



2025/2074(INI)

6.3.2026

AMENDMENTS

31 - 354

Draft opinion
Catarina Martins
(PE784.154v01-00)

Gender inequalities in health, specifically as regards gender-specific conditions
(2025/2074(INI))

Amendment 31
Margarita de la Pisa Carrión, Viktória Ferenc

Motion for a resolution
Citation 5

Motion for a resolution

Amendment

- *having regard to its resolution of 17 December 2025 on the European citizens’ initiative entitled ‘My Voice, My Choice: For Safe and Accessible Abortion’²,*
- deleted*

² *Texts adopted, P10_TA(2025)0338.*

Or. en

Amendment 32
Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Citation 5 a (new)

Motion for a resolution

Amendment

- *having regard to the Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention) ratified by the EU on 28 June 2023^{1h},*

^{1h} *Elimination of violence against women: Two years since the EU ratified the Istanbul Convention, EPRS, 19/11/2025*
https://eprs.in.ep.europa.eu/eprs/auth/en/product_2.html?id=364238&ref_id=undefined&src=2&q=id%3A364238%2BAND%2Bsrc%3A2

Or. en

Amendment 33

Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Citation 5 b (new)

Motion for a resolution

Amendment

– *having regard to the Directive (EU) 2024/1385 of the European Parliament and of the Council of 14 May 2024 on combating violence against women and domestic violence,*

Or. en

Amendment 34

Margarita de la Pisa Carrión, Viktória Ferenc, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Citation 6

Motion for a resolution

Amendment

– *having regard to its resolution of 24 June 2021 on the situation of sexual and reproductive health and rights in the EU, in the frame of women’s health³,* *deleted*

³ OJ C 81, 18.2.2022, p. 43.

Or. en

Amendment 35

Margarita de la Pisa Carrión, Viktória Ferenc, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Citation 6 a (new)

Motion for a resolution

Amendment

– *having regard to the Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine, entitled “Convention on Human Rights and Biomedicine”, also known as the “Oviedo Convention”, of 4 April 1997,*

Or. en

Amendment 36

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Citation 8 a (new)

Motion for a resolution

Amendment

– *having regard to the draft Council Conclusions of 28th November 2024 on “Strengthening Women’s and Girls’ Mental Health by Promoting Gender Equality”,*

Or. en

Amendment 37

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Citation 9 a (new)

Motion for a resolution

Amendment

– *having regard to the Commission communication of 5 March 2020 entitled “A Union of Equality: Gender Equality Strategy 2020-2025” (COM(2020)152 final),*

Amendment 38

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Citation 10 a (new)

Motion for a resolution

Amendment

– *having regard to the European Commission: Directorate-General for Justice and Consumers, Fondazione Giacomo Brodolini (FGB) and Scientific Analysis and Advice on Gender Equality in the EU (SAAGE) ‘Case studies on obstetric violence – Experience, analysis,*

Amendment 39

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Citation 13 a (new)

Motion for a resolution

Amendment

– *having regard to the European Parliament study on ‘Obstetric and gynaecological violence in the EU - Prevalence, legal frameworks and educational guidelines for prevention and elimination’,*

Amendment 40

Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Citation 13 b (new)

Motion for a resolution

Amendment

– *having regard to EIGE’s Gender Equality Index 2025,*

Or. en

Amendment 41
Sirpa Pietikäinen

Motion for a resolution
Citation 16 a (new)

Motion for a resolution

Amendment

– *having regard to the UN Convention on the Rights of Persons with Disabilities (UNCRPD), which entered into force for the EU on 22 January 2011 in accordance with Council Decision 2010/48/EC of 26 November 2009 concerning the conclusion, by the European Community, of the United Nations Convention on the Rights of Persons with Disabilities[1], [1] OJ L 23, 27.01.2010, p. 35, ELI: [http://data.europa.eu/eli/dec/2010/48\(1\)/oj](http://data.europa.eu/eli/dec/2010/48(1)/oj)*

Or. en

Amendment 42
Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Citation 16 a (new)

Motion for a resolution

Amendment

– *having regard European Centre for Disease Prevention and Control (ECDC) report “Rising STIs in Europe: report finds critical gaps in testing and prevention policies” of 19 December 2025, having regard to the Committee of the Regions Opinion on Strengthening women's rights and gender equality in the EU: a local and regional perspective, 15 October 2025,*

Or. en

Amendment 43

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital A

Motion for a resolution

A. whereas medical research has *historically been male-centric, leading to a lack of* understanding of *the* female anatomy; whereas this *systemic inequality* in medicine has an impact on the *diagnostics*, treatment, morbidity and mortality of under-represented sectors of the population;

Amendment

A. whereas, *although medicine has never ignored women as patients*, medical research has *predominantly focused on men, resulting in an incomplete* understanding of *human anatomy and, in particular*, female anatomy; whereas this *imbalance* in medicine has an impact on the *diagnosis*, treatment, morbidity and mortality of under-represented sectors of the population;

Or. en

Amendment 44

Laurence Trochu

Motion for a resolution

Recital A

Motion for a resolution

A. whereas medical research has historically been male-centric, leading to a lack of understanding of **the female anatomy**; whereas this **systemic inequality in medicine** has an impact on **the** diagnostics, treatment, morbidity and mortality **of under-represented sectors of the population**;

Amendment

A. whereas medical research has historically been **chiefly** male-centric, leading to a lack of understanding of female **biology and its specific hormonal characteristics**; whereas this **lack of understanding** has an impact on **medical treatment for women, particularly as regards** diagnostics, treatment, morbidity and mortality;

Or. fr

Amendment 45
Christine Anderson

Motion for a resolution
Recital A

Motion for a resolution

A. whereas **medical** research **has** historically **been male-centric, leading to a lack of understanding of the female anatomy**; whereas this **systemic inequality in medicine has an impact on the** diagnostics, treatment, **morbidity and mortality of under-represented sectors of the population**;

Amendment

A. whereas **in certain areas of biomedical** research **men were** historically **overrepresented in clinical trials and animal models, contributing to gaps in knowledge regarding sex-specific disease presentation, pharmacokinetics, treatment responses and adverse drug reactions in women**; whereas **addressing these gaps is important for improving diagnosis, treatment and health outcomes for both women and men**;

Or. en

Amendment 46
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Recital A

Motion for a resolution

Amendment

A. whereas medical research has historically been male-centric, leading to ***a lack of understanding of the female anatomy***; whereas this systemic inequality in medicine has an impact on the diagnostics, treatment, morbidity and mortality of under-represented ***sectors of*** the population;

A. whereas medical research has historically been male-centric, leading to ***insufficient understanding of women's health, physiology and sex-based differences***; whereas this systemic inequality in medicine has an impact on the diagnostics, treatment, morbidity and mortality of under-represented ***groups in*** the population, ***including women and gender-diverse people***;

Or. en

Amendment 47

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution

Recital A

Motion for a resolution

A. whereas medical research has historically been male-centric, leading to a lack of understanding of the female anatomy; whereas this systemic inequality in medicine has an impact on the diagnostics, treatment, morbidity and mortality of under-represented ***sectors of*** the population;

Amendment

A. whereas medical research has historically been male-centric, leading to a lack of understanding of the female anatomy; whereas this systemic inequality in medicine has an impact on the diagnostics, treatment, morbidity and mortality of under-represented ***segments of*** the population;

Or. en

Amendment 48

Christine Anderson

Motion for a resolution

Recital A a (new)

Motion for a resolution

Amendment

A a. whereas biological sex is a fundamental determinant of physiology, disease risk and treatment response; whereas medical research should

systematically analyse sex-specific differences in order to improve health outcomes and ensure evidence-based medicine; whereas health policy discussions on gender inequalities should take into account both under-researched female-specific conditions and the higher mortality burden affecting men in several major disease categories; whereas gender-related social factors may influence health behaviour and access to care; whereas these factors should be analysed alongside, but not substituted for, biological sex in biomedical research and clinical practice;

Or. en

Amendment 49

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital A a (new)

Motion for a resolution

Amendment

A a. whereas health is a fundamental social right; whereas equal access to timely, affordable and high-quality healthcare, including prevention, diagnosis and treatment of gender-specific conditions, should not depend on income, employment status, place of residence, migration status, disability or gender identity and constitutes a pillar of the European social fund; whereas women were on the front-line during the Covid crisis, accounting for 86% of care workers in health services in Europe, whereas women were also more exposed to economic vulnerability, which had consequences for their physical and mental health,

Or. en

Amendment 50
Sirpa Pietikäinen

Motion for a resolution
Recital A a (new)

Motion for a resolution

Amendment

A a. whereas women often experience lower effectiveness to common medical interventions compared to men, resulting in disparities in health outcomes; whereas women are more likely to seek medical help than men, yet often face delayed or wrong diagnoses, receive inappropriate treatment, or have their symptoms dismissed as psychosomatic, reflecting persistent gender bias in medical research, diagnostics, and clinical practice^{1a};

^{1a} <https://prenuvo.com/blog/the-most-common-health-misdiagnoses-in-women--and-why-they-keep-happening>

Or. en

Amendment 51
Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution
Recital A a (new)

Motion for a resolution

Amendment

A a. whereas there are verifiable genetic and biological differences between men and women that have an impact on their physiological processes and health;

Or. en

Amendment 52
Christine Anderson

Motion for a resolution
Recital A b (new)

Motion for a resolution

Amendment

A b. whereas medical science has developed extensive expertise on female biology through disciplines such as gynaecology, obstetrics, reproductive medicine and maternal-fetal medicine; whereas these fields have produced a substantial body of knowledge on female anatomy, physiology and reproductive health; whereas policy discussions on gender inequalities in health should therefore distinguish between areas where research on female health is well established and areas where sex-specific differences remain insufficiently studied;

Or. en

Amendment 53
Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution
Recital A b (new)

Motion for a resolution

Amendment

A b. whereas genuine equality between women and men must be grounded in the recognition and respect of their biological and genetic differences, ensuring that scientific research and healthcare effectively address the specific needs of each sex;

Or. en

Amendment 54

Christine Anderson

Motion for a resolution

Recital A c (new)

Motion for a resolution

Amendment

A c. whereas major sex-specific cancers such as breast cancer and prostate cancer represent comparable public health challenges for women and men respectively; whereas research investment has developed differently across these fields, partly reflecting differences in advocacy, screening programmes and historical research priorities; whereas bibliometric analyses indicate that breast cancer research output and funding volume exceed those of prostate cancer; whereas health policy should aim to ensure that research funding reflects disease burden and clinical need for both sexes;

Or. en

Amendment 55

Christine Anderson

Motion for a resolution

Recital A d (new)

Motion for a resolution

Amendment

A d. whereas cancer is the second leading cause of death in the European Union; whereas age-standardised cancer mortality rates remain significantly higher among men than among women across the Union, reflecting differences in risk factors, health-seeking behaviour, and disease patterns; whereas addressing gender inequalities in health therefore requires a balanced approach that considers the specific health challenges affecting both women and men, including

*sex-specific cancers such as breast cancer
and prostate cancer;*

Or. en

Amendment 56
Christine Anderson

Motion for a resolution
Recital A e (new)

Motion for a resolution

Amendment

*A e. whereas men in the European
Union have a significantly lower life
expectancy than women, reflecting
differences in disease patterns, risk
exposure and health-seeking behaviour;*

Or. en

Amendment 57
Christine Anderson

Motion for a resolution
Recital A f (new)

Motion for a resolution

Amendment

*A f. whereas suicide rates in the
European Union are significantly higher
among men than among women,
highlighting the need for balanced
attention to gender-related health risks
affecting both sexes;*

Or. en

Amendment 58
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution

Recital B

Motion for a resolution

B. whereas, although regulatory developments have improved inclusivity in clinical trials, the representation of women remains below that of men and the disparity is particularly acute for pregnant and **breastfeeding** women⁶ ;

⁶ Fewer than 0.4 % of trials in the EU include pregnant or breastfeeding women according to data from the Clinical Trials Information System cited by the European Medicines Agency on 4 June 2025. European Medicines Agency, ‘New guideline on inclusion of pregnant and breastfeeding individuals in clinical trials’, 2025, https://www.ema.europa.eu/en/news/new-guideline-inclusion-pregnant-breastfeeding-individuals-clinical-trials?utm_source=chatgpt.com.

Amendment

B. whereas, although regulatory developments have improved inclusivity in clinical trials, the representation of women remains below that of men and the disparity is particularly acute for pregnant and **lactating** women⁶; ***whereas this applies not only to clinical trials but also to pre-clinical ^{6a}, epidemiological, behavioural, and health systems research, where failure to systematically address sex and gender leads to a lack of scientific rigor and limits the generalizability of research findings to women, thereby undermining the safety and effectiveness of medicines and treatments for women;***

⁶ Fewer than 0.4 % of trials in the EU include pregnant or breastfeeding women according to data from the Clinical Trials Information System cited by the European Medicines Agency on 4 June 2025. European Medicines Agency, ‘New guideline on inclusion of pregnant and breastfeeding individuals in clinical trials’, 2025, https://www.ema.europa.eu/en/news/new-guideline-inclusion-pregnant-breastfeeding-individuals-clinical-trials?utm_source=chatgpt.com.

^{6a} ***Sex and gender blind spots and biases in health research | 21 |***
<https://www.taylorfrancis.com/chapters/edited/10.4324/9781315675411-21/sex-gender-blind-spots-biases-health-research-avni-amin-lavanya-vijayasingham-jacqui-stevenson>

Or. en

Amendment 59

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution
Recital B

Motion for a resolution

B. whereas, although regulatory developments have improved inclusivity in clinical trials, the representation of women remains below that of men and the disparity is particularly acute for pregnant and breastfeeding women⁶ ;

⁶ Fewer than 0.4 % of trials in the EU include pregnant or breastfeeding women according to data from the Clinical Trials Information System cited by the European Medicines Agency on 4 June 2025. European Medicines Agency, ‘New guideline on inclusion of pregnant and breastfeeding individuals in clinical trials’, 2025, https://www.ema.europa.eu/en/news/new-guideline-inclusion-pregnant-breastfeeding-individuals-clinical-trials?utm_source=chatgpt.com.

Amendment

B. whereas, although regulatory developments have improved inclusivity in clinical trials, the representation of women remains below that of men and the disparity is particularly acute for pregnant and breastfeeding women⁶; ***despite the fact that approximately 90% of women require medication during pregnancy and around 70% take at least one prescription medicine, only a very small proportion of medicines commonly used during pregnancy have been tested in controlled human clinical trials, resulting in major gaps in evidence on safety, efficacy and appropriate dosing^{7a}***;

⁶ Fewer than 0.4 % of trials in the EU include pregnant or breastfeeding women according to data from the Clinical Trials Information System cited by the European Medicines Agency on 4 June 2025. European Medicines Agency, ‘New guideline on inclusion of pregnant and breastfeeding individuals in clinical trials’, 2025, https://www.ema.europa.eu/en/news/new-guideline-inclusion-pregnant-breastfeeding-individuals-clinical-trials?utm_source=chatgpt.com.

^{7a} ***EPRS pp 67-68***
[https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU\(2025\)778519_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU(2025)778519_EN.pdf)

Or. en

Amendment 60
Laurence Trochu

Motion for a resolution

Recital B

Motion for a resolution

B. whereas, although regulatory developments have improved inclusivity in clinical trials, the representation of women remains below that of men and the disparity is particularly acute for pregnant and breastfeeding women⁶;

⁶ Fewer than 0.4 % of trials in the EU include pregnant or breastfeeding women according to data from the Clinical Trials Information System cited by the European Medicines Agency on 4 June 2025. European Medicines Agency, ‘New guideline on inclusion of pregnant and breastfeeding individuals in clinical trials’, 2025, https://www.ema.europa.eu/en/news/new-guideline-inclusion-pregnant-breastfeeding-individuals-clinical-trials?utm_source=chatgpt.com.

Amendment

B. whereas, although regulatory developments have improved inclusivity in clinical trials, the representation of women remains below that of men ***in the phases with the highest level of risk (phases 1 and 2), while outstripping the 50 % mark in many pivotal trials (phases 2 and 3) for non-sex-specific products, and whereas the fact that this*** disparity is particularly acute for pregnant and breastfeeding women⁶ ***is to be welcomed, given the obvious child safety and ethical concerns, but also in the light of the major biological changes which pregnancy and breastfeeding entail;***

⁶ Fewer than 0.4 % of trials in the EU include pregnant or breastfeeding women according to data from the Clinical Trials Information System cited by the European Medicines Agency on 4 June 2025. European Medicines Agency, ‘New guideline on inclusion of pregnant and breastfeeding individuals in clinical trials’, 2025, https://www.ema.europa.eu/en/news/new-guideline-inclusion-pregnant-breastfeeding-individuals-clinical-trials?utm_source=chatgpt.com.

Or. fr

Amendment 61 Christine Anderson

Motion for a resolution Recital B

Motion for a resolution

B. whereas, although regulatory developments have improved inclusivity in

Amendment

B. whereas, although regulatory developments have improved inclusivity in

clinical trials, the representation of women remains below that of men and the disparity is particularly acute for pregnant and breastfeeding women⁶ ;

⁶ Fewer than 0.4 % of trials in the EU include pregnant or breastfeeding women according to data from the Clinical Trials Information System cited by the European Medicines Agency on 4 June 2025. European Medicines Agency, ‘New guideline on inclusion of pregnant and breastfeeding individuals in clinical trials’, 2025, https://www.ema.europa.eu/en/news/new-guideline-inclusion-pregnant-breastfeeding-individuals-clinical-trials?utm_source=chatgpt.com.

clinical trials, the representation of women remains below that of men and the disparity is particularly acute for pregnant and breastfeeding women⁶;

⁶ Fewer than 0.4 % of trials in the EU include pregnant or breastfeeding women according to data from the Clinical Trials Information System cited by the European Medicines Agency on 4 June 2025. European Medicines Agency, ‘New guideline on inclusion of pregnant and breastfeeding individuals in clinical trials’, 2025, <https://www.ema.europa.eu/en/news/new-guideline-inclusion-pregnant-breastfeeding-individuals-clinical-trials>.

Or. en

Amendment 62

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital B a (new)

Motion for a resolution

Amendment

B a. whereas insufficient opportunities are being provided for research in the prenatal and perinatal fields, and such research is currently underdeveloped and not sufficiently advanced, thereby preventing the full realisation of its potential benefits for improving maternal and child health;

Or. en

Amendment 63

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution
Recital B a (new)

Motion for a resolution

Amendment

B a. whereas, as a consequence of this lack of sufficiently balanced representation in the development stage of drugs, women experience adverse drug reactions (ADRs) 50% to 75% more often than men^{8a};

^{8a} Zucker, I., & Prendergast, B. J. "Sex differences in pharmacokinetics predict adverse drug reactions in women." *Biology of Sex Differences*. June 2020.

Or. en

Amendment 64
Christine Anderson

Motion for a resolution
Recital C

Motion for a resolution

Amendment

C. whereas transgender people and marginalised communities are absent from most clinical trials, meaning that their response to treatment is often unknown⁷ ;

deleted

⁷ Brotto, L.A. and Galea, L.A.M., 'Gender inclusivity in women's health research', *BJOG*, Vol. 129, No. 12, 2022, <https://doi.org/10.1111%2F1471-0528.17231>.

Or. en

Amendment 65

Laurence Trochu

Motion for a resolution

Recital C

Motion for a resolution

C. whereas ***transgender*** people ***and marginalised communities*** are absent from most clinical trials, ***meaning that*** their ***response to treatment is often unknown***⁷;

⁷ *Brotto, L.A. and Galea, L.A.M., 'Gender inclusivity in women's health research', BJOG, Vol. 129, No. 12, 2022, <https://doi.org/10.1111%2F1471-0528.17231>.*

Amendment

C. whereas people ***who are undergoing or have completed gender transition processes*** are, ***like many patient groups living with specific medical conditions, bound to be*** absent from most clinical trials, ***particularly given*** their ***lack of representativeness***;

Or. fr

Amendment 66

Sirpa Pietikäinen

Motion for a resolution

Recital C a (new)

Motion for a resolution

Amendment

C a. whereas poverty and social exclusion have a significant impact on health outcomes and access to healthcare, disproportionately and intersectionally affecting women, particularly women with disabilities, young and single mothers, older women, women of colour, migrant women, women living in rural and remote regions, the LGBTIQ+ community, homeless women and those in informal or precarious employment; whereas inequalities in income, unpaid care responsibilities, and employment contribute to women's higher risk of poverty and consequently poorer health;

Amendment 67
Laurence Trochu

Motion for a resolution
Recital C a (new)

Motion for a resolution

Amendment

Ca. whereas the prevalence of polycystic ovary syndrome (PCOS) is significantly higher in women expressing the wish to begin gender transition, with the proportion of clinically diagnosed cases reaching almost double that observed in the general population, and with up to nearly 80 % of those affected presenting at least one symptom associated with PCOS^{1a};

1a

<https://link.springer.com/content/pdf/10.1007/s12020-023-03648-5.pdf>

Or. fr

Amendment 68
Sirpa Pietikäinen

Motion for a resolution
Recital C b (new)

Motion for a resolution

Amendment

C b. whereas women in the EU live longer than men but spend a greater proportion of those additional years in poor health, a disparity referred to as the “healthy life years gap”; whereas older women represent the majority of residents in long-term care facilities, many of them having memory-disabling diseases, and often experience inadequate access to treatment of symptoms and chronic

conditions, disproportionately affecting their overall health and well-being;

Or. en

Amendment 69
Sirpa Pietikäinen

Motion for a resolution
Recital C c (new)

Motion for a resolution

Amendment

C c. whereas women with disabilities constitute 29.2% of the women population in the EU^{1a} and that only 16% of women with disabilities have good or very good self-perceived health^{1b};

1a

https://ec.europa.eu/eurostat/databrowser/view/hlth_silc_12__custom_12991226/bookmark/table?lang=en&bookmarkId=74cb5a88-2396-437c-8ae9-ecfe99397c00

^{1b} <https://eige.europa.eu/gender-equality-index/2025/domain/intersecting-inequalities/disability/health>

Or. en

Amendment 70
Laurence Trochu

Motion for a resolution
Recital D

Motion for a resolution

Amendment

D. whereas 72 % of studies on drug trials fail to provide sex and gender-disaggregated data⁸;

D. whereas 72 % of studies on drug trials fail to provide sex- and gender-disaggregated data⁸; *whereas sexual orientations and the development of individual gender identities, including those of a temporary nature, provide no*

added value to clinical trials besides assessing the potential impact of endocrine and/or psychological disorders;

⁸ Care4Everybody study, ‘Mind the Gap: Costs, consequences and correction of sex and gender inequality in medicine’ (2023), <https://www.care4everybody.org/wp-content/uploads/2023/12/Mind-the-Gap-Costs-Consequences-and-Correction-of-Gender-Inequality-in-Medicine.pdf>.

