Rui Nunes, Guilhermina Rego, Helena Melo,
Sofia B. Nunes and Ivone Duarte

PERSPECTIVES ON GENDER EQUALITY

Making Education the Core of Public Policies

MDPI

Perspectives on Gender Equality

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Editors

Rui Nunes
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Contents

About the Editors vii

Contributors ix

Preface xi

Part 1: A Global Perspective on Gender Equality 1

1. Addressing Gender Inequality to Promote Basic Human Rights and Development: A Global Perspective
Rui Nunes 2

2. Law and Gender Equality
Luísa Neto 31

3. The European Union as Safe Keeper of Gender Equality
Sofia B. Nunes 45

4. Gender Equality at a Global Level: A Survey
Francisca Rego, Guilhermina Rego and Rui Nunes 65

Part 2: Social Background of Gender Equality 77

5. The Greco-Roman Matrix in Gender (In)Equality: Advances and Retreats
Cristina S. Pinheiro 78

6. Educating for Gender Equality: Why It Is Important to Talk About
Carla Carvalho 89

7. Parental Education for Gender Equality in the Family
Sofia Bergano 101

8. Gender Equality in the Digital Era
Jasna Karacic-Zanetti and Rui Nunes 113

9. Gender Equality in Politics and the Media
Carla Martins 123

10. Intersectionality, Gender, and Equal Opportunity
Sofia B. Nunes, Ivone Duarte and Rui Nunes 131

Part 3: Women's Rights and Discrimination 139

11. Women's Rights as Patients
Ana Paula Cabral 140

12. Gender Discrimination in Medically Assisted Procreation
Helena Pereira de Melo **155**

13. What Young People Know About Human Trafficking
Bárbara Rodrigues, Rui Nunes, Cristina Santos, Carla Serrão and Ivone Duarte **172**

14. Privacy and Equality in Healthcare Beyond the Binary Gender Divide
Mónica Correia and Rui Nunes **185**

15. Child-to-Parent Violence—Raising Preventive Awareness
Carla Serrão **195**

16. History of Women in Medicine and Healthcare
Amélia Ricon Ferraz and Ivone Duarte **204**

Conclusions **233**

Appendix A. Universal Declaration on Gender Equality: A Proposal
Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes . . **234**

Appendix B. Declaración Universal Sobre Igualdad de Género: Una Propuesta
Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes . . **240**

Appendix C. 性别平等宣言**:** 提案
Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes . . **246**

Appendix D. Déclaration Universelle Sur L'égalité des Genres: Une Proposition
Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes . . **250**

Appendix E. Declaração Universal de Igualdade de Género: Uma Proposta
Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes . . **256**

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Preface

Gender equality means that women and men enjoy equal conditions to achieve their full human rights and contribute (benefit) to (from) economic, social, cultural, and political development. Gender equality is, therefore, the condition in which society equally respects the similarities and differences between men and women and the roles they play. It is based on women and men being full partners in their homes, their communities, and society. This view, supported by many relevant international conventions, recognizes the importance of gender diversity, as each person must be free to attain fulfillment and make choices they deem most appropriate.

According to United Nations Educational, Scientific and Cultural Organization (UNESCO) (2014), "gender" is the social meaning of being a woman or a man, including the social characteristics (not biological differences) used to define a woman or a man. Gender is a different concept from "sex," which refers to the biological differences between men and women. Although a very relevant issue to be also addressed, this book does not intend to approach other dimensions of gender equality, that is, those present at the Yogyakarta Principles plus 10 (YP plus 10) on the application of international human rights law in relation to sexual orientation, gender identity, gender expression, and sex characteristics.

This is a book by different authors following the humanist tradition of the European culture of defending and promoting human rights, equality and non-discrimination, the valorization of merit and the deliverance of a welfare state that guarantees everyone the same social, political and economic opportunities. The different chapters, by authors with different academic and professional backgrounds, have in common the contribution to a final proposal for a Universal Declaration on Gender Equality for possible adoption by international organizations such as UNESCO. A soft law instrument that is lacking in the international ethical and legal order since it focuses specifically on the proposal to include education for gender equality in all levels of education with a special emphasis on primary and secondary education.

It is divided into four sections. The first section—A Global Perspective on Gender Equality—addresses the evolution of human rights throughout the world. From a legal, political, and cultural perspective. It is argued that gender equality is a direct and necessary consequence of the full implementation of human rights. The second section—Social Background of Gender Equality—approaches gender equality from a sociological, educational, and familiar background. Considering the digital society and women's rights in this context. The third section—Women's Rights and Discrimination—claims that gender equality is deeply related to justice in its material dimension. At a sovereign state level, as well as at a global level, equality and non-discrimination are at the root of any developed society and are pillars of any advanced democracy. This section includes an approach to healthcare access, human reproduction, gender violence, and human trafficking, as well as a historical perspective of women in the development of modern societies. Finally, the fourth section—Universal Declaration on Gender Equality: A Proposal—distills these concepts into a modern view of human development. It also suggests practical tools to increase international awareness on human rights and gender equality. Namely enforcing universal education for gender equality at the high school level.

To sum up this book suggest that it is necessary to increase international awareness of gender equality in the context of the global implementation of human rights and full human development, considering intersectional causes of discrimination, as well as, from a realistic perspective on the interrelationship between different peoples, to determine how is it possible to accelerate this evolution in a world that is constantly changing.

Rui Nunes, Guilhermina Rego, Helena Melo, Sofia B. Nunes, and Ivone Duarte
Editors

Part 1: A Global Perspective on Gender Equality

1. Addressing Gender Inequality to Promote Basic Human Rights and Development: A Global Perspective

Rui Nunes

Abstract: Gender equality means that women and men have equal opportunities to exercise their full human rights and to contribute to, and benefit from, economic, social, cultural, and political development. Gender equality has come a long way and has already overcome significant barriers in some developed countries. However, there is still a long way to go until full equality is achieved. The main objective of this chapter is to answer the question of whether it is necessary to increase international awareness of gender equality in the context of the global implementation of human rights and full human development. Another objective is—based on a realistic perspective of the interrelationship between different peoples—to determine how it is possible to accelerate this evolution in a world that is constantly changing. This chapter is divided into three sections. The first section addresses the evolution of human rights throughout the world. The second section claims that gender equality is deeply related to justice in its material dimension. Finally, the third section distills these concepts into a modern view of human development. It suggests, from a realistic perspective, practical tools to increase international awareness of human rights and gender equality.

1. Introduction

To promote gender equality, the active participation of society is essential, as is a significant commitment from different institutions, for true equality depends on excellent civic and cultural education. Indeed, gender equality has come a long way and has already overcome significant barriers in some developed countries, especially regarding access to the health system, including reproductive healthcare and health education. Moreover, some societies have made substantial progress in their political, economic, and cultural participation. However, there are important differences not only regarding wages and pensions, but also access to top public administration positions and top positions in private sector companies.

Despite this evolution, per the United Nations 2019, "Gender disparities remain among the most persistent forms of inequality across all countries. Given that these disadvantages affect half the world's people, gender inequality is arguably one of the greatest barriers to human development. All too often, women and girls are discriminated against in health, in education, at home, and in the labor market—with negative repercussions for their freedoms" (United Nations 2019). Thus, as a one-off measure, positive differentiation policies (e.g., regarding the holders of political offices and guaranteeing a percentage of seats for both sexes) have been proposed to promote gender equity (with a view to equality), which is a form of positive discrimination on the grounds of gender (United Nations 2024).

Further, there has been a significant generational evolution in many countries regarding how citizens combine their professional, family, and personal lives. Younger generations more naturally gravitate toward an equitable distribution of family

functions and tasks because women are gradually taking their place in the labor market. Thus, it is natural that younger families have the insight to promote balanced professional, familial, and personal lives. Innovative measures are also needed in this area, such that the balance does not decisively affect the birth rate, which is at historically low levels in many countries.

However, there remains much room for progress until full equality is achieved. Obviously, the worldwide imbalance phenomenon, although it has variable geometry, stemming also from women's greater dedication to their family and children, is a factor that allows for ancestral inequalities to persist over the generations. Therefore, all measures that allow for the achievement of intrafamily balance are essential for the realization of gender ideals. The balance measures also make it possible to combat the unacceptable phenomenon of gender-based violence, which, unfortunately, is a scourge in many societies. Accordingly, it is essential for global society, including the different sovereign states, to be aware of the importance of implementing effective measures for gender equality, with education and culture at the core of its implementation, which is the main objective of this study.

Therefore, this study addresses the question of whether it is necessary to increase international awareness of gender equality in the context of the global implementation of human rights and full human development based on a realistic perspective of the interrelationship between different peoples to determine how it is possible to accelerate awareness of this issue in a constantly evolving world.

This study is divided into three sections. The first section addresses the evolution of human rights worldwide, arguing that gender equality is a direct and necessary consequence of full human rights implementation. The second section posits that gender equality is deeply related to justice in its material dimension. At a sovereign state and global levels, equality and non-discrimination are at the root of any developed society and are pillars of any advanced democracy. Finally, the third section distills these concepts into a modern view of human development, suggesting, from a realistic perspective, practical tools to increase international awareness of human rights and gender equality.

2. Human Rights and Globalization

Gender equality has had an interesting evolution over the last few decades—an evolution deeply connected to specific circumstances. From the outset, the enormous economic development evidenced on a global scale increased the levels of literacy and culture of various populations. Indeed, the gradual improvement in living conditions at the socioeconomic level was associated with a considerable decline in the global poverty rate from 37.1% to 8,5% between 1990 and 2024 (The World Bank 2024). Moreover, there is a growing global awareness, though at different rates and with variable geometry, that all people must have equal dignity in society and its institutions. That is, everyone should enjoy the same range of basic and intrinsic human rights.

The importance of human rights and the corresponding principles that underpin them was a decisive milestone, though incomplete, for this evolution. After World War II, the international community realized that it was necessary to develop a bonding cement for humanity focused around the essential core of ontological human solidarity.

This was not merely a matter of creating a new norm of international law, where international human rights law is a strong expression. It was mainly a matter of appealing to the lowest common denominator of the entire human family to crystallize the set of irreducible and inalienable values of the human person. That is, from a Kantian perspective, it was a question of considering that the human being (understood as a rational, self-conscious being with abstract thinking, emotional intelligence, and moral agency) has a unique, indivisible value that warrants a duty of (almost) absolute protection.

However, we must ask the following question: what will be the genesis of human dignity in a multicultural world where different ideological, political, and religious views condition the development of specific societies? Alternatively, from a different perspective, what could be the common reference that allows for the harmonious development of different people?

The recognition of the intrinsic value of each person, given their rational nature and unrepeatable individuality, crystallizes the notion of human dignity and recognizes the specific singularity of the human being (Nunes 2015). However, this Kantian conception of human dignity has various consequences. First, a human (as a unique and unrepeatable subject—an individual being) cannot be "instrumentalized" or treated as a means and not as the end. What defines human individuality and uniqueness? Regardless of whether the Cartesian body–spirit dualism (or the duality between physical reality and a metaphysical one) is accepted, the human being is especially valued in any society given the existence of certain capacities that distinguish humans from any other living being (real or potential, with an active or passive existence).

Distinct from legal personhood, moral personhood is a continuous process connected to the development of certain properties or capabilities considered the core of a human. Despite the perceived mind–body relation, progressiveness is the genetic fingerprint of becoming a fully autonomous person. Indeed, (self-) consciousness, preferences, thoughts, conscious desires, feelings, sense of time, rational thought, unification of desires over time, and rational deliberation define not only "a person" but also "a specific person." Further, the capacity to experience pleasure and pain, remember one's past actions and mental states, envisage a future for oneself, interact and communicate socially, have long-term interests, and assess moral considerations in moral choices is at the core of a person's existence.

Rational deliberation, intentionality, and moral agency are, then, the nuclear content of the spiritual dimension of a human being. According to Tristram Engelhardt Junior (1996), the "three characteristics of self-consciousness, rationality, and moral sense identify those entities capable of moral discourse. These characteristics give to those entities the rights and obligations of the morality of self-respect. The principle of autonomy and its elaboration in the morality of mutual respect applies only to autonomous beings. It concerns only persons. The morality of autonomy is the morality of persons."

However, rationality, which enables the manifestation of specific human characteristics, is not a necessary condition to insert into the moral community. In fact, rationality alone is adequate to identify a human personality, but a human being can exist even without reason. The human aspect is a person's material support. As it evolves, it permanently deepens its capacity for self-recognition until the moment it has self-awareness of this self-recognition. A person, thus, begins to structure an

identity through a process of memorization of the symbolic external culture and invention that ends only with dementia or death. A human being, with rationality and self-awareness, which are integral to biological species, possesses dignity that wards against any purpose other than the promotion of personal fulfillment.

Though this ontological solidarity between all humankind is not consensual, most societies accept it, at least for the time being. However, different arguments can find their roots in non-anthropocentric ethical and philosophical views. By decentralizing the "subject" of the human being to animals (i.e., sentient animals), the environment (in its various components), or even biodiversity, some interests (and even some rights) have been attributed to non-human entities. Peter Singer (2015), for example, considers that "discrimination based on species is based on immoral and indefensible prejudice." For him, sentient animals have intrinsic value because they can feel pleasure and integrate it as a lived experience. Thus, discrimination based on species (speciesism) is profoundly unacceptable in a modern and truly plural society.

In any event, the universal ideal of human dignity is expressly stated in the Universal Declaration of Human Rights: All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act toward one another in a spirit of brotherhood. Following this perspective, the human being should enjoy a wide range of rights given the underlying condition of moral agency. The rationality and self-awareness of the rationality, abstract thinking, and intentionality of human action characterize a person, making the person a subject with basic and inalienable rights and a subject of respect. Truly, respect for persons is among the most valuable principles of intersubjective relationships.

However, before World War II, the seed of human rights awareness was already developing in some societies. This seed would make this doctrine germinate as a historical landmark of human development. The Magna Carta of 1215, followed by the United States Bill of Rights in the 18th century and the Declaration of the Rights of Man and the Citizen in France, were some of the precursors to this international moral, social, and political movement.

From a global ethics and citizenship perspective, human rights, thus, represent an enormous civilizational evolution, given the recognition of the unique value of each person for the first time in human history, with two immediate consequences. The first consequence is the imperative of sovereign states to organize themselves for the effective enjoyment of these rights. The second is the need for international governance institutions to find effective solutions to their global implementation. Thus, the Universal Declaration of Human Rights, approved by the United Nations in 1948, is understood to be fundamentally relevant. The European Convention on Human Rights and the Charter of Fundamental Rights of the European Union (EU) followed, becoming binding for the Member States of the EU upon the signing of the Treaty of Lisbon in December 2009.

It is common to consider that human rights, although indivisible, are categorized per the essential values that underlie them. The implementation of human rights has developed in stages, perhaps because each new generation of rights, as suggested by Karel Vasak (1977), assumes that the previous phase has already been reached. The basis of this perspective is deeply grounded in the principles and values of the French Revolution: freedom, equality, and fraternity (or solidarity).

First-generation rights are related, essentially, to liberty and participation in political life. They are civil–political rights (i.e., equality before the law, freedom of speech and association, freedom of professing a religion, rights to due process and a fair trial, and voting rights). The right to life is also considered a first-generation right. A common characteristic of these rights is that they are negative in that, to be fulfilled, they do not generally require any active participation of society or the allocation of specific resources. It is necessary only to let the individual personality flow and develop to its full potential. Solid, stable, and just institutions, such as the judiciary, are needed such that every citizen fulfills these rights.

Indeed, the existence of fair-minded institutions is the essence of modern society; that is, it is fundamental for the establishment of a social contract between citizens to guarantee order, social peace, and development (Hayek 1973). It follows, then, that it is necessary to fulfill basic liberty needs and correspondent rights, as a primary necessity of the human being. Without institutions that ensure respect for this social contract, social upheavals tend to occur. Moreover, as Thomas Hobbes ([1651] 1999) argued, "If we imagine a world with limited resources, where people all have the same ability to harm each other and if they practice exclusively acts in their own interest, then quickly we will have a state of calamity in which we live with great anxiety, violence, and constant danger." From an institutional perspective, a free press is also an instrument for delivering to society the optimal conditions for their fulfillment.

Second-generation rights are fundamentally economic, social, and cultural. The right to healthcare access of appropriate quality and the right to education are good examples. Other examples include the rights to food, housing, social security, and even employment. However, for these rights to be delivered to all citizens, society must organize itself to provide for these rights. Thus, they are positive rights (positive welfare rights in a sense), as there is an absolute need to allocate resources to provide for them. Accordingly, most developed societies built complex welfare models. Education and healthcare systems financed by the taxpayer's contributions are good examples of a welfare model that manages the delivery of these social goods effectively. Indeed, redistribution is deemed necessary to provide for the required resources. The continued lack of resources (absolute or relative) that undermines the possibility of effectively delivering social goods, even with the assistance of the international community, is an issue faced by many underdeveloped societies. Hence, innovative solutions must be implemented such that economic, social, and cultural rights become universal (Nunes 2022).

A common characteristic of first- and second-generation rights (i.e., civil–political and socioeconomic rights) is that they present potential claims of individual persons against the state, though in negative and positive ways. Distinctively, third-generation rights present potential claims not of individual persons per se, but of peoples and groups against the state. Indeed, third-generation rights are usually considered rights of solidarity among human peoples. They include future generations' rights to a developed society and a sustainable environment, the protection of natural resources, and the promotion of peace and the self-determination of all peoples (i.e., collective rights for the commonwealth of life). Hence, some rights can be fulfilled only on a supranational level and, to accomplish such goals, the international community should promote global governance arrangements. Moreover, there is a growing awareness among young generations regarding such rights because

they concern the survival of humankind and the possibility of future generations achieving their full potential.

Recently, a fourth generation of human rights has been suggested. These rights relate to the digital transformation, 4.0 economy, and global connectiveness through the internet and social media, including the advancement of biotechnology, genetic engineering, and the manipulation of the human genome. Although such rights are not connected specifically to any of the traditional values of freedom, equality, and solidarity, they are, indeed, a complex mix of these values. Understandably, concerns about personal privacy, global justice, and the indiscriminate use of artificial intelligence are also considered important matters in the realm of human rights (Nunes and Nunes 2024).

In summary, a human enjoys basic human rights; that is, the right to life; the right to moral and physical integrity; the right to freedom; the right to freedom of thought, conscience, religion, opinion, and expression; the right to personal identity; the right to free development of personality; the right to privacy; the right to education; the right to an adequate standard of living; the right to work; the right to social security; and the right to healthcare access.

However, from a real-world perspective, many important challenges prevent the global implementation of human rights (Dunne 1999). Overpopulation, climate change, migrations, recent geopolitical and geo-economic changes, nationalism, and global terror question the aspiration of the international community to achieve a new world order based on the true self-respect of different peoples; that is, a new order that depends on universal ethical principles and transnational political arrangements. The United Nations' proclamation of the Universal Declaration of Human Rights on the 10th of December 1948 is an early example of this attempt to harmonize values on a global scale (United Nations 1948).

Therefore, we must ask the following question: what kind of society should be built to effectively implement human rights? It seems reasonable to posit that pluralistic, liberal democratic societies are more prone to promote a human rights culture than any other system (Majone 1997). Indeed, at a sovereign state level, democracy seems to be the best way to fully implement human rights, simply because, in a democracy, politics is based on straightforward principles:

1. Responsiveness;
2. Empowerment;
3. Accountability.

Responsiveness means that public choice must be substantially syntonic with public preferences (Tullock et al. 2000). Assuming voters choose rationally per their perceived needs, democracy through the popular vote is instantaneously responsive to those choices. It implies cultural development and a basic level of education for all citizens, which contributes to their empowerment. Indeed, empowered people are more critical and less tolerant of government failures. Empowerment also regards giving citizens a voice to promote their expectations. The transparent and proactive accountability of public officials and elected politicians is perhaps the best way to ensure that responsiveness to empowered citizens' choices is taken seriously (Nunes et al. 2011). Interpreting and integrating these principles, Robert Dahl suggests five criteria for a full, advanced democracy (Dahl 1989):

1. Effective participation;

2. Voting equality at the decisive stage;
3. Enlightened understanding;
4. Control of the agenda;
5. Inclusiveness.

Moreover, in fully advanced and pluralistic democracies, credibility and legitimacy are necessary conditions for ethically and socially justified political action. Thus, adequate means must be found for political decisions to always have the necessary legitimacy. This implies respect for the will of the people, whether through adequate representation or direct means of democratic expression. In fact, in democracy, the source of legitimacy (substantive and not merely formal) can come from two different paths.

Firstly, the people must express themselves through voting in an unequivocal framework of proposals supported in specific elections. This solution is the most prevalent, as it reflects the will of the majority. However, it poses the inconvenience of relegating the views and perspectives of minorities to the background such that, under the rules of representative democracy, these minorities have more trouble making their voices heard. Another critique is that sometimes political democracy through representation is only about choosing the best of two (or more) alternatives, even if none of them is adequate from the individual voter's perspective. Nevertheless, representation has the enormous advantage of allowing adequate governance, where elected representatives are mandated to execute a program previously validated by voters (Goodin and Pettit 1998). Though not always the case, there should be enormous resemblance and even correspondence between the suffrage and the executed program (responsiveness).

A source of legitimacy can also come from forms of deliberative democracy (Bessette 1980); that is, rational democratic deliberation (an extreme form of empowerment). Authentic deliberation (a mix of majority rule and decision by consensus) is also a source of legitimacy, as it is a direct decision-making process engaged in by citizens (i.e., a form of direct democracy). Another form is participatory democracy. This increased participation of citizens in collective endeavors is plausible in extreme situations where the elected political power is not legitimate enough to decide and even intends to detach itself from accountability for a given decision (Arendt 1995; Habermas 1997). Regarding women's rights, a referendum on abortion is an alternative to a representative majority vote.

However, one question remains. Even if one takes for granted that democracy and widespread political participation are valuable and justified, it is worth considering whether, on a global basis, the virtues of democracy should be confined to a limited group of societies or generalized internationally (even enforced by peaceful means). At a global level, there seems to be no better alternative than democracy to accomplish peace, development, and the rule of law and human rights. This situation explains why many people worldwide defend an increase in global governance arrangements and actively promote new democracies to solve transnational problems such as the sustainability of the planet for future generations.

The spread of democracy and human rights may go even further. Andrew Beddow (2017), for example, following Immanuel Kant's democratic peace theory, suggests that "just as men must overcome this anarchic condition of injustice by establishing a civil state, states must institute an international legal order in the form of a federation of states submitting to a common adjudicative authority. Only

then, can coercion become regulated in the international sphere and represent the omnilateral will of the human race, just as the state represents the will of its people… Only a democratic world order, in which each state's population internalizes the costs of its own behavior, can organize itself into a liberal world order in which states are regulated by law."

Indeed, Kantian perpetual peace rests on three main institutional developments (Caranti 2016). First, liberal democracies should all evolve into full democracies with active citizenship and social participation. Second, global governance arrangements should be promoted such that supranational institutions can be truly effective (The United Nations and the International Criminal Court are good examples). Third, freedom of circulation (i.e., the right to visit) promotes the mobility of citizens and their families. The EU project is, in fact, a practical interpretation of this view because some national (although limited) sovereignty is entrusted to supranational institutions in a "reverse subsidiary" way. As will later be argued, this model could be progressively upgraded at a global level.

The democratic regime is more virtuous in promoting the exercise of individual freedom and the fulfillment of human rights and increases civic participation in collective goals such as healthcare promotion. Indeed, innumerous global studies highlight the role of democracy in improving health (Bollyky et al. 2019). That is, democracy, through popular representation and the satisfaction of the populations' basic needs, ultimately meets the desire of any human being to have an increasingly satisfactory quality of life regarding access to health, education, and other essential goods, such as protection in old age or maternity (Nunes 2022).

Indeed, democratic institutions and processes, particularly free and fair elections, appear to be the best way to ensure that all members of any given society enjoy economic, social, and cultural human rights. As per Bollyky et al. (2019), "Democratic rule, enforced by regular free and fair elections, appears to make an important contribution to adult health by increasing government spending on health and potentially reducing deaths from several non-communicable diseases (NCDs) and transport injuries. Conversely, autocracies that escape this general scrutiny, and do not have the same external pressures or support from global health donors to tackle NCDs and injuries, may have less incentive to finance their prevention and treatment, and seem to underperform as a result."

Thus, democracy is a promoter of human rights (and vice versa). It also contributes decisively to human development, at least if citizens believe that freedom to choose and self-determination will be directed to protecting and enhancing basic rights (Nussbaum 1998). Indeed, political and economic democracy must always contribute to the following:

1. Peace (even if it is necessary to act in self-defense);
2. Human development (through capability extension);
3. Socioeconomic growth (i.e., through the implementation of a comprehensive welfare state).

However, this universal trend is challenged for very different reasons. Ideologically, the overall superiority of democracy is overtly contested. Jason Brennan (2016), for instance, argues that "democratic triumphalism" has failed to prove its intrinsic value, and the efficacy of a democratic political system remains in doubt. According to this view, a possible alternative to democracy would be "epistocracy"—that is,

the rule of the knowledgeable. Of course, in advanced societies (as observed in the Human Development Index [HDI] ranking) under a modern welfare ideal, if everyone is entitled to education and personal development, knowledge would be a prerogative of all people rather than restricted to a selected elite. Deductively, the rule of the knowledgeable would be the rule of all citizens (or at least of the majority).

However, the virtues of truly liberal democracies are also contested given particular historical circumstances, inducing hybrid regimes such as illiberal democracies. As per Fareed Zakaria (1997), an illiberal democracy is a paradoxical governing system in which elections take place, but civil and political liberties are seriously compromised, and citizens are outsiders regarding government power. A few democratic countries show some traits of illiberal democracies (in Europe and elsewhere), traits that have recently emerged from extreme circumstances such as terrorism, massive migration, and even economic growth decline. Notably, illiberal democracies show a tendency toward increased sovereignty and isolationism, abandoning multilateral agendas in favor of bilateral agreements, and nationalist attitudes, neglecting any vision (even a soft version) of a global political arrangement.

This is a matter of concern because the specter of authoritarian regimes might resurge somewhat explicitly. Therefore, political democracy must reinvent itself by making representative democracy more responsive to citizens' interests; expanding direct democracy, and, thus, empowering people; and even introducing innovative forms of advocacy democracy and, therefore, increasing and intensifying the accountability arrangements of public decision-makers (through the empowerment of associations, multi-stakeholder partnerships, and groups of citizens, leading to increased participation in the deliberative process). Accordingly, complex social evolutions such as gender equality (evolutions that convey a profound moral shift in most societies) are deeply rooted in democracy and the rise of human rights. Hence, UNESCO (2014) claims that "gender equality is a human rights principle, a precondition for sustainable, people-centered development, and it is a goal in and of itself."

Thus, human rights and human development seem to be intrinsically related. Is there evidence of this relationship or is it only wishful thinking? Analyzing the HDI might shed some light on this question. The Nobel Laureate Amartya Sen (2000) suggests that "the [HDI], which the Human Development Report has made into something of a flagship, has been rather successful in serving as an alternative measure of development, supplementing GNP. Based as it is on three distinct components —indicators of longevity, education, and income per head—it is not exclusively focused on economic opulence (as GNP is)."

Indeed, while being cautious about obtaining a correlation for these findings, a thorough analysis of the Human Development Report 2023–2024 (United Nations 2024) and the global ranking of the HDI (Table 1) shows that of the 30 higher-rated countries, 27 are liberal, pluralistic democracies. Of the three exceptions, one is not a nation-state in a strict sense but, rather, a special administrative region of a sovereign state (Hong Kong Special Administrative Region of the People's Republic of China); the other, although it has a significant economy, is indeed considered more of a city-state given its reduced geographic dimension (Singapore). Finally, the United Arab Emirates is a federal presidential elective semi-constitutional monarchy

However, boundaries should be pushed forward regarding gender equality. According to the United Nations 2019, "The world is not on track to achieve gender

equality by 2030. Based on current trends, it would take 202 years to close the gender gap in economic opportunity" (United Nations 2019). Moreover, per the World Economic Forum, there is a 31.4% average gender gap that remains to be closed globally (World Economic Forum 2019). Thus, despite an interesting evolution in some countries, there remains much room for improvement. As will later be considered, it is not enough to promote gender equality in specific social areas (e.g., in health or education), and it is essential to promote enhanced capabilities that profoundly alter power relations in society.

Indeed, the "open future" of all humankind, beyond merely half of the human population, is at stake. As defended in the next section, only an equal opportunity to develop enhanced capabilities in men and women alike will be at the core of a just and inclusive society.

Table 1. Ranking of countries—Human Development Index 2024.

1	Switzerland
2	Norway
3	Iceland
4	Hong Kong, China
5	Denmark
5	Sweden
7	Germany
7	Ireland
9	Singapore
10	Australia
10	Netherlands
12	Belgium
12	Finland
12	Liechtenstein
15	United Kingdom
16	New Zealand
17	United Arab Emirates
18	Canada
19	Korea (Republic of)
20	Luxembourg
20	United States
22	Austria
22	Slovenia
24	Japan
25	Israel
25	Malta
27	Spain
28	France
29	Cyprus
30	Italy

Source: Author's compilation based on data from (United Nations 2024).

3. Justice and Equal Opportunities

What, then, is the philosophical and ethical intersection between human rights, gender equality, and democratic rule? Indeed, gender equality is not merely about human rights. It also refers to genuine and full democratic governance and a sense of societal and global justice. Thus, gender equality goes deeper than the enjoyment of formal human rights. It is a matter of justice. Of course, previous researchers have considered what justice refers to (i.e., in a global village that accepts different perspectives on the common good) (McLuhan and Powers 1989). There are many competing views of justice embodied in different formal and material principles of justice.

The principle of formal equality established by Aristotle (i.e., treating equals equally and unequals unequally in the exact measure of their similarity or dissimilarity) may be a good starting point for this rationale.

1. The subject's essential characteristics must be defined such that equality may be applied (e.g., they should be treated as a full person and a bearer of basic rights);
2. In this context, equality means justice is held to require that the treatment of different subjects reflects their fundamental moral equality.

Hence, to realign this trend, Table 2 suggests different material views of justice. All the principles have a noticeably strong ethical justification, at least in some circumstances. Therefore, it is not easy to discard any of them or simply suggest that one principle is the superior one without arbitrariness. Thus, different accounts of justice, different coherent theories, and different conceptual arrangements have been proposed in human history to answer the questions of how a perfect society should be designed and what a perfectly fair social arrangement would look like.

Table 2. Material principles of justice.

Radical Egalitarianism: Identical distribution of social goods by all citizens (e.g., universal access to basic education);
Necessity: Access to social goods per individual needs; that is equal consideration of the interests of each citizen; (e.g., access to hospital and pre-hospital medical emergencies);
Effort: Access to and the distribution of social assets would match the efforts made by each one (e.g., remuneration by an act in the case of private professional practice);
Merit: Access to scarce goods in society is provided according to individual merit (e.g., access to the best universities);
Social Contribution: The individual's contribution to society is considered decisive (from perspectives such as economic, family, or cultural);
Competition and Market: Access to and distribution of social and economic goods, including access to key positions in society, are provided according to the rules of the market (e.g., commercial insurance charges).

Source: Table by author.

In this search for "the just society," the interface between justice and human rights appeals, therefore, to a fair distribution of, and access to, social benefits and primary goods. Primary goods include income and wealth, basic liberties, positions of responsibility, and social bases of self-respect. Arguably, the contractual view of John Rawls (1971, 1993) is particularly appealing because it concurs with the views to which many reasonable and fair people would subscribe.

Solving the problem of a just distribution of resources and fair access to the positions that society offers, John Rawls (1971, 1993) defines a theoretical situation in which the impartial observer (reasonable citizen) is on an imaginary plane (ahistoric and acultural), with no knowledge of his financial, cultural, social, health, or illness position (under a veil of ignorance). In this situation (original position), any reasonable citizen would choose to distribute social goods and access key positions in society such that, at the end of the decision-making process, the most disadvantaged people were protected (because the reasonable person might be in a worse-off position in society). John Rawls' (1971, 1993) two principles of justice were, thus, formulated in a hierarchical order:

1. (a) Every citizen must have access to the most complete system of basic freedoms; (b) access to key positions in a society must be conducted on a fair equality of opportunity basis (and not just on a basis of formal equal opportunities);
2. The allocation of resources and the distribution of social goods should benefit the worse-off in society.

Although John Rawls' (1971, 1993) account of justice represents a transcendental view of modern social arrangements, also implying transcendental institutionalism, it is probably the most influential perspective of justice of the 20th century. In fact, the principle of fair equality of opportunity has become one of the main instruments determining social policies in the developed world in every field of human endeavor, from education to health or the inclusion of social minorities to children's rights. Why? Because the goal of this view is not to accomplish a radical state of equality but, rather, to allow each person to accomplish their full potential, which can be achieved through the creation and development of adequate social and political institutions. Indeed, radical equality between human beings is contrary to human nature because we all search for our own identities and individuality. Even advanced equalitarians, such as Ronald Dworkin (2000), would claim that though equality is the main virtue of a sovereign society, true equality means "equality in the value of the resources that each person commands, not in the success he or she achieves."

Hence, the issue is not to become equals per a standardized set of parameters but, rather, to have equitable conditions that allow the responsible development of individual talents and capacities. It refers to gathering the means and providing for the social and economic environment for self-realization (Sandel 2009). How exactly each person chooses to self-actualize is within the scope of self-determination and is no longer a matter of justice. It is a matter of justice, however, to overcome the unfair circumstances of life determined by the social (familial and social environments) and biological (genetic defects at birth or acquired developmental diseases) lottery or to overcome unjust interventions of third parties that seriously limit one's expectations.

Certainly, libertarians such as Robert Nozick (1974) would contest equal opportunities, stating that life's misfortunes should not impose undue burdens on other citizens. Thus, it would be challenged that freedom and the right to property are

the overarching principles of justice because, in real life, all people are not under any veil of ignorance. Indeed, any person is cultural- and historical-dependent. According to libertarian thinking and its liberal counterpart (Hayek 1973; Von Mises 2007), whether any person owns property, society should act only as a referee to settle disputes that may arise on a reparatory basis (reparatory justice). Equality of opportunities may be an accepted "formal" principle (not a material one) if and only if it is a direct choice of society, not an ideological or ethically imposed one. In a "society of mutual consent," social choice is acceptable on a procedural basis and is contingent on the moral movement of any given historical moment (Engelhardt Junior 1996). Hence, in the libertarian tradition, fairness is contingently determined by social arrangements because of individual choices and preferences, and the law is instrumental to the enforcement of these procedural rights.

Further, utilitarianism would challenge equality of opportunities as "the" principle of justice. Indeed, for utilitarianists, maximization of the happiness and well-being of all humans equally (a divergence from other forms of consequentialism) is paramount. The principle of utility, considering the net result of the distribution, would, however, consider equal opportunity if the majority would be better off with this approach. Even so, if a given society would be worse off with equal opportunities, utilitarianists would disregard this approach (Rachels 2003). Nevertheless, utilitarian thinking is key to the organizational patterns of every society because some choices must be in accordance with the public good. For instance, when a given society opts for environmental protection, all people, present and future, will benefit from this approach, maximizing utility.

Despite these different accounts of justice, the importance of fair access to key positions in society and a just distribution of resources has gained increasing acceptance worldwide, at least in modern democracies. Indeed, being fully human implies equal treatment before society, the law, and social institutions (Parijs 1991). Thus, the principle of non-discrimination becomes another fundamental driver of inter-social relationships and is an essential factor in the construction of any modern society. According to the UN's Committee on Economic, Social, and Cultural Rights, the principle of non-discrimination "seeks to guarantee that human rights are exercised without discrimination of any kind based on race, color, sex, language, religion, political or other opinion, national or social origin, property, birth, or other status such as disability, age, marital and family status, sexual orientation, and gender identity, health status, place of residence, economic and social situation" (Committee on Economic, Social and Cultural Rights 2009). Non-discrimination is, therefore, the basic leveling of all human beings regarding what is most valued among humankind. It is the core of being human—the starting point of the spiritual dimension of rationality that enables any person to develop true sustainable agency and, therefore, the possibility of self-realization and even self-fulfillment.

Moreover, fair equality of opportunities is a prospective rather than a static concept. Equality of opportunities is a progressive endeavor such that, instantaneously, everyone obtains the optimal array of opportunities and the best social arrangements. As an infinite ideal, equal opportunity is closely related to the "right to an open future," which is the basic ethical right that everyone has to exercise self-determination and self-realization to develop their full potential. As Joel Feinberg (1980) suggested, some rights should be "rights-in-trust," or rights that must be protected in the present to be fully realized later in life. For instance, if a girl has a lesser opportunity than a

boy to have a good education, her right to an open future (that is, the possibility of realizing the entirety of her unique potential) would be endangered.

This right to an open future should be, in fact, transversal, enjoyed by everyone, whatever sovereign state a person has the fortune (or misfortune) to live in. Another example of the progressiveness of equality of opportunities is digital inclusion. The older generations are not digital natives and face, therefore, understandable challenges when it comes to dealing with cutting-edge technology (generational dividend). A fair and inclusive society would implement appropriate measures to provide the necessary digital capacities to every citizen. As will be considered later in this section, this progressiveness also implies enhancing progressive capabilities.

From this perspective, gender equality presupposes the right to an open future because if society does not engage in interventions addressing strategic gender interests leading to structural changes (i.e., regarding enhanced capabilities), true equality is only a distant utopia. Expansion of capabilities gives all people access to the same economic, social, and political opportunities.

Hence, it is of the utmost importance to determine which account of justice is more likely to promote human development. Amartya Sen (1999) states that "Development can be seen, [as] it is argued here, as a process of expanding the real freedoms that people enjoy. Focusing on human freedoms contrasts with narrower views of development, such as identifying development with the growth of the gross national product, or with the rise in personal incomes, or with industrialization, or with technological advances, or with social modernization. The growth of GNP or individual incomes can, of course, be very important as a means of expanding the freedoms enjoyed by the members of society. But freedoms depend also on other determinants, such as social and economic arrangements (for example, facilities for education and health care) as well as political and civil rights (for example, the liberty to participate in public discussion and scrutiny)."

In any event, a developed society should implement a macro-socioeconomic model to achieve a consensus of the population around the principles of solidarity and subsidiarity required for the survival of this model. That is, through socialization (sometimes only residual) of the means of production, income redistribution, equal opportunities in education, the protection of private property and entrepreneurial initiative, and the protection of social rights, development would be achieved simultaneously with sustainable economic growth and the promotion of a human rights culture, always assuming that the government is subsidiary regarding more decentralized forms of governance. However, in political democracy, any model of governance must be legitimized by the social contract between citizens, between citizens and the government, and even between the present and future generations. In a democracy, the social contract must be an association pact for the construction of a modern, plural, and developed society based on a platform of values agreed upon by citizens.

Thus, political and economic freedom is always on the horizon to generate a level of collective well-being that translates into the harmonious growth of society. Social cohesion must, then, be a true collective goal. Synthetically, as Norman Daniels (1996) suggests, the target of egalitarian concerns may be as follows:

1. Equal opportunity for welfare;
2. Equal opportunity in the resources needed to pursue personal aims;
3. Positive freedom or the capability of individuals to make choices.

However, all these accounts of a just society, though very appealing from a transcendental perspective, overlook a fundamental aspect of modern life. They overlook the fact that human endeavor is global and that a modern account of justice should apply not only to a specific society and its institutions, but also to all humankind. Hence, nowadays, justice should have a global dimension (Sen 2009). Indeed, without an international (or even regional) integration of different sovereign states, a global view of justice must, at least, have the capacity to compare different modalities of development and competing views of justice. How, however, can global justice be effectively accomplished?

It seems obvious that if, at a sovereign state level, a need exists for strong social institutions to accomplish justice, the same pattern should be followed globally. However, as Thomas Nagel (1991) suggests, "It seems to me very difficult to resist Hobbes's claim about the relation between justice and sovereignty ... and if Hobbes is right, the idea of global justice without a world government is a chimera." From a realistic perspective, Thomas Nagel (1991) is satisfied with searching for a minimal humanitarian morality and a long-term strategy for radical change in institutional arrangements. Hence, radical diverse values might cohabitate. However, who would determine what this minimal humanitarian morality would look like? It is based on what principles and will be enforced by what institutions? Nevertheless, Thomas Nagel's (1991) idea of a chimera might be appealing if, by chimera, one means (though Nagel may have meant something different) a world that is developing at different speeds but with the net result, over the years, of a growing development of the worse-off sovereign states (integration with variable geometry).

As an intellectual exercise, imagine that the integrative example of the EU might be replicated worldwide to ultimately achieve a global integration of all sovereign states. Indeed, if this pattern of development is working for 27 EU countries (after Brexit), why would it be so unrealistic to claim this evolution for the other sovereign countries? If the world were to be geopolitically arranged in a group of "unions of states," global justice at different speeds and with different regional interpretations might be accomplished. A legitimate "minimal humanitarian morality" would then more easily be enforced because it would be fair and legitimized by the different peoples. For instance, when the EU enforced (with obvious fairness) the General Data Protection Regulation for the protection of natural persons regarding the processing of personal data and the free movement of such data, the fundamental right to personal privacy was protected per the basic values of the European tradition (European Union 2016).[1]

Thus, a "minimal humanitarian morality" would not be a coercively imposed view of happiness following a particular orthodoxy of human life but, instead, would be rooted in the fundamental values of that group of societies.[2] Another

[1] Privacy in the European sense of informational privacy and not in the North American tradition of personal autonomy.

[2] At the EU level, this minimal humanitarian morality induced the creation of new basic rights; that is, the "right to be forgotten" (Newman 2015), a right that also prevails in the United States of America (Bode and Jones 2017). The right to be forgotten is the right to delete or erase personal information when any of the following occur: the data are no longer required in the context of the purpose for which they were collected or processed, the data subject withdraws consent, the data subject opposes the processing, and there are no legitimate grounds for denying this request, or the data were processed illegally.

good example of this minimal humanitarian morality in the EU is the right of any patient to access cross-border healthcare enforced by the European Parliament (2011). Hence, when the public healthcare system of one country cannot deliver quality care to a patient in need, that patient can utilize the healthcare system of another member-state of the union. A further example is the European Green Deal, which is the commitment to tackle climate and environmental-related challenges definitively until 2050 (European Commission 2019), thus ensuring a sustainable world for future generations (including the maintenance of biodiversity and access to drinking water).

The fundamental values enshrined in the Constitution of the United States of America are, in a sense, the "minimal humanitarian morality" of the peoples of all 50 states of the union. For instance, the First Amendment of the United States Bill of Rights (comprising the first 10 amendments to the Constitution) protects freedom of speech as a basic right of citizenship. Therefore, consent and approval by the American people of an agreed-upon humanitarian morality regarding this fundamental value of democracy and full citizenship are more likely to endure than the coercive imposition of any set of predefined values. Whatever the potential global political arrangements in the foreseeable future, it seems imperative to design a global view of human development grounded in a consensual perspective of justice. Following Sen's account of justice, a global perspective of fairness would achieve the following:

1. Promote human freedoms (Amartya Sen 1999);
2. Enhance individual capabilities (Sen 1989).
    (i) This perspective is an intriguing departure from John Rawls' (1971, 1993) account of justice. Indeed, considering John Rawls' (1971, 1993) first principle of justice (access to most extensive equal liberties for all), this view is morally acquainted with the promotion of a social development system that promotes human freedoms. For instance, if I have (a) the right and (b) the conditions to speak freely, the practical exercise of this right allows me to develop further by effectively using the right. The substantive difference would be that, for John Rawls (1971, 1993), freedom is a foundational principle of justice (one on which other principles would develop), while, for Amartya Sen (1999), freedom is the overarching goal of social, economic, and political activity. Amartya Sen (1999) goes even further, stating that "freedom is central to the process of development for two distinct reasons:

1. The evaluative reason: assessment of progress must be done primarily regarding whether the freedoms that people have are enhanced;
2. The effectiveness reason: achievement of development is thoroughly dependent on the free agency of people" (Amartya Sen 1999).
    (i) Thus, full human development would require that basic unfreedoms be effectively outdated. No one is completely free without adequate housing, access to basic economic opportunities, access to education and healthcare, or access to basic politic liberties. Interestingly, Rawls' difference principle (that protects the least advantaged social group), combined with the fair equality of opportunity for everyone has, as its direct consequence (although not explicitly), the enhancement of individual freedoms of the better- and worse-off members of society.

(ii) Hence, an increased quality of human life implies a free and sustainable personal agency. However, access to basic liberties, and the exercise of freedom as an end in and of itself, is a necessary but insufficient condition for sustainable and full agency. Ensuring that people have the freedom to choose between different ways of living and self-realization is also a basic goal (Sen 1989). From a motivational perspective, free human agency depends on the satisfaction of basic needs (although these are satisfied progressively): physiological, safety, belongingness and love, esteem, self-actualization, and self-transcendence needs (Maslow 1943). Expanding individual capabilities to satisfy those needs, present and future, is, therefore, an essential driver of modern collective endeavors.

Capabilities are expressions of freedom. There is no freedom without a basic level of capability, as it allows any person to achieve various functioning combinations. Capability enhancement has different meanings. First, capabilities of human personality development—for instance, access to education, culture, or good health status—are conditions for optimized human capabilities. However, it also means access to social, political, and economic positions in the form of fair and equal opportunities. Indeed, this condition is, per se, a condition for development.

Development as capability enhancement has an absolute and relative dimension. Providing education and healthcare to everyone is, for instance, a condition for human development. However, it is insufficient. The relative deprivation between women and men in most societies, after the basic level of development is accomplished, is extremely unfair. It is unfair because of the existing relative injustice. For instance, from a certain moment onward, men had access to positions to which equally capable women have no access. The feeling of injustice is, in itself, a psychological limitation to full development, decisively affecting the satisfaction of self-actualization and self-transcendence needs. Thus, gender equality depends on capability enhancement and the correction of some of the traditional, intrinsic imbalances in power. As will be seen in the next section, targeted measures directed at balancing equal opportunities between the genders comprise an essential step toward true equality. Positive discrimination policies are, therefore, ethically justifiable if they are the only means to achieve gender balance regarding all the positions society can offer—namely, but not only, regarding political and economic opportunities.

Synthetically, Figure 1 presents a virtuous triangle on the expansion of gender equality. All factors (justice and equal opportunities, freedom and human rights, human development, and the expansion of capabilities) are key to the promotion of gender equality at the national and global levels.

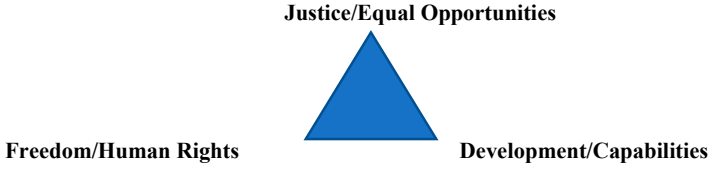

Figure 1. Virtuous triangle of gender equality. Source: Figure by author.

However, despite the positive evolution in gender equality over the years in most societies, two trends must be acknowledged (United Nations 2019):

1. "Gender inequalities are intense, widespread, and behind the unequal distribution of human development progress across all levels of socioeconomic development;
2. Gender inequality tends to be more intense in areas of greater individual empowerment and social power."

According to the vision of the United Nations (2019) "This implies that progress is easier for more basic capabilities and harder for more enhanced capabilities. The first trend indicates the urgency in addressing gender inequality to promote basic human rights and development. The second raises a red flag about future progress. Progress at the basics is necessary for gender equality, but it is not enough" (Figure 2).

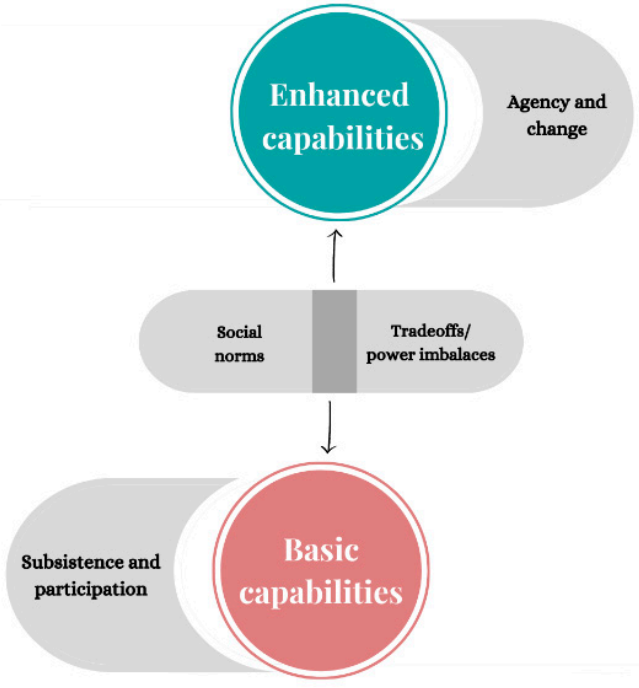

Figure 2. There has been remarkable progress in basic capabilities, and much less in enhanced capabilities. Source: Adapted from (United Nations 2019).

From a developmental perspective, this distinction between "basic capabilities" and "enhanced capabilities" is paramount. Public policies at a national and supranational level should consider all the necessary measures to reach a leveled playing field. This situation explains why some important conceptual and practical distinctions should be made, given its theoretical relevance and influence in public policies on gender equality. Following the UNESCO (2014) perspective, the interface between gender and justice can, therefore, be synthesized as follows:

1. Gender equality, meaning that women and men enjoy the same status and have equal opportunity to realize their full human rights and potential to contribute to national, political, economic, social, and cultural development and to benefit from the results;

2. Gender equity, meaning that targeted measures are often needed to compensate for historical and social disadvantages that prevent women and men from otherwise being equals. These measures (temporary special measures), such as affirmative action, may necessitate different treatment of women and men to ensure an equal outcome. Equity leads to equality;
3. Gender parity, meaning, a numerical concept for representation and participation, necessary but not sufficient step on the road to gender equality.

The next section suggests an advancement of the global implementation of human rights and gender equality and the fundamental role of education and culture in this trajectory. It also suggests the importance of international instruments of regulation as a tool for education on human rights.

4. Gender Equality from a Human Development Perspective

During the 21st century, many international organizations within the United Nations System have proclaimed general or specific principles regarding gender equality. For instance, point Number 3 of Article 1 of the Charter of the United Nations states: "The Purposes of the United Nations are … To achieve international co-operation in solving international problems of an economic, social, cultural, or humanitarian character, and in promoting and encouraging respect for human rights and for fundamental freedoms for all without distinction as to race, sex, language, or religion" (United Nations 1945). Indeed, it has been generally accepted worldwide that gender equality should be promoted in every country because there are many compelling reasons to do so. For instance, a recent study in the United States reported that women's health is neglected in different areas, such as abortion and prenatal care, clinical trials (which typically do not involve women), and physical violence (Lindeman 2019).

Progressively, the global ethical standards and international law then considered this charter and many other relevant instruments:

1. Universal Declaration of Human Rights of 10 December 1948;
2. United Nations International Convention on the Elimination of All Forms of Racial Discrimination of 21 December 1965;
3. United Nations International Covenant on Economic, Social and Cultural Rights of 16 December 1966;
4. United Nations International Covenant on Civil and Political Rights of 16 December 1966;
5. UNESCO Declaration on Race and Racial Prejudice of 27 November 1978;
6. United Nations Convention on the Rights of the Child of 20 November 1989;
7. United Nations Convention on Biological Diversity of 5 June 1992;
8. Standard Rules on the Equalization of Opportunities for Persons with Disabilities adopted by the General Assembly of the United Nations in 1993;
9. UNESCO Declaration on the Responsibilities of the Present Generations Towards Future Generations of 12 November 1997;
10. UNESCO Universal Declaration on the Human Genome and Human Rights of 11 November 1997;
11. European Parliament, the Council and the Commission Charter of Fundamental Rights of the European Union of 18 December 2000;
12. UNESCO Universal Declaration on Cultural Diversity of 2 November 2001;

13. UNESCO Universal Declaration on Bioethics and Human Rights of 19 October 2005;
14. European Parliament and Council Directive 2006/54/EC of 5 July 2006 on the implementation of the principle of equal opportunities and equal treatment of men and women in matters of employment and occupation (recast directive);
15. United Nations Convention on the Rights of Persons with Disabilities and Optional Protocol of 13 December 2006.

Beyond this short list, other instruments adopted by the United Nations or other relevant international organizations also aim to promote human rights in general and gender equality in different settings and diverse cultures as a tool for full gender integration. For instance, over the past few years, the United Nations has played a decisive role via the establishment of the Sustainable Development Goals. Thus, the present generation owes future generations a set of conditions that allows for full and progressive human development. An accurate analysis of the main drivers of this proposal shows an integrated view of human development: (1) no poverty; (2) zero hunger; (3) good health and well-being; (4) quality education and lifelong learning opportunities for all; (5) gender equality; (6) clean water and sanitation; (7) affordable and clean energy; (8) decent work and economic growth; (9) inclusive and sustainable industrialization, innovation, and infrastructure; (10) reduced inequalities between countries; (11) sustainable and smart cities; (12) responsible consumption and production; (13) climate action; (14) life below water; (15) life on land, ecosystems, and biodiversity; (16) peace, justice, and strong institutions; and (17) partnerships for achieving these goals (United Nations 2020).

Not surprisingly, Goal 5 (pertaining to gender equality) is the assumption by the United Nations that the survival of humankind through the establishment of the Sustainable Development Goals means that women and men should be equally considered and respected. This claim for a better future for all encompasses, obviously, equality between women and men and is a laudable goal with a significant global impact. Indeed, the United Nations considers that the global challenges facing humanity are not independent of one another. The issues of poverty, climate change, environmental degradation, and peace and justice are at the same level as inequality. They are interdependent and deeply interconnected.

Beyond these "transversal" instruments (which are of fundamental importance because of the necessary integration at different levels of public policies), the international community has developed specific and dedicated instruments to promote and regulate global sexual and gender equality. These instruments include the following:

1. Convention on the Elimination of all Forms of Discrimination against Women (United Nations 1979);
2. Declaration on the Elimination of Violence against Women (United Nations 1993);
3. Beijing Declaration and Platform for Action (UN Women 1995);
4. Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence, Istanbul Convention (Council of Europe 2011).

Evaluating and comparing each of these documents, considering their historical context and motivation, general and specific goals, and material content, reveals common trends and directions.

Historically, the Convention on the Elimination of all Forms of Discrimination against Women was adopted in 1979 by the UN General Assembly, was ratified by

188 sovereign states, and is considered an international bill of rights for women. It focuses on discrimination against women and proposes an agenda for national action in this domain. In this convention, discrimination means "any distinction, exclusion, or restriction made on the basis of sex, which has the effect or purpose of impairing or nullifying the recognition, enjoyment, or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field" (United Nations 1979).

This convention is particularly important because it was the first international treaty on human rights that enshrined women's reproductive rights independently, though connected to cultural traditions. Other important areas include the promotion of adequate measures against trafficking and other forms of exploitation of women. The ratifying states have committed themselves to undertake an integrated group of actions at different levels under the umbrella of equality and non-discrimination. As a precursor to gender equality, this convention was particularly relevant and is, even today, a fundamental tool in relation to this issue.

However, the Declaration on the Elimination of Violence against Women and the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) are especially concerned with violence in every aspect of personal, familial, and socioeconomic life. The Istanbul Convention, for instance, regards gender violence as a human rights problem, such that states should be held accountable for their indifference, and legal action should be taken to avoid every form of physical or psychological violence, including the following:

1. Domestic (physical, sexual, psychological, or economic violence);
2. Rape;
3. Sexual harassment;
4. Forced marriage;
5. Forced abortion;
6. Forced sterilization;
7. Crimes committed in the name of so-called "honor";
8. Genital mutilation.

It follows that the legal system (national and international) should be upgraded such that the victims of violence have due access to legal protection and that the system responds to every dangerous situation accurately and promptly (European Union Agency for Fundamental Rights 2014).

Gender-sensitive policies should then be undertaken through awareness-raising campaigns and programs, the changing of educational policies, and the abolishing of the social acceptance of any form of violence based on culture, tradition, religion, or "honor." This convention also draws attention to the fact that during armed conflicts, gender-based violence is especially problematic and constitutes a severe human rights violation.

Nonetheless, the Beijing Declaration and Platform for Action go even further by establishing a group of goals and achievements to be met and obstacles to be overcome. Interestingly, the Beijing Declaration realizes the importance of education in human development: "There is an increased awareness that education is one of the most valuable means of achieving gender equality and the empowerment of

women. Progress was achieved in women's and girls' education and training at all levels, especially where there were sufficient political commitment and resource allocation. Measures were taken in all regions to initiate alternative education and training systems to reach women and girls in indigenous communities and other disadvantaged and marginalized groups to encourage them to pursue all fields of study, in particular non-traditional fields of study, and to remove gender biases from education and training. In some countries, efforts to eradicate illiteracy and strengthen literacy among women and girls and to increase their access to all levels and types of education were constrained by the lack of resources" (UN Women 1995).

Such international instruments seek to implement gender empowerment measures in different settings—from the most traditional ones, such as education and healthcare access, to areas in which, traditionally, women were excluded from participation, such as security, peacekeeping, or peace enhancement. These are areas in which traditional male bonding makes it even harder for women to fit in (Carreiras 2002). Further, parental policies, via the reformulation of parental financial support, and the promotion of a more balanced familial equation, given the sharing of care between mothers and fathers, comprise a cultural shift only education can aspire to achieve. Other compelling issues from a gender-based perspective (Torres 2018) include equal representation in the media (in traditional and social media), the exposure of female workers to dangerous substances and the impact on their health (including women's reproductive health), and the physical demands of work and their impact on familial responsibilities.

At the EU level, a new generation of public policies and political strategies seems to be developing to fulfill a human rights agenda in every field of human endeavor. In recent decades, important measures have been taken to promote gender equality. For instance, the strategic engagement for gender equality focuses on the following five priority areas (European Commission 2025):

1. "Increasing female labor market participation and economic independence of women and men;
2. Reducing the gender pay, earnings, and pension gaps and thus fighting poverty among women;
3. Promoting equality between women and men in decision-making;
4. Combating gender-based violence and protecting and supporting victims;
5. Promoting gender equality and women's rights across the world."

