

Barometer

of Women's Access to Modern Contraceptive Choice in 16 EU Countries

CALL TO ACTION





- Sophie in 't Veld, =

Member of European Parliament (MEP) ALDE, The Netherlands

"The political debate on the role of women in society should pay more attention to easy access to modern contraception, as this plays a fundamental role in ensuring women's autonomy. Yet policy and the political debate about the role of women in society have paid little attention to how easily they can access it. The EU must play as strong a role as possible in defending and strengthening the fundamental rights of women and girls. It can make a concrete contribution by supporting the collection of strong pan-European data, the carrying out of more comprehensive research, and the sharing of best practice between countries. Decision-makers must put health and rights at the heart of EU policy-making starting by including SRHR in the Commission's new EU Health Strategy."

The Barometer of Women's Access to Modern Contraceptive Choice¹ in 16 European Union (EU) countries, highlights the unfortunate trend that EU member states are continuing to fail in their commitments to improve equitable access to modern contraceptive needs.

The Barometer provides a comparative policy and status overview on **women's** access to modern contraceptive choice² across the following 16 EU member states: Bulgaria, Cyprus, Czech Republic, Denmark, Finland, France, Germany, Ireland, Italy, Latvia, Lithuania, The Netherlands, Poland, Romania, Spain and Sweden.

Significantly, the research shows that very few policies have improved since 2013³, and alarmingly in most countries, the situation has stagnated, or even worsened, over the past few years. Similarly, in the six new countries examined, women continue to face many challenges.

The Barometer pinpoints a worrying trend in the erosion of human rights, and the need to substantially improve equitable access through consistent, targeted policies. It also illustrates the **urgent need to re-establish reproductive health as a priority policy on the EU and national agendas.**



The Barometer partners, IPPF EN (International Planned Parenthood Federation European Network), The European Society of Contraception and Reproductive Health (ESC) and The International Centre for Reproductive Health (ICRH), **call on national decision-makers to support the implementation of a comprehensive approach to contraceptive choice in the 16 countries within a broader sexual and reproductive health and rights (SRHR) agenda.** This is fundamental to ensuring the wellbeing of all women and girls, particularly the most vulnerable and is a crucial precondition to allowing women and couples the freedom to choose parenthood or not.

It is a competence of member states to formulate and implement SRHR policies at a national level. Yet, when it comes to public health and non-discrimination, the EU can exercise policy-making, foster research and the exchange of best practices, and better support the implementation of SRHR at national level. Therefore, the partners call for a structured dialogue involving all relevant stakeholders at EU and national levels. Additionally, we urge the EU to make a greater investment in SRHR research and data collection.

Eight different policy areas and corresponding Policy Benchmarks were identified and used as a reference to evaluate and rate the countries' situation with regard to access to modern contraceptive choice.

- **▶••• Policy making and strategy**
- General awareness of sexual and reproductive health and rights (SRHR) and modern contraceptive choice
- **▶ 3** Sexuality education at schools
- >-4 Education and training of healthcare professionals and service providers
- Provision of individualised counselling and quality services
- **▶6** Existence of reimbursement schemes
- Prevention of discrimination
- Empowering women through access to modern contraceptive choice

The key findings and recommendations in each of the eight policy areas identified provide a fundamental basis for a road map towards the development of concrete policies, which address the unmet need for improved, equitable access to modern contraceptive methods.

Overview Country Specific Total across all Policy Benchmarks



→ Hey Findings and Policy Recommendations ➤

The section below presents the Barometer's key findings and recommendations in each policy area that EU and national policy makers need to embrace in order to ensure appropriate policy focus and progress in both access to modern contraceptive choice and the promotion of women's empowerment.

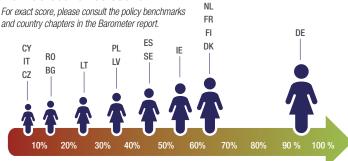
▶ Policy making and strategy

Key findings

In most countries, shifting political priorities have resulted in weak monitoring and evaluation of SRHR policies, and strategy development has been put on hold. Religious influence continues to present a barrier, with stakeholder development varying from country-to-country.

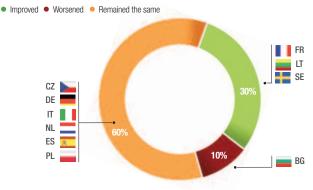


How do countries score?



Policy recommendations

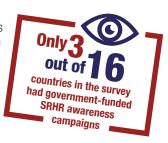
- Develop an integrated and comprehensive national SRHR policy framework addressing all key components of an effective approach to increase access to modern contraceptive choice (see the eight Policy Benchmarks).
- Systematically involve all relevant stakeholders in the development, implementation and evaluation of SRHR policies and strategies.
- Ensure effective implementation of SRHR policies through appropriate funding and efficient monitoring and evaluation systems, including a comprehensive set of relevant indicators.