⁸ Care4Everybody study, ‘Mind the Gap: Costs, consequences and correction of sex and gender inequality in medicine’ (2023), <https://www.care4everybody.org/wp-content/uploads/2023/12/Mind-the-Gap-Costs-Consequences-and-Correction-of-Gender-Inequality-in-Medicine.pdf>.

Or. fr

Amendment 71

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Recital D

Motion for a resolution

D. whereas **72 %** of studies on drug trials fail to **provide** sex and gender-disaggregated data⁸ ;

⁸ Care4Everybody study, ‘Mind the Gap: Costs, consequences and correction of sex and gender inequality in medicine’ (2023), <https://www.care4everybody.org/wp-content/uploads/2023/12/Mind-the-Gap-Costs-Consequences-and-Correction-of-Gender-Inequality-in-Medicine.pdf>.

Amendment

D. whereas **72%** of studies on drug trials fail to **report and publish** sex and gender-disaggregated data⁸;

⁸ Care4Everybody study, ‘Mind the Gap: Costs, consequences and correction of sex and gender inequality in medicine’ (2023), <https://www.care4everybody.org/wp-content/uploads/2023/12/Mind-the-Gap-Costs-Consequences-and-Correction-of-Gender-Inequality-in-Medicine.pdf>.

Or. en

Amendment 72

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital D

Motion for a resolution

D. whereas **72 %** of studies on drug trials fail to provide sex **and gender-disaggregated** data⁸ ;

⁸ Care4Everybody study, 'Mind the Gap: Costs, consequences and correction of sex and gender inequality in medicine' (2023), <https://www.care4everybody.org/wp-content/uploads/2023/12/Mind-the-Gap-Costs-Consequences-and-Correction-of-Gender-Inequality-in-Medicine.pdf>.

Amendment

D. whereas **72%** of studies on drug trials fail to provide sex **disaggregated** data⁸;

⁸ Care4Everybody study, 'Mind the Gap: Costs, consequences and correction of sex and gender inequality in medicine' (2023), <https://www.care4everybody.org/wp-content/uploads/2023/12/Mind-the-Gap-Costs-Consequences-and-Correction-of-Gender-Inequality-in-Medicine.pdf>.

Or. en

Amendment 73
Christine Anderson

Motion for a resolution
Recital D

Motion for a resolution

D. whereas **72 % of studies on drug trials fail to provide** sex and gender-disaggregated **data**⁸ ;

⁸ **Care4Everybody study, 'Mind the Gap: Costs, consequences and correction of sex and gender inequality in medicine' (2023),** <https://www.care4everybody.org/wp-content/uploads/2023/12/Mind-the-Gap-Costs-Consequences-and-Correction-of-Gender-Inequality-in-Medicine.pdf>.

Amendment

D. whereas **reporting of** sex- and gender-disaggregated **outcomes remains inconsistent**;

Or. en

Amendment 74
Sirpa Pietikäinen

Motion for a resolution
Recital D a (new)

Motion for a resolution

Amendment

D a. whereas reproductive and hormonal transitions such as menstruation, pregnancy, and menopause have a profound impact on women's physical, mental, and social well-being throughout their lives; whereas these conditions are often stigmatised, misunderstood, or insufficiently addressed in health systems, workplaces, and education;

Or. en

Amendment 75
Laurence Trochu

Motion for a resolution
Recital E

Motion for a resolution

Amendment

E. whereas the ability of individuals to exercise their sexual and reproductive health and rights (SRHR) must be guaranteed in order to achieve gender equality;

deleted

Or. fr

Amendment 76
Christine Anderson

Motion for a resolution
Recital E

Motion for a resolution

Amendment

E. whereas the ability of individuals to exercise their sexual and reproductive health and rights (SRHR) must be

deleted

guaranteed in order to achieve gender equality;

Or. en

Amendment 77

Margarita de la Pisa Carrión, Viktória Ferenc, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital E

Motion for a resolution

Amendment

E. *whereas the ability of individuals to exercise their sexual and reproductive health and rights (SRHR) must be guaranteed in order to achieve gender equality;* **deleted**

Or. en

Amendment 78

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital E

Motion for a resolution

Amendment

E. *whereas the **ability of individuals to exercise their** sexual and reproductive health and rights (SRHR) **must be guaranteed in order to achieve** gender equality;*

E. *whereas the **full, effective and universal access to** sexual and reproductive health and rights (SRHR) **including comprehensive and science-based sexuality and relationships education, affordable and high-quality contraception, fertility care, and free, safe and legal abortion services, is a fundamental pillar of** gender equality, **social justice, and bodily integrity, privacy and personal autonomy, and is essential to ensuring the dignity, health, and equal***

participation of women and girls in all areas of life;

Or. en

Amendment 79

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital E a (new)

Motion for a resolution

Amendment

E a. whereas, in order to achieve effective equality in the field of women's health, it is essential to specifically address aspects inherent to their biological condition, in particular gynaecological health, including pregnancy and its progression, as well as to strengthen the prevention, early diagnosis and appropriate treatment of diseases that affect women specifically or with higher prevalence among them, such as endometriosis, breast, ovarian and cervical cancer, menopause-related conditions and osteoporosis, among others;

Or. en

Amendment 80

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution

Recital E a (new)

Motion for a resolution

Amendment

E a. whereas, SRHR include access to contraceptive services, safe and legal abortion care, fertility treatments, access to scientifically-based information, age-

appropriate sexuality and relationship education, as well as quality obstetric and gynaecological care; whereas despite some progress, in practice, these services and access to this information remains partially unavailable in some Member States;

Or. en

Amendment 81

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital E b (new)

Motion for a resolution

Amendment

E b. whereas diseases such as osteoporosis, migraine and certain types of cancer have a clear relationship with hormonal processes, which requires the adoption of specific protocols tailored to women;

Or. en

Amendment 82

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital E c (new)

Motion for a resolution

Amendment

E c. whereas the symptoms, clinical presentation, and progression of cardiovascular diseases differ between men and women, making it necessary to train and educate healthcare professionals to ensure a deeper understanding that enables timely

recognition, diagnosis, and appropriate care;

Or. en

Amendment 83
Laurence Trochu

Motion for a resolution
Recital F

Motion for a resolution

Amendment

F. *whereas more than 20 million women⁹ in the EU still do not have access to safe and legal abortion, as several Member States maintain harmful regulatory and procedural barriers;* **deleted**

⁹ *This figure is based on the number of women living in Poland and Malta who do not have access to abortion because of restrictive laws in their countries of residence and restrictions and limitations in other EU Member States.*

Or. fr

Amendment 84
Margarita de la Pisa Carrión, Viktória Ferenc

Motion for a resolution
Recital F

Motion for a resolution

Amendment

F. *whereas more than 20 million women⁹ in the EU still do not have access to safe and legal abortion, as several Member States maintain harmful regulatory and procedural barriers;* **deleted**

⁹ This figure is based on the number of women living in Poland and Malta who do not have access to abortion because of restrictive laws in their countries of residence and restrictions and limitations in other EU Member States.

Or. en

Amendment 85
Christine Anderson

Motion for a resolution
Recital F

Motion for a resolution

F. whereas *more than 20 million women⁹ in the EU still do not have access to safe and legal abortion, as several Member States maintain harmful regulatory and procedural barriers;*

Amendment

F. whereas *it is, under the Treaties and in accordance with Article 168(7) TFEU, the prerogative of Member States to design the legal and practical framework governing abortion services;*

⁹ This figure is based on the number of women living in Poland and Malta who do not have access to abortion because of restrictive laws in their countries of residence and restrictions and limitations in other EU Member States.

Or. en

Amendment 86
Margarita de la Pisa Carrión, Viktória Ferenc, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution
Recital F a (new)

Motion for a resolution

F a. whereas informed consent constitutes a fundamental requirement and an essential ethical and legal

Amendment

precondition for any medical intervention, including the obligation to provide clear, accurate and comprehensive information regarding the method of use of the medicinal product or medical procedure in question, its mechanism of action, associated risks, and potential side effects;

Or. en

Amendment 87

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital F a (new)

Motion for a resolution

Amendment

F a. whereas 42% of menstruators in the European Union have experienced period poverty in the past 12 months^{1a}, defined as difficulty in accessing a sufficient quantity of menstrual products to manage one's periods with dignity and peace of mind;

*^{1a} Study from NGO Règles Élémentaires (RE) and Opinionway
https://www.regleselementaires.com/actualites/2025-05-28_menstrualmatters/*

Or. en

Amendment 88

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Recital F a (new)

Motion for a resolution

Amendment

F a. whereas people in low- and middle-income countries face disproportionate health gender inequalities compared to high income countries in term of mortality and serious morbidity, notably related to sexual and reproductive health and rights;

Or. en

Amendment 89

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital F b (new)

Motion for a resolution

Amendment

F b. whereas access to safe, clean and affordable water and sanitation is a fundamental determinant of physical and mental health and a public good, and plays a crucial role in disease prevention, chronic condition management and overall wellbeing across the life course; whereas inequalities in access to water and sanitation mostly affect people living in poverty, in inadequate housing, in rural or remote areas, with a specific impact on women, children, older persons and persons with disabilities;

Or. en

Amendment 90

Margarita de la Pisa Carrión, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital F b (new)

Motion for a resolution

Amendment

F b. whereas there is a prevailing narrative that portrays motherhood and fertility as realities to be combated and presents contraception as a prerequisite for achieving equality between women and men;

Or. en

Amendment 91

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital F c (new)

Motion for a resolution

Amendment

F c. whereas gender-based violence, in all its forms, including physical, sexual, psychological and economic violence, female genital mutilation and its medicalisation constitutes a serious violation of fundamental rights and a major public health issue, with profound and long-lasting impacts on women's physical, mental, sexual and reproductive health, whereas it increases the risk of chronic illness, depression, anxiety and post-traumatic stress disorder; whereas certain socio-economic factors increase women's exposure to gender-based violence;

Or. en

Amendment 92

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital F d (new)

Motion for a resolution

Amendment

F d. whereas obstetric and gynaecological violence, including verbal abuse, discrimination and non-consensual procedures during pregnancy, childbirth and abortion care, constitutes a violation of women's rights and dignity^{1b};

^{1b} "Les actes sexistes durant le suivi gynécologique et obstétrical. Des remarques aux violences, la nécessité de reconnaître, prévenir et condamner le sexisme" Danielle BOUSQUET, Présidente du Haut Conseil à l'Égalité entre les femmes et les hommes Geneviève COURAUD, rapporteure Margaux COLLET, co-rapporteure Rapport n°2018-06-26-SAN-034, voté le 26 juin 2018

Or. en

Amendment 93

Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital F e (new)

Motion for a resolution

Amendment

F e. whereas women with disabilities continue to be subjected to unnecessary or non-consensual medical treatments and interventions, including forced sterilisation, which remains a reality in some parts of the EU^{1c};

^{1c} EDF Report - September 2022, Forced sterilisation of persons with disabilities in the European Union

Or. en

Amendment 94

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution

Recital G

Motion for a resolution

G. whereas endometriosis **is a** chronic **condition** affecting 10-15 % of women of reproductive age¹⁰ ;

¹⁰ Becker, K., Heinemann, K., Imthurn, B. Marions, L. Moehner, S. et al. ‘Real world data on symptomology and diagnostic approaches of 27,840 women living with endometriosis’, Scientific Reports Vol. 11, No. 20404, 2021, <https://doi.org/10.1038/s41598-021-99681-3>; Eder, C. and Roomaney R., ‘Transgender and non-binary people’s perception of their healthcare in relation to their endometriosis’, International Journal of Transgender Health, Vol. 25, No. 4, 2025, 911-925, <https://journals.sagepub.com/doi/10.1177/13591053241266249>.

Amendment

G. whereas endometriosis **and polycystic ovary syndrome (PCOS) are** chronic **conditions** affecting 10-15% of women of reproductive age ^{10 11a};

¹⁰ Becker, K., Heinemann, K., Imthurn, B. Marions, L. Moehner, S. et al. ‘Real world data on symptomology and diagnostic approaches of 27,840 women living with endometriosis’, Scientific Reports Vol. 11, No. 20404, 2021, <https://doi.org/10.1038/s41598-021-99681-3>; Eder, C. and Roomaney R., ‘Transgender and non-binary people’s perception of their healthcare in relation to their endometriosis’, International Journal of Transgender Health, Vol. 25, No. 4, 2025, 911-925, <https://journals.sagepub.com/doi/10.1177/13591053241266249>.

^{11a} <https://www.who.int/news-room/fact-sheets/detail/polycystic-ovary-syndrome>

Or. en

Amendment 95

Dan-Ștefan Motreanu

Motion for a resolution

Recital G

Motion for a resolution

Amendment

G. whereas endometriosis is a chronic condition **affecting 10-15 %** of women of reproductive age¹⁰ ;

G. whereas endometriosis is a chronic **inflammatory** condition **that can cause severe pain, heavy bleeding, fatigue and infertility and affects an estimated 10–15 %** of women of reproductive age; **whereas its burden is often underestimated due to underdiagnosis and incomplete recognition of symptoms**;

¹⁰ **Becker, K., Heinemann, K., Imthurn, B. Marions, L. Moehner, S. et al. ‘Real world data on symptomology and diagnostic approaches of 27,840 women living with endometriosis’, Scientific Reports Vol. 11, No. 20404, 2021, <https://doi.org/10.1038/s41598-021-99681-3>; Eder, C. and Roomaney R., ‘Transgender and non-binary people’s perception of their healthcare in relation to their endometriosis’, International Journal of Transgender Health, Vol. 25, No. 4, 2025, 911-925, <https://journals.sagepub.com/doi/10.1177/13591053241266249>.**

Or. en

Amendment 96
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Recital G

Motion for a resolution

G. whereas endometriosis is a chronic condition affecting 10-15 % of women of reproductive age¹⁰ ;

Amendment

G. whereas endometriosis is a chronic condition affecting 10-15 % of women of reproductive age¹⁰ **infertility affects 36.9% of women with endometriosis, representing an approximately 3.3-fold increased risk compared with women without the disease** ^{10a};

¹⁰ Becker, K., Heinemann, K., Imthurn, B. Marions, L. Moehner, S. et al. ‘Real world data on symptomology and diagnostic approaches of 27,840 women living with endometriosis’, Scientific Reports Vol. 11, No. 20404, 2021, <https://doi.org/10.1038/s41598-021-99681-3>; Eder, C. and Roomaney R., ‘Transgender and non-binary people’s perception of their healthcare in relation to their endometriosis’, International Journal of Transgender Health, Vol. 25, No. 4, 2025, 911-925, <https://journals.sagepub.com/doi/10.1177/13591053241266249>.

¹⁰ Becker, K., Heinemann, K., Imthurn, B. Marions, L. Moehner, S. et al. ‘Real world data on symptomology and diagnostic approaches of 27,840 women living with endometriosis’, Scientific Reports Vol. 11, No. 20404, 2021, <https://doi.org/10.1038/s41598-021-99681-3>; Eder, C. and Roomaney R., ‘Transgender and non-binary people’s perception of their healthcare in relation to their endometriosis’, International Journal of Transgender Health, Vol. 25, No. 4, 2025, 911-925, <https://journals.sagepub.com/doi/10.1177/13591053241266249>.

^{10a} Eisenberg, V.H.; Decter, D.H.; Chodick, G.; Shalev, V.; Weil, C. **Burden of Endometriosis: Infertility, Comorbidities, and Healthcare Resource Utilization. J. Clin. Med. 2022, 11, 1133.** <https://doi.org/10.3390/jcm11041133>

Or. en

Amendment 97
Laurence Trochu

Motion for a resolution
Recital G

Motion for a resolution

G. whereas endometriosis is a chronic condition affecting 10-15 % of women of reproductive age¹⁰;

¹⁰ Becker, K., Heinemann, K., Imthurn, B. Marions, L. Moehner, S. et al. ‘Real world data on symptomology and diagnostic approaches of 27,840 women living with endometriosis’, Scientific Reports Vol. 11, No. 20404, 2021, [https://doi.org/10.1038/s41598-021-99681-](https://doi.org/10.1038/s41598-021-99681-3)

Amendment

G. whereas endometriosis is a chronic condition affecting 10-15 % of women of reproductive age¹⁰; **whereas the symptoms of endometriosis are incapacitating and can affect fertility as well as mental health;**

¹⁰ Becker, K., Heinemann, K., Imthurn, B. Marions, L. Moehner, S. et al. ‘Real world data on symptomology and diagnostic approaches of 27,840 women living with endometriosis’, Scientific Reports Vol. 11, No. 20404, 2021, [https://doi.org/10.1038/s41598-021-99681-](https://doi.org/10.1038/s41598-021-99681-3)

3; Eder, C. and Roomaney R.,
'Transgender and non-binary people's
perception of their healthcare in relation to
their endometriosis', International Journal
of Transgender Health, Vol. 25, No. 4,
2025, 911-925,
<https://journals.sagepub.com/doi/10.1177/13591053241266249>.

3; Eder, C. and Roomaney R.,
'Transgender and non-binary people's
perception of their healthcare in relation to
their endometriosis', International Journal
of Transgender Health, Vol. 25, No. 4,
2025, 911-925,
<https://journals.sagepub.com/doi/10.1177/13591053241266249>.

Or. fr

Amendment 98
Christine Anderson

Motion for a resolution
Recital G

Motion for a resolution

G. whereas endometriosis is a chronic condition affecting 10-15 % of women of reproductive age¹⁰ ;

¹⁰ Becker, K., Heinemann, K., Imthurn, B. Marions, L. Moehner, S. et al. 'Real world data on symptomology and diagnostic approaches of 27,840 women living with endometriosis', Scientific Reports Vol. 11, No. 20404, 2021, <https://doi.org/10.1038/s41598-021-99681-3>; **Eder, C. and Roomaney R., 'Transgender and non-binary people's perception of their healthcare in relation to their endometriosis', International Journal of Transgender Health, Vol. 25, No. 4, 2025, 911-925, <https://journals.sagepub.com/doi/10.1177/13591053241266249>.**

Amendment

G. whereas endometriosis is a chronic condition affecting 10-15% of women of reproductive age¹⁰;

¹⁰ Becker, K., Heinemann, K., Imthurn, B. Marions, L. Moehner, S. et al. 'Real world data on symptomology and diagnostic approaches of 27,840 women living with endometriosis', Scientific Reports Vol. 11, No. 20404, 2021, <https://doi.org/10.1038/s41598-021-99681-3>;

Or. en

Amendment 99

Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Recital G a (new)

Motion for a resolution

Amendment

G a. whereas Polycystic ovary syndrome (PCOS) is a common hormonal disorder affecting an estimated 8–13% of women of reproductive age worldwide^{1a}, whereas Uterine fibroids affect 50% to 80% of women by age 50^{1b}, whereas premenstrual dysphoric disorder (PMDD) affect at least 1,6% of women^{1c}; whereas chronic pelvic pain affects approximately 4% to 16% of women^{1d}, whereas osteoporosis and autoimmune diseases as well as musculoskeletal disorders such as rheumatoid arthritis, lupus, osteoarthritis, gout, and back pain continue to be frequently minimized in clinical practice, underfunded, and under researched^{1e}, whereas a lack of awareness on female-specific conditions persists among healthcare professionals;

^{1a} <https://www.who.int/news-room/fact-sheets/detail/polycystic-ovary-syndrome>

^{1b} Center for women health
<https://www.ohsu.edu/womens-health/fibroids-more-common-you-think>

^{1c} Thomas J. Reilly, Siya Patel, Ijeoma C. Unachukwu, Clare-Louise Knox, Claire A. Wilson, Michael C. Craig, Katja M. Schmalenberger, Tory A. Eisenlohr-Moul, Alexis E. Cullen, *The prevalence of premenstrual dysphoric disorder: Systematic review and meta-analysis*, <https://doi.org/10.1016/j.jad.2024.01.066>.
<https://www.sciencedirect.com/science/article/pii/S0165032724000764>

^{1d} <https://www.ncbi.nlm.nih.gov/books/NBK554585/#:~:text=The%20treatment%20of>

%20chronic%20pelvic,for%20achieving%20adequate%20pain%20relief

^{1e} Woolf, Anthony D, and Bruce Pfleger. "Burden of major musculoskeletal conditions." Bulletin of the World Health Organization vol. 81,9 (2003)

Or. en

Amendment 100

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital G a (new)

Motion for a resolution

Amendment

G a. whereas migraine disproportionately affects women, constitutes one of the leading causes of disability in the working-age population, and continues to be underdiagnosed and inadequately treated in many healthcare systems;

Or. en

Amendment 101

Dan-Ştefan Motreanu

Motion for a resolution

Recital H

Motion for a resolution

Amendment

H. whereas, despite the prevalence of endometriosis, *it takes on* average 6 to 10 years *to diagnose*;

H. whereas, despite the prevalence *and impact* of endometriosis, *diagnosis is frequently delayed by an average of 6 to 10 years; whereas this delay is linked to insufficient awareness, normalisation and dismissal of symptoms and limited access to appropriate diagnostic pathways; whereas improving early diagnosis and access to evidence-based care is essential*

to reduce avoidable suffering and long-term costs;

Or. en

Amendment 102
Sirpa Pietikäinen

Motion for a resolution
Recital H a (new)

Motion for a resolution

Amendment

H a. whereas in 2024, the health costs attributed to just 4 per- and polyfluoroalkyl substances (PFOA, PFOS, PFHxS and PFNA) in the EEA were estimated at 0.5 billion euros for maternal hypertensive disorders, 2.5 billion euros for endometriosis and 10.5 billion euros^{1a} for time to pregnancy/female infertility;

^{1a} These figures are based on a scenario of medium sensitivity, established through analysis by characterising low, medium and high scenarios of human health impacts and costs from exposure to four PFAS (PFOA, PFOS, PFNA, and PFHxS) and up to 13 health risks/endpoints (European Commission ‘The cost of PFAS pollution for our society – Final report’ 2026, <https://data.europa.eu/doi/10.2779/9590509>).