However, it seems that, given the great uncertainty humanity faces at different levels at this specific moment, a new approach is needed in controversial areas. According to Ursula Von der Leyen, carbonic neutrality, artificial intelligence, and gender equality are some of the areas that deserve special attention from the European Commission. Regarding gender equality, and assuming many of the basic issues have already been accomplished in most EU states, the main driver will be related to how a new set of laws can influence the lifelong decision-making process of every single woman (e.g., career, marriage, and family planning), including measures to overcome the significant gap in salaries (16%) and pensions (34.8%).

It seems, then, that in the EU, major steps have been taken regarding universal access to education and healthcare. Thus, the main concerns regard economic freedom (including reducing the gaps in pay, earnings, and pensions) and freedom concerning more private matters such as intrafamilial relationships (e.g., gender-

based violence), keeping in mind that, sometimes, more than one condition (for instance, being a woman and having a disability) enables discrimination. Therefore, special attention should be paid to detecting such intersectoral, cumulative, multi-discriminatory conditions.

Indeed, combating gender-based violence and protecting and supporting victims of outrageous attacks on personal integrity also represent a fundamental evolution in Europe. Thus, this political space is among the most fruitful on a global scale. Accordingly, the European Commission states that "Violence against women takes many different forms ranging from intimate partner violence, sexual harassment, and cyber harassment, to femicide, honor-related violence, and female genital mutilation. One in three women aged 15 or over in the EU has experienced physical and/or sexual violence, around half of all women in the EU have experienced sexual harassment, and 1 in 10 women have faced cyber harassment. Combating violence against women is one of the Commission's priorities, and it makes substantial efforts to eradicate such violence, through legislative and policy measures, financial support, and awareness-raising" (European Union 2019). From this perspective, gender equality shares some roots with ideological feminism and should not be considered a social movement of only women, but also of all men who believe in these values (Pimentel and Melo 2015).

However, despite all such efforts, certain questions remain unanswered in Europe and elsewhere. Why do such gender inequalities (i.e., regarding the enhancement of the capabilities of girls and women) still exist if there is such a huge global consensus on those values? Why is it necessary to wait 202 years for full gender equality (at least economic equality) to be accomplished? As considered previously in this section, many conventions, declarations, and strategic plans have been envisaged to promote human rights and gender equality. They represent the moral bridge between different cultures trying to reach a "minimum common denominator" for political action.

The answer may be that political action might be optimized through a strong effort directed at education. Most international instruments on gender equality emphasize the importance of education in the promotion of equal rights and non-discrimination policies. However, at the beginning of the 21st century, education should be the focal point. UNESCO could be the leader of this education-related transformation of human rights and gender equality. Indeed, organizations such as UNESCO exist to promote cooperation in education, sciences, and culture, and, thus, progress, development, and peace worldwide.

The promotion of a new dynamic on gender equality may be an opportunity to increase different people's levels of awareness on this subject. This new dynamic may also be endorsed by the United Nations Children's Fund (UNICEF) regarding the gender rights of girls. Although it is claimed that gender equality is integrated into all areas of UNICEF's work, a careful reading of UNICEF's Annual Report 2018 reveals that, "In 2018, UNICEF began implementation of the Gender Action Plan 2018–2021, which includes positive gender socialization as a new area of work aimed at changing discriminatory gender norms. In all of its work on gender, UNICEF focused on positive parenting, adolescent girls' empowerment, communication strategies, and evidence generation. In humanitarian situations, it supported large-scale disability-inclusive programs in Bangladesh, Nigeria, and the Syrian Arab Republic" (UNICEF 2019). However, a targeted intervention through education for

human rights and gender equality does not seem to be a priority, at least for the time being.

In any area of human endeavor, if gender equality is a human rights principle, it follows that gender integration is the natural consequence of a modern educational strategy. It is well known that values-based education has a positive effect on changing students' perceptions of and attitudes toward human rights (Nunes et al. 2015). Therefore, an oriented approach to education for gender equality seems to be an important goal for international organizations. Indeed, there is a difference between guaranteeing equality in access to all levels of education and promoting educational projects on gender equality. This education on gender equality should also be offered in the mainstream of university education (Beleza 2010). Indeed, "gender studies" should be at the core curriculum of human rights education and should be an integral part of an education for full citizenship.

Moreover, as global citizenship develops steadily in the digital era, the interconnectivity provided by social media and related cyber networks allows for the rapid dissemination of these values (European Union Agency for Fundamental Rights 2018). The specter of artificial intelligence represents another opportunity for a real and sustainable increase in literacy for gender equality (Independent High-Level Expert Group on Artificial Intelligence 2019). Society should, thus, embrace technological developments to promote a human rights culture.

In summary, an innovative global policy on human rights and gender equality may have different drivers, as follows:

1. Scope, aims, and principles:
    a. A universal framework of principles and procedures to guide states in the formulation of their legislation, policies, or other instruments in the field of human rights and gender equality;
    b. Human dignity and human rights, and equality of opportunities regarding social and economic goods;
    c. Personal autonomy and individual responsibility, and special measures for persons incapable of exercising autonomy;
    d. Respect for human vulnerability and personal integrity. Special vulnerability should be protected, and the personal integrity of such individuals respected;
    e. Privacy and confidentiality in the digital era and with the profusion of big data;
    f. Equality, justice, and equity; that is, equal opportunities to access fundamental social goods should be fully promoted;
    g. Non-discrimination and non-stigmatization, preventing the violation of human dignity, human rights, and fundamental freedoms;
    h. Respect for cultural diversity and familiar backgrounds insofar as such considerations should not be invoked to infringe upon human dignity, human rights, and fundamental freedoms;
    i. Unacceptance of any manifestation of gender violence;
    j. Solidarity and cooperation among human beings and international cooperation in promoting global solidarity by challenging global structural injustices.
2. Application of the Principles:

a. Education and access to knowledge as a nuclear driver for personal development, self-fulfillment, and social integration. The best available tools should be used to increase knowledge on an equal opportunity basis and guarantee that all genders have access to the same level of education. Promotion of a continuous life-learning process focused on capability development and enhancement;
b. Health education including access to adequate education on family planning, contraception methods, reproductive technologies, and consent;
c. Equity in healthcare access regarding the enjoyment of the highest attainable standard of health. This includes access to quality healthcare, access to reproductive healthcare, access to adequate nutrition and water, improvement of living conditions and the environment, elimination of the marginalization and exclusion of persons based on any grounds, and the reduction of poverty and illiteracy;
d. Protection of all genders from sexual harassment, violence, mutilation, intimidation, retaliation, or other denials of their basic human rights;
e. Labor, social, and economic equality guaranteeing that women have access to the same job opportunities as men and access to career progression. Salary levels should be the same for all genders. Job security should be ensured by allowing for interruptions in work for maternity leave, parental leave, and family-related responsibilities. Unsafe working conditions should be exposed and eliminated, and the health, safety, and well-being of all workers (both women and men) should be ensured;
f. Political equality should guarantee equitable access to political positions for all genders by influencing the form and function of institutions that deliver public services;
g. Judiciary equality should guarantee equitable access to justice by negotiating equitable rules and processes for effective and sustainable changes.

3. Promotion of International Cooperation:
   a. Appropriate measures, whether of a legislative, administrative, or other nature, should be implemented to put these principles into action per international human rights law. Such measures should be supported by action in the spheres of education, training, and public information;
   b. Human rights and gender equality education and training should be fostered at all levels and it is important to encourage information and knowledge dissemination programs focused on these issues.

5. Conclusions

Gender equality is an essential evolution of modern civilization according to which women and men should enjoy equal conditions that allow them to exercise their full human rights and contribute to and benefit from economic, social, cultural, and political development. It is then a question of equal enjoyment of human rights (i.e., the right to personal identity and the free development of personality). The discussion comprises basic assumptions of a human being, of a person's moral agency embodied in the indivisible human dignity, and the interpersonal duty of respect for persons.

However, it is also a matter of justice and equitable access to the positions and benefits society can offer based on fair equality of opportunity. It is not intended, desirable, or possible to achieve radical equality in all aspects of personal, social, or economic life. This situation is why gender equality is the equal valuing, by society, of the similarities and differences between men and women and the roles they play. It is also a precondition for full human development, the enhancement of capabilities, and, thus, the full exercise of personal freedom in the varied dimensions of social life. Any political democracy should evolve in the coming decades to incorporate these values in every area of public policy.

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2. Law and Gender Equality

Luísa Neto

Abstract: This chapter explains the path taken by the legal system within the scope of gender equality and gender equity, both at a national level and an international one. International declarations and conventions on gender equality and the promotion of women's rights are presented. At a national level, there is no doubt that equality of status—mainly legal, but also social—between men and women is demanded by the Constitution of many countries and must be implemented by the ordinary legislator. It means that the assumption of gender equality as a basis for generic positive discrimination should be proposed, promoting the use of the skills of each person, man or woman, in their individuality and unique sensitivity. This is precisely the way to enhance the ideal complementarity in a modern world and to ensure the recognition of the dignity of the treatment due to women. The text explains the path taken by the Portuguese legal system within the scope of gender equality or equity and the effective irradiation of the principle of equality enshrined in the 1976 constitutional text.

1. Gender

We focus on the notion of gender invoked by Sylviane Agacinski as a universal characteristic, id est: all humans are either male or female (Agacinski 1999).[1]

However, it is important to clarify apparently overlapping terms:

(a) Sex difference stems from biological characteristics that distinguish men and women.
(b) Gender difference ("rapports sociaux de sexe") is the recognition of the existence of constitutive values of female identity and male identity as having equal value that must be present and manifested equally in all spheres and dimensions of life.
(c) Gender equality is an operational concept, corresponding to the absence of asymmetries between genders in all indicators related to social organization, the exercise of rights and responsibilities, individual autonomy, and well-being.
(d) Discrimination on the grounds of sex or gender is a form of any disadvantage caused by legal rules, social practices, or individual behavior suffered by a person on grounds of sex or gender.

Within this framework, the subject of gender equality—which is very much in vogue nowadays but is not always addressed in the most obvious or pedagogically admissible way—tackles the analysis of asymmetries in social indicators between the situation of women and men in public and private spheres, paying particular attention to the incorrect and pernicious effect of the connection with issues of violence, human trafficking, torture, or sexual exploitation (i.e., circumstances that,

[1] It considers the restriction of the object of "gender equality" to the dichotomy "male/female," thus expressing the determination not to address the so-called "LGBTI issues," understood to refer to the topic of sexual orientation and freedom of sexual expression (Múrias and Brito 2008; Santos 2009).

in many situations, artificially reduce the space for discourse and discussion around such topics).[2]

The proclaimed policy of equal opportunities between men and women aims to neutralize or overcome visible and invisible barriers that exist or may arise regarding the access of women and men under equal conditions to economic, political, and social participation. It can also be considered as an institutionally structured and organized way of ensuring that what happens on the political scene and in social life is gender-neutral (i.e., it does not influence gender equality differentially, negatively, or positively).

A dual approach to gender equality is based on the promotion of equality between men and women in all policies and activities (gender mainstreaming) but calls for specific positive measures.

When properly understood, rather than true gender equality, the term "gender equity" should perhaps be adopted, thus emphasizing a form of justice in the treatment of men and women.

2. Gender Equality

Equality (or, as suggested, equity) in the treatment of women and men is a fundamental principle of current legal systems and is, thus, a fully fledged component of citizenship and even a real criterion of democracy, as has been proclaimed by the Council of Europe.

Indeed, the association of gender equality with factors of public and private savings, innovation, and economic growth has also been emphasized by the OECD and the United Nations through the Millennium Development Goals.

There are men and women in every minority or majority group. In every minority or majority group, sex determines social gender roles that generate inequality (i.e., an inequality to which discrimination based on any factor can be added—origin, religion, cultural belonging, sexual orientation, age, or disability—but which is no longer confused with any such factor, because it cuts across all society and all factors).

The international framework for this matter is clearly stated in ancillary instruments such as the Charter of the United Nations in 1945, the Universal Declaration of Human Rights of 1948, and the complementary United Nations International Covenants on Civil and Political Rights and Social, Economic, and Cultural Rights, the Convention on the Elimination of All Forms of Discrimination against Women (1979/1981) and its Optional Protocol (1999), the Fourth UN Conference on Women, and the Platform for Action emerging from the Beijing Conference (1995).

Other key sectoral instruments are the Convention against Discrimination in Education adopted by UNESCO in 1960 (and entered into force in 1962), the Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages (1962), the Convention on Discrimination in Employment and Occupation (1958), the Convention on the Nationality of Married Women (1957), the Convention on the Political Rights of Women (1952), or, even in the more restricted field of the world of work, the Conventions of the International Labour Organization, in particular and retrospectively, No. 183 on maternity protection (2000), No. 177 on homeworking (1996), No. 171 on night work (1990), No. 156 on equal opportunities and equal treat-

[2] See, for example, the context of the European Union (European Union 2011, 2012).

ment for men and women workers: Workers with Family Responsibilities (1981), No. 118 on equal treatment (social security) (1962), No. 111 on discrimination in respect of employment and profession (1958), No. 103 on Maternity Protection (1952), No. 100 on Equal Remuneration of Women and Men, Equal Remuneration Convention (1951), No. 89 on Night Work of Women (1948), and No. 45 on Underground Work of Women (1935).

The action of the Council of Europe has also been fundamental in, first, the generic framework offered by the provisions of the European Convention on Human Rights and, second, in terms even more decisive for the state structure, taking sides in the sense of assuming gender equality as an unequivocal factor of citizenship and democracy.[3] Accordingly, notable elements include the Declaration on the Equality of Women and Men adopted by the Committee of Ministers (16 November 1988) and the Declaration on Democracy and Equality between Women and Men as a Fundamental Criterion of Democracy, adopted by the 4th European Ministerial Conference on Equality between Women and Men (Istanbul 1997); the Resolution on the roles of women and men in conflict prevention, peace building, and post-conflict democratic processes—a gender perspective, adopted by the 5th European Ministerial Conference on equality between women and men (Skopje 2003); the Declaration and Programme of Action on Gender Equality: a core issue in changing societies, adopted by the 5th European Ministerial Conference on equality between women and men (Skopje 2003); the Resolution on "Achieving Gender Equality: a challenge for human rights and a prerequisite for economic development," adopted by the 6th European Ministerial Conference on equality between women and men (Stockholm 2006); the Action Plan on "Achieving Gender Equality in All Spheres of Society," adopted by the 6th European Ministerial Conference on Equality between Women and Men (Stockholm 2006); and the regular holding of the Conferences of European Ministers responsible for Equality (since 2000).

The involvement of the European Social Charter and, in particular, the statement of the resultant recommendations that paved the way for the future include Recommendation R (90) 4 on the elimination of sexism in language (21 February 1990), Recommendation R (96) 5 on reconciling work and family life (19 June 1996), Recommendation R (98) on gender mainstreaming (7 October 1998), Recommendation R (2002) 5 on the protection of women against violence (30 April 2002), and Recommendation R (2003) 3 on balanced participation of women and men in political and public decision-making (12 March 2003).

At the European Union level, the fundamental principles on this matter are listed in Articles 2 and 3 of the Treaty establishing the European Community, Article 6 of the Treaty on European Union, Articles 2 and 3 of the Treaty of Amsterdam,

[3] The European Union has emphasized this same policy by requiring candidate and potential candidate countries to integrate the promotion of equality between men and women in the European Neighborhood Policy, as well as in foreign and development policies, and to adhere to the principle of non-discrimination as a political criterion for membership, under the terms of the (Copenhagen European Council 1993). Moreover, candidate countries are obliged to transpose directives prior to joining (as the former Diretive 79/7/EEC or 92/85/EEC), as they form part of the "acquis communautaire"—see the developments outlined in the *Green Paper on Equality to Combat Discrimination in the Enlarged European Union* (European Commission 2004) or *Conclusions of the Brussels European Council* (European Council 2006). The power to make such determinations has also been exercised by the Court of Justice of the European Union (1996), which has played a pivotal role in consolidating this path.

and Articles 21 and 23 of the Charter of Fundamental Rights of the European Union. Moreover, the reference to the approval of the Women's Charter, even if in the form of a Declaration by the European Commission in March 2010 (European Union 2010b), is essential.

Regarding organic guarantee, the establishment of the European Institute for Gender Equality, created by the European Parliament and the Council in December 2006 and based in Vilnius, Lithuania, also marked a path consolidated with the Declaration Towards Gender Equality in the European Union, signed in May 2007 by Germany, Portugal, and Slovenia in the context of the work conducted by the Trio Presidency of the European Union, which reaffirms Gender Equality as a principle of the European Union.

3. Historical Setline

The focus on these matters today is in stark contrast, of course, to the traditional treatment that prevailed for a long time in this country. If Article 1104 of the Seabra Code stated, almost laughably for the modern world, that "[A] wife may not deprive her husband, by pre-nuptial agreement, of the administration of the couple's property; but she may reserve to herself the right to receive, for living expenses, a share of the income, and to dispose of it freely, as long as it does not exceed one-third of the said net income," and if Article 1186 imposed the obligation of "the wife to accompany her husband, except to a foreign country," Article 1204 clearly established the double standard by stating that, unlike the wife, adultery by the husband could only be a legitimate cause for separation of people and property if it comes "with public scandal, or complete abandonment of the wife, or with a concubine living in the conjugal home."

The evolution of the so-called "feminine condition" in Portugal is evident in the following list of significant dates and events throughout the 19th and 20th centuries, which culminates with the radiating effects of the approval of the new constitutional framework in 1976:

1867

The first Civil Code, which improved the situation of women regarding the rights of spouses, children, property, and its administration.

1889

First woman to earn a degree in Medicine—Elisa Augusta da Conceição de Andrade (Lisbon Medical–Surgical School).

1890

On 6 March 1890, the Law of 9 August 1888 was regulated, authorizing the Government to create secondary schools for girls.

1910

Divorce Law (Decree of 3 November 1910). Divorce is permitted for the first time in Portugal and the husband and wife are given the same treatment regarding grounds for divorce and rights over children.
New marriage and filiation laws base marriage on equality.
The woman ceases to owe obedience to her husband.
The crime of adultery is now treated the same when committed by women or men.

1911

Constitution of the Portuguese Republic.
Women acquire the right to work in the Civil Service.

- Physician Carolina Beatriz Ângelo, widow and mother, votes in the Constituent Assembly elections, invoking her status as head of the family.
- The law is subsequently amended, recognizing only men as having the right to vote.
- Compulsory education from age 7 to 11 for boys and girls.

1913

First woman with a degree in law—Regina Quintanilha.
Law no. 3 of 3 July 1913, which grants voting rights to male citizens who can read and write.

1918

By Decree No. 4876 of 17 July 1918, women are authorized to practice law. Previously, this profession was prohibited to them.

1920

Girls are allowed to attend boys' secondary schools.

1926

Women are now allowed to teach in male secondary schools.

1931

Explicit recognition of the right to vote for women with university or secondary education (Decree with the force of Law no. 19694 of 5 May 1931) while men remain only required to read and write.

1933

New Political Constitution of the Estado Novo establishing the equality of citizens before the law, "except, as to women, the differences resulting from their nature and the good of the family" (Article 5).

1935

First female members of the National Assembly: Domitila de Carvalho, Maria Guardiola, and Maria Cândida Parreira.

1946

New electoral law, broader than that of 1931, but still demanding different requirements for men and women voters in the National Assembly (Law no. 2 015 of 28 May 1946).

1966

ILO Convention No. 100 concerning equal remuneration for male and female workers for work of equal value was approved for ratification (Decree-Law no. 47 032, 4 November—Article 115).

1967

The new Civil Code comes into force. According to the latter, the family is headed by the husband, who is responsible for making decisions regarding the common conjugal life and the children.

1968

Law no. 2 137 of 12 December 1968, proclaiming equal political rights for men and women regardless of their marital status. Regarding local elections, however, inequalities remain, with only heads of family being eligible to vote in the Parish Councils.

1969

The principle of "equal pay for equal work" was introduced in national legislation (Decree-Law no. 49 408, No. 2, 24 November 1969—Article 16).
A married woman may cross the border without permission from her husband (Decree-Law no. 49 317 of 25 October 1969).

1971

Amendment of Article 5 of the Constitution, maintaining the expression "save, as regards women, the differences resulting from their nature" but omitting "the good of the family."

1974

April 25 Revolution and the establishment of democracy.

- Three diplomas open the access of women, respectively, to all positions in the local administrative career (Decree-Law no. 251/74 of June 12), to the diplomatic career (Decree-Law no. 308/74 of July 6), and to the judiciary (Decree-Law no. 492/74 of September 27).
- Abolished all restrictions based on sex regarding the electoral capacity of citizens (Decree-Law no. 621/A/74 of November 15).

1976

Approval of 90-day maternity leave (Decree-Law no. 112/76, 7 February).
The new Constitution comes into force, establishing equality between men and women in all areas (April 25).
The right of the husband to open his wife's mail is abolished (Decree-Law 474/76 of June 16).
The figure of the "head of the family" disappears. Domestic government ceases to belong, in its own right, to the woman.
Marital power no longer exists: both spouses govern their common life, and each one manages his own. The spouses upon the couple's residence together.
The husband and wife may add to their name, at the time of marriage, up to two of each other's surnames.

1978

Entry into force of the revision of the Civil Code (Decree-Law no. 496/77, November 25):

- Women no longer need their husband's permission to become traders.
- Each spouse may participate in any profession or activity without the consent of the other.

1979

Publication and entry into force of Decree-Law 392/79 (September 20), which aims to guarantee women equality regarding opportunities and treatment at work and in employment.

1980

Portugal ratifies, by Law 23/80 of July 26, the Convention on the Elimination of All Forms of Discrimination against Women during the Second United Nations Conference on the Decade for Women, held in Copenhagen, to which Portugal sent an official delegation.

From then on, and even if the law in books differs from the law in action, Portugal has indeed provided major steps towards considering an effective constitutional framework.

4. Constitutional Grounds for Gender Equality

Thus, the mainstays of gender equality policy are today anchored directly in the constitutional text. Beyond the unavoidable Article 13, the main guidelines in this area are now in the Portuguese Constitution in Article 9, which establishes as a fundamental task of the State— in paragraph h)—the goal "to promote equality between men and women." This task is reinforced by Article 59(1)(a) and (b) and the wording of Article 58(2)(b), which requires the State to promote "equal opportunities in the choice of profession or type of work, and conditions of work, so that access to all jobs, work or professional categories is not restricted on the basis of sex."

Article 36(3) also calls for equality in the rights and duties of spouses regarding civil and political capacity and the protection and education of their children. In another professional context, Article 47 provides for the right to equality in the choice of profession and access to public service, while the right to equal participation in public life is governed by Article 48, and the right to vote is determined by Article 49. Specific equality rights with gender equality implications can be found in Articles 64 (Health), 67 (Family), or 68 (Paternity and Maternity).

5. Constitutional *Indirizzos*

Beyond the constitutional framework, special reference should, however, be made to the extent of the reinvigorating effectiveness of the Fundamental Law and the effort to conform to the ordinary sectoral legislation.

Thus, in the family sector, Decree-Law no. 496/77 of November 25, which came into force on April 1, 1978, introduced profound changes to the Portuguese Civil Code to recognize married women as having full legal equality alongside their husbands as an application of the more general principle of non-discrimination on the grounds of sex. The Resolution of the Council of Ministers no. 7/99 of February 9 then approved the Plan for a Global Family Policy, with clear guidelines for gender equality. Indeed, the most affected areas were, evolutionarily, those of family management and the status of spouses, divorce (now, again, in upheaval), paternal power, adoption, and unmarried cohabiting partners' regime that culminated in the entry into force of Law no. 7/2001 of May 11, with successively approved amendments (the latest being Law no. 71/2018 of December 31) and new requirements on same sex marriage (Santos 2009), possible since Law no 9/2010 of 31 May.

Regarding maternity and paternity, the legal framework corresponds to Law no. 4/84 of April 5 (amended by Laws no. 17/95 of June 9, no. 102/97 of September 13, no. 18/98 of April 28, no. 118/99 of August 11, and no. 142/99 of August 31, rectified and republished by Decree-Law no. 70/2000 of May 4).

Regarding reproductive health and rights, the Portuguese Constitution notes (Article 67, no. 2, paragraph d) that the State is responsible for "guaranteeing, while respecting individual freedom, the right to family planning, promoting information and access to the methods and means of ensuring this, and organizing the legal and technical structures to enable conscientious parenthood." Law no. 3/84 of March 24 provided the historical legal framework for sex education and family planning. The guarantees of the right to reproductive health were later reinforced by Law no. 120/99 of August 11, regulated by Decree-Law no. 259/2000 of October 17, and by Law no. 12/2001 of May 29 regarding the first regulation of emergency contraception.

Surrounding issues, such as the treatment of infertility or the possibility of Medically Assisted Procreation, are listed in the requirements of Law 32/2006 (successively amended), while the relevance of the treatment of issues regarding the voluntary interruption of pregnancy can be obtained in the explanation of the Constitutional Court Rulings Nos. 21/84 and 617/2007.

In the field of work and employment, the first relevant historical milestone was the entry into force of Decree-Law 392/79 of September 20 (amended by Decree-Law 426/88 of November 18 and by Law 118/99 of August 11), which strengthened the right to equality in this matter and to a large extent benefited from the systematic intervention operated by Law 105/97 of September 13 (amended by Law 118/99 of August 11), applicable to public or private entities. The application of this law aimed to ensure the realization of the right of individuals of both sexes to equal treatment at work and in employment, broadly defining indirect discrimination as any measure, criterion, or (apparently) neutral practice that disproportionately disadvantages individuals of one sex by reference to marital or family status, which is not objectively justified by any reason or necessary condition unrelated to sex. However, the law considers as indicative of discriminatory practice the considerable disproportion between the rate of workers of one of the sexes working for one employer and the rate of workers of the same sex in the same branch of activity. The law also operates a reversal of the burden of proof in legal actions aimed at proving any discriminatory practice, leaving it up to the employer to prove the non-existence of any discriminatory practice, criterion, or measure based on sex, while considering as a serious administrative offense the impediment of a woman's access to any job, profession or post.

Moreover, Portugal has now transposed the principle of equal treatment and non-discrimination, in particular Directive 2006/54/EC of the European Parliament and the Council of 5 July 2006, on the implementation of the principle of equal opportunities and equal treatment of men and women in matters of employment and occupation,[4] prompting a profound amendment of the Labour Code through Law no. 7/2009 of February 12, which has already resulted in successive amendments to Law no. 3/2011 of February 15, prohibiting all discrimination in the access to and exercise of self-employment.[5]

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[4] The new lines of development in the conclusion of the European Pact for Gender Equality (European Council 2006) and in the (European Commission 2006) Communication on the Demographic Future of Europe—Commission, 12 October 2006—resulted in the adoption of Directive 2006/54/EC (European Union 2006) which repealed, in historical terms, the following acts, Council of the European Communities (1979, 1992); Council of the European Union (2004).

[5] This law transposes not only Directive 2006/54/EC (European Union 2006) but also Council Directive 2000/43/EC (Council of the European Union 2000a) and Council Directive 2000/78/EC (Council

Wage differentiation in the area of labor and employment, in particular, has deserved the attention of the legislator, stemming from the reiterated history of repeated violations, via regulation in Law no. 60/2018 of August 21. Another sectoral approach is the poverty and social exclusion phenomenon, with studies stressing that it is not neutral and that it particularly affects women. This conclusion largely stems from the specific nature of women's participation in family, economic, and social life: lower wages, unemployment, less social protection, longer life expectancy, and single-parent families, for which women are mainly responsible.[6]

Finally, and since the entry into force of the aforementioned Istanbul Convention in the Portuguese legal system on 1 August 2014,[7] Portugal is obliged to develop policies aimed at eliminating domestic violence, which determined introductions to the legal regime already existing at that time in Article 152 of the Criminal Code and amendments that Law no. 129/2015 of September 3 introduced in Law no. 112/2009 of September 16 on the protection and assistance of victims. Regarding the crime of domestic violence, Law no. 24/2017 of May 24 amended the Civil Code, favoring the urgent regulation of responsibilities in situations of domestic violence, providing that the joint exercise of responsibilities may be considered contrary to the interests of the child in cases of serious risk. Beyond domestic violence, under Law no. 83/2015 of August 5, and pursuant to the aforementioned Istanbul Convention, the crime of female genital mutilation (Article 144—A of the Criminal Code) was made separate, with provision being made for the crimes of stalking (Article 154—A of the Criminal Code) and forced marriage (Article 154—B of the Criminal Code), and the crimes of rape, coercion, and sexual threat were modified.

6. A Wider Scope of Reasoning

Regarding power and decision-making, the principle enshrined in Article 48(1) of the Constitution should not be forgotten. It states that all citizens have the clear right to "take part in the political life and in the management of the public affairs of the country." If it is true that the constitutional framework dictated by the 1976 Fundamental Law provided the main lines of action for what would become the State's action and the organization of society in this area, the specific relevance of the 1997 Constitutional Revision must also be highlighted. Indeed, Article 109 of the Constitution, in its then revised version, posits that "the direct and active participation of men and women in political life is a fundamental condition and instrument for consolidating the democratic system, and the law ought to promote equality in the exercise of civic and political rights and non-discrimination on the basis of sex in access to political office." This wording, *in fine*, inevitably led to the implementation of so-called quota policies. Notably, the incentive that is now expressly stated in the Constitution even implies a possible judgment of unconstitutionality by omission if measures are not adopted with the aim of equality, as opposed to the previous

of the European Union 2000b). Moreover, see Directive 2010/41/EU (European Union 2010a) and 2004/113/EC.

6 The results published on the application of Law no. 19-A/96 (Portugal 1996, now revoked) and Law no. 13/2003 (Portugal 2003), show, for example, a very high rate of female beneficiaries.

7 And following on Directive 2011/36/EU (European Union 2011) and Directive 2012/29/EU (European Union 2012).

situation, in which any legislative intervention in this sense could be understood as inadmissible discrimination given a judgment of unconstitutionality by action.

Thus, until 1997, the ratio of the precept was brought back to the affirmation of a general principle of democratizing political organization that reinforced the importance of the participation of (all) citizens and, thus, normalized the "idea of participatory democracy and the democratization of democracy" (Canotilho and Moreira 1993). The amendment then produced necessarily leads to a different reading of the precept. Hence, as a major idea, gender equality now stands out, revealing the constituent legislator's concerns about promoting this equality in the specific domain of the exercise of political power. It was then understood that only the express consideration of gender equality as a cornerstone of the principle of citizens' political participation, together with the imposition of an active posture on the part of the State in the effective implementation of equality in this area, could fully satisfy the demands of a full democracy.[8] Therefore, under the same banner, and with a common skeleton, we currently have an article with a different purpose and function.

The 1997 revision, thus, brought a new perspective to the extent that it speaks of the participation of "men and women," recognizing the duality of humanity, when previously (e.g., Article 112) it referred only to citizens. Notably, these amendments are contemporaneous with the introduction of Article 9(h), which determines as a fundamental task of the State the promotion of equality between men and women. As Maria Eduarda Azevedo noted (Moura 1997) "... it is at the level of the public sphere that the exclusion of women is felt most (...). This is regardless of the proclamation of formal equality. There is a real gap between equality and actual practice."

It is important to question whether the introduction of these alterations in 1997 was a requirement of the principle of equality, now considered in the sense of a principle that demands the consideration of material inequality for the adoption of proactive measures that formally aim at equality de facto (i.e., real equality). It then appears that the current wording of Article 109 adds nothing to the provision of Article 13. In fact, if we consider that equality before the law contains within it the imposition of de facto equality (Miranda 2000) (and, therefore, the need for the State to adopt a positive stance) and that gender is from the outset included in the exemplary clause set out in paragraph 2 of the same article, the amendments enshrined in the 1997 revision were not required by a modern (social) conception of the principle of equality (CRP Annotated by FDUP Students 2007).

Notwithstanding this possible understanding, recall that, following the new constitutional provision, a group of high-level experts was charged with studying the implications of Article 109 and proposing measures for more effective participation of women in political life to be included in the electoral law, which was then in preparation. The conclusions of this study then resulted in innovative proposals: the creation of minimum percentages of both sexes on the electoral lists with a mandatory reflection in the respective results (25%), progressive targets in the minimum percentages, rejection of lists that do not meet this requirement, penalizing parties that do not meet the minimum percentages, an incentive bonus for those that go beyond 33%, and organizing parliamentary work to reconcile professional and family responsibilities.

[8] The expression is attributed to Natalina Moura, a member of the Socialist Party's parliamentary group, during the discussion on the revision of the Constitution on 22 July 1997 (Moura 1997).

If eight or nine decades ago, women's fundamental demand was to win the right to vote and, with it, passive electoral capacity and, more broadly, the right to hold any political position, today the aim is to achieve a balanced distribution of positions at the leadership level in various sectors of Portuguese society and, in particular, the exercise of political power. In these terms, it is clear that a possible quota system could:

(i) Be exclusively feminist, favoring women, or be "neutral," preventing both men and women from occupying more than a certain percentage of seats.
(ii) Concern only the candidacies or also the composition of the elective bodies.
(iii) Be adopted freely by the parties as an internal rule, because of their freedom of self-organization, or be imposed by law, with the parties being responsible for establishing them, within certain parameters, or directly establishing said quotas with binding force and consequences.

This system may, however, legitimately face political criticism, summarized in the claim that positive measures discredit and humiliate women, as they would enter politics, not because they have the merit to do so or because they wanted to, but because the law obliged them to do so or because of the claim that, given the affirmation of women in the professional, scientific, and academic fields, the same would naturally happen in the political field.

The legal criticisms are substantially based on the unconstitutionality of positive actions for offending the principle of equal treatment.

The evolution of this discussion eventually resulted in the so-called parity law—Organic Law no. 3/2006 of 21 August 2006—which established a "zip" system for drawing up lists and is now amended by Organic Law no. 1/2019 of March 29.[9]

7. Equality in Public Policy

Finally, it is appropriate to emphasize the objective of the institutional guarantee of the State's equality policy.[10] Given the above discussion, the action of a State that is part of these contexts can only be understood today as being limited. The National Strategy for Equality and Non-Discrimination 2018–2030 "Portugal + Equal," approved by the XXI Constitutional Government on March 8, 2018, is published in the Official Gazette (Council of Ministers Resolution no. 61/2018 of 21 May).

Recognizing equality and non-discrimination as conditions for the construction of a sustainable future for Portugal, the XXI Constitutional Government has defined axes and strategic goals until 2030. This long-term vision is translated into the following action plans that define concrete measures and targets for each of the next four years:

(a) The Action Plan for Equality between Women and Men.
(b) The Action Plan to Prevent and Combat Violence against Women and Domestic Violence.
(c) The Action Plan to Combat Discrimination on the grounds of Sexual Orientation, Gender Identity and Expression, and Sexual Characteristics.

[9] This measure has been followed by complimentary reforms in rated companies and public administration.
[10] In organic terms, Decree-Law 164/2007 (now revoked), which included the Commission for Equality and Women's Rights and the Mission Structure against Domestic Violence, with the structure now defined in Regulatory Decree 1/2012 (Portugal 2012).

8. Possible Wrap Up

There is no doubt that the Constitution demands equality of status (mainly legal, but also social) between men and women and must be implemented by the ordinary legislator.

However, the assumption of gender equality as a basis for generic positive discrimination should be resisted, and better use should be made of the skills of each person, in their individuality and unique sensitivity.

This notion describes precisely how to enhance the ideal complementarity in a modern world and ensure the recognition of the dignity of the treatment due women, which does not and cannot result from the annual proclamation of days like March 8, or the legal provision of quota systems.

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3. The European Union as Safe Keeper of Gender Equality

Sofia B. Nunes

Abstract: It is considered that gender equality is increasingly being seen as a structural value, especially in the context of the European Union, despite the gap that persists between law and practice. But the growth of the far right in recent decades can put fundamental values and human rights in jeopardy. The European Union is, therefore, aware of the violations that have occurred at the level of fundamental values—including democracy, the rule of law, and gender equality—and, consequently, has arranged various types of mechanisms to protect them. This constant implementation of new instruments to safeguard the founding values of the Union shows that these instruments have certain limitations and that there must be an interconnection of the mechanisms in order to achieve the desired objective. Thus, the present research intends to present the mechanisms that currently exist to preserve the founding values of the European Union and demonstrate its effectiveness through the analysis of the case of Poland, which has had a far-right government since 2015. Moreover, some recommendations will be made to try to improve the mechanisms in question.

1. Introduction

In recent decades, the European Union (EU) has been characterized by the growth of the far right and the expansion of alliances between political parties and civil society groups with the same ideology. These alliances, in turn, are increasingly structured and coordinated, even managing to articulate their rhetoric and actions and becoming truly transnational movements. The strong resistance to neoliberalism means that far right-wing parties are gaining increased strength. Under the influence of 20th-century fascist ideology, this new far right has successfully adapted to the changes in society and the new era through the transformation of its rhetoric. Indeed, while the discourse was distinctly anti-feminist in the past, the strategy today is to promote equality between women and men. However, this form of equality is not necessarily material equality, which is rather problematic.

Notably, despite the gap between law and practice, gender equality is increasingly considered as having structural value, especially in the context of the EU. Therefore, it cannot be the change of government or power that calls into question this evolution, especially when there is the perception that any social transformation can induce different waves of backlash. Thus, there is a need for strategies and mechanisms to maintain that evolution, regardless of the occurrence, because a domino effect may occur. If the EU does not stand up against the violation of the founding values (i.e., democracy, the rule of law, and gender equality), there may be a rapid contagion from other countries. That is, it could further promote the far right. Moreover, if fractures begin to exist within the Union, its survival may be at risk, as other links may begin to appear.

Indeed, in recent years, there has been a decline—or pushback, if one does not want to be a pessimist—regarding democracy in the EU. The rule of law is often questioned, especially in some Member States, such as Poland and Hungary.

The Union is also aware of this phenomenon, which explains why it has developed multiple instruments to prevent a violation of the founding values. The last few years have been marked by its implementation, given suspicions and factual evidence of transgressions against the rule of law. In fact, it was only in 2017 that one of the main mechanisms was applied for the first time against Poland, which has had a far-right government in power since 2015. Thus, this study presents the mechanisms that currently exist to preserve the founding values of the Union and demonstrates its effectiveness through the presentation of the specific case of Poland. Furthermore, some recommendations will be made to try to improve the mechanisms in question.

2. Democracy and Gender Equality

The integration of Member States in the EU throughout the years was meant to converge the values and rules of these societies, each of them coming from different economic and social systems. Indeed, the EU is founded on a series of Treaties signed voluntarily by its Member States; that is, the Treaty on the EU (TEU) and the Treaty on the Functioning of the EU (TFEU), hereinafter referred to as the Treaties. Hence, accession to the EU presupposes compliance with a series of requirements, including respect for the values underlying the EU, as set out in Article 2 of the TEU as follows (European Union 2012a):

"Article 2: The Union is founded on the values of respect for human dignity, freedom, democracy, equality, the rule of law, and respect for human rights, including the rights of persons belonging to minorities. These values are common to the Member States in a society in which pluralism, non-discrimination, tolerance, justice, solidarity and equality between women and men prevail."

Hence, Member States commit themselves to protecting democracy, the rule of law, and equality, including gender, in their societies. Thus, to violate the values of the EU is to violate the laws of the Union.

However, accession to the EU presupposes compliance with a series of parameters for joining the Union—the so-called Copenhagen Criteria (implemented only in 1993)—which include "adherence to the acquis coupled with the ability for their economies to cope with the competitive pressure within the internal market, as well as—crucially for our purposes—the 'political criteria': democracy, the Rule of Law, protection of human rights, and respect for and protection of minorities" (Scheppele et al. 2020). That is, this separation between "political criteria," representing the European values, and "the acquis" (i.e., the set of common rights and obligations binding all Member States) demonstrates the importance attached to these values. Even before these specific criteria existed, certain standards were expected to be complied with by the acceding countries. For example, in Portugal, only after the fall of the dictatorship of the Salazar/Caetano regime in 1974, with the subsequent transition to a democratic regime and the decolonization process, was it possible to plan an integration into the then European Economic Community, which only supported pluralist democracies (Teixeira and Pinto 2017).

Conceptualizing the term "democracy" is complex and susceptible to different definitions and controversies, given its multidimensionality. According to the World Values Survey (2005–2014), the perception of the concept of democracy varies between citizens belonging to democratic or nondemocratic societies, insofar as one of the main elements associated with democracy by "democratic citizens (...) [is] gender equality, while people in nondemocratic countries associate it more strongly with

a prospering economy and social control.[1] People in democratic countries are also less likely to associate democracy with army rule and the intervention of religious authorities in political life than people in nondemocratic countries" (Zagrebina 2020).

There is a widespread understanding that democracy is something beneficial and desirable for a society. Immanuel Kant already considered that perpetual peace presupposes three conditions, which translate into three institutional evolutions: (a) liberal democracies should evolve into advanced democracies, with active citizenship and full social participation; (b) global governance arrangements should be promoted such that supranational institutions are effective (the United Nations [UN] and the International Criminal Court are good examples); (c) freedom of movement (i.e., the right to visit) should be implemented by promoting the mobility of citizens and families (Kant 1983).

Thus, one can consider that democracy is simply governance by people with the assumption that there is sovereignty (Coppedge et al. 2011). The deeper conceptualization of this term becomes more complex given the multiplicity of meanings associated with it, such as the following (Coppedge et al. 2011):

(a) Electoral democracy (the existence of free and fair multiparty elections).
(b) Liberal democracy (decentralized and restricted political power).
(c) Majority democracy (the majority governing).
(d) Participatory democracy (participation of ordinary citizens in politics).
(e) Deliberative democracy (political decisions as a product of public deliberation).
(f) Egalitarian democracy (all citizens equally empowered).

In any case, regarding governance, political representation via fair and legitimate institutions is the guarantee of effective governance in most societies. However, nowadays, the concept of illiberal democracies is also considered. Kubik (2012) identifies three elements to describe illiberal democracy: populism, organizational antipluralism, and ideological monism.

However, gender equality is an essential human right and a fundamental principle and value and can be assumed as the "symmetry between men and women and people of various diversities, on the basis of their gender identity or sexual orientation, in access to resources, powers and rights" (Torres et al. 2018). According to Lombardo et al. (2010), this concept is open to varied interpretations given that it depends on the context in which it is inserted. The rule of law then comprises "the subordination of arbitrary power and the will of public officials as much as possible to the guidance of laws made and enforced to serve their proper purpose, which is the public good (*res publica*) of the community as a whole" (Sellers 2014). That is, the ultimate purpose is the general interest (the common good) by protecting society from individual interests, making it the law rather than the people that governs to prevent oppression.

Hence, these values are interdependent, as each one promotes and allows for the existence of the other. Thus, some studies demonstrate that gender equality fosters democracy. Indeed, some show that the absence of women in public life occurs essentially in more authoritarian countries (Fish 2002). That is, the greater

[1] In this context, social control means the punishment of criminals (Zagrebina 2020); that is, the existence of greater respect for compliance with the law in a democratic society.

participation of women in public life (politics and in positions of power) makes it more likely that the interests and needs of all people will be addressed.

Furthermore, democracy is associated with greater respect for human rights and the stimulation of women's empowerment (Richards and Gelleny 2007). That is, in the long run, democracy and, consequently, the larger participation of women in public life induces higher gender equality (Beer 2009). Thus, although studies on democracy did not initially give much importance to women, the importance of studying this mutual influence has gradually been revealed. Indeed, historically, the measurement of the level of democracy of a given country did not consider women's suffrage, but a country cannot be considered truly democratic if women cannot vote and exercise other civic rights. Hence, it is important to look at democracy through a historical perspective, per the political regime of a country throughout history (i.e., its past and the current level of democracy), as the temporal effects are cumulative (Gerring et al. 2005).

Moreover, the rule of law plays a key role in promoting or restricting gender equality, as laws and courts shape the social and economic patterns of society (Rodriguez 2020). Thus, legal recognition is the basis for the protection of human rights, including that of women, especially in societies "where women become vulnerable to discrimination, abuse, and exploitation because legal protections are not available to override social/traditional practices that are prejudicial to women's equality. The right to challenge state actions or private actors that violate the law allows women to access judicial forums to claim redress for any grievance, including discrimination or denial of equality" (Jilani 2019). An attack on democracy and the rule of law can, thus, yield consequences for gender equality and women's rights.

The state plays a fundamental role in maintaining, enforcing, or discrediting these values. Thus, the state is considered as the institution within a region with authorization to use force (sovereign state). The increase in the involvement of the state in social provision, especially after World War II, brought attention to the concept of the "welfare state." Esping-Andersen (1990) classifies welfare state regimes into three models (conservative, liberal, and social democratic) depending on how it affects the structures of social inequality. For instance, the United States of America has a liberal welfare state regime, where the state has limited intervention in society, and Scandinavian countries are characterized by having social-democratic welfare states, based on the principle of universal social rights and, thus, a higher intervention of the state. However, this theory has been criticized for not considering the gendered structures of society (Lewis 1992).

Thus, gender politics pertains to ending inequalities within society and guiding society toward a specific gender order through the constant recreations of specific gender relations (i.e., patterns in gender arrangements such as the recognition of the existence of social divisions at the work level) (Connell and Pearse 2014). Accordingly, Connell and Pearse (2014) believe in the strategy of gender democracy, where gender orders of different societies are equalized at all levels—political, social, and organizational. This means accepting that gender exists in all aspects of life and its reform should be interconnected with other democratic domains. However, the abstractness of this concept prompts authors to determine specific indicators— inclusion, political equality, reasonableness, and publicity—to assess it by defining a political decision as democratic (Galligan and Clavero 2008). This strategy is especially necessary if we believe, as some do, that there is a world gender order; that is, "the structure of

relationships that interconnect the gender regimes of institutions, and the gender orders of local society, on a world scale" (Connell 1998). There may not be an already established one, as many countries have specific and diverse local gender orders, but there are interconnections, particularly because of transnational institutions that are certainly present and continue to grow.

Globalization also induced a transition to gender orders, with the rearrangement of local and national gender norms and practices. In fact, by altering political, economic, and social systems, the public and private spheres end up being reconstructed (Kimmel 2003). From colonialism and imperialism to contemporary societal arrangements, distinct and multiple societies are interconnected, exposing each gender order to the other, thus effectively altering them. With globalization came the creation of international organizations such as the UN and the EU that try to spread universal principles and values that respect human rights by, for instance, raising awareness through international conferences and implementing gender-sensitive strategies and policies (Bessis 2003). Assumedly, the EU is an expression of globalization.

The Convention on the Elimination of All Forms of Discrimination against Women adopted by the UN General Assembly in 1979 and the Beijing Declaration and Platform for Action produced by the Fourth World Conference on Women in 1995 are valuable examples of the commitment shown by these international organizations toward the achievement of gender equality. Beyond having gender regimes within their institutions, these practices bring change to gender relations. However, the clash between societies was notable when it was assumed that "while equality between women and men could be seen as a mark of modernity, it could also be seen as Western cultural imperialism" (Connell and Pearse 2014). Thus, contests and challenges are always present with societal transformations, even at the global level, which has been notable throughout history by conservative religious groups (e.g., Catholics or Muslims and far-right forces).

No wonder some of the strategies and policies implemented by the EU (and, thus, expected to be absorbed by Member States and transposed to each national law) were perceived with surprise. Mazey (1998) notices that "whereas in other policy areas, established, national policies have become progressively 'Europeanized', the EC [European Community] was a major catalyst in the generation and extension of national sex equality laws to protect the rights of working women. In short, the Community delivered a 'shock' to national policy systems and helped to create a new policy area at the national level." Obviously, the implementation of these policies helps transform gender norms, even with some reluctance at first glance. Further, blocks and setbacks are also part of the process. Certain Member States and interest groups do not go along passively with all the proposals to achieve gender equality by the EU. Indeed, the reality is what has already been noted: A transition toward gender relations is opposed, especially by men of older generations, given the shifting of current circumstances and, thus, the loss of privilege from them.

Ostner and Lewis (1995) establish the "two needle's eyes" thesis, which implies that the possibility of the EU to achieve reforms in each country is limited by two factors:

(a) The limited conception of gender equality, viewed here as equal treatment in the workplace, which is adopted in the legislation.
(b) The welfare state of a Member State and the gender order behind it.

Pollack and Hafner-Burton (2000), however, propose that three elements have repercussions for the acceptance of gender proposals: the level of expertise of the Commission bureaucrats in implementing a gender perspective, the need for a qualified majority in the Council or a unanimous vote to pass a proposal, and the degree of implementation of a provision given the gender order of a society.

Thus, the advancement of gender equality at the EU level as a whole and the potential for a local and national level effect will also depend on the local and national gender regimes and orders (Clavero and Galligan 2009). In fact, "the welfare regime of each Member State and the gender order underlying it constitute the other needle's eye that influences how EU directives are implemented. [. . .] Member states [. . .] are likely to resist new policies that challenge existing national patterns" (Ostner and Lewis 1995). Notably, a world gender order influences national and local gender orders but is reciprocal and mutual—a two-way influence. Thus, the needle's eyes hamper the progress and the convergence of Member States toward having the same gender system.

Whether Europeanization—that is, "the development of common legal norms and policy frameworks for regulating equal opportunities and equal treatment for women and men in the area of employment by [EU] member states" (Liebert 2003)—can contribute to the reform of national gender regimes can then be questioned. Several mechanisms have been created to address some of the Member States' oppositions. While not disregarding the force that legal acts and directives have, instruments that pursue the expansion of knowledge (e.g., best practices) have been used to revise norms and practices. It is of course perceptible that it may not inflict the same transformational effect, but it is nonetheless important to reach out through all the routes possible. Hence, it is via learning and reframing that gender issues were endorsed, with gender mainstreaming making an important appearance (Liebert 2003).

Some perceive a paradigm shift, where the redistribution of wealth, featured in the "old" equality policies, is no longer the only perspective of equality, as there are multiple indicators of inequality assumed in the "new" policies (Kantola and Squires 2010). This notion was related to the perception that the persistence of inequalities would not allow for equal rights to be used by all to the same extent (Verloo 2001). Thus, the promotion of gender equality in the EU emerged through specific measures for women, the so-called positive actions. However, this strategy was considered ineffective, as it did not consider unequal gender relations, which translated (and still translates) into different outcomes (Debusscher 2011). The different egalitarian practices, which many consider as having a chronological order, can be associated with the three feminist waves: the first is associated with the equal treatment perspective; the second, the women's perspective (e.g., positive action); and the third, the gender perspective (e.g., mainstreaming) (Booth and Bennett 2002).

Thus, through the UN Fourth World Conference on Women, held in Beijing in 1995, the concept of gender mainstreaming was established as a strategy for the promotion of gender equality to be adopted by governments and organizations; meanwhile, the neutrality of all public policies at the time began to be questioned (Stratigaki 2005). With the expectation of bringing gender equality to previously unreached areas, the strategy of gender mainstreaming emerged, which considers the interests and concerns of women and men at all stages of the process of creating public policies and legislation (Debusscher 2011). It is defined as "the (re)organisation,

improvement, development, and evaluation of policy processes so that a gender equality perspective is incorporated in all policies at all levels and at all stages, by the actors normally involved in policymaking" (Council of Europe 1998). That is, it always considers the gender equality perspective (Stratigaki 2005), which attempts to counter the idea of policymakers that their work is gender-neutral and that there are no biases that perpetuate existing unequal gender relations (Verloo 2001). There are, however, various definitions of this concept that call into question whether mainstreaming is a strategy or merely a set of instruments (Booth and Bennett 2002).

Furthermore, gender mainstreaming is seen as an agent of societal transformation, insofar as it requires reflecting on the way processes are gendered and questioning already existing power relations (Debusscher 2011). Thus, this agenda-setting approach corresponds to changes in the public policy paradigm, which contrasts with the integrationist approach that does not intend to change this paradigm but to introduce a gender perspective (Walby 2005). That is, although the latter approach is easier to implement, it does not achieve the scope for which this strategy was initially conceived. This situation is what happened, according to Lombardo (2005), in the EU, failing to effectively adopt an agenda-setting approach. As per Pollack and Hafner-Burton (2000), the situation stemmed from the "strategic choices of mainstreaming advocates, who have consistently framed, and 'sold,' gender mainstreaming as an effective means to the ends pursued by policymakers, rather than an overt challenge to those ends, which would in all likelihood have been rejected by 'mainstream' EU policymakers."

Perrons (2005) argues that there is a clear division in the EU between economic and social policies, considering that the former is not "gender neutral." However, their implementation has not had all the intended effects. San Miguel Abad (2018) considers that this situation is not because the strategy is inefficient but because of the "institutionalised machismo inherent to many structures and cultures that have prevented these strategies from being applied fully and in an unprejudiced way." Thus, it is necessary to be aware of the barriers imposed on this strategy to overcome them.

Therefore, the mainstreaming strategy and specific actions for women can be considered interdependent in how they address each other's shortcomings, which does not mean that there cannot be specific measures for the positive differentiation of women if they are part of an overall strategy to end (negative) discrimination against women (Stratigaki 2005). However, these positive actions have evolved to include specific actions for men and women (e.g., on the level of gender stereotypes) (Daly 2005). Indeed, Daly (2005) considers that the three approaches to equality policies are constantly evolving, not discounting the interconnection and development of equal treatment policies, which contradicts the perspective of a paradigm shift from the "old" equality policies to the "new" ones, as argued by Kantola and Squires (2010).

However, even with the progress already achieved, there has been, in the last few years, a decline in the level of democracy in some EU countries, which can affect the whole Union. As Smolka (2021) argues "the EU as guardian of the democratic fundamental values is failing to live up to its role despite the numerous instruments it has at its disposal." Further, the growing presence of illiberal democracies is among the main reasons for this development, which is somewhat paradoxical given that Member States had to meet a few parameters to join the Union (i.e., the Copenhagen Criteria).

3. Mechanisms to Prevent the Violation of the Founding Values in the EU

As noted, the integration into the EU by a Member State implies compliance with the Copenhagen Criteria. Thus, the failure to observe or comply with these values after fighting to enter this Union is somewhat inconsistent. One could even conclude that they are retrogressing instead of progressing toward the future. The Treaties, and the explicit values therein, conduct the behavior of the Member States. Thus, to violate the values of the EU is to violate the laws of the Union.

Accordingly, the values are protected by the Union and translated into specific rights set out in the Charter of Fundamental Rights of the EU (hereafter the "Charter"). It was adopted in 2000 and aggregates the civil, political, economic, and social rights of European citizens in a single document (Serviço das Publicações da União Europeia 2020). The Charter is considered a primary source of Union law, with equivalent value to the Treaties by virtue of the Lisbon Treaty through Article 6(1) of the TEU, a treaty that came into force in 2009, which enabled the EU to have a full legal personality (European Parliament 2021).

However, the national identity of each Member State, expressed in the fundamental political and constitutional structures, is also protected in Article 4(1) of the TEU. That is, there are values common to all Member States, but the political and organizational particularities of each are also respected (the so-called "constitutional individuality"), this being a reflection of the culture and historical-identity heritage of each of the 27 distinct societies that make up the EU (European Parliamentary Research Service 2015). Even so, this individualism cannot go beyond the limits of the founding values. That is, the national identity of each country should be preserved, though it cannot be an argument to violate the founding values and, therefore, the fundamental rights.

The EU is aware that there have been violations that have occurred at the level of its founding values (i.e., democracy, the rule of law, and gender equality) and has, therefore, developed different types of mechanisms to address the possibility of a Member State failing to fulfill its obligations under the Treaties, particularly in the event of a breach of respect for the values underpinning the Union. Indeed, when a new "crisis" emerges within the Union, it seems a new instrument is adopted to combat it. There is, first, the case of the controversial reforms adopted by Hungary in 2012 that led to the implementation of the Rule of Law Framework (RLF) in 2014. With the rise to power of the new Polish government in 2015, the ineffectiveness of this framework was then exposed, inducing the creation of one of the most recent and promising mechanisms: the EU Mechanism on Democracy, the Rule of Law and Fundamental Rights (Kochenov et al. 2016). This constant implementation of new instruments to safeguard the founding values of the Union shows that these instruments have certain limitations, warranting an interconnection of the mechanisms to achieve the intended goal.

Thus, this study will explain the mechanisms that currently exist to preserve the founding values of the EU and understand its effectiveness. The first mechanism is the procedure under Article 7 TEU, which is considered a more political route. The second is the infringement procedure through Article 258 TFEU, a more legal route. Despite being different mechanisms, they can be invoked simultaneously (McNeil 2019). Some also consider that the preliminary procedure framed under Article 267 of the TFEU is also part of these mechanisms (Netherlands Helsinki Committee 2020). The European Commission decided to adopt the RLF; this was considered as

a contingency procedure to strengthen the rule of law that complements the noted mechanisms. However, regarding the protection of the rule of law, there are other instruments such as the Rule of Law Dialogue, adopted by the Council of the EU, and the European Rule of Law Mechanism, which is a preventive mechanism. More recently, the Mechanism on Democracy, the Rule of Law and Fundamental Rights, and the General Regime of Conditionality for the Protection of the Union Budget were also adopted.

3.1. Article 7 TEU

Starting, then, with the first mechanism mentioned, Article 7 TEU can be applied in two distinct situations. In paragraph 1 of this Article, there is a preventive mechanism, which states that "On a reasoned proposal by one-third of the Member States, by the European Parliament, or by the European Commission, the Council, acting by a majority of four-fifths of its members after obtaining the consent of the European Parliament, may determine that there is a clear risk of a serious breach by a Member State of the values referred to in Article 2. Before making such a determination, the Council shall hear the Member State in question and may address recommendations to it, acting in accordance with the same procedure. The Council shall regularly verify that the grounds on which such a determination was made continue to apply" (European Union 2012a). In other words, the application of this mechanism ends up being a warning for the Member State to change its situation before sanctions are applied. It came into force in 2013 with the Treaty of Nice (McNeil 2019).

Figure 1 presents a schematization of this procedure, based on the work of Nowak-Far (2021).