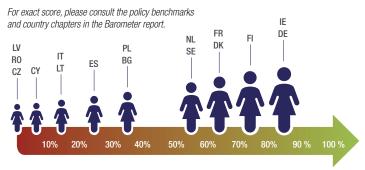
→•2 General awareness of SRHR and modern contraceptive choice

Key findings

A lack of political support and resources has resulted in poor monitoring and evaluation systems, and low public awareness of SRHR and contraceptive choice across most countries. Not all stakeholders are involved in campaign development; only two countries initiated campaigns referring to the role of fertility control and modern contraceptive choice for women.

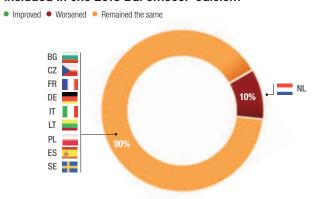


How do countries score?



Policy recommendations

- Ensure regular awareness campaigns on SRHR, including information on the full range of modern contraceptive methods.
- Ensure appropriate involvement of all key stakeholders at all stages.
- Address fertility control in the framework of awareness campaigns on gender equality and equal opportunities for women.



▶ Sexuality education at schools

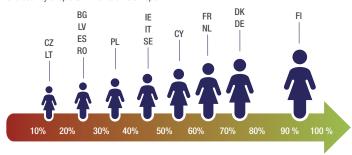
Key findings

Sexuality education varies from country-to-country, with many relying significantly on the personal knowledge and views of individual teachers. Opposition from conservative and religious groups creates barriers in some countries, and only a few countries have government-targeted measures for vulnerable people.

Sexuality education is only mandatory in just over 500/0 of the Countries but it is insufficient as it lacks complete scientific information on the full range and use of contraceptives

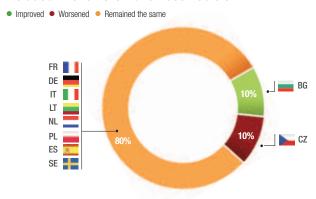
How do countries score?

For exact score, please consult the policy benchmarks and country chapters in the Barometer report.



Policy recommendations

- Ensure evidence-based and mandatory comprehensive sexuality education for all pupils.
- Ensure allocation of sufficient resources to sexuality education across the country.
- Develop content guidelines for comprehensive sexuality education programmes and provide appropriate training to teachers.



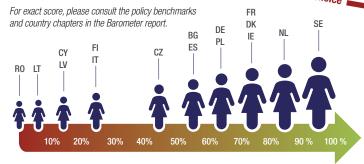
▶ ■ ■ Education and training of healthcare professionals and service providers

Key findings

Poor credible and qualitative guidelines on modern contraceptive service delivery for healthcare professionals exist across many countries, with religious and conservative opposition creating obstacles in some countries.

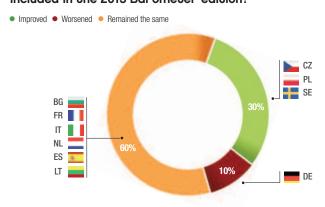
Authorities in
THE MAJORITY
Of countries do not
support education
programmes and postgraduate
training on fertility control,
family planning and
contraceptive choice

How do countries score?



Policy recommendations

- Develop and implement evidence-based guidelines for healthcare professionals on modern contraceptive choice based on standards set by the World Health Organization (WHO).
- Implement provisions to inform professionals on the latest scientific evidence.
- Develop and implement mandatory education programmes and postgraduate training.



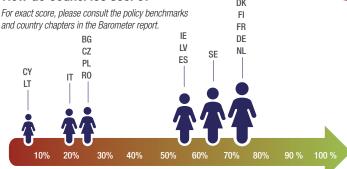
Provision of individualised counselling and quality services

Key findings

A lack of monitoring and evaluation on guideline implementation and quality standards of individualised counselling pervades across almost all countries. Religious opposition influences the provision and delivery of services in some countries, and in less than half, facilities are insufficiently equipped to provide the full range of contraceptives nationwide.

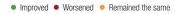
10 COUNTRIES
have postgraduate programmes
on individualised counselling and
less than 50%
of all countries have
satisfactory training for
healthcare professionals
and service providers

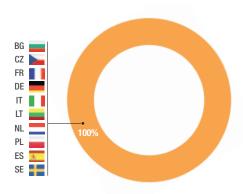
How do countries score?



Policy recommendations

- Implement minimum quality standards and improve accessibility to ensure that individualised counselling is a key component of quality SRHR services.
- Develop and regularly update guidance for healthcare professionals on individualised SRHR counselling.
- Include individualised counselling as key objective of the medical curriculum and practicum.





▶ 6 Existence of reimbursement schemes

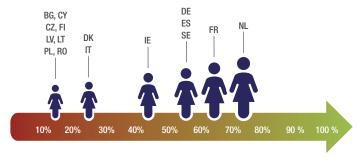
Key findings

In all countries, persisting inequalities remain, with financial constraints negatively impacting reimbursements; less than half of all countries have a reimbursement scheme. The differences in availability of certain contraceptives are challenging, although some countries have attempted to address social and economic barriers faced by vulnerable groups.



