Joint NGO submission for the 4th Universal Periodic Review cycle concerning Slovakia

The main submitting NGO:	Women's Circles (Ženské kruhy)
The second submitting NGO:	Center for Civil and Human Rights (Poradňa)

Women's Circles (Ženské kruhy)[1] and Center for Civil and Human Rights (Poradňa)[2] – Slovak independent NGOs focusing on the protection of human rights of women – present their joint submission for the 4th Universal Periodic Review (UPR) concerning Slovakia for the review by the Human Rights Council.

The submission results particularly from ongoing human rights monitoring and advocacy efforts of our NGOs and outlines the selected issues of high concern regarding the protection of women's rights in Slovakia:

- Pregnancy and childbirth related healthcare services with a focus on the ill-treatment of women and newborns in facility-based childbirth, COVID-19 pandemic impact on these healthcare services, access to reproductive healthcare and information for women from Ukraine with temporary shelter status,

- Intersectional discrimination against Roma women with particular focus on their discrimination in reproductive and maternal health care and ongoing lack of access to justice for Roma women survivors of forced sterilizations.

We are concerned that Slovak government authorities have fallen short of addressing them effectively over recent years and that progress in fulfilling human rights obligations of Slovakia is insufficient.

Where possible, the submitting NGOs link the provided information with thematically relevant recommendations from the 3th UPR cycle concerning Slovakia and provide their independent assessment of their implementation by the Slovak government.

[1] Women's Circles (Ženské kruhy) founded in 2011 by women is an independent civic association focusing on the field of maternity care and the rights therein. Within its mission, the organisation performs community, education, advocacy, and research activities. Activities are focused mainly on disseminating information concerning respectful maternity care and women's rights in childbirth. For more information, please visit: https://zenskekruhy.sk/category/english/

[2] The Center for Civil and Human Rights (Poradňa pre občianske a ľudské práva, "Poradňa") from 2002 has addressed discrimination against Roma minority in Slovakia in various areas of public life. It has been particularly active in the protection of reproductive rights of Roma women. Poradňa pursues its mission by human rights monitoring, strategic litigation as well advocacy activities. It closely links its work with extensive cooperation with many local Roma women activists. For more information, please visit: https://www.poradna-prava.sk/en/

1. Pregnancy and childbirth related healthcare services

This chapter provides relevant information on the implementation of a wide range of recommendations from the 3th UPR cycle that are related to the rights of women and children related to pregnancy and childbirth healthcare.

- Theme E43 Access to sexual and reproductive health and services 121.144 Ensure universal coverage by the State health insurance of all costs related to sexual and reproductive health and modern contraceptive methods (Iceland): A/HRC/41/13/Add.1 - Para. 4
- Theme D8 Rights related to marriage & family 121.120 Provide full protection and support to the family, as it is the natural and fundamental unit of society (Egypt): A/HRC/41/13/Add.1 - Para. 3
- Theme E41 Right to health – General 121.123 Strengthen efforts to increase health-care services, particularly in improving access to health-care gynaecology and obstetrics wards for marginalized women (Bhutan): A/HRC/41/13/Add.1 - Para. 3
- Theme F31 Children: definition; general principles; protection 121.148 Promote the rights of the child (Libya): A/HRC/41/13/Add.1 - Para. 3

a.) Violations of women's rights in facility-based childbirth

During the last decade, Ženské kruhy participated in numerous monitoring and research activities in Slovakia, which revealed severe violations of the human rights of women and newborns during pregnancy, childbirth, and postpartum. [3,4,5,6] Report from Poradňa and Center for Reproductive Rights showed a wide range of human rights violations that Roma women experience in reproductive health care in Slovakia.[7] Also, in 2021, the office of the Slovak Public Defender of Rights conducted a survey on violations of women's rights in childbirth.[8] These reports found that violations are widespread and of systemic nature, including the failure to get fully-informed consent, gross violations of privacy, routine performance of medically unnecessary or harmful interventions (e.g., forced birth positions,