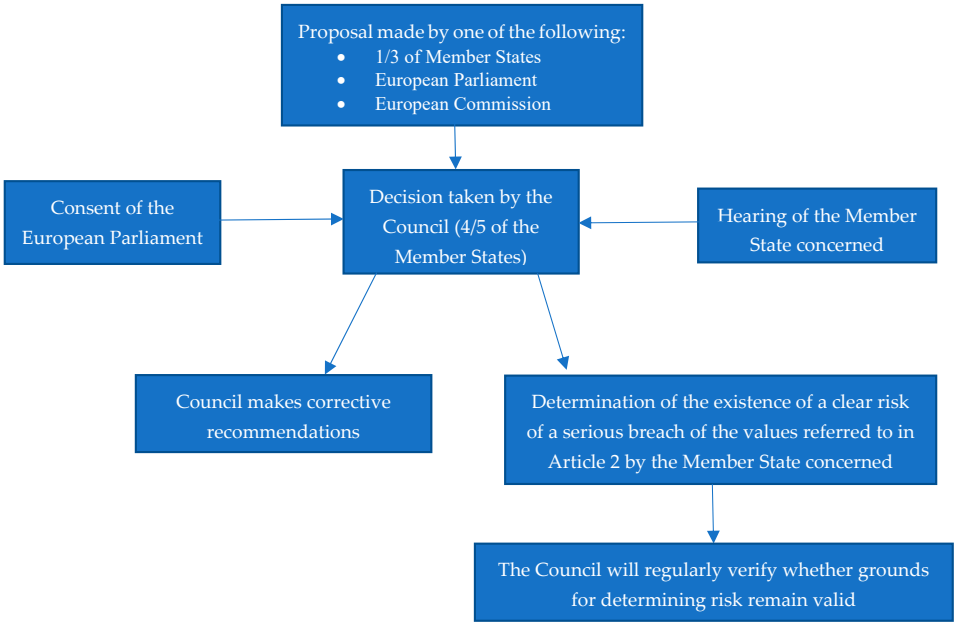

Figure 1. Outline of the preventive mechanism proposed in Article 7(1) TEU. Source: Figure by author.

If the situation worsens, the sanctions mechanism provided for in Article 7(2) TEU, introduced by the Treaty of Amsterdam, may be applied: "The European Council, acting by unanimity on a proposal by one-third of the Member States or by the Commission and after obtaining the consent of the European Parliament, may determine the existence of a serious and persistent breach by a Member State of the values referred to in Article 2, after inviting the Member State in question to submit its observations" (European Union 2012a). Thus, following a decision that there is a persistent breach of the values in question by the accused Member State, there may then be the application of sanctions under paragraph 3 of this Article, namely the suspension of certain rights deriving from the Treaties, such as the right of the representative of its government to vote in the Council, which may be revoked or amended if the situation changes through the Council's qualified majority deliberation (Article 7(4) TEU). Figure 2 presents an outline of this mechanism for better comprehension.

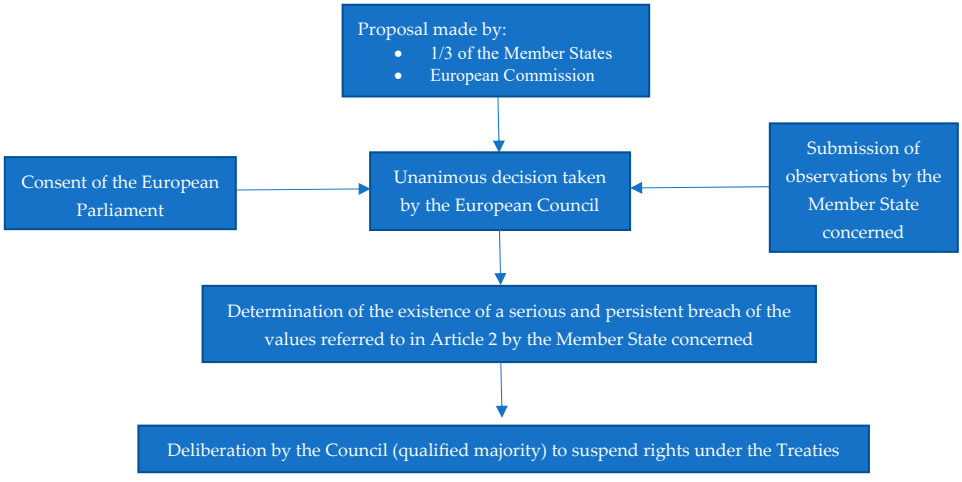

Figure 2. Outline of the penalty mechanism proposed in Article 7(2) and (3) TEU. Source: Figure by author.

Notably, this mechanism can only be applied given a persistent violation of the noted values, not individual violations of essential rights. As in this case, "remedy may be sought before national courts, as well as the European Court of Human Rights and, through the infringement and preliminary ruling procedure, the CJEU" (i.e., the Court of Justice of the European Union) (European Parliamentary Research Service 2015). Thus, the seriousness of the violation is determined by the vulnerability of the social groups harmed or the variety of underlying EU values affected. Further, in this case, the inertia of the accused Member State to act may also be contemplated (European Parliamentary Research Service 2015). Notably, it is not necessary to apply the preventive mechanism provided for in paragraph 1 of this Article before applying the sanctions mechanism provided for in paragraph 2 of the same Article (i.e., the latter instrument may be adopted immediately).

3.2. Infringement Procedure

By a more legal route, the infringement procedure provided for in Article 258 of the TFEU may be applied. Although the framework of the EU values was initially considered to be outside the jurisdiction of the CJEU by the first Treaties, this situation changed with the Treaty of Lisbon, which gave legal force to Article 2 TEU (European Parliamentary Research Service 2015). The articles in question are, therefore, presented below (European Union 2012b):

"Article 258: If the Commission considers that a Member State has failed to fulfill an obligation under the Treaties, it shall deliver a reasoned opinion on the matter after giving the State concerned the opportunity to submit its observations.

If the State concerned does not comply with the opinion within the period laid down by the Commission, the latter may bring the matter before the Court of Justice of the European Union."

That is, the Commission refers a particular Member State to the CJEU for a ruling on whether it breached its treaty obligations, in this case regarding the respect for the values of the EU, after it has been allowed to comment. Under Article 259 of the TFEU, another Member State may also bring an action against the accused Member State before the CJEU but must first refer the matter to the Commission. Thus, if the CJEU finds that there has been such an infringement, the Member State at fault must comply with the measures provided for in the judgment (Article 260(1) TFEU). If these measures are not conducted, the Commission can indicate an amount of the lump sum or penalty payment that must be paid by the Member State after the Court finds that it has not complied with the judgment (Article 260(2) TFEU).

3.3. Preliminary Procedure

Some consider that Article 267 of the TFEU is also an important mechanism in this regard, given that, as a preliminary procedure, it can prevent potential violations of EU values because of their misinterpretation. Thus, this Article states that "The Court of Justice of the European Union shall have jurisdiction to give preliminary rulings concerning: (a) the interpretation of the Treaties; (b) the validity and interpretation of acts of the institutions, bodies, offices or agencies of the Union" (European Union 2012b). Hence, any Member State can question the CJEU on the interpretation of Union law. This cooperation between national courts and the CJEU induces "a uniform interpretation of EU law in the Member States [that] has already resulted in several judgments where frictions with EU fundamental values and principles—in those cases more specifically the independence of the national judiciary—were at stake" (Netherlands Helsinki Committee 2020). In other words, this procedure serves to prevent possible non-compliance with EU values rather than trying to correct or penalize after the fact.

3.4. Mechanisms Regarding the Rule of Law

As noted, the RLF is a contingency procedure specific to safeguarding the rule of law implemented in 2014. It aims to complement rather than replace the mechanisms already presented. Thus, it can be assumed to take two different forms: 1st) "RLF *sensu largo*—which should be construed under Articles 2 and 7 TEU and which includes all other legal vehicles adopted to enforce these two provisions"; and the 2nd) "RLF *sensu stricto*—which, for analytical purposes, can be considered the

mechanism of enforcement of Article 7 TEU designed by the European Commission and adopted pursuant to its communication of 19 March 2014" (Nowak-Far 2021).

Thus, if there is a systemic threat to the rule of law by a particular Member State, a dialogue would be initiated between this country and the Commission. That is, this situation would be a step before resorting to the procedures under Article 7 TEU. This process then goes through three stages—the Commission's assessment, the Commission's recommendation, and the follow-up to that recommendation, with the application of these stages then representing the RLF *sensu stricto* (Nowak-Far 2021). The first is the collection and analysis of information to assess whether elements are indicating that there is a systemic risk to the rule of law; if so, the Commission will initiate dialogue with the Member State concerned by sending a report on its rule of law. The Commission will then indicate specific actions to be taken within a specified period to try to reverse this situation and, finally, monitors the implementation of these actions. If unsuccessful, Article 7 TEU will then be triggered (Comissão Europeia 2014). Notably, the Treaties do not provide for a system of monitoring compliance with EU values by the Member States, but the RLF has given the Commission the ability to monitor certain developments (McNeil 2019).

However, when it was created, the Council of the European Union questioned whether the Commission had the legal power to adopt this framework and, as it disagreed with it, decided to produce a softer instrument after a few months—the Rule of Law Dialogue—which only aims to establish an annual dialogue between the Member States of the Council to promote the rule of law (Kochenov et al. 2016). Recently, a new annual instrument was also created—the European Rule of Law Mechanism—which is part of the Rule of Law Report, a preventive instrument that identifies the central developments in each Member State in this area (i.e., both existing problems and good practices) (European Commission 2020). This new mechanism, as with the previous one, opens up the dialogue between Member States and the institutions to monitor the progress of the rule of law in the Union. Hence, it is a preventive instrument. There is also the Rule of Law Network, which establishes a communication channel between the Commission and the Member States such that it is easier to collaborate on drafting the Rule of Law Report. The latter is more of a response to specific situations and can make recommendations and monitor their implementation.

3.5. Mechanisms on Democracy, the Rule of Law, and Fundamental Rights

Further, to combat the rollback of the rule of law in certain Member States, in 2016, the Parliament suggested the creation of a new instrument. In October 2020, the European Parliament approved the creation of a new mechanism covering democracy, the rule of law, and fundamental rights, which aims for annual monitoring cycles to check whether the Union's values are being upheld and design specific recommendations for each Member State (European Parliament 2020). If systemic deficiencies are found, Article 7 TEU, infringement procedures, and budgetary conditionality can be triggered. That is, this mechanism attempts to integrate existing mechanisms into a single framework.

3.6. General Regime of Conditionality for the Protection of the Union Budget Regarding the Rule of Law

In December 2020, it was established that funds from the EU may be reduced or suspended in Member States with cases of violations of the principle of the rule of law (Official Journal of the European Union 2020). One of the positive points of this regime, in contrast to Article 7 TEU and the RLF, is the imposition of deadlines between the stages of the procedure, where the total duration is between five months and nine months (Maurice 2021). Despite being enforced in January 2021, the CJEU had to rule on its conformity with the Treaties,[2] even after it was referenced by Poland and Hungary, allegedly because the EU had exceeded its power. Thus, "the European Council declared in its December 2020 conclusions that the Commission will refrain from putting the Regulation to use or even publishing implementation guidelines before the court proceedings are finished" (Verfassungsblog 2021). A compromise had to be reached, as the countries were threatening to block the Union's multi-annual budget.

In February 2022, the CJEU dismissed the cases (from Poland and Hungary), ruling that this procedure can only take place when there is a reasonable basis to assume there was a breach of the rule of law in a Member State and that it affects the financial interests or the financial management of the Union budget (Court of Justice of the European Union 2022). Although it remains too early to see how effective this procedure will be, the creation of this system shows that the Union will not peacefully see a regression of the rule of law, particularly through the imposition of financial blockages.

3.7. Is There an Expulsion Clause?

If all previous mechanisms fail and there continues to be a persistent and serious breach of the values underlying the EU, is there a possibility of a Member State being expelled from the Union? The introduction of the unilateral right of secession (i.e., the voluntary withdrawal of a Member State from the EU) through Article 50 of the Lisbon Treaty has induced this vital question (European Central Bank 2009). It is not unprecedented in the international arena, as the UN Charter already provides for the expulsion of a member in case of persistent violation of the principles set out in Article 6 (Charter of the United Nations 1945). Therefore, this situation could also be provided for at the Union level. Currently, however, there is no article on this aspect in the Treaties. There are several arguments against such a provision, namely that it goes against the nature of the EU integration process, and the subsequent need to amend the Treaties. Further, as there would have to be unanimous consent of the Member States, it would be implausible, given the low probability of obtaining the consent of the Member State that would be expelled (Blagoev 2011).

However, some authors consider that, although such a provision is not foreseen, "unwritten legal principles are quite common in EU law. Indeed, the Court of Justice developed some of the most important legal doctrines with little or no textual basis in the Treaty. [...] This tendency of the Court of Justice to develop unwritten legal doctrines when necessary reflects the fact that purposive considerations play a crucial role in interpreting EU law. In particular, the Court of Justice has made it clear that

[2] At the time of writing.

it is ready to go beyond the wording of the Treaty to secure the "full effectiveness' or 'effet utile' of EU law" (Dammann 2016). That is, one cannot completely rule out the potential exclusion of a Member State just because it is not provided for in the Treaties. Thus, according to Dammann (2016), there could be a need for recognition of recourse to expulsion if there is a threat to the very existence or functioning of the Union.

This notion is not to say that there should be an exclusion clause because the mechanisms already presented exist precisely to prevent this situation. If they do not work, they should be amended to make them effective because a hypothetical expulsion from a Member State would only result in citizens being penalized twice over. Although there are no European people and no European constitution, because each country has its own identity, the EU considers itself as a family and, therefore, it would not be desirable to expel any member. It reinforces the need to create conditions and implement public policies at the Union level to crystallize the notion of European citizenship and identity. The recent proposal by the President of the European Commission to create a European Health Union (to address global health problems that cannot be dealt with by a single Member State) and a New European Bauhaus (affirming the importance of education and culture for full human development) represent significant steps in this identity trajectory.

3.8. Efficiency of the Measures

Only in recent years has there been a need to apply the existing mechanisms in the Treaties on behalf of preserving the Union's values. In fact, Article 7 TEU was applied for the first time in 2017 with Poland. Thus, we will analyze how the mechanisms were implemented in this case.

Before Article 7 TEU was triggered, the RLF was activated for the first time in 2016, given the reforms concerning the Constitutional Court that called its independence into question. Thus, the European Commission made recommendations, but this "only offered more time to the ruling party of Poland, so they could continue their bad acting to further dismantling all institutions of checks and balances in Poland" (McNeil 2019). Then came into play the preventive mechanism (Article 7(1) TEU) in 2017, with the formulation of a reasoned proposal by the Commission to be decided in the Council whether there was a clear risk of a serious breach of the rule of law by Poland (European Parliament 2019).

Before the activation of this mechanism, the European Parliament had already expressed its concerns about the situation in Poland, expressed in at least three resolutions: two in 2016 and one in 2017. Until 2018, it expressed its support for the Commission's proposal and sent an ad hoc delegation to Poland. This mechanism helped open the dialogue between Poland and the Council with the preparation of three formal hearings in 2018. However, no decision or improvement to the situation was reached. Indeed, "four countries have held the Council presidency without organizing any hearings of Poland, despite the strengthening of political control over the judiciary, the introduction of a controversial disciplinary regime and the failure to comply with CJEU decisions." (Maurice 2021).

This preventive mechanism is only a political weapon, as it is the sanctions mechanism (Article 7(2) TEU) that holds the real power. However, as noted, unanimity is required during the vote by all Member States, which did not happen in this case, as several Eastern European countries, including Hungary and Lithua-

nia, support Poland. Beyond this obstacle, another challenge regards the consent required from the European Parliament through a two-thirds majority of votes and an absolute majority of members, which, with the increasing presence of right-wing (or far-right) parties, becomes more challenging to achieve (McNeil 2019). That is, a preventive mechanism has been implemented but no improvement or decision has been reached, much less happens with the sanctions mechanism. Thus, at least for now, the mechanisms in Article 7 TEU are unable to effectively challenge the regression in founding values and, subsequently, rights, in Poland.

As the dialogues and their recommendations did not have the expected effect, there have been several cases in the CJEU that were launched by the European Commission against Poland given the alleged violation of the founding values. Below is a list of such cases, followed by their explanation:

- Case C-619/18—regarding the independence of the Polish Supreme Court;
- Case C-192/18—regarding the independence of the judiciary in Poland (new disciplinary regime for judges);
- Case C-791/19—regarding the independence of the judiciary in Poland (legality of the new rules on the composition of the National Council of the Judiciary);
- Case C-204/21—regarding the independence of the judiciary in Poland (independence and private life of judges).

The first case concerns the lowering of the retirement age of Supreme Court judges—Commission v. Poland, C-619/18—in which it was concluded, for the first time, that it does not accord with EU law, as it goes against the principle of irremovability of judges and judicial independence. Thus, it would be necessary for Poland to take the necessary measures to reverse this situation (Judgment of 24 June 2019, Commission v. Poland, C-619/18, EU:C:2019:531). Although there was rhetoric by Polish authorities that the Commission did not have the jurisdiction to influence reforms of the justice system at a national level, Poland ultimately amended its law to comply with the provisions.

The second case—Commission v. Poland, C-192/18—regarding the retirement rules in ordinary courts, this time had a similar outcome as the previous case. This reform was also ruled as incompatible with EU law for the same reasons as mentioned before. Interestingly, the Court also upheld that there was discrimination based on sex, as there were different retirement ages for judges depending on their sex (Pech et al. 2021).

The third case launched against Poland—Case C-791/19—by the Commission was because of doubts about the legality of "a new disciplinary regime which allows authorities to subject Polish judges to political control" (Pech et al. 2021). This new rule, unofficially known as the "muzzle law," intended to allow sanctions per the substance of the judicial rulings of the judges. Thus, the Court ruled in July 2021 that the new disciplinary regime of Poland is not compatible with EU law. However, in September 2021, the Commission sent a letter of formal notice, as Poland failed to comply with the Court's order.

Following an infringement procedure, the case C-204/21 against Poland was launched; it related to the independence and private life of judges given the change to the Polish law that organizes its ordinary courts, administrative courts, and Supreme Court, commonly known as "the amending law." The Commission argued that the "Disciplinary Chamber of the Supreme Court—the independence of which is not

guaranteed—continues to take decisions which have a direct impact on judges and the way they exercise their function. This includes cases of the lifting of immunity of judges to allow criminal proceedings against them or to detain them, and the consequent temporary suspension from office and reduction of their salary." (European Commission 2021). In July 2021, the Court ordered Poland to suspend these provisions until the delivery of the final judgment.

Given the rulings of the Court, on September 2021, the Commission requested for financial penalties to be put in place by the Court for Poland to comply with the order of the Court. Thus, on October 2021, the Vice-President of the Court, imposed a penalty payment of EUR 1 million per day until the interim measures order was followed. It was also decided that the Commission would send a letter of formal notice, as Poland did not take the required actions to comply with the Court's orders. This penalty was reduced to EUR 500.000 on April 2023, as the Vice-President of the Court concluded that Poland had taken some measures to comply with the rulings, although it remained insufficient. In June 2023, the final judgment of the Court was that the alterations of the Polish law did not comply with EU law.

Since 2016, multiple instruments have been triggered to combat the regression of the rule of law in Poland. Although some measures have been taken by this country to adhere to EU law, it has not been sufficient to fully respect the principles and values of the Union. That is, infringement procedures somewhat lead to progress in this area. However, it remains insufficient to fully combat the transgressions of the founding values. The new instruments (i.e., the General Regime of Conditionality for the Protection of the Union Budget relating to the Rule of Law) show promise, but it is too early to understand their true effect. Nonetheless, apparently, the integrated use of all these instruments is what makes it possible for a country to reverse its wrongdoings.

4. Recommendations—Improving Measures

The existing mechanisms have a lot of potential but are currently not effectively fulfilling their intended objectives. Thus, regarding Article 7(2) of the TEU, the need for unanimity by all Member States when deciding on the existence of a serious and persistent breach of the values referred to in Article 2 by the Member State involved must be changed, as the union between countries does not allow for this mechanism to be advanced. It could be replaced, for example, by the need to have a qualified majority to resolve the obstacle because the sanctions mechanism has more power over the Member State in question, as it can take away certain rights, such as the right to vote. The RLF and the preventive mechanism, however well-intentioned, only open the dialogue, which is not unimportant; however, they rarely succeed in implementing the recommendations implemented in this area, which implies that there is no progress and improvement in the situation in question.

Regarding infringement proceedings that go through the CJEU, they appear to be the most effective in reversing situations of violations of the founding values. Nonetheless, the length of the proceedings is detrimental to the cases. The delays in these procedures do not play in their favor, as they only attest to the persistence of violations of the founding values. Although it is understood that the Court wants to give Poland the chance to alter its law and that there are legal procedures that must be followed, the urgency of the occurrences must be considered and the deadlines reduced. The length of a case should not last a few years, even if interim measures

are taken. Moreover, the Commission cannot be reluctant to apply sanctions if the Member State concerned does not comply with the decisions indicated in the judgments. Showing inaction in these cases only induces a snowball of regression and rights violations on the other side.

5. Conclusions

Illiberal democracies seem to be gaining ground in the EU in recent years, which is rather problematic, as these countries are hiding behind the cloak of democracy to go beyond the founding values of the European Union to the point of compromising them. Thus, as Smolka (2021) argues, "the EU is at a crossroad: appeasement with autocrats or defense of fundamental democratic values." That is, the passivity with which crises of values have been viewed only strengthens these countries and their causes. If the real aim is to defend the values and rights of the Union, all available mechanisms must be activated and improved to increase their effectiveness. Political will is needed for this proposal to be implemented.

The case in Poland, where the far right is already in power, is an example of this phenomenon. Attacks on elements such as the rule of law (with the independence of the courts being called into question), freedom of expression, and women's reproductive rights have occurred in these countries. Moreover, though, for the first and second time, Article 7 TEU has been triggered against them, it cannot be said that significant progress has occurred. Only the infringement proceedings have led to a slight improvement in this situation, with cases won in the CJEU. Even so, some of the measures provided for in the judgments have still not been complied with. A financial penalty has been implemented regarding one of the cases, but it is not clear how much, or if at all, Poland has paid. The support that it has from other Member States in similar situations, such as Hungary, is enough for it to feel protected against the Union.

Arguably, these countries have not yet felt truly threatened to act. No sanctions have yet been activated, either regarding the suspension of rights or financial penalties, hence the talk of a certain passivity on the part of the Union. However, the most recent mechanisms, such as the Mechanism on Democracy, the Rule of Law and Fundamental Rights, and the General Conditionality Scheme for the Protection of the Union Budget, have significant potential. It remains to be seen how and when these will be implemented, for the pillars of democratic and plural societies are at stake.

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4. Gender Equality at a Global Level: A Survey

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Abstract: Gender equality is a necessary foundation for a peaceful, prosperous and sustainable world. In order to understand the different realities of gender equality worldwide, an international survey was conducted with the Units of the International Chair in Bioethics. This study was conducted with the Heads of the Units (N = 170) from 71 countries, from November 2016 until November 2017, through the administration of an online international survey: the Global Questionnaire on Gender Equality, which was developed for the purpose of this study. A total of sixty Heads of Units of the International Chair in Bioethics (35%) participated, from thirty-five different countries (49.2%). Units from India, Ghana, Nigeria and Slovenia answered that they have not achieved gender parity regarding education and family roles. Several areas lacked any form of family planning-related education in schools, and there were inequalities in terms of job access, which were mainly reported in West Africa, Southeast Asia, Latin America, and Europe. Advancing gender equality is critical to a healthy society, and has various impacts, from reducing poverty to promoting the health and education. Thus, the proposal of a Universal Declaration on Gender Equality was developed, with the purpose to be a comprehensive tool to promote gender equality worldwide.

1. Introduction

Human dignity has been the foundational basis of global bioethics, the discipline concerned with the ethics of life and all forms of life (Brännmark 2017). Gradually, the implementation of human rights became the main focus for maintaining human dignity, and the modern approach to these rights should emphasize gender equality in various settings, especially women's rights (Thiem 2015).

The United Nations General Assembly in Paris announced the Universal Declaration of Human Rights in 1948 (United Nations 1948), which included "the human" category to ensure gender inclusiveness, ensuring all civil, political, economic, social, and cultural rights as individual and global universal rights (United Nations n.d.; Thiem 2015).

The early discussions on gender discrimination and human dignity focused mostly on violence against women and concerns related to medical ethics (Thiem 2015). The Declaration on the Elimination of Discrimination Against Women emerged in 1967 to address gender discrimination and, consequently, the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) was established in 1979 (UN General Assembly 1979). The CEDAW comprised the social, public, and private aspects of equality and the importance of women's education, access to healthcare, and economic means. Women's health (particularly reproductive health) and violence against women are urgent matters; thus, there is a need to also consider and promote women's empowerment (Thiem 2015).

Gender equality has seen some improvements regarding harmful practices (such as child marriage and female genital mutilation), girls' and boys' access to primary education, and women's empowerment (United Nations n.d.). However, human rights are constantly violated globally, and this is particularly true when it comes to the rights of women, as most civilizations are patriarchy-based (Arat 2020;

United Nations n.d.). Women represent the poorest and less empowered group in their communities, consequently suffering from discrimination and extreme violence worldwide (Arat 2020).

Dignity, equality, and liberty allow for injustice to be addressed holistically (Baer 2009). Dignity assures respect for all human beings and protects their integrity and ways of life; equality addresses injustice; and liberty promotes freedom of choice under equal conditions (Baer 2009; Thiem 2015).

Gender equality is a necessary foundation for a peaceful, prosperous, and sustainable world (United Nations n.d.). However, culture may over-determine matters regarding gender inequalities, influencing the understanding of dignity in that context, particularly regarding women. Thus, it is important to focus on gender inequality settings, as they expose the delimited norms about a person's dignity as gendered (Thiem 2015).

Hence, this study conducts an international survey of all UNESCO Bioethics Units of the International Chair in Bioethics to understand the different setting realities of gender equality worldwide.

2. Aims

This study explores the gender equality reality and policies of different cultures and countries. Accordingly, it conducts an international survey of all Units of the International Chair in Bioethics across the five continents to more accurately assess the state of gender equality policies in the different cultures of mankind.

3. Methods

A preliminary study was conducted with the Heads of Units of the International Chair in Bioethics (N = 170) from 71 countries via the administration of the Global Questionnaire on Gender Equality, which was developed for this study based on the Compendium of Gender Scales (Nanda 2011) and aimed to collect descriptive data of gender reality beliefs, attitudes, and policies. The Questionnaire was administered via Google Forms and included closed-ended questions (yes/no) that encompassed the following:

A. Health, education, and family planning: the level of education between men and women; access to health and medical interventions; sexuality between couples and contraception; education for family planning, emergency contraception, and assisted procreation; rites of passage that include harm and sexual mutilation;
B. Family equality: men and women's role and autonomy inside the family; access to education and the work of daughters and sons;
C. Social and labor equality: the autonomy of women to travel outside their village/city; the autonomy of women to own any land/house/productive assets/cash savings; access to jobs/work/politics between men and women.

The sociodemographic characteristics, such as gender, age, country of birth, marital status, education level, professional area, country where the Unit is based, and professional status were also recorded.

The Head of each Unit was requested to answer the Global Questionnaire on Gender Equality per the present reality of each country regarding familial, social, and labor equality, including family planning. Participants were recruited via an email

sent to the Unit heads of the International Chair in Bioethics from November 2016 to November 2017. It described the aim of the study and contained the Google Forms link to the Global Questionnaire on Gender Equality for those who consented to participate. This study complied with all ethical guidelines for human experimentation stated in the Helsinki Declaration.

4. Results

Sixty Heads of Units of the International Chair in Bioethics (n = 60; 35%) from 35 different countries (n = 35; 49.2%) participated (Figure 1). Most were female (n = 30; 50%), 29 were male (n = 29; 48.3%), and 1 identified as "other gender" (n = 1; 1.7%). The median age was 52 years old, with a minimum (maximum) age of 28 (81) years old. Regarding marital status, most participants were married (n = 43; 71.7%), followed by single (n = 9; 15%), cohabiting (n = 5; 8.3%), divorced (n = 2; 3.3%), and widowed respondents (n = 1; 1.7%). Participants' educational level was as follows: Ph.D. (n = 35; 58.3%) and Master's (n = 18; 30%) and Bachelor's (n = 7; 11.7%) degrees. The most common professional area was Medicine (n = 27; 45%), followed by Bioethics (n = 7; 11.7%), Health and Social Sciences (n = 7; 11.7%), Biology (n = 5; 8.3%), Law (n = 4; 6.7%), Philosophy (n = 4; 6.7%), Researcher and Researching Methodologies (n = 4; 6.7%), and Engineering (n = 2; 3.3%).

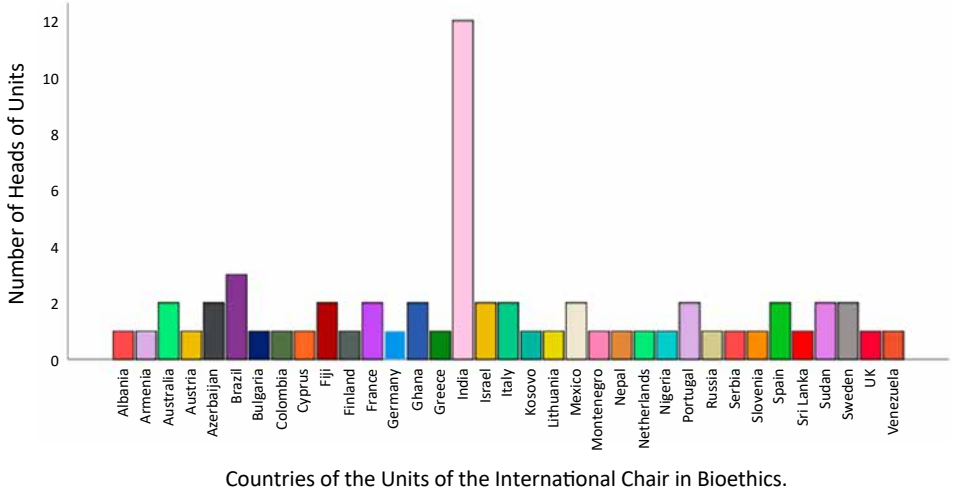

Figure 1. Number of Heads of Units of the International Chair in Bioethics per country. Source: Figure by authors.

The Global Questionnaire on Gender Equality

Health, Education and Family Planning

Respondents were required to answer the questions in this segment according to their cultural reality. Accordingly, the level of education of women and men was mainly considered the same (n = 49; 81.7%), unlike in cultures from India, Ghana, Nigeria, and Slovenia (n = 11; 18.3%). Nevertheless, more than half of the respondents agreed that there should be an affirmative action policy on education for women (n = 37; 61.7%) (Table 1).

Discrepancies were found in women's access to health and medical interventions, given that there are cultures in which women cannot go to the doctor/hospital/clinic alone (n = 2; 3.3%), nor can they choose their medical interventions alone (n = 12; 20%), according to respondents from Fiji, India, Nepal, Sudan, and Nigeria (Table 1).

Regarding family planning, 15% of the respondents from Argentina, France, India, Kosovo, Montenegro, and Sudan stated that it is a woman's exclusive responsibility to avoid getting pregnant. Moreover, respondents from Armenia, India, Kosovo, Mexico, Nepal, Sri Lanka, Sudan, and Venezuela revealed that women who have sexual intercourse before marriage do not deserve respect in their cultures (n = 11; 18.3%) (Table 1).

In some cultures, such as India and Sudan, the status of "being a real woman" is defined by having a child (n = 4; 6.7%). Contraception is a topic not discussed between couples in (n = 7; 11%), and it is unheard of for women to suggest the use of condoms in general (n = 8; 13.3%) and to their husbands in particular (n = 5; 8.3%) in several cultures, including in Brazil, Colombia, Greece, India, Italy, Mexico, Montenegro, Slovenia, and Sudan. Furthermore, women who carry condoms are considered cheap and disrespectful (n= 15; 25%) (Table 1) in countries such as Albania, Azerbaijan, Bulgaria, Cyprus, Ghana, India, Israel, Italy, Nigeria, Sri Lanka, and Sudan.

Furthermore, education regarding family planning, emergency contraception, and assisted procreation in schools has not been embraced by several cultures (n = 10, 16.7%) from West Africa, South East Asia, Latin America, and Eastern Europe. Rites of passage that imply harm, including genital mutilation, were also not recognized as unlawful (n = 7; 11.7%) or as practices that should be ethically condemned (n = 5; 8.3%) (Table 1).

Family Equality

The role of men and women in families differs per culture and society. In some societies, such as Armenia, Ghana, and Nigeria, a woman's role is still based on taking care of her home and family (n = 2, 3.3%) and obeying her husband (n = 3; 5%). Apparently, men should make the decisions about family visits (n = 2; 3.3%) and have the final word in the home (n = 5; 8.3%) (Table 1), as reported by units from Armenia, Azerbaijan, Russia, and Sudan.

The use of violence inside a marriage is considered a private matter (n = 2; 3.3), a reality noted by units from Russia and Armenia. More broadly, units from Ghana, Lithuania, and Sudan reported that women must have a male kinsman to protect them (n = 5; 8.3) (Table 1). Furthermore, the belief that daughters should not have the same chance to work outside their homes as sons (n = 5; 8.3%) still prevails, as reported by units from India and Sudan. More so, they should not be educated on the importance of family planning and work outside their home to earn money and support themselves (n = 16; 26.7%) (Table 1), as noted by units from Australia, Azerbaijan, Cyprus, Fiji, France, Ghana, India, Italy, Kosovo, Nigeria, and Sri Lanka.

Social and Labor Equality

Regarding social autonomy, several units from India reported that women cannot go outside their village/city alone (n = 2; 3.3%), own any land/house/productive assets in their name (n = 1; 1.7%), or have their own cash savings (n = 1; 1.7%). The

belief that financially independent women do not want to commit themselves to one relationship still prevails in several cultures/societies (n = 6; 10%) (Table 1), as noted by the heads of units of Albania, Ghana, India, and Kosovo.

Table 1. Global Questionnaire on Gender Equality.

Global Questionnaire on Gender Equality		***n* (%)** ***N* = 60**
Health, Education, and Family Planning		
Do women have the same level of education as men?	Yes	49 (81.7)
	No	11 (18.3)
Should women have access to the same level of education as men?	Yes	58 (96.7)
	No	2 (3.3)
Should there exist an affirmative action policy on education for women?	Yes	37 (61.7)
	No	23 (38.3)
Can women go to the doctor/hospital/clinic alone?	Yes	58 (96.7)
	No	2 (3.3)
Can women choose their medical interventions alone?	Yes	48 (80)
	No	12 (20)
Should women consider their partner's opinion regarding sexual desires/intercourse?	Yes	56 (93.3)
	No	4 (6.7)
Should men consider their partner's opinion regarding sexual desires/intercourse?	Yes	55 (91.7)
	No	5 (8.3)
Women who carry condoms on them are cheap/disrespectful	Yes	15 (25)
	No	45 (75)
Men should be outraged if their wives ask them to use a condom	Yes	5 (8.3)
	No	55 (91.7)
It is a woman's (exclusive) responsibility to avoid getting pregnant	Yes	9 (15)
	No	51 (85)
A couple should decide together if they want to have children	Yes	60 (100)
Couples should decide together what type of contraceptive to use	Yes	53 (88.3)
	No	7 (11)

Table 1. *Cont.*

Global Questionnaire on Gender Equality		*n* (%) *N* = 60
Women can suggest the use of condoms, just like men	Yes	52 (86.7)
	No	8 (13.3)
Women who have sex before marriage do not deserve respect	Yes	11 (18.3)
	No	49 (81.7)
Only when a woman has a child is she a real woman?	Yes	4 (6.7)
	No	56 (93.3)
Should family planning, including emergency contraception and assisted procreation be taught in schools?	Yes	50 (83.3)
	No	10 (16.7)
Rites of passage that imply harm, including genital mutilation, should be ethically condemned?	Yes	55 (91.7)
	No	5 (8.3)
Rites of passage that imply harm, including genital mutilation, should be unlawful?	Yes	53 (88.3)
	No	7 (11.7)
Family Equality		
A woman's only role is taking care of her home and family?	Yes	2 (3.3)
	No	58 (96.7)
A woman should obey her husband in all things?	Yes	3 (5)
	No	57 (95)
A woman should tolerate violence to keep her family together?	No	60 (100)
A man using violence against his wife is a private matter that should not be discussed outside the couple?	Yes	2 (3.3)
	No	58 (96.7)
A good woman never questions her husband's opinions, even if she is not sure she agrees with them?	Yes	1 (1.7)
	No	59 (98.3)
The man should make the decisions about visits to family or relatives?	Yes	2 (3.3)
	No	58 (96.7)
The man should have the final word about decisions in his home?	Yes	5 (8.3)
	No	55 (91.7)
The husband should decide to buy the major household items?	Yes	1 (1.7)
	No	59 (98.3)
A woman should only take good care of her own children and not worry about other issues?	Yes	1 (1.7)
	No	59 (98.3)

Table 1. *Cont.*

Global Questionnaire on Gender Equality		***n* (%) *N* = 60**
A woman must have a husband/son/some other male kinsman to protect her?	Yes	5 (8.3)
	No	55 (91.7)
It is important that sons are more educated than daughters?	Yes	1 (1.7)
	No	59 (98.3)
Daughters should only be sent to school if they are not needed to help at home?	Yes	1 (1.7)
	No	59 (98.3)
If there is a limited amount of money to pay for tutoring, it should be spent on sons first?	No	60 (100)
Daughters can only work outside their homes after they have children?	No	60 (100)
Daughters should have the same chance to work outside their homes as sons?	Yes	55 (91.7)
	No	5 (8.3)
Daughters should be told that an important reason to use family planning is so they can work outside their home and earn money to support themselves if necessary?	Yes	44 (73.3)
	No	16 (26.7)
A real man produces a male child?	No	60 (100)
Social and Labor Equality		
Can women go outside the village/city alone?	Yes	58 (96.7)
	No	2 (3.3)
Should women be able to go outside the village/city alone?	Yes	60 (100)
Can women, in their name, own any land/house/productive assets? (A productive asset bestows dividends and income to the owner, whether direct or indirect. Example: registered seed for home gardens)	Yes	59 (98.3)
	No	1 (1.7)
Should women, in their name, own any land/house/productive assets?	Yes	60 (100)
Can women have cash savings alone?	Yes	59 (98.3)
	No	1 (1.7)
Should women be able to have any cash savings?	Yes	59 (98.3)
	No	1 (1.7)

Table 1. *Cont.*

Global Questionnaire on Gender Equality		*n* (%) *N* = 60
Financially independent women do not want to commit themselves to one relationship?	Yes	6 (10)
	No	54 (90)
Women should leave politics to men?	Yes	3 (5)
	No	57 (95)
There should be an affirmative action policy to engage more women in politics?	Yes	49 (81.7)
	No	11 (18.3)
Women have access to the same job opportunities as men?	Yes	38 (63.3)
	No	22 (36.7)
Women should have the same job opportunities as men?	Yes	59 (98.3)
	No	1 (1.7)
Women have the same working skills as men?	Yes	51 (85)
	No	9 (15)
There should be job openings just for women to match the number of male positions?	Yes	34 (56.7)
	No	26 (43.3)
Women should have access to senior positions?	Yes	60 (100)
Access to career progression and salary levels should be the same for all genders?	Yes	60 (100)

Source: Questionnaire developed by the author, adapted based on the Compendium of Gender Scales (Nanda 2011).

Inequalities in the access of women to the same job opportunities as men (*n* = 22; 36.7) were reported by several heads of units, namely from Albania, Brazil, Colombia, Fiji, Finland, France, India, Nigeria, Portugal, Russia, Spain, and Sweden. Thus, several respondents agreed that there should be job openings just for women to match the number of male positions (*n* = 34; 56.7%) in their countries. Concerning politics, most believe women should engage in politics (*n* = 57; 95%) and that there should be an affirmative action policy to engage more women in politics (*n* = 49; 81.7%). Furthermore, all respondents agree that women should have access to senior positions and that the access to career progression and salary level should be the same for all genders (*n* = 60; 100%) (Table 1).

5. Discussion

In this study, although women and men were considered to be at the same level in most countries, units from India, Ghana, Nigeria, and Slovenia stated that they have not achieved gender parity in education.

In developing countries, women have less control over several measures, such as enrolment in education, health, personal autonomy, and even control over their lives. It is more common for gender gaps to favor males in poor than rich countries

(Jayachandran 2015). Thus, fathers are empowered to make decisions that affect girls, such as how much to spend on their education (Jayachandran 2015). Furthermore, university education may be viewed as more important for boys than girls (Jayachandran 2015).

The distance from school facilities is also one of the reasons cited for daughters being deprived of their education. Moreover, given the pressure of young marriages and female chastity in several societies, parents do not want their daughters to be in contact with male peers or teachers. Initiatives to have schools located in villages and hire same-gender teachers are essential for girls' enrolment (Field and Ambrus 2008; Burde and Linden 2013; Muralidharan and Prakash 2013; Jayachandran 2015).

Women's education impacts health, fertility, and infant mortality. Countries with a bigger gender gap have twice the infant mortality and fertility rates than others with smaller gaps. An improvement in health practices was directly connected to women's education, as girls' education reduces the risk of maternal mortality (Brown 2004; Jayachandran 2015; Choe et al. 2016; Lan and Tavrow 2017; Abdollahpour et al. 2022; World Health Organization 2023).

Furthermore, education enables women's decision-making in health and autonomy. For instance, access to primary school and education policies on reproductive health positively impacts women's abilities to make health decisions. Thus, family planning, modern contraceptives, and improvements in women's social condition can be facilitated by investing in education and health policies (Bose and Heymann 2019).

Women's health and contraceptive decisions are influenced by the social context and norms of the places in which they live (Bose and Heymann 2019). Given the lack of effective family planning methods, there is a need for an effective intervention to prevent maternal mortality from pregnancy and delivery complications or unsafe methods to avoid pregnancy and enhance the quality of care for mothers and children (Davies 2018; Abdollahpour et al. 2022). Further, there is a need to provide sanitary supplies for menstruation, which is associated with girls missing school, feelings of shame, and a gendered financial burden (Roy 2020), and create safe water and sanitation conditions that are linked to menstruation and childbirth illness risk (Davies 2018). Family planning will promote women's autonomy and decisions regarding fertility and grant women more time to work, increasing the household income and their health quality (Bose and Heymann 2019; Singleton et al. 2019). However, the gender inequalities in the various contexts that encompass education, work, and household decision-making impact access to family planning (Bose and Heymann 2019).

Gender discrimination in education is influenced by culture and religion rather than politics. Religion may affect political institutions and alter cultural behaviors. Culturally rooted gender norms based in patrilocality (in which couples live near or with the husbands' parents), patrilocal (in which a couple settles in the husband's home or community), and patrilineal (descent through the male line) societies, including the high value of women's "purity," may help explain the greater gender gap and lack of investment in women in several contexts, especially in poorer countries (Jayachandran 2015). For instance, investment in a son's health and education will be "rewarded," given that he will remain part of the family; however, daughters will no longer be part of the household when married. These practices are more common in Asia, the Middle East, and Africa (Ebenstein 2014; Jayachandran 2015). However,

even in the same country, there are regions with more noticeable gender inequality than others, given the different systems and cultures (e.g., India) (Dyson and Moore 1983; Jayachandran 2015).

Gender inequality is known to delay economic development, and women's education impacts economic development. Modernization (e.g., better infrastructures and democratization) may offset some cultural changes, such as women's enrolment in politics, and, thus, induce gender equality and economic development (Brown 2004; Cooray and Potrafke 2011; Jayachandran 2015).

In poorer countries, household decisions are less influenced by women's spending decisions and visits from family and friends (Jayachandran 2015). Moreover, gender-based violence varies with economic development. Women are more tolerant of violence from their husbands in poorer countries (e.g., in certain regions of India, if a wife goes out without telling the husband or argues with him, it is justified for the husband to beat her). However, studies show that women above the median wealth level for that setting have more decision-making power and less acceptance of violence based on gender relative to those below the median wealth level (Jayachandran 2015). Furthermore, in certain contexts, women may gain household status and greater well-being when they give birth to a male child (Li and Wu 2011; Jayachandran 2015).

As a result of economic development, policies that reinforce male power may tend to diminish. Nonetheless, to reduce gender inequalities, there may be a need to implement explicit policies. However, the application of legal reforms that favor gender equality, such as women's rights to ancestral land and banning prenatal sex determination, child marriage, and dowry (e.g., in India) is weak and the reforms are not enforced (Jayachandran 2015). Tools that enable the representation of women in politics and senior or leading positions directly impact law changes related to women's welfare, for instance, through the implementation of political seats reserved for women —a strategy adopted in developing (e.g., India) and developed countries— thus promoting the investment in girls and reshaping attitudes toward women in higher positions (Beaman et al. 2012; Jayachandran 2015).

Despite the implications, this study has limitations, such as the sample number and type. Given the preliminary nature of this study, which aimed to understand multiple realities, future studies should analyze the gender equality policies in each country and employ a representative sample of the population.

6. Conclusions

This study explores the gender equality reality and policies of different cultures and countries. Preliminary findings indicate that significant progress is still needed, as evidence reveals that even in academically and professionally specialized centers, crucial actions remain, such as drafting legislation and policies on gender equality; encouraging multidisciplinary and inclusive discussions on gender issues within society; and advancing fair access to education, knowledge, cultural development, healthcare, and family planning—especially addressing the specific needs of developing countries; and promoting the rights of women and men in society.

Guaranteeing equitable access for women and girls to education, healthcare, dignified employment, and representation in political and economic decision-making processes is essential for fostering sustainable economic development and advancing the welfare of societies and humanity at large.

Advancing gender equality is paramount to the well-being of society as a whole, influencing critical domains such as poverty alleviation, and the health, education, protection, and overall welfare of both girls and boys. For the effective realization of gender equality, it is imperative to establish a cohesive ethical framework, implement targeted legislation, and support a sustained cultural transformation, and International Community awareness. Hence, alongside the questionnaire, and considering the data collected, the study developed a Proposal of the Universal Declaration on Gender Equality to create an embracing and comprehensive declaration proposal.

> *"Gender equality is more than a goal in itself. It is a precondition for meeting the challenge of reducing poverty, promoting sustainable development, and building good governance."* —Kofi Annan

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Part 2: Social Background of Gender Equality

5. The Greco-Roman Matrix in Gender (In)Equality: Advances and Retreats

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Abstract: Some of the most influential ideas about the differences between the sexes came to us from Classical Antiquity. The supposed inferiority of women, the specific nature of the female body, and its connection to human reproduction are tenets that, for centuries, molded the way Western societies organized themselves, creating rules and places defined in accordance with the sex of individuals. In this paper, we examine some of the texts that substantiate these ideas and how close to them we still are. Nevertheless, it is my contention that the complexities of these texts have been often dismissed to create a seemingly cohesive idea about the difference between the sexes and the social expectations based on sexual features—what we now call gender. That is why ancient texts seem at the same time so distant and so close to us. They echo through our own shortcomings and limitations when considering equality.

1. Introduction

Western societies are heirs to the combination articulated in the last two millennia between Christian doctrines and Greco-Roman notions of the "natural" disparity between the sexes. Many centuries later, these notions are still endemic problems in our world. Reviewing topics that remain on the agenda today reveals precisely how little progress has been made since antiquity regarding equal opportunities between men and women. Such topics, though seemingly implausible to address, include wage differences, social discrimination, sexual harassment, women trafficking, domestic violence, teenage pregnancy, low participation of women in politics, the low number of women in leadership positions, the high maternal mortality rate, genital mutilation, and child marriage (UNICEF warns that ending this practice in Central Africa and Western could take 100 years).[1]

This observation indicates that we should continue to talk about gender equality as an objective to be achieved rather than as a reality. "Achieving gender equality and empowering all women and girls" is one of the 17 goals set by the UN for sustainable development to be implemented by 2030.[2] The importance of gender equality and the empowerment of women and young girls is, as the institution itself recognizes, transversal, as, given the full realization of human potential, it will also contribute to achieving other objectives for 2030, such as alleviating poverty and hunger.

Thus, let us consider briefly the discussion of Greek and Roman authors on the differences between the sexes, whether physical, intellectual, or psychological. How far have we moved from this perspective? We have drifted a long way, some will say. Maybe not. Consider that the most notorious changes in women's lives took place approximately one hundred years ago. The unconditional right to vote, for example, is extremely recent and laws that promote women's equal participation in

[1] Available online: http://www.un.org/sustainabledevelopment/blog/2017/10/ending-child-marriage-in-west-and-central-africa-could-take-100-years-warns-unicef/ (accessed on 26 July 2018).

[2] Available online: http://www.un.org/sustainabledevelopment/gender-equality/ (accessed on 26 July 2018).

politics, such as the parity law, continue to be a necessary, if artificial, instrument to implement gender equality.

A clarification of meanings is required. Much has been written about the sex–gender dichotomy, but it must be considered that this binomial is somewhat recent. It was invented in the field of anthropology in the 1970s to separate the biological characteristics that lead to the identification of an individual according to the conventional male–female binomial from the set of social, psychological, and cultural expectations, which we call social gender roles. It is enough for our analysis to understand sex as a biological category and gender as a socio-culturally defined category. This distinction did not exist in ancient societies that understood, as a whole, the set formed by socially imposed attitudes, behaviors, and sexual characteristics.

2. Ambiguities and Paradoxes About Women in Greek Culture

Classical Antiquity was a historical period whose beginning is traditionally placed in the 8th to 7th centuries BC in association with the circulation of the Homeric Poems and the conventional date of the first Olympic Games in 776 AD. It ends with the decline of the Western Roman Empire at the end of the 5th century AD. It is a period of approximately 1300 years, mainly dominated by two political centers: first Athens, then Rome, but with important influences from the eastern, Mediterranean (Egyptians, Phoenicians, Carthaginians) and northern peoples, with whom Greek and Roman civilizations came into contact, with different levels of cultural assimilation and military and political dominance. This diversity, which is not always acknowledged, was a determining factor and was probably among the pillars that sustained classical culture, even after the centralizing structures of the Roman Empire collapsed. The unifying capacity of classical ideals was among the factors at the basis of their influence. Without overly dwelling on this matter, it is useful to remember that we owe our notion of equality today to the Greeks, who defined it as the foundation of democracy: *isonomia* (the equality of citizens before the law), *isegoria* (freedom of expression), and *isocratia* (equal access to power). Of course, for the Greeks, democracy, like any other political system, was reserved for men, from which women, slaves, children, and foreigners were excluded. However, the women of Athens were citizens: they had what was called "latent citizenship"; that is, the ability to generate citizen children and transmit their status to them (Sealey 1990). The citizenship law promulgated by Pericles in 451 BC established that only the son of a father and mother (not just a father) who are citizens would have citizenship rights. Consequently, in addition to limiting the number of citizens, greater visibility was given to the status of women, their way of life, and the expectations placed on them regarding sexuality and the legitimacy of their children.

Although nowadays the level of isolation of women in Athens is debated (Cohen 1989), and the existence of a division reserved for women in Greek houses is questioned, until now, there has been no irrefutable archeological evidence that the gynaikeion has existed (Nevett 1995, 1999; Antonaccio 2000).[3] The life and role

[3] See, for example, Trümper (2013, p. 33): "It is now scholarly consensus that the notion of women being strictly isolated and secluded in their homes is an ideal concept, whose implementation could at best, if at all, be afforded by the wealthy elite." It is possible to identify in the archeological remains of Greek houses an *andron*, a room generally more lavishly decorated than others and intended for holding banquets attended predominantly by men. Thus far, however, it does not seem possible

of women were mostly associated with the domestic space. The participation of women and girls in public life was limited. It amounted to little more than attending religious festivals and rituals, some exclusive to women, such as the Thesmophoria and the Haloa, and their maternal function. Indeed, bearing children has always been considered the main aim of women's lives. It was not considered irrelevant, neither by women nor men. It involved several risks for the mother and child. Notably, the estimates for the Roman period by historical demography highlight maternal, perinatal, and infant mortality rates that would not be too different from those of today in underdeveloped countries. Pregnancy was central to women's lives. In Euripides' tragedy *Medea*, the main character kills her children to spite her husband who abandoned her; noting society's indulgence toward men, she exclaims: "I would rather stand three times with a shield in battle than give birth once."[4] An indelible division is, thus, established between two ways of being in the world: women, in the security of the home, should dedicate themselves to their children and domestic life, while men are reserved for civic life and the battlefront.

For a Greek or Roman, imagining a world in which women had a public role similar to that of men, a world in which they held positions of power and had the same social privileges was, inevitably, a world that could only exist in mythological narratives. This situation is evident in the myths regarding the Amazons, a society of female warriors who mutilated or killed men to counter their dominance. For the Greeks and Romans, such a society was upside-down, doomed to fail. Thus, the Amazons were always, ultimately, defeated. In Greek and Roman art, *amazonomachiai* were a frequent and important iconographic motif that also conveyed the image the Greeks had of themselves (Hardwick 1990). That is, the warrior value of the defeated Amazons magnified the victory of the Greeks; their way of life, free from men's power, highlighted the importance of the Greek social structure, built on male dominance; the fact that the Amazons were warriors and cut (or cauterized) the right breast to better handle the bow emphasized the opposition between their masculinized character and the conventional femininity of Greek women; and because they were traditionally located in a remote and inhospitable geographical area, they were seen as an ethnically different people and a constant threat.

In Athens, the entire sculptural program of the Parthenon seems to have been built on an apparently contradictory narrative about female power.[5] The goddess Athena, to whom the temple is dedicated, misrepresents the difference between the sexes, as she brings together in a hybrid form what, at the time, were identified as feminine (the *peplos*)[6] and masculine (the helmet, shield, and spear) clothing. Her birth is in itself a story of violence and the suppression of the feminine. Her father, Zeus, was warned by the oracles that the children Metis would produce after her would dethrone him. Thus, Zeus swallowed Metis when she was pregnant with Athena; after gestation, the goddess was born from her father's head, already an

to solidly identify a division of the house reserved for women, despite its existence being based on problematic literary sources, which are taken for granted in many manuals and part of a certain vox populi, accepted without questioning (Cf. Jameson 1990; Nevett 1995, 2010).

4 *Eur. Med.* 248–251. Unless otherwise indicated, translations of Greek and Latin texts are my own. I follow the Greek editions of *Thesaurus Linguae Graecae* but omit the original Greek texts.

5 The temple, now stripped of its beauty and without its original splendor, was colored in sparkly shades of red, green and blue.

6 The *peplos* was a long garment worn exclusively by women, covering their body down to the ankle.

adult, prepared for war and uttering battle cries. Starting with her motherless birth, she was masculine in so many ways. Reason, symbolized by her mother Metis, became one of Athena's attributes, though it is placed at the service of the patriarchal system of the Olympic gods.

In the Parthenon, the multiple representations of the victorious goddess Athena were accompanied by many other representations of the defeat or subjugation of mortal women (Castriota 1992; Blundell 1998). The twelve-meter statue, known as Athena Parthenos (i.e., Athena, the Virgin), represented the goddess as an armed warrior. At her feet, in bas-relief, is the creation of the first woman, Pandora, who was also the first bride, embellished with adornments and charms to seduce the less intelligent brother of Prometheus, Epimetheus, who received her, with her famous vessel. After stealing fire from the gods, Prometheus warned his brother that he should not receive anything from them, but Epimetheus received the woman that the gods molded from clay and to whom they bestowed gifts with multiple attributes: the beauty of a maiden, golden necklaces and wreaths, a cynical intelligence, seductive words, and a fickle character.[7] Pandora, the first of the race of women, inaugurates a time of decline, because, on opening the vessel, she released the evils that, until then, men were unaware of. Pandora's creation, like Eve's, corresponds to a point of no return in humanity: there is a before- and an after-woman period, and the latter is understood as a degeneration. As part of the statue of Athena the Virgin, the creation of Pandora, the first wife, introduces an opposition that is part of a discussion about the status of women in society. Pandora shares with Athena the fact that she was created with the form and beauty of a young woman of marriageable age. Athena is also born as an adult and has no childhood. However, whereas the goddess is allowed to remain in this state of eternal virginity, for Pandora and mortal women, marriage and motherhood are the conventional destiny imperative for social stability (King 1998; Hurwit 1999). The word *gyne*, which means woman, applies only to women who have already been mothers, showing the importance that the Greeks attributed to motherhood and the urgency it had in understanding the feminine essence.

On the western side of the temple, the pediment depicted Athena's victory over Poseidon and the metopes below the defeat of the Amazons by the Greeks were accumulated in the metopes below. The legend of the dispute between Athena and Poseidon for possessing the city's territory is told by Saint Augustine, in *The City of God* (18.9), who, in turn, collected it from the work of Varro, a Roman author from the 1st century BC. After the Athenians had founded their city, two divine signs appeared on the acropolis: an olive tree and a spring of water. According to the oracles, citizens should choose the olive tree if they wanted Athena's protection or the spring if they preferred Poseidon's. A vote was taken among all the citizens who were then still both men and women. Women, who outnumbered men, voted for the goddess, and the city was named Athens. The god, however, did not accept defeat and flooded the city. Measures were then taken to assuage his anger; thus, the women were punished for having conceded victory to Athena. This punishment was, according to Saint Augustine, three-fold: they lost the right to vote, transmit their name to their children, and be designated Athenian women (they began to

[7] This is the version of Hesiod, *Works and Days*, 60–105. On this subject, see Pinheiro (2000).

be designated with the name of the region, *Attikai*). Of course, St. Augustine did not miss the opportunity to comment ironically on the weakness of a goddess who, because she was female, was unable to protect the women who had voted for her. In this report, we see the dynamics that characterized the association of the classical and Judeo-Christian matrix. Though Saint Augustine criticizes the belief in powerless pagan gods, he does not condemn the punishment of women, nor does he contest their fragility or submission, which, for him, are as natural as for the Greeks.

3. Ancient Medical Perspectives on Sexual Difference

Particularly important in the analysis of what the Greeks and Romans understood by sexual differentiation are texts on medicine and biology, especially those attributed by tradition to Hippocrates, Aristotle's biological treatises, and the medical work of Galen. Articulated or not (more in Latin and Arabic translations than in the original Greek), these three authors influenced Western culture and medicine and the understanding of the role of women and men in society, at least until the 18th century. Many of our ideas about the difference between the sexes are rooted precisely in the framework given to the theories defended in these texts; that is, regarding two themes: the physical, intellectual, and psychological characteristics of women (their supposed physical and mental fragility); and the role of women in reproduction (who contributes what?).