Or. en

Amendment 103
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Recital H a (new)

Motion for a resolution

Amendment

H a. whereas growing scientific evidence suggests that environmental factors, including endocrine-disrupting chemicals and air pollution, may contribute to the development and severity of endometriosis^{10b};

^{10b} Interdonato L, Siracusa R, Fusco R, Cuzzocrea S, Di Paola R. Endocrine Disruptor Compounds in Environment: Focus on Women's Reproductive Health and Endometriosis. Int J Mol Sci. 2023 Mar 16;24(6):5682. doi: 10.3390/ijms24065682.; PMID: PMC10058284.

Or. en

Amendment 104
Sirpa Pietikäinen

Motion for a resolution
Recital H b (new)

Motion for a resolution

Amendment

H b. whereas significant gender and age disparities persist in the diagnosis of diseases, with women and children facing notably longer waiting times for accurate diagnoses compared to men and adults; whereas survey data show that women with rare diseases wait an average of 5.4 years to receive a diagnosis, compared to 3.7 years for men^{1a}; whereas women are often misdiagnosed because sex-specific symptoms are not sufficiently recognised, and because medicines predominantly tested on men may be less effective on women or cause side effects to women that obscure the original condition, leading to inaccurate conclusions and an

increased risk of inadequate or harmful treatment;

^{1a} <https://www.eurordis.org/survey-reveals-lengthy-diagnostic-delays/#>

Or. en

Amendment 105

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Recital I

Motion for a resolution

I. whereas 85 % of women experience menopause symptoms and by 2030, an estimated 1.2 billion women will be experiencing menopause globally¹¹ ;

¹¹ Davaki, K., study requested by the European Parliament's Committee on Women's Rights and Gender Equality, 'Gender Inequalities in Medical Research, Drug Development and Access to Care', Policy Department for Citizens, Equality and Culture, Directorate-General for Citizens' Rights, Justice and Institutional Affairs, European Parliament, 2025, p. 86,

Amendment

I. whereas 85 % of women experience menopause symptoms and by 2030, an estimated 1.2 billion women will be experiencing menopause globally¹¹; ***whereas perimenopause and menopause represent a critical life transition with specific biological and social needs, requiring health-related and other policies to provide adequate support; whereas the persistent lack of accessible, comprehensive, and evidence-based menopause care contributes to social stigma, undermines mental health and wellbeing, leads to a measurable deterioration in overall quality of life, and has social and economic consequences, impacting women's participation in the workforces;***

¹¹ Davaki, K., study requested by the European Parliament's Committee on Women's Rights and Gender Equality, 'Gender Inequalities in Medical Research, Drug Development and Access to Care', Policy Department for Citizens, Equality and Culture, Directorate-General for Citizens' Rights, Justice and Institutional Affairs, European Parliament, 2025, p. 86,

[https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU\(2025\)778519_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU(2025)778519_EN.pdf).

[https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU\(2025\)778519_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU(2025)778519_EN.pdf).

Or. en

Amendment 106 **Laurence Trochu**

Motion for a resolution **Recital I**

Motion for a resolution

I. whereas 85 % of women experience menopause symptoms and by 2030, an estimated 1.2 billion women will be experiencing menopause globally¹¹;

¹¹ Davaki, K., study requested by the European Parliament's Committee on Women's Rights and Gender Equality, 'Gender Inequalities in Medical Research, Drug Development and Access to Care', Policy Department for Citizens, Equality and Culture, Directorate-General for Citizens' Rights, Justice and Institutional Affairs, European Parliament, 2025, p. 86, [https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU\(2025\)778519_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU(2025)778519_EN.pdf).

Amendment

I. whereas 85 % of women experience ***pre-menopause and*** menopause symptoms and, by 2030, an estimated 1.2 billion women will be experiencing menopause globally¹¹; ***whereas those symptoms go far beyond those that are typically recognised and whereas both doctors and the women themselves do not have enough information on the major upheaval which this natural but distressing phase in a woman's life entails;***

¹¹ Davaki, K., study requested by the European Parliament's Committee on Women's Rights and Gender Equality, 'Gender Inequalities in Medical Research, Drug Development and Access to Care', Policy Department for Citizens, Equality and Culture, Directorate-General for Citizens' Rights, Justice and Institutional Affairs, European Parliament, 2025, p. 86, [https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU\(2025\)778519_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU(2025)778519_EN.pdf).

Or. fr

Amendment 107 **Dan-Ştefan Motreanu**

Motion for a resolution
Recital I

Motion for a resolution

I. whereas **85 %** of women experience menopause *symptoms* and by 2030, an estimated 1.2 billion women will be experiencing menopause globally¹¹ ;

Amendment

I. whereas **a large share** of women experience *symptoms during perimenopause and* menopause and by 2030 an estimated 1.2 billion women will be experiencing menopause globally; **whereas evidence points to important gaps in awareness, timely diagnosis and access to appropriate care, including long waiting times, limited specialist services and inconsistent clinical guidance;**

¹¹ *Davaki, K., study requested by the European Parliament's Committee on Women's Rights and Gender Equality, 'Gender Inequalities in Medical Research, Drug Development and Access to Care', Policy Department for Citizens, Equality and Culture, Directorate-General for Citizens' Rights, Justice and Institutional Affairs, European Parliament, 2025, p. 86, [https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU\(2025\)778519_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU(2025)778519_EN.pdf).*

Or. en

Amendment 108
Christine Anderson

Motion for a resolution
Recital I

Motion for a resolution

I. whereas **85 %** of women experience **menopause symptoms and by 2030, an estimated 1.2 billion women will be experiencing** menopause globally¹¹ ;

Amendment

I. whereas **a significant proportion** of women experience symptoms **associated with** menopause, **which may affect quality of life and work participation;**

¹¹ Davaki, K., study requested by the European Parliament's Committee on Women's Rights and Gender Equality, 'Gender Inequalities in Medical Research, Drug Development and Access to Care', Policy Department for Citizens, Equality and Culture, Directorate-General for Citizens' Rights, Justice and Institutional Affairs, European Parliament, 2025, p. 86, [https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU\(2025\)778519_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU(2025)778519_EN.pdf).

Or. en

Amendment 109
Dan-Ștefan Motreanu

Motion for a resolution
Recital I a (new)

Motion for a resolution

Amendment

I a. whereas the European Parliament's public consultation on women's health found that (peri)menopausal information and care received very low ratings, with fewer than 1 in 4 respondents rating it positively across respondent groups, pointing to a persistent and measurable health inequality across women's life course;

Or. en

Amendment 110
Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Recital I a (new)

Motion for a resolution

Amendment

I a. whereas more inclusive research, including on pregnant and breastfeeding women, is needed to reduce avoidable risks to maternal health including post-partum depression;

Or. en

Amendment 111

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital I b (new)

Motion for a resolution

Amendment

I b. whereas menopause and perimenopause remain insufficiently recognised as major health and social issues, with associated symptoms widely disregarded, leading to unequal access to specialist and evidence-based care, unequal availability of hormone therapies, inadequate workplace accommodations, and negative impacts on women's participation in working life^{1a};

^{1a} <https://www.who.int/news-room/fact-sheets/detail/menopause#:~:text=Perimenopausal%20women%20need%20access%20to,for%20many%20health-care%20workers>

Or. en

Amendment 112

Dan-Ştefan Motreanu

Motion for a resolution

Recital I b (new)

Motion for a resolution

Amendment

I b. whereas menopause is frequently marginalised due to compounded age and gender bias, and women-specific life-course conditions including perimenopause remain under-researched and under-funded, contributing to persistent health inequalities;

Or. en

**Amendment 113
Dan-Ştefan Motreanu**

**Motion for a resolution
Recital I c (new)**

Motion for a resolution

Amendment

I c. whereas only a limited number of Member States have structured menopause policies; whereas examples such as Ireland show that improving access to care (including free HRT), specialised menopause clinics/hubs and workplace education can strengthen support for women across the menopausal transition;

Or. en

**Amendment 114
Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken**

**Motion for a resolution
Recital I c (new)**

Motion for a resolution

Amendment

I c. whereas awareness, health literacy, and prevention are essential

components of women's health, as they enable early diagnosis, reduce avoidable risks and inequalities, and give women the opportunity to make informed decisions about their bodies and health throughout their lives;

Or. en

Amendment 115

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

**Motion for a resolution
Recital J a (new)**

Motion for a resolution

Amendment

J a. whereas sexually transmitted infections (STIs) continue to surge across the European Union^{1a}; whereas they manifest differently in women which are often asymptomatic, while significant barriers to preventative measures and testing, as well as a lack of data increase the risks of late diagnosis, infertility, and associated cancers;

^{1a} <https://www.ecdc.europa.eu/en/news-events/rising-stis-europe-report-finds-critical-gaps-testing-and-prevention-policies>

Or. en

**Amendment 116
Alessandra Moretti**

**Motion for a resolution
Recital J a (new)**

Motion for a resolution

Amendment

J a. whereas prevention and limiting the exposure to risk factors are fundamental strategies to protect women's health;

Or. en

Amendment 117
Alessandra Moretti

Motion for a resolution
Recital J b (new)

Motion for a resolution

Amendment

J b. whereas over 40% of the world's adult female smokers – 62 million women – live in the WHO European Region, making tobacco use amongst women more than double the global average; whereas girls aged 13–15 in the same Region have the highest tobacco use prevalence among girls globally; whereas female adolescents in the European Region have the highest average e-cigarette use prevalence in the world, at 14.3% among those aged 13–15, with rates almost equal between boys and girls ^{1a};

1a

<https://www.who.int/europe/news/item/26-02-2026-tobacco-crisis--who-european-region-projected-to-remain-worst-globally-by-2030>

Or. en

Amendment 118
Alessandra Moretti

Motion for a resolution
Recital J c (new)

Motion for a resolution

Amendment

J c. whereas alcohol affects women differently, particularly if consumed at young ages; whereas alcohol consumption is one of the major modifiable risk factors for breast cancer, causing 7 of every 100 new breast cancer cases in the WHO European Region ^{1a};

1a

<https://www.who.int/europe/news/item/20-10-2021-alcohol-is-one-of-the-biggest-risk-factors-for-breast-cancer>

Or. en

Amendment 119
Christine Anderson

Motion for a resolution
Recital L

Motion for a resolution

L. whereas cardiovascular disease is the leading cause of death in the EU ***with a higher female than male mortality rate, despite prevailing societal misconceptions¹³***;

¹³ Eurostat, Statistics Explained, ‘Cardiovascular diseases statistics’, data extracted in July 2025, https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Cardiovascular_diseases_statistics.

Amendment

L. whereas cardiovascular disease is the leading cause of death in the EU; ***whereas age-standardised death rates from circulatory diseases are generally higher in men than in women, while women may account for a substantial share of cardiovascular deaths at older ages due to demographic structure and longer life expectancy¹³***;

¹³ Eurostat, Statistics Explained, ‘Cardiovascular diseases statistics’, data extracted in July 2025, <https://ec.europa.eu/eurostat/statistics-explained/SEPDF/cache/37359.pdf>

Or. en

Amendment 120

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution

Recital L

Motion for a resolution

L. whereas cardiovascular disease is the leading cause of death in the EU with a higher female than male mortality rate, despite prevailing societal misconceptions¹³ ;

¹³ Eurostat, Statistics Explained, ‘Cardiovascular diseases statistics’, data extracted in July 2025, https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Cardiovascular_diseases_statistics.

Amendment

L. whereas cardiovascular disease is the leading cause of death in the EU with a higher female than male mortality rate, despite prevailing societal misconceptions¹³ ; ***whereas such perceptions contribute to lower risk awareness among women and reduced uptake of cardiovascular screening;***

¹³ Eurostat, Statistics Explained, ‘Cardiovascular diseases statistics’, data extracted in July 2025, https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Cardiovascular_diseases_statistics.

Or. en

Amendment 121

Laurence Trochu

Motion for a resolution

Recital L

Motion for a resolution

L. whereas cardiovascular disease is the leading cause of death in the EU with a higher female than male mortality rate, despite prevailing societal misconceptions¹³;

¹³ Eurostat, Statistics Explained, ‘Cardiovascular diseases statistics’, data

Amendment

L. whereas cardiovascular disease is the leading cause of death in the EU with a higher female than male mortality rate, despite prevailing societal misconceptions¹³; ***whereas there is a lack of information on the cardiovascular risks that women face;***

¹³ Eurostat, Statistics Explained, ‘Cardiovascular diseases statistics’, data

extracted in July 2025,
https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Cardiovascular_diseases_statistics.

extracted in July 2025,
https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Cardiovascular_diseases_statistics.

Or. fr

Amendment 122

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital L

Motion for a resolution

L. whereas cardiovascular disease is the leading cause of death in the EU with a higher female than male mortality rate, despite prevailing societal misconceptions¹³ ;

¹³ Eurostat, Statistics Explained, ‘Cardiovascular diseases statistics’, data extracted in July 2025,
https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Cardiovascular_diseases_statistics.

Amendment

L. whereas cardiovascular disease is the leading cause of death in the EU with a higher female than male mortality rate, despite prevailing societal misconceptions¹³; ***whereas diabetes significantly amplifies cardiovascular risk and mortality in women^{14a}***;

¹³ Eurostat, Statistics Explained, ‘Cardiovascular diseases statistics’, data extracted in July 2025,
https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Cardiovascular_diseases_statistics.

^{14a} ***Diabetes as a risk factor for heart failure in women and men: a systematic review and meta-analysis of 47 cohorts including 12 million individuals***
<https://link.springer.com/article/10.1007/s00125-019-4926-x>

Or. en

Amendment 123

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution
Recital L a (new)

Motion for a resolution

Amendment

L a. whereas sex- and gender-blind gaps in health research have led to a limited understanding of women's symptoms and pain, which contributes to late diagnosis, under-treatment, and poorer health outcomes; whereas this structural bias can also manifest in clinical practice as obstetric and gynaecological violence, including non-consensual procedures, neglect of reported pain, and lack of respect for patients' autonomy and dignity;

Or. en

Amendment 124

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution
Recital L a (new)

Motion for a resolution

Amendment

L a. whereas several reproductive health conditions, such as infertility attributed to ovulatory disorders and endometriosis, hypertensive disorders of pregnancy, hormonal contraceptives and the transition to menopause, are all linked to increased cardiovascular risk ^{14a};

^{14a}

https://www.oecd.org/en/publications/the-state-of-cardiovascular-health-in-the-european-union_ea7a15f4-en/full-report/preventing-and-identifying-cvd-targeting-key-risk-factors_df4bf1f4.html#section-d1e26541-

Or. en

Amendment 125
Christine Anderson

Motion for a resolution
Recital L a (new)

Motion for a resolution

Amendment

L a. whereas inequalities in health affect both women and men; whereas men in the European Union experience significantly lower life expectancy, higher mortality from cardiovascular disease and cancer, and markedly higher suicide rates;

Or. en

Amendment 126
Christine Anderson

Motion for a resolution
Recital M

Motion for a resolution

Amendment

M. whereas 14 % of LGBTQI+ people have reported experiencing discrimination in healthcare settings and many Member States provide only limited access to transgender-specific healthcare;

deleted

Or. en

Amendment 127
Laurence Trochu

Motion for a resolution
Recital M

Motion for a resolution

Amendment

M. whereas 14 % of LGBTQI+ people have reported experiencing discrimination

M. whereas ***only*** 14 % of LGBTQI+ people have reported experiencing

in healthcare settings and many Member States provide only limited access to transgender-specific healthcare;

discrimination in healthcare settings and many Member States provide only limited access to transgender-specific healthcare *in accordance with their healthcare policies, which fall within the exclusive competence of the Member States; whereas it would therefore be contradictory to ask for specific clinical trials while seeking to deny that the specificities concerned exist within a healthcare context; whereas gynaecologists are already too few in number to rapidly meet the healthcare needs of women, and whereas are not meant to be providing treatment to men who claim to be women;*

Or. fr

Amendment 128

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Recital M

Motion for a resolution

M. whereas 14 % of LGBTQI+ people have reported experiencing discrimination in healthcare settings and many Member States provide only limited access to *transgender-specific healthcare*;

Amendment

M. whereas 14 % of LGBTQI+ people have reported experiencing discrimination in healthcare settings and many Member States provide only limited, *delayed or unaffordable* access to *health care specific for trans and gender diverse people*;

Or. en

Amendment 129

Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital M a (new)

Motion for a resolution

Amendment

M a. whereas an intersectional approach to women's health is essential to tackling structural inequalities, whereas migrants, refugees and ethnic minority women, women living in poverty and experiencing homelessness, precarious employment or unpaid care responsibilities, older women, women with disabilities women with overweight, women residing in rural and socio-economically disadvantaged areas and individuals from LGBTI+ communities encounter multiple and intersecting barriers to accessing healthcare services;

Or. en

Amendment 130
Sirpa Pietikäinen

Motion for a resolution
Recital M a (new)

Motion for a resolution

Amendment

M a. whereas women make up the majority (78%) of healthcare workers in the EU^{1a};

1a

<https://ec.europa.eu/eurostat/web/products-eurostat-news/-/edn-20210308-1#:~:text=Spotlight%20on%20women%20at%20the%20frontline%20of,to%20over%2090%25%20in%20Estonia%20and%200Latvia.>

Or. en

Amendment 131
Sirpa Pietikäinen

Motion for a resolution
Recital M b (new)

Motion for a resolution

Amendment

M b. whereas health security is a core element of comprehensive security and essential for the resilience of societies and economies; whereas underfunding of public health systems, pandemic preparedness, and health research undermines both societal stability and the protection of vulnerable groups; whereas women in all their diversity are often disproportionately affected by public health crises due to persistent inequalities, caregiving responsibilities, and gendered exposure to health risks; whereas adequate and sustained investment in health security, including gender-sensitive preparedness, prevention, and response measures, is therefore necessary to ensure both societal resilience and equitable health outcomes; whereas women represent half of the population, gender-responsive health systems are essential for the overall preparedness, resilience and stability of Europe's health systems;

Or. en

Amendment 132

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Recital M b (new)

Motion for a resolution

Amendment

M b. whereas racialized patients, particularly women of Mediterranean or non-White backgrounds, report facing racism and dismissing of their pain complaints (referring to the "Morbus Mediterraneus" syndrome) which can

lead to serious consequences, including undertreatment, misdiagnoses, and loss of trust in medical institutions;

Or. en

Amendment 133
Sirpa Pietikäinen

Motion for a resolution
Recital M c (new)

Motion for a resolution

Amendment

M c. whereas health conditions impacting women disproportionately have a significant economic impact through reduced productivity and absenteeism; whereas the total annual loss of production due to migraine, which disproportionately affects women, is estimated at 111 billion euros in indirect costs in the EU^{1a};

^{1a} https://www.emhalliance.org/wp-content/uploads/dlm_uploads/EMHA-Roadmap-2025-EU-roadmap_july17.pdf

