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## The situation of Roma in Europe and relevant activities of the Council of Europe

Opinion<sup>1</sup>

Committee on Equal Opportunities for Women and Men

Rapporteur: Ms Elvira KOVÁCS, Serbia, Group of the European People's Party

### 1. Conclusions of the Committee

The Committee congratulates the Committee on Legal Affairs and Human Rights on its comprehensive report, and supports the draft resolution and draft recommendation tabled. However, it wishes to propose some amendments to better integrate the gender dimension, since Roma women and girls risk double, if not triple discrimination: as Roma by the wider community, and as women and girls by both the wider and their own community.

### 2. Explanatory memorandum by Ms Kovács, rapporteur

#### 2.1. Introduction

1. First of all, I would like to congratulate my fellow rapporteur, Mr Berényi, on his excellent and comprehensive report.

2. In my opinion, I would like to focus on the triple discrimination Roma women and girls face: as Roma by the wider community, and as women and girls by both the wider and their own community.

3. This discrimination involves not only the forced sterilizations practiced in some countries mentioned by Mr Berényi, but also forced and arranged child marriages which constitute a human rights violation and lead to very substantial high-school drop-out rates, as well as early pregnancies and other negative consequences. In addition, Roma girls and women are forced into gender-specific roles both inside and outside their own community, with bad effects on their autonomy, health, possibility to work outside the house, and their general well-being.

4. Roma women need social and legal support to improve their socio-economic status and to ensure their access to education and health as preconditions for employment, as well as protection from the above-mentioned triple discrimination.

<sup>1</sup> Reference to Committee: Bureau Decision of 20 April 2007. Reporting Committee: Committee on Legal Affairs and Human Rights. See Doc. 12174. Opinion approved by the Committee on 27 April 2010.

## 2.2. *Violence against Roma women*

5. Violence against Roma women is systematic and widespread and takes place both within and outside their community. Within the community, violence against women often takes the form of domestic violence. A great number of Roma women report having been victims of domestic violence at the hands of their husbands, in many cases for long periods of time.

6. Different forms of domestic violence against women and girls are reported, including: early and forced marriages, rape and marital rape, physical, economic and verbal abuse. The reasons given for staying in abusive relationships are: fear of shame and stigmatization from the family and community, economic dependency, lack of property or other places to go and hesitation to “break the family”. In many cases, Roma women also lack marriage certificates, and are thus subject only to common-law.

7. Roma tradition dictates that when a woman marries she should abandon her house and move into the house of her husband and in-laws. In case of separation, the family of the woman may not allow her to move back into her previous household forcing her to stay in the abusive relationship. In those cases in which the couple moves into their own household, the property is in almost all cases legally owned by the husband which forces the woman to stay.

## 2.3. *Education of Roma girls*

8. Roma girls face a number of barriers in accessing education as reflected in higher illiteracy rates among Roma women compared to Roma men and significantly higher ones compared to non-Roma men and women (fewer than half of all Roma girls in Europe have more than a primary education). Barriers commonly faced by Roma women are based on high rates of poverty and patriarchal traditions which result in lower expectations for Roma girls to complete their education. Roma girls are burdened with family obligations (such as household tasks, or looking after younger siblings) from a very early age. Also, the tradition of remaining a virgin until marriage (reinforced by the practice of virginity testing) is still very common among Roma families and is closely linked to high school drop out rates of Roma girls in puberty. Their families fear that defloration can happen in schools which would bring “shame” to the girl and her family.

9. The clash between education and the tradition of early marriage should be a central matter. The problem of discrimination against Roma women must be explored further from the standpoint of the negative impact upon girls who must forsake personal education in favour of shouldering family responsibilities due to the tradition of early marriage combined with teen pregnancy.

## 2.4. *Health of Roma women and girls*

10. The inequality reinforced by gender-specific structures further limits Roma women’s opportunities to enjoy the highest attainable standards of health. In many instances, lack of equal opportunities to access health care is aggravated by the disadvantaged position of Roma women in comparison to Roma men in social fields such as education and employment. As a result of fewer opportunities to access the labour market and lower educational levels, Roma women are more likely to be excluded from health insurance. Exclusion from the health care system has a disproportionate impact on Roma women’s health.

