural Family Planning educators. I will give you a contact and you can speak to them about your interests."

I contacted Mrs Georgette Abdallah and spoke to her about being interested in teaching NFP to our community. She organised a meeting with the Supervisor Mrs Anne McGowan and herself.

This was the interview that put the wheels in motion. From that day on my body really began to make sense. I started to take note of every little change, symptom and sign. I started to listen to what my body was telling me. I was becoming in touch with my body. No more was I going to be taking my body for granted. I wanted to teach NFP because I wanted other women to become in touch with who

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from the president

Susan Berg

Dear Fellow Members,

Once again we are at the closure of another year. For many of you this year will have been an extremely busy year working within the ministry of Natural Family Planning.

I personally like to reflect at this time on what I have achieved and what I would have liked to achieve. This reflection time enables me to plan my activities for the following year.

This year my plans with the youth in Natural Family Planning Education were not completed, however I have already set in place a program for early in the New Year for the youth in my local area.

What plans as Natural Family Planning Educators have you made for the New Year? Maybe it is local promotion of our service, or targeting a specific group in your local community?

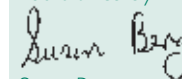
I also like to reflect on my achievements and by doing this it enables me to factor in to my next yearly plan those activities that work.

What worked for you? Maybe it was talks to local midwives about the effectiveness of the Lactation Amenorrhoea Method (LAM) of Natural Family Planning, or maybe it was a visit to a local doctor to introduce him to our service.

Following my reflection time and planning for the coming year I feel that I can take time out over the Christmas session. Christmas is a time for family gathering and celebration of the birth of Jesus Christ. It is also a time to relax and rejuvenate for the following year.

On behalf of the Australian Council of Natural Family Planning I wish you a peaceful and joyful Christmas to you and your families.

Yours Sincerely



Susan Berg
President



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Queensland State Inservice

a report by Noelle Melrose

On the weekend of 18/19 August fifteen teachers gathered for the Queensland State Inservice at Centacare Rockhampton. An added bonus for participants was the opportunity to begin the Inservice by attending the Annual General Meeting (AGM) held on the Friday evening. For some of the newer teachers this was a unique opportunity to meet and get to know the Executive in a way they had not previously experienced.

Rockhampton Natural Family Planning Centre was delighted to be able to offer a warm welcome to the ACNFP Executive, as they met prior to the AGM. Our Bishop, Father Brian Heenan, joined us for dinner on the Thursday evening — a great opportunity for him to meet and welcome Executive members and spouses present. Father Brian is a wonderful support to me as Coordinator and is appreciative of all Natural Family Planning teachers in our Diocese.

Participants at the Inservice gave superb evaluations to presentations. A firm favourite was a presentation by two of the local I.V.F. Clinic staff on "What's New in Reproductive Technology" and an opportunity to have answers for commonly asked questions. The images of the very earliest cell division of the developing embryo dis-



The ACNFP Executive with spouses share a meal with Bishop Heenan. (left to right) Susan and Jouko Berg, Marita Franklin, Noel Melrose, Barry Setter, Ann Nicey, Jane Setter, Noelle Melrose and Bishop Heenan.

played in a Power Point Presentation were of an exceptional quality and reminded us all of the "Miracle of New Life", which can so easily be taken for granted and at times discarded in our society. Another highly rated presentation was "The Art of Educating Adults" by Dr Gerard Goldman.

Our Rockhampton Centre Coordinator, Mrs. Marie Downing, joined us for supper after the AGM and her welcome to the Executive and all teachers was appreciated, as is her continued support of NFP.

On the Saturday evening we joined in celebrating the Eucharist with Fr. Frank Gilbert (a Natural Family Planning teacher some 20 years ago in our Diocese) who then delivered an after dinner speech outlining the history of Natural Family

Planning in the Rockhampton Diocese. It was a wonderful story and was much appreciated and treasured by all here in Central Queensland. The Diocesan Director of Centacare, Mr. Ross Munro and wife Margaret, joined us for dinner and his welcome on behalf of Centacare was very much appreciated.