Or. en

Amendment 134
Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreu, Tiemo Wölken

Motion for a resolution
Recital M c (new)

Motion for a resolution

Amendment

M c. whereas structural problems of health sector should be addressed with strong public policies and well-funded public services; whereas the persistent

underinvestment in women's health requires stronger public action and targeted funding especially to address medical desertification and maternity desertification,

Or. en

Amendment 135

Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital N a (new)

Motion for a resolution

Amendment

N a. whereas the exposome approach considers the totality of environmental, chemical, physical, biological, social, commercial and behavioural exposures across an individual's lifetime and provides a comprehensive framework for targeted prevention; whereas studies have shown that women - including during pregnancy - are subject to specific exposure patterns that affect their health and that of the developing child;

Or. en

Amendment 136

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital N a (new)

Motion for a resolution

Amendment

N a. whereas the healthcare systems of several Member States are on the verge of collapse, exacerbated by increasing migration pressure; whereas the

deterioration of working conditions for healthcare personnel, especially doctors, is causing a brain drain to other countries where their work is better recognised, further weakening the quality and sustainability of healthcare provision;

Or. en

Amendment 137
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Recital N a (new)

Motion for a resolution

Amendment

N a. whereas, according to the World Health Organization (WHO), climate change constitutes one of the greatest threats to global health and has differentiated and disproportionate impacts on women and girls, particularly in relation to sexual, reproductive, maternal, newborn and child health;

Or. en

Amendment 138
Sirpa Pietikäinen

Motion for a resolution
Recital N a (new)

Motion for a resolution

Amendment

N a. whereas research funding is often not proportional to disease burden, and conditions that predominantly affect women receive significantly less financial support compared to diseases that primarily impact men, such as migraines or endometriosis;

Amendment 139

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution

Recital N a (new)

Motion for a resolution

Amendment

N a. whereas post-partum depressions affects over 10% of women in the EU; whereas this phenomenon remains largely undiagnosed and untreated^{15a},

^{15a} <https://www.who.int/teams/mental-health-and-substance-use/promotion-prevention/maternal-mental-health>

Amendment 140

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Recital N b (new)

Motion for a resolution

Amendment

N b. whereas infertility affects approximately 48 million couples worldwide, accounting for about 10% of couples of reproductive age, with geographical variations¹⁵;

15 Sánchez-Méndez, J. I., Lombarte, M. L., Abengózar-Muela, R., Acosta-Díez, J., Alonso-Fernández, P. A., Cañones-Castañón, M. P., Calderón-Ruiz, O., Espinosa-García, E., Galocha-Morgado, C., Siegrist, J., Alonso-Salvador, S., et al. (2025). Natural procreative technology (NaProTechnology) for infertility: take-

home baby rate and clinical outcomes in a 5-year single-center cohort of 1,310 couples. Frontiers in Reproductive Health, 7.
<https://doi.org/10.3389/frph.2025.1696679>

Or. en

Amendment 141

Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital N b (new)

Motion for a resolution

Amendment

N b. whereas globally, one in six people face infertility^{1a} translating to approximately 25 million EU citizens, with women disproportionately affected by both the social stigma of infertility and the physical burden of treatment; whereas Endocrine-disrupting chemicals (EDCs) increase the risk of reproductive disorders by interfering with hormonal systems, contributing to declining fertility rates, adverse pregnancy outcomes, and long-term health consequences^{1b};

^{1a} Infertility Prevalence Estimates, 1990–2021 WHO

^{1b} Endocrine-disrupting chemicals and reproductive health: With focus on the developmental window of susceptibility, Terje Svingen National Food Institute, Technical University of Denmark, 2800 Kongens Lyngby, <https://www.sciencedirect.com/science/article/pii/S0003426625001064>

Or. en

Amendment 142
Sirpa Pietikäinen

Motion for a resolution
Recital N b (new)

Motion for a resolution

Amendment

N b. whereas unmet need for contraception undermines bodily autonomy and global sustainable development, with unintended pregnancies accounting for approximately half of all pregnancies worldwide each year^{1a};

^{1a} <https://www.unfpa.org/press/nearly-half-all-pregnancies-are-unintended%E2%80%94global-crisis-says-new-unfpa-report>

Or. en

Amendment 143

Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Recital N c (new)

Motion for a resolution

Amendment

N c. whereas eating disorders such as anorexia nervosa and bulimia nervosa are amongst the most enfeebling psychiatric conditions that affect women, with at least one person dying as a direct result from an eating disorder every 62 minutes^{1a}, whereas anorexia nervosa has one of the highest mortality rates among psychiatric disorders in Europe, estimated at between 5% and 10%^{1b};

^{1a} https://breakbingeeating.com/eating-disorder-statistics/#What_is_the_mortality_rate_of_eating_disorders_overall

^{1b}

<https://pmc.ncbi.nlm.nih.gov/articles/PMC9048449/#:~:text=INTRODUCTION,oustanding%20research%20questions%20are%20addressed>

Or. en

Amendment 144

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Recital N d (new)

Motion for a resolution

Amendment

N d. whereas women suffering from chronic pain and gender-specific conditions are disproportionately exposed to anxiety, depression, including post-partum depression (PPD) and burnout, and their symptoms are frequently dismissed or psychologized due to stigma rather than adequately treated;

Or. en

Amendment 145

Laurence Trochu

Motion for a resolution

Paragraph 1

Motion for a resolution

Amendment

1. Stresses that gender inequalities in health are multifaceted with systemic inequalities resulting from decades of medical research based on *the* male

1. Stresses that gender inequalities in health are multifaceted, with systemic inequalities resulting from decades of medical research based on male

anatomy, which in turn has shaped the entire cycle of care from diagnostics to treatment;

physiology, which in turn has shaped the entire cycle of care from diagnostics to treatment;

Or. fr

Amendment 146

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 1

Motion for a resolution

1. Stresses that gender inequalities in health are multifaceted with systemic inequalities resulting from decades of medical research based on the male anatomy, which in turn has shaped the entire cycle of care from diagnostics to treatment;

Amendment

1. Stresses that gender inequalities in health are ***a violation of fundamental rights and*** multifaceted with systemic inequalities resulting from decades of medical research based on the male anatomy, which in turn has shaped the entire cycle of care from diagnostics to treatment;

Or. en

Amendment 147

Sirpa Pietikäinen

Motion for a resolution

Paragraph 1

Motion for a resolution

1. Stresses that gender inequalities in health are multifaceted with systemic inequalities resulting from decades of medical research based on the male anatomy, which in turn has shaped the entire cycle of care from diagnostics to treatment;

Amendment

1. Stresses that gender inequalities in health are multifaceted with systemic inequalities resulting from decades of medical research based on the ***able-bodied*** male anatomy, which in turn has shaped the entire cycle of care from diagnostics to treatment;

Or. en

Amendment 148

Margarita de la Pisa Carrión, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Paragraph 1 a (new)

Motion for a resolution

Amendment

1 a. Notes that there is a growing tendency to reduce women's health to the abortion debate, presenting it as the sole alternative in situations of difficulty during pregnancy; emphasizes that this approach does not constitute progress, but instead places women in a position of vulnerability by neglecting other measures necessary to ensure their comprehensive well-being;

Or. en

Amendment 149

Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 1 a (new)

Motion for a resolution

Amendment

1 a. Stresses that women's health, including the prevention and treatment of gender-specific conditions throughout the life course, should be recognised as an integral part of fundamental rights and social rights in the Union;

Or. en

Amendment 150

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 2

Motion for a resolution

2. Highlights that inequalities in healthcare are compounded by intersectional inequalities, **for example, based on a person's socio-economic status and those experienced by people from ethnic minority or migrant communities and the LGBTQI+ community**; points out that inequalities are also evident in gender-specific conditions, as research into these conditions has been repeatedly underfunded;

Amendment

2. Highlights that inequalities in healthcare are compounded by intersectional inequalities **and structural forms of discrimination, including territorial inequalities in access to specialised healthcare services, which particularly affect women living in rural and remote regions; stresses that barriers linked to socio-economic status, poverty, disability, migration background, ethnic minority status and belonging to the LGBTQI+ community further exacerbate unequal access to timely, affordable and quality care; highlights that such inequalities also include unequal exposure to environmental hazards and pollution**; points out that inequalities are also evident in gender-specific conditions, as research into these conditions has been repeatedly underfunded **and insufficiently prioritised**;

Or. en

Amendment 151

Christine Anderson

Motion for a resolution

Paragraph 2

Motion for a resolution

2. **Highlights** that inequalities in healthcare **are compounded by intersectional inequalities, for example, based on a person's socio-economic status and those experienced by people from ethnic minority or migrant communities and the LGBTQI+ community**; points out that inequalities are also evident in

Amendment

2. **Points out** that inequalities in healthcare **may arise from** socio-economic conditions, **geographical disparities, education levels and barriers in access to healthcare services**;

gender-specific conditions, as research into these conditions has been repeatedly underfunded;

Or. en

Amendment 152
Laurence Trochu

Motion for a resolution
Paragraph 2

Motion for a resolution

2. Highlights that inequalities in healthcare are compounded by *intersectional* inequalities, *for example, based on a person's socio-economic status and those experienced by people from ethnic minority or migrant communities and the LGBTQI+ community*; points out that inequalities are also evident in gender-specific conditions, as research into these conditions has been repeatedly underfunded;

Amendment

2. Highlights that inequalities in healthcare are compounded by *other types of* inequalities, *particularly those experienced by people living in rural areas and in the outermost regions, and those related to age, disabilities and* socio-economic status; points out that inequalities are also evident in gender-specific conditions, as research into these conditions has been repeatedly underfunded;

Or. fr

Amendment 153
Sirpa Pietikäinen

Motion for a resolution
Paragraph 2

Motion for a resolution

2. Highlights that inequalities in healthcare are compounded by intersectional inequalities, for example, based on a person's socio-economic status and those experienced by people from ethnic minority or migrant communities and the LGBTQI+ community; points out that inequalities are also evident in gender-specific conditions, as research into these

Amendment

2. Highlights that inequalities in healthcare are compounded by intersectional inequalities, for example, based on a person's socio-economic status, *disability*, and those experienced by people from ethnic minority or migrant communities and the LGBTQI+ community; points out that inequalities are also evident in gender-specific conditions,

conditions has been repeatedly underfunded;

as research into these conditions has been repeatedly underfunded;

Or. en

Amendment 154
Laurence Trochu

Motion for a resolution
Paragraph 2 a (new)

Motion for a resolution

Amendment

2a. Calls on the Member States to ensure that a full gynaecological and endocrine assessment is carried out as a matter of course in cases of gender dysphoria, in order to identify and, where necessary, treat any underlying medical conditions before proceeding with any medical interventions that may have irreversible effects;

Or. fr

Amendment 155
Margarita de la Pisa Carrión, Ondřej Knotek, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution
Paragraph 2 a (new)

Motion for a resolution

Amendment

2 a. Underlines the need to adopt measures to improve the prestige and working conditions of healthcare personnel, in particular doctors, through fair salaries and professional recognition; and to implement effective policies for the retention of medical talent in order to ensure the quality of healthcare provision;

Or. en

Amendment 156

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 2 a (new)

Motion for a resolution

Amendment

2 a. Calls on the Commission to address geographical disparities in access to diagnosis and treatment of gender-specific conditions, which particularly affect women in rural, remote, and economically disadvantaged regions, through coordination, funding, and knowledge-sharing mechanisms at EU level;

Or. en

Amendment 157

Laurence Trochu

Motion for a resolution

Paragraph 3

Motion for a resolution

Amendment

3. **Implores policymakers** to take a holistic approach to **addressing inequalities and to correct discrepancies while** innovative new treatments and procedures **are developed**;

3. **Calls on the Commission** to take a holistic approach **with a view to providing better support for women's health, from diagnostics to the development of** innovative new treatments and procedures;

Or. fr

Amendment 158

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 3

Motion for a resolution

3. Implores policymakers to take a holistic approach to addressing inequalities and to correct discrepancies **while** innovative new treatments and procedures are developed;

Amendment

3. Implores policymakers to take a holistic approach to addressing inequalities and to correct discrepancies **with measurable targets and accountability, as** innovative new treatments and procedures are developed;

Or. en

Amendment 159

Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 3

Motion for a resolution

3. Implores policymakers to take a holistic approach to addressing inequalities and to correct discrepancies while innovative new treatments and procedures are developed;

Amendment

3. Implores policymakers to take a holistic **and right-based** approach to addressing inequalities and to correct discrepancies while innovative new treatments and procedures are developed;

Or. en

Amendment 160

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Paragraph 3 a (new)

Motion for a resolution

Amendment

3 a. Highlights the need to promote and further develop knowledge of female biology, physiognomy and physiology, including the implications of its cyclical and evolving nature throughout the life

course, in order to enable both healthcare professionals and women themselves to better understand women's health, ensure appropriate care for their well-being, and make fully informed decisions, on the basis of rigorous research and accessible, evidence-based health information;

Or. en

Amendment 161
Sirpa Pietikäinen

Motion for a resolution
Paragraph 3 a (new)

Motion for a resolution

Amendment

3 a. Calls for the effective implementation of the right to be forgotten for patients who have recovered from serious illnesses, such as cancer, to prevent discrimination in access to financial services such as insurance and loans; stresses that women are disproportionately affected by gendered health conditions and often face accumulated financial barriers due to their medical histories;

Or. en

Amendment 162
Laurence Trochu

Motion for a resolution
Paragraph 3 a (new)

Motion for a resolution

Amendment

3a. Calls on the Commission to support Member States in their efforts make their regions more attractive in order to attract and retain health professionals, with the aim of doing away

with ‘medical deserts’ and ensuring equitable access to healthcare services for the entire population, and particularly for women;

Or. fr

Amendment 163
Christine Anderson

Motion for a resolution
Paragraph 3 a (new)

Motion for a resolution

Amendment

3 a. Stresses that health policy must remain grounded in rigorous biomedical science and evidence-based medicine; warns against the politicisation of medical research or the introduction of ideological concepts that may obscure clinically relevant biological differences;

Or. en

Amendment 164
Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution
Paragraph 3 b (new)

Motion for a resolution

Amendment

3 b. Remember that, in accordance with Article 1 of the Charter of Fundamental Rights of the European Union, “human dignity is inviolable. It must be respected and protected,” and that, pursuant to its Article 3, “everyone has the right to respect for his or her physical and mental integrity”; also recall that, according to Article 168 of the Treaty on the Functioning of the European Union, “a high level of human

health protection shall be ensured in the definition and implementation of all Union policies and activities”;

Or. en

Amendment 165

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution

Paragraph 4

Motion for a resolution

4. Encourages the Commission to include clear and binding targets to address inequalities in health and to implement a transparent monitoring system for these targets;

Amendment

4. Encourages the Commission to include clear and binding targets to address inequalities in health *notably those related to sex and gender*, and to implement a transparent monitoring system for these targets *based on disaggregated data, including by sex and gender*;

Or. en

Amendment 166

Dan-Ștefan Motreanu

Motion for a resolution

Paragraph 4

Motion for a resolution

4. Encourages the Commission to include clear and *binding* targets to address inequalities in health and to implement a transparent monitoring system for these targets;

Amendment

4. Encourages the Commission to include clear and, *where appropriate, measurable* targets to address inequalities in health and to implement a transparent monitoring system for these targets; *stresses that monitoring should cover women-specific life-course stages and conditions, including perimenopause and menopause, and should reflect gaps in access to care and information*;

Or. en

Amendment 167
Sirpa Pietikäinen

Motion for a resolution
Paragraph 4

Motion for a resolution

4. Encourages the Commission to include clear and binding targets to address inequalities in health and to implement a transparent monitoring system for these targets;

Amendment

4. Encourages the Commission to include clear, **measurable** and binding targets to address inequalities in health **as part of a comprehensive EU Women's Health Strategy** and to implement a transparent monitoring system for these targets;

Or. en

Amendment 168
Laurence Trochu

Motion for a resolution
Paragraph 4

Motion for a resolution

4. Encourages the Commission to include clear and **binding** targets to **address inequalities in** health and **to implement** a transparent monitoring system for these targets;

Amendment

4. Encourages the Commission to include clear and **incentive-based** targets **with a view to providing better support for women's** health and **implementing** a transparent monitoring system for these targets;

Or. fr

Amendment 169
Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Paragraph 4 a (new)

Motion for a resolution

Amendment

4 a. *Stresses the role of civil society organisations in supporting women's health and rights, particularly for women facing poverty, discrimination or social exclusion, by providing accessible services and advocacy, acting as a bridge between patients and public institutions, and contributing to the protection of fundamental rights, equal access to care and more inclusive and accountable healthcare policies, thereby strengthening equality and social cohesion across the Union;*

Or. en

Amendment 170
Sirpa Pietikäinen

Motion for a resolution
Paragraph 4 a (new)

Motion for a resolution

Amendment

4 a. *Expresses concern about the shrinking civic space and decreasing funding available for civil society organisations working on women's health and rights across the EU; stresses that these organisations play a crucial role in delivering need-based, community-level, and peer-to-peer services, particularly for women in vulnerable situations and those facing barriers to accessing mainstream healthcare;*

Or. en

Amendment 171
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 4 a (new)

Motion for a resolution

Amendment

4 a. Calls on the Commission to ensure that monitoring of gender health inequalities includes public, comparable indicators and follow-up actions where targets are not met, including a reassessment of funding priorities;

Or. en

Amendment 172

Alessandra Moretti

Motion for a resolution

Subheading 1 a (new)

Motion for a resolution

Amendment

Prevention

Or. en

Amendment 173

Sirpa Pietikäinen

Motion for a resolution

Paragraph 4 b (new)

Motion for a resolution

Amendment

4 b. Calls on the Commission and the Member States to strengthen health literacy; calls for collaboration with healthcare providers, civil society organisations, and digital platforms to prevent the spread of scams and misinformation regarding health and ensure that women and other vulnerable groups, including those recently diagnosed with serious conditions such as cancer or infertility, can make informed decisions about their health and treatment

options; calls for strengthened EU-level cooperation to detect, investigate, and stop fraudulent health offers and online scams targeting vulnerable populations; underlines adequate funding for the health NGOs working to prevent online health scams;

Or. en

Amendment 174
Alessandra Moretti

Motion for a resolution
Paragraph 4 a (new)

Motion for a resolution

Amendment

4 a. Stresses that prevention policies are fundamental to protect people's health, including women's health; underlines that risk factors associated with NCDs affect women in different ways than men and calls for EU prevention policies to take this into appropriate consideration;

Or. en

Amendment 175
Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Paragraph 4 b (new)

Motion for a resolution

Amendment

4 b. Calls on the Commission and Member States to recognise access to water and sanitation as an essential component of public health policies and healthcare, including in hospitals,

primary care, maternity and long-term care facilities;

Or. en

Amendment 176

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 4 b (new)

Motion for a resolution

Amendment

4 b. Calls on the Commission to include in the upcoming EU for Health strategy a dedicated pillar on women's health, with specific funding and actions;

Or. en

Amendment 177

Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 4 c (new)

Motion for a resolution

Amendment

4 c. Stresses the need to address the gendered social and commercial pressures that negatively affect girls' and women's body image and health; calls on the Commission and the Member States to promote prevention strategies, including awareness-raising campaigns, media and digital literacy, and school-based education programmes aimed at fostering healthy body image, self-esteem and informed health choices;

Or. en

Amendment 178
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 4 c (new)

Motion for a resolution

Amendment

4 c. Calls on the Commission to integrate a gender-sensitive approach into EU environmental and chemicals policies, including the Chemicals Strategy for Sustainability, with particular attention to endocrine-disrupting chemicals and PFAS and their impact on women's health, and to recognise environmental health and pollution prevention as key components of gender-sensitive public health policies;

Or. en

Amendment 179
Alessandra Moretti

Motion for a resolution
Paragraph 4 b (new)

Motion for a resolution

Amendment

4 b. Calls on the Commission and member states to include a gender dimension into all prevention policies and to consider the gender aspects while tackling modifiable risk factors for NCDs;

Or. en

Amendment 180
Alessandra Moretti

Motion for a resolution
Paragraph 4 c (new)

Motion for a resolution

Amendment

4 c. *Calls on the Commission and Members states to implement, in coordination with medical authorities and public health bodies, information campaigns addressed to all women to properly educate and advise them on the consequences related to their exposure to risk factors such as tobacco, alcohol and unhealthy nutrition choices, particularly in relation to the different effects on their health if compared to men;*

Or. en

Amendment 181
Sirpa Pietikäinen

Motion for a resolution
Paragraph 4 c (new)

Motion for a resolution

Amendment

4 c. *Expresses deep concern over the growing influence of anti-gender movements in the EU that seek to roll back women's and LGBTIQ+ people's rights and restrict access to SRHR services;*

Or. en

Amendment 182
Sirpa Pietikäinen

Motion for a resolution
Paragraph 4 d (new)

Motion for a resolution

Amendment

4 d. *Stresses that health is a shared concern across the EU and that strict adherence to the principle of subsidiarity should not prevent coordinated action;*

underlines that women make up half of the population and the majority of the health and care workforce, and that EU-level cooperation is essential to ensure equitable access to gender-responsive health services, including sexual and reproductive health services, maternal care, and prevention and treatment of female-prevalent conditions; highlights that coordinated EU action strengthens resilience, ensures continuity of care during crises, reduces inequalities between Member States, and guarantees that citizens' health rights are effectively protected across borders; recalls, in line with Article 5 of the Treaty on European Union, that the Union may act when the objectives of an action cannot be sufficiently achieved by the Member States alone, and that Article 168 of the Treaty on the Functioning of the European Union provides for Union action to complement national policies and address cross-border threats to health;

Or. en

Amendment 183
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 4 d (new)

Motion for a resolution

Amendment

4 d. *Calls on the Commission to address digital health technologies, both in terms of the capacity to improve women's health outcomes and support gender equality, but also to identify and mitigate against the risks of gender-based technology facilitated violence, discrimination and widening of health*

inequalities and the digital gender divide^{14a};

14a

<https://www.who.int/publications/i/item/9789240107588>

Or. en

Amendment 184

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

**Motion for a resolution
Paragraph 4 d (new)**

Motion for a resolution

Amendment

4 d. Calls on the Commission and Member States to dedicate awareness campaigns on eating disorders prevention; calls on the Commission and Member States to dedicate funding for research and awareness campaigns on eating disorders prevention;

Or. en

**Amendment 185
Sirpa Pietikäinen**

**Motion for a resolution
Subheading 2**

Motion for a resolution

Amendment

Clinical trials *and research*

***Research, including* clinical trials**

Or. en

Amendment 186

Laurence Trochu

**Motion for a resolution
Paragraph 5**

Motion for a resolution

5. ***Expresses concern that despite improvements to inclusivity in clinical trials, the representation of women remains below that of men; stresses that there are no inclusivity requirements in the pre-trial phase and that the majority of animal testing is still conducted on males of the species only¹⁵; calls on the Commission to introduce further measures to address the ongoing imbalance in clinical trial participation;***

¹⁵ Galea, L.A.M. and Parekh, R.S., ‘Ending the neglect of women’s health in research’, BMJ, Vol. 381, <https://pubmed.ncbi.nlm.nih.gov/37308180/>.