11. Discrimination against Roma women in the area of health care is particularly evident in the areas of reproductive and maternal health and emergency care due to these being the most commonly used health care services. There is a particular reluctance to see the gynaecologist as a result of shame caused by a patriarchal education.

12. Particular attention should be paid to the health education of adolescents, including information and counselling on all methods of family planning, since a very small number of Roma women use contraception and the number of abortions among them is very high. The main reason for this is the lack of information about different anti-contraceptive methods and opposition from husbands.

13. Advice on family planning should be included in the education process and family codes developed which guarantee women's rights to decide freely and responsibly on the number and spacing of their children. It should include a proper understanding of maternity as a social function and the recognition of the common responsibility of women in the upbringing and development of their children.

14. Coercive sterilization has been a particularly problematic practice imposed on Roma women, in particular in certain Central and Eastern European countries (though there have also been some cases in Sweden). Sometimes described as a hold-over from Communist times, sterilization without prior full and informed consent has been performed as recently as 2007 and 2008. It is hard to know exactly how many Roma women have been subjected to this serious human rights violation, since it is hard for the victims to report the crime for many reasons – many women find out late, if at all, that they have been sterilized, and resulting feelings of shame and unworthiness can lead them to keep it even from their family, and even more so from the wider community or from lawyers. In addition, admittance of wrongdoing and apologies have often been proffered only after lengthy (court and ombudsman) proceedings, with little hope of winning damages. It can be hoped that, following recent findings at international level, for example by the CEDAW Committee, this will change and victims will start finding the heart to come forward and claim – and receive – damages – as happened recently in Hungary, Slovakia and the Czech Republic.

#### *2.5. Measures to address multiple discrimination affecting Roma women*

15. **Health policies** for Roma women should take into account the range of factors influencing higher exposure of Roma women to health risk factors as well as disproportionate exclusion from access to health care. Governments should undertake the following:

- examine how ethnicity and socioeconomic status affect Roma women's health;
- ensure that existing laws and policies in favour of gender equality include provisions for preventing and addressing the multiple barriers female members of minority groups face in exercising their fundamental human rights;
- provide on a regular basis outreach services to reach Roma women and girls who otherwise have little access to medical services;
- implement patient-oriented educational health programmes for Roma women;
- ensure the availability of continuing medical education taking into account social and cultural factors with regard to the health of Romanwomen;
- develop, support and evaluate interventions for preventing violence, including domestic violence. Governments should provide protection to domestic violence victims in terms of intervention; investigation and assistance, taking into account the specific challenges and situation of Roma women.

16. Regarding **coercive sterilisation**, Roma women are particularly vulnerable to abuse by medical practitioners at the time of pregnancy and childbirth. Practices of extreme abuse include death after childbirth, serious damage of the women's health, as well as forceful termination of the women's reproductive capacity through coercive sterilization. Roma women are at risk of being subjected to sterilization without their full and informed consent, without an explanation about the intervention, its nature, possible risks, or what the consequence of being sterilized would be. Instances of coercive sterilization of Roma women have occurred in a number of Council of Europe member states.

17. Governments should ensure to women appropriate services in connection with pregnancy, confinement and the post-natal period. Acceptable health care services should be delivered in a way which ensures women's fully informed consent, respects their dignity, and guarantees the taking into account of their needs and perspectives. In order to remedy the damage done to victims of coercive sterilization as well as preventing occurrence of similar extreme violations of patient's rights, governments concerned should undertake the following:

- establish an independent commission to investigate the allegations and complaints of coercive sterilisation; thoroughly investigate reported cases and make available procedures for women who believe they have been abusively sterilised, to report the issue. These procedures should ensure privacy rights. It is necessary to provide justice to all victims of coercive sterilisations;
- review the domestic legal order to ensure that it is in harmony with international standards in the field of reproductive rights;
- promote a culture of seeking full and informed consent for all relevant medical procedures.