This dinner was also an opportunity to relax after a big day's work and catch up with old friends or make new friendships. Indeed the whole weekend offered us the opportunity to be nourished professionally, spiritually and personally. We thank our guests from Sydney, Susan, Jouko and Josh Berg; Ann and Kevin Nicey; and Marita Franklin and hope they enjoyed the few days as much as we enjoyed having them visit us and experience a little of this area of Queensland.

Lastly a thank you to all the teachers who gave up a weekend to be here — especially to those who also presented sessions during the Inservice — Helen Barry and Jane Setter, and our President Susan Berg. To Marita Franklin who shared her thoughts and experience on Promotions — a sincere thanks for your professional approach. Whilst the Inservice involved a lot of work by our team in Rockhampton — Maree Thompson, Jane Setter and me — it was very worthwhile.



ACNFP Executive Members (from left) Susan Berg and Marita Franklin (far right) with teachers after the AGM

...continued from p1

they are too. I started with attending Part I in 1999. I was grateful to Mrs. Abdallah for standing by me throughout the training.

The hardest thing was to walk into a room filled with women that I didn't know. I was worried about what they would think of me because I never knew what they knew. But in fact the Part I training weekend introduced me to women feeling a lot like me. The trainers were great and helped us understand. They answered questions beyond my imagination. The whole weekend was a strange experience but Georgette was there to assure me that everything would be okay. And you know, everything was okay.

From that weekend till now I always look forward to meeting the NFP team or attending training because each weekend taught me something new and helped me grow to who I am today.

I want to thank all the educators and trainers but especially Anne McGowan; without her love and strength I do not think I would have reached this stage, along with our Maronite team Odette Younane, Carla Geracitano, Georgette Abdallah and Annette Doyle who believed in me.

With their support the assignments, assessments, presentations, one to one interviews, the failures in presenting, the loss of sleep of the thought of being a failure, being told you're wrong, the practice of presenting over and over, the presentation you prepared being trashed, crude comments from family, friends or pre-marriage students and so on all seemed not so bad. Their support was great especially when I was trying to complete a theology degree, work and have a life at the same time.

Finally I did complete all the training weekends required. I completed my Part III in March 2001. Now along with Carla I educate the Maronite pre-marriage classes on NFP. I am in the process of completing my supervisions for individual clients.

Even though my journey has been long and slow, with the support of the NFP team I know that this is a journey that has changed my life in many ways. I am pleased with who I have become and am going to become. I truly believe that if you are passionate about NFP you can overcome any obstacle that stands as a hindrance in your way.

I do not believe the journey has stopped but it's a path of my life that will be part of me for a long time yet.

Summary of NFP Board's Activities

by Susan Berg

During the 2000-2001 funding period the Natural Family Planning Board of Management met on four occasions. In the 2001-2002 financial year the Board met on 7 June 2001 and plans to meet on 5 March 2002, 4 June 2002, and 8 October 2002. It was the recommendation of the Chairman Bishop Patrick Power that the number of meetings be reduced from four per financial year to three.

Recent outcomes of the Board include:

- The implementation of upgraded insurance cover for the protection of the bishops, program staff and clients of the program. Professional Indemnity Insurance cover now includes both accredited NFP teachers and those accredited persons providing education programs. For those staff not working from a Centacare agency, volunteers are now covered under a Voluntary Workers Insurance policy, and Public Liability cover has also been secured.
- Improved quality control measures have been introduced. The Service Survey provides feedback on our client's needs and enables us to respond to them. The Service Charter informs clients what they can expect as part of our service delivery, and what they can do if they feel their expectations are not realised.
- The long awaited NFP Program Manual was introduced. The manual goes a long way to making sure all agencies are informed, and in regard to statistical data collection, ensures that all data is defined, counted and recorded the same way — an important factor as these figures are used for the annual allocation of the Family Planning Program Grant.
- A NFP Program Workplace study was completed. To ensure proper protection is in place for our staff, the Board will be liaising with the Australian Catholic Church Employment Relations Commission.
- A joint publicity project leading to the development of a generic brochure for pre-marriage programs called "Knowledge & Understanding."
- The formation of a research sub-committee (Dr Tonti-Filippini & Susan Berg) to look at ways of reporting the success rate of NFP that are scientifically valid.

