



Mrs. Stella Kyriakides
Commissioner for Health and Food Safety

Dear Mrs. Kyriakides,

EU Member States are dealing with unprecedented challenges arising from the novel coronavirus (COVID-19) and health systems are now focused on social distancing and avoidance of non-urgent, non-COVID-19 related medical care. Unfortunately, the strains on our health systems and the difficulties are not being borne equally by the population - pregnant women in particular - still require competent and compassionate labor, birth and postpartum care.

We have been approached by the international NGO “Human Rights in Childbirth” regarding concerns about the negative consequences to labor and birth care as health systems focus on tackling COVID-19. In this time of a health crisis, changes are being made to the provision of pregnancy and birth care which are not based on scientific evidence, WHO guidelines or guidelines of relevant European professional organisations. Those changes are arguably unnecessary and, in many cases, not proportional to the response required to the COVID-19 pandemic. For example, we are informed that:

- Maternity services are being de-prioritised with regards to adequate staffing, personal protective equipment for staff and access to needed resources
- Community and out of hospital maternity services (including midwifery units and home birth) are being closed down without warning
- Women are being forced to submit to unwanted inductions and scheduled caesarean sections with no obstetric indication
- Women are being separated from their newborn infants
- Women are being denied the right to a companion in labour and birth, as well as visitors

All citizens are entitled to the protection of their right to the highest attainable level of health during this crisis. Mothers and babies should be no exception to that rule. The countries that have responded well to the needs of pregnant and birthing women strongly indicate that the aforementioned restrictions are unnecessary and disproportionate to the level of the needed safety and health requirements in relation to COVID-19 prevention and protection. There are a number of good practice examples in some countries where, through systematic human-rights based approach, due changes have been made in order to protect the right to health at the highest attainable standard, with measures in place to protect both the medical staff as well as women and children in childbirth and pre and post-natal care. For example, some countries have ensured safety by acquiring adequate staffing and protective equipment as part of the targeted actions, while others have converted hotels near maternity hospitals into temporary birth centres to support both healthy non-symptomatic women and protect maternity healthcare workers from COVID-19 exposure. This is a measure implemented to ensure access to a safe childbirth environment, thus not allowing the situation of women giving birth in medical transportation vehicles and similar, which has happened in some instances where due measures were not taken. Other countries encourage birth companions and ensure the safety of all medical staff and patients in doing so with the implementation of protective restrictions on movement within hospital facilities. Health systems should not be actively engaged in damaging the health and well-being of pregnant women, mothers and babies.



Some **next steps** regarding the protection of women's rights in maternity care include:

- Ensuring **adequate resources for maternity care**, including staffing and protective equipment
- Ensuring that there are **policies in every country and facility guaranteeing women companionship during labour and birth**, in accordance with best evidence from WHO and other organisations that are monitoring the situation in real-time (e.g. the Union of European Perinatal and Neonatal Societies, and a consortium of Royal Colleges from the UK)
- Implementing, reinstating and resourcing **midwifery units and home birth services**
- Ensuring that **policies** during the COVID pandemic are **based on evidence and facts**, not fears

We call upon you as the Commissioner for Health to **support activities which ensure the achievement of the fundamental right to health** and ask you to urge Member States to **ensure that maternity services are appropriately resourced and that women's rights are respected** through a **proportional response** to the pandemic in accordance with the best evidence and guidelines, including those provided by the WHO.

Sincerely yours,

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