[3] Debrecéniová, J. (ed.), Babiaková, K., Debrecéniová, J., Hlinčíková, M., Krišková, Z., Sekulová, M., Šumšalová, S. (2015). Ženy – Matky – Telá: Ľudské práva žien pri pôrodnej starostlivosti v zdravotníckych zariadeniach na Slovensku. Bratislava : *Občan, demokracia a zodpovednosť*. English summary: https://zenskekruhy.sk/wp-content/uploads/2023/04/Women-Mothers-Bodies_summ_EN.pdf

[4] Debrecéniová, J. (ed.), Debrecéniová, J., Hlinčíková, M., Hrešanová, E., Laffersová, Z., Krišková, Z., Sekulová, M. (2016). Ženy – Matky – Telá II: Systémové aspekty porušovania ľudských práv žien pri pôrodnej starostlivosti v zdravotníckych zariadeniach na Slovensku. Bratislava: *Občan, demokracia a zodpovednosť, Ženské kruhy.* English summary: https://zenskekruhy.sk/wp-content/uploads/2023/04/ZMT2_SUMMARY_EN_final.pdf

[5] Debrecéniová, J. (ed.); Debrecéniová, J., Kotríková Rašmanová, M., Marošiová, L. (2021). Childbirth-Rights-Pandemic: Monitoring Report on Violations of the Human Rights of Women in the Provision of Childbirth Care in Healthcare Facilities in Slovakia During the COVID-19 Pandemic Bratislava: *Občan, demokracia a zodpovednosť, Ženské kruhy*. Available in English at https://zenskekruhy.sk/wp-content/uploads/2023/01/childbirth_rights_pandemic_EN.pdf

[6] Krišková, Z., Rašmanová, M. (2022). Poplatky za prítomnosť sprevádzajúcej osoby v nemocniciach na Slovensku. *Ženské kruhy*. Available at https://zenskekruhy.sk/wp-content/uploads/2022/10/monitoring-poplatky-SO-2022.pdf

[7] Center for Reproductive Rights, Poradňa pre občianske a ľudské práva. (2017). Vakeras Zorales – Speaking Out: Roma Women's Experience in Reproductive Health Care in Slovakia. Available in English at https://poradna-prava.sk/en/publications/vakeras-zorales-speaking-out-roma-womens-experience-in-reproductive-health-care-in-slovakia/

[8] Public Defender of Rights (2021). Let's talk about childbirth: a human rights-based approach in the context of childbirth. Available in English at https://vop.gov.sk/wp-content/uploads/2021/06/Sprava_porody_ENG_FINAL.pdf

routine episiotomies, Kristeller maneuver), painful suturing of vaginal tearing without adequate anaesthesia, barriers to the choice and ability to have birth-companionship, separating newborn babies from mothers against their will and without medical reasons (especially during the very first hours following birth), discrimination and segregation of Roma women.

The state took partial measures to banish financial barriers to medical pain relief through epidural analgesia and companionship during childbirth. In 2018, the Ministry of Health cancelled fees for companionship and epidural analgesia in state founded maternity wards. In 2022, parliament passed a new law that women have the right to birth companionship. The law will be effective from June 2024.[9] In Slovakia, approximately half of 50 maternity wards is owned by private companies, but they provide basic healthcare covered by public health insurance. There are regions where basic healthcare is provided by private owned hospitals only. In these hospitals, the fees for birth companionship and epidural analgesia still present financial barriers and these basic components of childbirth related healthcare are not accessible for many women within these regions. [10,11]

Proposed recommendations:

- Invest into infrastructure, and reconstruction of maternity wards to ensure the privacy and dignity of birthing women and their companions.
- Provide training to current and future obstetricians and midwives on international medical standards and human rights.
- Ensure that all women have access to birth companionship and pain relief that will be covered by health insurance.

b.) *COVID-19 pandemic worsened access to pregnancy and childbirth related healthcare and deepened the violation of the human rights of women*

