



HEALTHCARE

→ Everyone has the right of access to preventive health care and the right to benefit from medical treatment under the conditions established by national laws and practices. A high level of human health protection shall be ensured in the definition and implementation of all the Union's policies and activities

The EU Charter of Fundamental Rights upholds the right to healthcare. This right is connected to other fundamental rights such as life, equality, family, privacy and the right to be free from degrading and inhuman treatment. It is intrinsically linked to equality between women and men and opposed to male violence against women and girls, including trafficking for sexual and reproductive exploitation.

The right to healthcare includes mental health as an integral part of health, and this was recognised which Mental health is defined by the European Commission as a state of well-being in which individuals realise their own abilities, can cope with the stresses of life and contribute to their community. The Commission also states that mental illness is associated with many forms of inequalities.

Women are more likely than men to be confronted with external risk factors for mental health. These elements encompass familial and communal control rooted in patriarchy, detrimental customs, violence

and inequalities in the work sector, economic hardships such as unemployment and poverty, and male violence against women and girls, including sexual exploitation.

The right to healthcare includes reproductive rights. However, there are many barriers preventing women from accessing them, such as the criminalization of abortion, lack of sexual education, and accessible information regarding abortion, contraception, sexually transmitted infections or maternal health.

Obstetric and gynaecological violence constitutes an obstacle for women to access their right to healthcare. It is a widespread

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and often overlooked. It includes the practice of medical procedures without informed consent, physical, psychological, and verbal abuses, denial of anaesthesia, support, or respect for a woman's choices during childbirth.

In the context of migration, medical assistance provided at borders often does not account for the sex-specific needs of women and girls and there is an overall lack of specialist medical assistance to victims of rape.

Relevant norms from international legal documents

EU Charter of Fundamental Rights

Article 24

Article 31

International Covenant on Economic, Social and Cultural Rights (ICESCR) (1966) - Article 12

UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

General Recommendation No. 24 Women and Health

Cairo Declaration on Population and Development (1994)

Report A9-0169/2021 of the Committee on Women's Rights

Resolution 2306 of the Parliamentary Assembly of the Council of Europe on 'Obstetric and Gynaecological Violence

Jurisprudence

European Court of Justice

ECtHR, *Pretty v. the United Kingdom* (Application no. 2346/02), 29th of July 2002

ECtHR, *Tysi c v. Poland* (Application no. 5410/03,) 20th of March 2007

European Court of Justice

ECJ, *B.S.M. Geraets-Smits v Stichting Ziekenfonds VGZ and H.T.M. Peerbooms v Stichting CZ Groep Zorgverzekeringen* (Case C-157/99), 12th of July 2001

ECJ, *Gerardo Ruiz Zambrano v Office national de l'emploi (ONEm)* (Case C-34/09), 8 of March 2011

ECJ, *Samira Achbita and Centrum voor gelijkheid van kansen en voor racismebestrijding v G4S Secure Solutions NV* (Case C-157/15), 14th of March 2017

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