How do countries score?

For exact score, please consult the policy benchmarks and country chapters in the Barometer report.



Policy recommendations

- Ensure equal access and availability of all modern contraceptive methods across the country.
- Develop adequate reimbursement schemes for modern contraceptive methods that address financial barriers of young women and vulnerable groups.
- Ensure regular review of reimbursement schemes.



> Prevention of discrimination

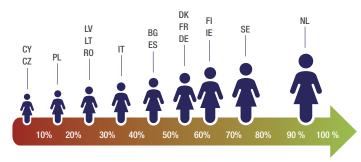
Key findings

Policy measures to ensure equitable access to modern contraceptive choice fail to consider economic and social barriers, with little focus on vulnerable groups. Quality of SRHR services has also been seriously compromised due to budget cuts in several countries.



How do countries score?

For exact score, please consult the policy benchmarks and country chapters in the Barometer report.



Policy recommendations

- Develop targeted provisions to address social and health inequalities in all SRHR policies.
- Address stigma as a barrier to seeking and providing SRHR and counselling services.



▶ Empowering women through access to modern contraceptive choice

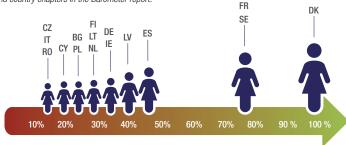
Key findings

Gender equality and women's empowerment is aimed at improving women's participation in the workforce and work-life balance, in most countries. Although monitoring and evaluation schemes are in place in half of the countries examined, they rarely inform policy review.

countries include fertility control and access to modern contraceptive choice as components of gender equality policies

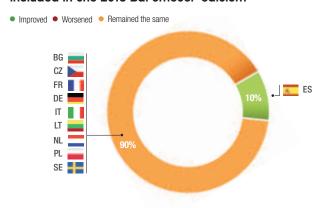
How do countries score?

For exact score, please consult the policy benchmarks and country chapters in the Barometer report.



Policy recommendations

- Develop specific measures to improve access to contraceptive choice in the context of gender equality policies.
- Implement nationwide monitoring systems to assess the effectiveness of gender equality policies, including a comprehensive set of relevant indicators.



→ Methodology ➤

To ensure consistency in both Barometer editions, the same methodology was used for the increase from 10 to 16 countries regarding the collection of information, analysis and rating of countries' input.

Country data were collected via an online multiple choice questionnaire by IPPF EN Member Associations and other independent national experts. Respondents selected the multiple choice answer that best described their country reality.

The full Barometer report*, multiple choice questionnaire and scoring overview can be found at http://www.ippfen.org/resources/barometer-2015-womens-access-modern-contraceptive-choice.

For more information, please do not hesitate to contact IPPF EN at info@ippfen.org or IPPF Senior Programme Advisor, Marieka Vandewiele

*Printed in January 2015.

→ About the Partners



The International Planned Parenthood Federation European Network (IPPF EN) represents one of the six regions of the International Planned Parenthood Federation, the strongest global voice safeguarding sexual and reproductive health and rights (SRHR) for people everywhere. IPPF EN led the development of the Barometer reports.

For more information about IPPF EN, visit www.ippfen.org

The data collection in the countries was led by the following:

IPPF member associations:

- Bulgarian Family Planning and Sexual Health Association (BFPA), Bulgaria
- Cyprus Family Planning Association (CFPA), Cyprus
- Czech Family Planning and Sexual Health Association (SPRSV), Czech Republic
- Danish Family Planning Association (DFPA), Denmark
- Väestöliitto, Finland
- Pro familia, Germany













- Irish Family Planning Association (IFPA), Ireland
- Papardes Zieds, Latvia
- Family Planning and Sexual Health Association (FPSHA), Lithuania
- Rutgers, The Netherlands
- Family Planning Association (TRR), Poland
- Romanian Society for Education on Contraception and Sexuality (SECS), Romania
- Spanish Family Planning Association (FPFE), Spain















Lead experts or organisations:

- Italian Medical Society for Contraception (SMIC), Italy
- Dr. Elisabeth Aubény, France
- Dr. Lena Marions, Sweden

Endorsed by:





www.escrh.eu

The European Society of Contraception and Reproductive Health (ESC) and the International Centre for Reproductive Health (ICRH) are not accountable for the quality of the data collection and analysis.

References

- 1. Printed in January 2015
- "Modern contraceptives' in this report refers to all non-emergency, reversible contraceptive methods enabling young
 people and young adults to prevent unintended pregnancies. They include a range of different methods, namely,
 male and female condoms, diaphragms, oral contraceptives, vaginal contraceptive rings, contraceptive patches,
 deport injections, and long-acting reversible contraception (LARC), e.g. intra-uterine systems (IUS), intra-uterine devices (IUD), and sub dermal implants (SDI).
- 3. http://www.ippfen.org/sites/default/files/Barometer_Apr2014.pdf





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