The systemic nature of the violation of women's rights concerning reproductive healthcare fully showed from the beginning of the pandemic of COVID-19. Ženské kruhy in cooperation with NGO Občan, demokracia a zodpovednosť published a monitoring report on violations of the human rights of women in the provision of childbirth care in healthcare facilities in Slovakia during the COVID-19 pandemic.[12] The monitoring was carried out from March to June 2020, using several methods. The primary source of information was an internet survey of women about their experience with the provision of pregnancy and childbirth related healthcare (184 respondents). The findings showed that the pregnancy and childbirth related violations of human rights and internationally recognized medical standards that had been documented prior to the monitoring not only persisted during the pandemic, but such violations were often either of much greater extent or intensity or acquired new

[9] The law is published in the state legal and information portal Slov-lex: https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2022/331/20240601

[10] Debrecéniová, J. (ed.), Babiaková, K., Debrecéniová, J., Hlinčíková, M., Krišková, Z., Sekulová, M., Šumšalová, S. (2015). Ženy – Matky – Telá: Ľudské práva žien pri pôrodnej starostlivosti v zdravotníckych zariadeniach na Slovensku. Bratislava: *Občan, demokracia a zodpovednosť*. English summary: https://zenskekruhy.sk/wp-content/uploads/2023/04/Women-Mothers-Bodies_summ_EN.pdf

[11] Krišková, Z., Rašmanová, M. (2022). Poplatky za prítomnosť sprevádzajúcej osoby v nemocniciach na Slovensku. *Ženské kruhy*. Available at https://zenskekruhy.sk/wp-content/uploads/2022/10/monitoring-poplatky-SO-2022.pdf

[12] Debrecéniová, J. (ed.); Debrecéniová, J., Kotríková Rašmanová, M., Marošiová, L. (2021). Childbirth-Rights-Pandemic: Monitoring Report on Violations of the Human Rights of Women in the Provision of Childbirth Care in Healthcare Facilities in Slovakia During the COVID-19 Pandemic Bratislava: *Občan, demokracia a zodpovednosť, Ženské kruhy*. Available in English at https://zenskekruhy.sk/wp-content/uploads/2023/01/childbirth_rights_pandemic_EN.pdf

forms. Examples included denying the women in childbirth the right to have a companion of their choice present; not allowing skin-to-skin contact with their newborns directly after delivery with the justification that the (banned) birth companion was absent; or separating mothers from their newborns if the mothers tested positive for COVID-19 or developed symptoms, which was in direct breach with WHO recommendation for childbirth related healthcare during the pandemic[13].

The Ministry of Health and other state authorities did not publish clear and unambiguous guidance on pregnancy and childbirth care during the COVID-19 pandemic that would follow human rights requirements and recommendations of professional international health bodies such as WHO. This situation resulted in several healthcare providers withdrawing or reducing the number of routine prenatal check-ups, for example, CTG monitoring, testing for gestational diabetes, foetal screening, and regular check-ups concerning hematology treatment or high-risk pregnancy related care; hospitals cancelled prenatal courses that previously in many cases functioned as the only source of information about the given hospital's practices and did not provide any alternative source of information (e.g., by putting the information on the hospital's websites); women with a positive test for COVID-19 received inappropriate care, such as caesarean sections or instrumental vaginal births for non-medical reasons; providers refused to provide pain relief (including epidural analgesia) during childbirth due to the declared need to save on the hospital staff. This was despite the fact that during the monitored period there were only a few COVID-19 patients in Slovak hospitals.[14]