Considering how women's bodies are described, they are understood in one of two ways: either as a completely different body from that of men or as a deviation from a norm constituted by the male body. That is, either we have two opposing structures, as in the Hippocratic texts, or we have a single structure with some variations, as seemingly in Aristotelian and Galenic works. In one of the most quoted passages in Hippocratic gynecological treatises, women have specific illnesses they do not speak of out of shame and ignorance. Such illnesses become fatal because they are treated by doctors as if they were men's diseases. Indeed, one can say with some propriety that this passage is the founding text of gynecology, as it is the first in which the specialization of care provided to women is defended.[8]

The female body is represented as vulnerable, subject to a constant imbalance caused by the reproductive system and, in particular, by the uterus and the menstrual flow. Notably, at a time cadaver dissection was not practiced, nor were instruments available to allow one to see inside the human body, knowledge of internal organs was limited and mainly based on the observation of animals, which frequently gave rise to errors. The great discoveries about the reproductive system are relatively recent: the spermatozoon was identified in the 17th century by Antonie van Leeuwen-

[8] *Diseases of Women.* 1.62, 8.126–128L: "[Women's diseases] "(. . .) are (. . .) dangerous and in most cases acute, serious, and difficult to recognize, since they are occurring in women who sometimes only grasp themselves what their disease is when they have become familiar with the disorders that arise from menstruation, and are older: by then, both the necessary sequence of events and time itself have taught them the cause of these diseases. Sometimes in women who do not know the source of their illness, diseases have become incurable before the physician learned correctly from a patient the origin of her disease. Besides, women may be ashamed to speak out, even if they know, since the matter seems shameful to them, due to their inexperience and ignorance. Furthermore, physicians too may err in not inquiring carefully about a disease's cause, and in treating them like diseases in men: indeed, I have seen many women perish in such cases. Rather you must question a patient immediately and in detail about the cause; for there is a great difference in the treatment of women's diseases and those of men." Translation by Potter (2018, p. 131).

hoek in 1667; the mammalian egg was discovered in the 19th century, followed by the human-only egg in the 20th century; and hormones are also a discovery of the last century.

For the Hippocratic authors, the female body has a different nature from that of the male body: it is spongier and, thus, absorbs more moisture, which it transforms into menstrual blood. It is, hence, a moist body and, as it accumulates more blood, is also warmer.[9] The feminine and masculine natures are based on the moist–dry, hot–cold, spongy–compact dichotomies. On the mental and psychological level, the following are highlights of the only fragment we have from a treatise on the diseases of young girls, which describes what happens to young women who, when it is time to marry and have sexual intercourse, do not do so: menstrual blood accumulates in the heart and the diaphragm, causing pressure on these organs that at that time were associated with reason (it was the heart and not the brain that was the seat of reason). What then follows is a description of the symptoms caused by this pressure: chills, fever, madness, desire to kill, fear, visions, and suicidal instincts.[10] The proposed therapy is one of the most common in the Hippocratic Corpus: marriage, sex, and pregnancy.[11] The uterus was said to be the cause of all illnesses in women and was believed to be mobile. Even after it was shown to be attached by ligaments, as per the works of Herophilus of Alexandria, who dissected corpses, the belief was maintained that the uterus could move through the body, from head to toe, exerting pressure on other organs and causing various pathologies. This idea gained amazing traction and lasted for a long time. Aretaeus of Cappadocia, in the first centuries of the Christian era (I or II AD), still attributed hysteria to the movements of the uterus, which he considered as a living being inside another living being. He wrote in *On the Causes and Signs of Acute Diseases* (2.11.2): "And, in general in women the womb is like an animal within an animal."

However, there is no mention of any kind of appreciation or devaluation of the sexes in the Hippocratic treatises. Whether the compact, dry, and cold nature of men is better—in any sense whatsoever—than that of women is not said. What is, nonetheless, said is that the challenging equilibrium of the four humors on whose

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[9] Cf. for example *Diseases of Women* 1.1, 8.14L.: "a woman has hotter blood and for this reason she herself is hotter than a man."; translation by Potter (2018, p. 13). Note that this characteristic changes over the years: "young women are generally moister and richer in blood, while older women are drier and have less blood; those between the two have something of both, since they are of an intermediate age." (Diseases of Women 2.2, 8.111L; translation by Potter 2018, p. 269).

[10] *Diseases of Young Girls 1.15–35*: "When these parts themselves are filled, a chill with fever [wandering] rises up. When these things occur in this way, the young girl is mad from the intensity of the inflammation; she turns murderous from the putrefaction; she feels fears and terrors from the darkness. From the pressure around the heart, these young girls long for nooses. Their spirit, distraught and sorely troubled by the foulness of their blood, attracts bad things, but names something else even fearful things. They command the young gird to wander about, to cast herself into wells, and to hang herself, as if these actions were preferable and completely useful. Even when without visions, a certain pleasure exists, as a result of which she longs for death, as if something good." Translation by Flemming and Hanson (1998, p. 251).

[11] *Diseases of Young Girls* 1.36–45: "I urge, then, that whenever young girls suffer this kind of malady they should marry as quickly as possible. If they become pregnant, they become healthy. If not, either at the same moment as puberty, or a little later, she will be caught by this sickness, if not by another one. Among those women who have regular intercourse with a man, the barren suffer these things." Translation by Flemming and Hanson (1998, p. 252).

balance the healthy state of the body depended (phlegm, blood, yellow bile, and black bile), especially blood and the state of the uterus, makes women more vulnerable.[12]

Regarding conception, the Hippocratic authors defend the existence of two seeds, male and female, that mix and generate a new being. This idea is old—it seems to date back to some pre-Socratic philosophers, such as Anaxagoras, Empedocles, and Democritus. Here, as well, there is no reference to any type of hierarchy. The father and mother have equal contributions. If the female seed is dominant, the child will be more like the mother; if the male is dominant, it will be more like the father.

More influential than the Hippocratic was the Aristotelian perspective on the differences between the sexes, especially in authors such as Albertus Magnus or his disciple Saint Thomas Aquinas, but also in Arab authors who were essential as vehicles for the transmission of Greek science in the West, such as Averroes or Avicenna. The comparison of the sexes became systematic. In *Generation of Animals*, male and female are the two principles of reproduction in beings that have this distinction: the male is a being that generates in another, and the female is a being that generates in herself; the male holds the active principle of movement and generation, and the female holds the material, passive principle.[13] From the Aristotelian perspective of reproduction, the male seed, which provides form and movement, unites with the female, which provides body and matter.[14] The female, being colder, cannot produce seed. Given this "inability" (*adynamia*), which is a trait that distinguishes the female from the male, the female seed is an intermediate product between blood and seed: menstrual blood (*Generation of Animals* 765b.10), which, per Aristotle and until very late in the stream of time, has the function of providing the matter to which the male semen gives form. Menstrual blood is, in fact, the imperfect result of a process that is carried out to completion only in males. In *Generation of Animals* 728a18 and 737a25, Aristotle asserts the following:

> "(. . .) and a woman is, as it were, an infertile male; the female, in fact, is female in account of inability of a sort, viz. it lacks the power to concoct semen out of the final state of the nourishment (this is either blood or its counterpart in bloodless animals) because of the coldness of its nature." Translation by Peck (1943, p. 108).

> "(. . .) the female is, as it were, a deformed male; and the menstrual discharge is semen, though in an impure condition; i.e., it lacks one constituent, and one only, the principle of Soul." Translation by Peck (1943, p. 175).

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[12] A few centuries later (in the 1st century AD), Soranus of Ephesus, in his handbook for midwives, would state that only the particular conditions of women (those related to the reproductive system: conception, delivery and breastfeeding) require a different therapeutic approach. In all other conditions, which are unnatural, man and woman are alike. Man and woman have, for Soranus, identical bodies that differ only in some organs, organs that, even so, have the same nature and are subject to the same pathological conditions as those of men.

[13] See, for example, 716a10-15. On the inequality of the sexes in Aristotle, see Horowitz (1976) and Mayew (2004).

[14] *Generation of Animals* 729a10: "The male provides the 'form' and the 'principle of the movement'; the female provides the body, in other words, the material." Translation by Peck (1943, p. 109). Cf. also 730a25: "What has been said makes it is clear that, in the case of animals which emit semen, the semen is not drawn from the whole of the body, and also that in generation the contribution which the female makes to the embryos when they are being 'set' and constituted is on different lines from that of the male; in other words, the male contributes the principle of movement and the female contributes the material." Translation by Peck (1943, pp. 118–19).

The woman in the first passage and the female in the second are compared to an infertile male or a mutilated male. This association is, however, partial, as it only applies to reproductive capacity. Even so, the Aristotelian work also notes that the woman, like the females of all animals, is weaker, more delicate, has a smaller body, and is colder (726b34, 727a15-20, 728a21, 766a1). Thus, we have a hierarchical view of the sexes, where the female is defined as deficient, limited, or below the norm and the male is the full realization of the potential of the human being. Inequality between the sexes is physiologically, psychologically, and socially inexorable. In *History of Animals* 608a33-609b15, more detailed and comprehensive distinctions are set out: women are less brave and more sensitive, weepier, more jealous, more complaining, more prone to injuries and aggression, and despair more easily than men. Associating these characteristics with the considerations in *Politics* about power relations within the family and the State reveals the scope of inequality as conceived by Aristotle:

> "(. . .) for the male is by nature better fitted to command than the female (except in some cases where their union has been formed contrary to nature) and the older and fully developed [*teleios*] person than the younger and immature [*ateles*]." (*Politics* 1259a38-1259b12). Translation by Rackham (1944).

This notion legitimizes, on several levels, the unequal organization of society, which at the grammatical level is expressed through the systematic use of adjectives in the comparative degree. This perspective of continuous (and natural) inequality, inherited and developed by Galen, will pass to Western culture as an unquestionable truth. Galen adopts the Aristotelian characterization—women are colder; men are hotter—and builds from the hot–cold, passive–active concepts an equation that sustains the sexual differentiation in the fundamental concept of *telos* (4.158K):

> "The female is less perfect than the male for one, principal reason—because she is colder; for if among animals the warm one is the more active, a colder animal would be less perfect than a warmer." Translation by May (1968, p. 628).

The female, because she is colder, is less active and less perfect. The numerous forms of the adjective *teleios/ateles*, both in the normal degree and in the comparative or superlative, seem to introduce more than one opposition.[15] It seems to introduce the notion of a scale on which the man constitutes the highest level and the woman a level below. The idea of *telos*—which means "end," "completion," "term," or "perfection"—applied to sexual distinction is an Aristotelian concept: it translates the idea of something that has fully reached its potential. Nature, however, which is not driven by chance, would not have generated, according to Galen, half the human race as imperfect and mutilated if there had not been a great advantage in doing so. The woman is colder so as not to consume all the nutrients as men do; thus, something remains of this process. This residue allows the embryo to form and develop. Galen defends the existence of a female seed, different from menstrual

[15] They are used to distinguish the sexes and distinguish humans from other animals. Heat is an instrument of nature, the most important according to Galen. Hence, colder animals are less perfect. He writes (4.161K): "Now just as mankind is the most perfect of all animals, so within mankind the man is more perfect than the woman, and the reason for his perfection is his excess of heat, for heat is Nature's primary instrument. Hence in those animals that have less of it, her workmanship is necessarily more imperfect, and so it is no wonder that the female is less perfect than the male by as much as she is colder than he." Translation by May (1968, p. 630).

blood, which contributes to generation. He benefited from Herophilus' work on human corpses, which led him to identify the ovaries, the ligaments of the uterus, and the fallopian tubes (Von Staden 1989).[16] Unlike Herophilus, Galen understood the connection between the ovaries and the uterus through the uterine tubes and, thus, recognized the female seed's intervention in conception (Blayney 1989). Even though he defends the contribution of the maternal and paternal seed, he continues to advocate, following Aristotle, that the former is colder and less active than the latter. We, thus, have the same notion of the sexes organized in scale as in Aristotle.

An excerpt from Galen's *On the usefulness of the parts of the human body* (4.158-9K) has been frequently explored in the analysis of sexual differentiation in antiquity. It presents an analogy between the female and male sexual organs. The female organs are similar to the male ones, except for their position: what men have on the outside, women have on the inside, given the lack of intrinsic heat that causes the retention of the reproductive organs inside the women's body. A woman is, thus, a kind of man inside out, or an inverse man. The imagery is certainly surprising, but in this context, it seems to constitute a way of making visible what is invisible. It is not claimed that women's bodies are a deviation from the norm constituted by the male body; rather, it is an explanation elaborated for the difference in genitals. Matching organ to organ creates an isomorphism that puts the two sexes in parallel.[17] Difference, even if minimal, is valued, as it is a necessity of nature to leave nothing to chance. Per Galen and, later, many authors who learned from him the theoretical principles of medicine that prevailed in the West for a long time, man and woman, male and female are notable works of a demiurge, a creator who wisely disposes of the elements. Sexual difference is thus one more factor of order, of organization of the cosmos.

4. Conclusions

Many of the theoretical elaborations on female physis (i.e., their nature) are based on a principle considered certain: by necessity and nature, women are different from men. The body and its characteristics are the foundation of social limitations. In ancient authors, we can also say the opposite; that is, social limitations condition how female nature is described. Sex and gender form an indistinct amalgamation.

The "lightness of mind" (leuitas animi) and the "weakness of sex" (infirmitas sexus) that Roman law attributes to women remained a stereotype that is challenging to eradicate (Grubbs 2002). Eternally minors before the law, Roman women are always legally dependent on a man. Only the laws of Augustus, from the 1st century BC, relieved the restrictions, exempting free women with three or more children from male guardianship.[18] This privilege, called ius trium liberorum (i.e., the right of the three children), highlights the appreciation of women's role as mothers.

[16] He did not realize, however, that the ovaries were connected to the uterus and mistakenly considered that the seed produced there was expelled by the bladder.

[17] For instance, the uterus would correspond to the scrotum, the ovaries to the testicles, the cervix to the penis. However, the vocabulary associated with imagination and mental construction seems to indicate that this is an intellectual exercise to describe and visualize internal organs, which are, therefore, invisible to the naked eye, taking external organs as a starting point because they are visible and known. For a clear analysis of this text, see cf. King (2013, p. 34ss).

[18] The expression "male guardianship" is pleonastic, since only men could be guardians, both of minors of both sexes, and of adult women.

After so many centuries, where are we? In what sense have we evolved? Do women's reproductive capacity and physical characteristics still condition their lives? Do they still tie them to the domestic sphere and keep them away from the public sphere? What limitations are assigned to women? What skills are they allowed to develop? In the family, what place do women occupy? What is expected of men and women in the family? What are we, men and women, anyway? Equals? Opposites? Different in some ways, the same in others? Only when an individual greets another individual without immediately classifying them as man/woman, male/female, thus conditioning their subsequent attitudes and behavior, will we have achieved equality. For us, as for the Greeks and Romans, difference is built into the socio-political system and is deeply embedded in our cultural heritage.

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6. Educating for Gender Equality: Why It Is Important to Talk About

Carla Carvalho

Abstract: The purpose of this chapter is to promote gender equality in education, within a framework of active citizenship, solidarity, and egalitarian visions towards gender equality. Throughout the second half of the 20th century, we have witnessed a more balanced approach to gender discrimination. However, when we analyze the social reality, we can see that there is still a lot to do with regard to this matter. The responsibility that families and school contexts assume in the process of socialization of the values of freedom, justice, plurality, or equality, to ensure that the future may be of a more equitable citizenship as far as gender is concerned, is becoming increasingly evident. I believe that all school agents have a main role to play in these issues. It is at school, and not only there, that stereotyped conceptions about gender are deconstructed, which may in the future influence the child and the way in which, as an adult, he/she will assume his/her personal, social and professional roles.

1. Introduction

We cannot start this reflection on gender equality in education without recalling the legacy of Simone de Beauvoir, when she reflected, at the beginning of the 20th century, in her book *The Second Sex*, in 1947, on a question that at first sight seems simple to answer: What does it mean for me to be a woman? As such, I challenge all women to do the same. What does it mean for each of us to be a woman?

To remember her legacy is to reflect on the differences between women and men regarding the responsibilities that have been and continue to be assigned to them, the activities conducted, access to and control of resources, and decision-making opportunities. Simone de Beauvoir (1980) defended the premise that women are not the second sex for natural reasons, but because of a series of social and historical processes.

This reflection induced the following question: What are we talking about when we talk about sex or gender?

Gender issues not only address women's problems but also can be directed at women, men, or the social relations between women and men. For instance, Silva (1999) notes that women are no longer the only ones interested in and committed to this struggle, as the challenge women and men alike face is to deepen each gender's characteristics and create systems of organization of collective life that maximize the synergies of effective cooperation.

Therefore, gender analysis shows that there exists or persists a devaluation of women at the social, political, economic, and even educational levels. This devaluation and subordination stem from social–gender relations. It is a social problem that should not be solved by women alone. Men also lose much to correspond with the image imposed on them in the cultural model.

What is the role of education in this whole process? Without pretending to answer this and other questions exhaustively, we will, throughout this article, try to expand on the topic of gender equality in education.

2. From Feminist Movements to Gender Equality

Women's movements are associated with feminist movements. These movements progressively sought to fight for women's access to a set of rights such as the right to work, the right to own property, the right to education, and the right to vote.

In Portugal, the National Council of Portuguese Women was created in 1914 and comprised a small elite of educated women with backgrounds in literature, law, art, philosophy, and medicine. They had been following the feminist movements, particularly those originating in the United States, and sought to demand a set of laws in Portugal that would proclaim some basic rights for all women, such as civic equality of the sexes, divorce law, family laws, and labor laws.

Some legislative evolution was achieved, though this evolution was stopped by the implantation of the "Estado Novo" and the Salazar regime that once again reinforced the figure of the head of the family and the sexual division of the female role (which belonged to the domestic space—"the fairy of the home") and the male role (which belonged to the labor and social space). These inequalities were described and enshrined in law.

The Revolution of 25 April 1974, with a new political, social, and economic philosophy, induced profound changes: the figure of the head of the family disappeared, and the laws began to treat women as human beings equal to men in terms of rights (the same legal status), rendering ineffective all provisions that considered them to have a "diminished capacity." Authors such as Amâncio (2000) state that, in Portugal, the interest in gender-related issues is recent, as it was only after 25 April 1974 that some work began to be developed. The 1970s and 1980s are seen, in Portugal, as years of major and significant social change, a period also marked by a greater and more evident female evolution.

The implementation of this democratic regime enabled a social transformation that favored the approximation of rights and duties between men and women in the most varied sectors of economic activity or the social and political participation of the country (Castro and Barbosa 2000). Political decision-makers incorporated the constitutional principle of equality between citizens, promoting policy instruments such as the National Plans for Equality, the first of which dates back to 1997 (Monteiro 2013). In legislative terms, Gender Equality in Labor and Employment was ensured by creating the Commission for Equality in Labor and Employment in 1979.

There is an effort to give visibility to women as social and historical agents (i.e., as subjects). It is a theme that leaves footnotes and gains a place in the literature. Hence, studies focused on unveiling the oppression of women and demonstrating that addressing these issues will be an added value in understanding society. Accordingly, we witness the deconstruction of gender opposition, a deconstruction that would act on the oppositions linked to the differences between the genders, and realize that the deconstruction process works on the difference.

In truth, equality is not achieved by decree, as the main thing is to change attitudes and behaviors. However, it is clear that it cannot be achieved without a decree. Without fair and equal legislation, we cannot claim a situation of inequality or discrimination before the courts. Thus, one of the main explanations for the maintenance of processes of inequality must regard our long and recent past of legal discrimination against women, such that this discrimination was considered as something natural and, therefore, no change was necessary.

It will be up to each one of us, by changing our mentalities and behaviors, to ensure that equality becomes a reality rather than merely an illusion.

It is fundamental to awaken people to reflect on the theme of gender equality and, through continuous work over time, articulated via several organs and agents, contribute to an effective change of mentality.

2.1. Gender Stereotypes

In the 21st century, it is not acceptable that biological sex differences continue to induce social–gender inequalities, resulting in an imbalance in the participation of men and women in the public and private spheres. Gender inequalities are socially constructed and, thus, generate discriminatory behaviors and are only maintained when there is general social acceptance.

However, despite the progress achieved in law and daily life, and despite the equal status of citizenship recognized between men and women in the private and public sphere, most of our indicators and much of our daily lives still reflect standardized social roles and expectations per sexual division (i.e., stereotypes): men are associated with the obligation to provide for the household, professional careers, and leading positions in professional terms (at most "helping" with domestic chores); and women are associated with the domestic space, dual tasks (domestic chores/work), and childcare stereotypes that continue to hinder the achievement of equality between women and men.

Gender stereotypes are the generalized and socially valued representations of what men and women should be (gender traits) and do (gender roles). Roles and traits are linked and usually hierarchical; that is, so-called "feminine" traits (e.g., a woman is more caring and fragile) are less socially valued than "masculine" ones (e.g., a man is strong and rational). The process of stereotyping is generally unconscious and hardly recognized by individuals. Stereotyping resorts to generalization, reinforces the subjective charge, and may manifest itself in the form of prejudice. Stereotyping is the basis of and supports the formation of prejudice, as it influences social perception, judgments, and behavior. Prejudice presupposes value judgments and their hierarchization.

Bearing this principle in mind, it is important to introduce the concept of *difference*. This concept comes from Latin and means to differ or differentiate (one element is different from another). Eagleton (2005) notes that woman is the opposite of man; she is a non-male. Woman is just another being, closely related to man. Here, the identity of each is implied. Though women are similar in biological characteristics, each has a unique identity. An important dichotomy, thus, arises: Equality versus difference. Women want equality with men (e.g., wages, rights) and the affirmation of women's differences.

2.2. Gender Equality and Education

Before we start addressing the issue of gender equality in education, it seems important to reflect once again on education for citizenship and citizenship practices, which are often talked about in a democratic society.

Children, from an early age, play gender roles and build their gender identity from the interactions established with their surrounding environment, such as family and professionals in education. As such, this issue must be addressed in a family and school context from an early age because "education for citizenship is a process that

takes place throughout life. It begins at home and/or in the children's immediate environment with issues that arise in everyday life regarding interpersonal relationships, identity, choices, justice, good and evil, and develops as the horizons of life expand" (Cardona et al. 2010, p. 59). Apparently, children of a young age are more easily exposed to the molding of behaviors. The family context is important in the construction of a child's identity, and the family is considered an environment where boys and girls grow up and educate themselves naturally in a community, with some healthy but innocuous tension.

The family is thus the first institution that contributes to children's education and is considered to be the most effective socialization context, the primordial educational space. The formation of identity goes through the understanding that gender and sex have different meanings, although inseparable. Considering that parents are children's closest example, they will be the most likely to be imitated by their children.

Several studies and the growing contribution of the Commission for Citizenship and Gender Equality have brought to the educational field concerns about the concept of gender and sex; particularly the need to think about formative dynamics that contribute to the early involvement of children in situations and activities that help them build a sense of life based on dimensions of egalitarian citizenship and solidarity.

Nonetheless, to better understand these issues, it is pertinent to distinguish gender from sex. The term gender, much used in the development of the feminist analyses that took place in the 1970s, is often confused with the term sex.

When we talk about gender, we refer to the social attributes, roles, tasks, functions, duties, responsibilities, powers, interests, expectations, and needs that socially relate to the fact of being a man or a woman in a given society and time. According to Rabelo (2010, pp. 161–62), gender is defined as follows:

> "a social construction of different attributes for men and women effected throughout life, which ends up determining the relations between the sexes in various aspects. The use of this term thus aims to underline the social character of distinctions based on sex and the rejection of the use of the word **sex** which, etymologically, refers to the organic condition that distinguishes the male from the female, while the word gender refers to the code of conduct that governs the social organisation of the relations between men and women."

When we speak of sex, we mean the biological differences characteristic of women or men that are universal and do not change from society to society. Gender characteristics can, therefore, be different from society to society and can be modified: what is expected of a young woman today when she reaches working age, regardless of her social status or position, is that she should have a paid job, though this has not always been the case. Gender is, therefore, a socially constructed category and the result of (its) time and place.

Gender is a social concept. It considers the biological differences between the sexes and defines; in particular, the differences in the inequalities of roles between men and women per the socioeconomic, historical, political, cultural, and religious context of the various societies in which men and women live. Individual sexual differences do not constitute and justify inequalities between social beings. Only

culture intervenes by creating identities for each sex and by elaborating gender systems. The differences are then transformed into inequalities.

According to Amâncio (2000), the studies on issues related to gender differences raised, for quite some time, some myths that are not scientifically proven. Before speaking of gender, male supremacy was highlighted regarding female submission.

Despite the civilizational advances of the last 40 years, this process should be continuously considered to fight against stereotypes; that is, "(. . .) well organised sets of beliefs about the characteristics of people belonging to a particular group" (Cardona et al. 2010, p. 26) and social discriminations, in the domestic sphere, at work, at school, or in any other place, as has been advocated in this article. Hence, because gender stereotypes remain in force and still mark society (Castro and Barbosa 2000; Vieira et al. 2012), effective promotion of equal opportunities between men and women remains urgent.

Legislative changes have put aside the hierarchization of the sexes to recognize the equality of women and men. Various social practices have also changed: we are far from the time when it was considered "natural" for women to live only for men and in the family sphere. Therefore, gender differences cannot be confused with gender inequality, as they do not have the same meaning.

Inequality is based on discrimination and is opposed to equality; in turn, gender difference is among the principles on which gender equality is based, for it is by recognizing the differences between the sexes and the male and female gender (and within each gender) and acting on those differences that equality can be achieved. Gender difference is the recognition of the existence of constitutive values of female and male identity with an equal value that must be present and manifested in equality in all spheres and dimensions of life. Gender inequality is the hierarchical rights, status, and dignity between women and men in law and in fact. It defines the asymmetries in social indicators between the situation of women and men in the public and private spheres.

It is necessary to implement actions to deconstruct stereotypes and remove gender-based barriers. Such actions should be part of education issues. Accordingly, UNESCO (2018) recommends the development of inclusive school curricula that transform impediments into opportunities beyond the establishment of safe environments inside and outside school that favor effective learning outcomes. Gender equality is a global priority for UNESCO, as it is fundamental to the promotion of respect and citizenship, which are the basis for building peace and sustainable development. Therefore, we must think about integrating the gender-sensitive approach into legislation and policies at all levels, from global to local, including schools. As gender equality is part of the 2030 Agenda and the National Education Plan, no goal can be considered achieved unless achieved by all.

The Basic Law of the Portuguese Education System (Law no. 46/86) (Portugal 1986) refers to the approach regarding the role of the school in promoting equal opportunities between men and women. The general principles state it is necessary to "promote the democratisation of education, guaranteeing the right to a fair and effective equality of opportunities in school access and success" (art. 2). The legislator maintained this line of reasoning in the following paragraphs when he stressed that the education system, including schools, should contribute to the "full and harmonious development of the personality of individuals, encouraging the formation of free, responsible, autonomous, and solidary citizens (. . .)" (art. 4). More-

over, education should "promote the development of a democratic and pluralistic spirit, respectful of others and their ideas, open to dialogue and the free exchange of opinions (. . .)" (art. 5). Thus, it seems evident that the school should assume the role as a builder of a fair, free, and responsible society for equal education of men and women.

Apparently, the school seems to respect gender equality; when scrutinized, though, the stereotyped representations of the subjects of the school community and the reproduction of sexual discrimination through curricula, organization, and even the physical structures of the school are perceived. Social representations are beliefs expressed in homogeneous discourses, which allow us to see how groups construct their conceptual frameworks and how these reflect the group. There is a wide variety of social representations from those shared by the whole society to those shared by subsystems.

Social roles are behaviors and attitudes (not just images) influenced by stereotypes. A social role is a set of behaviors and attitudes an individual displays, which results from their socialization and social status and position. It corresponds to the expectations of an individual toward society and of society toward the individual. Social roles are gendered or gender-specific when they are specific and unequal for men and women simply because they are gender roles.

Today, the logic of social–gender roles is incompatible with the recognition of human rights and democratic states based on the rule of law, as the two halves of humanity (men and women) have equal rights and responsibilities in the public and private spheres.

Language, like any other social construction and practice, comes to us marked by history and power structures. In everyday language, it is common to use the masculine to designate the masculine and feminine genders together, even though the feminine is morphologically distinct. Most forms essential to administrative life that are widely used use the masculine to designate a man and a woman. Professions and positions of prestige or power are, at least in their official version, designated as masculine, and there are even women who, exercising these professions or positions, refuse to be feminized to ensure that the social valuation they carry is not negatively affected, thus diminishing their own value as people who have attained them, overcoming gender barriers beyond the general ones. The masculine or feminine designation of some professions translates to the segregation of the labor market.

The plurals are always constructed in the masculine form as long as a man is included, regardless of the number of women present. It is accepted without difficulty that the masculine "encompasses" the feminine.

This is the case with the use of the expression "Man" (with a capital letter) as a synonym for "Humanity," identifying men with the universality of human beings (i.e., the part with the value of the whole, the linguistic fiction that the masculine is, besides itself, also neutral). The option for the masculine gender not only induces the concealment and invisibility of the feminine gender but also disrespects the identity of women who recognize themselves as such to be treated as men, as they would recognize themselves if they were treated as women. However, in stark contrast, the use of the expression "the Woman" (with a capital letter) leads back to unifying maternity and is a reductive sign of the diversity of women, which is as vast as the diversity of men.

The way language has incorporated the expressions "men" and "women" is a clear example of how it can be a factor in the reproduction of gender inequality, hence the importance of raising public awareness, particularly through training, which plays a decisive role in this area.

It is important, as already mentioned, to invest in inclusive language, and it is necessary to learn it from the school benches. Gender equality is fundamental for the construction of an inclusive society. It is urgent and necessary to train and capacitate young people in new and renewed skills and knowledge—lifelong learning—training them for values such as democracy, tolerance, respect for diversity, human rights, peace, and equality. The education system is key to training young people and must be renewed given the concept of coeducation. Further, it must be transversal in all areas of the school process: acquisition of knowledge, pedagogical dynamics, and institutional culture.

The introduction at all levels of the education system (i.e., at the curriculum level) and areas of life and knowledge traditionally associated with women, such as those related to care (children, the elderly) or maintenance (generally identified with the domestic sphere), could contribute decisively to a profound change in gender relations.

In this whole process, we cannot forget the various educational agents, as their professional training is important for the integration of the theme and the practice of equal gender opportunities in the curricula. Moreover, we must focus on the training of the same agents such that the teaching spaces do not reproduce stereotypes and prejudices but fight all kinds of prejudices, whether regarding sex, race or ethnicity, color, culture, sexual orientation, gender identity, or generation. This is fundamental for the construction of a more egalitarian society, where professions considered female are valued, with less inequality between wages and uniform access to education for women in all its diversity.

After this reflection, the important role of the education system in society is evident, as it is among the main spaces of socialization, formation, and dissemination of social values. If schools can contribute to the formation of critical and reflective subjects, helping overcome prejudices and oppression, they can also reinforce inequalities, such as the sexual division of knowledge, and reinforce stereotypes and prejudices.

2.3. Education, Gender, and Numbers

In Portugal, as in other countries that are part of the Organization for Economic Cooperation and Development, there is a scenario of gender inequality in education. Men and women invert their positions, with men being at a disadvantage regarding school performance, retention, school dropout, low qualifications, and precarious and early insertion in the labor market. According to Wall et al. (2016, p. 82), "men have mostly primary and secondary education and a lower proportion of graduates."

Although early school leaving has decreased over time, it remains significant, particularly among boys. The influence of gender on students' performance is also notorious, as it is differentiated according to gender in mathematics and reading tests: boys perform better in the former and girls in the latter. Even so, this disparity has evolved to the detriment of boys, whose performance has worsened in

the reading/Portuguese tests relative to girls, who perform increasingly better in mathematics tests (National Examination Jury 2016).[1]

In technical courses and at university, the influence of gender stereotypes on students' vocational/professional choices is persistent. Men choose courses related to engineering, industry, and transport and are underrepresented in the areas of social and health sciences, civil protection, languages, and humanities. The proportion of male higher education students or graduates has been systematically lower than that of females in polytechnic and university courses. Interestingly, this is a reversal from 40/50 years ago: "In 1978 men accounted for 58% of the student population in higher education and in 2015 they made up less than half (46%) of that population. But the disparity is more pronounced when looking at completion of higher education. In 2015 only 23.3% of men (relative to 40.1% of women) aged between 30 and 34 had higher education qualifications" (Wall et al. 2016, p. 83).

After all this analysis, it is important to mention that the school is a strongly feminized context. Teaching and non-teaching staff at different levels of education are mostly female. Similarly, the skills, attributes, and behaviors informally associated with education tend to correspond to the gender stereotypes attributed to women: dependence, imitation, and conformity to the school rules.

The last census in 2011 (INE 2011) revealed that the population up to 40 years of age had mostly secondary or higher education, and those above 40 had basic education. The older population (75+ years) stood out with a lower proportion of men with no level of education or instruction and a higher proportion of men with secondary and higher education. However, in the younger population (15–19 years), a lower proportion of men had secondary education, and a higher proportion of men had basic education. This differentiation leads to the fact that more than a third of boys (35%) in the 15–19 age group were in primary education in 2011, relative to a quarter (25%) of girls (Wall et al. 2016). Thus, despite the major changes observed in the schooling of the Portuguese population (given the democratization of education and advances in compulsory schooling), the gender inequality that previously weighed on women now weighs on men.

3. Sustainable Development Goals

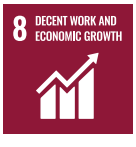
In 2015, the 2030 Agenda was defined, comprising 17 Sustainable Development Goals (SDGs) (see Figure 1). This agenda addresses various dimensions of sustainable development (social, economic, and environmental) and promotes peace, justice, and effective institutions. The SDGs are based on the progress and lessons learned with the eight Millennium Development Goals, established between 2000 and 2015, and are the result of the joint work of governments and citizens worldwide. The 2030 Agenda and the 17 SDGs are the common vision for humanity, a contract between world leaders and people, and are "a list of things to do on behalf of people and the planet." The SDGs are as follows:

However, we are interested here in reflecting on Objectives 1, 4, 5, 8, 10, and 16 (see Table 1); that is, eradicating poverty (SDG1); quality education (SDG4); gender equality (SDG5); decent work and economic growth (SDG8); reducing inequalities (SDG10); and achieving peace, justice, and effective institutions (SDG16). Articulating

[1] In 2016 (March 4th), the JNE Regulation was approved by Normative Order No. 1-D/2016.

the 20 principles of the European Pillar for Social Rights and with the national strategic objectives, we can observe the following.

Table 1. Sustainable Development Goals, social rights, and national strategic goals.

Main Objectives Sustainable Development	Main Social Rights	National Strategic Objectives
	Equal opportunities Equality between men and women	OE7 (PAIMH)[2]—Integrate the promotion of Equality between Women and Men in the fight against poverty and social exclusion
	Equal opportunities Equality between men and women Fair wages for a decent standard of living	OE3 (PAIMH)—Guarantee the conditions for education and training free of gender stereotypes
  	Equal opportunities Equality between men and women Fair wages for a decent standard of living It is Education, training, and lifelong learning	SO1 (PAIMH)—Ensure governance that integrates the fight against discrimination based on sex and the promotion of Equality between women and men in policies and actions, at all levels of public administration; SO2 (PAIMH)- Ensure the conditions for full and equal participation of women and men in the labor market and professional activity;
 	social protection protection of children Equal opportunities	SO2 (PAVMVD)[3] Support and protect—expand and consolidate the intervention OE2 (PAOIEC)[4] Ensure mainstreaming of OIEC issues OE3 (PAOIEC) Combating discrimination based on the OIEC and preventing and combating all forms of violence against LGBTI people in public and private life

Source: Table by author.

Figure 1. Sustainable Development Goals. Source: United Nations Regional Information Centre for Western Europe (n.d.).

From Table 1, we can see some of the efforts that have been made by countries on matters regarding equal opportunities, gender equality, education, training and lifelong learning, fair wages, and social and child protection. Educating and working toward this goal is how to achieve sustainable economic growth, with more and better jobs and greater social cohesion.

4. Conclusions

In theory, equality between women and men in a democratic constitutional state is not even an option. It is a condition of the regime. Moreover, in the world of work, it is a condition for exercising economic activity within a legal framework of healthy competitiveness, as with the payment of taxes, social security contributions, and environmental preservation.

Gender equality is based on the assumption that all human beings are free to develop their capabilities and make choices without the limitations set by socially stereotyped gender roles. According to the Council of Europe, it is an absolute criterion of democracy and the exercise of citizenship.

In the same context, gender mainstreaming in policies pertains to the integration of the different needs and expectations, roles, and responsibilities of women and men. The focus is on gender relations and the different characteristics of women and men, recognizing the need to transform women's and men's roles.

Discussing gender issues in education means reflecting on relationships in everyday educational practices and deconstructing and rediscovering meanings. It means questioning preconceived concepts and determinations that subtly permeate our practices. To discuss gender relations is, above all, to stir up and attribute new meanings to our life history (Finco 2003).

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2 Action Plan for Equality between Women and Men (PAIMH).

3 Action plan for preventing and combating violence against women and domestic violence (PAVMVD).

4 Action plan to combat discrimination based on sexual orientation, gender identity and expression, and sexual characteristics (PAOIEC).

Gender equality remains a challenge for this decade and an area of important intervention in various fields. It is important to look at gender equality at the following levels:

- Transversality—a high-priority issue that concerns everyone, men and women, which should be present in all areas of intervention and sectorial policies;
- Economic—access to employment; lifelong learning; opportunities for professional improvement; and support for entrepreneurship;
- Political—increasing the number of women at the political decision-making level;
- Education and training—combating the gender prejudice present in school manuals; the selection for professional training courses; at the level of the National Classification of Professions and School and Professional Guidance; at the level of the number of graduates and those attending technical and professional courses; and at the level of school drop-outs and retentions;
- Investing in female entrepreneurship and access to science, innovation, and technology—fundamental areas for our economic development that are traditionally more accessible to men (in the traditional division of typically feminine and masculine professions, breaking with this division can motivate the search for and integration of women into the relevant professional fields).

Only by so doing will we achieve sustainable economic growth, with more and better jobs and greater social cohesion. This is a challenge that we must present to the entire Portuguese population as a goal to be achieved in the next decade, making Portugal a reference in the area of gender equality, thus giving all people the same opportunities.

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7. Parental Education for Gender Equality in the Family

Sofia Bergano

Abstract: Gender equality in the family and gender equality in the workplace are interrelated dimensions, because in people's lives, the time of each person (men and women) is differentially distributed between the investment they make in their profession or career and in their personal and family life. This article aims to analyze the confluence of these domains in the daily lives of women and men, and, in this vein, we propose the analysis and interpretation of statistical data from different sources regarding indicators on the professional, family and parental life of men and women. To analyze and interpret this statistical information, we resorted to theoretical foundations in the field of women's, gender and feminist studies. The analysis of the data leads to the conclusion that, in daily life, patterns of time distribution according to sex remain which, in some way, perpetuate and legitimize gender differences in the assumption of family responsibilities.

1. Introduction

This study reflects on the promotion of gender equality from the analysis of parental responsibility, the sharing of tasks and attributions that constitute the organization of personal and family life, and results from a challenge from the "Series of Conferences on Gender Equality: A challenge for the decade," coordinated by Professor Rui Nunes, which took place in Bragança on 29 April 2017. This study stems from the systematic organization of the information shared in the relevant context to raise awareness of the path Portuguese society must still take for the equality of opportunities between men and women to become effective.

The promotion of gender equality in the family intersects with promoting gender equality in the work context because, in people's lives, these dimensions are not separable insofar as the time of each one (men and women) is differentially distributed between the investment they make in their profession or career and their personal and family life. Thus, to analyze the confluence of these domains in the daily lives of women and men, this study proposes the analysis and interpretation of statistical data from different sources, such as The National Survey on Time Use (Perista et al. 2016), the Portuguese National Statistics Institute, and the Pordata Portal. The study draws from theoretical foundations in the field of women, gender, and feminist studies to analyze and interpret this statistical information.

Accordingly, different matrices of reflection that involve different aspects of daily life and the discussion that somewhat perpetuates and legitimizes gender differences in the assumption of family responsibilities were observed. Hence, to give substance to this purpose, the issue of parenting is fundamental, along with parental functions and the diversity of the family constitution. Further, the issue of reconciling personal and family life emphasizes the professional aspirations of women and men, strategies for reconciling parenthood with careers, social support for the family, and the analysis of its beneficiaries. Finally, the family will be analyzed as a gendered space and a socializing instance that has, over time, constituted a space for the transmission of gender stereotypes, which, by necessity, must become

a space of equality between women and men, boys and girls, and young people of both sexes.

2. To Think About Parenthood

The parenthood concept has recently entered public discussions, highlighting the notion that parental responsibility and rights are independent of the sex of the parents or their substitutes. Progressively, some designations traditionally associated with motherhood or fatherhood have been replaced with parenthood, which is intended to be gender-neutral and emphasize that caring for, educating, and ensuring the well-being and development of the child is the responsibility of fathers and mothers (biological or adoptive), independent of the sex of the parent.

In the last four decades, social and economic transformations have influenced how women's (and also men's) social roles are interpreted in the family context. Women's entry into the labor market is often spoken of as a milestone in transforming the roles played by fathers in the family. However, it is necessary to understand that, in some social classes, women have always worked outside the home, significantly contributing to ensuring the livelihood of the family. This fact does not mean they were not primarily responsible for caring for the tasks inherent in family life at home. Thus, it may be more prudent to note that what has truly changed in recent decades (for some women) is the way they interpret their participation in the public sphere and the meanings they attribute to that participation. Notably, nowadays, women perceive participation in the world of work as a space for personal affirmation in which they invest and, hence, expect rewards. People began to demand a career and not just a job; for some women, especially those with more education, personal investment in work has been transformed in that it is not merely a supplement to the family's disposable income but an area of personal affirmation that should bring with it recognition and social prestige, as in the case of men.

Another factor that has transformed the way the family is interpreted regards a set of social changes related to the constitution of the family. Reconstructed families, single-parent families, and same-parent families, among other somewhat fluid households that fulfill the social functions associated with more traditional families (i.e., biparental and heteroparental families) are increasingly frequent and visible. If this diversity is presented as evidence, it is necessary to be aware that some of these forms of family organization are not exclusive to today, and what seems relatively recent is the academic interest in non-normative family organizations.

Notably, according to the data available on the Pordata (n.d.), the feminization rate of single-parent families remains high and has increased in the last two and a half decades (85.5% in 1992 and 88.1% in 2017), even though male single-parent families have achieved greater visibility than they had previously. This disproportion can be explained by the idea that mothers fulfill parental functions better than men. Hence, Marinho (2014, p. 183) notes that, in recent decades in Portuguese society, the high number of female single-parent families stems "(. . .) from the predominance of 'guard with maternal residence' (. . .), that is, from the principle that after birth (. . .) and after a marital breakdown (separation or divorce) children must be given to the exclusive care of their mothers (. . .)." This notion seems to illustrate the maternalism and essentialist vision of the care to be provided to children. As per Marinho (2014), this effect is attenuated as the children increase in age.

Between what has changed and what remains in the structure of households, it is important to note that research into the different possible family configurations has had a non-negligible effect regarding their social visibility and the progressive denaturalization of the association of the sex of the parents (or their substitutes) to their parental roles and functions. These phenomena contribute to how the relationships between the different elements of families and the attributions differentially attributed to them are perceived. Evidently, these changes do not occur in all spheres of society simultaneously. Moreover, if, in the context of the scientific community, there is increasing evidence that parental functions are ensured effectively by different family types and different adults regardless of their sex, this is not always the case in society at large. Thus, it is urgent for the promotion of gender equality to become a field of intervention, where everyone should be invited to participate. Hence, research in these areas can furnish relevant contributions.

It is essential to replace discussions that propagate the idea that the simultaneous presence of a mother and a father is necessary for a child to grow up happy and healthy, as this view is based on the conception that motherhood and fatherhood imply mutually exclusive tasks and abilities, which are stereotyped with regard to gender. In this model, motherhood and fatherhood would correspond to different social roles that are irrevocably linked to the biological sex of the parent. From the perspective of research on parenting, an increasing number of studies indicate that satisfactory parenting is not necessarily associated with heteroparental and biparental families (cf. Gato and Fontaine 2011).

In the analysis of parenting, considering the noted transformations, Aboim (2007) identifies two relevant signs of change in Portuguese society: (1) the abandonment of the ideal of man only as a provider for the home, and (2) increased male participation at home and with children. However, Aboim (2007) also notes that maternalistic ideals remain present, ultimately supporting and maintaining more traditional gender conceptions in the division of family tasks and responsibilities. These ideals are manifested in the strong association of women (men) with the world of reproduction (production). The prevalence of the ideal of a mother–woman is an important challenge in terms of promoting effective gender equality, as the development of the ideal of a professional and independent woman can conflict and induce great normative ambivalence in women and families.

3. Conciliation of Family and Professional Life

The conception that the mother is irreplaceable in caring for the children carries with it a symbolic burden that constrains many women in terms of their professional career investment, giving rise to an ambivalence concerning reconciling motherhood with investing in a career. One conclusion consistent with this notion was drawn in a more recent study involving young university students of both sexes (Coelho and Casaca 2017, p. 71): "the ideology that it is essentially women who should ensure the functions of caring and, simultaneously, professional responsibilities." This issue has implications for family life and women's equal participation in the labor market.

The analysis of how women and men distribute their time between paid work and tasks associated with the family is an important resource for understanding how gender inequality goes beyond family boundaries and "spreads" to public spheres; that is, in the universe, which configures one of the dimensions of people's lives on which it is intended to reflect. Hence, in 2015, data from the Portuguese National

Survey on Time Use (Perista et al. 2016) was employed to analyze how men and women distribute their working time between paid work and unpaid work, as in Table 1.

Table 1. Average time (hours and minutes) of work (paid and unpaid per working day) of employed people by sex.

Time of Work	Men	Women
Time of paid work	9:02	8:35
Time of unpaid work	2:37	4:17
Total time of work	11:39	12:52

Source: Author's compilation based on data from Source: Author's compilation based on data from Perista et al. (2016).

From the data, the average amount of time devoted to daily tasks by men and women reveals a considerable average difference, which is especially relevant when it comes to unpaid work. Unpaid work is associated with family tasks, warranting an analysis of two fundamental aspects of the organization of family life that are deeply related to allow them to be reconciled with people's professional lives. These aspects include (1) the distribution of household chores and the time spent on them, including all the tasks that are performed, regardless of whether households have dependent children, such as cleaning the house, preparing meals, or doing laundry (although having children in the family can make these activities more time-consuming); and (2) the distribution of tasks associated with parental functions such as feeding, bathing, helping with schoolwork, playing, reading stories, and accompanying the child(ren) to extracurricular activities.

It is also pertinent to analyze the distribution of routine domestic tasks by sex and the time spent on them. Accordingly, Table 2 reveals a remarkable asymmetry per sex.

Table 2. Average time (minutes) spent carrying out routine household chores (per working day) by sex.

Household Chores	Men	Women
Doing laundry	19	33
Cleaning the house	27	53
Preparing meals	47	65

Source: Author's compilation based on data from Perista et al. (2016).

Regarding families with children, the main caregivers of the children are women; this situation is even more evident for children under the age of three (Table 3).

In families with children, men and women dedicate different average amounts of time to providing direct care to children, with men spending approximately 2 h and 14 min on this, whereas women spend 3 h and 6 min (these values are based on the last working day before the completion of the survey). The authors of the reference study indicate that these differences are present regardless of the typology of the task associated with the act of caring. Whether care takes the form of feeding; bathing; accompanying in school tasks; reading, playing, and talking; or even accompanying

children to other activities, the participation of women is always greater than that of men. Hence, women are more dedicated to tasks associated with childcare and participate in these tasks for a longer amount of time per day.

Table 3. Adults in the household who care for children, according to sex (%).

Who Takes Care of the Children?	Children Under 3 Years Old	Children Between 3 and 5 Years Old
Only one adult female person	83.2	69.2
Only one adult male person	2.6	8.2
Two adult household members of both sexes	14.2	22.2

Source: Author's compilation based on data from Perista et al. (2016).

Following the data on the articulation of professional life with activities related to the family, it is useful to consider the data on some public policies that provide for the conciliation of the profession with parental responsibilities. Indeed, the analysis of data on Social Security parental leave is warranted.

Table 4 indicates the number of beneficiaries of parental leave, regardless of the duration of the leave to which it refers. The data indicates that, despite the legal changes to support parenting that provide for the mandatory enjoyment of 15 days of leave by the male parent, there remains no equivalent distribution of initial parental leave among parents.[1]

Table 4. Beneficiaries of the initial social security parental leave (number and percentage) by sex.

Year	Total	Men	Women	Men%	Women%
2017	165,824	74,699	91,125	45.05	54.95
2016	170,023	76,102	93,921	44.76	55.24
2015	161,505	71,377	90,128	44.19	55.81
2014	150,466	65,344	85,132	43.43	56.58
2013	150,886	67,047	88,839	44.44	58.88

Source: Author's compilation based on data from Instituto Nacional de Estatística (INE) (2018a).

Analyzing the data on extended parental leave (not mandatory) verifies that the support is enjoyed by far fewer people because it has consequences with regard to a reduction in disposable income. However, a comparative analysis of the number of extended parental leaves taken by men and women is warranted (Table 5).

[1] The rights associated with parenthood are regulated by Law no. 120/2015, of 1 September, which makes the ninth amendment to the Labor Code approved by Law no. 7/2009, of 12 February, reinforcing maternity and paternity rights, the third amendment to Decree-Law no. 91/2009, of 9 April, and the second amendment to Decree-Law no. 89/2009, of 9 April.

Table 5. Beneficiaries of social security extended parental leave (number), by sex.

Year	Total	Men	Women	Men%	Women%
2017	8820	787	8033	8.92	91.08
2016	6952	657	6295	9.45	90.55
2015	4944	538	4406	10.88	89.12
2014	3458	376	3082	10.87	89.13
2013	2749	386	2363	14.04	85.96

Source: Author's compilation based on data from Instituto Nacional de Estatística (INE) (2018b).

The data shows that, in absolute terms, increased numbers of families are resorting to extended parental leave. However, considering the comparison between men and women, the huge imbalance according to the sex of the beneficiary parent is evident. There is a tendency toward a relative increase in the number of women enjoying this social benefit.

The data presented accounts for the number of leaves taken, which, ultimately, does not translate into the time mothers and fathers dedicate to their families. Therefore, it is warranted to observe the duration, in days, of such leaves. Hence, to facilitate the data reading, it was considered pertinent to present the relative weight of days of leave taken by women and men (Table 6).

Table 6. Duration of Social Security-extended parental leave (days) by sex.

Year	Total	Men	Women	Men%	Women%
2017	566,604	46,084	520,520	8.13	91.87
2016	488,560	38,674	409,886	7.92	83.90
2015	320,683	32,456	288,227	10.12	89.88
2014	224,631	22,451	202,180	9.99	90.01
2013	181,394	24,257	157,137	13.37	86.63

Source: Author's compilation based on data from Instituto Nacional de Estatística (INE) (2018c).

Comparing the days taken (within the scope of extended parental leave) reveals that women are the parental figures that most benefit from this type of family support. Once again, it can be interpreted as an indicator that it is women who, even with an active professional life, ultimately take on the task of caring for their children (babies).

However, parental responsibilities do not end with the birth of children; they extend over time. Therefore, the analysis of the data on days of absence taken to care for children in recent years is warranted (Table 7).

Table 7. Days of absence related to childcare, by sex (annual).

Year	Total	Men	Women	Men%	Women%
2017	945,099	98,832	846,267	10.46	89.54
2016	872,077	85,289	786,788	9.78	90.22
2015	810,303	75,952	734,351	9.37	90.63
2014	680,824	60,632	620,192	8.91	91.09
2013	629,821	49,753	580,068	7.90	92.10

Source: Author's compilation based on data from Instituto Nacional de Estatística (INE) (2018d).

As can be observed, the tendency toward women taking care of children continues, and, despite the perception that men's participation in these tasks is increasing, it appears that participation remains very uneven. The data presented concur with other investigations that address issues of gender difference in the family (Bergano 2012; Múrias 2015), indicating that it is women who invest the most time and dedication in issues related to the care and education of children. Several studies also note that women legitimize this inequality in the family by resorting to arguments that justify them because there are attributes inherent to motherhood and feminine characteristics in the family, such as empathy, sensitivity, the ability to take care of others, and house organization skills.

Saavedra and Taveira (2007) revealed three categories of people (of both sexes) who assign different values to the domains of family and work: the double profile, which includes people who attach equal importance to family and professional roles; and the "work profile" and the "family profile," made up of people who value their profession or family more, respectively. Apparently, more women (men) were in the "family profile" ("work profile"). Among the group of women, an equivalent distribution was found between the "family profile" and the "double profile" and a very reduced representation in the "work profile" (Cinamon and Rich 2002), which naturally highlights a differentiated articulation between the family and paid work for people of different sexes.

These observations, affected by culturally defined conceptions of the roles of men and women in family contexts, have implications for how women perceive the reconciliation of professional and family life. Thus, according to Bergano (2012), women at different stages of their lives indicated that issues associated with reconciling family and work are more often posed to women than to men. In most cases, women must find strategies that make this conciliation possible. Regarding the strategies and operationalization of reconciling family and professional life, the diversity of answers is greater, as the economic condition of the household seems to influence the type of strategy used; that is, the use of external services to respond to situations (e.g., paid external domestic work), or the use of social support networks (especially centered on women in the family, as is the case of their mothers-in-law, grandmothers, sisters, or aunts).

Moreover, different women (from different socio-cultural conditions and ages) consider that disinvestment in their careers, extending the working day into the night, and reorganizing their professional lives are strategies to which they resort or plan to appeal. Before concluding on the articulation of personal and family life with professional life, it is pertinent to mention that, in the responses of the research participants, reference to the reorganization of the professional life of male partners or parents is completely absent.

4. The Family as a Space of Inequality

The family is recognized as the social institution that bears the fundamental responsibility for the education of children and young people. As the main (and first) agent of education, it comprises an important space for the reproduction of the beliefs of adults therein regarding masculinity and femininity. Most fathers and mothers, as educators, are concerned with transmitting to their sons and daughters the values and attitudes they consider appropriate for them to become happy and successful adults. This cultural heritage conveys culturally defined ideas about masculinity and

femininity, which sometimes represent stereotyped views about the characteristics of boys and girls or men and women.

Hence, family upbringing will be strongly influenced by the parents' ideals of men and women, and this ideal will guide the education of boys and girls and the interactions established between the different elements of the family. Thus, Vieira (2007, p. 18) mentions that, despite the resistance to changing convictions about the characteristics considered specific to each sex, some factors such as "the improvement of living conditions, or access to education, have progressively associated with a liberalization of the ideas of fathers and mothers about the education of their sons and daughters." Even so, Vieira (2007) adds that, despite these changes, the treatment of boys and girls, by fathers and mothers, tends to be differentiated.

In the analysis of the family as a space of gender inequality, it is important to refer to the complexity inherent to the learning that takes place in this context and give special emphasis to the dynamics of the relationship established between the different elements of the family. Gender learning in the family context takes place in different ways; for example, through the differential interaction that adults establish with children, playful and leisure activities to which children and young people are directed, the different expectations and evaluation of behaviors according to their sex, the differentiation of girls and boys regarding empowerment processes and, not least, the example set by parents in the distribution of responsibilities and tasks associated with the family and investment in a professional career.

In the family education context, many stereotyped ideas are used to interpret and justify the characteristics and behavior of children. In fact, certain behaviors are ascertained according to the sex of the child or young person. Accordingly, Vieira's (2007) study on pregnant women notes that some pregnant mothers associate the movements of the fetus with knowing its sex; that is, "vigorous and strong" movements for male babies and "soft" or "not excessively active" movements for female babies (Beal 1994). As there are no real differences between the movements of male and female fetuses, this difference in the mothers' perception suggests the presence of the stereotyped idea of serenity in girls and energy and vigor in boys. It is just one example of the differential interpretation of the behavior and characteristics of daughters and sons that begins before birth and accompanies their entire development process.

The differential treatment extends to all of childhood; it is present in the daily lives of families, such as the purchase of toys for girls and boys, the unequal assignment of tasks, or even the different perceptions of personality characteristics of children and young people in strong association with the sex of each one. Assignment of tasks at home is also differentiated per sex, as fathers and mothers ask boys and girls and young men and women to participate in different domestic tasks. Throughout their development and through this differentiation, children and young people experience different situations that may promote different skills. Hence, a complex learning process is constructed based on sexual differences, consolidating gender differences.

Participation in games and domestic activities seems to encourage girls to imitate the mother's role in taking on domestic responsibilities (i.e., taking care of the family). Boys seem to be more encouraged to increase their contact with the outside world, allowing them to interact with their peers, which is more continuous and

less supervised by adults. Boys and girls grow up in this difference, initiated in the processes of family education, thereby affecting their adult life as men and women.

Therefore, childhood and adolescence constitute, within the family space, a time of learning about the tasks performed by men and women which, in many cases, reproduce the existing asymmetries regarding the distribution of tasks according to sex. The education of sons and daughters seems to be differentiated, which is not independent of the stereotyped view of feminine and masculine on the part of the parents. In fact, one does not educate beyond a framework of adjusted values and behaviors regarding gender. Mothers and fathers bring with them a heritage of knowledge that guides their educational tasks. This knowledge underlies its gender performativity and constitutes instrumental knowledge placed at the service of the education of children and young people. However, unintentionally, such knowledge ultimately influences how their sons and daughters perceive and act. The development process, which allows children and young people to become men or women, occurs in a context in which men and women exist and act.

In this educational task, the interactions of the parents with their sons and daughters are important, but the interactions of the parents with each other are also relevant. The characteristics of these interactions will be part of the repertoire of gender behaviors available to children and young people who observe and interpret them in the consolidation of their gender identity and the development of attributes and display of behaviors they believe to be proper to one sex or the other. Hence, it is important to analyze how fathers and mothers play their roles, how they share family tasks and responsibilities, and the couple's (or individual) strategies for reconciling family life with professional life.

5. Final Notes on the Ethical Commitment to Gender Equality

The data presented point to family socialization marked by traditional values regarding family and parental roles and responsibilities. This fact warrants the need to reflect together on the foundations of the noted values and how contemporary societies perpetuate them uncritically.

Portuguese society has followed a path of remarkable gains in promoting gender equality, such as public policies that seek to ensure equal opportunities. However, there remains much room for improvement concerning the necessary changes in the lives of men and women. Gender inequality in the family operates in the sphere of private life but must effectively become a public domain issue in that its effects compromise the most basic citizenship rights, such as equality and non-discrimination. Although society recognizes women's effective right to work and a career, women's entry into the public sphere has not represented an "equivalent male entry into the private sphere" (Aboim 2006, p. 55).