18. **Forced marriages and child marriages** should no longer take place in our societies that uphold human rights and the rights of the child. We should be aware that in a lot of European countries, women and

girls in Roma communities are victims of child marriages. Governments have a responsibility to protect and preserve minority cultures such as that of the Roma, but an even greater responsibility to prevent traditions which harm individuals – in this case, Roma girls.

19. It is a violation of the human rights of these women and girls that, under the cloak of respect for the culture and traditions of the Roma community, there are authorities which tolerate forced marriages and child marriages although they violate the fundamental rights of each and every victim. It is necessary for national authorities to change their national legislation (if they have not already done so) and to firmly enforce the law, but it is also necessary to work towards a cultural change, where the whole Roma community evolves and joins the fight against the human rights violation which is an early or forced marriage.

20. Roma women should be guaranteed the exercise and enjoyment of human rights and fundamental freedoms on a basis of equality with men. Their legal status should not be linked to marriage, making them dependent on their husbands, marriage and family relations. It is necessary to assert the equal rights and obligations of Roma women and men with regard to the choice of spouse, parenthood, personal rights and command over property. They need to be enabled to choose a spouse freely and to enter into marriage only with free and full consent. They must have the same rights and responsibilities during marriage and at its dissolution; as well as parents, in matters relating to their children; and the same personal rights as husband and wife, including the right to choose a family name, a profession and an occupation.

21. Thus, the national parliaments of the Council of Europe member states should adapt their domestic legislation, if they have not already done so, in order to:

- fix at or raise to eighteen years the minimum statutory age of marriage for women and men;
- make it easier for forced and child marriages to be prevented, detected and annulled and to bring to justice the perpetrators of rape within such marriages, as well as those who aided and abetted the contracting of such a marriage;
- take a number of specific practical measures, such as: making it compulsory for every marriage to be declared and entered by the competent authority in an official register; institute an interview between the registrar and the bride and groom prior to the celebration of the marriage and allow a registrar who has doubts about the free and full consent of either or both parties to summon either or both of them separately to another meeting.

### **3. Proposed amendments to the draft resolution**

#### ***Amendment A:***

In the second sentence of paragraph 7, replace “and health care” with:

“health care and political participation”

#### ***Amendment B:***

After sub-paragraph 16.3., add a new sub-paragraph worded as follows:

“ensure that Roma girls are given equal opportunities in education, in particular, secondary education, which too many Roma girls are obliged to drop out of because of parental and/or community pressure linked to early marriages, teenage pregnancies, and household and family responsibilities;”

#### ***Amendment C:***

Add at the end of sub-paragraph 16.5.:

“in particular, Roma girls;”

#### ***Amendment D:***

After sub-paragraph 17.3., add a new sub-paragraph worded as follows:

“as a priority, address the problem of domestic violence within the Roma community, in particular violence against women and girls, as well as the human rights violation of forced and child marriages in accordance with Assembly Resolution 1468 (2005) on the subject;”

**Amendment E:**

After sub-paragraph 19.2., add a new sub-paragraph worded as follows:

“provide on a regular basis outreach services to reach Roma women and girls who otherwise have little access to medical services, pay special attention to gynaecological and maternal health, and ensure the availability of continuing health education (in particular sexual and reproductive health education) taking into account social and cultural factors influencing on the health of Roma women;

**Amendment F:**

After paragraph 23, add a new paragraph worded as follows:

“The Assembly calls on the Roma community and its representatives to fight discrimination and violence against Roma women and girls in their own community. In particular, the problems of domestic violence and of forced and child marriages, which constitute a violation of human rights, need to be addressed also by the Roma community itself. Custom and tradition cannot be used as an excuse for human rights violations, but should instead be changed.”

**4. Proposed amendment to the draft recommendation**

**Amendment G:**

After sub-paragraph 3.1., add a new sub-paragraph worded as follows:

“when dealing with Roma issues, pay special attention to the situation of Roma women and girls, who face double, if not triple discrimination: as Roma by the wider community, and as women and girls by both the wider and their own community.”