

**Question for oral answer O-000091/2012
to the Commission**

Rule 115

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Subject: Access to contraceptive services and information in EU Member States

Reproductive freedom lies at the heart of public health and equality. The Commission has committed itself to supporting policy coordination and exchange of best practice in order to combat health inequalities between Member States. Modern contraceptives constitute a highly effective form of preventive healthcare, preventing unwanted pregnancies as well as decreasing the need for abortions, and are key to achieving substantive health and gender equality. However, in several Member States, access to contraceptives is severely restricted, primarily thanks to lack of state subsidies and accurate information on the matter.

The Commission's health and gender equality projects do not prioritise the reproductive health of women or access to contraceptive services. For example, the 88 health indicators developed by the Commission do not include contraceptive prevalence or unmet need for contraceptives. The REPROSTAT/Reproductive Health Report project will not be continued, and it is unclear how its outcomes will be employed. The Commission's Health for Growth Programme (2014-2020) contains no references to sexual and reproductive health. This has detrimental effects on the health and wellbeing of, especially, low-income women, adolescents, and women in violent relationships.

1. What is the Commission doing to ensure that data on contraceptive prevalence and unmet need for contraception is systematically collected from all Member States, in its efforts to reduce health inequalities?
2. What is the Commission doing to develop initiatives and the sharing of best practice on access to contraceptives between Member States?
3. What is the Commission doing to ensure that barriers in accessing contraceptives, including lack of insurance cover, high costs, and lack of accurate and non-judgmental contraceptive information, are addressed in its health and gender equality initiatives?
4. How will the Commission follow up the wide range of outcomes of the REPROSTAT/Reproductive Health Report project in its health equality initiatives, and how will it act on the recommendations of the 2011 final report?

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