New members Mr Tom O'Donnell (ACNFP Inc) and Mrs Kerry Bourke (OMR&RCA Ltd) commenced duties at the meeting held 18 September 2001.

Natural Health Care and Natural Family Planning

Part I

Treating women from menarche to menopause & the impact of natural therapies on the indicators of ovulation and NFP charts. By Karen McElroy BA, BHSci (Nat)

The fertile lifespan for the female starts with menarche at adolescence and continues through to menopause at midlife. Naturopaths and natural therapists routinely advise and treat women for a myriad of conditions of reproductive origin. This article will explore some of the various treatments for reproductive disorders which may be offered by natural therapists. The information contained in this article should not be used as a substitute for proper naturopathic advice for your clients.

Many NFP counsellors have clients who seek a more natural lifestyle and may consult naturopaths and other complementary therapists for medical treatment. Naturopathic treatments can help to fine tune cycles to enable more accurate charting for NFP purposes.

Common Complaints Across The Spectrum

PMS & DYSMENORRHOEA

Premenstrual syndrome (PMS) affects most women at some stage during their reproductive life. Symptoms include both physical and psychological disturbances, which by definition occur in the luteal phase of the cycle. PMS is thought to only occur in ovulating women, thus many theories regarding the cause of PMS centre on hormonal disturbance. Naturopaths normally try to balance the progesterone/oestrogen ratio through herbal medicine and diet and discuss lifestyle changes which may lead to better management of stress. All of these things can help to decrease the symptoms of PMS.

Dysmenorrhoea often accompanies PMS and is classified as congestive or spasmodic. Congestive pain is the dull dragging pain often noticeable pre-menstrually and is

caused by congestion of blood and fluid in the pelvic region. Spasmodic pain is the classic sharp period pain which accompanies blood flow often with diarrhoea and nausea. This pain is due to spasm of the uterine musculature in response to inflammatory prostaglandins. Both types of period pain are treated well with natural therapies.

PCOS & ENDOMETRIOSIS

Polycystic ovarian syndrome (PCOS) is a complex disorder associated with multiple ovarian cysts plus an array of other signs and symptoms such as androgen excess (acne, male pattern hair growth), obesity, failure to menstruate and/or ovulate. About 75% of women with this disorder develop infertility due to ovulatory failure and only approximately 15% display a biphasic temperature chart. The disorder is not well understood and conventional treatment usually involves dealing with the symptoms. Natural therapies are often prescribed on the basis of fertility androgen excess and blood sugar abnormalities.

Endometriosis is another complex disorder not well understood and associated with infertility. Endometrial implants grow outside the uterus, commonly in the peritoneal cavity (eg. the ovaries, fallopian tubes and bowel). Endometriosis may be caused by retrograde menstrual flow, immune abnormalities, prostaglandins imbalance or excess oestrogen. Other causative factors may include smoking, caffeine, alcohol and IUD use. It is a multifaceted complaint and a range of different causes is likely in different women.

Some women display no symptoms, however pain, PMS, and menorrhagia are common. Pain is often throughout the cycle and

during intercourse and ranges from mild to severe. Most women are seeking some control over their pain and symptoms or want to get pregnant. Natural therapies will usually improve endometriosis and help manage symptoms.

Preconception Care & Fertility Management

Natural therapists see women with undiagnosed infertility and also women who desire concurrent support while on IVF/Assisted Repro treatments. In addition to charting and fertility awareness advice, natural therapists discuss "preconception care".

PRECONCEPTION CARE

The Association for the Promotion of Preconceptual Care (Foresight) in the UK have carried out a lot of research into treating couples in the preconception period to increase their chances of both conception and a healthy pregnancy outcome. Couples following the Foresight programme are given the following advice:

- Avoid contaminants in food and water by eating a nutritious, whole food organic diet.
- Address nutritional deficiencies and heavy metal toxicities.
- Avoid smoking, alcohol, street drugs and other non-essential medication.
- Screen for genito-urinary and other infections (eg: Rubella).
- Identify other problems such as allergy, malabsorption, candida.