It is also relevant to note that research on reconciling work and family, even using samples or groups of younger participants, highlights results indicating that women penalize their professional life or reorganize their expectations of investment in their career when considering maternity projects (Saavedra and Taveira 2007; Lima and Neves 2011; Bergano 2012; Coelho and Casaca 2017).

Overall, it is necessary to invest in a concerted way to promote gender equality aimed at young adults and adults of working age, as it is essential to change family patterns that contribute to inequality between people. Moreover, for this purpose, all

adult educators who work in formal, non-formal, and informal education or training contexts must be summoned.

In this sense, a serious investment in parental education in this area is justified. This should begin with monitoring pregnancy in health centers and extending through parental education programs in schools and communities. In Portugal, there are didactic materials that address these issues at the family and school levels. CIG publications, the Guides on Citizenship and Gender Equality (e.g., Pinto et al. 2010; Vieira 2017) or the Coeducation Notebooks (e.g., Neto et al. 1999; Abranches and Carvalho 1999), and works especially aimed at the family (Vieira 2007) are good examples. However, its dissemination and impact would be greater with parents who are not yet aware of these issues, such as Parents' Associations; institutions dedicated to community education, such as Private Institutions of Social Solidarity; and associations of local development. These organizations normally have privileged contact with families at risk of social exclusion or belonging to ethnic minorities—situations that, combined with gender inequalities, can increase the degree of discrimination to which women (and men) are subject.

Starting this process of parental education in the primary healthcare network and maternal and child health programs allows for the deconstruction of some myths that induce mothers to assume the role of irreplaceable caregiver, promoting the participation of members of the couple in these tasks. This process may translate into an effective sharing of tasks between the parents and the reduction of social pressure on the mother regarding reconciling professional and family life. Further, it would be an unrepeatable opportunity to encourage men to enjoy early contact with their sons and daughters, enriching their parenting experience.

Regarding labor inequality, educational tasks are essential in the professional training of workers and the training of employers. In these contexts, issues such as wage discrimination and inequality in access to leadership positions, labor legislation, and violence in the workplace must be addressed. Meanwhile, the gender stereotypes that legitimize these asymmetries must be deconstructed and the legal mechanisms that already exist in our country to combat them must be made known. The incorporation of these themes in initial professional training or professional updating in a work context allows men and women to be aware of the presence of a logic of inequality that tends, but not exclusively, to be more penalizing for women.

This education–training work demands that training professionals develop the ability to think critically about their gender stereotypes, many of which are consolidated through fundamentally androcentric scientific paradigms and somewhat out of phase with the current social realities, where men and women face new challenges that are often difficult to reconcile with old ways of perceiving family roles and attributions.

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8. Gender Equality in the Digital Era

Jasna Karacic-Zanetti and Rui Nunes

Abstract: Gender equality is the principle of equal rights, opportunities, and treatment for all individuals, regardless of gender. This review explores how the digital era impacts gender equality, discussing opportunities, challenges, and policy implications for achieving gender equality in the digital context. The digital era presents opportunities for gender equality, such as improved access to education, economic empowerment, and political engagement. However, challenges like the digital gender divide, skills gaps, online harassment, and gender bias in technology persist. Policy implications include bridging the digital divide, promoting digital skills development, supporting women's entrepreneurship, addressing gender bias, combating online harassment, and ensuring women's leadership and privacy protection. Achieving gender equality in the digital era requires collaboration between governments, civil society, and the private sector. Policy interventions, education and training investments, awareness campaigns, and research are needed to create an inclusive and equitable digital landscape. Comprehensive policies addressing access, skills, representation, safety, and privacy are crucial for promoting gender equality in the digital era. Sustained commitment and resources are necessary to build a fair and inclusive digital society.

1. Introduction

The contemporary global landscape is witnessing an escalating demand for gender equality as societies acknowledge the significance of endorsing impartial rights and opportunities for all genders, endeavoring to foster a more comprehensive and equitable future (Smith and Sinkford 2022), which is an elemental principle advocating parity in rights, opportunities, and equitable treatment among individuals, regardless of their gender identity (European Union 2019). Given the transformative impact of the digital era, where technology plays a central role in shaping various facets of human existence, a comprehensive exploration of its implications for gender equality is indispensable. This chapter undertakes a thorough analysis of the opportunities, challenges, and policy ramifications that emanate from the convergence of gender equality and the digital milieu. Accordingly, we aim to pave the way toward the establishment of a digital landscape that is simpler and more all-encompassing.

There are growing appeals for gender equality, as societies worldwide recognize the importance of promoting equal rights and opportunities for all genders, striving for a more inclusive and fair future (European Commission 2019).

Theories expounding gender equality primarily focus on elucidating historical and cultural factors that influence gender roles and stereotypes and elucidate the mechanisms that perpetuate gender-based discrimination and bias within societies (Djerf-Pierre and Edström 2020). The primary objective of these theories is to illuminate the barriers impeding genuine progress toward gender equality and provide valuable insights into effective strategies to dismantle such impediments. Furthermore, these theories explore the manifold ways in which gender equality contributes to positive societal outcomes, including economic advancement, social cohesion, and individual empowerment (Sen 1999).

2. Opportunities in the Digital Era

The digital era has created numerous opportunities for promoting gender equality. Notably, a significant advantage lies in the realm of improved access to education (Kataeva et al. 2023). Online platforms and digital tools have emerged as potent facilitators, particularly benefiting women and girls in marginalized communities by surmounting traditional barriers to education. E-learning programs and online courses offer flexible learning options, empowering women to access knowledge and acquire the skills essential for their personal and professional development (Masic 2008).

Furthermore, the digital era has opened up pathways for economic empowerment. Online platforms and digital marketplaces have become instrumental in fostering women's participation in the digital economy. This newfound engagement can lead to financial independence and the ability to surmount conventional gender-based barriers that are prevalent in traditional workplaces (Lwamba et al. 2022). Additionally, the digital sphere offers an enabling environment for entrepreneurship, providing women with opportunities to establish their own businesses and partake in entrepreneurial pursuits.

Political engagement is another area in which the digital era has revealed opportunities for gender equality. Social media platforms and online communities have emerged as spaces where women can assert their voices, advocate for their rights, and actively engage in political discussion. Online activism has proven to be a potent tool for promoting gender equality and catalyzing impactful social change.

For example, through her unwavering dedication to environmental advocacy, Greta Thunberg (2018) has become a global icon for climate action and underscored the potential of online activism to amplify urgent issues like gender equality. Greta's journey vividly showcases how a single voice, amplified by the Internet and social media, can ignite widespread awareness, mobilize passionate communities, and challenge the status quo. Her ability to harness online platforms to promote gender equality serves as an inspiring example of how today's digital era empowers individuals to transcend geographical boundaries and inspire meaningful change on a global scale (Thunberg n.d.). Many opportunities have emerged in the digital era to contribute to the advancement of gender equality. Technology's transformative influence permeates various aspects of an individual's life and offers key prospects in this domain.

- Access to education: Technology revolutionizes education by providing expansive access to knowledge and learning resources. Online platforms and e-learning tools offer flexible options that are particularly beneficial to women and girls in marginalized communities, as they surmount traditional educational barriers. Access to quality educational materials, participation in online courses, and engagement in distance learning programs empower individuals with valuable knowledge and skills. Technology is likely to become the most powerful instrument for achieving full gender equality in the future (UNESCO 2014).
- Economic empowerment: The digital era has opened up new avenues for economic empowerment, especially through online platforms and digital marketplaces. Women can participate in the digital economy by utilizing these platforms to initiate and develop businesses, sell products or services, and access global markets. This situation can lead to financial independence, enhanced earning potential, and the ability to overcome conventional gender-based bar-

riers in the workplace. Indeed, economic opportunities for women and men remain far from true gender equality, particularly regarding access to top managerial and leadership positions (World Economic Forum 2022).

- Entrepreneurship: The digital sphere fosters an environment conducive to entrepreneurship, empowering women to establish and grow their enterprises. Online platforms and social media facilitate the showcasing of products and services, connect with a broader customer base, and engage potential clients and investors. Leveraging digital marketing tools and e-commerce platforms enables female entrepreneurs to compete more effectively with their male counterparts. However, some of these technologies, such as artificial intelligence, should be regulated at the international level because of their unethical applications (European Union 2023).
- Political engagement: The digital era expands opportunities for women's political engagement and participation. Social media platforms and online communities provide spaces in which women can express their opinions, advocate for their rights, and engage in political discourse. Online activism has emerged as a powerful instrument for advancing gender equality, driving social change, and mobilizing support for women's rights and representation. Digital transition is also a very effective way to promote the values of modern democracies and the rule of law and, therefore, ensure gender equality (Nunes 2022).

Networking and mentorship: Digital platforms facilitate networking opportunities by connecting women to like-minded individuals, mentors, and role models. Online communities, professional networking platforms, and mentorship programs provide guidance, support, and career prospects. This fosters robust professional networks and promotes advancement in the respective fields (Reeves et al. 2022).

- Work–life balance: The digital era introduces flexible work arrangements, remote work options, and digital collaboration tools, benefiting women by harmonizing personal and professional responsibilities. This flexibility allows women to pursue careers while managing family obligations, promoting work–life balance and mitigating barriers that often hinder career progression. As advocated by the Beijing Declaration and Platform for Action, advancing women's rights implies reaching a balance between familiar activities and responsibilities and the right of any woman to develop talent and capabilities at work (UN Women 1995).
- Health and well-being: Technology contributes significantly to improving women's health and well-being. Digital health platforms offer access to information, resources, and telemedicine services, ensuring that women can access healthcare and reproductive services even in remote or underserved areas. Mobile health applications and wearable devices empower women to monitor and manage their health effectively. The healthcare sector is probably the area where digital transition and new tools, such as those derived from artificial intelligence, will have the fastest application, namely regarding the access and storage of health data and their availability in a supranational space (Karacic Zanetti and Nunes 2023).

The confluence of technology and gender equality creates a transformative landscape with the potential to propel society toward a more equitable and inclusive future. The digital era offers many opportunities to promote gender equality. Improved access to education, economic empowerment, entrepreneurship, politi-

cal engagement, networking, work–life balance, and health services contribute to advancing women's rights and opportunities (Kollmann et al. 2022). Embracing and harnessing these opportunities can empower women, narrow gender gaps, and create a more inclusive and equitable digital society. It is essential to address the challenges that accompany these opportunities and ensure that the benefits of the digital era are accessible to women of all backgrounds and regions.

Violence against women can also be prevented directly through social, educational, and economic empowerment, or indirectly through preventive measures that are easier to implement with artificial intelligence and sophisticated digital surveillance methods. Indeed, familiar violence in general and, specifically, violence against women are traditional challenges at the global level (United Nations 1979, 1993). However, new ICT and artificial intelligence tools could pave the way for new forms of violence that should be prevented.

3. Challenges in the Digital Era

Despite these opportunities, the digital era has brought about various challenges that hinder gender equality. The digital gender divide remains a pressing issue with disparities in access to technology and digital skills. Women, particularly those in low-income and marginalized communities, often face barriers such as a lack of infrastructure, affordability, and cultural biases that limit their access to digital resources.

Moreover, a persistent skill gap exists in the digital domain. Women are underrepresented in technology-related fields, which can impede their ability to participate fully in and benefit from the digital revolution. Addressing this gap requires targeted efforts to encourage girls and women to pursue Science, Technology, Engineering, and Mathematics (STEM) education and careers, including providing access to training programs and mentorship opportunities.

Online harassment is another significant challenge women face in the digital era. The anonymity provided by online platforms can increase cyberbullying, stalking, and other forms of harassment. It can create a hostile environment that discourages women from fully engaging in online spaces and freely expressing their views.

Gender biases in technology are another issue. From algorithmic biases to the underrepresentation of women in technology development and decision-making roles, gender biases can perpetuate inequalities in the digital realm (Qin et al. 2023). It is crucial to address these biases and ensure that technology is developed and deployed such that it is fair, inclusive, and free from discrimination. While the digital era presents numerous opportunities for gender equality, it also presents various challenges that need to be addressed. These challenges arise because of existing social, cultural, and systemic factors that affect individuals based on their gender. Understanding and addressing these challenges are crucial for achieving true gender equality in the digital context. Several critical challenges that warrant consideration are as follows:

Digital gender divide: The digital gender divide refers to the disparity in access to digital technologies and Internet usage between men and women. In many parts of the world, women face barriers such as limited infrastructure, affordability, and cultural biases that hinder their access to digital resources. This divide further exacerbates existing inequalities and limits women's ability to benefit from the digital revolution (Kurup and Underwood 2021).

Skill gap: There is a persistent skill gap in the digital domain, particularly in technology-related fields. Women are underrepresented in STEM education and careers, resulting in limited opportunities to acquire the necessary digital skills. This gap hinders women's ability to fully participate and excel in the digital economy and can perpetuate gender disparities in employment and income (Barboutidis and Stiakakis 2023).

Online harassment and abuse: The anonymity provided by online platforms can induce an increase in online harassment, cyberbullying, stalking, and other forms of abuse targeting women. Online spaces can become hostile environments that discourage women from freely expressing their views, engaging in online discussions, or participating in public platforms. Addressing online harassment and creating safe digital spaces are crucial to promoting gender equality and ensuring women's active online participation (Sølvberg et al. 2023).

Gender bias in technology: Gender bias in technology manifests in several ways. From biased algorithms and AI systems to the underrepresentation of women in technological development and decision-making roles, these biases can perpetuate inequalities in the digital realm. Biased algorithms can yield discriminatory outcomes, whereas the lack of women's representation in technology fields limits diverse perspectives and hinders inclusive decision-making (Llorens et al. 2021).

Digital violence and exploitation: The digital era has brought forth new forms of violence and exploitation, such as revenge porn, doxing, and online trafficking. Women are disproportionately targeted by these forms of digital violence, which violate their privacy and dignity and hinder their ability to fully participate in online spaces without fear of harm (Meyer et al. 2022).

Online privacy and security: Women's online privacy and security are significant concerns. With increased reliance on digital platforms and the collection of personal data, women are at risk of privacy breaches, online stalking, and unauthorized sharing of personal information. Protecting women's privacy and ensuring robust security measures are crucial for their online safety and well-being (Iwaya et al. 2023).

The resolution of these challenges necessitates collaborative endeavors from diverse stakeholders, including policymakers, technology enterprises, civil society organizations, and individuals. Mitigating these issues involves reducing the digital gender divide, advocating for gender-inclusive STEM education, implementing robust legislative frameworks to counter online harassment and violence, fostering gender diversity in technology development, and prioritizing online privacy and security measures. The existence of robust legislation for protecting human rights, specifically women's human rights, such as the right to privacy, is a fundamental step toward the trustworthy use of new digital technologies (European Union 2016). By proactively addressing these challenges, we can create a digital environment that fosters fairness, safety, and empowerment, thus embracing individuals of all genders.

4. Policy Implications

Policy implications for achieving gender equality in the digital era are multifaceted and necessitate a comprehensive approach that involves active engagement and collaboration among governments, civil society, and the private sector (Munive et al. 2022) The digital revolution can empower individuals and create a more inclusive society, but it also illuminates numerous challenges that disproportionately affect women. As technology continues to shape nearly every aspect of modern life,

various stakeholders must address these challenges through well-crafted policies and coordinated efforts. The following policy implications can contribute to the creation of an inclusive and equitable digital landscape (Ho 2022).

1. Bridging the digital divide: Governments and stakeholders must invest in infrastructure development and policies to increase access to digital technologies, particularly in underserved communities. Closing the digital divide is essential to ensuring that women have equal opportunities to benefit from the digital revolution.
2. Promoting digital skill development: Education and training programs should focus on equipping women with the necessary digital skills, empowering them to fully participate in the digital economy, and leveraging technology for personal and professional advancement.
3. Supporting women's entrepreneurship: Policies should foster an enabling environment for women's entrepreneurship in the digital context. These include access to capital, mentorship programs, and supportive regulatory frameworks that promote gender equality in business opportunities.
4. Addressing gender bias: Technology companies and policymakers should actively work toward eliminating gender bias in technology development and deployment. This involves promoting diversity and inclusivity in technology-related fields and ensuring that algorithms and AI systems are free from discriminatory biases.
5. Combating online harassment: Robust legal frameworks and mechanisms should be put in place to address online harassment effectively. Public awareness campaigns, educational programs, and support services can empower women to navigate and mitigate the risks associated with online harassment.
6. Ensuring women's leadership and privacy protection: Encouraging women's leadership and representation in decision-making within the digital sphere is vital for shaping inclusive policies. Additionally, privacy protection measures must be implemented to safeguard women's personal information and ensure online safety.
7. Achieving gender equality in the digital era requires comprehensive policy interventions that address challenges and harness the opportunities presented by technology.

These policy implications should focus on promoting inclusivity, breaking down barriers, and creating a supportive gender equality environment. The following are some key policy implications (Chibaya et al. 2021):

1. Bridging the digital gender divide: Governments and stakeholders must prioritize policies to bridge this divide, including investing in infrastructure development to ensure universal access to affordable and reliable Internet connectivity. Policies should also address affordability issues, particularly in underserved areas and marginalized communities. Special attention should be given to reaching rural areas and ensuring that women have equal access to digital technology.
2. Promoting gender-inclusive education: Policy interventions should focus on promoting gender-inclusive education with an emphasis on STEM subjects. This includes creating supportive learning environments that encourage girls to participate in STEM education, providing scholarships and mentorship programs, and addressing societal stereotypes and biases that discourage girls

from pursuing technology-related fields. It is crucial to ensure that girls and women have equal opportunities to acquire the digital skills necessary for their future workforce.

3. Encouraging women's entrepreneurship: Policies should foster an enabling environment for women's entrepreneurship in the digital realm, such as providing access to capital via targeted funding programs, offering business development support, and facilitating access to markets and networks. Policymakers should also address gender biases and barriers that hinder women's access to business opportunities and venture capital funding. Special attention should be paid to supporting women-owned digital enterprises and promoting their growth.
4. Addressing gender bias in technology: Policies should focus on addressing gender bias in technology regarding development and usage. They include promoting diversity and inclusion in technology-related fields, ensuring equal opportunities for women in technology careers, and challenging stereotypes and biases in algorithmic decision-making. Policymakers should encourage technology companies to adopt ethical guidelines and transparency measures to mitigate bias in AI systems and algorithms.
5. Combating online harassment and violence: Comprehensive policies are needed to address online harassment and violence targeting women, such as enacting legislation criminalizing online harassment, establishing effective reporting mechanisms, and providing support services for victims. Policymakers should work with technology companies to develop robust community guidelines, content moderation practices, and reporting systems that prioritize women's safety and well-being in online spaces.
6. Ensuring privacy and security: Policies should prioritize the protection of women's online privacy and security, such as implementing strong data protection regulations, ensuring informed consent for data collection and usage, and holding those who violate privacy rights accountable. Policymakers should work with technology companies to develop user-friendly privacy settings and security measures and promote digital literacy programs that educate women about online privacy risks and self-protection strategies.
7. Promoting women's leadership and representation: Policies should encourage women's leadership and representation in the digital sector. They include promoting gender diversity on technology company boards, fostering mentorship and leadership development programs for women, and implementing gender quota policies to ensure women's representation in decision-making roles. Policymakers should also collaborate with industry stakeholders to track and monitor progress toward achieving gender parity in leadership positions in the digital sector.

5. Conclusions

In the era of digitalization, achieving gender parity necessitates a holistic and collaborative approach among various stakeholders. Policymakers, civil society organizations, and private enterprises must unite their efforts to address key issues such as narrowing the digital gender gap, promoting gender-inclusive education, supporting female entrepreneurship, combating gender bias, addressing online harassment, and ensuring privacy and security. To narrow the digital gender gap, the focus should be on providing equitable access to digital technologies and Internet connectivity,

particularly in marginalized communities. Additionally, gender-inclusive education should leverage technology to overcome traditional barriers and offer equal learning opportunities for women and girls.

Supporting female entrepreneurship requires the creation of an enabling environment through policies and programs that facilitate access to funding, mentorship, and digital platforms for business growth. Concurrently, combating gender bias involves promoting equal opportunities and fair representation and eradicating discriminatory practices in the digital realm. Addressing online harassment is crucial to fostering a safe and inclusive digital environment for women. Policies should prioritize safeguarding individuals from online abuse and harassment and enforcing consequences for perpetrators.

Ensuring privacy and security involves safeguarding personal information and protecting it from online threats. Robust data protection regulations and cybersecurity measures are essential to uphold individuals' privacy rights and prevent gender-based discrimination. Finally, promoting women's leadership and representation in the digital age requires the creation of avenues for women to assume decision-making roles in technology companies, governments, and other sectors. It can be achieved through mentorship programs, leadership training, and initiatives that foster gender diversity. The successful implementation of these policies hinges on collaboration among governments, civil society organizations, technology companies, and individuals. Collective efforts are essential to design and execute comprehensive strategies that prioritize gender equality in the digital era. Creating an inclusive and equitable digital society that empowers individuals of all genders is a shared responsibility that requires sustained commitment and cooperation from stakeholders.

Governments, civil society organizations, technology companies, and individuals must collaborate to narrow the digital gender gap, promote gender-inclusive education and entrepreneurship, combat gender bias, address online harassment, and ensure privacy and security. By embracing this collective vision and investing in the necessary resources, we can transform the digital landscape into a space where all individuals have equal opportunities to thrive and contribute regardless of their gender. This transformation is crucial for advancing gender equality and building a more just, prosperous, and harmonious society. Sustained commitment from all stakeholders and the allocation of resources are vital to driving lasting change and creating an inclusive and equitable digital society that empowers individuals of all genders. By working together, we can build a digital landscape that ensures equal opportunities, respects individual rights, and promotes gender equality.

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9. Gender Equality in Politics and the Media

Carla Martins

Abstract: In recent years, many countries approved gender quotas on the boards of the public sector and listed private companies. The objective is to set quantitative and time targets to achieve a better balance. Also, in many countries changes were made to the electoral law for local authority bodies (municipalities), which included extending the scope of application of the parity law, ranging from 33% to 50% of the setting of the gender parity threshold. These measures aim to promote equality between men and women in positions of leadership and greater responsibility. Indeed, the higher up one rises in the hierarchy of power, the greater the gender imbalances. These glass ceilings can be seen in companies, politics, and the media. Legislative initiatives have activated the gender equality agenda and contributed to making inequalities between men and women more socially visible and unacceptable. This chapter will specifically address the issue of gender equality in politics and the media with three underlying questions: How is female identity constructed in the political field? How is the media representation of female political identity constructed? How is female political identity socially perceived? It is also questioned whether politics is gendered from the point of view of journalists.

1. Introduction

In February 2017, the Portuguese Parliament started discussing the Government's proposal to introduce gender quotas on the boards of public sector and listed companies. In the latter, at the time of this debate, the disproportion was very evident: only 1 was chaired by a woman, and 13 others had no women on their boards. The proposal then under discussion set quantitative and time targets to achieve a better balance.

The new legal provisions were approved in June of that year, establishing Law No. 62/2017 of August 1. The regime balanced the representation between women and men in the management and supervisory bodies of entities in the public business sector and listed companies.

Moreover, in 2017, changes were made to the electoral law for local authority bodies, including extending the scope of application of the Parity Law, which was approved in 2006. In 2018, the Government presented a proposal to amend this latter diploma in the bodies of political power, increasing the setting of the gender parity threshold from 33% to 40%, as approved by Parliament in 2019.

These measures promoted equality between men and women in positions of leadership and greater responsibility. Indeed, the higher up one rises in the hierarchy of power, the greater the gender imbalances. These glass ceilings were evident in companies, politics, and the media. The noted legislative initiatives have activated or reactivated the gender equality agenda and contributed to making inequalities between men and women more socially visible and unacceptable.

This study specifically addresses the issue of gender equality in politics and the media with three underlying questions:

- How is female identity constructed in the political field?
- How is the media representation of female political identity constructed?

- How is female political identity socially perceived?

This reflection is based on the author's research on the relationship between media and politics from a gender perspective. In concise terms, the study questions whether politics is gendered from the perspective of journalists, and the answer is likely to be affirmative.

2. Late Feminization

The political and media fields are inseparable. Contact with the political field is indirect for most people and takes place through media and communication devices. However, politics is a very exposed field, with great visibility and permanent scrutiny of the respective holders of public offices.

National politics is the target of great media attention. According to the results of the annual monitoring by the Regulatory Authority for the Media, it is among the main themes of the evening news of the national generalist channels, accounting for approximately 26% of the television news line-ups.[1]

The media (and specifically journalistic mediation) still have a decisive influence on how public opinion builds its perceptions of the political field. Political agents recognize the importance of knowing how media logic works to adapt to it by defining communication strategies.

Politics and media have in common the fact that they are two traditionally male social fields (where women entered late), with the mission of dealing with "women's issues." Further, women were perceived as having strangeness and exoticism, without being generically recognized as having the same competencies as men. In both fields, women must be affirmative to conquer their space and claim the right to be recognized as peers. They must face multiple discriminations based on their gender.

Women would only have access to suffrage and representation in political bodies in the *Estado Novo*, under more restricted conditions and with mandates especially geared toward welfare, the family, and the education of children. The first female deputies to the National Assembly were introduced with some solemnity by Oliveira Salazar in an interview to the newspaper *O Século* in 1932. Among the 90 names proposed, chosen for "their mental integration in the *Estado Novo* or conformity with the generality of its principles," there was a novelty. Salazar stated, "Some ladies will be part of one or other chamber, which does not mean that the state or the ladies themselves have now converted to feminism" (Apud de Sousa 1986, p. 429).

In the same year that the first woman voted in Portugal, 1911, Manuela de Azevedo, the first journalist with a professional title in Portugal, was born; she died in February 2017, at the age of 105. As noted in an interview with *Notícias Magazine* in 2013, she refused to write about women's issues: "When, around 1930, I arrived at the newspaper *República*, my first newspaper, there was a section specially created for me called "*Tribuna da Mulher*" (Women's Tribune). I immediately refused. That

[1] In 2021, national politics was the main topic of *Telejornal* (RTP1), *Jornal 2* (RTP2), *Jornal da Noite* (SIC) e *Jornal das 8* (TVI), with a weight of, respectively, 28%, 30%, 27%, and 19% (cfr. ERC—Entidade Reguladora para a Comunicação ERC—Entidade Reguladora para a Comunicação Social (2022), Regulatory Report 2021, p. 584). Notably, the first female vote in Portugal occurred in 1911, at the beginning of the First Republic; it was only possible for Carolina Beatriz Ângelo to vote by judicial decision, making history in Portugal and Europe. In fact, two years later, the female vote was explicitly forbidden by law.

would have been the last straw, neither men's nor women's tribunes, there were journalists there, and *whoever had fingernails played the guitar*. And they gave in."

The Revolution of 25 April 1974 was undoubtedly a milestone in the recognition of equality between men and women and the achievement of political and civil rights by women. The universal vote was consecrated. The turnout to the polls (close to 92%) for the 1975 Legislative Assembly elections was unprecedented in the history of Portuguese democracy. Many women (and men) voted for the first time, and 20 women were elected out of 250 deputies.

However, the feminization of political bodies (Assembly of the Republic, Government, municipalities) was slow in the following two decades (Martins 2012). Despite progressive legal and constitutional provisions, reality does not change by decree.

Journalism also continued to be a men's craft. In the same interview by Manuela de Azevedo, she recalls that, in the early 1970s, she was the only woman on the editorial staff of *Diário de Notícias*.

Perhaps a turning point, in politics and journalism, occurred in the 1990s. Regarding politics, the integration of the then EEC and its policies promoting gender equality should be valued. In 1989, the Council of Europe launched the concept of "parity democracy." In the first half of the following decade, the term gender mainstreaming was coined. In 1992, the "Athens Declaration" was drawn up at the European summit on "Women and Power" on the need for a balanced distribution of power. In 1995, the Fourth UN World Conference on Women was held in Beijing, resulting in the Beijing Platform for Action, which stated that "No government can consider itself democratic unless it guarantees women equal representation."

In the plan of international policies for the promotion of gender equality, increasing attention has also been given to the dimension of communication and media: defending a greater gender balance in media organizations and less formatted and stereotyped coverage of men and women.[2]

At the national level, in the second half of the 1990s, gender equality became a strong topic on the political agenda. The IV Constitutional revision in 1997 opens the door to the introduction of positive action mechanisms.

We know that the idea of introducing "quotas" in the composition of the electoral lists was controversial, and, in this debate, the merit criterion of political representatives gained unprecedented prominence. This discussion brought a kind of genderization of merit. We also know that successive legislative proposals to introduce *pink quotas* in the political system were rejected.

However, something has changed in the sensitivity of public opinion to the underrepresentation of women as a democratic problem and in the behavior of political parties, which have begun to include many women on their lists. Indeed, a greater presence of women in political bodies has begun to be noted.

There was also late feminization in journalism in the 1990s; today, there is practically parity in the profession. Nevertheless, this parity has not yet been achieved in editorial and management positions and the administration of media companies. The approval of the Parity Law in 2006 had a decisive impact on the process of feminization of political bodies, whose measures have been applied since 2009.

[2] To illustrate, see the Council of Europe's Strategy for Gender Equality 2014–2017, and the Committee of Ministers' Recommendation to member states on gender equality and media (2013).

Ever since this law has been practiced, the rise in the number of female representatives in political bodies has been evident, especially in the Assembly of the Republic, with the unprecedented election of 39% of female seats in the 2019 legislative elections (37% in the elections of 2022). The reinforcement of the upward trend in the number of female MEPs can also be observed (currently they correspond to 47.6% of those elected to the European Parliament).

Nonetheless, in political bodies and positions without the direct application of the Parity Law, the greatest imbalances continue to exist in executive positions and at the top of the power hierarchy: in the most prominent positions in Parliament (the Presidential office, the leadership of parliamentary benches and committees); Government (Prime Ministers and Ministers); the Presidency of the Republic; and the presidency of local authorities, especially city councils. Female participation at the government level has historically been low, and only the V Government (1979) was led by a woman, Maria de Lourdes Pintasilgo. The female representation in the XXIII Government, led by António Costa, considering all government positions, is approximately 36%. In June 2020, there were 9 female ministers out of 18 ministers.

The evolution of female political participation has been slower in the context of the elections for Local Government bodies, especially in executive bodies. The number of female mayors remains residual. In the last local elections of 2021, only 31 women mayors were elected in 308 city councils (10.1%).

In the last presidential elections of 2016 and 2021, two women ran as candidates, which had not happened for 30 years, following Maria de Lourdes Pintasilgo's candidacy in the 1986 presidential election. Until recently, two women led parties with parliamentary seats: Mariana Mortágua (BE) and Inês de Sousa Real (PAN).

The greater presence of women in politics also challenges the values and norms underlying the functioning of the field as being neutral from a gender perspective.

3. Invisibility and Stereotypes

For women politicians, it will be a challenge to define their identity as agents in a field shaped by those values and norms sedimented by male action. The question is whether women feel conditioned to adapt to a political ethos, which may be described as more aggressive and may result in their de-characterization or even de-feminization. Further, whether they feel belittled when they seek to assert an alternative style of exercising power, seek to promote an equal rights agenda, or consider it important to claim a pace and schedule of politics that is more favorable to reconciling private and family life is worth considering.

In an interview with *Sol* newspaper in 2017, former Minister of Health and presidential candidate, Maria de Belém Roseira, said: "I have only felt male chauvinism in politics; I have never felt it in my family or professional life." She declared on the same occasion:

> "And I really think, like Maria de Lourdes Pintasilgo, that men and women are not equal. And it is because they are different that they are both necessary. They are different, but the difference cannot be seen as something to be trampled on. Maria de Lourdes Pintasilgo often said that if women go into politics to do the same as men do, it is not worth it. Women are different and they must assert their difference. I learned that from her. And I consider that I have never been a woman equal to men in politics,

> although I have been criticized a lot for that. But it doesn't bother me (...) People think you have to be very violent. And I hate violence for violence's sake (...) I respect the opinions of others, and even when I disagree with them, I am not violent in my disagreements, and I never go beyond certain levels. People think that this is a sign of weakness, but I think it is a sign of a difference in attitude."

Women are seen through more filters than men; they are more scrutinized and evaluated, as reflected in the way they are represented in the media and are perceived by citizens. Research on the nexus between politics and media from a gender perspective shares anxiety about the quantity and quality of representation. The analyses have as their normative axis the inclusive conception of the public sphere. According to Ross and Sreberny (2000, p. 80), "if the media articulate the political and public spheres, then representation is relevant. Unfair media representation can be an impeding factor to fair political representation."

The media certainly reflect the contradictions generated by women's access to a traditionally male universe. According to Sreberny and van Zoonen (2000, p. 2), if politics is defined as an alien place to women, and female activities as apolitical, the media, as the main stages of contemporary politics, "are deeply involved in this process of definition and framing, insofar as they represent and renew the contrast between femininity and politics." Gallagher (2006, p. 21) warns that "the emerging picture is extremely complex. Women's entry into the political arena poses a problem for news. As women, they embody a challenge to male authority. As active and powerful women, they challenge simple categorization."

Women can be penalized for behaving less assertively, just as they can be penalized for taking a firm stand. A good example is the former minister of Finance and Planning and former president of the PSD, Manuela Ferreira Leite, who conformed to an archetype of male leadership (i.e., a Thatcher model) and was qualified as an "iron woman," often being compared to a "Cavaco in skirts" (Martins 2015a, 2015b). Many women in politics break this correspondence to an ideal of "feminine behavior" when they reveal more angular, aggressive, harsh aspects of personality, which tends to be negatively appreciated.

These reflections circle back to the patterns of news coverage of women in politics and how, in reporting on these protagonists, journalists' discourse can easily fall into stereotypes. The contrast between this argument and how journalists perceive their work as gender-neutral is clear.

However, it seems the culture of newsrooms conforms to this neutrality only in appearance, even given the increased presence of women journalists.

According to research conducted in national newsrooms, based on interviews with journalists of both sexes, gender issues in professional media cultures and content proved to be challenging to address. When asked about gender asymmetries, respondents would reject the idea, appearing surprised or uncomfortable. During the interviews, gender was rarely considered a criterion for the selection of sources, protagonists, commentators, or stories, as opposed to other criteria of representation, such as geographical, cultural, or racial diversity, which were considered important by most respondents (Lobo et al. 2017).

While they are privileged narrators of the present, most journalists construct this narrative in an impressionistic and routine way (given the speed with which

they work) and in a standardized way (despite their creativity, journalism can also be a very formatted activity in the news selection and treatment of information).

Therefore, the journalists' discourse is far from being natural and evident and is, instead, a kind of "mirror of reality." As much as journalists may contest this idea, the gender of the protagonists is one of the attributes that influence the news, leading to distortions, biases, or stereotypes.

First, if women remain shunned from the most prominent positions and those with greater responsibility, they also have less notoriety in the coverage of the political field. They are more invisible. The media focus on the dominant elites, the top leaders, giving priority to the people they consider important and powerful.

In 2020, per the Global Media Monitoring Project (a study conducted internationally every five years in more than 100 countries), women made up 25% of people mentioned in the news. In news about politics and government, they comprised only 20%.

These data correspond generically to the results of the monitoring of the evening television newspapers of RTP1, RTP2, SIC, and TVI, carried out by the Regulatory Entity for the Media. In 2021, approximately 70% of the protagonists of the news pieces analyzed corresponded to the male gender (this indicator rises to 73% regarding Jornal da Noite, of SIC), continuing the trend of previous years. Women starred in between 18% and 22% of the pieces (ERC—Entidade Reguladora para a Comunicação Social 2022, p. 600).

When they are visible in politics, the news media tend to represent them flowing some patterns systematized below.

It remains common for women politicians to be presented first and foremost as such. They are also often framed as pioneers in the performance of certain positions (e.g., it is "the first time" a woman reaches a certain position). That is, their presence in the public–political sphere in various leadership positions is not yet normalized. It has already been years since the nomination of Maria de Lourdes Pintasilgo as Prime Minister, in 1979, when the *Diário de Notícias*, celebrating the fact that the leader of the government was a woman, wrote: "She will be the third woman with responsibilities in power in 800 years of Portuguese history, succeeding the two Queens Marias" (Martins 2015a, 2015b).

When they are highlighted in the news, female politicians appear more associated with image attributes (beauty, what they wear, hairstyles, and accessories), their relationship with their family (their husbands or partners, whether they have children), and their age (youth is very much emphasized, but also old age).

The greater media attention paid to women's age and physical appearance is very evident. In 2008, when Manuela Ferreira Leite ran for the presidency of the PSD, the newspaper *Público* (29 May 2008) identified the "taboo that everyone talks about in the PSD"; that is, Ferreira Leite being "too old for the presidency," which raises the question: "Is age a problem in politics?" During the 2015 general election campaign, a profile on Catarina Martins in *Público* (30 August 2015) states: "Broad smile, girlish air on a body which turns 42 in a week's time. With bright green eyes that are not highlighted by the little make-up she wears every day; it is only when she goes on television that Catarina Martins has been changing her style. Sometimes, her hair is slicked back to give her a more conservative look, sometimes she has a slicked back hairdo to give her a modern edge." Newspapers report that, on the second day of the centrist congress at which she was elected president in 2016, Assunção Cristas chose to wear a long blazer in shades of baby blue over a dark ensemble.

In general, the media exploit the female image more, for reasons of audience appeal, but these symbolic schemes draw on older models of representing women as subjects of contemplation rather than action.

These attributes genderize the media representation of politics and may have various readings (i.e., more positive or more negative, more inclusive or less). Arguably, highlighting style is not synonymous with trivialization; it may, however, be a way of distinguishing personality (breaking the monotony of dark suit and tie politics) and reinforcing leadership.

However, from empowerment by contemporary attributes, per the greater personalization of politics, it is easy to slip into the "symbolic annihilation" of women (to use an expression of the North American sociologist Gaye Tuchman (2004)) and into their trivialization, which contributes to pushing them away from power.

Aspects such as novelty, age, or appearance, to which more attention is added to family life or the reconciliation of spheres, are more present in news coverage of women in politics. It will be problematic if the emphasis attributed to such attributes is exhausted and constitutes an obstacle to a more substantive apprehension of the political proposals and messages of these protagonists, especially if it is an obstacle to women's political empowerment and the public affirmation of their empowerment.

Nonetheless, the journalistic discourse may also contribute to deconstructing certain categories, moving them from their natural habitat into the public space. The category of mother (a function previously relegated to the private and family sphere) emerges in certain contexts with extraordinary political and public force (Cabrera et al. 2016). However, the absence of children may constitute a political issue that eventually contributes to discussing the scope of stereotypes rooted in society.

4. Concluding Remarks

More women in politics embody a greater representation of society in formal political bodies. What they bring as new and distinctive features is reflected in greater diversity in the exercise of politics. With more women in politics, new images or metaphors of political power emerge in a dialectic with the transformation of the political field resulting from the presence of women. From the media representation perspective, the journalistic discourse on politics is partly based on stereotyping by reproducing stereotypes associated with women. However, it can also be an important vehicle to discuss them. It is also up to us, as citizens, to enter this discussion and demand fairer and more balanced representations.

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10. Intersectionality, Gender, and Equal Opportunity

Sofia B. Nunes, Ivone Duarte and Rui Nunes

Abstract: The diversity of people and their complexity makes it fundamental to look not at a single factor when examining their lives, but at multiple factors. Thus, it is vital to bridge various individual and collective characteristics, such as race, ethnicity, class, gender, sexual orientation, disability, religion, and age. Intersectionality plays a significant role in this process. This concept analytically approaches the existing power relations at the intersection of different social dimensions. It aims to determine how these characteristics interact with socially implemented social, economic, and family dynamics. This chapter begins with a solid conception of intersectional justice and an analysis of the multiple injustices that can be aggregated because of the power relations established in society. It also intends to address complex issues within the scope of gender equality, such as reproductive rights, female genital mutilation, employment, priority setting in healthcare, work, and political representation. The authors recognize the multidimensional and relational nature of social positions and suggest that institutions that allocate opportunities and resources, including the school system, labor market, health system, social security system, taxation, and media, should be instruments for true intersectional justice.

1. Introduction

The diversity of people and their complexity makes it fundamental to look not only at one factor when examining their lives but at multiple factors. Thus, it is important to bridge various individual and collective characteristics, such as gender, race, ethnicity, class, sexual orientation, disability, religion, and age, which is why intersectionality plays a significant role (McCall 2005). This concept intends to analytically approach the existing power relations at the intersection of different social dimensions. It aims to determine how these characteristics interact with socially implemented social, economic, and family dynamics.

This chapter starts with a view of intersectional justice and an analysis of the multiple injustices that can be aggregated because of the power relations established in society. It also addresses complex issues within the scope of gender equality, such as reproductive rights, female genital mutilation, employment, priority setting in healthcare, work, and political representation.

The multidimensional and relational nature of social positions and institutions that allocate opportunities and resources, including the school system, labor market, health system, social security system, taxation, and media should be instruments for true intersectional justice.

2. An Ethical Platform for Intersectionality Justice

There is no consensual view of the expressions "justice" and "equity" or their functional content, which has important repercussions at political and social levels. The initial question to be asked is what justice means, as Solomon and Murphy (2000) claims. If the Justinian Code warrants a continuous or perpetual desire to give each person what is due to them, for Aristotle, through his famous formal principle of

justice—also called the principle of formal equality—justice should be understood as treating equals equally and unequals unequally to the extent of their similarities and dissimilarities.

This Aristotelian principle is of immediate application to intersectionality as it is required that social institutions provide all citizens with identical access to different social and economic opportunities. A common critique of the formal principle of justice, however, is the lack of substance: the frequent impossibility to specify the relevant properties of the subject or circumstances that allow this equality to be determined. To allow for the appropriate application of this principle in very diverse circumstances and to ensure that equality is not merely a matter of "form", different material principles of justice have been proposed over the centuries to ensure a material context in which equality can be realized. Necessity, merit, and even market forces are examples of material principles of justice where not only the form but also the substance (matter) are part of an inseparable whole.

However, while it is true that different models of social welfare, in health, education, or maternity and old age protection, rely on different material principles of justice, to give consistency and coherence to public policies, different theories of distributive justice have been proposed. A "theory of justice" is an integrated and systematized body of rules and principles with internal coherence and fundamental logic. It allows us to clarify how citizens can benefit from different social and economic opportunities and to expand their talents and capabilities. A theory of justice particularly suited to an advanced model of welfare state is the egalitarian theory of John Rawls (1971, 2001). According to Rawls, citizens implicitly establish a social contract with society and its institutions to guarantee individual freedom and equal access to primary social goods as founding values of a well-ordered and well-structured democratic and plural society. This egalitarian vision of society guarantees equal opportunities regardless of arbitrary characteristics such as gender, ethnicity, and disability.

Rawls then defined a theoretical situation in which the impartial observer—the reasonable citizen—is on an imaginary plane (historical and cultural), where the patrimonial, cultural, gender, health, social, or wealth situation (under a veil of ignorance) is unknown in concrete terms. In this context, albeit only theoretical, the "impartial observer" would decide to ensure the best living conditions and well-being for themselves and their household, including access to key positions in society. Therefore, by not knowing where they stand on the socioeconomic gradient, the decision-making process would inevitably lead to the protection of the worse-off groups in society, ensuring identical opportunities for all. In other words, the "impartial observer" would advocate, in principle, effective social and economic opportunities, protecting the sick, the disabled, and the least advantaged in general. Hence, John Rawls' two principles of justice were formulated for advanced citizenship in the following hierarchical order:

1. Every citizen must have access to the most complete system of basic liberties;
2. Difference principle:
    (a) Access to key positions in society must be provided with fair and equal opportunities (not just formal equality).
    (b) Ultimately, the allocation of resources and the distribution of social goods must favor the worse-off in society.

Thus, public policies in most civilized societies, especially social welfare policies, but also in the political and economic spheres, have been profoundly influenced by this principle of equality of opportunity. Indeed, most social, educational, and health policies include, on the one hand, equitable access to various social goods and, on the other, some form of positive differentiation for the worse-off groups in society. Positive discrimination policies, of which affirmative action in many countries is a good example, assure access of cultural minorities to key positions in society. And gender equality policies are no exception. However, it should be expected a new wave of affirmative action policies to include not just one but also many intersectional causes of discrimination. For instance, an affirmative action policy aggregating two or more individual characteristics such as gender, ethnicity, and disability.

Thus, the principle of equal opportunity (just like, on a legal level, the principle of equality for all citizens before the law) has become the main instrument that determines social, educational, and health policies, especially in the developed world. It justifies some policies of positive discrimination, of which affirmative action in many countries is a good example, by privileging access to certain key positions for cultural minority elements. The same can be defended in the application of gender equality policies. Eventually, a new wave of affirmative action policies is needed to include not just one but also many intersectional causes of discrimination. For instance, an affirmative action policy aggregates two or more individual characteristics such as gender, ethnicity, and disability.

A realistic approach to the principle of equal opportunity implies the existence of institutions legitimized by democratic power to promote advanced capabilities (Sen 2009). Institutional transcendentalism emanates from this model of social organization and is a prerequisite for the widespread implementation of this set of values. The existence and activation of solid democratic institutions is a determinant for true equal opportunity and is the most effective way to prevent the "first injustices" effect determined by family, geography, and gender (Gortmaker and Wise 1997).

Additionally, utilitarianism may leverage intersectional justice (Rachels 2003). Indeed, for consequentialist or teleological accounts of justice, the ends justify the means according to the principle of utility. If the utility of an individual action or social intervention is maximized, then intrinsic goodness is justified, regardless of whether there is proportionality between the means and the ends. The intersection between the public good and economic and social efficiency determines public policies to the detriment of egalitarian values or the promotion of the worse-off groups in society. From a methodological approach, the principle of utility is paramount; an intervention is legitimate if it promotes the greatest possible good for the greatest possible number of people. Utilitarianism tends to focus less on individual people or even traditionally neglected subgroups such as women. Instead, it favors interventions that target large segments of the population, such as tobacco prevention or vaccination programs. While these are necessary strategies, they should not impede the implementation of interventions aimed at smaller groups of citizens. A recurring criticism is that utilitarianism allows for discretionary approaches in different fields.

However, if social utility is maximized by intersectional policies—for instance, because it is seen as a sensitive issue by most of the population—then utilitarianism can also be the basis of intersectional justice. A healthy society should be balanced, stable, and productive. It follows that the positive differentiation of people with more

than one discriminatory factor, such as gender, age, disability, or ethnicity, might indeed promote social cohesion.

In any case, intersectional justice might be justified simply by procedural justice—fair and transparent procedures under the watchful eye of society. The concept of public accountability is intrinsic to this dynamic; that is, the need to be accountable for the procedures used and fully comply with the social contract regarding these issues (Nunes et al. 2011). Public accountability implies that public policy choices must be transparent, accountable, and periodically audited by predefined democratic institutions. Procedural justice, as a common denominator for all perspectives of distributive justice, may not be the best but the only solution in a society where citizens find themselves moral strangers and where there is no unanimous view of the common good (Sandel 2009). In addition, it might be easier for children with intersectional discriminatory characteristics to enjoy the right to an open future (Feinberg 1980).

Thus, intersectional justice has dimensions that intersect with gender. For example, cultural differences, such as ethnicity, can prevent effective access to social mainstreaming, thus becoming a barrier to full and advanced citizenship. Gender and ethnicity are special dimensions of intersectionality (Schulz and Mullings 2005). Therefore, the acceptance of differences and the promotion of effective enjoyment of the different dimensions of society are instrumental in intersectional justice. Disability-related barriers also exist. That is, people with disabilities at different levels represent an important group of citizens who must have adequate access to social and economic opportunities, once again given the principle of fair equality of opportunity. Deficiency of the motor, intellectual, or special senses (e.g., vision and hearing) must progressively be considered a characteristic and not a classic disability as a way to discriminate.

The system must be adapted to guarantee the basic precept of universality in accessing basic social goods. For instance, at the European Union level, intersectionality has been institutionalized given the enormous influence that the EU has on member states and the intense political articulation of equality policies (Verloo 2006), although it may not have yet produced the desired effect of eliminating multiple discriminations. This is a good example of an inclusive equality policy that may be followed by other states. Intersectional justice also refers to spatial equity at the national and global levels. If equals are treated equally and unequally, geographical disparities are, arguably, paramount (Nunes 2022). This notion is especially relevant in the North–South disparities, so that historical causes of discrimination and oppression are analyzed, and new public policies are designed and implemented, including policies promoted by supranational organizations.

In short, during the last few decades, the human rights doctrine has conferred a vast array of social, economic, and political rights (United Nations 2020). Indeed, a truly advanced society provides citizens with tools for free and autonomous choice. This "free will" has been the basis for a new understanding of the international community since the approval of the Charter of the United Nations (United Nations 1945) and the Universal Declaration of Human Rights (United Nations 1948). Therefore, an ethical platform for intersectional justice may be proposed considering the following:

(a) Equal dignity of all citizens (Nagel 1991);
(b) Solidarity and fair equality of opportunity (John Rawls 1971; Dworkin 2000);
(c) Positive discrimination promotes advanced capabilities (Sen 1989, 1999).

Therefore, the multidimensional and relational nature of social positions, life experiences, and oppression systems are determinants of appropriately analyzing intersectionality and its impact on healthcare, employment, and political representation (Collins and Bilge 2020).

3. Gender, Healthcare, Employment, and Political Representation

There is a long-standing tradition in the international community to promote gender equality, although there remains a long way to go. Specifically, the United Nations (1979, 1993), UNESCO (2014), and UN Women (1995) systematically approached the need for equal rights and opportunities between women and men. For interfaces with intersectionality, it is necessary to understand what is experienced because of the intersection of two or more social oppression axes. No axis is more relevant than another, and social categories should not be essentialized.

The concept of intersectionality emerged following Kimberlé Crenshaw's (1989, 1991, 2019) social critique, departing from black feminist and critical legal theory approaches. Crenshaw speaks of "multiple social forces, social identities, and ideological instruments through which power and disadvantage are expressed and legitimized." Nowadays, this concept has evolved and expanded to cultures outside American society and encompasses issues such as far-right populism and reproductive justice. An analytical approach to intersectionality implies the determination of different social indicators, such as gender, ethnicity, socioeconomic class, age, nationality, religion, sexual orientation, and disability, or cultural indicators, such as the physical appearance of a specific disability, texture of the air, color of the skin, physical forms, and color of the eyes.

Despite their American roots, contemporary intersectional studies are inter- and transcultural (Hearn et al. 2013) because the sources of discrimination are largely present in all cultural backgrounds. For instance, reproductive rights, including access to appropriate healthcare services, abortion policies, sexual education, and family planning, have only recently been recognized globally. Most cultures and religions restrict this right (Squires 2008). For instance, in most countries, female genital mutilation is now considered a discriminatory practice that is contrary to women's human rights and human rights doctrines in general terms. This is an example of a balance that must be reached between respect given different cultures and essential basic human (and women) rights, such as physical integrity, sexual autonomy, and self-determination.

At the international level, intersectionality should approach different causes of discrimination in different settings, namely employment, political representation, care work, and healthcare organization (Nash 2008). In healthcare access, lessons should be learned from the COVID-19 pandemic, during which women were discriminated against in many countries. It follows that international organizations should suggest and activate public policies for priority setting, specifically addressing gender sensitivity (Nunes 2022). The construction of national models of prioritization in healthcare should then not only consider the services and goods that can be delivered to all citizens but also assure women's access to specific care, such as reproductive services. Moreover, the rationale for including these services in the basic package should be clear.

Political representation is another issue that must be addressed. As previously mentioned, there is no problem whatsoever, from an egalitarian perspective of justice,

in implementing positive discrimination public policies to overcome the injustice resulting from the multiple intersectional factors of oppression. For instance, many countries have passed laws providing quotas for political representation or high-level public functions. It is usual to enforce that at least 40% of elected political officials should be of different genders and that there should be an alternation of genders of higher public officials. As a special transitory measure, it has been implemented with enormous success in many countries, paving the way for equal representation. This is a transitory characteristic that precisely identifies and defines positive discrimination policies. There has been a lot of pushback against these types of policies because the group on the other side of the fence feels that they are now victims of injustice. However, privileged people do not normally know or understand that they live in privileged places. Thus, multiple forms of discrimination, especially racial discrimination, are commonly structural and embedded in all types of social relationships. Such public policies exist only when discrimination persists.

Further, to accomplish the goal of ensuring the same economic opportunity for everyone, corporate governance policies might be reframed to adjust the constitution of boards of private companies (dual or not) for a more gender-sensitive approach. This positive social responsibility (Brandão et al. 2013), allying gender sensitivity with merit, is a landmark of modern human development. These measures should be accompanied by educational and cultural initiatives that create new perspectives on women in politics and business administration.

This kind of public policy could easily be expanded to intersectional approaches to modern citizenship such that a new wave of affirmative action policies considers not only gender, but also other particularities (Walby 2007). It must be stressed that intersectional justice is gathered not only by feminist accounts of equality (Yuval-Davis 2006) because it can be equally claimed that a man who has a disability and belongs to a specific ethnicity should also be positively differentiated in access to economic opportunities or political representation. Indeed, intersectionality and access to appropriate healthcare, political representation, and social services mean that any combination of two or more discriminatory conditions should be addressed as unjust circumstances that restrict opportunities and the development of full human potential.

It is necessary to have an alliance between social movements in favor of democracy and equality to refer to strategic interests; that is, one must look beyond gender to insert this perspective into other wider movements (Mukhopadhyay 2014). Democracy, human rights, equality, and non-discrimination are part of an inseparable whole, and fair and effective institutions are necessary for their full implementation. This notion demonstrates the need to consider intersectionality, as various forms of inequality and power relations intersect (Walby 2005). Public policies must take place in the context of all these inequalities (sometimes double or triple inequalities), and there must be coordination between marginalized groups; otherwise, there may be a "fight" between groups to determine which is the most oppressed to have more political support (Squires and Kantola 2010).

Thus, despite debates on intersectionality in academia and even at the institutional level, the measures taken are still insufficient to eliminate multiple forms of discrimination. Theoretically, this is an easily accepted concept, but putting it into action and having a transformative approach is a rather complicated matter. Although not impossible. It is only with constant debate of different perspectives between

marginal groups, civil society, academia, and institutions, both at the national and international levels, that it is possible to move forward with specific measures that consider multiple discriminations and do not favor a specific group over another.

4. Conclusions

Intersectionality as an analytical tool helps understand how power relations interact and mutually reinforce. Moreover, gender-based intersectional justice means that women and men possess equal conditions for achieving their full potential, enjoying human rights, and contributing to and benefiting from economic, social, cultural, and political development. It addresses the structural privileges and disadvantages of groups facing the highest structural barriers to society. Hence, discrimination should be considered systemic, institutional, and structural, rather than the outcome of individual intentions.

Considering the existence of different discriminatory conditions such as ethnicity, gender, socioeconomic class, sexual orientation, disability, religion, and age, social institutions must be properly activated to ensure that intersectional justice, including education, plays a major role in promoting these ideals.

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Part 3: Women's Rights and Discrimination

11. Women's Rights as Patients

Ana Paula Cabral

Abstract: Each subject, as a patient, assumes the centrality of modern health systems. As a legal good, the protection of health has the dignity of a fundamental right, even if of social nature, materialized in measures of different nature, namely political and legislative. Therefore, each patient, as such, is a holder of a set of rights. Having analyzed the fundamental right to health protection, a set of patients' rights of universal dimension were identified. The specificities of women's rights as patients were analyzed, and it was concluded that there is a set of rights that women hold due not only to biological and reproductive particularities but also to the special social environment women live in. The possible connection between these rights and the principle of gender equality was analyzed, concluding that there is a bi-univocal relationship between both. It was also considered that the intervention of new digital technologies, including artificial intelligence, may contribute to guaranteeing the basic right of access to high-quality healthcare services, and also to gender equality.

1. Introduction

The issue of ill patients' rights assumes outlines of great relevance in today's health systems, with ill patients at its core. The focus of health systems in the so-called civilized world determines (or should determine) their development and characterization. Thus, the guarantee of ill patients' rights appears as an imposition of the good development of health systems, materializing the right to health protection, as a fundamental social right, common to the different legal systems of the States of old Europe, humanist nature, and other similar systems in the so-called developed and civilized world.

Ill patients' rights or, rather, their defense, is a path toward the realization of the fundamental right to health protection. The principle of equality, in all its dimensions, requires affirmation and effort toward the respective realization of the principle of gender equality. The link between the protection of ill patients' rights and this principle determines the consideration of whether there is any specificity of ill patients' rights or, at least, of some of them when they are conferred on women.

Thus, this study reflects on the defense of the latter as a means of contributing to gender equality. Notably, it only considers gender equality between men and women. Any reference to gender excludes any other dimension of the human gender. Moreover, by way of delimitation of the object of this work, this study only focuses on the rights of ill patients, excluding the approach to their corresponding duties. This methodological strategy delimits the object of reflection, which has nothing to do with forgetting or devaluing these duties, as the study recognizes their mandatory and necessary existence.

Note that the systematic use of the term "ill patient" instead of just patient, user, or client, among other possible designations is because not all users of healthcare facilities or patients are sick or ill. Although most of them are ill, sometimes patients are only seeking to prevent a disease for preventive health benefits, considering the broad sense of the word according to the concept defended by the World Health Organization (WHO).

2. General Framework of the Problem

As the ill patient is at the center of the health systems of the so-called civilized nations, the issue of the rights of healthcare users is of paramount importance. Accordingly, this study reflects such importance. Subordinated to the theme identified, it fundamentally aims for a transnational approach. However, in some respects, the study references the Portuguese legal framework, broadening, from there, the spectrum of the reflection.

The right to health protection is a fundamental social right, integrating different catalogs of fundamental rights of various legal systems. Notwithstanding its social nature, as it concerns the health of every individual, it is one of the most relevant rights. Consequently, it is one of the rights to which a Social State, such as the Portuguese State, must pay more attention. After all, the health of each person, considering the concept of health in a broad sense and following the WHO, which considers it as "a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity" is, without a doubt, of immeasurable value for each individual. Further, the right to its protection is of extreme relevance for each individual and their society of residence in general.

