

Inputs to assist the Working Group on discrimination against women and girls' country visit to Romania

2024

ECPI - Euroregional Center for Public Initiatives and SECS - Society for Education on Contraception and Sexuality (member association of IPPF in Romania), members of ASTRA-Central and Eastern European Network for Sexual and Reproductive Rights, RESPECT Platform for Rights and Liberties and the Anti-discrimination Coalition from Romania, are independent non-profit organizations hoping to assist the Working Group on discrimination against women and girls' country visit to Romania with relevant information concerning the implementation of the rights of women protected in the International Covenant on Economic, Social and Cultural Rights (the ICESCR).

Absence of Comprehensive Sexuality Education

Sexuality education is not a mandatory subject in schools in Romania. *Education for Health* was introduced in the national curricula for public education in 2004 as an optional discipline that does not meet the standards required by comprehensive sexuality education. Issues such as sexual orientation, gender norms, gender identity, prevention of unwanted pregnancies and safe and legal abortion are not discussed. The number of pupils enrolled in *Education for Health* decreased sharply, from 12% in 2011-2012 to below 6% in the 2014-2014¹. Schools and parents are not encouraged by the Ministry of Education to access this form of education. The teachers

¹ Report available on the site of the Romanian Presidency,
https://www.presidency.ro/files/userfiles/Raport_educatie_pentru_sanatate_19_ian_2016.pdf

continue to have no access to specific trainings essential in obtaining skills for teaching issues related to sexuality education, and are particularly reluctant to discuss issues related to puberty and sexuality. The information pupils receive is not rights-based and age-appropriate, while the staff teaching this discipline are not monitored.

The endemic lack of comprehensive, evidence-based sexuality education is one of the contributors to the high rates of teenage pregnancies in Romania. According to data published by EUROSTAT, Romania recorded the highest shares of births of first children to teenage mothers (with 12.3% of total births of first children in 2015).² Despite the Final Observations of 13 July 2017 of the Committee on the Rights of Child, in which it urged Romania to extend the scope of the National Program on Sexual and Reproductive Health (2013-2017) to provide comprehensive, age-appropriate health and sexuality education (CRC / C / ROU / CO / 5, para. 36 (d)), the situation in Romania has not improved. On the contrary, the Romanian Parliament in 2020 voted the Law for amending and supplementing Law no. 272/2004 on the protection and promotion of children's rights, replacing sexuality education with the Health Education. The replacement of sex education with "Health Education" does not correspond to the purpose provided by law (art. 46 paragraph (3) letter i) of Law no. 272/2004 on the prevention of "sexually transmitted diseases and the pregnancy of minors"). At the same time, the elimination of the phrase "at least once a semester" of sex education from the law affects the interests and rights of pupils to regularly receive relevant information with an impact on their overall health, including sexual and reproductive health and rights. In addition, as in the case of any optional discipline in the Romanian education system, the access of adolescents and young people to the health education class is conditioned by the approval issued by their parents.

Barriers to Access to Contraceptive Services and Information

For two decades, Romania has not adopted a National Sexual and Reproductive Health Strategy. The current National Program for Women and Children implemented by the Ministry of Health cannot in any way compensate the lack of public policies in this specific health area. As result, the network of family planning centers created in the 1990s for accessing

²<https://ec.europa.eu/eurostat/web/products-eurostat-news/-/DDN-20170808-1>

reproductive health information and subsidized contraceptives has collapsed after 2013, creating a significant negative impact especially among vulnerable women (unemployed women, teenagers and students, poor women, women from rural area, etc). The number of these family planning centers were reduced to more than 50% since withdrawal of funding, their existence being possible only in state hospitals and limited to consultations and medical advice.

Without the possibility for these centers to offer free or subsidized contraceptives (contraceptives are not reimbursed in Romania), they risk becoming irrelevant to the beneficiaries. No trainings were available for the personnel of these family planning units. In the same time, adolescent friendly services are not available in Romania. The reimbursement scheme for contraceptives is not covered in the latest National Health Strategy 2023-2030, with a disproportionate negative impact upon vulnerable women and girls. This toxic combination between lack of access to contraception and lack of access to accurate information about sexual and reproductive health and rights for women and girls is systematically fueling the high rate of teenage pregnancy in Romania³.

Barriers in the Access to Safe and Legal Abortion Services

The right of women to decide on whether to have a child or not is codified in the Law 46/2003 on Patient's Rights, article 28. Abortion is considered unlawful in the article 201 from the Penal Code when it is performed outside the health care units specially authorized to provide abortion; when it is provided without a woman's consent; or when the pregnancy is over 14 weeks, except in cases of therapeutic reasons. Despite this legislation, women's access to safe and legal abortion is obstructed by the practice of conscientious objection among individual health professionals and sometimes by entire medical units. The doctors refusing abortion are not legally obliged to refer the case to another public hospital able and willing to perform this medical service.

³ Romania is having one of the highest rate of birth among girls in the European Union. In accordance with UNICEF Romania, the birth rate for girls aged 10-14 years old doubled between 1990 and 2020, from 0.18% (percentage of births to girls aged 10-14 in total births in Romania) to 0.37% in 2020: <https://www.unicef.org/romania/documents/policy-brief-prevention-teenage-pregnancy-and-its-consequences>

Abortion on request is not subsidized, while over 30% of public hospitals are refusing legal abortions in accordance with the 2019 study conducted in this area by the Romanian NGOs FILIA and ECPI.⁴ Given the financial shortage the women may face, the lack of information about the medical procedure for termination of pregnancy, the refusal of state medical units to fulfill their legal obligations to perform medical intervention in accordance with the law, and the lack of access to emergency contraception, women in Romania continue to resort to illegal and unsafe abortions, and the situation has worsened since during the COVID pandemic. The Romanian state has failed to adopt legislation banning institutions from invoking conscientious objection that can lead to between unsafe, illegal abortions, maternal mortality and morbidity, in particular in the rural areas. Abortion services in Romania do not meet the standards of accessibility (including financial accessibility) and availability, while the number of cases in which doctors try to discourage women and girls in need of abortion is on rise.

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⁴ Research report „Refusal to perform abortion on request in Romania” (2019), available in Romanian at <https://centrulfilia.ro/new/wp-content/uploads/2021/01/Raport-avort-2019.pdf>