Foresight has found that under these conditions it is possible to have uncomplicated pregnancies resulting in strong, healthy and perfectly formed babies. Foresight's three year study found the programme to be particularly successful for couples who had previously experienced problems with recurrent miscarriage or

unexplained infertility. Naturopaths will often advise clients to follow a similar positive preconception care lifestyle for at least three months prior to conception. This takes into account the time it takes for sperm and ova to develop and should encourage a higher quality sperm and egg by the time the couple are ready to conceive.

FERTILITY PROBLEMS

A range of different menstrual disorders can impact on fertility and most can be improved with herbs, diet and lifestyle advice.

IRREGULAR CYCLES

Irregular cycles may be the easiest problem to detect but the cause may be difficult to isolate. Irregular cycles may be simply due to a functional disturbance in hormone levels. Dysfunction at the level of the hypothalamus caused by low body mass index (BMI), stress, rigorous exercise or illness will affect GnRH levels and lead to irregular cycles. More chronic or serious disorders such as PCOS, endometriosis or other endocrine malfunction can also affect the cycle. If a client has no diagnosis, the naturopath will normally attempt to determine the cause behind the irregular cycles and refer to a specialist if pathology is suspected.

A short luteal phase can be corrected with herbs such as Chaste Tree and Peony, however in all cases a consultation with a herbalist is essential. The full range of symptoms the client is experiencing will be taken into account when naturopaths are prescribing individualised herbal medicines as these are not standardised treatments and many factors will determine herb selection.

ANOVULATORY CYCLES & OVARIAN FUNCTION

Anovulatory cycles can be detected with quite good accuracy via temperature charting. Age is the most common culprit in other cases of poor ovarian

function and egg quality. Many women delaying children until their 30's experience difficulty due to declining ovarian function. Women with true anovulatory cycles or erratic ovulation will often start ovulating with herbal strategies to improve ovarian function, egg quality and hormone status. Again, low BMI, stress and extensive exercise may be impeding a woman from ovulating and these would also need to be addressed. It is important to investigate the possibility of LUFs (luteinized unruptured follicle syndrome) where ovulation does not take place despite fertile mucus and temperature signs. This is normally diagnosed by ultrasound and is believed to be a common cause of infertility.

POOR SPERM COUNT/ MOTILITY/QUALITY

Sperm production is a sensitive process and dependent on good nutrition and proper thermal regulation of the testes. Antioxidant nutrients (Vitamin E, C, A, zinc and selenium) have been shown to be useful in treating problems with sperm count, motility and quality. Some herbs are also useful for motility and sperm numbers. Detoxification programmes can be undertaken with success, particularly if the man's profession increases his exposure to toxic metals or chemicals.

REPEATED MISCARRIAGES

Naturopaths will treat women who have a tendency to miscarry with herbs which can help improve hormone levels, and dietary assessment is essential. Preconception care strategies have been shown to result in a lower incidence of miscarriage. Obviously, treatments in the first trimester are not normally advised and referral to a qualified herbalist with experience in treating infertility & pregnancy is absolutely essential in women who have a history of miscarriage.

Part II will be published in the March edition of *The Natural News*.

Natural Health Care and Natural Family Planning prepared by:

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Q & A Q & A Q & A Q & A

Dear NFP Teacher,

I am 48 years old and my husband is 54 years old. I have been using NFP for the past 15 years and have not seen an NFP teacher for 12 years. In the past year my husband has had a serious cancer scare, and fortunately he has recovered quite well. This cancer episode has made us as a couple become very close and we feel that making love together is very important to us now. However in the past year my cycle lengths have changed from 30 days to a range of 23 to 44 days. I get lots of break-through bleeding. I find it difficult to identify fertile mucus. My doctor said I am not yet in the menopausal range but recommended I have my fallopian tubes tied as a contraceptive method. My husband and I are opposed to contraception and sterilization. Can you still help me at this stage of my life?

