## The situation of sexual and reproductive health and rights in the EU, in the frame of women's health

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The Committee on Women's Rights and Gender Equality adopted the own-initiative report by Predrag Fred MATI (S&D, HR) on the situation of sexual and reproductive health and rights in the EU, in the frame of women's health.

## General considerations

The report noted that sexual and reproductive health and rights (SRHR) fall under the competences of Member States and as such, they have a responsibility to ensure access to a full range of SRHR services. Sexual and reproductive rights (SRR) are recognised as human rights in international and European human rights law and violations of SRHR constitute breaches of human rights. All challenges related to SRHR faced within Member States constitute common European challenges.

Numerous reports show that, during the COVID-19 pandemic and lockdown, SRHR services were limited and/or revoked, and there was a disruption in access to essential medical services such as contraception and abortion care, HIV and STI testing, access to female genital mutilation prevention and awareness centres and reproductive cancer screenings, and respectful maternal healthcare, which has had severe implications for women's fundamental right to bodily autonomy.

The COVID-19 pandemic has shown that there is a need to strengthen the resilience of health systems to such crises, to ensure that services related to SRHR continue to be fully available and are provided in a timely manner.

## Improving SRHR in the EU

Member States are called on to:

- ensure access to a full range of high-quality, comprehensive and accessible SRHR, and to remove all legal, policy, financial and other barriers impeding full access to SRHR for all persons;
- progress towards universal health coverage, for which SRHR is essential, including through using, where appropriate, the EU4Health Programme and the European Social Fund Plus (ESF+);
- raise awareness among women of the importance of regular screenings, and to ensure that public health services provide screenings such as mammograms and mammary ultrasonographies, cytology tests and bone density scans;
- implement legislative measures that safeguard physical integrity, freedom of choice and selfdetermination with regard to the sexual and reproductive life of persons with disabilities;
- adopt legislation ensuring that intersex persons are not subjected to non-vital medical or surgical treatment during infancy or childhood, and that their right to bodily integrity, autonomy, self-determination and informed consent is fully respected;

- encourage the widespread availability of toxin-free and reusable menstrual products;
- urgently tackle menstrual poverty by ensuring that free period products are available to anyone who needs them;
- eliminate the so-called care and tampon tax by making use of the flexibility introduced in the VAT Directive and applying exemptions or 0 % VAT rates to these essential basic goods;
- ensure universal access to scientifically accurate, non-judgemental and comprehensive sexuality education and information for all primary and secondary school children;
- ensure universal access to a range of high-quality and accessible modern contraceptive methods and supplies, family planning counselling;
- decriminalise abortion and ensure universal access to safe and legal abortion, and respect for the right to freedom, privacy and the best attainable healthcare;
- ensure that all persons of reproductive age have access to fertility treatments, regardless of their socio-economic or marital status, gender identity or sexual orientation.

Members called on the Commission to develop common EU standards in maternity, pregnancy and birth-related care, and to facilitate the sharing of best practices among experts in the field.

Lastly, the resolution pointed out that the EU and its Member States are experiencing an economic and social crisis, in addition to the sanitary crisis. Member States should consider the health impact of COVID-19 through a gender lens and ensure the continuation of a full range of SRH services through the health systems in all circumstances, in line with international human rights standards.