



Brussels, 25th November 2018

CIVIL SOCIETY JOINT STATEMENT

International Day on the Elimination of Violence against Women: Time to stop obstetric violence

On this day, we would like to spotlight the need to promote **respectful maternity care**¹ and the **involvement of women and women's groups in decisions** concerning childbirth policies and practices in full compliance with the World Health Organization (WHO) statement², WHO recommendations on positive pregnancy³ and birth⁴, and the UN OHCHR Report of the Working Group on the issue of discrimination against women in law and in practice.⁵

We urge Governments to **eliminate all forms of obstetric and gynecological violence**, institutional⁶ and against women, according to article 12 of the CEDAW Convention⁷ and in compliance with the Istanbul Convention⁸ that defines violence against women as *“a violation of human rights and a form of discrimination against women and [...] all acts of gender-based violence that result in, or are likely to result in, physical, sexual, psychological or economic harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life”*.

Many women across the globe experience disrespectful, abusive or neglectful treatment during pregnancy, childbirth and postpartum care, in high, medium and low-income countries. Such treatments include physical abuse, profound humiliation and verbal abuse, coercive or unconsented medical procedures (including sterilization), lack of confidentiality, failure to get fully informed consent, refusal to give adequate pain relief, violations of privacy, refusal of admission to health facilities, neglecting women during childbirth to suffer life-threatening avoidable complications, and detention of women and their newborns in facilities after childbirth.

Although, in some countries⁹ laws are in place to eliminate obstetric violence, recognised as a specific form of gender-based violence, **in Europe the phenomenon has just been tackled, raising heavy controversies. It is almost impossible for women to report it, as it is considered “normal”,**

1 www.who.int/woman_child_accountability/ierg/reports/2012_015_Respectful_Maternity_Care_Charter_The_Universal_Rights_of_Childbearing_Women.pdf

2 http://www.who.int/reproductivehealth/topics/maternal_perinatal/statement-childbirth-govnts-support/en/

3 <http://apps.who.int/iris/bitstream/handle/10665/250796/9789241549912-eng.pdf?sequence=1>

4 <http://apps.who.int/iris/bitstream/handle/10665/260178/9789241550215-eng.pdf;jsessionid=D3947457CD2C985FDDA08D374EA7D8A4?sequence=1>

5 <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G16/072/19/PDF/G1607219.pdf?OpenElement>

6 <http://www.may28.org/obstetric-violence/>

7 [Convention on the Elimination of All Forms of Discrimination against Women](#) ratified by 175 countries.

8 <https://rm.coe.int/168046031c>

9 Venezuela, Argentina, Mexico, Chile, Brazil



In all those countries women were not believed, advocates have been publicly attacked and defamed, and there were no institutional efforts to address the issue while involving mothers and women's groups in the discussion. Their involvement is crucial in finding the solutions for this systemic, structural and interpersonal issue where the unbalance of power and patriarchal attitude is damaging women, mothers and babies, putting their lives at risk, with significant and unmeasured repercussions on their health and wellbeing.

Therefore, we urge Governments to:

1. Support research and data collection in order to measure the prevalence of obstetric and gynecological violence during pregnancy, childbirth, and postpartum and investigate its impact on the health and autonomy of women;
2. Adopt national strategies on the involvement of maternity healthcare users in the decision-making process, at individual and policy levels;
3. Implement accountability and transparency policies in healthcare facilities allowing users to make informed decisions;
4. Support women's choices on birth settings (including homebirth and midwifery-led birth centers), as part of a regular offer within maternity care;
5. Set up mechanisms for women to report about their childbirth experience without stigma or fear;
6. Regulate a system of remedies and monetary compensation for violations during pregnancy, childbirth and postpartum;
7. Design educational programs on the respect of human rights in childbirth for both health care providers and users, starting from schools to universities;
8. Include women and mothers in educational programs aiming at teaching health care providers how to treat a childbearing woman and babies with dignity and respect.
9. Support midwives by increasing its number and guarantee the one-to-one ratio, setting up studies allowing for direct access to this profession in all countries.
10. Guarantee in any case that human rights defenders will be able to work and provide their support without fear of reprisals, harassment or undue hindrance.

Finally, we are joining the 16-day social media campaign until International Human Rights Day on 10th December 2018 to end obstetric violence around the world. To participate, please use **#obstetricviolence** because **every woman has the right to the highest attainable standard of health, including the right to dignified, respectful health care throughout pregnancy and childbirth, as well as the right to be free from violence and discrimination.**

Notes to Editors - Background



Obstetric violence is the “appropriation of a woman’s body and reproductive processes by health staff, in the form of dehumanizing treatment, abusive medicalization and pathologisation of natural processes, involving a woman’s loss of autonomy and of the capacity to freely make her own decisions about her body and her sexuality, which has negative consequences for a woman’s quality of life.”¹⁴

About Make Mothers Matter

Make Mothers Matter advocates and supports mothers as changemakers for a better world.

Created in 1947, MMM is an international, apolitical and non denominational NGO, with General Consultative Status to the United Nations. www.makemothersmatter.org

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