Violations of human rights and internationally recognized medical standards were especially damaging for vulnerable groups of preterm and sick babies. Preterm infants or newborns with specific health issues often require long-term hospitalization and specialized care. Contact with a mother (parents), the support of breastfeeding, and kangaroo care are essential to the health and welfare of prematurely born children. The absence of maternal/parental care impairs the health of preterm infants, prolongs their hospitalization time, and increases their mortality.[15] Close contact of parents with their children, the possibility to provide the children with care and establish a relationship with them not only fulfils the right to health but they are also an expression of the right of parents and their children to privacy and family life. By contrast, apart from violating their right to health and privacy, separating mothers from their newborns represents a form of cruel and inhuman treatment as well. During the period of our monitoring, we encountered cases when preterm infants were completely separated from their parents as part of anti-epidemic measures implemented in hospitals. Mothers of preterm infants were discharged from hospitals after childbirth on grounds that the hospitals needed to preventively set aside beds for patients with COVID-19 who, however, were not present in hospitals at the time. The children remained in hospitals (at ICUs, usually) without any chance of contact with their parents throughout their entire hospitalization. The absence of child-parent contact demonstrably harmed the best interest, health and rights of

[13] WORLD HEALTH ORGANIZATION: *Q&A: Pregnancy, childbirth and COVID-19* of 18 March 2020, available at: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-on-covid-19-pregnancy-and-childbirth

[14] Debrecéniová, J. (ed.); Debrecéniová, J., Kotríková Rašmanová, M., Marošiová, L. (2021). Childbirth-Rights-Pandemic: Monitoring Report on Violations of the Human Rights of Women in the Provision of Childbirth Care in Healthcare Facilities in Slovakia During the COVID-19 Pandemic Bratislava: *Občan, demokracia a zodpovednosť, Ženské kruhy*. Available in English at https://zenskekruhy.sk/wp-content/uploads/2023/01/childbirth_rights_pandemic_EN.pdf

[15] WHO recommendations for care of the preterm or low-birthweight infant. Geneva: World Health Organization; (2022). Available in English at https://iris.who.int/bitstream/handle/10665/363698/9789240060043-eng.pdf

children, as well as of their parents. [16]

Proposed recommendations:

- In times of crisis essential reproductive, pregnancy and childbirth healthcare related services should be given priority and cannot be restrained.
- The state must ensure that accurate evidence-based information in accordance with WHO recommendations and human rights principles is available to medical personnel and to the public. It is the state's responsibility to coordinate and control the process of application of these recommendations in practice.
- Ensure that the right of hospitalized children to be with their parents is protected, fulfilled, and respected all the time, with no exceptions.

c.) *Poor access to reproductive healthcare and information for women from Ukraine with temporary shelter status*

Since the beginning of the war in Ukraine in February 2022, many women and children have fled to Slovakia. They received temporary shelter status, enabling them to access essential healthcare services, including pregnancy and childbirth related healthcare.[17] Ženské kruhy monitored the situation using various sources including information requests from hospitals with maternity wards and state authorities, and an online survey of Ukrainian refugees in Slovakia. Responses received from different state authorities were inconsistent and conflicting with each other.[18]

Ženské kruhy published a report with the results of the survey focused on experiences of women, girls, and parents from Ukraine with temporary shelter status with healthcare services in Slovakia (101 respondents).[19] The state reacted promptly in terms of law and essential healthcare was formally secured, however Ženské kruhy identified 4 main barriers in accessing healthcare. The most common obstacles included a lack of information, language barrier, discrimination (including refusal to provide health care), and financial unavailability. Respondents reported insufficient information about how the health care system works in Slovakia; what are the entitlements of refugees in the field of health care and how to claim them. They also experienced that the medical staff was not able to provide them with information about the provision of services to refugees and how to solve problems in exercising refugees' right to health care.

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[16] Debrecéniová, J. (ed.); Debrecéniová, J., Kotríková Rašmanová, M., Marošiová, L. (2021). Childbirth-Rights-Pandemic: Monitoring Report on Violations of the Human Rights of Women in the Provision of Childbirth Care in Healthcare Facilities in Slovakia During the COVID-19 Pandemic Bratislava: *Občan, demokracia a zodpovednosť, Ženské kruhy*. Available in English at https://zenskekruhy.sk/wp-content/uploads/2023/01/childbirth_rights_pandemic_EN.pdf

[17] The law is published in the state legal and information portal Slov-lex: https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2022/92/20220330

[18] On file with Women's Circles.