As ill patients' rights are an extension, a concretization of the right to health protection, the analysis and reflection on the latter is an inescapable and approachable consequence of that fundamental right. Given that the protection of ill patients' rights should be a priority for health systems or that ill patients should be at the core of these systems, this study must note the new reality of Artificial Intelligence (AI) in all areas of life, with great emphasis on the health sector. This reality will certainly, in the short term, have a major impact on health in general and the rights of ill patients in particular.

Unfortunately, gender equality still does not exist in the 21st century. Thus, achieving gender equality and the empowerment of women and girls is recognized as the fifth objective of the sustainable development (SDG) goal of Agenda 2030 (United Nations 2015), where gender equality, more than a fundamental human right, is taken as a "necessary basis for a peaceful, prosperous and sustainable world" (United Nations 2015).

Despite the progress in gender equality in recent decades, the advances have not been sufficient. Indeed, recent years have seen a regression, partly because of events such as the pandemic, making it impossible to achieve the goal of gender equality by 2030.

The Sustainable Development Goals Report 2022 (SDGs 2022 Report) (United Nations 2022), reveals the state of implementation of the 2030 Agenda for Sustainable Development, using the latest data to make the most recent estimates in its approach. Accordingly, the data demonstrates the regression. Despite the ever-increasing intervention of women in the relentless struggle, equality remains non-existent. Thus, it is necessary to reinforce the adoption of measures to achieve gender equality of a political and legislative nature and raise the awareness of all, particularly women, such that they learn about their rights and are encouraged to win them.

As this research provides neither the forum nor the time to present the data that prove these assertions, it is limited to stating this reality and presenting its contributions to this cause regarding health. For example, the financing of certain healthcare services for women, which is not always conducted in an equal manner in the different healthcare "systems," has, at least in some of these systems, in recent

years been undermined and even interrupted. Therefore, the rights of ill women, even when they are recognized, have not followed a linear path and have sometimes been violated as noted below.

This study begins by considering the rights of ill patients and outlining a general overview of these rights, drawing attention to the existence of some specificity when they are held by women. It endeavors to identify a common thread between them and their connection to the realization of a health policy for gender equality policy. It also identifies some specific rights of women.

Considering that the current reality is, without a shadow of a doubt, a period of change, transition, modification of life, and integration of individuals worldwide, at a global level, the study addresses the theme of the influence of technological evolution and digital transition, specifically AI in the rights of ill patients. AI is already present in our daily life. This presence is felt in several areas, and the level of its intervention is varied.

Sometimes visible, sometimes not so visible, the perspective is that this presence will be increasingly reinforced. As the health sector is among the areas where technology and the evolution of knowledge are felt most, AI appears as a field of application par excellence to improve the provision of healthcare and contribute to improving human health, preferably by prolonging life, with the best possible quality. Again, this intervention may affect the rights of ill patients and, consequently, the rights of ill women. For this reason, it is mandatory for this study to address it.

3. State of the Art

(i) The right to health protection as a fundamental social right has already induced much discussion about fundamental rights. The rights granted to ill patients, increasingly considered to be at the core of health systems, have also been the subject of study. Gender equality is an issue that is important in academic circles, for women, and for human beings in general (Correia et al. 2021). It is a topic that is studied as much as the rights of ill patients. However, the study of the rights of ill patients from women's perspectives (i.e., the analysis of the rights of ill women patients and the specific rights of ill women) have not received the same attention.

(ii) A literature review revealed examples of work on women's rights in states that ostensibly, according to the values advocated in Western democracies, do not recognize these rights, or, even if they do, often violate them. Most of the literature on women's rights, gender equality, and health focuses on the perspective of women as health professionals, mainly physicians, and the respective limitations to their professional development in the field of medicine and certain specific areas, such as surgery, with emphasis on certain types of surgeries (Cil and Easson 2018).

4. Objectives

This study analyzes the rights of ill women patients, their relationship with the principle of gender equality, and the possible current and foreseeable influence of AI. It subdivides these general objectives into specific objectives: identification of normative instruments of international scope on the rights of ill patients, women's rights, and gender equality; analysis of and reflection on these normative instruments;

consideration of the ethical implications of the rights in question and evidence of the connection between the defense of the rights of ill patients and women; and the contribution to the realization or reinforcement of the principle of gender equality.

5. Materials and Methods

Accordingly, to achieve the above-mentioned objectives, this study reviewed Portuguese and foreign bibliographies and national and international normative contents. It employed search engines and reference management programs, such as Mendeley, consulting reference databases, such as Pubmed and Scopus, and the Web of Science portal.

6. Development

6.1. The Protection of Health as a Legal Asset Versus Ill Patients' Rights

A prerequisite for the recognition of the rights of ill patients is the right to health, which in some legal systems, such as the Portuguese system, is a constitutional right (i.e., a fundamental social right). Regarding the protection of health as a legal asset at the international level, the Universal Declaration of Human Rights (UDHR), adopted and proclaimed by the General Assembly of the United Nations (resolution 217 A III) on 10 December 1948, already enshrined health. Article 25 affirms the right of every person to a standard of living, adequate for the health and well-being of himself and his family, including food, clothing, housing and medical care, and necessary social services (de Oliveira et al. 2021; Cançado Trindade and González-Salzberg 2024; Gruskin 2019; Smith 2019).

Note that, throughout the UDHR text, equality is very much a constant. Starting with this statement in its preamble: "recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice, and peace in the world." It expressly refers to equality between men and women when it states that "in the Charter, the peoples of the United Nations reaffirmed their faith in fundamental human rights, in the dignity and worth of the human person and in the equal rights of men and women." Article 1 expressly stated that "All human beings are born free and equal in dignity and rights." It continues in Article 2 that "Everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, color, sex, language, religion, political or other opinion, national or social origin, property, birth, or other status." Article 7 then states, "All are equal before the law and are entitled without any discrimination to equal protection of the law."

Throughout the text, it is repeatedly stated that "Every human being" has the rights identified in the UDHR. That is, the principle of gender equality is a presupposition throughout the document. The Ottawa Charter for Health Promotion ("Ottawa Charter," 1986) was approved at the first International Conference on Health Promotion, held on 21 November 1986. This document was intended to set out guidelines for achieving Health for All by the year 2000. The health concern, at a global level, somewhat became concrete in this document. Although the needs of the most industrialized States had determined relevant discussions, the promotion of Health is defended as a continuum, which should involve individuals and communities acting as organizations within themselves to develop their capacity to take control to improve their health (Taket 2019).

The goal was "to achieve a state of complete physical, mental and social well-being, the individual or group should be able to identify and fulfill their aspirations, satisfy their needs and modify or adapt to the environment." Indeed, Rui Nunes (2022b) notes that the right to health protection should be universal. In this digital world, health must be global (Nunes 2022a). Therefore, this Charter consecrates Health in a "positive" sense, and its achievement does not depend only on the action of the health sector "stricto sensu" but involves all sectors of the economy, which should strive to promote it.

The Charter of Fundamental Rights of the European Union (European Parliament 2012), proclaimed in Nice on 7 December 2000, the right to the protection of health, enshrined in Article 35. It states that "Everyone has the right to preventive healthcare and the right to benefit from medical treatment under the conditions established by national laws and practices. A high level of human health protection shall be ensured in the definition and implementation of all Union policies and activities." (Rechel and McKee 2014; van de Gronden et al. 2011; Becchi and Mathis 2019). Health as a legal asset in some legal systems, as is the case in Portugal, deserves fundamental protection (i.e., the right that protects it is recognized as a fundamental social right) (Canotilho and Moreira 2007; Canotilho 2018). The guarantee of the fundamental right to health protection is a long-standing and constant task of the State, which is social in nature and whose citizens are requesting, or rather demanding, certain services following the last armed conflict on a global scale. The implementation of this right falls within the scope of its duties (de Andrade 2019).

Hence, some consider it to be a "mandate for continuous performance, in the constant fulfillment of the State's duties in this area" (Monge 2019). Notwithstanding this positive dimension of the right to health protection, it also has a negative dimension. For instance, consider the words of Gomes Canotilho and Vital Moreira in the annotation of an article of the Portuguese Constitution (Canotilho and Moreira 2007): "The right to health protection has two aspects: a negative one, which consists of the right to demand that the State (or third parties) refrain from any act that is harmful to health; another, of a positive nature, which means the right to state measures and benefits aimed at the prevention and treatment of illnesses. In the first case, we are in the domain of traditional rights of defense, sharing the corresponding characteristics and legal regime; in the second case, we are dealing with a social right in the proper sense, with the corresponding constitutional configuration."

Notably, regarding the characterization of the negative dimension of the right to health protection, its intrinsic connection with the principle of the dignity of humans (Monteiro and Nunes 2020) and corresponding autonomy is at the core of the Portuguese legal system of humanist and democratic nature, even the right to life and integrity (Miranda and Medeiros 2005).

It is worth emphasizing that the right to health protection is a social right, requiring realization by the State, "with a certain degree of normative binding force."[1] This fundamental right and others of the same nature integrate legal norms that are binding, determining that the legislator carries out actions that embody its

[1] In the 1980s, the Portuguese Constitutional Court considered the right to health protection as a constitutional obligation of the State, a means of realization of a fundamental right "and not a vague and abstract line of action of a merely programmatic nature." (Constitutional Court 1984, 1989).

exercise.[2] Assumedly, this right is common to all and translated into the enjoyment of the best state of physical, mental, and social health, presupposing the creation and development of economic, social, cultural, and environmental conditions and guaranteeing sufficient and healthy standards of living, work, and leisure.

This right implies a shared responsibility between individuals, society, and the state, covering access to health promotion, prevention, treatment and rehabilitation, long-term care, and palliative care during the course of one's life. It also recognizes the obligation of society to contribute to health protection, which entails action, not only at the level of health policy but across all policies and sectors of the economy.

6.2. Ill Patients' Rights

The defense of the aforementioned rights of ill patients is of the utmost relevance in health systems where the citizen or ill patient occupies a central place. Regardless of the strict enshrinement of ill patients' rights, the type and number of diplomas in any legal system, and their formulation, their recognition is general.

This study has identified a plurality of ill patients' charters of rights, hosted in different States and issued by international organizations and professional associations (Declaration of Lisbon on the Rights of the Patient by The World Medical Association (1981)) of ill patients, even having the status of a legislative act (Active Citizenship Network 2002).

These documents, although they vary in some respects, have in common, as a starting point, the affirmation of the human dignity of the ill patient, their autonomy, and their right to access healthcare, without discrimination and with justice. Indeed, this is an area where the traditional principles of bioethics have great application (Nunes 2017). Starting from the affirmation of the right to health protection, regarding the principles of autonomy, equality, non-discrimination, confidentiality, and privacy, this study identifies some rights we defend as being common to all ill patients, thus designating them as universal (Farrell and Dove 2023).

Notably, some of these rights may have to be reconciled with each other or may not be fully realized, given a de facto impossibility, such as the right to treatment innovation, regardless of the financial implications of such innovation. The realization of this right may have to be adjusted to the resources available. In line with the Convention on Human Rights and Biomedicine (Convention for the protection of human rights and dignity of the human being with regard to the application of biology and medicine: Convention on Human Rights and Biomedicine, 1997) of the Council of Europe (1997), it is necessary to reconcile health needs with the availability of resources and ensure "equitable access to appropriate quality health care" (Article 3).

In any case and under all circumstances, human dignity, identity, integrity, and other fundamental rights of each ill patient must be protected and guaranteed, even in the face of the thirst for knowledge and attempts to evolve, specifically in the field of medicine. Accordingly, this study proposes a Charter of Rights for ill patients, following a systematization that is, arguably, the most defensible.

[2] This is the case in the Portuguese legal system, such as Law no. 95/2019 of 4 September, in *Lei de Bases da Saúde* (Law establishing the Basis for Health), where its definition and the enunciation of ill persons' rights are provided, or Law no. 15/2014 of 21 March, where the legislator consolidated ill persons' rights scattered over various legal diplomas.

1. Right to information:
    a. The right to access own health information without recourse to a health professional.
    b. Right not to be informed.
    c. The right to obtain information about waiting times for the healthcare needed.
    d. The right to appropriate, objective, complete, and comprehensible information about own health status and foreseeable evolution, healthcare to be provided and/or delivered, possible treatments, their advantages and risks, and alternatives.
2. Right to privacy:
    a. Right to the protection of personal data and privacy.
    b. Right to confidentiality regarding personal data.
    c. Right to confidentiality and secrecy about one's health situation, even after death, except, among descendants, to determine health risks.
3. Right to decide on the type of healthcare received and/or to be received:
    a. Right to consent (and/or refuse consent) to healthcare.
    b. Right to issue advance directives and/or appoint a healthcare proxy.
    c. Right to choose the healthcare provider within the limitations of existing resources.
    d. Right to participate in the decision-making processes regarding own health.
4. Right to participation:
    a. Right of association to defend their rights, promote health, and prevent illness or other forms of participation.
    b. The right to make suggestions, complaints, and claims regarding the provision of care.
5. The right to be accompanied in the provision of healthcare by a person of their choice.
6. Right of access to healthcare.
    a. Right to adequate and personalized care.
    b. Right to care in a medically acceptable time.
    c. Right to care with dignity.
    d. Right to care using the best scientific evidence.
    e. Right to best practice care, quality, and safety.
    f. Right to innovation in care, such as AI, following the best international standards.
7. Right to opt for and to receive religious assistance and refuse it.
8. Right to health education.

The noted rights of ill patients, some of which are asserted in absolute terms on a case-by-case basis, may have to be reconciled with the available resources. This study expresses an opinion only on the right to information and the right to decide on care. This option stemmed from the evidence of the connection of these rights to bioethical principles, such as the principle of autonomy. The right to information is justified by the need to know the situation involving the ill patient to allow for an

informed decision to be made regarding their health, as a subject with the capacity to self-determine.

Exceptionally, information may be withheld from an ill patient if the patient is firmly convinced its transmission could create a serious risk to health or even life. The principle of the autonomy of each individual, as one of the principles of bioethics (Nunes 2017), determines the consecration of the ill patient's right to only be the object of any care provision if the patient consents to it (except in legally prescribed situations, such as when the ill patient is not in a position to freely give consent) (Nunes 2014). Naturally, this right must not affect the situations established by law, which may justify, occasionally and exceptionally, the inexistence of this consent.

First, consent must be free. No individual may be forced to accept or refuse care. However, it should be noted that this consent presupposes its prior clarification. Consent can only be considered valid if its author is consciously aware of the consent. Moreover, given a right that constitutes a voluntary limitation to personality rights, which is a legal mechanism of generic protection of the personality, the consent of the respective holder may be withdrawn at any time. Nothing prevents the inherent consequences resulting from this action, such as the obligation to compensate for the damages resulting from the alteration of the person's will, embodied in the withdrawal of consent.

6.3. The Rights of Ill Women

Despite all the campaigns and efforts toward gender equality, empirically, it is evident that equality has not yet been achieved, even in the so-called civilized countries. The conviction from experience is confirmed by the evidence of statistical data.

Contributing to the necessary gender equality, numerous initiatives and projects are emerging. This study highlights, for its significance and importance, the proposal of the Universal Declaration of Gender Equality, signed by a team led by bioethics expert Professor Rui Nunes, and presented to the UNESCO National Commission.

In his words: "This project is born from the awareness that certain values emerge from equal opportunities and that all people, at birth, have the same dignity and the same fundamental rights."

The lack of gender equality, or rather the ostensible gender inequality in some environments, even in some so-called developed States (Cil and Easson 2018; Pucci et al. 2017), is such that the UN, in the "Transforming our World: 2030 Agenda for Sustainable Development" resolution, approved by world leaders at the summit on 25 September in New York, notes that gender equality is among the 17 goals to be achieved. This international document openly assumes the non-existence of gender equality and sets itself the goal of achieving it by 2030. Hence, the necessary measures must be taken to eliminate discrimination against women and all forms of violence against women.

Measures are also needed to value women's work, guarantee their full and effective participation in all sectors of activity, and ensure equal opportunities at all levels and in all decision-making areas. In the area of health, there is a need to ensure universal access to sexual and reproductive health and reproductive rights in conformity with the Program of Action of the International Conference on Population and Development and the Beijing Platform for Action, including the review conference documents (Lamačková 2008).

Reforms are needed to equalize women's rights to their economic resources and access to ownership of different types of property following their national legal order (Council of Europe 2020) The empowerment of women, advocated in Agenda 2030, largely depends on access to and use of technologies, especially information and communication technologies.

In summary, the 2030 Agenda foresees the need to adopt and strengthen legislative measures to promote gender equality and the empowerment of women. After mentioning the rights of ill patients and reflecting on some of them, it is important to consider the specific rights of ill women.

Undoubtedly, regarding the rights of ill patients in general, the formally pursued and affirmed objective is that of their defense in favor of human dignity. Every person (regardless of their gender) should have their rights guaranteed without discrimination. However, we would like to highlight some of these rights which, arguably, have specific characteristics when held by a woman.

First, consider the right to give or refuse consent to healthcare, the right to protection of personal data and privacy, the right to information about the healthcare provided or to be provided, and the right to be accompanied in health services. Regarding the right to give or refuse consent to the provision of healthcare, this issue satisfies the noted specificity. The fact is that their autonomy and right to self-determination can often be called into question regarding, for instance, care relating to their reproduction. The guarantee of autonomy or the power of self-determination for women, who have the right to give consent, duly clarified, to the provision of care or to refuse it, regardless of the indication of a third party other than the physician, constitutes a contribution to the realization of the principle of gender equality, which demonstrates the noted specificity.

Interference in the exercise of this right by a third party is much more likely to occur when it corresponds to a woman than to a man, especially when the person interfering is a man, even if he is the physician. Despite the legal imperative, in some environments, there remain those who do not consider equality between men and women to be a reality and give men the decision-making power in the family, especially regarding the woman with whom they form a family, either formally or in a non-marital partnership. This situation is certainly aggravated when the type of healthcare is related to the woman's ability to reproduce.

Women's right to reproduction, like the right to sexual health, is intrinsically linked to other human rights, such as "the right to life, the right not to be tortured, the right to health, the right to privacy, the right to education and the prohibition of discrimination" (United Nations 2014). Moreover, the Committee on Economic, Social and Cultural Rights and the Committee on the Elimination of Discrimination against Women have assumed, as obligations of the States, the duty to respect and protect the rights relative to the sexual and reproductive health of women.

Intrinsically linked to this is the right to information about the healthcare to be given or provided to the woman. The woman must be given all the necessary information, unless she does not want it or cannot receive it, to be properly informed such that she can consent to or refuse care. The specific nature of this right coincides with that of the right noted above.

Another right with specificity, when held by a woman, is the right to the protection of personal data and confidentiality of her private life. Arguably, despite the systematic formal affirmation of a gender equality status, women are often in a

more fragile situation than men. Proof of this situation is the frequency with which we hear news of ill women being taken advantage of by others, usually men, and sometimes health professionals in whom they legitimately confided. This situation is aggravated when, beyond being women, there is a cause for fragility such as age or advanced disease. Thus, guaranteeing the right to the protection of personal data and the privacy of the ill woman certainly contributes to gender equality.

Finally, as with the rights above, there are specificities in the right to accompaniment in health services when this right is held by a woman. The ill woman has the right to be accompanied in situations foreseen for any ill patient, as previously identified. However, there is a case that is exclusive to women: only a woman can be in a parturient condition.

From the principles in the Declaration of Lisbon on the Rights of the Patient (World Medical Association 1981), adopted by the 34th World Medical Assembly in Lisbon, Portugal in September–October 1981, amended in 1995, revised in 2005, and reaffirmed in 2015, there is the repeated affirmation of the denial of discrimination in the provision of healthcare.

In this document, the concern is with the affirmation of the prohibition of discrimination in the provision of healthcare to all people. No one can be discriminated against; thus, women cannot be discriminated against in the provision of healthcare. Consider, for example, the right to accompaniment, which should be recognized for ill patients in general, though not absolutely, becoming more specific when it is held by a woman.

This right takes on the dimension of exclusive entitlement of women when it comes to the accompaniment of pregnant women during childbirth. However, this right of the birthing woman also applies to the father of the unborn child. Even so, the woman's right not to be accompanied, if she so wishes, should be defended. This refusal can always be grounded, on a case-by-case basis, on medical advice. Even further, guaranteeing the realization of this right, in this negative dimension, contributes greatly to gender equality.

6.4. Human Rights, Ill Women's Rights, and Gender Equality

Clearly, human rights are embodied in various international documents and replicated in many legal systems at a global level, constituting an irreversible human achievement (Brill 2000, 2024).

One of the principles intrinsically linked to these rights is the principle of gender equality. The affirmation and defense of the above-mentioned rights and this principle do not prevent violations of these rights. However, there is already an awareness of the need for an evolution in the recognition of human rights, which should be seen from a gender perspective. In concrete terms, it is sufficient to affirm and defend the human rights of women, which should be translated into a new formulation of rights with its specificities (Askin and Koenig 2000).

Peters and Wolper (1995) argue that "traditional formulations of human rights are based on a male model applied to women, as an afterthought." Another criticism, among several, of women's specific human rights is that of Charlotte Bunch, who considers these human rights in a restricted formulation, arguing for the need to affirm the specific rights of women (Bunch and Carrillo 2015).

Some studies attest to the value of these positions, highlighting examples where the condition of an ill patient being a woman, by itself, determines the damage to her

health situation. This situation is the case regarding gender differences in the neurobiology of Alzheimer's disease that disadvantage women or, considering resilience in enduring pain, undermine diagnoses (i.e., depression and personality disorder).

As noted, the right of access to reproductive healthcare, as a right of the ill woman, is specific. The limitation of access to certain types of treatment, as is the case of artificial insemination, results in the violation of the right to access care with equity and, consequently, the violation of the principle of gender equality. That is, if ill women's rights are properly formulated, defended, and guaranteed, they contribute to realizing the principle of gender equality, guaranteeing the fundamental principle of equality.

Hence, some norms shape health systems, which are translated into restrictions instead of the expected creation of conditions of effective gender equality. This situation is because the affirmation of the rights of ill patients is made in a classic, traditional way, whose definition was based on the male model and not adapted, when necessary, to the specificities of the feminine gender.

Moreover, this lack of attention to the female gender in the ownership of rights as ill patients is often replicated with women when they are health professionals. However, this study will not comment on this aspect, as it is beyond the scope of this research.

Despite the recognition of some ill patients' rights, it is not uncommon to observe the violation of health rights, from a sexual and reproductive perspective, in different forms. On close examination (United Nations 2014), it is possible to list examples of the refusal of access to healthcare specific to women, provision of such care without the required level of quality, provision of care dependent on the authorization of third parties, the performance of procedures without their consent (e.g., forced sterilization, forced virginity tests and abortion), female genital mutilation, and even early marriage.

In fact, the violation of the rights of ill women is closely related to traditions and values that despise these rights in a society with patriarchal roots, which in many areas of the world has evolved little or not at all. In others, it only underwent an apparent evolution. These traditions and values jeopardize women's right to health and may have fatal consequences; they damage overall health, violating the principle of gender equality.

It is necessary to adopt solutions in the different health systems that consider the specificities implied by the gender difference in the right to health protection and the rights of ill patients, contributing to access to health, in a broad sense, for all, and, thus, to sustainable development (Hay et al. 2019). The European Union, in Horizon 2020, has considered gender equality as a priority.

Of particular relevance, regarding gender equity/equality in biomedicine at the European level, is the Council of Europe's commitment to gender integration (Goal 6 of the Gender Equality Strategy 2018–2023) and the Recommendation CM/Rec(2008)1 of the Committee of Ministers for Member States on the inclusion of gender differences in health policy (adopted in 2008), openly acknowledging the possibility of a link between gender inequalities and problems of access to healthcare.

Gender equality in all areas, but specifically in the health sector, is important for obtaining the best health, social, and economic results or gains (Shannon et al. 2019). However, it implies risks for health because, often, the defense of values in which this discrimination is translated and how it is practiced induce exposure to disease

because of different susceptibilities to the disease, the rooting of prejudices, and even obstacles to the evolution of science. Violence against a certain category of people (in this case, women) constitutes discrimination of this nature.

These types of discrimination primarily damage the health of those discriminated against, which can result, for example, in (increased) anxiety, damaging health in general. As noted, gender equality is a basic principle of the UDHR and has been reaffirmed as indispensable for a peaceful and sustainable world, essential for achieving health, social, and economic development.

The principle of gender equality is among the most relevant drivers of the defense of the right to health. The current recognition of the female gender in various areas of knowledge, such as science and medicine, translates as a contribution to gender equality and global health, drawing attention to future opportunities. Thus, beyond quantitative gender equality, it is important to strive for a cultural shift that embraces values such as transparency, integrity, impartiality, and justice. With the evolving landscape, more evidence is required to innovate and realize true gender equality for everyone, everywhere. Promoting gender equality is not simply instrumental to health and development. The impact has wide-ranging benefits, and is a matter of equity and social justice for all.

6.5. The Rights of Ill Patients and the Intervention of Artificial Intelligence

AI emerged in the last century, and, in the last few months, it has advanced so rapidly that it has become the subject of discussion. AI has caused a two-fold reaction: admiration with a desire for its realization and admiration with considerable fear. Unquestionable is this digital evolution of machines that, after being programmed by humans, machines are not limited to processing data with greater speed than humans; they can also learn.

If there is one area where technological evolution can be felt, it is the health area. Thus, the intervention of AI will most likely be impactful in the health sector ("Artificial Intelligence is the Future of Medicine, 2023 is a Standout Year"). The many examples of AI intervention in the health sector will surely multiply, with the emergence of ethical and legal implications. As far as the rights of ill patients are concerned, many changes are necessary (Healthcare Management 2023). An example is the right to make a complaint about a health service.

Admitting that this gives rise to an obligation and compensation and that the provision of care mentioned in the complaint was "operationalized" by an AI, a wide range of questions arise, and an equal number of answers may be offered.

No doubt the AI intervention will impact the rights of ill patients. Some of the impact will be positive. Hence, to avoid, or at least minimize, the negative impact that may eventually arise, it is necessary to regulate the situation as much as possible.

The European Union is already investing heavily in this direction, stating that it intends to play an important role in AI globally (European Commission 2021).

In fact, it is the author of the first AI regulatory document, the Regulation (EU) 2024/1689 of the European Parliament and of the Council of 13 June 2024 (Council of the European Union, European Parliament 2024).

Each Member State, as is the case of Portugal, must address this at the national level. However, given the nature of the issues, regulatory intervention will only be effective if it is a transnational intervention. One among many legal problems to be resolved, in terms of AI intervention, is the emergence of the concept of

cyberpersonhood (Salmen and Wachowicz 2021; Filho 2018), as the dilution of the attribution of liability for actions carried out by AI is possible (Negri 2020; Morais and Santos 2024; Gupta 2024).

7. Conclusions

The protection of health as a legal asset in various legal systems has constitutional protection, consubstantiating, in the first line, a fundamental social right, beyond the protection conferred by other diplomas of ordinary nature. The realization of this right implies political, legislative, and administrative measures to be taken by individual states and at the global level.

Ill patients, as human beings with their own recognized dignity, are granted a plurality of rights—the rights of ill patients. Some of these rights, when conferred to women, have unique specificities. Others may only be exercised by women. The principle of gender equality emerges as the basis for guaranteeing the rights of ill women and the protection of their (overall) health; thus, their protection is imperative.

The intervention of AI in health, with necessary consequences for the rights of ill patients in general and regarding women's rights in particular, even if it needs maximum consideration and mandatory regulation, given the various ethical implications it entails, can contribute to gender equality, or its reinforcement, and improvement of global health.

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12. Gender Discrimination in Medically Assisted Procreation

Helena Pereira de Melo

Abstract: In this chapter, we seek to analyze the current legislation on Medically Assisted Procreation (MAP) in the light of non-discrimination on the grounds of gender. Within the framework of the Council of Europe, the Istanbul Convention, established in 2011, contains a definition of gender, for the purposes of its application, that focuses less on the individual and subjective experience of what it means for each person to belong to a particular "gender" and more on the social construction of gender in each concrete society. The proposal to apply the principle of gender mainstreaming, i.e., to consider the "gender" dimension transversally in all dimensions of legal, political, and administrative activity, was made in September 1995 in the Beijing Platform for Action. Examples of the application of this principle are laws in the areas of contraception, abortion, Medically Assisted Procreation, rights associated with heterosexual and homosexual unions, parental responsibilities, the recognition of gender identity and the prohibition of unfair discrimination on the basis of this new factor of non-discrimination. The typification of hate crimes in the Criminal Codes of the different countries is, perhaps, one of the most important expressions of the current national Antidiscrimination Law on gender.

1. Introduction

This study analyzes the current legislation on Medically Assisted Procreation (MAP) in the light of non-discrimination on the grounds of gender. The concept of gender adopted for this purpose is that contained in the Yogyakarta Principles on the Application of International Human Rights Law regarding Sexual Orientation and Gender Identity (Yogyakarta Principles 2007). It was formulated at a conference held in Indonesia in 2007 by a group of human rights experts and presented to the United Nations in Geneva in that same year. According to these principles, gender is "the internal, individual, and deeply felt experience that each person has of gender, which may or may not correspond to the sex assigned at birth. This includes personal sense of the body (which may involve, by free choice, modification of bodily appearance or function by medical, surgical or other means) and other expressions of gender, including the way people dress, speak and their mannerisms."[1]

In 2011, within the framework of the Council of Europe, the Istanbul Convention, open for signature by Member States and those who are not members but have participated in its preparation and the European Union, contains a definition of gender for its application that focuses less on the individual and subjective experience of what it means for each person to belong to a particular "gender" and more on the social construction of gender in each concrete society. "Gender" thus refers to "(...) the socially constructed roles, behaviors, activities and attributes that a given society considers as appropriate for women and men" (Council of Europe (2011a, n.d.) is considered (together with sex) to be an anti-discriminatory factor that must

[1] See the preamble to these Principles.

be observed in the implementation of all the provisions of this international treaty (Council of Europe 2011b).

The proposal to apply the principle of gender mainstreaming (i.e., to consider the "gender" dimension transversally in all dimensions of legal, political, and administrative activity) was made in September 1995 in the Beijing Platform for Action adopted at the United Nations Fourth World Conference on Women (United Nations 1995).[2]

Examples of the application of this principle include diplomas that alter the Law previously in force in the areas of contraception, voluntary interruption of pregnancy, MAP, recognition of rights associated with heterosexual and homosexual unions, the possibility of celebrating same-sex marriages, a different understanding of the exercise of parental responsibilities, the recognition of gender identity and the prohibition of unfair discrimination based on this new factor of non-discrimination. The typification of hate crimes in the Criminal Codes of the different countries is, perhaps, one of the most important expressions of the current national Antidiscrimination Law on gender.[3]

This study focuses on the legislation in force in Portugal regarding MAP and analyzes it from the perspective of not discriminating unfairly on the grounds of gender.

2. Medically Assisted Procreation Techniques

Several diplomas regulate MAP in a detailed way in Portugal, adopted at national[4] and international levels (Portugal 2001). Its interpretation and application by the courts, particularly by the Constitutional Court, have also been essential for the adequate regulation of the matter and the definition of balances, always

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[2] See paragraph 19 of this Declaration.

[3] See Article 240 (Diário da República 1995) of the Criminal Code, which states that:

(a) Whoever founds or sets up an organisation or develops organised propaganda activities that incite to discrimination, hatred or violence against a person or group of persons because of their (...) gender identity (...), or encourages (...) will be punished by imprisonment of between one and eight years.

Whoever publicly, by any means intended for disclosure (. . .)

(a) Provokes acts of violence against a person or a group of persons because of their (?) gender identity (. . .);

(b) Defames or insults a person or group of persons because of their (?) gender identity (. . .) will be punished with a prison sentence of 6 months to 5 years. For more on this article see de Albuquerque (2010, p. 726 and following).

[4] Law no. 32/2006 of July 26, which regulates MAP techniques, is successively amended by Laws no. 59/2007 of September 4, 17/2016 of June 20, 25/2016 of August 22, 58/2017 of July 25, and Law no. 48/2019 of August 14. See also Law no. 110/2019, of September 9, which establishes the principles, rights, and duties applicable to protection in matters of preconception, MAP, pregnancy, childbirth, birth, and the puerperium; the second amendment to Law no. 15/2014 of March 21, which consolidates legislation on the rights and duties of the health service user; Regulatory Decree No. 6/2016 of 29 December 2016, which regulates assisted medical procreation; and Law No. 12/2009 of March 26, which establishes the legal regime for quality and safety relating to donation, collection and testing, processing, preservation, storage, distribution, and application of tissues and cells of human origin and transposes Commission Directives 2015/565/EU and 2015/566/EU of 8 April 2015, as successively amended by Laws 1/2015 of January 8, and 99/2017 of August 25. Also important in this matter are the provisions of the Portuguese Constitution (see, e.g., Articles 1 ["Portuguese Republic"], 26 ["Other personal rights"], and 67 ["Family"]), the Portuguese Penal Code (e.g., Articles 150 ["Arbitrary medical and surgical intervention and treatment"] and 168 ["Non-consented artificial procreation"]), and the Portuguese Civil Code (i.e., Article 1839 ["Foundation and legitimacy"]).

contingent and provisional, between different world views present in Portuguese society on what should (not) be allowed in the area of MAP.[5]

The main legislation that frames it is Law 32/2006 of July 26, which defines its material scope in broad terms in Article 2 ("Scope"). It covers various laboratory techniques for overcoming infertility, such as artificial insemination, in vitro fertilization, and intracytoplasmic sperm injection. It also covers the transfer of embryos, gametes (female or male), and zygotes to the uterus of the woman who will bear the child and the possibility of concluding a surrogacy contract. Analyses of the genetic constitution of the embryo, through preimplantation genetic testing and the "other equivalent or subsidiary techniques of genetic or embryonic manipulation," are also regulated by this diploma.

These techniques may be performed with the gametes (oocytes and spermatozoa) of the individuals that resort to them or with donor gametes. Gamete donation is permitted when "pregnancy or pregnancy without severe genetic disease cannot be achieved through any technique that uses the gametes of the recipients, and provided that effective conditions to guarantee the quality of the gametes are ensured."[6] The donors are not legally considered the parents of the unborn child, which raises in new ways the question of the value of "biological truth" for the law, discussed regarding natural filiation and adoption. What does it mean, in legal terms, to be a "father"? Is a father the one who transmits part of the genetic heritage or the one who raises the child? By carefully selecting (regarding health) the possible donors of sperm and oocytes, are children being created with a "genetic guarantee," benefiting from a "genetic advantage" over those resulting from sexual relations? To what extent are we not, in Western societies, progressively accentuating the dissociation between sex and reproduction?

Today, it is already technically possible to reproduce ourselves through sexual relations, in the laboratory, with gametes from a third party (heterosexual or homosexual), without a partner, and, in the extreme, when declared legal, with our own oocytes, through cloning by nuclear transference or pathogenesis. Moreover, perhaps during this century, it will be considered a rational choice for any person to select, through the use of MAP, the embryos that will be implanted when deciding to have children to try to prevent the emergence of serious illness or disability, in which case the dissociation between sexuality and reproduction will be complete (Greely 2018, pp. 1–2).

The use of MAP techniques may involve significant manipulation of the reproductive cells used and the embryo resulting from them or only their joining in a laboratory or insertion into the woman's body, allowing for fertilization to occur "naturally." The legal problems arising from its application are, thus, very distinct. Intra-marital insemination, for example, only means that the woman is inseminated with her husband's spermatozoa, while intracytoplasmic sperm injection, by allowing men, whose spermatozoa are few and not very mobile, to have children who, if they are male, will be equally infertile, raises questions of "dysgenics" (i.e., the deliberate transmission to the next generation a genetic mutation that will express itself in a disease: infertility). This

[5] See the Judgment of the Portuguese Constitutional Court (hereinafter "CC") nos. 101/2009 of 3 March 2009, 225/2018 of April 24, and 465/2019 of September 18.

[6] See Article 10, paragraph 1 ("Donation of spermatozoa, oocytes and embryos") of Law 32/2006 of 26 July.

absolute contradiction of the results of natural selection is considered by some authors as ethically acceptable (as the child may also solve his infertility problem by resorting to MAP) and inacceptable by others (for artificially and deliberately conceiving children who will be sick because they are infertile).[7]

Apart from the issues of possible unfair discrimination against future generations from the use of these techniques, it also raises serious gender discrimination issues, as indicated by several feminists who have written on the subject. For centuries, in Western civilization, the philosophical concept of woman underlying the delineation of her socio-legal status has been strongly associated with her social role as a "mother." Even today, there is strong social pressure for women to assume this role; MAP techniques can contribute to reinforcing this concept. If a woman cannot (because of illness or postponement of childbearing for professional reasons) reproduce naturally, then she can try the new MAP techniques. Thus, she is often called upon to do so, to become a mother, even if it implies treatments, particularly of a hormonal nature, which may have serious consequences for her future health, increasing, for example, the probability of suffering from oncological diseases. The woman is invited to be, as Gena Corea expressively writes, "*The Mother Machine*." Thus, new and unfair sex-based discrimination emerges (Corea 1985).[8]

Another form of negative discrimination associated with the use of these techniques is discrimination based on socioeconomic status. The treatments necessary for the birth of a child through MAP are expensive. Further, although infertility is classified as a disease by the World Health Organization, and its treatment is assured through the institutions of the National Health Service, the public investment made in this field has proved insufficient to meet the demand for prompt healthcare in this area.[9] As time is a critical factor for successful treatment (a woman's fertile capacity decreases with age), and waiting lists are long for such treatments in Portugal, many choose private health facilities when they have indispensable financial resources. As these resources are expensive relative to the average income of the Portuguese population, the situation generates discrimination based on the socioeconomic status of infertile people: only those who have indispensable financial resources for this purpose can satisfy the desire to obtain a "take-home baby," as expressively named by the North American doctrine (Cooper et al. 2016).

3. Fundamental Principles of Medically Assisted Procreation

The fundamental principles underlying the current legal regime on MAP include respect for the human dignity of all those involved in the application of the techniques and non-discrimination based on genetic heritage or being born through the use of new reproductive technologies.[10]

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[7] For more details on the possible consequences of the application of this technique on the rights of future generations, see Figueiredo (2005).

[8] For more information on the increase in the average age of Portuguese mothers at the birth of their first child, in Portugal, (which stood at 31 years in 2015), see the work of Torres (2018, p. 31).

[9] The World Health Organization defines infertility as "a disease of the reproductive system expressed as the inability to achieve pregnancy after 12 months or more of regular sexual intercourse and without the use of contraception."

[10] See Article 3 ("Dignity and non-discrimination") of Law 32/2006 of July 26. Similarly, see paragraph 3 of Article 26 ("Other personal rights") of the Portuguese Constitution states that "the law shall

Non-discrimination based on genetic heritage is among the essential principles of bio-rights at domestic and international levels and a consequence of the respect for the eminent dignity of all human persons, regardless of their genetic characteristics.[11] At the level of MAP, its application concerns the selection of gamete donors (carefully carried out at the health level with implications for the genetic constitution of the embryo formed through them), the selection of embryos in the Preimplantation Genetic Diagnosis and Prenatal Diagnosis context, and the subsequent decision to terminate (or not) the pregnancy for eugenic reasons.

This question arises, for example, when discussing whether donors with genetically determined profound deafness should be excluded from the donor pool (is deafness a "disease," a "disability," or a "difference" in legal terms?) or whether embryos with trisomy XXI, which are genetically different from the general population, should not be implanted. Reflecting on this discussion, the solution in the United Nations Convention on the Rights of Persons with Disabilities is the right of such persons to "decide freely and responsibly on the number and spacing of their children and on the access to age-appropriate information, education in procreation and family planning, and the provision of the means necessary to enable them to exercise these rights,"[12] (United Nations 2007) as their failure to exercise this right may constitute unfair discrimination on grounds of disability based on their genetic heritage.

The negative side of the equality principle prohibits discrimination based on how the embryo was generated: whether by sexual intercourse or the use of laboratory-based MAP techniques. If, in the past, the discrimination was based on the fact of being born "legitimate" or "illegitimate" (i.e., during a marriage contract or outside marriage), which was considered unconstitutional and revoked with the Civil Code Reform of 1977, the question now arises regarding the mode of in vitro embryo production.[13] As an increasing percentage of the population is born out of the use of these techniques, the strangeness with which they were initially viewed by the various discourses, including the religious one, is gradually fading.[14] However, the current legal discourse continues to be one of the stigmas that may remain associated with the fact that these children are not the result of the "traditional" method of reproduction of human beings (sexual relations), which initially (when the first "test-tube baby," Louise Brown, was born in 1978) was felt with particular

guarantee the personal dignity and genetic identity of the human being, namely in the creation, development and use of technologies and scientific experimentation."

11 See Article 1 ("Object and purpose") of the Convention on Human Rights and Biomedicine and Article 2 of UNESCO (1997).

12 See Article 23(1)(a) ("Respect for home and family") of the Convention on the Rights of Persons with Disabilities, adopted in New York on 30 March 2007, and approved by Resolution of the Portuguese National Assembly No. 56/2009 of 30 July 2009.

13 The amendment of the paternity regime to satisfy the constitutional principle that imposed non-discrimination of children born out of wedlock, resulted from the adoption of Decree-Law no. 496/77 of November 25.

14 For example, the Congregation for the Doctrine of the Faith (1987) of 22 February, states: "The origin of a human person, in reality, is the result of a donation. The one conceived must be the fruit of his parents' love. The child cannot be wanted and conceived as the product of an intervention of medical and biological techniques: that would be reducing the child to become the object of a scientific technology. No one can subject the coming into the world of a child to conditions of technical efficiency to be evaluated according to parameters of control and domination."

intensity. Today, in Portugal, the law determines that it cannot be mentioned in the birth certificate that the child was generated with recourse to MAP techniques.[15]

Another principle underlying the legislation applicable to MAP techniques in Portugal is the principle of subsidiarity, which states that the use of these techniques should be understood as a subsidiary and not an alternative method of reproduction. With the emergence of these techniques, the range of options open to human beings at the reproductive level has widened: reproduction is now possible through sexual intercourse and in vitro within the framework of a heterosexual or homosexual couple, with gametes originating from the couple or third parties, during their lifetime or even after their death. It is even possible to reproduce without a partner, through human reproductive cloning (already technically possible, although prohibited) or, if you are a woman, using donor spermatozoa.

Initially, the Portuguese legislator resorted exclusively to the principle of subsidiarity for the legal framework of these techniques to the extent that the use of these techniques was only declared lawful in case of previously diagnosed infertility, the need to treat a serious illness, or the risk of transmitting diseases of genetic, infectious, or other nature. The use of these techniques as an alternative mode of reproduction was not permitted (e.g., if a couple chose to use these techniques because they did not want to have sexual relations or have children at certain time intervals, thus cryopreserving in vitro-produced embryos to implant them in due course). With the second amendment to Law 32/2006 of July 26, which widened the scope of beneficiaries of MAP techniques to all women regardless of infertility diagnosis, marital status, and sexual orientation, the application of the principle has been mitigated to the extent that, for this group of beneficiaries, MAP effectively comprises an alternative method of reproduction.[16]

One may wonder whether the widening of the scope of beneficiaries should not also be extended to all men regardless of infertility diagnosis and sexual orientation, as single men and homosexual men, single or married, remain excluded from access to these techniques. The discussion centers on the negative discrimination based on sex or sexual orientation these individuals may suffer, as it would be possible for them to reproduce using a surrogacy contract if the latter were to be considered valid with them as contracting parties. The Portuguese legislation in force does not contemplate this possibility, which has been contested by part of the doctrine, particularly with regard to the LGBTQIA+ Movement.

The possible unfair negative discrimination of men is also discussed regarding another rule in the 1982 Penal Code, which states that "whoever performs an act of artificial procreation on a woman without her consent is punished with a prison sentence of 1 to 8 years."[17] Further, whoever performs an act (vg. non-consensual collection of spermatozoa from an unconscious man) of this nature on a man is not punished. Underlying this legal type of crime, is there not, as was the case for decades with crimes against sexual freedom and self-determination, the concept

[15] See paragraph 6 of Article 15 ("Confidentiality") of Law No. 32/2006 of July 26, which states that "the birth certificate shall under no circumstances, including in cases of surrogate pregnancy, state that the child was born through the application of MAP techniques."

[16] See Article 4(3) ("Recourse to MAP") and Article 6(1) ("Beneficiaries") of Law 32/2006 of July 26, as amended by Law 17/2016 of June 20.

[17] Art. 168 ("Non-consensual artificial procreation") of the Penal Code.

of the woman as a fragile and defenseless victim, who must be protected from the man who attacks her? Is there also not the concept of a man as a potential aggressor, whose vulnerability is assumed to be non-existent, as it is not foreseeable that he will be a victim of this type of crime?

4. Prohibited Purposes of Medically Assisted Procreation

The legislator prohibits the use of MAP techniques for certain purposes in fulfillment of the aforementioned principles of its legal framework, in particular that of the dignity of the human person. The use of human cloning for reproductive purposes is, therefore, prohibited on the grounds that predetermination of the genetic heritage of the clone would offend the margin of genetic indeterminacy that exists in sexual reproduction (where two distinct genetic heritages are combined) and could have serious consequences for the future exercise of the rights to genetic identity and the free development of personality.[18] Beyond the right not to be born as the clone of another person, living or dead (which cannot be respected in the case of monozygotic twins), the right not to be cloned, to produce clones of a given individual (e.g., from genetic material where consent for collection has not been given) also results from this prohibition.

Human cloning for reproductive purposes is only permitted in the case of a genetic mitochondrial disease in the mother. In this case, it will be necessary to resort to the donation of oocytes, with the nucleus of the donated oocyte being replaced by that of the ill woman. The clone obtained after the fusion of the nucleus with the donated genetic material, through an electrical or chemical stimulus, is a clone of the ill woman, as it shares the nuclear genome with her.[19]

The prohibition of human reproductive cloning also results from the provisions of the first Additional Protocol to the Convention on Human Rights and Biomedicine, which prohibits the Cloning of Human Beings, signed and ratified by the Portuguese State in 2001. Article 1 states that "any intervention for the purpose of creating a human being genetically identical to another human being, whether living or dead," is prohibited, with the term "genetically identical" meaning, for its application, that a human being has in common "the same set of nuclear genes."

Beyond prohibiting the use of this specific technique, whose appropriateness with the recent advances in Epigenetics must be reconsidered in the medium term, the use of MAP for the improvement of non-medical characteristics (such as skin or eye color) of the unborn child is also prohibited.[20] In these cases, it is considered that it would constitute an instrumentalization of the genetic constitution of the unborn child to the interest of a third party (in principle, the parents), which is offensive to the child's human dignity. The use of genetic preimplantation testing and genetic engineering for improvement with the aforementioned purposes is, thus, prohibited, expressing positive eugenics that would lead to the existence of two types of human beings: the "genetically guaranteed" because their genetic constitution has been

[18] See Article 7, paragraph 1 ("Prohibited Purposes") of Law 32/2006, of 26 July.

[19] See Article 36 ("Reproductive cloning") of Law no. 32/2006 of July 26, which punishes whoever "transfers to the uterus an embryo obtained through the technique of nucleus transfer, except when such transfer is necessary for the application of MAP techniques" with a prison sentence of between 1 and 5 years. See Melo (2019a).

[20] See Article 7, paragraph 2 of Law 32/2006, of 26 July.

carefully chosen or improved and the remaining members of the human species whose genetic constitution would result from the genetic lottery associated with sexual reproduction. This prohibition also aims to prevent the emergence of offensive situations of discrimination based on the genetic heritage of individuals belonging to the second of these groups (Council of Europe n.d.).

Similarly, to prevent eugenic tendencies, in this case, negative eugenics, preimplantation genetic testing of embryos is prohibited regarding "multifactorial diseases where the predictive value of the test is very low,"[21] as no significant benefit accrues to the embryo tested in terms of preventing the future onset of symptoms of the disease. Further, the systematic non-implantation of embryos carrying the pathogenic mutations associated with them would be a measure of negative eugenics, and the harmful effects of that might be disproportionate to the expected benefits.

Moreover, to prevent negative discrimination, though based on another factor—sex—the use of MAP techniques for selecting the sex of the child to be born is prohibited. The aim is to prevent the use of preimplantation genetic testing and prenatal diagnosis techniques to implant or abort embryos or fetuses that do not correspond to the desired sex, which, as a rule, will be male, given the preference still present in certain groups in the Portuguese society to have children of that sex. There is, however, one exception to the prohibition on choosing the sex of the unborn child: where it is necessary for medical reasons, for example, to prevent the transmission of a disease linked to the sex chromosomes, such as hemophilia.[22]

Similarly, the use of MAP techniques for the creation of chimeras or hybrids by fusing genetic material from different species is prohibited. This practice, which is well represented in Greek and Latin mythology, is punishable with a prison sentence of one to five years, as it is considered offensive to human dignity.[23]

5. The Surrogacy Contract

Law 32/2006 of July 26 defines surrogate pregnancy for its application as "any situation in which a woman is willing to bear a pregnancy for another person and to give up the child after birth, renouncing the powers and duties of motherhood"[24] and only allows the celebration of this contract for clinical purposes and if offered free of charge. The existing provisions on the matter are not currently applicable in practice, as the Constitutional Court has declared several of the rules therein to be unconstitutional.[25] In fact, the application of these norms could induce contradictory solutions with other norms in force (e.g., those regarding the voluntary interruption of pregnancy). Paragraph 10 of Article 8 of the above-mentioned law established that the surrogacy contract must contain provisions to be observed "in the event of

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21 See Article 7, paragraph 2 of Law 32/2006 of July 26.

22 In accordance with the provisions of paragraph 3 of Article 7 of Law 32/2006 of July 26, it is permitted to choose the sex of the child to be born using MAP in cases "where there is a high risk of a sex-linked genetic disease and for which direct detection by pre-implantation genetic diagnosis is not yet possible, or where there is a serious need to obtain a compatible HLA (human leukocyte antigen) group for the treatment of a serious disease."

23 See Article 38 ("Creation of chimeras or hybrids") of Law 32/2006 of July 26.

24 See Article 8, paragraph 1 ("Surrogate motherhood") of Law no. 32/2006 of July 26. See Raposo (2017).

25 In particular, it declared unconstitutional, with general binding force, the rules contained in paragraphs 2, 3, 4, 7, 10, 11, and 12 of Article 8 of the referred diploma. See the Judgment of the CC no. 225/2018 of April 24 (Rapporteur: Pedro Machete (Constitutional Court of Portugal 2018).

a voluntary termination of pregnancy." If the Penal Code admits the exclusion of punishment for voluntary interruption of pregnancy in the conditions established in Article 142 and determines in its no. 4 that the decision to perform the interruption belongs, as a rule, to the pregnant woman, how can one accept the lawfulness of a clause in a surrogacy contract in which the pregnant woman renounces, in advance, to exercise her freedom to consent (or not) to an eventual interruption of pregnancy? If the lawfulness of this clause were accepted and the pregnant woman did not comply with it, could she be held liable under civil law for an unjustified breach of the contract she had signed?

Next, one must question how the provisions of this paragraph of Article 8 can be combined with those of paragraph 11: "The contract referred to in the previous paragraph may not impose restrictions on the behaviour of the surrogate mother or impose rules that violate her rights, freedom, and dignity." In light of this provision, is it permitted for the pregnant woman to have sexual relations with her partner, drink alcohol, or smoke during the performance of the surrogacy contract? Did the legislator disregard the best interests, particularly in terms of the future health, of the child that was "ordered"?

Can the woman who signed the contract regret having done so and not accept the implantation of the embryo in her uterus or not deliver the child to the beneficiaries after birth? Law 32/2006 of July 26, only determines that the consent of the beneficiaries is "freely revocable by any of them until the beginning of the therapeutic processes of MAP"; that is, until the uterine transfer. The surrogate mother does not fall within the personal scope of application of this rule, as she is not a "beneficiary of the techniques." The non-consensual uterine implantation of an embryo would constitute an illicit offense to her physical and moral integrity, contrary to her constitutionally enshrined rights. Would there be an obligation for the pregnant woman to compensate the couple to whom she committed herself to deliver the child, given the breach of contract? Or would there be compensation for moral damage if the woman chooses not to deliver the child once the birth has taken place? In this case, would the pregnant woman adopt the child she gave birth to, because according to the legal provisions contained in the aforementioned diploma, she is not considered to be the mother at a legal level?[26] Could the court order the judicial delivery of the child, as has been the case for centuries with the possibility of demanding the judicial deposit of a married woman?

The Constitutional Court of Portugal (2019) has ruled on these issues in Judgments no. 255/2018 of April 24, and 465/2019 of September 18, the second of these judgments having, to a large extent, merely repeated the content of the first.

In the first of these judgments, although the Court did not recognize the existence of a constitutionally enshrined right to resort to surrogate motherhood, it admitted the existence of constitutional values that justify the conclusion of contracts that include it at a legal level in cases where the intended parenthood cannot be achieved in any other way because of medical situations preventing pregnancy. This conclusion does not, in itself, offend the dignity of the child, the surrogate mother, or the fundamental duty of the State to protect the child that will be born using this technique.

[26] According to paragraph 7 of Article 8 of Law 32/2006, "the child born through the use of surrogate motherhood is considered the child of the respective beneficiaries."

The Court considered, however, that certain provisions of the current law on MAP offend constitutional principles and rights. Thus, it declared the unconstitutionality with the general binding force of several rules of Law 32/2006 of July 26. The Court did so regarding the norms contained in numbers 4, 10, and 11 of Article 8 of this diploma, as far as they admit the celebration of surrogacy agreements on an exceptional basis and with previous authorization for violation of the right to the free development of personality and the right to found a family on the part of the pregnant woman, given the restrictions that may be imposed on her and the principle of legal determination for lack of clarification in the law of the limits that may be imposed on the contractual autonomy of the parties.

Regarding paragraph 12 of the aforementioned article, the Court also determines nullity for breach of any of the legal requirements, to the extent that, by imposing nullity, without differentiating as to the degree of seriousness of the breach committed, it infringes the principle of legal certainty and creates legal uncertainty as to the status of a child born under a gestational contract. This uncertainty arises from the fact that the declaration of nullity of this contract would prevent the consolidation of the legal status of filiation, which is offensive to the personality rights of the child.

The Court also declared Article 8(8), along with Article 14(5), unconstitutional with general binding force in the second of the above judgments, insofar as they do not allow the revocation of the consent of the surrogate mother until the child is delivered, on the grounds that it offends her right to the free development of her personality, as enshrined in Article 26(1) of the Constitution of the Portuguese Republic, interpreted following two other constitutional precepts: Article 1, which enshrines human dignity, and Article 36(1), which enshrines the right to found a family.

Finally, it was also declared unconstitutional with general binding force, paragraphs 1 and 4 of Article 15 of Law 32/2006, of 26 July, in the part where they impose an obligation of absolute secrecy on the donation of gametes and embryos, surrogacy, and the identity of the donors and the surrogate mother, as they offend the right to personal identity and the development of the personality of the child born through them.

Given that the decisions of unconstitutionality with general mandatory force produce, as a rule, affects the enforcement of the rule and that the National Council for Medically Assisted Procreation had already authorized the signing of gestation contracts, as the respective therapeutic procedures had begun, the aforementioned declaration of unconstitutionality would imply that the children born via such procedures would be left without an established filiation.[27] Hence, to avoid this situation, the Constitutional Court limited the effects of the declaration of unconstitutionality: it did not affect the mentioned contracts that were being executed by the parties.[28]

Several questions of antidiscrimination law are raised which are difficult to answer, such as whether bearing a pregnancy for another person is a service that does not involve the improper use of the body of the woman providing it, as surrogate

[27] See Article 282(4) ("Effects of the declaration of unconstitutionality or illegality") of the Constitution of the Portuguese Republic.

[28] See the aforementioned Judgment of the CC no. 225/2018 of April 24, and the Judgment of the Constitutional Court no. 465/2019 of September 18, published in the Official Gazette, no. 201/2019, Series I, of 18 October 2019, p. 117 et seq.

mothers are, generally, in countries where the contract is considered lawful, poorer and more uneducated than the women to whom they will deliver the child at the end of the pregnancy.

These arguments were discussed in Judgment no. 465/2019 of September 17, regarding the proposed wording of Article 8 of Law no. 32/2016 of July 26; and Decree no. 383/XIII of the Portuguese National Assembly (Constitutional Court of Portugal 2019; Raposo 2017).[29] The right of the pregnant woman to change her mind after the start of MAP therapeutic processes was not consecrated therein. This solution was declared unconstitutional by the Portuguese Constitutional Court for violation of the right to free development of the personality of the pregnant woman, interpreted per the principle of the dignity of the human person and the right to form a family. The new proposals under discussion in the Portuguese Parliament maintain the solution previously approved by this democratically elected sovereign body of recognizing the surrogate mother's right to regret.

The National Ethics Council for the Life Sciences, in April 2019, in its Opinion No. 104/CNECV/2019 on this possible change in the legal regime of surrogacy, highlighted the risk that, by allowing the revocation of the consent of the surrogate mother, it would allow "the possibility of frustration of the realization of the parental project, even after the therapeutic procedure has been initiated" (CNECV 2019).

It will be interesting to see what position the Constitutional Court will take if these proposals, discussed in Parliament, are approved.

6. Embryonic Research

The current legislation prohibits the creation of embryos for scientific research, which can only occur with embryos that already exist, are surplus (regarding the parental project of the infertile people for whom they were created), or are non-viable. Scientific research is also allowed on embryos obtained by cloning (carried out by somatic nuclear transfer or embryo splitting) (i.e., embryos "obtained without the use of sperm fertilisation").[30] These embryos can also result from "iPs" (stem cells that have been artificially induced to develop such that they behave like embryos), parthenotes (unfertilized oocytes that behave like embryos), or embryos produced from gametes originating from stem cells. The rapid scientific progress that has been made in this area in recent years makes it challenging to provide an adequate regulatory framework. This conclusion is easily reached if one examines the case law of the Court of Justice of the European Union on the patentability of embryonic stem cells.[31]

As per the Portuguese legislation in force, embryo research may only be carried out for therapeutic or scientific research purposes that "may benefit humanity" as

[29] Paragraph 8 of the aforementioned Article 8 is amended to state that "A woman may be a surrogate mother if she is, preferably, related by bloodline to the second degree or up to the fourth degree collaterally, related up to the second degree or adopter of at least one of the beneficiaries." Paragraph 15 of this article stated that "the conclusion of legal business of surrogacy is made by means of a written contract, established between the parties (...), which must contain, among others, clauses having as object 'the provisions to be observed in case of possible voluntary interruption of pregnancy, in accordance with the legislation in force.'" The rights and duties of the surrogate mother are set out in articles 13 a) and b) of the draft law, which do not include the pregnant woman's right to regret.