Amendment

5. ***Welcomes the fact that the representation of women in clinical trials has significantly improved, particularly during the phases with lower risk levels; acknowledges that there are no inclusivity requirements in the pre-trial phase, that ethics committees are responsible for validating protocols and that the majority of animal testing is still conducted on males of the species only¹⁵; takes the view that all treatments should include tests to measure teratogenic effects; calls on the Commission to review EU legislation to protect the health and fertility of women, and foetuses;***

¹⁵ Galea, L.A.M. and Parekh, R.S., ‘Ending the neglect of women’s health in research’, BMJ, Vol. 381, <https://pubmed.ncbi.nlm.nih.gov/37308180/>.

Or. fr

**Amendment 187
Christine Anderson**

**Motion for a resolution
Paragraph 5**

Motion for a resolution

5. Expresses concern that despite improvements to inclusivity in clinical trials, the representation of women remains below that of men; stresses that there are no inclusivity requirements in the pre-trial phase and that the majority of animal testing is still conducted on males of the

species only¹⁵ ; calls on the Commission *to introduce further measures to address the ongoing imbalance in clinical trial participation*;

¹⁵ Galea, L.A.M. and Parekh, R.S., ‘Ending the neglect of women’s health in research’, BMJ, Vol. 381, <https://pubmed.ncbi.nlm.nih.gov/37308180/>.

species only¹⁵ ; calls on the Commission *and Member States to ensure that clinical trials adequately analyse sex-based biological differences, including disease presentation, pharmacokinetics and treatment outcomes*; stresses that *research design must prioritise medically relevant biological variables*;

¹⁵ Galea, L.A.M. and Parekh, R.S., ‘Ending the neglect of women’s health in research’, BMJ, Vol. 381, <https://pubmed.ncbi.nlm.nih.gov/37308180/>.

Or. en

Amendment 188

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 5

Motion for a resolution

5. Expresses concern that despite improvements to inclusivity in clinical trials, the representation of women remains below that of men; stresses that there are no inclusivity requirements in the pre-trial phase and that the majority of animal testing is still conducted on males of the species only¹⁵ ; calls on the Commission to introduce *further measures* to address the ongoing imbalance in clinical trial participation;

¹⁵ Galea, L.A.M. and Parekh, R.S., ‘Ending the neglect of women’s health in research’, BMJ, Vol. 381,

Amendment

5. Expresses concern that despite improvements to inclusivity in clinical trials, the representation of women remains below that of men; stresses that there are no inclusivity requirements in the pre-trial phase and that the majority of animal testing is still conducted on males of the species only¹⁵ ; calls on the Commission to introduce *mandatory requirements for sex- and gender-sensitive research design throughout the full research cycle, including in the pre-trial phase* to address the ongoing imbalance in clinical trial participation;

¹⁵ Galea, L.A.M. and Parekh, R.S., ‘Ending the neglect of women’s health in research’, BMJ, Vol. 381,

<https://pubmed.ncbi.nlm.nih.gov/37308180/>.

<https://pubmed.ncbi.nlm.nih.gov/37308180/>.

Or. en

Amendment 189
Alessandra Moretti

Motion for a resolution
Paragraph 5 a (new)

Motion for a resolution

Amendment

5 a. Underlines the significant biological, anatomical and physiological differences between women and men and calls for medical and pharmaceutical R&D to address discriminations and obstacles and ensure equal access to treatment and care for women;

Or. en

Amendment 190
Laurence Trochu

Motion for a resolution
Paragraph 6

Motion for a resolution

Amendment

6. Welcomes the EMA's intended adoption of new guidelines on the inclusion of pregnant and breastfeeding individuals in clinical trials; urges the EMA to adopt similar guidelines to improve the inclusion of other under-represented communities;

deleted

Or. fr

Amendment 191
Sirpa Pietikäinen

Motion for a resolution
Paragraph 6

Motion for a resolution

6. Welcomes the EMA's intended adoption of new guidelines on the inclusion of pregnant and breastfeeding individuals in clinical trials; urges the EMA to adopt similar guidelines to improve the inclusion of other under-represented communities;

Amendment

6. Welcomes the EMA's intended adoption of new guidelines on the inclusion of pregnant and breastfeeding individuals in clinical trials; urges the EMA to adopt similar guidelines to improve the inclusion of other under-represented communities, ***such as older women; calls on the Commission to ensure that medicines are tested in proportions reflecting their likely user groups, for example, if a medicine is primarily prescribed to older women, it should also be tested primarily on older women;***

Or. en

Amendment 192

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution
Paragraph 6

Motion for a resolution

6. Welcomes the EMA's intended adoption of new guidelines on the inclusion of pregnant and breastfeeding individuals in clinical trials; urges the EMA to adopt similar guidelines to improve the inclusion of other under-represented communities;

Amendment

6. Welcomes the EMA's intended adoption of new guidelines on the inclusion of ***pregnant and breastfeeding individuals in clinical trials; ; urges the relevant authorities dealing with clinical trials to introduce binding targets as regards the representation of women, as well as*** pregnant and breastfeeding individuals in clinical trials; urges the EMA to adopt similar guidelines to improve the inclusion of other under-represented communities;

Or. en

Amendment 193
Sirpa Pietikäinen

Motion for a resolution
Paragraph 6 a (new)

Motion for a resolution

Amendment

6 a. Recognises the need for increased investment in research and innovation (R&I) for new and improved health tools for conditions that affect women specifically, differently and disproportionately; recommends the establishment of an expert group on women's health R&I to guide the development and collaborative implementation of a women's health research agenda to drive cohesive actions across all relevant EU budget financing programmes;

Or. en

Amendment 194
Laurence Trochu

Motion for a resolution
Paragraph 7

Motion for a resolution

Amendment

7. Stresses that the lack of understanding of **sex- and gender-based** differences in health is exacerbated by the fact that the data outcomes of research are rarely disaggregated by sex; calls on the Commission to make sex-disaggregated data mandatory in **all** EU-funded projects;

7. Stresses that the lack of understanding of **sex-based** differences in health is exacerbated by the fact that the data outcomes of research are rarely disaggregated by sex; calls on the Commission to make sex-disaggregated data mandatory in EU-funded projects, **where relevant**;

Or. fr

Amendment 195
Sirpa Pietikäinen

Motion for a resolution
Paragraph 7

Motion for a resolution

7. Stresses that the lack of understanding of sex- **and gender-based** differences in health is exacerbated by the fact that the data outcomes of research are rarely disaggregated by sex; calls on the Commission to make **sex-disaggregated** data mandatory in all EU-funded projects;

Amendment

7. Stresses that the lack of understanding of sex-, **gender- and disability-based** differences in health is exacerbated by the fact that the data outcomes of research are rarely disaggregated by sex; calls on the Commission to make **sex- and disability-disaggregated** data mandatory in all EU-funded projects;

Or. en

Amendment 196
Christine Anderson

Motion for a resolution
Paragraph 7

Motion for a resolution

7. ***Stresses that the lack of understanding of sex- and gender-based differences in health is exacerbated by the fact that the data outcomes of research are rarely disaggregated by sex; calls on the Commission to make sex-disaggregated data mandatory in all EU-funded projects;***

Amendment

7. ***Calls for systematic reporting of sex-disaggregated data in EU-funded biomedical research, including analysis of sex-specific treatment responses and adverse drug reactions, where scientifically appropriate and statistically meaningful;***

Or. en

Amendment 197
Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution
Paragraph 7

Motion for a resolution

7. Stresses that the lack of understanding of ***sex- and gender-based*** differences in health is exacerbated by the fact that the data outcomes of research are rarely disaggregated by sex; calls on the Commission to make sex-disaggregated data mandatory in all EU-funded projects;

Amendment

7. Stresses that the lack of understanding of ***sex-based*** differences in health is exacerbated by the fact that the data outcomes of research are rarely disaggregated by sex; calls on the Commission to make sex-disaggregated data mandatory in all EU-funded projects;

Or. en

Amendment 198
Sirpa Pietikäinen

Motion for a resolution
Paragraph 7 a (new)

Motion for a resolution

Amendment

7 a. Calls for improved collection, harmonisation, and use of sex- and gender-disaggregated data, as well as intersectional data, in all areas of health policy and research across the EU; calls on the Commission, in cooperation with the European Institute for Gender Equality (EIGE) and the EU Agency for Fundamental Rights (FRA), to ensure the use of common indicators and methodologies to monitor women's health and gender-based disparities;

Or. en

Amendment 199
Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Paragraph 7 a (new)

Motion for a resolution

Amendment

7 a. *Calls on the Commission and the Member States to develop and fund targeted, evidence-based awareness-raising and communication campaigns on disease prevention and health promotion, with a particular focus on diseases that disproportionately affect women, in order to improve health literacy, promote early diagnosis and screening, and reduce gender inequalities in access to prevention and healthcare;*

Or. en

Amendment 200

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 7 a (new)

Motion for a resolution

Amendment

7 a. *Calls on the Commission to support research into the links between environmental exposures and gender-specific health diseases, including reproductive diseases and disorders and hormone-related diseases and disorders;*

Or. en

Amendment 201

Sirpa Pietikäinen

Motion for a resolution

Paragraph 7 b (new)

Motion for a resolution

Amendment

7 b. *Calls for the systematic integration of sex- and gender-based analysis in the testing, authorisation, and monitoring of*

medicines and medical devices within the EU; stresses that biological and hormonal differences between women and men can affect the efficacy and side effects of medicines, which must be adequately studied and reported;

Or. en

Amendment 202

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

**Motion for a resolution
Paragraph 7 b (new)**

Motion for a resolution

Amendment

7 b. Stresses the need to fully integrate mental health care into the diagnosis and treatment of gender-specific conditions; calls for accessible, publicly funded psychological support as part of standard care pathways for women living with chronic pain and reproductive health conditions;

Or. en

Amendment 203

Majdouline Sbai

on behalf of the Verts/ALE Group

**Motion for a resolution
Paragraph 7 b (new)**

Motion for a resolution

Amendment

7 b. Calls on the Commission to support research into the links between exposure to gender-based violence and health outcomes;

Or. en

Amendment 204

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 7 c (new)

Motion for a resolution

Amendment

7 c. Stresses the need to adopt an exposome approach in research to systematically evaluate how all kinds of exposures interact with sex and gender health leading to an increasing risk of developing non communicable diseases (NCDs) and affecting prenatal and postnatal health; calls on the Commission to establish a Mission Exposome in Horizon Europe dedicated to research on the exposome and based on a longitudinal cohort of 10 million participants across the Union, tracking environmental, chemical, biological, and social exposures throughout the life course;

Or. en

Amendment 205

Sirpa Pietikäinen

Motion for a resolution

Paragraph 7 c (new)

Motion for a resolution

Amendment

7 c. Calls for multidisciplinary collaboration to in women's health, for example between neurologists and gynecologists to tackle migraine, as well as integration with other sectors to address eco-social determinants of health and taking into account demographic factors such as age, rurality and access disparities, in order to ensure

comprehensive care and better understanding of gendered health conditions and the gaps in treatment;

Or. en

Amendment 206
Sirpa Pietikäinen

Motion for a resolution
Paragraph 7 d (new)

Motion for a resolution

Amendment

7 d. Stresses the need for research on health outcomes of parental leave models, e.g., father-inclusive or flexible options effect on parents' physical and mental health, especially for women; notes the lack of impact assessments and long-term follow-up of rehabilitation's effect on women's health;

Or. en

Amendment 207
Sirpa Pietikäinen

Motion for a resolution
Subheading 2 a (new)

Motion for a resolution

Amendment

Digital health, data and artificial intelligence

Or. en

Amendment 208
Sirpa Pietikäinen

Motion for a resolution
Paragraph 7 e (new)

Motion for a resolution

Amendment

7 e. *Calls for the integration of a gender perspective in the digitalisation of health systems across the EU; stresses that digital health technologies, including AI-based diagnostic tools, must be designed, implemented, and monitored in a way that reflects women's specific health needs and addresses existing gender biases in health data and algorithms;*

Or. en

Amendment 209
Sirpa Pietikäinen

Motion for a resolution
Paragraph 7 f (new)

Motion for a resolution

Amendment

7 f. *Calls on the Commission and the Member States to ensure that health technologies, including digital health tools, medical devices, AI-driven diagnostics, and wearable health technologies, are developed, tested, and implemented with a gender perspective; stresses the promotion of gender-responsive design in AI and digital health tools to prevent replication of gender biases in emerging technologies; calls on the Commission and Member States to promote inclusive and accessible health technology by ensuring that women are meaningfully involved in product design, testing, and development;*

Or. en

Amendment 210
Sirpa Pietikäinen

Motion for a resolution
Paragraph 7 g (new)

Motion for a resolution

Amendment

7 g. Calls on the Commission and the Member States to ensure that the implementation of the European Health Data Space (EHDS) incorporates a strong gender perspective; stresses that sex- and gender-disaggregated health data are essential to understanding differences in disease prevalence, treatment outcomes, and access to healthcare;

Or. en

Amendment 211
Sirpa Pietikäinen

Motion for a resolution
Paragraph 7 h (new)

Motion for a resolution

Amendment

7 h. Stresses that algorithmic tools used to detect and restrict so-called “inappropriate” content must be designed in a way that it does not flag topics related to women’s health, such as menstruation, menopause, fertility, and reproductive health as sexual or adult content, limiting its visibility;

Or. en

Amendment 212
Sirpa Pietikäinen

Motion for a resolution
Paragraph 7 i (new)

Motion for a resolution

Amendment

7 i. Calls for stronger action to address the spread of gendered health misinformation online, including harmful content targeting women such as fake fertility treatments, so-called “miracle cures” for breast cancer, and other deceptive health claims;

Or. en

**Amendment 213
Sirpa Pietikäinen**

**Motion for a resolution
Paragraph 7 j (new)**

Motion for a resolution

Amendment

7 j. Calls for the promotion of equitable, accessible, and gender-responsive e-pharmacy services across the European Union; stresses that the development and regulation of e-pharmacies must take into account women’s specific health needs in different medications, including access to contraception, maternal health products, menopause treatments, and chronic care medications, in order to reduce existing gender gaps in healthcare access; highlights the importance of ensuring geographical equality by addressing disparities between urban and rural areas, remote regions, and different Member States, so that all patients can benefit equally from safe, affordable, and high-quality digital pharmaceutical services;

Or. en

**Amendment 214
Sirpa Pietikäinen**

**Motion for a resolution
Paragraph 8**

Motion for a resolution

8. Highlights the fact that as a result of systemic underfunding and a lack of research, diagnostic methods and treatments remain male-centric, which can lead to substandard and higher-risk treatment for women and transgender people;

Amendment

8. Highlights the fact that as a result of systemic underfunding and a lack of research, diagnostic methods and treatments remain male-centric, which can lead to substandard and higher-risk treatment for women, ***including women with disabilities*** and transgender people;

Or. en

Amendment 215
Laurence Trochu

Motion for a resolution
Paragraph 8

Motion for a resolution

8. Highlights the fact that ***as a result of systemic underfunding and a lack of research***, diagnostic methods and treatments ***remain male-centric, which*** can lead to substandard and higher-risk treatment for women ***and transgender people***;

Amendment

8. Highlights the fact that ***many*** diagnostic methods and treatments ***are developed without taking the specific characteristics of women into account, and that this*** can lead to substandard and higher-risk treatment for women;

Or. fr

Amendment 216
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 8

Motion for a resolution

8. Highlights the fact that as a result of systemic underfunding and a lack of research, diagnostic methods and treatments remain ***male-centric***, which can lead to substandard and higher-risk

Amendment

8. Highlights the fact that as a result of systemic underfunding and a lack of research, diagnostic methods and treatments remain ***male-normative***, which can lead to substandard and higher-risk

treatment for women and transgender people;

treatment for women and transgender people;

Or. en

Amendment 217
Sirpa Pietikäinen

Motion for a resolution
Paragraph 8 a (new)

Motion for a resolution

Amendment

8 a. Calls for the Union and the Member States to ensure equitable access to affordable, high-quality, and gender-responsive healthcare for all, regardless of age, disability, socio-economic status, migration background, sexual orientation, or gender identity; stresses the need to address existing barriers that women in all their diversity face in accessing timely diagnosis and treatment, including financial, geographical, and cultural obstacles;

Or. en

Amendment 218
Sirpa Pietikäinen

Motion for a resolution
Paragraph 8 b (new)

Motion for a resolution

Amendment

8 b. Calls on the Commission and the Member States to thrive towards ambitious targets of equal access to high-quality screening of cancer and other relevant diseases such as osteoporosis across all EU countries; stresses the importance of comprehensive and gender-sensitive screening programmes for breast cancer, cervical cancer, prostate cancer,

colorectal cancer, skin cancer, and lung cancer, which remain among the most common and preventable cancers in Europe;

Or. en

Amendment 219
Laurence Trochu

Motion for a resolution
Paragraph 9

Motion for a resolution

Amendment

9. Urges the medical profession to apply a precision-medicine approach to treatment in order to complement any measures taken to reduce inequality and increase investment in medical research; encourages the Member States to establish pilot programmes on gender-sensitive healthcare;

deleted

Or. fr

Amendment 220
Christine Anderson

Motion for a resolution
Paragraph 9

Motion for a resolution

Amendment

9. Urges the medical profession to apply a precision-medicine approach to treatment in order to complement any measures taken to reduce inequality and increase investment in medical research; encourages the Member States to establish pilot programmes on gender-sensitive healthcare;

9. Calls for sex-informed and clinically relevant gender-related approaches, including sex-specific reference ranges where appropriate, improved recognition of sex-specific symptom presentation (notably in cardiovascular disease), and strengthened pharmacovigilance to detect sex-specific adverse reactions;

Or. en

Amendment 221
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 9

Motion for a resolution

9. Urges the medical profession to apply a precision-medicine approach to treatment in order to complement any measures taken to reduce inequality and increase investment in medical research; **encourages** the Member States to establish pilot programmes on gender-sensitive healthcare;

Amendment

9. Urges the medical profession to apply a precision-medicine approach to treatment in order to complement any measures taken to reduce inequality and increase investment in medical research; **calls on** the Member States to establish pilot programmes on gender-sensitive healthcare;

Or. en

Amendment 222
Victor Negrescu

Motion for a resolution
Paragraph 9 a (new)

Motion for a resolution

9 a. Stresses that prevention and early detection must constitute a central pillar of EU action on gender equality in health; calls on the Commission and the Member States to prioritise accessible, community-based preventive services, including mobile screening units, telemedicine solutions and local health outreach programmes targeting women in rural and disadvantaged areas, in order to decrease the overall life-threatening and irreversible conditions resulting from delayed diagnosis;

Amendment

Or. en

Amendment 223
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 9 a (new)

Motion for a resolution

Amendment

9 a. *Expresses concern about medically unnecessary treatments carried out without full and informed consent, particularly affecting intersex women, as well as coercive practices such as forced sterilisation, which continue to affect women with disabilities in the EU; notes that persistent medical misogyny and the systemic dismissal of women's experiences in healthcare contribute to delayed treatment-seeking and diminished trust in health systems;*

Or. en

Amendment 224
Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution
Paragraph 9 a (new)

Motion for a resolution

Amendment

9 a. *Stresses the need to duly take into account the biological reality of women, including hormonal cycles and other relevant biological factors, in the prevention, diagnosis, and treatment of diseases prevalent among women, in order to improve the effectiveness and safety of healthcare;*