[19] Fedko M., Kovalchuk L., Krišková Z., Rašmanová M. (2023). Bariéry v dostupnosti zdravotnej starostlivosti: Výsledky prieskumu skúsenosti žien, dievčat a rodičov z Ukrajiny s dočasným útočiskom so zdravotnou starostlivosťou na Slovensku. *Ženské kruhy* Available at: https://zenskekruhy.sk/wp-content/uploads/2023/05/Sprava-UA.pdf

Proposed recommendations:

- Create clear, comprehensive information available in Slovak and foreign languages for people with temporary shelter status that will help them to navigate within the healthcare system.
- Create materials that will facilitate overcoming the language barrier when providing healthcare to refugee women at prenatal clinics and during childbirth. For example, questions with guided answers designed to establish basic diagnoses, essential information, and recommendations for patients.
- Proactively assess the needs and experiences of refugees within the healthcare system, at both the national and regional levels. Reflect on these findings when shaping public policies.

2. Intersectional discrimination against Roma women in reproductive and maternal health care

This chapter provides relevant information on the implementation of a wide range of recommendations from the 3th UPR cycle on the importance to effectively address ongoing discrimination of Roma ethnic minority including Roma women, in Slovakia. It is specifically relevant for assessing the recommendation addressing the situation of Roma women: Theme: G1 Members of Minorities - 121.181 (Sweden): A/HRC/41/13/Add.1 - Para. 4.

Ongoing field monitoring of our NGO Poradňa in socially excluded Roma communities shows that Roma women still remain one the most marginalized groups in Slovakia, experiencing severe multiple, and intersecting, forms of gender and racial discrimination. These remain especially widespread and pronounced in the area of reproductive health care. Roma women in Slovakia were subject to forced sterilisations documented till 2004. Survivors of this grave practice have not been effectively compensated till now. As well, ongoing field monitoring of Poradňa confirms that Roma women continue experiencing severe discrimination in maternity wards.

In November 2017 Poradňa in cooperation with an international NGO Center for Reproductive Rights published a research report titled *Vakeras Zorales – Speaking Out: Roma Women's Experiences in Reproductive Health Care in Slovakia*. The report was based on in-depth interviews with 38 Roma women from marginalized communities and documented a wide range of human rights violations that Roma women experience in reproductive health care in Slovakia. That included practices of segregation in maternity wards, racial harassment and humiliation, neglect, physical restraint and abuse during childbirth and failures related to informed consent and decision making with regard to medical treatment.[20] The report drew attention of the Slovak public and decision makers to these practices.

Despite of subsequent advocacy efforts of NGO Poradňa towards the Slovak Government in collaboration with a group of Roma women activists as well as advocacy engagement of previous Slovak Ombudswoman on this issue – no systemic policies and measures that would effectively prevent the given violations have been taken till now. Through our ongoing field monitoring in marginalised Roma communities and interviews with Roma women we regrettably continue to widely document all the above mentioned discriminatory practices against Roma women in

[20] Center for Reproductive Rights & Center for Civil and Human Rights (2017). Vakeras Zorales – Speaking Out: Roma Women's Experience in Reproductive Health Care in Slovakia. Available in English at and submitted as an annex to this submission: https://poradna-prava.sk/en/publications/vakeras-zorales-speaking-out-roma-womens-experience-in-reproductive-health-care-in-slovakia/

reproductive health care in Slovakia.[21] We do not monitor any tangible improvements in this area to date and we conclude that relevant recommendations from the 3th UPR cycle in this regard were not effectively implemented.