[30] See Article 9, paragraph 4 ("Research using embryos") of Law 32/2006 of July 26.

[31] Issued mainly in relation to the interpretation of the provisions of Directive 98/44/EC of July 6. See Melo (2019b).

long as it is previously authorized by the entity with regulatory powers in the field of MAP, which is the National Council for Medically Assisted Procreation.

7. The Donation of Gametes and Embryos

The donation of gametes (spermatozoa and oocytes) and embryos is legally permitted when, given the state of medical and scientific knowledge, "pregnancy or pregnancy without severe genetic disease cannot be achieved through any technique using the gametes of the recipients and provided that effective conditions to ensure the quality of the gametes are ensured."[32] The insemination of a woman with donor semen is allowed regardless of medical indication whenever "pregnancy cannot be achieved by any other means," thus materializing the right of women to be mothers outside the context of a heterosexual relationship. The use of fresh semen for insemination purposes is not allowed to prevent the transmission of diseases such as HIV/AIDS; only cryo-preserved semen should be used for MAP purposes.[33]

Donors are not, legally speaking, considered to be the parents of the unborn child because of the donation of gametes or of surplus embryos that have not been used in the context of the parental project of a couple or of a single woman who has resorted to MAP techniques. The child that is born as a result is considered to be the child of the beneficiary of the techniques and of the person who, together with the latter (if any), has consented to the use of MAP.[34]

The Constitutional Court, in its judgments on the constitutionality of rules contained in Law 32/2006 of July 26, has changed its position on the anonymity of the gamete donor. In Judgment no. 101/2009, of 3 March 2009, it was noted that such anonymity would be justified, stating that "(...) this limitation to the knowledge of the progeny (although not of absolute character) is justified, as has been shown, by the need to preserve other constitutionally protected values, so that it can never be understood as arbitrary discrimination capable of jeopardizing the principle of equality between citizens" (Constitutional Court of Portugal 2009).

Thus, a regime of "mitigated anonymity" was accepted insofar as, though the rule was that the identity of the donor was not accessible in cases of heterologous procreation (i.e., by a couple of different sexes using gamete donation) or single-woman or female couple procreation, access to information on the identity of the donor was allowed in some circumstances. Law no. 32/2016 of July 26, allowed it if there were "weighty reasons recognised by a court judgment" and not knowing this identity would cause the unborn child intolerable suffering. It also allowed, through the National Council for Medically Assisted Procreation, access to genetic information to determine whether there was a risk of incest in the event of a foreseeable marriage between children born through MAP or the transmission of a hereditary disease.

However, in Judgment no. 225/2018 of April 24, the Constitutional Court significantly changed its position on the matter, considering that it deserves constitutional

[32] See paragraph 1 of Article 10 ("Donation of spermatozoa, oocytes and embryos") of Law No. 32/2006 of 26 July.

[33] See Article 19 ("Insemination with donor semen") of Law 32/2006, of 26 July.

[34] See Article 20 ("Determination of parenthood") of Law no. 32/2006, of July 26 and Article 1839 ("Grounding and legitimacy") of the Civil Code that does not allow the judicial challenge of parenthood based on artificial insemination to the spouse who has consented to it. On the legal relevance of the consent of the beneficiary of heterologous procreation who has not contributed to the MAP process with reproductive cells, see Supreme Court of Portugal (2018).

censorship "in the light of current thinking about the importance of knowing one's origins as a fundamental element in the construction of identity" and the aforementioned legislative option of establishing donor anonymity as a rule in heterologous procreation (with recourse to gamete or embryo donation) and surrogate pregnant women, as this rule "(...) constitutes an undoubtedly serious impact on the rights to personal identity and the development of personality, established in Article 26, no. 1, of the Constitution of the Portuguese Republic." Thus, the Court declared the unconstitutionality, with general mandatory force, of several rules of Article 15 ("Confidentiality") of Law 32/2006 of July 26:

- The provisions contained in paragraph 1 regarding the obligation of strict confidentiality with respect to persons born as a result of MAP in those situations.
- The provisions contained in paragraph 4 for infringement of the said fundamental rights given an unnecessary restriction of those rights, as follows from a combined reading of Articles 18(2) and 26(1) of the Portuguese Constitution.

Therefore, according to the law in force, people born through MAP, with recourse to the donation of oocytes, spermatozoa, or embryos, can obtain either from the competent health services, information of a genetic nature concerning them, or from the National Council for Medically Assisted Procreation, once they reach a civil majority, "information on the civil identification of the donor."[35]

This change in jurisprudential orientation does not, however, undermine the rule that donors of gametes or embryos are not considered the legal parents of the unborn child. The fact that the child can access the identity of the donors does not generate parental responsibilities.

With the careful medical selection of gamete donors intended to prevent the transmission of genetic variation associated with disease or disability to the next generation, will the children resulting from MAP be genetically "more guaranteed" than those resulting from natural fertilization? Are persons conceived through sexual relations, carriers of the genetic constitution resulting from the natural lottery, negatively discriminated against relative to those produced in a laboratory with gametes from carefully selected donors? Will it not be inevitable in the future that parents rationally decide to completely dissociate sexuality from reproduction, choosing to always have children through the use of MAP to ensure the best possible genetic makeup by selecting gametes and embryos that are as healthy as possible?

Linked to this question is the importance of the biological constitution in the recognition of the legal quality that is the eminent dignity of the human person. Will the "fundamental unity of all members of the human family" and the recognition of their "inherent dignity and diversity" reside in the human genome, as proposed by UNESCO (1997) in the Universal Declaration on the Human Genome and Human Rights?[36] What is the effective importance of biology, in particular belonging to the human species in the recognition of human rights? This question, associated with those of reductionism and genetic determinism, must be rethought given the results of the Human Genome and Human Epigenome Projects, which reveal that we are close to other species (in particular with other advanced primates) and that genetic

[35] See Article 15, paragraph 2 of Law 32/2006 of July 26.

[36] Article 1 of this Declaration (UNESCO 1997).

determinism is less intense than initially assumed, given the possibility of mutations in the genetic makeup of each individual because of the influence of the environment.

8. Final Considerations

The current legislation on MAP in Portugal and its interpretation and application according to Jurisprudence and Doctrine seeks to protect against unfair discrimination on the grounds of gender. However, as is often the case in matters of Antidiscrimination Law, it is necessary to be alert to trends that are contrary to legal protection against this form of discrimination, expressed mainly by the recent doctrinal current that aims to combat the alleged "gender ideology."

This ideology was, for example, recently defined by Dom Nuno Brás, as intending to "impose on everyone the disappearance of the differences and complementarities that biological reality brings, in favour of a presumed capacity of the human being to create, starting from culture, an asexual and tolerant world—utopically more peaceful but, in fact, a source of conflicts not only between people or empires but also (and much more seriously) between the human being and his own nature" (Brás 2019). Similarly, one can read in the apostolic exhortation, Amoris Laetitia, signed by Pope Francis in 2016, that this ideology "denies the difference and the natural reciprocity of man and woman. It envisages a society without gender differences and empties the anthropological basis of the family" (Francis 2016).[37]

According to this current of thought, reflected in the legal system of some States because of being defended by the ideologies that currently dominate them (consider Brazil[38] or the United States of America)[39], gender ideology can be criticized because it challenges the idea from classical anthropology of the substantial unity of body and soul, rejects the sexual determination of the body as constitutive of the subject's identity, rejects the binary system of "masculine/feminine" and the normative heterosexuality often associated with it, and dismisses the existence of a necessary relationship between family and procreation.

As Diogo Gonçalves, Pedro Afonso, and Margarida Neto expressively write on the subject, "gender ideology confuses reality with its expression, reality with language," mainly by "manipulating language (...) sometimes by suppressing concepts, sometimes by introducing new ones, sometimes by promoting significant semantic changes" (Gonçalves et al. 2018).

By imposing itself as a "single mindset" with the support of major international or supra-national organizations such as the United Nations, the Council of Europe, or the European Union, this ideology offers, in the words of those who contest it, "a new ethical-legal order in the regulation of sexuality," which aims to assert itself as "a global cultural revolution" to be fought by all available means (Bolsonaro 2019; Alves 2019; Hains 2019).

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37 See No. 56 of this exhortation dedicated to "gender ideology," delivered in Rome on 19 March 2016 (Francis 2016).

38 See, for example, the statements made on the matter by President Jair Bolsonaro (2019), namely in his inauguration speech on 1 January 2019, where he stated his intention to "unite the people, value the family, respect religions and our Judaeo-Christian tradition, combat gender ideology, preserving our values; and those of Minister Damares Alves (3 January 2019), in particular when she states that she inaugurated a "new era in Brazil" in which "boys wear blue and girls wear pink" (Alves 2019).

39 See, for example, the news item (Hains 2019). Soon the legislative setbacks regarding protection against gender discrimination, see Hollanda (2018).

This doctrinal position may have, as a practical consequence, less protection for people against negative discrimination on grounds of "gender" in all dimensions of their lives, including access to MAP techniques, which will undeniably be contrary to their eminent dignity as human persons and their right to develop their personality freely and harmoniously. Arguably, it brings the fundamental risk of repealing much of the anti-discriminatory legislation adopted in recent decades on access to MAP techniques, the legal institute of marriage, and the typification of hate crimes. This risk underlies the return to the male/female binary system and the normative heterosexuality that, for centuries, accompanied it in our legal system.

Thus, to counter the situation, it is essential to promote, at all levels, the exercise of attentive and active citizenship in defense of people's rights against unfair discrimination to adopt educational policies that convey clear and technically precise ideas of what "gender" means and the need to combat negative discrimination based on it. Particular attention should also be given to training those who apply the law (judges, security forces) in these matters of anti-discrimination law.

Raising awareness, including through the media, of the need to respect and apply the principles and standards of this new branch of law remains essential to ensure adequate protection of people against gender discrimination in all dimensions of their lives, particularly the issue being addressed here: access to new MAP techniques (Silva 2016, p. 58). Finally, it is essential to be alert to the dynamic nature of philosophical, anthropological, and sociological thought on these matters that the Law, as a normative discourse influenced by other social discourses present in a society at a given time, should accompany. Themes such as "gender stereotypes" (Lima and Sobral 2016; Silva 2016; Badiou 2019; Torres 2018), "gender identity and diversity," "gender expression," "genderflux," "genderfluid," and "agender" should be part of the legal discussions held for the adequate regulation of these matters in Portugal in the 21st century.

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13. What Young People Know About Human Trafficking

Bárbara Rodrigues, Rui Nunes, Cristina Santos, Carla Serrão and Ivone Duarte

Abstract: Human trafficking affects much of the world's population, including children. The need to inform young people about this crime highlights the crucial role of schools and families as major sources of knowledge transmission. This chapter intends to evaluate the knowledge of human trafficking and identify the sources of information on this phenomenon from a sample of young people spread over 14 public schools in the Municipality of Porto, 7 of which are covered by Educational Territories of Priority Intervention (ETPI). A self-assessment questionnaire was applied in the classroom. It becomes clear that the information on this subject is sparse. We suggest that more visibility should be given to this phenomenon, through the integration of this issue in health/sexual education projects in schools. Actions should address preventive interventions of universal character, but also more specific interventions in priority groups identified as most vulnerable.

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1. Introduction

The crime of human trafficking (HT) has been considered a "new form of slavery" (United Nations Office on Drugs and Crime 2009, p. 6), and has proved to be a complex reality because of the sensitivity of the type of crime in question and the number of dark figures involved. The new form of slavery goes beyond racial lines; it is transient and occasionally temporary. Bales (2004) defines contemporary slavery as a "social and economic relationship in which a person is controlled through violence or paid nothing, and economically exploited." It involves the act of offering, delivering, recruiting, enticing, transporting, harboring, or receiving a person by resorting to threats, force, or other forms of coercion, and trickery for exploitation (United Nations 2000).

The crime of HT is an intrinsic reality in today's society that has gained increased proliferation in the wake of the phenomenon of globalization. From this perspective, globalization presents positive aspects; for example, in the development of interpersonal relationships, and negative aspects, particularly regarding facilitating HT internationally (Méndez 2015; Nazemi 2012).

HT does not just affect adults. The growing and disturbing number of trafficked children has been alarming the European and international community. At the European level, "Child trafficking is reported by Member States as one of the trends that is increasing most sharply in the EU. The statistical data for the years 2013–2014 show that, out of the 15,846 registered victims of trafficking in the EU during this time period, at least 2375 were children" (European Union 2016, p. 19). A United Nations

Children's Fund (UNICEF) press release revealed that approximately 1.2 million children are trafficked worldwide every year (United Nations Children's Fund 2007). Moreover, The Global Report on Trafficking in Persons from 2016 from the United Nations Office on Drugs and Crime (UNODC) shows that 28% of all trafficking victims are children, and, "In Sub-Saharan Africa and Central America and the Caribbean, a majority of the detected victims are children" (United Nations Office on Drugs and Crime 2016, p. 11). Notably, trafficking in children (anyone under 18 years of age) differs from other forms of HT, as the use of force or a ruse is not necessary to prove that a child has been a victim of trafficking. This distinction hinges on the fact that a child cannot give informed consent and, thus, the combination of any action for any kind of exploitation constitutes a crime of trafficking in human beings (Article 3º of the Additional Protocol to the United Nations Convention against Transnational Organized Crime to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children).

The fight against HT is more effective through international cooperation. Prevention is an important tool that is also a priority in the European Union. "The final objective of eradication of trafficking in human beings can only be achieved if the crime is prevented from happening in the first place and using the wide range of available tools at EU and national level" (Commission to the European Parliament and the Council (European Union 2016, p. 55). Several Directives show the importance of prevention; for example, Directive 2011/36/EU of the European Parliament and the Council of 5 April 2011 (European Union 2011), on preventing and combating HT and protecting its victims, replacing Council Framework Decision 2002/629/JAI of July 19. However, the existence of internal preventive measures is essential to assist the European and international measures. Data from the Observatory on Trafficking in Human Beings, Portugal, show that, in 2016, 264 victims were registered (228 victims of Portuguese and foreign nationality were flagged in Portugal, and 33 Portuguese were flagged abroad). Regarding the number of child victims recorded in Portugal, in 2016, there were 26 child victims (Portugal 2017). Intervention at the level of young populations needs more effectiveness and persistence. Furthermore, this intervention must be adapted to the special needs of the target audience, considering the particular vulnerability of young people (Perista and Brázia n.d.).

HT is a global reality, a violation of human rights, affecting physical and psychoemotional levels, particularly depression, anxiety, and post-traumatic stress (Abas et al. 2013; George and Sabarwal 2013; Hossain et al. 2010; Oram et al. 2015; Turner-Moss et al. 2014). Therefore, tools have been developed to improve and harmonize the methods and procedures of signaling victims of trafficking within the European Union and intervention projects to combat and raise international awareness about this crime. However, the increasing number of trafficked minors should serve as an impetus for greater introduction of this subject in the education of young people. This gap can easily be filled by integrating the theme into the school environment, as it is an environment dedicated to the training and qualification of citizens.

A study conducted by Raboteg-Šarić and Marinović (2005) in Croatia with secondary school students aimed to identify their knowledge about HT for sexual and labor exploitation by evaluating their attitudes toward victims and traffickers and identifying the risks of victimization. They concluded that, though young people are familiar with the problem, the information they have is superficial and

incomplete. The results highlight the need to introduce this theme in youth education (Raboteg-Šarić and Marinović 2005).

Further, the existence of communities that are more vulnerable to trafficking situations (i.e., regions heavily affected by factors such as unemployment and low income) is also evident. Hence, Omorodion (2009), in the Nigerian context, evaluated the knowledge and awareness of students and their attitudes toward trafficking for sexual exploitation to understand the individual perception of vulnerability or risk each student had. The results revealed that the vulnerability factors associated with HT included poverty, unemployment, illiteracy, and low social status and that students who attend mixed schools demonstrated increased knowledge and awareness of trafficking issues (Omorodion 2009).

Given the complexity of this crime, it is essential to develop information mechanisms and raise community awareness about the risks and elements that constitute trafficking, aiming to prevent new cases and increase the detection of fraudulent, deceptive, and exploitative practices. Although, in general, communities are more familiar with this phenomenon, there still appears to be a deficit of awareness-raising information and training actions aimed at children and young people; therefore, it is essential to realize what knowledge young people do have about HT to equip them to act effectively. Thus, this study aims to characterize the knowledge of young people in the 9th grade in the Municipality of Porto about HT and their sources of information.

By deepening the knowledge young people have about this phenomenon and about the information sources that served this purpose, we can help develop action guidance for the prevention and detection of situations, enabling young people to defend themselves from any sort of enticement, thus becoming information transmission vehicles for friends and family themselves.

Furthermore, and as previously noted, it is essential to pay special attention to the most vulnerable communities, where recruitment is frequent. In Portugal, the Educational Territories of Priority Intervention (ETPI) Program groups together schools that are in contexts marked by poverty, unemployment, and social exclusion and aims to prevent and reduce early school drop-out, reduce indiscipline, and promote educational success (Abrantes et al. 2011). This study focuses on schools in these territories, as they require more recurrent, active, and increased interventions.

2. Materials and Methods

2.1. Participants

The study employed 305 students attending the 9th grade in public schools from the Municipality of Porto, Portugal. The sample comprised students from one of the 9th-grade classes from 14 public schools in the Municipality of Porto, 7 of which are ETPI schools. The sample includes young people between the ages of 13 and 18 (median = 14 years old), where 136 (45%) were male and 169 (55%), female. Of the 305 participants, 134 attended ETPI schools.

2.2. Materials

The study employed a questionnaire, constructed and previously tested with eight young people from the 8th and 9th grades. The questionnaire is structured in two parts. The first part presents the objectives of the study, requesting the students'

participation. A set of socio-demographic questions are then presented (e.g., on gender, age, and school). The second part presents 14 questions (e.g., multiple-choice closed-ended questions, multiple-choice single-answer questions, and semi-open questions). The questionnaire was administered between February and May 2015. Each questionnaire was subsequently assigned an identification number, facilitating the processing of data.

2.3. Statistical Analysis

The study employed absolute and relative frequencies to describe the variables studied. It employed the chi-square test, considering a 0.05 significance level, to compare the answers between female and male genders and between schools under ETPI Program and schools not covered by that program. We used the statistical analysis software IBM® SPSS® Statistics version 21.

2.4. Ethical Considerations

This study was approved by the Ethics Committee of the Department of Social Sciences and Health of the Faculty of Medicine, University of Porto. The informed consent of the guardians was obtained (as the age of participants was between 13 and 18 years old). Moreover, participants also gave their consent to participate. Students were informed about the nature of the study, procedures, and objectives. They were also informed about the voluntary, confidential, and unpaid features of the study. The ability to withdraw at any stage of the investigation was highlighted.

3. Results

Overall, 305 of 345 students participated in the study. The remaining 40 students did not participate because they were not present on the day and time scheduled for the questionnaire. As shown in Table 1, 95% of students claimed to have heard of HT; however, only 24% (n = 74) knew the definition of this crime. Of the 74 students, only 7 (10%) correctly noted that HT involves sexual exploitation, labor exploitation, begging, slavery, extraction of organs, child adoption, servitude, and exposure to other criminal activities.

Moreover, of those 74 students, slightly more than half (69%) correctly answered all the alternative questions on the types of people who may be potential victims of this crime (men, women, children, and young people). Comparing the number of students who knew the definition of HT with the responses to the questions on types of HT and potential victims, only six students answered all options correctly. However, of these six students, one believed HT only occurs internationally. Hence, of the 74 students who knew the definition of HT, only 5 knew, in fact, the correct definition of this crime and its contours.

Of the students who had heard about this crime, 94% obtained that information via television, and 21%, lectures at school. Notably, only 19 students had attended awareness-raising or training activities on this subject. Furthermore, approximately half of the students (49%) reported that they had already been contacted through social networks by unknown persons, and 22% mentioned that they had already received dubious proposals through social networks.

Comparing the differences between genders revealed that young women have heard more about this crime from their family than their male peers (p = 0.016). There

is also a significantly higher percentage of young women who say they have only an idea of the definition of HT. However, there is a significantly higher number of young men saying they know the definition of HT ($p = 0.010$). There are also significant gender differences regarding child adoption. Accordingly, 52% of girls consider that HT encompasses child adoption, relative to only 35% of boys ($p = 0.002$). Further, in a greater percentage than girls, young men consider that HT can have male ($p = 0.049$) and female ($p = 0.021$) victims.

Finally, a significantly higher percentage of girls indicated that they have been contacted on social networks by unknown persons and have received dubious proposals through social networks than young men ($p = 0.003$ and $p = 0.014$, respectively) (Table 1).

Table 2 describes the questionnaire results, comparing schools covered by the ETPI Program and schools not covered by this program (non-ETPI). All students from ETPI schools claimed to have heard about HT ($p = 0.001$). There were also significantly more ETPI-school students claiming to have acquired this information through television (94%) and lectures at school (25%) ($p = 0.023$ and $p = 0.038$, respectively).

Table 1. Questionnaire results from 305 young people by gender.

Items	Total *n* (%)	Male *n* (%)	Female *n* (%)	*p*
Have you heard of "Trafficking in Human Beings"?	291 (95)	127 (93)	164 (97)	0.129
If so, where:				
Television	273 (94)	119 (94)	154 (94)	0.944
Internet	165 (57)	72 (57)	93 (57)	0.998
Among Family	78 (27)	25 (20)	53 (32)	0.016
Lectures in school	61 (21)	21 (16)	40 (24)	0.103
Among colleagues	58 (20)	26 (20)	32 (20)	0.839
Did you receive training on this issue outside of school?	19 (6)	6 (7)	10 (6)	0.786
Do you know the definition of "Trafficking in Human Beings"?				0.010
Yes	74 (24)	43 (32)	31 (18)	
No	20 (7)	11 (8)	9 (5)	
Have an idea	211 (69)	82 (60)	129 (76)	
Types of Trafficking in Human Beings that you think exist:				
Sexual exploitation	285 (93)	125 (92)	160 (95)	0.333
Labor exploitation	150 (49)	71 (52)	79 (47)	0.242
Begging	62 (20)	25 (18)	37 (22)	0,449

Table 1. *Cont.*

Items	Total *n* (%)	Male *n* (%)	Female *n* (%)	*p*
Slavery	272 (89)	120 (88)	152 (90)	0.634
Organ extraction	261 (86)	115 (85)	146 (86)	0.651
To adopt children	135 (44)	47 (35)	88 (52)	0.002
Servitude	158 (52)	73 (54)	85 (50)	0.557
Exploitation for other criminal activities	187 (61)	78 (57)	109 (64)	0.203
Do you think this crime affects Portugal?	247 (83)	105 (79)	142 (85)	0.135
Do you think this crime occurs				0.596
at an international level?	63 (21)	26 (19)	37 (22)	
at a national and international level?	240 (79)	108 (81)	132 (78)	
Who do you think may be a victim of Trafficking?				
Men	204 (67)	99 (73)	105 (62)	0.049
Women	288 (94)	133 (98)	155 (92)	0.021
Children	291 (95)	130 (96)	161 (95)	0.894
Young people	269 (88)	119 (87)	150 (89)	0.735
Have you ever been contacted on social networks by unknown persons?	149 (49)	54 (40)	95 (57)	0.003
Have you ever received any proposals that you consider dubious on social networks?	67 (22)	21 (15)	46 (27)	0.014
Do you know someone who has been deceived with job offers?	30 (10)	12 (9)	18 (11)	0.585
Do you think it is important to disclose information on the subject?				0.188
Yes	294 (96)	129 (95)	165 (97)	
No	6 (2)	5 (4)	1 (1)	
Maybe	5 (2)	2 (1)	3 (2)	

Source: Table by authors, based on the questionnaire designed for this study.

However, 31% of the students who attended ETPI schools admitted to knowing the definition of HT, revealing a significant difference relative to students attending non-ETPI schools ($p = 0.002$). Regarding a specific type of HT (sexual exploitation), students from non-ETPI schools signaled a higher awareness regarding this kind of trafficking (55%) ($p = 0.022$). Moreover, 85% of ETPI-school students consider that this crime occurs internationally and nationally, while 75% of students from non-ETPI schools have the same response ($p = 0.025$). Regarding the type of victims, significantly more students from non-ETPI schools chose men (72%) ($p = 0.034$). Finally, significantly more students from ETPI schools admitted having received proposals they consider questionable through social networks ($p = 0.035$) (Table 2).

Table 2. Questionnaire results comparing non-ETPI schools and ETPI schools.

Items	Non-ETPI *n* (%)	ETPI *n* (%)	*p*
Have you heard of "Trafficking in Human Beings"?	157 (92)	134 (100)	0.001
If yes, where:			
Television	147 (86)	126 (94)	0.023
Internet	87 (51)	78 (58)	0.202
Among Family	42 (25)	36 (27)	0.647
Lectures at School	27 (16)	34 (25)	0.038
Among Colleagues	31 (18)	27 (20)	0.655
Have you already attended training actions on this subject outside school?	10 (6)	9 (7)	0.717
Do you know the definition of "Trafficking in Human Beings"?			0.002
Yes	32 (19)	42 (31)	
No	17 (10)	3 (2)	
Have an idea	122 (71)	89 (66)	
Types of Trafficking in Human Beings you think exist			
Sexual exploitation	160 (94)	125 (93)	0.921
Labor exploitation	94 (55)	56 (42)	0.022
Begging	33 (19)	29 (22)	0.614
Slavery	154 (90)	118 (88)	0.577
Organ extraction	142 (83)	119 (89)	0.155
For child adoption	69 (40)	66 (49)	0.120
Servitude	91 (53)	67 (50)	0.577
Exploration for other criminal activities	109 (64)	78 (58)	0.325
Do you think this crime affects Portugal?	141 (83)	106 (81)	0.668
Do you think this crime occurs			0.025
Internationally?	43 (25)	20 (15)	
At a national and international level?	126 (75)	114 (85)	
Who do you think may be a victim of trafficking:			
Men	123 (72)	81 (60)	0.034
Women	159 (93)	129 (96)	0.214
Children	161 (94)	130 (97)	0.236
Young people	153 (89)	116 (87)	0.435

Table 2. *Cont.*

Items	Non-ETPI *n* (%)	ETPI *n* (%)	*p*
Have you already been contacted on social networks by unknown persons?	81 (48)	68 (51)	0.548
Have you already received any dubious proposals on social networks	30 (17)	37 (28)	0.035
Do you know someone who has been deceived with job offers	20 (12)	10 (8)	0.213
Do you think it is important to disclose information on the subject?			0.089
Yes	166 (97)	128 (95)	
No	1 (1)	5 (4)	
Maybe	4 (2)	1 (1)	

Source: Table by authors, based on the questionnaire designed for this study.

4. Discussion

Even though the results of this study cannot be extrapolated to the national reality, they emphasize the lack of knowledge young people have about HT, constituting a somewhat invisible theme. Several reasons may help explain the situation (i.e., complexity and conceptual evolution). Despite its complexity, this issue has unique characteristics. It is of great importance to carefully identify this problem (i.e., to know what it is and how trafficking in human beings occurs) and differentiate it from other phenomena with which it can be confused, such as migration, migrant smuggling, prostitution, and sex tourism. Government authorities and organized civil society must possess correct and complete knowledge of this crime such that appropriate actions can be developed and implemented (i.e., actions aimed at preventing and combating HT with necessary rigor) to restrain an illegal affront to the dignity of the human person.

Several steps can be taken to promote awareness, information, and training of this group and the entire civil community. This study documents that only 20% of the students approached this subject at school, and only six students have a correct understanding of the phenomenon. The data indicate the urgent need for the school to assume the role of an active partner in awareness raising and training: "A escola, na medida em que reúne uma enorme diversidade social e cultural, permite uma intervenção transversal, representando ainda um local privilegiado de desenvolvimento de ideias para melhor prevenção." (Associação Portuguesa de Apoio à Vítima 2013, p. 79). Thus, it is important to sensitize the educational community to the integration of this content in the context of sex education, health, and citizenship projects. This intervention should promote a general level of knowledge about these phenomena, provide detection skills, and encourage mobilization capacity and local activism to prevent and combat HT.

However, further studies should deepen the understanding of the situations of vulnerability to which young people are prone and understand more clearly the

information published in the media on this subject to intervene more appropriately and proportionally to the inherent needs of each group.

In general, a high percentage of young people who claim to have heard about the crime of HT obtained such information through television and the Internet; a lower percentage claimed to have received information on the subject at school. Thus, there is a wide disparity at this level. Young people spend much of their time in the school environment. However, the dissemination of information on this crime in this environment seems to be insufficient. Therefore, it is worth emphasizing that the school represents the space and time for building citizenship and that the various subjects of the formal curriculum should contribute to the development of critical thinking skills. Critical thinking skills comprise the ability to think clearly and rationally about what to do or what to believe. They include the ability to engage in reflective and independent thinking. Thus, it is necessary to develop practices that encourage dialogue, questioning, reflection, and reasoning about social phenomena, contributing to the formation of autonomous and empowered citizens (e.g., Freire 1996; Silveira et al. 2008).

Despite the efforts undertaken by various institutions and non-governmental organizations, such as the UNODC and the Global Alliance Against Traffic in Women, on the prevention and combating of HT, much remains to be done. It seems to be more important that young people receive information in person and not just through Information and Communication Technologies (ICT). In a face-to-face intervention, doubts can be clarified immediately.

Although some students claimed to know the definition of HT in theory, few seemed to know the definition in practice, as they could not answer the questions related to this theme correctly. These results show insufficient knowledge and a lack of support in the introduction of new knowledge and concepts in their continuous learning, corroborating the results of Raboteg-Šarić and Marinović's (2005) study, where the lack of information obtained by young people about this crime revealed a need to introduce the theme in youth education. The need to adapt the dialogue to the youth for a better understanding of this issue is evident. Advertising campaigns contribute to publicizing this type of crime to young people, but they do not bring to the fore the risks and implications of the crime.

Today, with the progress of ICT and cyber globalization, the proliferation of social networks greatly impacts young lives. With globalization, largely achieved through the Internet, the approximation of people and places has become evident. However, given the risks associated with the Internet, the exposure of young people to social networks should be monitored and performed consciously. Nearly half of the students involved in this study have been contacted by strangers on social networks, and some of them received proposals that they considered dubious. The need to alert young people to the risks inherent to social networks should be combined with the alert to the risk of contact for HT purposes.

Contrary to Raboteg-Šarić and Marinović (2005), where young people see HT as a problem that affects other countries, 83% of the students surveyed knew that this crime directly affects Portugal. Hence, Portuguese youth are more aware of the inherent fragility of this type of crime, considering the current situation of the country (i.e., unemployment), which may induce an increase in fraudulent or misleading proposals to vulnerable people. This study suggests that girls are more aware that HT is a complex crime, though the amount of information available about or received

with regard to this subject is small. A significantly higher percentage of girls have heard about HT in the family context. The data seem to reflect social representations of gender in the sense of a greater concern regarding the safety of girls because girls are thought to be more vulnerable to recruitment or enticement. However, the danger is effective for young people of both genders, highlighting the necessity of changing stigma of differentiated education based on gender. A significant percentage of girls seem to have been contacted by strangers and received dubious proposals on social networks. Despite all equal rights efforts, the female gender remains characterized by greater vulnerability; thus, it is thought to be normal that there are more enticement and deceit attempts targeted towards people of this gender.

We also found significant differences between students attending schools covered by the ETPI Program and students attending schools not covered by this program. A higher number of ETPI-school students claim to have heard about the crime of HT. This difference can be explained by the higher number of family weaknesses in this group of students. Furthermore, a significantly higher number of ETPI-school students say they have acquired information about this crime on television and in lectures at school. Thus, ETPI schools show greater concern about (in)forming their students on this matter, drawing a parallel with the universe in which these schools are inserted. This need to promote new perceptions in young people with obvious vulnerabilities is also supported by Omorodion (2009).

A significantly greater number of ETPI-school students claim to know the definition of this crime, which does not mean that their knowledge is effective, because by not identifying labor exploitation as a possibility, they may still be in danger. In fact, considering that these territories are more vulnerable to trafficking situations because they are affected by unemployment and social disruption, it seems urgent to clarify that the successful migration myth can be one of the tools used by recruiters. A significant number of ETPI-school students also agree that this crime can happen internationally and internally, showing knowledge of the disparities in Portugal and how it may be related to this crime. However, a significantly larger number of non-ETPI-school students identified men as possible victims, showing that ETPI-school students are not aware of the dangers to which men may be subjected and the possibility of them being victims. Finally, a significantly higher number of ETPI-school students received dubious proposals on social networks. Given that the Internet is prevalent, this group of students may lack adequate monitoring of their Internet access.

In short, this study suggests that the knowledge of young people on the subject is scarce and that the most important sources of information are television and the Internet. However, it seems essential that this knowledge is mostly provided by the school and, despite the efforts that have been made to integrate this subject in the school context, particularly in ETPI schools, it seems to be insufficient.

5. Conclusions

A high deficit of knowledge about the crime of HT seems to exist in the studied group. Few young people responded correctly to the questions posed on HT. This suggests that efforts to inform young people have been insufficient, corroborated by the fact that most young people only have a general idea of the definition and not a thorough understanding. In fact, without adequate and realistic information, young people cannot learn to protect themselves and be alert to situations of particular

danger. However, it seems young people would not know how to act in a dubious situation or which authorities to contact.

A large part of young people acquired information on this type of crime through television and the Internet. However, the information must also be transmitted in person at school and extracurricular levels to eliminate doubts that may arise instantly and immediately clarify them. A low percentage of young people acquired information about HT in school lectures, which is worrying, as the school has an important role in educating and introducing topics of high importance to young people. The need to strengthen this theme in the school environment is essential to clarify doubts and incorrect pre-established ideas and provide a thorough understanding with a broad enough distribution capacity to reach the families of students. Families must also be informed that all members can be victims.

It is necessary to develop new projects or extend the recipients of existing projects against HT. Young people are an important information transport vehicle and an acute vulnerability group that must be alerted to possible cases of enticement, for example, by virtual contacts. Young people must be alerted to the danger posed by social networks, and the first step in encouraging such awareness is drawing attention to the HT crime. Despite the significant difference between girls being contacted by strangers on social networks and receiving dubious proposals, boys can also be the target of an increase in demand from traffickers. The alert level for risk situations on social networks must be high for all young people of both genders attending ETPI and non-ETPI schools.

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14. Privacy and Equality in Healthcare Beyond the Binary Gender Divide

Mónica Correia and Rui Nunes

Abstract: This article discusses the lack of consideration for gender identity within gender equality. It highlights that transgender individuals face discrimination based on gender identity. It argues that addressing gender identity within the framework of gender equality is essential to ensure adequate healthcare for transgender individuals while respecting their privacy. Definitions of gender, gender identity and gender expression are provided to establish a common understanding. The article then transitions into a discussion on the privacy and equality frameworks and their implications for the healthcare of transgender people. Different perspectives on privacy are presented, exploring its multifaceted nature and relationship with identity and data protection. The importance of recognizing identity as a fundamental right is highlighted, and the complexity of defining privacy is acknowledged. It sets the stage for a comprehensive analysis of the interplay between privacy and equality in healthcare for transgender individuals.

1. Introduction

Generally, legal doctrines do not treat gender identity questions within the concept of gender equality. The debate on gender equality is usually placed in a binary dimension between the male and female. This dichotomy restricts the object of the notion of gender equality, whereby issues related to transgender people are referred to a separate analysis, usually configured within the scope of sexual orientation (Neto 2010b). Although gender and sexual diversity are gaining increasing recognition in contemporary discourse (Rich and Ashby 2012), it remains imperative to view such diversity through the lens of gender equality. Transgender individuals, like cisgender women, face systemic discrimination, yet theirs is rooted in gender identity. Incorporating gender identity into gender equality discourse is crucial. The Human Development Report 2016, prepared by the United Nations Development Programme (UNDP 2016), supports this approach, noting that nations investing in gender equality tend to experience more robust human development outcomes. Thus, gender equality supports individual rights and contributes significantly to sustainable development.

The European Court of Human Rights identifies gender identity as a deeply personal and private matter (Köhler et al. 2017), which seems to place the issue in the spectrum of privacy. Furthermore, the mismatch between identification documents and gender identity is a source of social stigma and discrimination (Köhler et al. 2017). As Oaten et al. (2011) noted, stigma arises when individuals possess traits that cause them to be persistently marginalized. This marginalization negatively affects mental and physical well-being and is associated with inequality in employment, education, healthcare, and social integration. In this light, gender identity clearly intersects with issues of equality. Extensive research supports the idea that stigmatization increases barriers to healthcare access for transgender individuals (Green 2017). This dual relevance invites reflection on whether privacy or equality offers the stronger foundation for ensuring access to healthcare for this population.

Hence, this article examines transgender individuals' access to healthcare through the combined lenses of privacy and equality. We argue that both dimensions are essential to ensuring equitable and dignified care.

2. Definitions

To establish a shared foundation for this discussion, we define key terms related to gender and identity.

> Gender: "attitudes, feelings, and behaviours linked to the experience and expression of one's biological sex." (Winter et al. 2016b, p. 391)

Gender identity: "Personal experience of oneself as boy or man, girl or woman, as a mixture of the two, as neither, or as a gender other than male or female. Some individuals (particularly in cultures that accept the idea of genders beyond male and female) identify as members of the 'third gender' or use indigenous gender labels." (Winter et al. 2016b, p. 391). Therefore, a person's gender identity may not align with the sex assigned at birth. This identity often informs decisions about appearance or physical modification through medical or other interventions. It also encompasses various gender expressions, such as clothing choices, speech patterns, and behavior (Correia et al. 2021; World Health Organization 2016).

Gender expression: "Refers to the expression of gender identity, often through appearance and mode of dress and sometimes through behaviour and interests. Gender stereotypes often inflict gender expression." (Winter et al. 2016b, p. 391).

It bears emphasizing that gender identity and gender expression are two separate concepts essential in a clinical context. An individual's gender expression can align with their gender identity, but it can also differ from it. Both gender identity and gender expression play significant roles in understanding and supporting individuals. Recognizing and respecting the differences between the two is crucial for providing appropriate care and support for those who may experience a mismatch between their gender identity and assigned sex at birth.

3. Gender Identity, Privacy and Equality

Society in general and healthcare providers in particular still do not fully understand transgender people and their needs. The lack of adequate information, coupled with ignorance, creates stigma, prejudice, and discrimination as worrying consequences for the health and well-being of transgender people. Consequently, the question arises as to whether the best legal guardianship of transgender people's health is the privacy or the equality framework.

First, we will examine the subject of privacy to answer this question.[1] A narrowly defined right to privacy is not an excellent instrument to protect the value of privacy, as it is too complex and broad to be defined in exact terms. Hence, the concept of privacy must be clarified. Victor Correia (2016) notes that, even though individuals "tend to view reality in a dichotomous way," that is, "in the sense of separation and opposition," the difference is not always opposite, given relative "differentiations," as the differentiating characteristics may contain elements of confluence. Therefore, we will seek to define privacy, distinguish it from data protection, and find the areas where these two ideas interact.

[1] Some passages in this section draw closely on the first author's doctoral thesis (see Mónica Correia 2021).

Indeed, academics, philosophers, legal scholars, and other practitioners in the field of privacy insist on searching for a fundamental, distinct, and internally consistent core to define privacy. However, privacy is considered a multifaceted concept that influences multiple areas of physical and psychological existence and the social environment (Zetler 2015).

There have been several attempts at defining privacy in the scientific literature. Whitman (2004), for example, explores the challenges of the definition and attributes them to the differences between American and European societies. He argues that cultural and legal factors shape people's understanding of privacy and that these differences are rooted in long-standing social and political disparities. Whitman identifies two distinct conceptions of privacy based on two sets of values. In Europe, privacy is linked to personal dignity, encompassing rights to image, name, and reputation, primarily threatened by the mass media. In contrast, privacy is connected to freedom in the USA, primarily threatened by government actions. Both sides of the Atlantic hold these values based on socio-political ideals dating back to the late 18th century. Whitman rejects the notion of privacy as a universal value applicable to all societies, considering it indefensible. He concludes that if any battle is to be fought regarding privacy, it should be waged on more fundamental values than the concept of privacy. Consequently, he asserts that "there is no such thing as privacy."

However, as Correia et al. (2021) argue, Whitman's (2004) understanding falls short by reducing the significance of human dignity to matters of honor or image. According to their perspective, human dignity is much more profound and encompasses an abstract and potential capacity for self-determination, independent of concrete power or will. Human dignity should be considered an inherent value, treating individuals as ends rather than means (Nunes 2016, 2017). This concept extends beyond mere image or honor and holds universally. Freedom is essential for human dignity, but privacy is a prerequisite for the existence of freedom. Hence, privacy is necessary for human dignity (Correia et al. 2021).

Andrade (2010) also seeks a definition. This author discusses the distinctions between data protection, privacy, and identity rights. The author criticizes the approach taken by European Union (EU) legislation and legal doctrine, arguing that data protection is not limited to privacy objectives and that privacy encompasses more than just controlling personal data. Andrade (2010) proposes that data protection focuses on regulating the processing of personal data defined by personal identity. However, privacy is the absence of restrictions on constructing one's identity. The author argues that defining privacy negatively weakens the concepts of privacy and identity, as it burdens privacy and fails to address what is truly at stake in identity.

Accordingly, to understand the differences between data protection, privacy, and identity, Andrade (2010) categorizes data protection as procedural or adjective, while privacy and identity are considered substantive. The author also points out that the data protection framework has gaps, particularly regarding profiling practices and their impact on individuals. Andrade (2010) suggests that the right to identity should be explicitly recognized in data protection legislation, not as a concept integrated into the definition of personal data, but as an independent right. Andrade (2010) believes that comprehensive and robust protection of individual autonomy and self-determination can be achieved by distinguishing between the rights to data protection, privacy, and identity. The author emphasizes the importance of

recognizing identity as a value and interest, advocating for its explicit inclusion as an individual right in data protection legislation.

We agree with the relevance that this author attributes to identity, as we believe identity will only be whole if privacy is respected. Data that may not proceed directly from private life is protected. Not all our data is necessarily private, but its holder is entitled to protect it. Thus, we recall the "uno-multiple dichotomy" (Victor Correia 2016), which states that individuals have a singular identity and multiple selves influenced by time and context. However, we disagree with Andrade (2010) that the right to data protection is merely adjective or procedural. This right is enshrined as a fundamental right in the European Charter of Fundamental Rights (EU 2010; Lopes 2016; Portugal 2017); thus, it seems substantive.

Another author who seeks an approach to the concept of privacy is Victor Correia (2016), who argues that finding completeness in the public or private sphere is impossible. They highlight the diverse applications of public and private spheres concepts to support their claim. Victor Correia (2016) contends that nothing can be fully public or private because human beings are complex; it is impossible, even if one desires to expose everything about oneself. Similarly, individuals cannot completely isolate themselves in privacy because non-verbal communication inadvertently reveals aspects of their private lives. Therefore, according to Victor Correia (2016), the public and private spheres are incomplete and insufficient. Hence, Victor Correia (2016) presents the concept of privacy as having several meanings: "being left alone, being left in peace, personal conscience, political convictions, and religious beliefs, making personal decisions, control of personal information by the very person to whom that information relates, inaccessibility, excluding third parties from personal information, intimacy, etc." (Victor Correia 2016).

To strengthen their argument, Victor Correia (2016) quoted Professor Mota Pinto, who believes that defining privacy is practically impossible. This professor argues that privacy is inherently indeterminate and elastic, making it challenging to provide a precise definition. This lack of precision renders privacy conceptually useless, particularly in the context of its legal relevance. Despite attempts to define privacy from philosophical, political, sociological, or psychological perspectives, Professor Mota Pinto contends that no definition has achieved the necessary precision to form a coherent legal framework.

Nevertheless, in their comprehensive exploration of privacy, Victor Correia (2016) defines it as the entirety of information concerning an individual that they can keep under their exclusive control or share selectively. The concept encompasses decisions about what to communicate, to whom, and the timing, method, and location of communication. Respecting privacy involves the ability to engage in activities without being identified (unless illegal), the capacity to adopt different identities for different contexts (e.g., using a pseudonym), the power to prevent unauthorized use of personal information, and the freedom from being observed by others. Privacy preservation entails safeguarding personal data related to emotions, beliefs, and lifestyles, as long as these do not harm society or infringe upon the freedom of others. Privacy also encompasses the option to be left alone and maintain anonymity. Victor Correia's (2016) depiction offers a comprehensive understanding of privacy and its various aspects.

Likewise, according to Laurie (2001), privacy can be understood through two perspectives in Western society: Spatial privacy refers to the individual's right to be

free from physical or psychological intrusion by others, and informational privacy emphasizes the individual's control over personal information. A unified definition of privacy, thus, emerges from these two perspectives: privacy is a state of separation from others. This separation can manifest as a physical or psychological detachment from others and the inaccessibility of certain intimate aspects of one's identity and personal information. Privacy is characterized by an individual's ability to maintain a boundary or separation between themselves and others (Laurie 2001).

Neto (2010a) examines different perspectives on privacy internationally and concludes that privacy's primary focus is the unique individual. While other fundamental freedoms allow individuals to exercise self-determination in specific domains, the "right to be left alone" endows private life with an abstract or indeterminate quality similar to other public freedoms. Incorporating private life within a network of diverse human relationships highlights the transition from an ethical freedom to a legally safeguarded freedom. In essence, privacy is concerned with protecting the individual's distinctiveness and preserving the freedom to exist within various personal relationships while enjoying legal protection (Neto 2010a).

On the other hand, the distinction between privacy and data protection is debated in the scientific literature. While some argue that data protection and privacy are separate concepts (Mónica Correia 2021), others believe data protection and informational self-determination are new applications of the right to privacy (Victor Correia 2016). Those who disagree that data protection is a new application of privacy point to the arguments of Andrade (2010) and the formal distinctions by EU law and the Court of Justice of the European Union (Mónica Correia 2021). They argue that EU law and the CJEU treat privacy and data protection as separate fundamental rights (Mónica Correia 2021; Gellert and Gutwirth 2013; Kokott and Sobotta 2013). These authors also note that the Court does not consider it necessary to define the exact content of privacy.

However, several authors differentiate privacy from data protection. They acknowledge overlaps between the two rights but emphasize their different scopes (Gellert and Gutwirth 2013). Privacy is seen as broader than data protection because it covers the processing of personal and non-personal data that affects a person's privacy. Even so, data protection is more comprehensive concerning personal data processing, but it does not necessarily address privacy concerns. Therefore, privacy can be narrower in scope, as it does not apply to personal data processing that does not invade privacy (Gellert and Gutwirth 2013).

Overall, the literature presents varying opinions on the relationship between privacy and data protection, with some considering them as separate concepts and others viewing data protection as a subset or application of privacy.

This summary of definitions of privacy is incomplete, mainly because we agree with Professor Mota Pinto regarding the almost absolute impossibility of this task. Indeed, the concept of privacy is intrinsically uncertain and challenging to define precisely, which can raise concerns about the legal certainty of the right to privacy (Hildebrandt 2006). Some argue that the lack of clarity in defining privacy may lead to its rejection, as legal certainty requires a clear understanding of rights (Hildebrandt 2006).

However, despite the challenges, common elements are recognized globally within the privacy discourse. These elements, such as the right to be left alone, secrecy, confidentiality, personhood, control over personal information, and intimacy,

provide a foundation for understanding privacy, whether it is a value or a right. Although these conceptions often overlap, each offers a unique perspective on the fundamental nature of privacy, particularly from an individual rights standpoint (Mónica Correia 2021).

That said, the principle of privacy recognizes the importance of respecting individuals' personal information and autonomy. Transgender individuals may have specific healthcare needs related to their gender identity, such as hormone therapy or gender-affirming surgeries. Respecting their privacy ensures they can access these services without unnecessary disclosure or intrusion. Thus, privacy claims offer several advantages in providing adequate access to healthcare for transgender individuals:

a. Autonomy and self-determination: privacy empowers transgender individuals to make healthcare decisions that align with their gender identity and personal needs without interference or judgment (Mónica Correia 2021; Correia et al. 2021).
b. Reduced stigma and discrimination: privacy measures protect personal information and medical history, reducing the risk of discrimination and stigma that transgender individuals often face in healthcare settings (Winter et al. 2016a, 2016b).
c. Improved mental health and well-being: privacy promotes a safe and confidential environment for discussing healthcare concerns, fostering trust and open communication. It can lead to better mental health outcomes and increased access to necessary care (Winter et al. 2016a, 2016b).
d. Access to gender-affirming services: privacy enables transgender individuals to access gender-affirming healthcare services without fear of exposure or social repercussions, ensuring that essential services are accessible and available when needed (Winter et al. 2016a, 2016b).
e. Confidentiality and medical safety: privacy measures protect sensitive medical information, including gender identity and medical history, ensuring confidentiality and preventing potential harm or misuse of personal information (Mónica Correia 2021; Correia et al. 2021; Winter et al. 2016a, 2016b).

Overall, privacy rights are crucial to addressing the specific healthcare needs and challenges faced by transgender individuals, promoting inclusivity, and ensuring their well-being and access to appropriate care. Thus, privacy claims are vital to supporting transgender individuals' access to healthcare by safeguarding their autonomy, reducing discrimination, promoting mental well-being, enabling access to gender-affirming services, and ensuring confidentiality and medical safety.

At this point, it is necessary to analyze whether equality claims play a role in the guardianship of transgender people's health and answer the question proposed in the introduction to this article. The following discussion, thus, addresses the notion of equality.

The principle of equality, also known as the principle of equal treatment or equal consideration, is a fundamental concept in ethics and political philosophy. It asserts that everyone should be treated with equal respect and dignity and have equal access to rights, opportunities, and resources, regardless of race, gender, religion, socioeconomic status, or other characteristics (White 2007; Thompson 2016).

The principle of equality is rooted in the belief that all human beings possess inherent worth and deserve equal moral and legal consideration. It is often seen as a foundational principle in justice and human rights theories (Freeman 2009). While specific interpretations and applications of the principle may vary, its core idea remains consistent: fairness and justice require that individuals be treated equally unless there are morally relevant differences that justify differential treatment (Algan 2004; Arrubia 2019; Lennox and Waites 2013; Powell et al. 2016; Soh et al. 2018).

This principle does not mean that everyone should be treated identically in all situations. Instead, it suggests that people should be treated according to their needs and circumstances without arbitrary discrimination or unfair bias. For example, providing equal educational opportunities may require tailored support for students with disabilities or additional resources for individuals from disadvantaged backgrounds. The principle has been enshrined in various legal and moral frameworks. Many countries have constitutional provisions or antidiscrimination laws that aim to uphold equality. International human rights documents, such as the Universal Declaration of Human Rights (United Nations 1948), also emphasize equality as a fundamental right.

However, achieving true equality can be complex and challenging, as systemic discrimination and social inequalities persist in many societies. Various forms of discrimination, including racism, sexism, and classism, can undermine the principle of equality. Efforts to promote equality often involve addressing these structural inequalities, challenging prejudices and biases, and implementing policies and practices that ensure equal treatment and opportunities for all individuals.

Overall, the principle of equality reflects a commitment to fairness, justice, and the recognition of the equal worth and dignity of every human being. It serves as a guiding principle in creating inclusive and just societies. Therefore, the principle of equality in healthcare for transgender individuals also encompasses several essential aspects:

a. Non-discrimination: transgender individuals should not face discrimination or unequal treatment in healthcare. Equality principles promote equal access to healthcare services, ensuring fairness and eliminating disparities (Winter et al. 2016b).
b. Comprehensive healthcare coverage: equality advocates for comprehensive healthcare coverage that addresses the unique needs of transgender individuals, including gender-affirming treatments, hormone therapy, mental health support, and other specific services (Winter et al. 2016b).
c. Culturally competent care: equality emphasizes the need for healthcare providers to receive training and education on transgender healthcare. It promotes culturally competent care, ensuring that providers understand and meet the specific needs of transgender individuals (Winter et al. 2016b).
d. Reduction of health disparities: equality-focused healthcare policies and practices aim to reduce health disparities experienced by transgender individuals. By addressing systemic barriers and biases, the principles work toward achieving health equity and improved well-being for transgender individuals (Winter et al. 2016b).
e. Advocacy and policy change: equality principles catalyze advocacy and policy change to protect the rights and improve the healthcare experiences of transgender individuals. By raising awareness and implementing inclusive policies,

guidelines, and practices, equality promotes fair and equitable healthcare for all (Correia et al. 2021; Winter et al. 2016a, 2016b).

In summary, equality claims ensure adequate access to healthcare for transgender individuals by promoting non-discrimination, comprehensive healthcare coverage, culturally competent care, reducing health disparities, and advocating for policy change. These advantages help create a healthcare system that is inclusive, equitable, and responsive to the specific needs of transgender individuals.

At this point, it bears emphasizing that one of the criticisms that might be leveled at the right to privacy with regard to dealing with transgender issues is that any matter of importance to transgender people that is protected by the legal framework of privacy allows the problem to be considered gender-neutral, rather than treating it as something deeply oppressive to transgender people. However, a countercriticism is that the tutelage of transgender people's issues under the equality framework may generate their devaluation and be seen as merely a "transgender issue".

4. Conclusions

The protection of the rights of transgender people should not be one-sided. We do not find arguments justifying the need to choose between privacy and equality or between equality and some other form of rights claim. Instead, complete protection of transgender people requires using the full range of legal arguments available. Indeed, the complexity of this issue militates in favor of maintaining various doctrinal approaches. Thus, using the doctrine of equality and privacy together allows transgender people to challenge health and other problems as something that happens to them because they live in that circumstance, and it is something that profoundly undermines their sense of dignity and personhood. Similarly, equality and privacy, used together, can achieve the promoted outcome of healthcare. This multifaceted approach can give transgender people a more significant ability to overcome the harms they suffer due to their status and provide the legal system with a more comprehensive understanding of their complex problems. Consequently, both principles work in tandem to protect transgender individuals' rights to adequate healthcare. By promoting equality, healthcare systems can eliminate discrimination and ensure that transgender people receive the same level of care as others. Meanwhile, respecting privacy safeguards individuals' autonomy and enables them to make decisions about their healthcare without fear of judgment or stigma. It is important to note that finding the proper equilibrium between these principles may vary per local laws, cultural contexts, and individual preferences. Policies and practices should aim to uphold equality and privacy, addressing the unique healthcare needs of transgender individuals while ensuring their rights and well-being are respected. Therefore, policymakers must consider privacy and equality when providing healthcare services. By acknowledging the diverse range of gender identities and expressions, this perspective encourages a healthcare approach that respects individual privacy while promoting equality for all individuals, regardless of their gender identity.

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15. Child-to-Parent Violence—Raising Preventive Awareness

Carla Serrão

Abstract: Child-to-parent violence refers to a type of intrafamily violence of an ascending nature, characterized by aggressions perpetrated by children against their parents. This phenomenon has deserved exponential interest among the academic community and society in general, as a result of the greater visibility it has received. It was referenced for the first time in the late 1950s, when it was originally called "battered parent syndrome", and predominantly focused on the permissive attitudes of mothers in response to the aggression of sons and daughters. Despite more than half a century having passed, this type of violence still constitutes a rather hidden problem. This chapter aims to synthesize the main research findings on the phenomenon and contribute to making this social and public health problem visible. It is concluded that the phenomenon emerges from the complementarity of a set of family, educational, social, and personal risk factors on which it is necessary to act.

1. Introduction

Child-to-parent violence (CPV) was defined between the 1950s and 1980s as "battered parent syndrome" (Harbin and Madden 1979) and comprises a subtype of intrafamily violence that has only recently, per some international studies, been unveiled. Accordingly, several definitions have been proposed (Cottrell 2001; Cottrell and Monk 2004; Ibabe et al. 2007) and their combination allows for the phenomenon to be conceptualized as ascending violence perpetrated by children against parents, including all acts of psychological, physical, or financial abuse to inflict pain or suffering and gain control (Cottrell 2001). It manifests itself repeatedly, excluding all isolated cases related to substance use, the presence of mental illness, and mental disability (APAV 2015).

CPV, given its complexity, is a phenomenon of challenging conceptual delimitation, particularly regarding the phase of the life cycle (i.e., what is meant by normative or disruptive behaviors associated, for example, with adolescence or childhood). Indeed, this phenomenon has mostly been investigated from samples of families with adolescent children (e.g., Eckstein 2004) and has been punctuated in the context of youth violence (e.g., Rossi and Rossi 1990; Ulman and Straus 2003). The predominance of discourse and institutional and legal practices also seem to contribute to ignoring the possibility of parents experiencing violence from their children (Holt 2009). Moreover, all violence phenomena are demarcated by a succession of previous, multicausal indicators, in which intrapersonal, family, and socio-community variables interact.

The literature on CPV has mostly focused on predictive and risk factors (Ibabe et al. 2013), family characteristics (e.g., Cottrell and Monk 2004), and prevalence. Notably, some have focused on children aged between 10 and 18 years (Ibabe and Jaureguizar 2011), indicating that the quantitative and qualitative increase in antisocial behavior is more frequent in the middle period of adolescence (Vázquez 2003).

Further, the international guideline of the World Health Organization (WHO 2002) regarding the risk of fragmentation of intrafamily violence phenomena through

their specialization seems to constitute one more factor for the concealment of the phenomenon. However, it seems to be extremely important to analyze the differences that CPV presents relative to other types of domestic violence.

Despite the almost totality of available data relating to childhood and adolescence, this study will examine the phenomenon across the different stages of the life cycle, similar to the Portuguese Association for Victim Support (APAV 2015), holding that violence persists throughout the various stages of the family life cycle, although the problem may have emerged in childhood or adolescence and there are other specializations; that is, violence against the elderly.

2. Components of Child-to-Parent Violence

The literature adopts a set of components associated with CPV: acts of psychological abuse (verbal, non-verbal, and emotional, which implies attacking a person's feelings and affective needs, causing personal conflicts and frustration, including ignoring, humiliating the parent, threatening, lying, and insulting), physical abuse (which integrates behaviors that can result in bodily harm, such as hurting someone through objects, weapons, or using body parts to slap, hit, and push), and financial abuse (which includes conduct such as theft, sale or destruction of objects, and unauthorized and abusive use of bank cards by children) to inflict pain or take control (Cottrell 2001; Eckstein 2004).

