



Resolution 1945 (2013)¹
Provisional version

Putting an end to coerced sterilisations and castrations

Parliamentary Assembly

1. Coerced, non-reversible sterilisations and castrations constitute grave violations of human rights and human dignity, and cannot be accepted in Council of Europe member States.
2. Defining the element of “coercion” in sterilisations and castrations is not as self-evident as defining “forced” sterilisations and castrations, which historically have involved physical force or procedures performed without the knowledge of the victim or without the opportunity for the victim to provide consent. The concept of “coercion” is currently evolving in human rights law, based on the definition of the lack of free and informed consent. Thus, even where consent is ostensibly given – also in written form –, it can be invalid if the victim has been misinformed, intimidated or manipulated with financial or other incentives. New concepts of “emotionally coerced sterilisation” and “pressure that diminishes a patient’s autonomy” are currently emerging. Some of these concepts go as far as considering as coercion the lack of freedom from any bias introduced, consciously or unconsciously, by health-care providers, and power imbalances in the patient-provider relationship which may impede the exercise of free decision-making, for example by persons who are not accustomed to challenging persons in positions of authority.
3. In the first half of the 20th century, a considerable number of European States – not just Nazi Germany – engaged in often massive forced or coerced eugenic sterilisation and castration programmes, some of whose victims are still alive. Five groups of people were particularly targeted: Roma women, convicted sex offenders, transgender persons, persons with disabilities, and the marginalised, stigmatised, or those considered unable to cope.
4. There are very few sterilisations and practically no castrations in Council of Europe member States today and in the most recent past which can clearly be labelled as “forced”: most of these concern persons with disabilities. However, there is a small, but significant number of both sterilisations and castrations which would fall under the various definitions of “coerced”. These are mainly directed against transgender persons, Roma women and convicted sex offenders. Neither forced nor coerced sterilisations or castrations can be legitimated in any way in the 21st century – they must stop.
5. The Parliamentary Assembly believes that clear safeguards need to be built up against future abuses, including preventive work to change mentalities: there is a need to fight stereotypes and prejudice against those who appear “different”. There is also a need to fight paternalistic attitudes in the medical profession which facilitate abuse.
6. The Assembly also believes that proper redress to victims of coerced sterilisation and castration needs to be ensured, whoever they are, and whenever the abuses occurred. In recent cases, this includes the protection and rehabilitation of victims and the prosecution of offenders. But in all cases, as rare, individual or historic as they may be, official apologies and at least symbolic compensation must also be given.

1. *Assembly debate* on 26 June 2013 (24th Sitting) (see [Doc. 13215](#), report of the Committee on Social Affairs, Health and Sustainable Development, rapporteur: Ms Maury Pasquier; and [Doc. 13252](#), opinion of the Committee on Equality and Non-Discrimination, rapporteur: Ms Saïdi). *Text adopted by the Assembly* on 26 June 2013 (24th Sitting).

7. The Assembly thus urges the member States of the Council of Europe to:
 - 7.1. revise their laws and policies as necessary to ensure that no one can be coerced into sterilisation or castration in any way for any reason;
 - 7.2. ensure that adequate redress is available to victims of recent (and future) coerced sterilisation or castration, including the protection and rehabilitation of victims, the prosecution of offenders, and financial compensation which is proportionate to the seriousness of the human rights violation suffered;
 - 7.3. issue official apologies and offer at least symbolic financial compensation to surviving victims of coerced sterilisation or castration programmes;
 - 7.4. work towards eliminating prejudice, stereotypes, ignorance and paternalistic attitudes which have a negative influence on the capacity of medical providers to provide evidence-based health care respectful of free and informed consent to vulnerable persons, including through awareness-raising and human rights education.
8. The Assembly encourages the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) and the Council of Europe Commissioner for Human Rights to continue to pay attention to the issue of coerced sterilisations and castrations in Council of Europe member States.