Moreover, all efforts to address violations of Roma women`s rights in reproductive and maternal health care by legal means remain largely ineffective due to ongoing shortcomings in the implementation of antidiscrimination legislation as well as in decision making of courts and responsible state administrative bodies.[22] NGO Poradna from 2013 litigates strategic "actio popularis" lawsuit based on the domestic Anti-discrimination Act targeting ongoing segregation of Roma women in a maternity ward of a state-run hospital in a town Prešov. Court proceeding has been pending before the first instance court for more than nine years. In July 2022, the lawsuit was rejected, while the first instanced court completely disregarded the testimonies of Roma women on the segregation practices in the sued hospitals.[23] The proceeding is currently still pending before the appellate court. We find it regrettable that the Ministry of Health as one of the defendants in this court proceeding opposes the lawsuit for years, instead of recognizing Government's positive obligation to prevent racial discrimination and making necessary effort to change the existing practice.

In order to effectively prevent violations of Roma women`s rights in reproductive and maternal health, the State Party has to intensively address behaviour and negative attitude of the medical practitioners towards them by introducing effective measures that have preventive as well as repressive character.

Proposed recommendation:

- Establish effective programs, procedures, and mechanisms to assess, monitor, eliminate, prevent, and sanction the segregation, disrespectful treatment, and abuses of Roma women in maternity health care settings and eradicate the harmful consequences of such practices.

3. Shortcomings in ensuring full access to justice including financial compensation for Roma women survivors of forced sterilizations

This chapter provides relevant information on the implementation on the recommendation from the 3th UPR cycle on the importance to establish an independent body to conduct a comprehensive survey of the number of women who have been sterilized without their informed consent: Theme: E43 Access to sexual and reproductive health and services - 121.147 (Canada)**:** A/HRC/41/13/Add.1 - Para. 4.

The widespread practice of forced sterilization was reported in Slovakia in the past, suggesting that significant proportions of predominantly Roma women in Slovakia had been subject to forced

[21] This conclusion also results from our recent research report released with partners NGOs Minority Rights Group Europe and EPEKA, Slovenia in November 2022: Equality and justice on the sidelines: Comparative report on discrimination against Roma and their access to justice in Slovakia and Slovenia, pp. 10-11. Available at: https://poradna-prava.sk/en/publications/equality-and-justice-on-the-sidelines-comparative-report-on-discrimination-against-roma-and-their-access-to-justice-in-slovakia-and-slovenia/

[22] On actual information about lack of effective access to justice in cases of racial discrimination in Slovakia see separate individual submission of NGO Poradňa for the 4th Universal Periodic Review cycle concerning Slovakia.

[23] Press release of Poradňa in English to the court decision is available at: https://bit.ly/3Ki5KkY

sterilization.[24] Since then this practice has been repeatedly condemned by international human rights mechanisms including the UN Treaty monitoring bodies as well as by judgements of the European Court of Human Rights.[25]

In close collaboration with a group of Roma women activists, our NGO Poradňa for more than two decades intensively advocated towards the Slovak Government to take responsibility for this practice and provide effective justice for its survivors. We appreciate that in recent years the Slovak authorities including the Government made notable efforts to address this issue in line with its international human rights obligations. In particular, the Slovak Parliamentary Committee for Human Rights in July 2021 discussed this issue in presence of representatives of NGO Poradňa and two affected Roma women and recommended to take decisive measures that would ensure justice for survivors. Following its recommendations, in November 2021 the Slovak Government adopted a resolution in which it apologized to women affected by forced sterilizations and condemned the practice.[26]

Afterwards, the Ministry of Justice assessed possible solutions to financially compensate the affected women and developed legislative material - intent ("legislatívny zámer"), which contains basic principles of the planned compensation law. In February 2023 the Ministry of Justice made this legislative material available for comments within government interdepartmental comments procedure - thus available for comments from other government resorts, domestic human rights bodies, NGOs or public.[27] Poradňa and also key domestic human rights institutions - Slovak National Centre for Human Rights (equality body) and Office of the Public Defender of Rights (Ombudsman) submitted their comments, so that this legislation effectively brings justice to all survivors of forced sterilizations.