Lynda, Fremantle.

Dear Lynda,

I am sorry to hear about Paul's episode with cancer but I am so glad he has recovered so well. This time must have been stressful for you both. Stress is often a major factor that can affect a woman's menstrual cycle and mucus pattern. Since the doctor said you are not in the menopausal range it would be good for you to make an appointment to see an NFP teacher.

You mentioned that you have not seen an NFP teacher for 12 years. Now is a great time in your life to refresh your NFP charting and learn additional indicators of fertility to assist you in planning your love making. NFP teachers are trained to assist clients in the phase of life leading up to the menopause. The average age for menopause in Australia is 51 years. I suggest you make an appointment to see an NFP teacher as soon as possible and please feel free to take Paul along with you. This way he can get a better understanding of what changes your body goes through as you approach menopause.

NFP Consultant.

Reports presented at the Annual General Meeting can be found on the ACNFP Website:
www.ozemail.com.au/~acnfp
 or obtained from
Ann Nicey on (02) 9452 5244

Ethical Stem Cells Therapy

healing without killing

The Catholic Church supports ethical stem cell therapy, because it provides the promise of healing without killing. There are wonderful prospects. Only some will come to fruition as progress in healing has been very slow and minimal, limited to juvenile diabetes and Parkinson's disease.



The Church is opposed to human cloning, producing human photocopies as the President of Germany called it. This is also the present position of all civic authorities and the overwhelming majority of scientists, although one Italian doctor Antinori has announced that he is willing to pander to the rich and unscrupulous, who want to try to release on the world copies of themselves.

Human Embryo Experimentation should also be outlawed, especially the misnamed "therapeutic" cloning, where the embryo is destroyed to obtain stem cells, from which the immensely difficult task of cell differentiation and therapy is attempted. Not only are there equal or better ways of producing similar results from adult tissue e.g. producing stem cells from the patients themselves so eliminating problems of compatibility, but the farming of humans, the commercial production of embryos only to destroy them takes us to the brink of that "brave new world" Aldous Huxley warned of in 1932.

Despite their minuscule size, legitimising production and automatic destruction of such human subjects brings us closer to regarding humanity as a commodity, a mere means to other people's ends, more frequently financial than humanitar-

ian. We were all human embryos at one stage. Because of its symbolism, its significance as a barrier and deterrent to further human commodification, the line should clearly be drawn here. We must not embark down this route.

The Christian churches are in no position to impose their views on anyone in these debates, but we have a democratic, as well as a religious duty to contribute to public discussion, to bring to light and public awareness what is actually happening and the moral significance of these developments.

As always the situation contains a mixture of good and bad, genuine promise and illusion, scientific enthusiasm to expand knowledge and healing, as well as the gambling and commercialism which always accompany the possibility of big profits. These will come, but big money will also be lost in bio-technology.

A prerequisite is a bipartisan search for accurate language. When an embryo is destroyed, it is not reprogrammed, not suffering collateral damage, not undergoing therapy. It is destroyed.

By world standards the Australian research efforts in this area are small. World-wide there is much more research on adult stem cells, although Australian embryonic stem cell research, fuelled with unwanted human embryos from fertility clinics, has excess capacity.

In the excitement of the hunt and the striving for commercial advantage the prospects for progress are often overstated and the difficulties and dangers obscured. Stem cell research is not going to produce cures for everything from bigotry to baldness, not even for a range of troubles from ingrown toenails to Alzheimers. We have reasonable prospects of some wonderful advances, but progress will only come at enormous costs, financial

and otherwise. Dolly the sheep first cloned in 1997, came only after 276 unsuccessful attempts and years of striving. In the allied field of In Vitro Fertilization procedures the Australian Government presently spends \$66,000,000 a year, with only a limited success rate and the production of hundreds of thousands of excess human embryos. This is not unconnected with the fact that the human foetus is the least protected species in the world. Contrary to standard medical research procedures and contrary to NHMRC/AHEC recommendations on cloning, there has been astonishingly little research in Australia on primates for stem cell purposes. Are human embryos just another, and more readily available, animal commodity?