Or. en

Amendment 225

Vytenis Povilas Andriukaitis

**Motion for a resolution
Paragraph 9 a (new)**

Motion for a resolution

Amendment

9 a. Stresses the importance of addressing gender inequalities in HIV prevention and care; calls on the EU to ensure that EU Member States consistently consider the health needs of women of all ages, promote gender-responsive prevention strategies, and improve early diagnosis measures;

Or. en

Amendment 226

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

**Motion for a resolution
Paragraph 9 a (new)**

Motion for a resolution

Amendment

9 a. Calls for the development and uptake of preventive cancer vaccination programmes and regular screening especially for human papillomavirus (HPV) and Hepatitis B virus (HBV);

Or. en

Amendment 227

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

**Motion for a resolution
Paragraph 9 b (new)**

Motion for a resolution

Amendment

9 b. *Emphasises the need to embed a consistent focus on sexual health; encourages Member States to effectively curb STI epidemics, by updating their national strategies, removing barriers to testing, and strengthening surveillance data on STIs to better target and improve prevention efforts; calls for an EU Action Plan on sexual and reproductive health including a pillar on STIs that systematically integrates women of all ages' health needs, gender-responsive prevention, and early diagnosis measures;*

Or. en

Amendment 228

Margarita de la Pisa Carrión, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Paragraph 9 b (new)

Motion for a resolution

Amendment

9 b. *Urges the Member States and the Commission to promote scientific studies on the factors that may be contributing to the increase in fertility problems, in particular the possible effect of certain medicines;*

Or. en

Amendment 229

Margarita de la Pisa Carrión, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Paragraph 9 c (new)

Motion for a resolution

Amendment

9 c. Emphasizes the importance of obtaining informed consent prior to any pharmacological or medical treatment, as it is essential to ensure genuine freedom in decision-making, given that such treatments can often have irreversible consequences;

Or. en

**Amendment 230
Laurence Trochu**

**Motion for a resolution
Paragraph 10**

Motion for a resolution

Amendment

10. Considers it essential that the Member States integrate gender-sensitive healthcare training into their medical curricula;

deleted

Or. fr

**Amendment 231
Dan-Ştefan Motreanu**

**Motion for a resolution
Paragraph 10**

Motion for a resolution

Amendment

10. Considers it essential that the Member States integrate gender-sensitive healthcare training into their medical curricula;

10. Considers it essential that the Member States integrate gender-sensitive healthcare training into their medical curricula ***and continuing professional development, stresses that this should include structured training on women-specific life-course conditions, including perimenopause and menopause, and relevant competences in gynaecological endocrinology for primary care and specialist services; and stresses, in addition, the need for training on***

endometriosis symptom recognition and patient narratives, to improve timely referral and intervention;

Or. en

Amendment 232
Sirpa Pietikäinen

Motion for a resolution
Paragraph 10

Motion for a resolution

10. Considers it essential that the Member States integrate gender-sensitive healthcare training into their medical curricula;

Amendment

10. Considers it essential that the Member States integrate gender-sensitive healthcare training into their medical curricula; *stresses that such training should cover gender bias in diagnosis and treatment, the specific health symptoms and needs of women in all their diversity, and gender-responsive and culturally competent communication with patients;*

Or. en

Amendment 233
Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution
Paragraph 10

Motion for a resolution

10. Considers it essential that the Member States integrate gender-sensitive healthcare training into their medical curricula;

Amendment

10. Considers it essential that the Member States integrate gender-sensitive healthcare training into their medical curricula *and calls on the Commission to encourage the exchange of best practices and knowledge on how healthcare workforce can be better trained and sensibilised to gender-sensitive healthcare;*

Amendment 234

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 10

Motion for a resolution

10. Considers it essential that the Member States integrate gender-sensitive healthcare training into their medical curricula;

Amendment

10. Considers it essential that the Member States integrate **mandatory** gender-sensitive healthcare training into their medical curricula, ***including training on sex and gender differences in diagnosis, treatment and clinical research and gender-based violence prevention and response;***

Amendment 235

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 10

Motion for a resolution

10. Considers it essential that the Member States integrate gender-sensitive healthcare training into their medical curricula;

Amendment

10. Considers it essential that the Member States integrate gender-sensitive, ***intersectional and patient-centred*** healthcare training into their medical curricula, ***including on gender prejudice, pain management, SRHR and the prevention of discrimination;***

Amendment 236

Sirpa Pietikäinen

**Motion for a resolution
Paragraph 10 a (new)**

Motion for a resolution

Amendment

10 a. Calls on the Commission and the Member States to harmonise the framework for the training, professional rights, and scope of practice of midwives across the EU; stresses that in many countries midwives lack prescribing rights and professional autonomy, which undermines their ability to deliver timely and appropriate care, particularly in rural and marginalised communities; calls for EU-level guidelines and mutual recognition of qualifications to ensure that midwives can practise safely, independently where appropriate, and provide high-quality maternal, reproductive, and sexual health services for all women;

Or. en

Amendment 237

Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

**Motion for a resolution
Paragraph 10 a (new)**

Motion for a resolution

Amendment

10 a. Calls on the Commission and Member States to ensure that health systems are equipped to prevent, identify, and respond to gender-based violence, including through gender-sensitive, patient-centred, trauma-informed care approaches; calls on Member States to establish clear pathways between health services, social services, and specialised support services for victims of gender-

based violence, including female genital mutilation, ensuring accessibility for migrant women, women with disabilities, and LGBTQI+ persons;

Or. en

Amendment 238

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 10 a (new)

Motion for a resolution

Amendment

10 a. Calls on the Commission and the Member States to strengthen prevention policies addressing environmental risk factors such as air pollution and chemical exposure, which disproportionately affect women's health across the life course;

Or. en

Amendment 239

Margarita de la Pisa Carrión, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Paragraph 10 a (new)

Motion for a resolution

Amendment

10 a. Calls on Member States to develop specific strategies to improve the diagnosis and treatment of migraine in women and to incorporate it as a priority in public health programs and neurological disease prevention initiatives;

Or. en

Amendment 240
Victor Negrescu

Motion for a resolution
Paragraph 10 a (new)

Motion for a resolution

Amendment

10 a. Encourages Member States to address shortages of healthcare professionals in rural and remote areas through targeted incentives, EU-supported training programmes and cohesion policy instruments;

Or. en

Amendment 241

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution
Paragraph 10 a (new)

Motion for a resolution

Amendment

10 a. Calls on the Member States to raise awareness of gender differences in cardiovascular diseases and understanding the atypical symptoms that women face in cardiovascular health;

Or. en

Amendment 242

Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Paragraph 10 b (new)

Motion for a resolution

Amendment

10 b. Reiterates that women's health medicines are not adequately prioritised in EU efforts to protect against shortages and supply disruptions, despite inter alia abortion medicine and contraception being routinely subjected to shortages in Member States: calls on the EMA to ensure the inclusion of these medicines in the Union List of Critical Medicines; calls on the Council to align with the European Parliament's proposal to recognise medicines for abortion and contraception as medicinal products of common interest in the Critical Medicines Act;

Or. en

**Amendment 243
Sirpa Pietikäinen**

**Motion for a resolution
Paragraph 10 b (new)**

Motion for a resolution

Amendment

10 b. Calls on the Commission and the Member States to ensure that healthcare systems and medical training fully recognise sex- and gender-specific differences in disease presentation and recognition of gender-specific symptoms; stresses that conditions such as heart attacks often present with different symptoms in women compared to men, which can lead to misdiagnosis and delayed treatment and even in the worse cases, non-treatment when diagnosed as psychosomatic condition;

Or. en

**Amendment 244
Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse,
Irena Joveva, Billy Kelleher, Yvan Verougstraete**

Motion for a resolution
Paragraph 10 b (new)

Motion for a resolution

Amendment

10 b. Highlights that medical devices play an increasingly central role in disease management and monitoring; underlines that insufficient consideration of physiological differences in the design, testing and validation of medical devices may result in differences in performance, accuracy and user experience; calls on the Commission to promote the integration of gender-specific data in clinical investigations of medical devices supported at Union level;

Or. en

Amendment 245

Margarita de la Pisa Carrión, Ondřej Knotek, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution
Paragraph 10 b (new)

Motion for a resolution

Amendment

10 b. Emphasizes the importance of early cancer detection through screening and the consideration of predisposition factors in women to improve prognosis, increase opportunities for timely intervention, and advance research into more effective treatments;

Or. en

Amendment 246

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution
Paragraph 10 c (new)

10 c. Recognizes that biotechnology and advanced therapy medicinal products (ATMPs) offer unprecedented opportunities to address unmet medical needs and reduce the gender health gap; warns, however, that without a proactive approach, these innovations may mirror existing biases; underlines the necessity of integrating sex and gender-specific considerations throughout the entire lifecycle of a product from early-stage research to clinical validation; urges the Commission to require the collection and reporting of sex-disaggregated data in all Union-supported health initiatives such as the European Health Data Space and the European Reference Networks; calls on the Commission to ensure that gender-specific considerations are integrated into the development, testing and assessment of biopharmaceutical innovation, clinical trials and manufacturing supported by Union funding; calls for the Commission, the European Medicines Agency (EMA) and the Heads of Medicines Agencies (HMA) regulatory network to ensure the balanced representation of women in multi-country clinical trials, to ensure that all medicinal products are safe and effective for the entire population, and to make safe and gender-responsive medicinal products a competitive advantage for the European life sciences and biotechnology ecosystem;

Or. en

Amendment 247
Sirpa Pietikäinen

Motion for a resolution
Paragraph 10 c (new)

10 c. Calls on the Commission and the Member States to promote the establishment of multidisciplinary Life Course Women's Health Centres across the EU, designed to provide integrated, gender-responsive, and continuous care for women from adolescence through menopause and older age; stresses that such centres should bring together expertise in gynaecology, obstetrics, cardiology, rheumatology, endocrinology, mental health, and primary care, addressing both female-specific and female-prevalent conditions such as endometriosis, polycystic ovary syndrome (PCOS), autoimmune diseases, pregnancy-related complications, and cardiovascular disease, the leading cause of death among women; stresses the potential of Life Course Women's Health Centres to serve as experimental research and innovation hubs, as well as centres of excellence that generate and disseminate knowledge to healthcare professionals and systems across Member States; calls for the establishment of a European Reference Network (ERN) on Women's Health, building on the model of existing ERNs for rare diseases, to strengthen research collaboration, improve clinical practice, and ensure that women's specific health needs are systematically addressed across the EU;

Or. en

Amendment 248

Margarita de la Pisa Carrión, Ondřej Knotek, Viktória Ferenc, Laurent Castillo, Valérie Deloge, Marie-Luce Brasier-Clain

**Motion for a resolution
Paragraph 10 c (new)**

10 c. Highlights the importance of carrying out systematic screening for cardiovascular diseases and strokes, developing strategies that specifically address women's heart and brain health, promoting effective communication on women-specific risks and symptoms, and supporting research to improve prevention, diagnosis, and treatment for women;

Or. en

Amendment 249
Sirpa Pietikäinen

Motion for a resolution
Paragraph 10 d (new)

Motion for a resolution

Amendment

10 d. Calls for medicine reimbursement schemes to be gender-neutral by ensuring that reimbursement levels reflect medical necessity rather than historical gender biases, and by regularly assessing the system for potential gendered impacts;

Or. en

Amendment 250
Laurence Trochu

Motion for a resolution
Paragraph 11

Motion for a resolution

Amendment

11. Strongly welcomes the 'My Voice, My Choice' European Citizens' Initiative; reiterates its call on the Commission to make full use of its competence in health policy to provide support to Member States in guaranteeing universal access to SRHR and to enshrine SRHR and the

deleted

right to safe and legal abortion in the Charter of Fundamental Rights of the European Union;

Or. fr

Amendment 251
Christine Anderson

Motion for a resolution
Paragraph 11

Motion for a resolution

Amendment

11. Strongly welcomes the ‘My Voice, My Choice’ European Citizens’ Initiative; reiterates its call on the Commission to make full use of its competence in health policy to provide support to Member States in guaranteeing universal access to SRHR and to enshrine SRHR and the right to safe and legal abortion in the Charter of Fundamental Rights of the European Union; *deleted*

Or. en

Amendment 252
Margarita de la Pisa Carrión, Viktória Ferenc

Motion for a resolution
Paragraph 11

Motion for a resolution

Amendment

11. Strongly welcomes the ‘My Voice, My Choice’ European Citizens’ Initiative; reiterates its call on the Commission to make full use of its competence in health policy to provide support to Member States in guaranteeing universal access to SRHR and to enshrine SRHR and the right to safe and legal abortion in the Charter of Fundamental Rights of the European Union; *deleted*

Amendment 253
Sirpa Pietikäinen

Motion for a resolution
Paragraph 11 a (new)

Motion for a resolution

Amendment

11 a. Regrets the fact that, despite the huge unmet need for contraception globally, the EU has not funded the development of novel contraceptives since 2021; recognises that the contraceptive burden - physically, financially, and mentally - is disproportionately carried by women; calls on the Commission to invest in the development of globally applicable contraceptive technologies for all genders, including male contraceptives;

Amendment 254
Margarita de la Pisa Carrión, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution
Paragraph 11 a (new)

Motion for a resolution

Amendment

11 a. Expresses concern that, under the banner of equality, women are increasingly encouraged to adopt continuous or systematic contraceptive practices throughout their reproductive life, rather than promoting a model of equality based on the recognition, respect, and acceptance of the intrinsic value and specific realities of women's biological and reproductive capacities;

Amendment 255
Sirpa Pietikäinen

Motion for a resolution
Paragraph 11 b (new)

Motion for a resolution

Amendment

11 b. Calls on the Commission and the Member States to ensure universal access to affordable, safe, and diverse contraceptive methods; stresses that women's self-determination in choosing contraception must be fully respected, including their right to receive complete and comprehensible information on the potential risks and side effects of contraceptive pills and other hormonal methods, enabling informed consent; calls for increased investment in innovative research and development of contraceptive options for men, with the aim of achieving greater gender equality and shared responsibility in family planning; underlines that comprehensive, age-appropriate sexuality education and unbiased medical counselling are essential to empower individuals to make informed, autonomous choices about their reproductive health;

Or. en

Amendment 256
Laurence Trochu

Motion for a resolution
Paragraph 12

Motion for a resolution

Amendment

12. Reiterates its call on the Commission to set up a voluntary, solidarity-based, opt-in EU financial mechanism that would enable Member

deleted

States to provide abortion care to people who cannot access it in their home country, without interfering with national laws and regulations; calls, furthermore, on the Commission to bring forward a proposal to this effect;

Or. fr

Amendment 257

Margarita de la Pisa Carrión, Valérie Deloge, Marie-Luce Brasier-Clain

Motion for a resolution

Paragraph 12

Motion for a resolution

Amendment

12. Reiterates its call on the Commission to set up a voluntary, solidarity-based, opt-in EU financial mechanism that would enable Member States to provide abortion care to people who cannot access it in their home country, without interfering with national laws and regulations; calls, furthermore, on the Commission to bring forward a proposal to this effect;

deleted

Or. en

Amendment 258

Christine Anderson

Motion for a resolution

Paragraph 12

Motion for a resolution

Amendment

12. Reiterates its call on the Commission to set up a voluntary, solidarity-based, opt-in EU financial mechanism that would enable Member States to provide abortion care to people who cannot access it in their home country, without interfering with national

deleted

laws and regulations; calls, furthermore, on the Commission to bring forward a proposal to this effect;

Or. en

Amendment 259

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 12

Motion for a resolution

12. Reiterates its call on the Commission to set up a voluntary, solidarity-based, opt-in EU financial mechanism that would enable Member States to provide abortion care to people who cannot access it in their home country, without interfering with national laws and regulations; calls, furthermore, on the Commission to bring forward a proposal to this effect;

Amendment

12. Reiterates its call on the Commission to set up a voluntary, solidarity-based, opt-in EU financial mechanism that would enable Member States to provide abortion care to people who cannot access it in their home country, without interfering with national laws and regulations; calls, furthermore, on the Commission to bring forward a proposal to this effect ***and to allocate specific funds for Member States to ensure access to safe and legal abortion services for all European women, in line with the ‘My Voice, My Choice’ European Citizens’***;

Or. en

Amendment 260

Sirpa Pietikäinen

Motion for a resolution

Paragraph 12 a (new)

Motion for a resolution

Amendment

12 a. Calls on the Member States to guarantee affordable universal access to comprehensive sexual and reproductive health services, including contraception,

maternal health care, and access to safe and legal abortion; calls the Commission to issue clear recommendations to member states on sexual and reproductive health and rights in line with public health and human rights standards;

Or. en

Amendment 261

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

**Motion for a resolution
Paragraph 12 a (new)**

Motion for a resolution

Amendment

12 a. Reiterates that sexual and reproductive health and rights are an integral part of human rights and public health policy; calls for comprehensive, age-appropriate, science-based sexuality and relationships education across the EU as a key tool for reducing inequalities, preventing violence, and empowering women and girls;

Or. en

Amendment 262

Victor Negrescu, Matjaž Nemeč

**Motion for a resolution
Paragraph 12 a (new)**

Motion for a resolution

Amendment

12 a. Calls on the Commission to ensure that the promotion of equal access to sexual and reproductive healthcare, including safe and legal abortion care, is explicitly reflected in the programming

and mid-term review of ESF+ operational programmes;

Or. en

Amendment 263
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 b (new)

Motion for a resolution

Amendment

12 b. Calls on the Commission and the Member States to ensure that individuals experiencing involuntary infertility or pregnancy loss have access to affordable, high-quality, and equitable fertility and miscarriage-related healthcare services; stresses the importance of integrated mental health support and counselling to address the emotional and psychological impact of infertility and miscarriage; calls for public health strategies, insurance coverage, and clinical guidance that prioritise patient autonomy, informed choice, and comprehensive, non-stigmatising care for all individuals seeking support;

Or. en

Amendment 264
Victor Negrescu, Matjaž Nemeč

Motion for a resolution
Paragraph 12 b (new)

Motion for a resolution

Amendment

12 b. Calls on the Commission to publish, on an annual basis, a public assessment of the uptake and impact of ESF+ funding in supporting access to safe and legal abortion care, including

data disaggregated by region and socio-economic status;

Or. en

Amendment 265

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 12 b (new)

Motion for a resolution

Amendment

12 b. Stresses that access to menstrual sanitary products should be guaranteed as a free public service and accessible regardless of the socio-economic status and age;

Or. en

Amendment 266

Sirpa Pietikäinen

Motion for a resolution

Paragraph 12 c (new)

Motion for a resolution

Amendment

12 c. Calls on the Commission and the Member States to recognise, prevent, and address gynaecologic and obstetric violence, including non-consensual, abusive, or coercive medical procedures, dismissive treatment such as delaying or refusal of women's reproductive health concerns, and violations of bodily autonomy in gynaecological and obstetric care; notes that examples of gynaecologic violence include performing perineal or episiotomy cuts during childbirth without explicit consent or informed agreement, and routine dismissal of women's

reported pain or symptoms in reproductive health; notes the severe impacts that such violence may cause on women's physical, mental and social health;

Or. en

Amendment 267

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

**Motion for a resolution
Paragraph 12 c (new)**

Motion for a resolution

Amendment

12 c. Stresses that access to safe and legal abortion, contraception and sexual education should be guarantee as a free public service, accessible regardless of the socio-economic status and age;

Or. en

**Amendment 268
Sirpa Pietikäinen**

**Motion for a resolution
Paragraph 12 d (new)**

Motion for a resolution

Amendment

12 d. Calls for stronger policies and coordinated action at Union and Member State level to prevent and combat female genital mutilation (FGM) by ensuring effective and non-discriminatory access to comprehensive, gender-responsive health services for survivors and those at risk, providing systematic training for teachers, healthcare professionals and other relevant frontline actors to identify girls and women at risk, to detect cases of FGM, and to act in accordance with clear

referral pathways and safeguarding guidelines, and ensuring that vulnerability to female genital mutilation remains duly recognised in vulnerability assessments and as a ground for international protection;

Or. en

Amendment 269
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 d (new)

Motion for a resolution

Amendment

12 d. Calls on the Commission and the Member States to ensure that all women and girls who have experienced gender-based violence have timely access to comprehensive, free, and trauma-informed health services, including physical, sexual, and mental health care; stresses the need to establish clear referral pathways between healthcare providers, social services, and specialised support organisations; calls for mandatory training for healthcare professionals, emergency responders, and law enforcement authorities on identifying, responding to, and documenting cases of gender-based violence in a gender-responsive and victim-centred manner;

Or. en

Amendment 270

Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Paragraph 12 d (new)

Motion for a resolution

Amendment

12 d. Calls on the Commission and the Member States to recognise and address obstetric and gynaecological violence as a form of gender-based violence, to promote respectful maternity care and to establish complaint mechanisms, data collection and training for healthcare professionals;

Or. en

Amendment 271
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 d (new)

Motion for a resolution

Amendment

12 d. Calls on the Commission and the Member States to ensure access to affordable, high-quality, and environmentally sustainable menstrual products free of harmful chemicals such as PFAS forever chemicals for all who need them;

Or. en

Amendment 272
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 e (new)