In April 2023, the proposal of the compensation law was submitted to the Slovak parliament by its member Mr. Peter Pollak. On 23th May the Slovak parliament negotiated and adopted the proposal of compensation law in a first reading.[28] However, NGO Poradňa as well as the Slovak equality body highlighted that the wording of the proposal adopted in the first reading had serious shortcomings, which raised genuine doubts whether it would effectively bring about justice for the affected women in its application process after its final adoption.[29] Poradňa, among other issues, noted with concern that the competence to decide on compensation for forcibly sterilized women was given to the Ministry of Health, which brought a risk that this agenda would be dealt as purely medical issue not

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[24] Center for Civil and Human Rights & Center for Reproductive Rights (2003). *Body and Soul: Forced Sterilization and Other Assaults on Roma Reproductive Freedom in Slovakia*. Available in English at https://www.poradna-prava.sk/en/documents/body-and-soul-forced-sterilization-and-other-assaults-on-roma-reproductive-freedom-in-slovakia/

[25] V.C. v. Slovakia, no. 18968/07. ECtHR (2011); N.B. v. Slovakia, no. 29518/10. ECtHR (2012); I.G. and Others v. Slovakia, no. 15966/04. ECtHR (2013).

[26] Resolution no. 674/2021 to the apology of the Government of the Slovak republic for sterilizations in conflict with law. Adopted on 22 November 2021. Available at https://rokovania.gov.sk/RVL/Material/26642/1 See also press release of NGO Poradňa in English in this regard https://bit.ly/3cduQ79

[27] The legislative intent and the related documentation is published by the Ministry of Justice in the state legal and information portal Slov-lex: https://www.slov-lex.sk/legislativne-procesy/-/SK/dokumenty/LP-2023-64

[28] Proposal for issuing an Act on one-off financial compensation for persons sterilised in violation of the law and on supplementing Act No. 71/1992 Coll. of the National Council of the Slovak Republic on court fees and the fee for an extract from the criminal record, as amended from 13 April 2023. The proposal and details on voting are available at Dokumenty : Parlamentné tlače : Parlamentná tlač 1593 - Národná rada Slovenskej republiky (nrsr.sk)

[29] See Comments of the NGO Poradňa to the proposal of the compensation law was submitted to the Slovak parliament addressing its shortcomings. Available at https://rb.gy/9rcp4

as an issue of human rights violation and proposed to give this competence to the Ministry of Justice. Moreover, the proposal placed disproportionate burden on the survivors to prove their forced sterilisation, which would indeed effectively prevent many of them from achieving the compensation. In June 2023, the Commissioner for Human Rights of the Council of Europe Dunja Mijatović addressed the Slovak Parliament a letter welcoming the efforts by the Parliament to deliver justice to forcibly sterilized women by adoption of a law proposal that would establish a compensation mechanism. But she also raised a number of points to improve the effectiveness of the proposal, which were consistent with the referred comments of NGO Poradňa and the Slovak equality body.[30]

Despite the above noted progress towards the adoption the compensation law to bring justice to all survivors of forced sterilizations – the negotiations on the law proposal in the Slovak parliament were ultimately discontinued in June 2023 and the law proposal was not adopted. Given that we conclude that relevant recommendation from the 3th UPR cycle in this regard was not effectively implemented.

On 30 September 2023, the early parliamentary elections were held in Slovakia. We are concerned that the policy development after the elections may eventually result in slowdown or even discontinuation of the efforts to adopt the compensation law and establish mechanism that would finally ensure justice for survivors of forced sterilisations. We are convinced that the newly formed Government and Parliament in Slovakia have to recognise serious shortcomings of the negotiated law proposal from the spring 2023 and take decisive action that will introduce effective compensation mechanism as soon as possible.

Proposed recommendation:

- Adopt without delay the legislation that will effectively provide financial reparations for survivors of forced sterilisations through an effective and accessible *ex-gratia* compensation procedure.

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[30] The letter of the Commissioner Mijatović is available at Slovak Parliament has a historic opportunity to deliver justice to victims of forced sterilisation - Commissioner for Human Rights (coe.int)