For many years science has been driving ahead of public awareness of the law and often been content to work in an ethical vacuum, where a presumed right to know has overridden all other considerations.

Only three Australian States have legislation, and imperfect legislation, in these areas. Such large gaps should be filled by uniform legislation across Australia, after widespread public discussion and consideration of the now published federal parliamentary report. Like the rest of us, the scientific community should continue to be publicly accountable, answerable to the courts and to the parliaments of the Australian people.

All those who appreciate the unique status of humans in the animal kingdom should work to persuade majority opinion to go slowly and carefully, lest a minority of commercial interests take us where we do not want to go, where we should never go.

✦George Pell
Archbishop of Sydney
20 August, 2001

This article was published in *The Australian*

Introducing the Executive Committee

We've already had a chance to meet Susan, Noelle, Evelyn and Ann, but what about the other members of the ACNFP Executive Committee?...

Barry Setter



Barry and Jane have been married for 28 years and have three adult children. They have been involved with teaching NFP for 25 years, and involved with ACNFP for almost as long.

Barry was Co-ordinator of Central Queensland NFP for over 10 years, and had a number of positions on ACNFP Executive, including Treasurer and Chairman of Finance Committee. He holds a Bachelor of Business Degree from Central Queensland University. Coming from outside of a capital city Barry has a special interest in representing the interests of teachers living in rural and provincial areas of Australia. "This important group of teachers has special areas of concern, which differ from those of teachers in capital cities."

Marita Franklin



Marita Franklin is the Director of Catholic Communications in the Archdiocese of Sydney. She joined the National Executive in October 2000, as the Chair of Promotions. Since its inception, the Promotions Committee has undertaken a major review of the quarterly newsletter; re-designed and re-focussed as *The Natural News*, the second edition of which you are now reading. "I believe that Natural Family Planning is worth promoting and that it has a great deal to offer young single women as well as couples."

Wendy Cronk



Teacher Training Committee

(Wendy's profile was missed in the last edition of *The Natural News* where the Teacher Training Committee was profiled).

Wendy has been married for 15 years, and has two children aged 6 and 7. Her nursing background is in midwifery. Wendy has been employed part time in NFP as the Diocesan Coordinator for the past 12 years. "I have a passion for NFP and the benefits it brings to individuals and couples."

WHAT'S HOT & WHAT'S NOT



- ▶ FAST ◀
- ▶ ACCURATE ◀
- ▶ WATER RESISTANT ◀
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Client Quotes

Sub-fertile clients:

- "Just nice to know that your services are here if we need them."
- "I appreciate your concern."
- "I'm glad I'm charting — at least I know what is happening and I find it interesting."
- "My husband reminds me to take my temperature every morning. He feels that he is involved. We feel we are bonding with the baby before it is conceived."
- "The system works — delighted that pregnancy has occurred."
- "I'm excited about finding out about my cycle and the signs to look for to know we are in fertile time."

Clients using NFP to ACHIEVE pregnancy

- "I was so excited seeing my temperature readings stay high. I told my doctor the pregnancy test would be positive."
- "When my temperature readings stayed high I knew what that meant. My husband and I were the first to know we were pregnant."
- "Just wanted to say a BIG THANK YOU! You were an incredible support and fountain of information. So lovely to know someone is at the end of the phone to put my mind at ease."
- "Thank you so much for your support and prayers over the past few months. Our baby is due in early January – we are so happy and so grateful to you and the clinic. What a wonderful service you provide for all couples and families."

International NFP websites and email contacts.

For those 'on the net' who wish to find out what is happening in NFP around the world, here are some suggested sites to visit, prepared by Saskia Ebejer.

| | | | |
|-------------|--------------------------------------------------------------------------------|-------|------------------------------------------------------------------------------------|
| Canada | www.serena-sask.org | email | nfp@serena-sask.org |
| England | www.fertilityuk.org | email | admin@fertilityuk.org |
| New Zealand | www.natfamplan.co.nz | email | nationalcoord@natfamplan.co.nz |
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