Motion for a resolution

Amendment

12 e. Stresses the need for workplace policies and conditions that support women with specific health conditions;

Or. en

Amendment 273
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 f (new)

Motion for a resolution

Amendment

12 f. Calls for greater recognition of gender bias in the assessment and treatment of pain, noting that women's pain is often underestimated, dismissed, or misdiagnosed compared to men's; stresses the importance of ensuring that pain relief is offered and accessible whenever medically indicated, and that women's self-reported experiences of pain are taken seriously in all healthcare settings; recognises that chronic inflammatory skin diseases, including atopic eczema, involve severe and persistent symptoms such as pain and unbearable itch that significantly impair quality of life, mental health and sleep, and disproportionately affect women;

Or. en

Amendment 274
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 g (new)

Motion for a resolution

Amendment

12 g. Calls on the Commission and the Member States to strengthen EU-wide cancer research, prevention, screening and care from a gender perspective; stresses, for example, the urgent need to improve data collection on metastatic breast cancer (MBC) through harmonised national registries, enhanced European Health Data Space integration, and systematic reporting to guide evidence-based policymaking; stresses the

importance of equity in genomic testing in tackling breast cancer in the EU;

Or. en

Amendment 275
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 h (new)

Motion for a resolution

Amendment

12 h. *Calls on the Commission and the Member States to ensure that cardiovascular and heart disease prevention, diagnosis, and treatment strategies in the EU fully integrate a gender perspective; stresses that cardiovascular and heart diseases remain the leading cause of death among women, yet women are often underdiagnosed and undertreated due to differences in symptoms, risk factors, and clinical presentation compared to men; calls for research that focuses on cardiovascular risks specific to women, particularly after menopause or during pregnancy;*

Or. en

Amendment 276
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 i (new)

Motion for a resolution

Amendment

12 i. *Calls on the Commission and the Member States to integrate a gender perspective into diabetes research, diagnosis, treatment, and management; stresses the need for development of sex-specific diagnostic criteria, and*

consideration of hormonal life stages such as menstruation, pregnancy, and menopause in clinical guidelines and digital health tools; calls for EU support for gender-responsive technologies and mental health integration to ensure personalized care, and outcomes for women living with diabetes;

Or. en

Amendment 277
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 j (new)

Motion for a resolution

Amendment

12 j. *Calls on the Commission and the Member States to address the gender-specific challenges of rheumatic and musculoskeletal diseases (RMDs) in women; stresses the need for increased EU research and innovation to better understand why women are disproportionately affected, experience more pain, and respond differently to treatments; calls for the development of gender-sensitive clinical guidelines, early screening programmes, and training for healthcare professionals to reduce misdiagnosis, diagnostic delays, and unequal treatment access; underlines the importance of understanding and mitigating gender-specific occupational risks and promoting workplace prevention and management strategies for RMDs, recognising their impact on women's health, workforce participation, and overall quality of life;*

Or. en

Amendment 278

Sirpa Pietikäinen

**Motion for a resolution
Paragraph 12 k (new)**

Motion for a resolution

Amendment

12 k. Calls on the Commission and the Member States to integrate a gender perspective into research, prevention, and care strategies for memory-disabling diseases such as Alzheimer's; stresses that women face higher prevalence due to longer average lifetime but even among women and men of the same age; notes that most of the caregivers to people with memory-disabling diseases are women;

Or. en

**Amendment 279
Sirpa Pietikäinen**

**Motion for a resolution
Paragraph 12 l (new)**

Motion for a resolution

Amendment

12 l. Calls on the Commission and Member States to take into consideration the gender-based elements on such prevalent communicable diseases as diabetes, cardiovascular diseases, allergy and asthma affecting women's overall quality of life, including their productivity at work and ability to perform daily activities; take action to enable better diagnostic and therapeutic stratification, in view of improving treatment pathways; support research in order to better understand the underlying mechanisms of these prevalence differences, and get a deeper insight into common co-morbidities; stresses the need to integrate gender considerations into frameworks related to occupational health and surveillance; address gender differences

in healthcare outcomes, including ensuring equity in clinical trials and treatment;

Or. en

Amendment 280
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 m (new)

Motion for a resolution

Amendment

12 m. Calls on the Commission and Member States to recognise Long COVID as a significant public health and gender equality challenge, given that women are disproportionately affected and often face medical dismissal or delays in diagnosis; calls on the Commission to continue its support for The Network of Expertise on Long COVID; recognises that those affected by Long COVID may suffer from work incapacity and therefore cause economic vulnerability; calls for support for patients' reintegration into work through flexible employment and social protection measures;

Or. en

Amendment 281
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 n (new)

Motion for a resolution

Amendment

12 n. Calls on the Commission and the Member States to address the mental health needs of women, recognising that women report lower levels of well-being and higher rates of depression and

psychological distress than men; stresses the importance of gender-sensitive prevention, early intervention, and support services, including accessible mental health care, community-based programmes, and awareness campaigns; encourages the collection of gender and sex-disaggregated data and research into the social and gendered determinants of mental health to inform policies that promote equal mental well-being across the EU; calls on the Commission and Member States to address the impact of online hate speech on mental health, particularly for women; stresses the importance of tackling root causes of gender-based harassment and discrimination on social media; urges the Commission to legally recognize gender harassment, including online, as criminalized hate speech, and to oblige platforms to identify and remove gender-based hate speech;

Or. en

Amendment 282
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 o (new)

Motion for a resolution

Amendment

12 o. Calls for the formal recognition of Post-SSRI Sexual Dysfunction (PSSD) as a serious and distinct adverse drug reaction, disproportionately affecting women; calls for further research to investigate the prevalence, biological mechanisms and treatments for PSSD; calls for access to care, support and redress for individuals affected by PSSD; calls for establishment of a compensation scheme for people suffering from serious and possibly permanent antidepressant-related harm, such as PSSD; calls to issue

an institutional apology to those harmed by PSSD, acknowledging the systemic regulatory and ethical failures that led to preventable suffering;

Or. en

Amendment 283
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 p (new)

Motion for a resolution

Amendment

12 p. Calls on the Commission and the Member States to integrate HIV and STI prevention, testing, and care into broader gender-sensitive health strategies; stresses the need to address the unique biological and structural vulnerabilities of all genders, particularly young women, migrant and mobile women, sex workers, women with disabilities, and survivors of gender-based violence; calls for gender-, age-, sexuality-, and race-sensitive research, improved data collection and reporting, affordable access to vaccinations, mental health support, and community-involved interventions to ensure equitable prevention and treatment across the life course;

Or. en

Amendment 284
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 q (new)

Motion for a resolution

Amendment

12 q. Calls on the Commission and Member States to ensure equitable access

to vaccines across the EU; stresses the importance of HPV vaccination to prevent cervical cancer, influenza and RSV vaccination to protect pregnant women and those with cardiovascular risk, and vaccination as a tool to reduce non-communicable disease burden; calls for clear EU coverage targets, harmonised monitoring through the ECDC, increased funding for prevention and research on women's health, and awareness-raising among policymakers, healthcare professionals, and the public; calls for measures to target misinformation about the side effects of vaccines;

Or. en

Amendment 285
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 r (new)

Motion for a resolution

Amendment

12 r. Calls on the Commission and the Member States to address the specific healthcare needs of LGBTIQ+ women and gender-diverse people, including access to preventative care, treatment, and trans-specific healthcare; stresses the impact of minority stress, discrimination, and provider bias on health outcomes and access; calls for the integration of LGBTIQ+ health content into medical school curricula and ongoing professional training for healthcare providers; encourages support for community-based healthcare initiatives and EU-funded research under EU4Health and HORIZON to ensure inclusive, equitable, and safe healthcare for all LGBTIQ+ individuals;

Or. en

Amendment 286
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 s (new)

Motion for a resolution

Amendment

12 s. Calls on the Commission and the Member States to integrate a gender-responsive and intersectional approach into all policies related to planetary health, including climate adaptation, environmental protection, and public health; stresses that women and girls are disproportionately affected by the health consequences of climate-related events, such as heat stress, vector-borne diseases, food insecurity, and displacement;

Or. en

Amendment 287
Sirpa Pietikäinen

Motion for a resolution
Paragraph 12 t (new)

Motion for a resolution

Amendment

12 t. Calls on the Commission and the Member States to strengthen measures to protect women and girls from harmful chemical exposure, recognising that women are disproportionately affected due to biological, social, and occupational factors; notes that chemicals in everyday products, including cosmetics, menstrual products, and household items, can disrupt hormonal systems, increase risks of conditions such as breast cancer, endometriosis, and fertility problems, and affect foetal development during pregnancy; calls for stricter regulation of endocrine-disrupting and persistent

substances, and transparent labelling to ensure that consumers can make informed, safe, and sustainable choices;

Or. en

Amendment 288
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 13

Motion for a resolution

13. Deplores the fact that since the inception of the EU's Community Research and Development Information Service almost 40 years ago, only **10 of the 145 983** EU-funded projects have focused specifically on endometriosis¹⁶ ;

Amendment

13. Deplores the fact that since the inception of the EU's Community Research and Development Information Service almost 40 years ago, only **a very small number of** EU-funded projects have focused specifically on endometriosis; **stresses that this underinvestment contributes to underdiagnosis, misdiagnosis and delayed treatment; calls for targeted EU funding to support endometriosis research, including development and validation of less invasive and earlier diagnostic approaches, improved clinical pathways and evidence-based treatment and support models, including in primary care;**

¹⁶ *Vigano, P., Casalechi, M. and Dolmans, M., 'European Union underinvestment in endometriosis research', Journal of Endometriosis and Uterine Disorders, Vol. 5, 2024, 100058, <https://www.sciencedirect.com/science/article/pii/S2949838423000464>.*

Or. en

Amendment 289
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 13

Motion for a resolution

13. Deplores the fact that since the inception of the EU's Community Research and Development Information Service almost 40 years ago, only 10 of the 145 983 EU-funded projects have focused specifically on endometriosis¹⁶ ;

¹⁶ Vigano, P., Casalechi, M. and Dolmans, M., 'European Union underinvestment in endometriosis research', Journal of Endometriosis and Uterine Disorders, Vol. 5, 2024, 100058, <https://www.sciencedirect.com/science/article/pii/S2949838423000464>.

Amendment

13. Deplores the fact that since the inception of the EU's Community Research and Development Information Service almost 40 years ago, only 10 of the 145 983 EU-funded projects have focused specifically on endometriosis¹⁶ **and calls on the Commission and the Member States to develop an EU-wide action plan on endometriosis, including specialised referral pathways and targets to reduce the diagnostic delay;**

¹⁶ Vigano, P., Casalechi, M. and Dolmans, M., 'European Union underinvestment in endometriosis research', Journal of Endometriosis and Uterine Disorders, Vol. 5, 2024, 100058, <https://www.sciencedirect.com/science/article/pii/S2949838423000464>.

Or. en

Amendment 290
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 13 a (new)

Motion for a resolution

Amendment

13 a. Calls on the Member States, within their competences, to strengthen timely diagnosis of endometriosis by integrating symptom recognition and referral pathways in primary care, ensuring appropriate access to specialist assessment where needed and improving health professional training to reduce dismissal and normalisation of symptoms; encourages the uptake of evidence-based

clinical guidance and the use of appropriate diagnostic tools, including imaging where clinically indicated, to reduce avoidable diagnostic delay;

Or. en

Amendment 291
Christine Anderson

Motion for a resolution
Paragraph 13 a (new)

Motion for a resolution

Amendment

13 a. Calls for increased attention to major women's health issues such as endometriosis, polycystic ovary syndrome, infertility, pelvic pain disorders, maternal health and menopause-related conditions;

Or. en

Amendment 292
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 13 b (new)

Motion for a resolution

Amendment

13 b. Calls for sustained public awareness and patient-information actions on endometriosis symptoms and care options, and for accessible psychosocial support where needed; stresses that earlier recognition and support can help prevent avoidable progression of symptoms, reduce negative impacts on education and work, and improve quality of life;

Or. en

Amendment 293
Sirpa Pietikäinen

Motion for a resolution
Paragraph 14

Motion for a resolution

14. Regrets the fact that, despite a prevalence of adverse menopause symptoms among women, the menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma;

Amendment

14. Regrets the fact that, despite a prevalence of adverse menopause symptoms among women, the menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma; ***calls on the Commission and the Member States to ensure that menopause is recognised as a significant public health issue and fully integrated into routine primary healthcare services; stresses the need for comprehensive education and awareness-raising campaigns to overcome societal stigma and misinformation, enabling women to seek timely and appropriate care; calls for increased research and development of effective, safe, and well-tolerated non-hormonal treatment options for menopausal symptoms, acknowledging that hormonal treatments are not suitable for all women, particularly those with hormone-sensitive conditions such as breast cancer; underlines the importance of training healthcare professionals on menopause management to provide consistent, evidence-based, and patient-centred support to women throughout the menopausal transition;***

Or. en

Amendment 294
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 14

Motion for a resolution

Amendment

14. Regrets the fact that, despite a prevalence of adverse menopause symptoms among women, **the** menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma;

14. Regrets the fact that, despite a prevalence of adverse **perimenopause and** menopause symptoms among women, **(peri)**menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma; ***calls on the Member States, within their competences, to strengthen evidence-based care pathways, including timely access to appropriate medical and psychosocial support, and to address inconsistent guidance and barriers to treatment where appropriate;***

Or. en

Amendment 295
Laurence Trochu

Motion for a resolution
Paragraph 14

Motion for a resolution

14. Regrets the fact that, despite a prevalence of adverse menopause symptoms among women, the menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma;

Amendment

14. Regrets the fact that, despite a prevalence of adverse menopause symptoms among women, the menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma; ***notes, however, that the narrative is changing and that the menopause is rightly becoming a bona fide public health topic;***

Or. fr

Amendment 296
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 14

Motion for a resolution

Amendment

14. Regrets the fact that, despite a prevalence of adverse menopause symptoms among women, the menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma;

14. Regrets the fact that, despite a prevalence of adverse menopause symptoms among women, the menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma ***and calls on the Member States to ensure timely access to menopause care, including specialised services and clear clinical guidelines;***

Or. en

Amendment 297

Christophe Clergeau, Pierre Juvet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 14

Motion for a resolution

14. Regrets the fact that, despite a prevalence of adverse menopause symptoms among women, the menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma;

Amendment

14. Regrets the fact that, despite a prevalence of adverse ***peri-menopause and*** menopause symptoms among women, the ***perimenopause and*** menopause is still not routinely integrated into primary healthcare and remains shrouded in social stigma;

Or. en

Amendment 298

Stine Bosse, Billy Kelleher, Olivier Chastel, Irena Joveva, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová

Motion for a resolution

Paragraph 14 a (new)

Motion for a resolution

Amendment

14 a. Notes with concern that, similar to endometriosis, ovarian cancer suffers from a lack of effective early-detection tools, often leading to late-stage diagnosis

and poor outcomes; urges the Commission to integrate specific targets for ovarian cancer into Europe's Beating Cancer Plan and the forthcoming Gender Equality Strategy (2026-2030), prioritising investment in diagnostic methods that account for the unique biological presentation of the disease; and calls on the Commission to launch dedicated funding calls specifically for ovarian cancer to close existing data gaps and incentivise the development of innovative, gender-sensitive treatments;

Or. en

Amendment 299
Laurence Trochu

Motion for a resolution
Paragraph 14 a (new)

Motion for a resolution

Amendment

14a. Emphasises that obesity in women is frequently diagnosed late, despite cardiovascular risks comparable to those observed in men; warns against any tendency to trivialise or normalise this condition in public discourse and points out that obesity is a chronic condition that requires enhanced prevention strategies and effective access to appropriate treatments;

Or. fr

Amendment 300
Sirpa Pietikäinen

Motion for a resolution
Paragraph 14 a (new)

Motion for a resolution

Amendment

14 a. Calls on the Commission and the Member States to recognise continence care as a significant yet often overlooked aspect of public health that disproportionately affects women, particularly during pregnancy, postpartum, and menopause; stresses the need to ensure access to affordable, high-quality, and environmentally sustainable continence products;

Or. en

Amendment 301
Dan-Ștefan Motreanu

Motion for a resolution
Paragraph 14 a (new)

Motion for a resolution

Amendment

14 a. Calls on the Commission and the Member States to support longer-term, evidence-based public information and education campaigns on perimenopause and menopause to improve health literacy, reduce stigma and enable women to seek timely support;

Or. en

Amendment 302
Sirpa Pietikäinen

Motion for a resolution
Paragraph 14 b (new)

Motion for a resolution

Amendment

14 b. Calls on the Commission and the Member States to recognise and address the health risks faced by informal carers and the predominantly female long-term care workforce; stresses that sustained physical and emotional demands, chronic

stress, social isolation, and neglect of self-care put carers at heightened risk of mental and physical health problems; stresses that carers, who are predominantly women, must be guaranteed financial support, flexible work arrangements, care leave, and access to adequate, supplementary care services, including targeted special continuous healthcare programme with regular checks, as well as counselling, peer support and rehabilitation both for the carer and the person being cared for; underlines the importance of securing carers' legal right to adequate free own personal time and encouragement for self-development and freedom of choice by personal budgeting and community-based care;

Or. en

Amendment 303

Stine Bosse, Billy Kelleher, Olivier Chastel, Irena Joveva, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová

**Motion for a resolution
Paragraph 14 b (new)**

Motion for a resolution

Amendment

14 b. *Calls on the Commission and Member States to promote the centralisation of ovarian cancer care by incentivising the establishment of specialised, high-volume centres of excellence to ensure equitable access to surgical and clinical expertise; encourages the allocation of specific research clusters to investigate low-incidence histological subtypes of ovarian cancer, which are currently overlooked in broader oncological studies; further emphasizes the need for integrated survivorship plans that address the specific long-term side effects of treatment, such as surgical menopause*

and psychological distress; suggests the launch of an EU innovation prize or 'Grand Challenge' to accelerate the discovery and validation of reliable biomarkers for early-stage diagnostic tools;

Or. en

Amendment 304
Sirpa Pietikäinen

Motion for a resolution
Paragraph 14 b (new)

Motion for a resolution

Amendment

14 b. Calls on the Commission and the Member States to strengthen gender-responsive policies in care for older persons, recognising that women represent the majority of older persons in need of care; stresses the need to ensure accessible, affordable, and high-quality long-term care services that respect the dignity, autonomy, and health of older women;

Or. en

Amendment 305
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 14 b (new)

Motion for a resolution

Amendment

14 b. Calls on the Member States to improve access to high-quality medical and psychosocial (peri)menopause care, including through national health systems, and stresses the importance of ensuring adequate remuneration for (peri)menopause counselling and

treatment so that time-intensive advice and follow-up are not structurally disincentivised;

Or. en

Amendment 306
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 14 c (new)

Motion for a resolution

Amendment

14 c. Calls on the Commission, together with the Member States and social partners, to promote menopause-inclusive workplaces and to support employers—particularly SMEs—in implementing practical measures such as manager training and awareness-raising, flexible working time arrangements and adjustments of working conditions, in order to reduce stigma and prevent avoidable reductions in working hours, career setbacks or premature labour-market exit linked to untreated menopausal symptoms;

Or. en

Amendment 307
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 14 d (new)

Motion for a resolution

Amendment

14 d. Calls for menopause and perimenopause research to be promoted and funded, including research on evidence-based healthcare interventions and workplace measures, and stresses the need to improve EU-level data on the

socio-economic and labour-market impacts of menopause;

Or. en

Amendment 308
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 14 e (new)

Motion for a resolution

Amendment

14 e. Calls on the Commission to consider developing a coordinated EU Menopause Strategy, building on effective national models and best practices, covering awareness, access to care, training and workplace standards, and to support improved monitoring and data collection to guide policy and research priorities;

Or. en

Amendment 309
Christine Anderson

Motion for a resolution
Paragraph 15

Motion for a resolution

Amendment

15. Urges the Commission to use the forthcoming gender equality strategy for 2026-2030 to propose concrete measures that prioritise investment in gender-specific conditions; stresses that investment in gender-specific conditions should be reflective of their severity and prevalence;

deleted

Or. en

Amendment 310

Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 15

Motion for a resolution

15. Urges the Commission to use the forthcoming gender equality strategy for 2026-2030 to propose concrete measures that prioritise investment in gender-specific conditions; stresses that investment in gender-specific conditions should be reflective of their severity and prevalence;

Amendment

15. Urges the Commission to use the forthcoming gender equality strategy for 2026-2030 to propose concrete measures that prioritise investment in gender-specific conditions ***and sexual and reproductive health and rights***; stresses that investment in gender-specific conditions should be reflective of their severity and prevalence ***and that concrete measures on sexual and reproductive health and rights are necessary to progress towards achieving the vision outlined in the Roadmap on Women's Rights***;

Or. en

Amendment 311

Dan-Ştefan Motreanu

Motion for a resolution

Paragraph 15

Motion for a resolution

15. Urges the Commission to use the forthcoming gender equality strategy for 2026-2030 to propose concrete measures that prioritise investment in gender-specific conditions; stresses that ***investment in gender-specific conditions*** should ***be reflective of their severity and prevalence***;

Amendment

15. Urges the Commission to use the forthcoming gender equality strategy for 2026-2030 to propose concrete measures that prioritise investment in gender-specific conditions; stresses that ***this*** should ***explicitly include perimenopause and menopause, reflecting documented gaps in (peri)menopause information and care and the need for coordinated action spanning health systems, training and workplaces***;

Or. en

Amendment 312
Sirpa Pietikäinen

Motion for a resolution
Paragraph 15 a (new)

Motion for a resolution

Amendment

15 a. Calls on the Commission to include a dedicated section on older women in the proposed Gender Equality Strategy, recognising that older women are often under-treated and that gender perspectives are insufficiently applied in their healthcare; ensures that the strategy includes processes to develop and share best practices on gender-responsive health promotion, prevention, and treatment for older women, including preventative measures such as adequate nutrition and exercise, timely diagnosis and care for illnesses, and tailored approaches for institutionalised women and those with memory-disabling diseases who may struggle to express their needs, preferences and symptoms; highlights that ensuring active care, healthy living, and equal access to treatment for older women, including those in care facilities, is a fundamental human right and an essential component of a comprehensive women's health strategy;

Or. en

Amendment 313
Christophe Clergeau, Pierre Jouvét, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution
Paragraph 15 a (new)

Motion for a resolution

Amendment

15 a. Emphasises the critical role of civil society organisations working to advance gender equality and sexual and reproductive health and rights in ensuring access to care for women across the EU, collecting data on women's health experiences and needs, and contributing to ensuring more gender-inclusive laws and policies in the field of healthcare: calls for their role to be explicitly acknowledged in the upcoming AgoraEU and European Competitiveness Fund by earmarking sufficient levels of funding for civil society organisations working on gender equality and sexual and reproductive health and rights in both programmes;

Or. en

Amendment 314

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

**Motion for a resolution
Paragraph 15 a (new)**

Motion for a resolution

Amendment

15 a. Calls on Member States to ensure timely and equitable access to fertility care as well as evidence-based, reliable public information on fertility through a rights-based approach that supports reproductive autonomy, with the support of the Commission through guidance, data collection, and the exchange of best practices;

Or. en

Amendment 315

Victor Negrescu

Motion for a resolution

Paragraph 15 a (new)

Motion for a resolution

Amendment

15 a. Calls on Member States to ensure full territorial coverage of cancer screening programmes, cardiovascular risk assessments and reproductive health services, with special attention to regions where uptake rates remain below EU targets;

Or. en

**Amendment 316
Sirpa Pietikäinen**

**Motion for a resolution
Paragraph 15 b (new)**

Motion for a resolution

Amendment

15 b. Calls for the forthcoming Critical Medicines Act to integrate a gender-sensitive approach, ensuring that the identification and prioritisation of critical medicines reflect the specific health needs of women in all their diversity; stresses the importance of guaranteeing equal and uninterrupted access to essential medicines, including those related to reproductive, maternal, and mental health, as well as treatments for diseases that predominantly or disproportionately affect women;

Or. en

Amendment 317

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

**Motion for a resolution
Paragraph 15 b (new)**

Motion for a resolution

Amendment

15 b. *Calls on Member States to ensure timely and equitable access to fertility treatment without discrimination, especially for single women and female same-sex couples, and evidence-based, reliable public information on fertility, through a rights-based approach that supports reproductive autonomy, with the support of the Commission through guidance, data collection and the exchange of best practices;*

Or. en

Amendment 318

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

**Motion for a resolution
Paragraph 15 b (new)**

Motion for a resolution

Amendment

15 b. *Regrets the persistent lack of investment and research into pregnancy-related and maternal health conditions despite their high prevalence and contribution to maternal morbidity and mortality^{17a};*

^{17a} *eprs pp67-68*

[https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU\(2025\)778519_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU(2025)778519_EN.pdf)

Or. en

Amendment 319

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution
Paragraph 15 c (new)

Motion for a resolution

Amendment

15 c. Regrets that gestational diabetes mellitus (GDM), is often treated as a temporary issue, despite the fact that around half of affected women develop type 2 diabetes within five years after childbirth and their children face a substantially higher risk of type 2 diabetes and childhood obesity, representing a missed opportunity to prevent intergenerational health inequalities;

Or. en

Amendment 320
Christophe Clergeau

Motion for a resolution
Paragraph 15 c (new)

Motion for a resolution

Amendment

15 c. Calls on the Commission and the Member States to ensure that European and national mental health strategies and relevant women's health initiatives explicitly address perinatal and postpartum mental health, including awareness-raising, prevention, early detection and access to appropriate and timely support, in full respect of Member States' competences;

Or. en

Amendment 321
Sirpa Pietikäinen

Motion for a resolution
Paragraph 15 c (new)

Motion for a resolution

Amendment

15 c. Calls on the Commission and the Member States to ensure that the Europe's Beating Cancer Plan, the forthcoming EU Cardiovascular Diseases Strategy, and the EU Rare Disease Action Plan are all designed and implemented through a strong gender lens;

Or. en

Amendment 322

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution

Paragraph 15 d (new)

Motion for a resolution

Amendment

15 d. Highlights the large differences in Member States' quality of perinatal and postnatal services; warns against the issue of post-partum depressions and stresses the great role that appropriate policies can play in preventing such depressions; calls on the Commission to promote the exchange of best practices on how to deal with this issue so that Member States improve the access to quality services;

Or. en

Amendment 323

Sirpa Pietikäinen

Motion for a resolution

Paragraph 15 d (new)

Motion for a resolution

Amendment

15 d. Calls for the Commission to develop and implement a specific Women's Health Strategy on EU-level to

be implemented across the Member States, including specific indicators and reporting on the progress of the Women's Health Strategy; stresses the need for adequate funding to support research, innovation, and education in women's health;

Or. en

Amendment 324

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

**Motion for a resolution
Paragraph 15 e (new)**

Motion for a resolution

Amendment

15 e. Stresses that prevention is key to addressing the spread of sexually transmitted infections; calls on the Commission and the Member States to strengthen prevention strategies, including comprehensive sexuality education, while ensuring informed choice and promoting shared responsibility for contraception between partners, including through increased research into male contraceptive options;

Or. en

Amendment 325

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

**Motion for a resolution
Paragraph 15 f (new)**

Motion for a resolution

Amendment

15 f. Recalls that untreated sexually transmitted infections can have long-term consequences for reproductive health,

including infertility, disproportionately affecting women; highlights the importance of early diagnosis and treatment as part of a gender-sensitive approach to healthcare;

Or. en

Amendment 326
Sirpa Pietikäinen

Motion for a resolution
Subheading 4 a (new)

Motion for a resolution

Amendment

Global health

Or. en

Amendment 327
Sirpa Pietikäinen

Motion for a resolution
Paragraph 15 e (new)

Motion for a resolution

Amendment

15 e. Recognises the EU's commitment to advancing gender equality globally, including through the EU's Global Health Strategy;

Or. en

Amendment 328
Sirpa Pietikäinen

Motion for a resolution
Paragraph 15 f (new)

Motion for a resolution

Amendment

15 f. Recognises that global health challenges, including infectious diseases,

antimicrobial resistance, and climate-related health threats, have differentiated impacts on women and girls; deplores that the EU Preparedness, Prevention and Response Plan to Health Crises fails to adequately address the gendered dimensions of preparedness and response; urges the Commission and DG HERA to systematically integrate sex- and gender-specific health needs and to address the gendered impacts of health crises, including with regard to unpaid caregiving responsibilities and the health and care workforce;

Or. en

Amendment 329

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

**Motion for a resolution
Paragraph 15 g (new)**

Motion for a resolution

Amendment

15 g. Stresses that antimicrobial resistance in certain sexually transmitted infections represents a serious and growing threat to public health^{18a},

18a

*[https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU\(2025\)778519_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2025/778519/IUST_STU(2025)778519_EN.pdf) p77
<https://www.who.int/fr/news/item/30-08-2016-growing-antibiotic-resistance-forces-updates-to-recommended-treatment-for-sexually-transmitted-infections>;*

Or. en

Amendment 330

Sirpa Pietikäinen

Motion for a resolution
Paragraph 15 g (new)

Motion for a resolution

Amendment

15 g. Calls for the European Commission and the Member States to prioritise access to gender-responsive and inclusive Water, Sanitation and Hygiene (WASH) services as an essential component of women's health under the EU Global Health Strategy; stresses that improving WASH in healthcare facilities is key to reducing preventable maternal and neonatal mortality and to ensuring safe childbirth and menstrual hygiene management; emphasises the need for the EU's global health and development cooperation policies to address the disproportionate health burden carried out by women and girls in Low- and Middle-Income Countries (LMICs) due to inadequate WASH;

Or. en

Amendment 331
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 16

Motion for a resolution

Amendment

16. Recognises that EU funding can play a significant role in encouraging greater investment in research into gender-specific issues and addressing the inequalities in access to treatment; stresses that there is little incentive for the private sector to invest in preventive care and that this should therefore be a priority of the Commission and the Member States;

16. Recognises that EU funding can play a significant role in encouraging greater investment in research into gender-specific issues and addressing the inequalities in access to treatment; stresses that there is little incentive for the private sector to invest in preventive care and that this should therefore be a priority of the Commission and the Member States ***making public investment all the more***

necessary and urgent; underlines that sustained public investment is essential to strengthen and prioritise gender-responsive preventive care, including in relation to cardiovascular disease, diabetes, sexually transmitted infections and cancer, and to address the health impacts of environmental exposures and pollution, which disproportionately affect women across the life course;

Or. en

Amendment 332

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution Paragraph 16

Motion for a resolution

16. Recognises that EU funding can play a significant role in encouraging greater investment in research into gender-specific issues and addressing the inequalities in access to treatment; stresses that there is little incentive for the private sector to invest in preventive care and that this should therefore be a priority of the Commission and the Member States;

Amendment

16. Recognises that EU funding can play a significant role in encouraging greater investment in research into gender-specific issues and addressing the inequalities in access to treatment; stresses that there is little incentive for the private sector to invest in preventive care and that this should therefore be a priority of the Commission and the Member States; ***reiterates that the EU should prioritise publicly led research and healthcare systems and should ensure that funding allocation takes into account social and regional inequalities;***

Or. en

Amendment 333

Dan-Ștefan Motreanu

Motion for a resolution Paragraph 16

Motion for a resolution

16. Recognises that EU funding can play a significant role in encouraging greater investment in research into gender-specific issues and addressing *the* inequalities in access to treatment; stresses that *there is little incentive for the private sector to invest in preventive care and that this should therefore be a priority of the Commission and the Member States*;

Amendment

16. Recognises that EU funding can play a significant role in encouraging greater investment in research into gender-specific issues and addressing inequalities in access to treatment; stresses that preventive *and early-support approaches for women-specific life-course transitions, including perimenopause and menopause, should be prioritised, including awareness, training and evidence-based care delivery models*;

Or. en

Amendment 334
Sirpa Pietikäinen

Motion for a resolution
Paragraph 16 a (new)

Motion for a resolution

16. Recognises that EU funding can play a significant role in encouraging greater investment in research into gender-specific issues and addressing inequalities in access to treatment; stresses that *there is little incentive for the private sector to invest in preventive care and that this should therefore be a priority of the Commission and the Member States*;

Amendment

16 a. Calls on the Commission and the Member States to ensure adequate, long-term, and gender-responsive funding for health at all levels; because women, on average, face greater socio-economic constraints and are therefore more dependent on public healthcare and social services, making them disproportionately affected by the quality, accessibility, and affordability of these services;

Or. en

Amendment 335
Majdouline Sbai
on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 16 a (new)

Motion for a resolution

Amendment

16 a. Calls on the Commission to include in the upcoming MFF a dedicated fund to women's health;

Or. en

Amendment 336

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 16 b (new)

Motion for a resolution

Amendment

16 b. Asks for the creation of a dedicated European Fund for Gynaecological Diseases, with appropriate EU funding, to support coordinated research, innovation, prevention, early diagnosis and equal access to care, as well as improved quality of life for patients; emphasises that gynaecological diseases represent a major but under-recognised public health burden and require a comprehensive EU approach comparable to Europe's Beating Cancer Plan, which mobilises approximately €4 billion across EU funding instrument;

Or. en

Amendment 337

Sirpa Pietikäinen

Motion for a resolution

Paragraph 16 b (new)

Motion for a resolution

Amendment

16 b. Calls for funding mechanisms under programmes such as Horizon

Europe, EU4Health, and the Citizens, Equality, Rights and Values (CERV) programme and the Multiannual Financial Framework (MFF) to support both scientific research and innovation and the work of civil society organisations providing need-based, community-level, and peer-to-peer health services;

Or. en

Amendment 338
Sirpa Pietikäinen

Motion for a resolution
Paragraph 16 c (new)

Motion for a resolution

Amendment

16 c. Considers that comprehensive action to address per- and polyfluoroalkyl substances (PFAS) has the potential to contribute to the prevention of gender-specific conditions like endometriosis and female infertility; in light of growing scientific evidence, calls on the Commission to take urgent action to protect women's health from exposure to PFAS by proposing a comprehensive PFAS restriction within the legal deadline in the REACH Regulation and covering both consumer and industrial uses;

Or. en

Amendment 339
Christine Anderson

Motion for a resolution
Paragraph 17

Motion for a resolution

Amendment

17. Strongly supports gender mainstreaming across all relevant policies

deleted

and the EU budget; calls for the Commission to launch dedicated funding calls for gender-specific conditions and projects seeking to close the gap in sex-specific health data;

Or. en

Amendment 340
Dan-Ștefan Motreanu

Motion for a resolution
Paragraph 17

Motion for a resolution

17. Strongly supports gender mainstreaming across all relevant policies and the EU budget; calls for the Commission to launch dedicated funding calls for gender-specific conditions and projects seeking to close the gap in *sex-specific* health data;

Amendment

17. Strongly supports gender mainstreaming across all relevant policies and the EU budget; calls for the Commission to launch dedicated funding calls for gender-specific conditions, *including perimenopause and menopause*, and projects seeking to close the gap in *sex- and gender-disaggregated* health data, *including projects that develop and evaluate evidence-based interventions in healthcare delivery and workplace support*;

Or. en

Amendment 341
Laurence Trochu

Motion for a resolution
Paragraph 17

Motion for a resolution

17. ***Strongly supports gender mainstreaming across all relevant policies and the EU budget***; calls for the Commission to launch dedicated funding calls for gender-specific conditions and

Amendment

17. Calls for the Commission to launch dedicated funding calls for gender-specific conditions and projects seeking to close the gap in sex-specific health data;

projects seeking to close the gap in sex-specific health data;

Or. fr

Amendment 342

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 17

Motion for a resolution

17. Strongly supports gender mainstreaming across all relevant policies and the EU budget; calls for the Commission to launch dedicated funding calls for gender-specific conditions and projects seeking to close the gap in sex-specific health data;

Amendment

17. Strongly supports gender mainstreaming across all relevant policies and the EU budget; calls for the Commission to launch dedicated **and targeted** funding calls for **research and EU related actions on** gender-specific conditions **notably one on endometriosis and menopause** and projects seeking to close the gap in sex-specific health data;

Or. en

Amendment 343

Olivier Chastel, Vlad Vasile-Voiculescu, Veronika Cifrová Ostrihoňová, Stine Bosse, Irena Joveva, Billy Kelleher, Yvan Verougstraete

Motion for a resolution

Paragraph 17

Motion for a resolution

17. Strongly supports gender mainstreaming across all relevant policies and the EU budget; calls for the Commission to launch dedicated funding calls for gender-specific conditions and projects seeking to close the gap in sex-specific health data;

Amendment

17. Strongly supports gender mainstreaming across all relevant policies and the EU budget; calls for the Commission to launch dedicated funding calls for gender-specific conditions and projects seeking to close the gap in sex-specific health data **and to promote better knowledge on female related diseases and gender-related health**;

Amendment 344
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 17 a (new)

Motion for a resolution

Amendment

17 a. Calls on the Commission and the Member States to support the development and uptake of training modules and clinical guidance on perimenopause and menopause, and stresses that adequate remuneration of counselling and treatment is essential to ensure implementation in practice;

Or. en

Amendment 345
Victor Negrescu

Motion for a resolution
Paragraph 17 a (new)

Motion for a resolution

Amendment

17 a. Calls for a minimum percentage of EU-funded health research under Horizon Europe to be allocated to women's health, including gender-specific conditions and sex-disaggregated medical research;

Or. en

Amendment 346
Dan-Ştefan Motreanu

Motion for a resolution
Paragraph 18

Motion for a resolution

18. Considers the improvement of gender equality in health research to be a competitive opportunity for the EU; stresses that dedicating EU funding to addressing gender inequalities in health, coupled with measures to close *the* data gaps, *could* incentivise investment and boost innovation *in the EU*;

Amendment

18. Considers the improvement of gender equality in health research *and access to care* to be a competitive opportunity for the EU; stresses that dedicating EU funding to addressing gender inequalities in health, coupled with measures to close data gaps, *can* incentivise investment and boost innovation; *underlines that menopause-related impacts on work ability and career decisions are documented and can translate into substantial productivity losses, and that targeted workplace measures—such as manager awareness and flexible working time models—are frequently identified as helpful*;

Or. en

Amendment 347

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 18

Motion for a resolution

18. Considers the improvement of gender equality in health research to be a competitive opportunity for the EU; stresses that dedicating EU funding to addressing gender inequalities in health, coupled with measures to close the data gaps, could incentivise investment and boost innovation in the EU;

Amendment

18. Considers the improvement of gender equality in health research to be a competitive opportunity for the EU; *Stresses that closing gender health gaps is, first and foremost, a matter of fundamental rights and social justice, requiring sustained and coordinated action at Union and Member State level*; stresses that dedicating EU funding to addressing gender inequalities in health, coupled with measures to close the data gaps, could incentivise investment and boost innovation in the EU;

Or. en

Amendment 348
Sirpa Pietikäinen

Motion for a resolution
Paragraph 18

Motion for a resolution

18. Considers the improvement of gender equality in health research to be a competitive opportunity for the EU; stresses that dedicating EU funding to addressing gender inequalities in health, coupled with measures to close the data gaps, could incentivise investment and boost innovation in the EU;

Amendment

18. Considers the improvement of gender equality in health research to be a competitive opportunity for the EU; stresses that dedicating EU funding to addressing gender inequalities in health ***through the current and future Horizon Europe programme, the European Competitiveness Fund and EU4Health programmes***, coupled with measures to close the data gaps, could incentivise investment and boost innovation in the EU;

Or. en

Amendment 349
Laurence Trochu

Motion for a resolution
Paragraph 18

Motion for a resolution

18. Considers the improvement of gender equality in health research to be a competitive opportunity for the EU; stresses that dedicating EU funding ***to addressing gender inequalities in*** health, coupled with measures to close the data gaps, could incentivise investment and boost innovation in the EU;

Amendment

18. Considers the improvement of gender equality in health research to be a competitive opportunity for the EU; stresses that dedicating EU funding ***for women's*** health, coupled with measures to close the data gaps, could ***help reverse a demographic trend that shows alarming signs of decline***, incentivise investment ***and growth***, and boost innovation in the EU;

Or. fr

Amendment 350
Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution
Paragraph 18 a (new)

Motion for a resolution

Amendment

18 a. Strongly condemns the European Commission's unexpected decision to reduce funding, including operating grants for health civil society organisations under the EU4Health Programme, and urges the Commission to immediately reinstate and safeguard this funding; calls on all EU institutions to ensure stable, transparent and adequate financial support for health civil society organisations, recognising their essential role in promoting public health, advancing health equity and representing patients' interests across the Union;

Or. en

Amendment 351
Victor Negrescu

Motion for a resolution
Paragraph 18 a (new)

Motion for a resolution

Amendment

18 a. Underlines that reducing gender inequalities in health is not only a matter of fundamental rights but also a strategic economic priority for the Union; stresses that improved health outcomes for women contribute directly to higher labour market participation, reduced absenteeism, increased productivity and long-term sustainability of social protection systems; calls therefore for women's health to be integrated into the Union's competitiveness and growth strategies;

Or. en

Amendment 352

Christophe Clergeau, Pierre Jovet, Estelle Ceulemans, Vytenis Povilas Andriukaitis, Leire Pajín, Romana Jerković, Victor Negrescu, Alessandra Moretti, Günther Sidl, Cecilia Strada, Nikos Papandreou, Tiemo Wölken

Motion for a resolution

Paragraph 18 a (new)

Motion for a resolution

Amendment

18 a. Calls on the Commission for the development of a European Women's Health Strategy, embedded in the European Pillar of Social Rights, aimed at reducing gender health gaps, boosting public research into women-specific conditions and guaranteeing equal access to care across the Union;

Or. en

Amendment 353

Majdouline Sbai

on behalf of the Verts/ALE Group

Motion for a resolution

Paragraph 18 b (new)

Motion for a resolution

Amendment

18 b. Calls for dedicated, ring-fenced and traceable EU funding lines for gender-specific conditions, including endometriosis and menopause-related care, and for projects aiming to close sex- and gender-based data gaps;

Or. en

Amendment 354

Victor Negrescu

Motion for a resolution

Paragraph 18 b (new)

Motion for a resolution

Amendment

18 b. Calls on the Commission to develop measurable indicators on territorial and socio-economic disparities in women's health and to include them in the European Semester and in the monitoring of EU health and cohesion funding;

Or. en