In the Portuguese national context, the registered criminality regarding CPV distinguishes it as a form of domestic violence that can be understood in the "broad sense" (e.g., robbery, theft, rape, violation of correspondence, violation of the home, and disruption of private life) or in the "strict sense," including threats and coercion, insults or defamation, physical abuse, and psychological abuse (APAV 2017b).

3. Prevalence, Incidence, and Sociodemographic Characteristics of Child-to-Parent Violence

The theoretical–conceptual fragility inherent to the CPV, the definition of the population regarding age group, and the instruments used to assess the phenomenon justify the challenge in actually estimating this problem (Aroca-Montolío et al. 2014; Estévez and Navarro-Góngora 2009; Ulman and Straus 2003). Moreover, other related aspects, such as shame, the myth of family harmony, the fear of the child's reaction (APAV 2015; García and Tercero 2006), or the repercussions that a complaint may have for the child constitute elements that contribute to the invisibility of this phenomenon. The number of relevant epidemiological studies is also not conclusive. Nevertheless, some efforts have been made to characterize CPV and its prevalence. In a Canadian context, Cottrell and Monk (2004) estimated that 9% to 14% of the parents studied had already suffered an episode of violence perpetrated by their child.

The phenomenon was also analyzed by Cyrulnik (2005), who concluded that CPV had a prevalence of 1% in French families, 4% in Japanese families, and 6% in American families. The author adds that, in one generation, CPV "acquired global dimensions."

In Spain, and based on court cases involving adolescents between the ages of 14 and 18, the results indicate that the prevalence of CPV of the physical abuse type is around 3.1% and that of psychological abuse is 12.9% (Rechea and García 2008).

Regarding sociodemographic variables, studies, in general, indicate that CPV is mostly perpetrated by males (Aroca-Montolío et al. 2014); however, in other

studies, an equal prevalence was found in sons and daughters, with daughters most frequently using psychological violence and sons using physical violence (Gámez-Guadix and Calvete 2012).

Regarding the age of the children, it seems that the phenomenon occurs between 10 and 17 years of age (Cuervo García and Alberola 2010; Rechea and García 2008; Walsh and Krienert 2009).

For the age of the parents, the data indicate that this issue is more prevalent in parents aged between 40 and 50 years (Edenborough et al. 2008; Howard and Rottem 2008; Stewart et al. 2006), although other studies indicate that the phenomenon occurred in half of the cases with parents between 35 and 44 years of age and that in a third of the sample, the fathers or mothers were over 45 years old (Walsh and Krienert 2009).

In Portugal, studies on this phenomenon are also scarce, although there are some data available from 2004 onwards (APAV 2012). The results indicate that in a period of nine years (2004–2012; APAV 2012), 3988 CPV processes were registered. From all these processes, 81% of the victims were female. In 40% of the cases, the victims were over 65 years of age. The aggressors were mostly boys or sons (71%), aged between 26 and 45 years old (42.9%). Regarding the type of crimes perpetrated against the parents, psychological abuse (34.5%), physical abuse (28.4%), and the crime of threats or coercion (18.8%) were identified.

In the 2013–2015 period, APAV (2017b) registered 1777 CPV processes. The tendency for victims to be mostly women (83.4%; n = 1482) and aged 65 years or older remained. Concerning the perpetrators of the crime, the number of victims exceeded 1894, and, in more than 65% of the situations, the perpetrator of the crime was male, aged between 36 and 45 years old (93%).

Such victimization continued and lasted from two to six years (14.4%). Regarding the location of the crime, more than 60% of cases occurred in a common residence, and about 30% occurred in the victim's residence (APAV 2017b).

Considering the trend during the 12 years of analysis (APAV 2012, 2017a) regarding the age of the victim, it is useful to analyze another particular phenomenon: "Elderly people [as] victim[s] of crime and violence" (APAV 2017c). This analysis shows the registration of 3612 cases in the 2012–2016 period. Of all elderly victims, 80% were women, and, in almost 40% of the cases, they had a parental relationship with the perpetrator of the crime. The age of the victim seems to have an inverse relationship with that of victimization; that is, the registration of cases is mostly identified in the age group between 65 and 69 years and 70 and 74 years. In more than 65% of situations, the perpetrator was male (APAV 2017c). Recent data from 2021 to 2024 (SIC Notícias and Lusa 2025) reinforces and intensifies this scenario. On average, APAV supported 1730 elderly victims annually, with 76.2% being women and an average age of 76 years. Notably, 34.5% of aggressors were the victim's own children; this was a sharp increase from previous years. Male aggressors remain the majority, comprising 56.7% of the identified perpetrators.

The data illustrates that elder abuse is not only persistent but intensifying over time. As Alves and Serrão (2017, p. 1) note, this violence remains "one of the most hidden forms of conflict between families", rendering it both socially obscured and academically overlooked. Recognizing this issue as a global social concern is urgent, as it threatens "the right to dignity and the exercise of human rights" (Alves and Serrão 2017, p. 1).

Despite the substantial number of recent decades, this phenomenon remains largely overlooked, highlighting a pressing need for greater visibility, understanding, and intervention.

4. Explanatory Models of Child-to-Parent Violence

Several models have been presented to explain the CPV phenomenon. In general, they can be classified into three broad categories:

(1) Models based on Learning Theories (Bandura's Social Learning Theory; Patterson's Coercion Theory);
(2) Models based on the Ecological Theory of human development (e.g., Cottrell and Monk's (2004) Multifactorial Model; Wolfe et al.'s (1997) Tunnel of Violence;
(3) Models based on Aspects of Social Control, Differential Association, and stressors (e.g., Micucci's VFP Symptomatic Cycle 1995).

The first set of models includes the Theory of Social Learning (Bandura 1992), which explains the phenomenon of violence as modeling the violent behaviors observed in the family context, and the Reciprocal Coercion Model (Patterson 1992), which explains that the origin and maintenance of behavior problems are based on challenges in socialization processes. According to Paterson et al. (2002), CPV stems from the influence of exposure to gender violence, conflicts, and various family problems. This model highlights ineffective educational styles (i.e., permissiveness, neglect, and lack of affection) and exposure to violent behavior.

Considering the Social Learning Theory, Ibabe and Jaureguizar (2011) posit that the frequent observation of parental conflicts is a key dimension of the family system that contributes to the development of aggressiveness and antisocial behavior in young people. They conclude, therefore, that learning plays an important role in the acquisition of violent behavior and attitudes through vicarious learning and imitation of the behavior of attachment and authority figures.

In the second category of CPV explanatory models, the Multifactorial Model by Cottrell and Monk (2004) stands out. In this model, violence results from the interaction between the effects of culture (macrosystem), subculture (exosystem), family (microsystem), and individual/learned (ontogenetic) characteristics. In general terms, Cottrell and Monk (2004) expose different factors that seem to predict CPV, organizing them around different levels of analysis: (a) the macrosystemic level: the models inherent to gender roles and exposure to violence through the media; (b) the exosystemic level: phenomena such as poverty, family stress, peer group influence, social isolation and lack of social support; (c) microsystemic level: integrates the child's inappropriate styles, marital conflicts and problems in resolving family conflicts; and (d) ontogenetic factors: integrating elements such as poor attachment relationships between parents and children, mental health problems, and use of psychoactive substances.

The third category includes the CPV Symptomatic Cycle by Micucci (1995). Micucci (1995) argues that the family with a CPV situation is excessively concerned with eliminating or controlling the symptom, to the extent that the other aspects of family life are neglected. The adolescent child is tagged as the "problem"; thus, the family fails to invest in and respond positively to the child. The child, in turn, feels misunderstood and fails to experience the family as a source of support and guidance. These rigid interactions continue the cycle of violence.

5. Risk Factors of Child-to-Parent Violence

Accordingly, to understand the phenomenon and realize that the variables that induce a greater probability of occurrence and maintenance of CPV are multiple and interacting, several authors have dedicated themselves to its study. In 2015, Martínez et al. (2015) conducted a bibliographic review, based on the Ecological Model of Cottrell and Monk (2004), which allowed for the synthesis of individual, family, and school risk factors that commonly contribute to the initiation and maintenance of the phenomenon.

Regarding individual factors, Martínez et al. (2015) conclude that children have certain conditions such as low empathic capacity, high impulsivity, low frustration tolerance, low self-esteem, challenges in expressing emotions, little capacity for introspection, and predominance of external locus of control.

However, concerning family factors, educational styles, types of family configuration and socioeconomic levels have been studied the most. Martínez et al. (2015), conclude that the negligent style, the authoritarian style, and the overprotective style seem to be the styles that most favor violent dynamics. They also note that different educational styles used by the mother and father are, per some studies, risk factors (Martínez et al. 2015).

Regarding family configuration, some studies indicate that the phenomenon occurs mainly in single-parent families, others indicate a nuclear-type configuration, and others indicate that adoptive families bear the greater risk. Therefore, risk can occur in any family, regardless of its configuration (Martínez et al. 2015). Concerning the socioeconomic level, in the same review, Martínez et al. (2015), conclude that the phenomenon is transversal to all families, regardless of their socioeconomic levels; that is, "in relation to school factors considered to be at risk for CPV, low school performance, learning difficulties, school absenteeism, adaptation difficulties emerge" (Martínez et al. 2015).

6. Ethical Issues Associated with Child-to-Parent Violence

The exercise of the prescribed and explicit power that parents are expected to hold in the exercise of their parental functions is concealed by violence and the disqualification of the adult exercised by a child. Power, unlike violence, is a responsible action, where interaction occurs as an opening to the other. As Foucault (1995, p. 243) distinguishes, "a relationship of violence acts on a body, on things; it forces, it submits, it breaks, it destroys, it closes all possibilities... A relationship of power, on the contrary, is articulated on two elements that are indispensable to it because it is precisely a power relation: that the 'other' (the one over whom it is exercised) be fully recognized and maintained until the end as the subject of the action; and that before the power relationship, a whole field of answers, reactions, effects, possible inventions opens."

All phenomena of violence are characterized by intersubjective social relations embodied by oppression, submission, intimidation, and fear. All violence is a violation of human rights, an annulment of dignity, and a loss of identity for the subject, as a man or woman, as a mother or father, and as a person who cares.

The data presented highlights that the female subject is the most prevalent target of the phenomenon and, thus, gives continuity to the experiences of gender inequalities. It also represents, in this form of violence, the cultural introjection of

the lesser value socially given to women, which has somewhat been acculturated and legitimized.

When children attack their mother, this violence is nothing less than an attempt to gain illegitimate power, a literal inversion of power and control, through force in acts or symbolic equivalents, exercised by the child over the parental figure.

The evoked feelings, such as fear, shame, and humiliation, characterize the great emotional tension generated in these relationships, to which feelings of guilt and hopelessness are added, enhancing inertia. The fear that this phenomenon triggers in parents, regarding their physical integrity and the effect it has on other elements of the family system, facilitates the paralysis and maintenance of violent behavior. The parent avoids sharing the phenomenon of victimization with other people given the feeling of guilt in the face of abuse and an almost global perception of lack of resources and specialized support, generating greater distance and social isolation (Routt and Anderson 2011). However, shame, fear, and guilt can function as mechanisms for minimizing or denying the situation of violence in defense of maintaining a harmonious family image, which leads to an increasingly expansive tolerance of violence before the request for help (e.g., Ibabe et al. 2007).

Feelings of shame and guilt are moral emotions, linked to self-conscience (Tangney and Dearing 2002) and the experimentation and experience of adverse situations from the violation of social and moral norms. They motivate intrapsychic suffering and occur in response to failures and transgressions—self-committed and -evaluated. They are intense, dysphoric emotions, involving serious and lasting situations, encompassing substantial feelings of responsibility (Tangney et al. 1996). Shame, when involving a negative self-assessment, questions self-identity.

Guilt occurs when there is a negative self-assessment of one's behavior and when an obligation emerges to repair the negative action. Thus, the individual recognizes the action as his own and feels responsible for the damage and pain caused to the other. In a situation of violence, the whole family system is disturbed, hindered in its developmental spiral, where the need for help is evoked amid suffering of which everyone is a part. Intervening in violence and curbing it is an act of citizenship because "from the social point of view, the opposite of violence is not non-violence, it is citizenship, and the appreciation of human life in general and of each individual in the context of their group" (Minayo and Souza 1997, p. 528).

The denunciation of this phenomenon by the mother or father also sheds light on the feeling of impotence that hangs in the relational system. Faced with all such complexity, it is necessary, when confronted with CPV, to embrace three essential ethical components: recognition of people's dignity, respect for others, and human values.

Responsibility is simultaneously assigned to the State, the family, and society. Facing the CPV phenomenon does not end with blaming the family, the child, and their punishment; it is necessary to offer opportunities for change.

7. Conclusions

Prevalence studies in the last few decades led us to conclude that the explanatory complexity of the problem translates into conceptualization and operationalization, thus constituting a phenomenon where several risk factors intervene that condition the interpersonal relationships of individuals, exposing them to acts of violence. The need for larger and higher-quality studies to obtain robust data on this phenomenon is evident. Finally, every intervention must be punctuated by support mechanisms

for the family, helping it in the multiple challenges it faces, such as financial limits and resources, availability, and emotional limits, to withstand the wear and tear inherent in life in general and family life.

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16. History of Women in Medicine and Healthcare

Amélia Ricon Ferraz and Ivone Duarte

Abstract: In a global context, documentary sources confirm the most ancient references to women's intellectual qualities and, in particular, to their performance in the field of health. Even in times when their education was proscribed and they were considered "animals of another species", devoid of soul, records of everyday life showed their natural aptitude for issues related to health, sometimes being selected for the treatment of the wounded and the indigent. At all times, there have been worthy representatives of female intellectuality who have known how to impose themselves on the culture of different periods of history. Some were a direct natural product of the environment in which they lived. Others, cohabiting in a stagnant space and time, were able to gather qualities and skills and assert themselves in an unusual but recognized way among their peers. Freedom of thought combined with freedom of action were indispensable achievements for their training and consequent professional and social affirmation. Opposed to specific examples from the past is the exponential number of women that have huge success today in the fields of science and health. Chronologically, and representative of each period of universal history, different personalities are remembered in this chapter, and their existence is contextualized in an effort to perpetuate their names and their testimonies in the present and in future societies.

1. Introduction

Over the centuries and in different cultures, different responsibilities have been attributed to gender. Men have been considered unquestionably superior in the intellectual field, as a natural right. Women have been universally denied education and culture. In 1746, in the "True Method of Studying," the prestigious Portuguese theologian, professor, and writer, Luís António Verney (1713–1792), warned of the need for instruction and development of one's intellectual abilities (Rúber 1956a). He contests the views of many by stating that "They are not of any other species when it comes to the soul; and the difference in sex is not related to the difference in understanding" (Rúber 1956b). For many, women were considered to be different species and harmful to the nation. He was convinced of the advantages of educated women in government and home happiness. In 1879, José Joaquim Barbosa de Araújo Júnior, the finalist of the Medicine and Surgery course at the Porto Medical–Surgical School, praised women's education, intellectual capacity, and access to higher education courses, especially medicine (Júnior 1879).

2. Antiquity

Let us focus on Egyptian and Greek civilizations, which are rich in information in this field. In Ancient Egypt, medicine was the responsibility of the priest caste. As women enjoyed equal rights, the priestesses were part of the divine service and assisted the sick (Lipinska 1900a). Their testimony was more limited than in Greece, as we will now explain. In Homer's works, there is no reference to the treatment of the sick by medical priests but by laic doctors, which does not mean that they did not exist (Castiglioni 1941).

Medical priests who evoked their gods practiced medicine in Asclepius' temples for centuries. They had unusual knowledge, based on a centuries-old oral and written tradition and the experience acquired through the observation and guidance of many patients. Women were part of the divine service, and medical care was the responsibility of both sexes. These priestesses were numerous and highly respected (Diepgen 1932). The records indicate that those most consulted in situations of illness were Juno of Argus, Poliade, the priestess of Minerva, priestesses of the temple of Apollo at Amyclae, and Pythia of the temple of Apollo at Delphi. Anyté (3rd century BC), the priestess of the temple of Aesculapius in Epidaurus, verified the oracles of the god of medicine (Lipinska 1900a). Before entering the temple of Aesculapius, the patient underwent bodily purification and sacrifices and subsequently spent the night at the temple for incubation. The Asclepiades were responsible for interpreting patients' dreams and providing subsequent treatment (Diepgen 1932).

In Greek mythology, goddesses such as Médée, Angitia, and Oenone dedicated themselves to medicine (Lipinska 1900a). Progressively, the development of Greek Philosophical Schools deprived priests of their supremacy in medicine. Among them, women were the most capable in this field. Aristotle (384-322 BC) and Plato (428/427–348/347 BC) recognized women's natural appetites for medicine and philosophy. In the *Corpus Hipocraticum*, there is a clear separation of names and responsibilities between midwives and female doctors. For the Greek physician, Sorano of Ephesus (1st/2nd century), representative of the Methodical School of Medicine, the female doctor should be "versée dans toutes les parties de la médecine, pour donner des prescriptions médicales, chirurgicales et pharmaceutiques, pour juger bien les choses observées et savoir apprécier les rapports de tous les phénomènes relatifs" (Lipinska 1900b). In Gineceos, places for the exclusive use of women, no doctors were admitted, and care was left to female doctors.

Regardless of their place of birth, Greek women were intellectually proficient and knowledgeable in the arts, letters, and science. During the Roman rule, there were numerous female doctors. It is possible that Greater Greece (Southern Italy), occupied by Doriens, played a dominant role. Later, the School of Salerno emerged, and Greek and female doctors who settled in Rome prepared themselves there. The writings of Pliny (23-79 AD) contained the first information about female doctors: Olympias, Salpé, Sotira, and Lais (Lipinska 1900a).

Galen of Pergamum (129–216) talks about several female doctors and presents fragments of their writings: Eléphantis, Engérasie, Antiochis, Samithra, Xanita, and Maia. Several female medical writers distinguished themselves over time, including Origénie, Métrodora, and Aspasie. The first reference to the rules for using the Podalic version is attributed to the latter (Lipinska 1900a).

The granting of Roman citizenship by Gaius Julius Caesar (100-44 BC), the Emperor of Rome, to educated foreigners encouraged their arrival and settlement, as happened with Greek and female doctors. The liberal spirit of Greek law penetrated Roman law. The rigor of the traditional Roman family that conditioned women's freedom was definitively broken. Several authors discussed female doctors in Rome. The earliest writer was Scribonius Largus (c.1-c.50). Doctor Octavius Horatianus (4th century) dedicated the third book of his body of works to the female doctor Victoria (Salvina), demonstrating equal treatment between peers, synonymous with the recognition of her value. In Chapter V, *De Conceptione* states: "You sais tres bien, you le sais même mieux que moi, vu ta clientèle spéciale, combien il est important, dans notre profession, de posséder des connaissances sur ce point-là;et, combien de

gratitude et de renommée acquiert um médecin, si, en suivant ses conseils, une femme sterile conçoit" (Lipinska 1900a). In his fourth book, he mentions another female doctor, Léoparda, regarding the treatment she recommends for dropsy patients. They have been immortalized by poets. Particularly abundant are the references to female doctors in funerary epigraphy observed in Italy, France, and the Iberian Peninsula, where the precision of the document attests to their existence (*iatromaiai*, *medicae*) and the presence of midwives (obstetrics). Among the women who embraced Christianity, some dedicated themselves to medicine: Theodosia, the mother of Saint Procopius; Saint Nikerates of Constantinople; and Saint Fabíola, the founder of the first hospital in Italy (Ossie, 380) (Lipinska 1900a).

3. Middle Ages

In Christianity, God was credited with the appearance of illness and its cure. Health professionals are agents of God who register medical practice as an exercise in Christian charitable activities. The Low Middle Ages saw the fusion of classical, Christian, and Germanic traditions, synonymous with the existence of medicine oriented toward empirical practice. There was no organized professional body or systematic medical education, nor was there a clear distinction between learned and popular practice in diagnosis, prognosis, and therapy. A written medical tradition persisted within monastic and cathedral libraries, cultivated by the clergy outside and within the Church in institutions providing care for the sick and indigent under the direction of religious or laic people (Loudon 1997). One of the most notable medieval female personalities, Saint Ildegard of Bingen (1098–1179), lived within one of these institutions. Although she was not canonized, she was the founder of the Benedictine convent of Rupertsberg, a supporter of scholasticism, associated with a greater general culture but possessing an independent spirit and superior intelligence, and stimulated by coexistence and correspondence with the great thinkers of the time and by a refined sense of observation. She is knowledgeable about medicinal plants and their therapeutic properties. She was a notable encyclopedist with an unusual culture and was endowed with a visionary and prophetic spirit. The historians, Godofredo and Teodorico, confirmed that the sick were cured when they approached her. Science was a divine revelation for her, as was the cure for various diseases. Among her works are "*Causae et Curae*," which includes books on cosmology, theology, physics, botany, and medicine; "*Physica*," which includes several books on the healing powers of plants, the properties of animals, stones, metals, and poisons; and "*Scivias*," which includes the testimony of her visionary character and conceptions about the soul. In her writings, she highlights exact ideas about knowledge that was still poorly understood at the time, such as information on blood circulation, universal gravitation, the brain as the regulatory center of life, and the interference of nerves and the spinal cord in vital phenomena (Rúber 1956a; Lipinska 1900a; Costa and Costa 2019).

At the end of the 11th century, the predominance of classical and intellectual traditions resulted from a confluence of multiple factors. Constantine, the African, converted to Christianity and became a monk at the Monastery of Monte Cassino, where for three decades, he translated countless Latin medical works into Arabic and originally Greek, prompting the development of many translators of the theoretical medical system in Antiquity. The relevance of these works came from their dissemination and application in the School of Salerno, south of Cassino, with strong

relations with the Monastery, whose origins date back to medieval times but whose secular nature and respect for different creeds and knowledge favored and granted privileges to women in the study and practice of medicine. Throughout history, it has been recorded as one of the most notable medieval scientific institutions (Castiglioni 1941; Diepgen 1932; Loudon 1997). It was up to the Salernitan masters to subject Constantine's translations to intense study and select a set of fundamental texts—the "*Articella*" or "*Ars Medica*"—for teaching medical students at this prestigious school. Doctors' names did not stand out, as there was scientific cooperation. There were several female students in Salerno and many female doctors whose knowledge of and dedication to medicine were also recorded. The historians Mazza, Castelamala, and Toppi talk about some of these female doctor writers: Abella, author of the writings *De Atrabile* and *De Natura Seminis Humani*; Mercuriade, *De Crisibus, De Febri Pestilenti, De Curatione Vulnerum*, and *De Unguentis*; and Rebecca Guarna, *De Febribus, De Urinis* and *De Embryone* (Lipinska 1900a). In the Royal Neapolitan Archives, there is a document dated September 10, 1321, passed on by Charles, Duke of Calabria, which granted Françoise permission to practice surgery after receiving a public certificate from the School of Salerno: It stated that she had undergone solid training in surgery and examination before a committee of doctors and surgeons.

It is also said that in the 15th century, Constance Calenda, daughter of the Dean of the Faculty of Medicine at the University of Salerno and later of Naples, received the insignia of graduation in medicine (Lipinska 1900a). However, the most striking female figure in medieval medicine was Trotula. Historians of medicine are divided as to the real existence of Trotula, the "*matron sapiens*" and "*mulier sapientíssima*," who, according to some, lived in Salerno in the 11th century before Constantine arrived at Monte Cassino and belonged to a noble family and the medical college of Salerno. Trotula was a product of an environment that cultivates freedom of thought and action and is a feminine medical symbol of Salerno. Several manuscripts are attributed to her, such as "*De Passionibus Mulierum*," which was dedicated to women before, during, and after childbirth, and the first description of an episiorrhaphy, secondary to a perineal laceration. Cited by several writers and poets of her time, it appears in the "*Thesaurus Pauperum*" written by Pedro Hispano (1215–1277), Pope John XXI of Portugal (Hispano 2008). In fact, the Salerno School knew how to privilege the role of women in medicine, irrespective of whether Trotula was real or a symbol of medicine and female intellectuality in Salerno (Rúber 1956a; Lipinska 1900a; Costa and Costa 2019).

Universities or general studies emerged in the 12th century when groups of cathedral masters gained legal recognition for their corporate status. Within medical schools, there is a concern about defining their intellectual world and differentiating it from natural philosophy. The basis of the study was the written word according to Hippocrates, Aristotle, Galen, and Arabic-speaking authors. The dissection of the human cadaver began to gain value, and traditional manual surgery struggled to gain scientific status. The support of a secular society, which recognized the importance of scholasticism on the path to truth, favored the spread of academic medicine during the High Middle Ages. Meanwhile, in Western cities, concerns about public health issues grew, municipal governments hired professionals with academic training, and hospitals had salaried doctors and surgeons, asserting the secularization and weakening of the clergy in university teaching and healthcare practice and the exclusion of women (Castiglioni 1941; Loudon 1997). In the 14th century, the Church

excommunicated several female doctors from practicing medicine. It should be remembered that Jacobe Félice, a noble doctor, was condemned by the Paris Faculty of Medicine despite the laudatory testimonies of all her patients, who even attested to the abandonment to which they were subjected by the certified doctors who followed them (Lipinska 1900a). However, there was a tolerance for empirical practitioners out of civic interest, which included women who mostly had less medical knowledge, although some had clear familiarity with this field. Female doctors acquire medical science knowledge through practice. They learned alongside a doctor, studied books, and exercised as much as possible. After a few years, their knowledge and experience were attested, and they were considered master doctors or surgeons.

In the 13th and 14th centuries, Plague and Syphilis drastically affected the health of the population and the medieval medical care system. The establishment of hospitals, regulation of public health, and creation of new institutions to protect professional practices were encouraged. With the support of the nobility, universities, and municipalities, it was possible to develop a legal structure that promoted teaching and clinical practice until the 18th century. First, in Italy and then in England, the institutionalization of a certified professional elite that aspired to control the practices of different healthcare providers emerged (Castiglioni 1941; Loudon 1997; Poulet et al. 1977).

4. 16th Century

The 16th century saw a return to the study of original classical texts: the taste for direct observation of phenomena stimulated by the discovery of the new world and the rapid spread of knowledge with the introduction of the art of printing; the interest in the systematic study of cadavers, with consequent advances in surgery, and in *Materia Medica*; and the emergence of new medical systems in opposition to humoral theory, as advocated by Paracelsus (1493–1541).

In 16th-century Europe, the first healthcare was provided at home by the women of the house, who followed many of the doctors' prescriptions at the time in preparing food, drinks, and medicinal compounds. Documentary records noted prudence, discernment, and dedication as being among the qualities of these women. The most notable examples are noblewomen and companions who treated family and friends out of social group duties, religious duties, or intellectual affirmation. They had specialized experience, mainly in rural areas, particularly after the introduction of printing art and the consequent widespread dissemination of knowledge (Castiglioni 1941; Diepgen 1932; Loudon 1997). Many, given their proximity to practitioners such as surgeons, barbers, and apothecaries, exercised certain rights because they claimed to have this knowledge. Some, such as Lady Grace Mildmay (1552–1620), author of one of the first autobiographies in English, compiler of recipes and medical documents, and a health service practitioner, even organized libraries of medical books and compiled recipes. There seems to have been a matrilineal matrix of female literacy within her family, which included reading the Bible, playing the lute, singing psalms, drawing, embroidering, and studying medical texts and plants. In her medical and surgical practice, there is a reflection of official knowledge, although it is unknown whether this resulted from readings by the most considered authors or from their direct guidance. Her clinical practice provides metaphors for spiritual meditation. They were a natural extension of God's work and the works of charity in the service of healing. God gave her the ability to become a doctor and choose the right treatment. She associated diseases with the original sin. She worked with

humility and deference from the university-trained professionals. She had vast medical knowledge based on galenic medicine, which considered the balance of humor responsible for the state of spiritual, moral, and physical health, and practiced allopathic therapy involving medicinal plants, chemicals, and minerals. Her writings highlighted her clinical experience and brought together several clinical stories with the respective identification of the patient, symptoms, and nosological interpretations (Hellwarth 1999).

In domestic medicine, other professionals have also emerged, including midwives, doctors, and surgeons. In the largest population centers, since the mid-15th century, municipal councils have instituted formal licenses and supervision of midwives' practices, ensuring minimum levels of competence and moral character required to occupy positions created by civil and ecclesiastical authorities. Simultaneously, the number of unlicensed and informally trained midwives has increased.

At the time, another traditional place of clinical activity was the emergence of new headquarters for healthcare, urban hospitals, and charitable institutions that focused more on treating patients than confining them. There are leprosariums and hospitals for patients with this type of illness. Meanwhile, churches and sanctuaries were the centers of healthcare (Castiglioni 1941; Diepgen 1932; Loudon 1997).

In the Renaissance, there was greater complexity and quality in the organization of healthcare, given the established public health measures, the professionalization and specialization of clinical practice, and the organizational preference for certified people.

Among official medicine practitioners, there was a persistent refusal to accept the admission of women to medical schools and clinical practice, with a particular emphasis on older women. Regulations excluding women from assisting patients have also increased. In this century, female doctors practically disappeared from France, but female surgeons belonging to the Corporation of Surgeons persisted, though they were overlooked by their peers, who were also considered inferior to doctors and artisans. Meanwhile, there was centralization of all jobs for men, even those in the Middle Ages belonging to the female sphere. In 1484, Charles VIII (1470–1498) of France prohibited the practice of surgery by women, except for surgeons' widows, a situation definitively prohibited by the parliament in the 18th century.

The fight by German universities against the inclusion of women in higher education was not as intense as that in France, and there was greater tolerance from the authorities for the professional practice of women doctors. During this period, Anne Sophi, the Princess of Denmark, stood out, as she had great knowledge of languages, botany, and medicine. She created several botanical gardens, where she prepared medicines for the poor, and a pharmacy in Dresden. Eléonore, the Princess of Wurtemberg, also dominated therapy at the time and inspired the publication of a manual. Eléonore de Troppau and Jagerndorf (1600) wrote a prescription for all diseases. In 16th-century England, women possessed linguistic and literary knowledge and experienced great erudition. Some even read ancient doctors' works (Lipinska 1900a).

5. 17th Century

From the presentation of blood circulation in 1628 by William Harvey (1578–1657) to the formulation of microbial theory by Louis Pasteur (1822–1895), there have been important developments in medicine, given the increasing number of

certified professionals, the development of medical theory and practice following research conducted in the field of exact sciences and anatomy, and the environmental changes associated with population growth and subsequent urbanization. These were challenging times for women in healthcare and as alternative practitioners (Castiglioni 1941; Diepgen 1932).

In the 17th century, the common domain continued to be the use of more skilled family members, friends, and neighbors. The wives of religious and noble people visited the needy and sick and provided advice, food, and medical treatment. Patients had accepted traditional practices such as bloodletting, purging, uroscopy, or the use of therapies. However, there was a growing interest in new medicines such as chinchona, chocolate, coffee, and tea. The press was the vehicle for information on different medical topics such as new medicines and the skills of different practitioners, and knowledge spread given the use of vernacular. The century was dominated by supporters of Iatrophysics and Iatrochemistry in the interpretation of human physiology and pathology and by the introduction of the inductive method by Bacon of Verulam (1561–1626). Universities that required religious admission tests from students were more traditional than those that did not and proposed more practical teaching based on experience. Women were prohibited from university training; however, in an episodic manner, some were certified in clinical practice (Castiglioni 1941; Diepgen 1932; Loudon 1997).

In many trades, women were involved in their husbands' work, training their apprentices. In the Company of London Barbers, widows were allowed to continue their husbands' trade throughout the century. The same did not occur for surgeons' widows (Young 1890).

In this century, there was a devaluation of female education in France and their interest in science and medicine. German historians and bibliographers cite several women with profound knowledge of medicine: Barbe Weintraubin (manual), Elisabeth Marguerite Keil (obstetrics manual), Margarite Sibylle von Loeser (memorized Sennert's treatise, therapeutic experiences), and Christine Régine Hellwig (poet and pianist with medical experience). In Bern, Switzerland, Marie de Colinet (c.1560-after 1638) learned surgery and the art of childbirth with her husband, the prestigious surgeon Fabricius Hildanus (1560–1634), known as the father of German surgery. In *Opera*, Fabricius (1646) describes many of the successful medical and surgical acts of his wife and apprentice, who would become a distinguished surgeon and midwife. It reports a case of the extraction of a metallic body from the eye using a magnetic stone, the performance of one cesarean section, and the application of heat to stimulate labor. In England, Lady Halkett (1622–1679), the daughter of a Scottish nobleman, began studying medicine and surgery at a young age to help the poor. Patients sought services from all parts of the country and continents. She also stood out in the battle of Dunbar in the accompanying wounded war, receiving the king's thanks for her patriotism and competence. It is worth mentioning "A choice manual or rare secrets in physick and chirurgery" (1670), the work of Elisabeth, Countess of Kent, which had three editions and a translation into German (Lipinska 1900a; Evenden 1998).

6. 18th Century

In the 18th century, reason was valued as an instrument for achieving truth. It was a time when medical systems were in opposition to the materialism of the

previous century. The art of printing is particularly relevant among certified and non-certified professionals, as it constitutes an important vehicle for information about the work carried out and clinical practices. As the number of hospitals increases, patient admission control becomes more dependent on health professionals, who create better learning conditions. Privilege is given to the nosological classification of diseases, their anatomo-clinical study, the control of epidemics, military medicine, and public hygiene as governmental ideas (Castiglioni 1941; Diepgen 1932; Guthrie 1947). Particular attention was paid to minimizing the high neonatal and infant mortality by educating mothers and midwives and building orphanages. Invaluable efforts were made by Angélique du Coudray (1712–1794), a midwife commissioned by Louis XV (1710–1774) of France, to teach the art of childbirth throughout the kingdom. She came from a prestigious family of doctors. After three years of training with a qualified midwife, she took exams at the *École de Chirurgie* in Paris and passed. In the following years, within this institution, there were strong constraints on the training of women, who were dominated by surgeons. The Paris Faculty of Medicine and qualified doctors, not surgeons, recognized the importance of training midwives and those aspiring to this practice. She was the head of midwives at *Hôtel Dieu* in Paris and the author of the illustrated book *Abrégé de l'art des accouchements*, published in 1759, the year in which she received the king's invitation to, with her intervention, contribute to reducing the high rate of neonatal mortality. Between 1760 and 1783, she traveled throughout the country, teaching courses with the support of a life-size obstetric model, the first of its kind capable of facilitating the understanding of the mechanism of childbirth and the nature of the necessary maneuvers (Cody 2001; Gelbart 1998).

The number of universities continued to increase, and existing ones were being reformed to provide experimental education; however, they continued to prohibit access to women, although this was occasionally seen as outdated.

Dorothea Christiane Leporin (1715–1762) stood out as the first doctor to train in Germany. She had the opportunity to take the same preparatory studies for the medicine course as her brother because her father, the progressive doctor Christian Leporin, recognized his daughter's intellectuality and the advantages of her training. To enter the University of Halle with her brother, she had to receive authorization (4–1741) from King Frederick II of Prussia (1712–1786). She delayed her entry to marry widower Johann Christian Erxleben, the father of five children. The union has four descendants. Large family members delayed entry for a few years. For economic reasons, she successfully began clinical activities in her hometown of Quedlimbourg before completing the course. On 12 June 1754, she received her diploma after defending her dissertation entitled "Concerning the Swift and Pleasant but, for that Reason, Less Than Full Cure of Illness" published in Latin and German. In some respects, her recommendations are current. For the remainder of her life, she practiced medicine (Howard 2007; Poeter 2008).

Another important reference in this century was Regina Salomée Halpir (1718–1763), the first doctor in the Grand Duchy of Lithuania. In her 1760 memoirs, there are clear testimonies about her connection to her family, her love for traveling, and her dedication to medicine. She is known by various names, some associated with her childhood and others with her three husbands. Born in Navahrudak, in the Grand Duchy of Lithuania, she married Dr. Jacob Halpir, a Lutheran German optician, at the age of 14 years. She lived in Constantinople, the Ottoman Empire, and provided assistance and learned

clinical practice with her husband. After his death, she traveled through Europe and rescued prisoners from the Austro–Russian–Turkish war (1735–1739). One of them, Professor Pilstein, became her second husband, who, at the invitation of Michel Radziwill (1702–1762), became a doctor in Nesvizh. Halpir remained in St. Petersburg to free Turkish prisoners from war. She attended the Imperial Court during the time of Anna Ivanovna (1693–1740). Returning to Poland, she separated from her second partner, whom she accuses of adultery and attempted poisoning. Later, she had a relationship with a Polish nobleman who accused her of having an interest in her personal fortune. She decided to return to Constantinople and assumed the role of doctor in the Harem of Sultan Mustafa III (1717–1774). She was a Christian who had never received a formal medical education but practiced successfully in several Turkish, Polish, and Austrian cities (Lovejoy 1957; Baudouin 1901).

During this century, several doctors, including Anna Morandi Manzolini, Maria Mastellari, and Maria Dalle Donne, trained at the University of Bologna. Anna Morandi (1716–1774) married painter Jean Manzolini in 1740, who received geometry and anatomy lessons from Master Hercule Lelli. He received an order to produce a series of anatomical preparations in wax from Pope Benedict XIV (1675–1758) and associated Manzolli with the project. Later, they stopped collaborating and Manzolli decided to introduce his wife to the art. Anna studied anatomy deeply, practiced the dissection of corpses, decorated her home with many of her wax preparations, and executed them with extraordinary skill and detail. She was the first to represent structures as small as blood vessels and nerves in wax. Priority was given to identifying the precise termination point of the oblique muscles of the eye. Her husband died in 1755, and the following year Anna was appointed Lecturer in Anatomy at the University of Bologna. Subsequently, she was a member of the Clémentine Academy (1758), the Foligno Literary Society (1760), and the Florence Drawing Academy (1761). Her value was known internationally; therefore, she was invited to join different universities, which she kindly refused by sending boxes with her preparations and respective explanations. After her husband's death, she offered books, preparations, and instruments to Count and Senator Ranuzzi. Later, the Senate of Bologna decreed the delivery of the preparations to the Anatomy Museum at the University of Bologna (Lipinska 1900a; Pazzini 1947).

Mastellari received a degree in 1799. Dalle Donne (1777–1842) received hers in the same year. She was authorized to direct a school of midwives in 1801 and, given her competence, Napoleon Bonaparte (1769–1821) created the chair of obstetrics for her. In May 1829, she joined Benedettini Accademici Pensionati in Bologna (Lipinska 1900a). Maria Petraccini (1759–1791) studied Medicine at the Universities of Florence and Ferrara, where she attended an anatomical course. She was also a professor of anatomy at another university. Her daughter, Zaffire Peretti, obtained a doctoral degree and became a professor of Anatomy at this University (Lipinska 1900a; Pazzini 1947).

In France, three women were prominent: Bihéron, D' Arconville, and Necker. First, it is enough to remember the session of 6 March 1771, of the Royal Academy of Sciences, which was attended by the prince of Sweden, the future Gustav III, in which D'Alembert's speech and the memories of Macquer, Sage, and Lavoisier followed Bihéron's anatomical demonstrations, delighting the future monarch. Bihéron came from a humble family and was, from an early age, inspired to pursue anatomical knowledge. Therefore, she observed dissections in different amphitheaters and

studied hard from books, especially those related to corpses. The demonstrations were clear and precise. Her value was not properly appreciated by her peers but was recognized by Jessieu and Villoison in Paris and by Hunter and Hewson in London. The Russian ambassador bought her preparations for Empress Catherine II (1729–1796). The second prominent woman was Geneviève-Charlotte d'Arconville (1720–1805), a prestigious anatomist and author of several documents on anatomy, physiology, histology, and pathology. Of these, the "*Essai pour servive d' l' histoire de la putréfaction*" (1766) stands out; it brings together her experiments with animal, vegetable, and mineral substances capable of delaying or accelerating decomposition. In 1759, she edited the translation of Alexandre Monro's *Treatise on Osteology* by Dr. Sue, which she enriched with anatomical drawings, notes, and a preface. Although she was aware that it was necessary to study nature, she recognized that her drawings, faithfully copied from corpses, could well be their representation. Third, Necker was a pioneer of hospital reform in France and a precursor of legal medicine in the country. In 1779, she founded a small hospital with 120 beds to serve as a test bed for the reforms she considered relevant. In her writing "*Hospice de Charité, institution, règles et usages de cette maison*," she brings together information such as human and material resources, methodology, accounting, and results. These surprising results serve as a model for the lessons of humanity and the economics they represent. In 1790, she published the work "*Inhumations précipitées*," where she called for the detailed examination of signs of death, the creation of funeral surgeon-inspectors, and infrastructures for storage in hospitals and different towns (Lipinska 1900a).

In England, in the first half of the century, Catherine Bowler, a female surgeon and an expert in the treatment of hernias and hydroceles, stood out. Jeanne Stephens introduced her medical invention for the treatment of urological lithiasis, a secret purchased by parliament in 1740 for GBP 5000. Lady Montague, ambassador to Constantinople, where she became familiar with the smallpox inoculation technique and aware of the benefits for humanity, was a staunch promoter of the method in her time (Lipinska 1900a).

7. 19th Century

The first half of the 19th century saw the individualization of several medical specialties and new nosological entities. The invention of the stethoscope by René Laennec (1781–1826), providing immediate auscultation, opened horizons in cardiopulmonary disease studies and their consequent individualization. Since Marie François Bichat (1771–1802), injuries to the basic tissues that make up different organs have been known to cause diseases. The importance of relating these findings to disease symptoms has been recognized. The study of the human body, whether sick or cadaveric, is important. Jean Dominique Larrey (1766–1842), chief physician of Napoleon's Grand Army, introduced field units for first aid, immediate surgical interventions, and refrigeration as an anesthetic in cases of amputation. The introduction of statistics in the numerical analysis of clinical cases constitutes a precious instrument for the evaluation of therapeutic results and, consequently, in decision-making in all areas of health. It was the time of affirmation of new medical treatments, such as homeopathy, medicinal waters, and those resulting from laboratory research such as those developed by François Magendie (1783–1855), Claude Bernard (1813–1878), and Justus von Liebig (1803–1873). Cellular theory was defended by Mathias Schleiden (1804–1881) and Theodore Schwann (1810–1882),

and cellular pathology was defended by Rudolf Virchow (1821–1902). Bernard's great contribution was the introduction of the concept of constancy of the "internal environment" through the intervention of self-regulatory mechanisms such as the nervous and hormonal systems. Since the end of the 18th century, there has been a demographic revolution with rapid population growth and migration to cities associated with growing industrialization.

In general, the poor hygiene and sanitary conditions of homes and city spaces favor the outbreak and maintenance of various infectious diseases associated with high morbidity and mortality. Governments are becoming increasingly responsible for maintaining the health of the population (Castiglioni 1941; Diepgen 1932; Loudon 1997; Guthrie 1947; Pazzini 1947). Even at a time when microbes were unknown etiopathogenic agents, two figures stood out for the marked reduction in hospital morbidity and mortality rates by systematically introducing hygiene measures into the services for which they were responsible: Ignaz Semmelweis (1818–1865) and Florence Nightingale (1820–1910). Semmelweis' hygiene measures, implemented in the labor ward, led to a marked reduction in mortality from puerperal fever. Florence Nightingale came from a wealthy British family, and her name was associated with her homeland in Italy. During her childhood in England, she was educated in history, mathematics, classical literature, philosophy, and language. She aspired to become a nurse, even against the advice of her family, at the Kaiserswerth Institute in Dusseldorf, Germany, and began her education in this field. From April 1853 to October 1854, she was superintendent at the Institute for the Care of Sick Women on Upper Harley Street, London. That month, in the company of a group of nurses prepared by her and some Catholic nuns, she left for the main British base under siege in the fields of Scutari in the Ottoman Empire, where she carried out important humanitarian services for two years, with the restructuring of hospital services. She is credited with the systematic introduction of thermometry in clinical practice. She valued the graphical presentation of statistical data to corroborate her decisions.

Government measures, combined with her intervention and those of her working group, significantly reduced morbidity and mortality during wartime and were a model of inspiration for hospitals during peacetime. Still, during her presence in Crimea, in honor of her dedication and work, the Nightingale Fund was created, which allowed for the inauguration of the Nightingale Training School at Saint Thomas Hospital (9-7-1860), the school of reference names in nursing. Linda Richards was considered the first to be certified in the USA. Nightingale's work "*Notes on Nursing*" (1859) is considered a classic nursing guide, published at a time when women professionals were not properly valued. Simultaneously, it describes the necessary conditions for the operation of home nursing services for poor patients. She has been awarded the Royal Red Cross (1883), Order of Saint John (1904), and Order of Merit (1907) (Strachey 1918; Bostridge 2009).

The second half of the 19th century saw the birth of different surgical specialties, given advances in the field of anesthesia, physical methods of hemostasis, and the introduction of asepsis and antisepsis. Parallel to the introduction of different types of anesthesia, there has been a progressive transformation of the equipment used in the specialty. Relative to the physical methods of hemostasis, the introduction and progressive adaptation of hemostatic forceps constituted an advance that contributed to a reduction in peri- and postoperative morbidity and mortality. Louis Pasteur (1822–1895) debunked the theory of spontaneous generation, identifying microbes as

etiopathogenic agents of some diseases and advocating heat asepsis. Joseph Lister (1827–1912), who is considered the father of modern surgery, introduced carbolic acid as an antiseptic after experimenting with others in the air and the operating field in the preparation of sutures, compresses, bandages, and surgical instruments, with excellent results (Ricon Ferraz 1996; Ricon Ferraz 2010). Advances in microbiology have been associated with the growing appreciation of laboratory research, such as the production of vaccines and serum. Roentgen (1845–1923) discovered X-rays and demonstrated the feasibility of studying the internal structures of the human body.

During the 19th century and the beginning of the 20th century, women with medical degrees continued to gain prevalence, as confirmed by the note below, which identifies the first degree in each country, the date, and the alma mater. At the University of Zurich, 11 of the first graduates from the following countries graduated in chronological order as follows: Germany, Switzerland, Poland, and Georgia. In the same year, Hungary, Serbia, and Moldova recorded having graduates. Later, graduates from the Czech Republic, Lithuania, Croatia, and Ukraine followed. At the University of Paris, it was first implemented in the United Kingdom, France, Bulgaria, Romania, and Greece. At the University of Bern, there were two in the same year from Colombia and Scotland, and later from Belgium and Estonia. At the Women's Medical College of Pennsylvania, there were graduates from the USA, Canada, and India, including USA natives and Syrians. The *Escuela Nacional de la Medicina de México* saw graduates from Mexico and Nicaragua. The remaining 24 institutions noted only one first-class medical graduate:

- EUA, New York Geneva College, 1849, Elizabeth Blackwell (National Women's History Museum 2024);
- EUA, Boston New England Female Medical College, 1864, Rebecca Lee Crumpler, 1st African American (National Library of Medicine n.d.);
- Russia, University of Zurich, 1867, Nadezhda Suslova (University of Zurich 2017);
- UK, Paris Faculty of Medicine, 1870, Elizabeth Garrett Anderson (University of London 2024);
- Germany, University of Zurich, 1870, Emilie Lehmus (Ogilvie and Harvey 2003);
- Switzerland, University of Zurich, 1874, Marie Heim-Vogtlin (Hommage 2024);
- France, Paris Faculty of Medicine, 1875, Madeleine Brès, 1st French (BIU Santé 2024);
- Canada, Women's Medical College of Pennsylvania, EUA, 1875, Jennie Kidd Trout (Museum of Health Care 2024);
- Colombia, University of Bern, 1877, Ana Galvis Hotz (Fernández-Cano et al. 2016);
- Italy, University of Florence, 1877, Ernestina Papper (Odessa Journal 2024);
- Scotland, University de Bern, 1877, Sophia Jex-Blake (Undiscovered Scotland 2024);
- Poland, University of Zurich, 1877, Anna Tomazewicz-Dobrska (Unless-Women 2024);
- Finland, University of Helsinki, 1878, Rosina Heikel (YLE 2011);
- Bulgaria, Paris Faculty of Medicine, 1878, Anastasia Golovina (Infinite Women 2024);
- Georgia, University of Zurich, 1878, Pelagia Natsvlishvii (Georgia Today 2021);
- Hungary, University of Zurich, 1879, Vilma Hugonnai; 1897 medical practice (Daily News Hungary 2017);

- Holland, University of Groningen, 1879, Aletta Jacobs (Institute for Gender Equality 2024);
- Belgium, University of Bern, 1879, Isala Van Diest (The Brussels Times 2024);
- Serbia, University of Zurich, 1879, Draga Ljocic-Milosevic (Biographies.net n.d. "Draga Ljocic Milosevic" 2024);
- Spain, University of Barcelona, 1879, Dolors Aleu i Riera (Societat Catalana de Biologia 2024);
- Moldova, University of Zurich, 1879, Maria Baltaga-Savitski (Biblioteca USMF 2018);
- South Africa, London School of Medicine for Women, 1880, Jane Elizabeth Waterston (MDDUS 2022);
- Czech Republic, 1880, University of Zurich, 1880, Bohuslava Kecková (Tahirović and Fuchs 2019);
- Sweden, Karolinska Institute, 1884, Karolina Widerstrom (Svenskt Kvinnobiografiskt Lexikon 2024);
- Romania, University of Paris, 1884, Maria Cutarida-Cratunescu (Prabook 2024);
- Japan, Koju-in Medical School, 1885, Ginko Ogino (National Diet Library 2024; Pixstory n.d.);
- China, Women's Medical College of New York, 1885, Kin Yamei (Roberts 2018);
- Denmark, Kobenhavns University, 1886, Nielsine Nielsen (Danmarkshistorien.dk 2024);
- India, Women's Medical College of Pennsylvania, EUA, 1886, Anandibai Gopalrao Joshi (India Today 2020);
- Chile, *Escuela de Medicina de la Universid de Chile*, 1886, Eloísa Diaz (British Chilean Chamber of Commerce 2024);
- Mexico, *Escuela Nacional de Medicina de México*, 1887, Matilde Montoya (Secretaría de Salud de México 2024);
- EUA, Woman's Medical College of Pennsylvania, 1889, 1st native doctor, Susan La Flesche Picotte (Changing the Face of Medicine n.d.);
- Cuba, *Universidad De La Habana*, 1889, Laura Martinez de Carvajal (EcuRed n.d.);
- Argentina, *Faculdad de Ciencias Médicas de la UBA*, 1889, Cecilia Grierson (Museo Roca 2024);
- Australia, University of Trinity College, Toronto, Canadá, 1890, Emma Constance Stone (Russel 2006);
- Syria, Women's Medical College of Pennsylvania, 1890, Sabat Islambouli (MedWorld 2024);
- Ireland, Royal University of Irland, 1890, Eleanora Fleury (PeoplePill 2024);
- Portugal, 1891, *Escola Médico-Cirúrgica do Porto*, Aurélia Morais Sarmento, Laurinda Morais Sarmento, Maria Paes Moreira 1891, *Escola Médico-Cirúrgica de Lisboa* Amélia Cardia e Elisa Andrade (Santos 2018; Santos 1991);
- Lithuania, University of Zurich, 1892, Barbora Burbaitè-Eidukevicienė (LRT English 2024);
- Norway, Frederiks University in Oslo, 1893, Marie Spangberg Holth (Tidsskrift for Den Norske Legeforening 2003);
- Croatia, University of Zurich, Milica Sviglin Cavov, 1893, first to be banned from practicing in the country; University of Zurich, Karola Maier Milobar, 1900, first authorized in 1906 (Zuskin et al. 2006);

- Ukraine (Austro–Hungarian Empire), University of Zürich, 1894, Sofia Okunevska-Moraczewska (Ferry 2023);
- Greece, Medical School of Paris, 1894, Maria Kalapothakes (Geropeppa et al. 2019);
- Democratic Republic of Congo, Women's Medical College of Philadelphia, 1895, Louise Celia Fleming (Moss 1996);
- Austria, *Universitat Wien*, 1897, Gabriele Possanner (Universität Wien 2024);
- Peru, San Marcos National University, 1899, Laura Esther Rodriguez Dulanto (Diaz 2007);
- Belgium, University of Ghent, 1900, Bertha De Vriese (UGentMemorie 2024);
- Corea, Women's Medical College of Baltimore, 1900, Esther Park (Korea.net Honorary Reporters 2023);
- Estonia, University of Bern, 1904, Selma Feldbach (Laidla 2022);
- Ecuador, *Universidad del Azuay—Cuenca*, 1919, Matilde Hidalgo Navarro de Procel (Estrada 2021);
- Nicaragua, National Autonomous University of Mexico, 1927, Concepción Palacios Herrera (ENEL Nicaragua 2024).

The remarkable stories of some of these women are remembered here as testimonies to the challenges and current resources, including their perseverance and determination to become doctors despite legal, social, and cultural constraints and, often, the limitations imposed by their family responsibilities.

In the first half of the 19th century, Marie Josephine Mathilde Durocher (1809–1893) graduated from the Arts of Childbirth and was the first full female member of the Imperial Academy of Medicine of Brazil in 1871. Although she was not a doctor, the recognition of her professional prestige among doctors and patients warrants this reminder. Born in Paris at the age of seven, she arrived in Rio de Janeiro with her mother, who opened a farm and a women's goods store. She married a French merchant who was murdered because of a criminal's mistake. She had two children. She enrolled in the Midwifery Course at the Faculty of Medicine of Rio de Janeiro (1808), which she completed in 1834, receiving private classes from the Court doctor, Joaquim Cândido Soares de Meireles (1797–1868), who would become president of that Academy. In 1866, she was appointed Midwife of the Imperial Household and assisted free slave women and their children. Although gynecology is prohibited for non-physicians, superior recognition of their competence explains the continuity of their practice. She also authored several medicolegal reports. As a member of the Imperial Academy of Medicine, she participated in several working committees in debates on the topics under analysis, namely public health policies, and was the author of more than 20 texts published in the association's journal, some with outstanding historical interest (Silva 2023).

Elizabeth Blackwell (1821–1910) was the first doctor in the United States to train and practice. In 1849, she graduated from Geneva Medical College in NY, USA. Her inaugural thesis, dedicated to typhoid fever and published in the *Buffalo Medical Journal and Monthly Review* (1849), was the first medical article published by a medical student in the USA. Her entry was favored by all male students. Previously, she was admitted to other medical schools and was rejected because of gender discrimination. She was the first member of the UK General Medical Council (GMC) Medical Register. In 1857, she founded the New York Infirmary for Women and Children. She highlighted the importance of female education and played a prominent role in the American

Civil War by creating a medical school for women at the Infirmary and organizing nurses' services. In 1874, Sophia Jex-Blake (1840–1912), the first woman to graduate in medicine in Scotland, opened the London School of Medicine for Women with the primary objective of preparing candidates for the Apothecaries Hall certification exam. Blackwell was an example of a stimulus for the medical training of other women and a leading social reformer in both countries (Silber 2005; Atwater 2016).

Although Mary Edwards Walker (1832–1919) was not the country's first graduate, her story deserves to be remembered. She studied at the first free school in Oswego, New York, which was created by her parents, and later at the Falley Seminary in Fulton, New York. She worked as a teacher in Minetto, New York. When she had some savings, she decided to enter Syracuse Medical College, graduating in 1855; she was the second woman to graduate from this institution after Elizabeth Blackwell. As there were no women in this position, she was a volunteer surgeon in the US Union Army. She served in the first battle of Bull Run, Manassas (1861), and at the Patent Office Hospital in Washington, DC. She founded the Women's Relief Organization to support the families of those injured in the war. She was an unpaid field surgeon on the Union's front lines and the first woman in the US Army. In 1862, she applied to the War Department to be a spy but was refused. In September of the following year, she was hired as an Assistant Surgeon by the Army of the Cumberland, becoming the first woman to be hired by the US Army. She was later appointed assistant surgeon at the 52nd Ohio Infantry Center. She often crossed battle lines and treated civilians and soldiers. She was captured by the Confederate troops and imprisoned from April to August 1864. She defended women's rights, abolitionists, and suffragists. Later, she was the supervisor of a woman's prison in Louisville and the head of an orphanage in Tennessee. She was the only woman to be awarded the highest US military decoration, the Medal of Honor, by President Andrew Johnson (1808–1875) (Pennington et al. 2003; Tsui 2006).

Sophie Jex-Blake (1840–1912) was the first female doctor to practice in Scotland and one of the first in the United Kingdom. She studied at home and in private schools before enrolling at Queen's College in London, contrary to her parents' wishes. She traveled to the USA in the summer of 1865 to update herself on issues related to women's education. During her stay at the New England Hospital for Women and Children, she lived and formed friendships with Dr. Lucy Ellen Sewall (1837–1890), one of the first doctors in the country. She belonged to the Edinburgh Seven Group, the first group of seven women to begin their medical studies at a British university in 1869. On November 18, 1870, on the day of the anatomy exam, the Surgeons' Hall Riot occurred, a landmark in public awareness of the issue of women in medicine. A crowd insulted and attacked medical students traveling to conduct the assessment. In 1873, the Court of Session of the Scottish Supreme Court validated universities' right to refuse to train women. She founded the London School of Medicine for Women (1874). The Medical Act of 1876 mandated equal treatment regardless of sex. The first establishment to grant licenses for women's clinical practice was the Kings and Queens College of Physicians and, later, the Irish College of Physicians, a situation that provided opportunities for some students. However, Sophia Jex-Blake first applied for exams at the University of Bern and obtained her degree in January 1877. Four months later, she could finally register with the GMC, and was the third in the country to do so. Qualified to practice, she settled in 1878 in Manor Place, Edinburgh, becoming the first female doctor in the city,

and opened a clinic elsewhere to treat poor patients. Later, she opened the Edinburgh Hospital and Dispensary for Women, the first Scottish hospital run by women. She helped create the Edinburgh School of Medicine for Women (1886–1892) with Leith Hospital as its affiliated hospital. Elsie Inglis (1864–1917) and Ross Cadell's sisters were the first students at this institution. The former, together with her father, went on to create the Edinburgh College of Medicine for Women (1889–1916) when she became incompatible with Sophia Jex-Blake. Of the Edinburgh Seven, five, including Sophy, graduated abroad in the 1870s in Bern or Paris, three in the United Kingdom, one in Bombay, India, and one in Japan (Roberts 1993; Roberts 2004).

Elizabeth Garrett Anderson (1836–1917), the daughter of a successful businessman, obtained her first education at the Boarding School for Ladies in Blackheath. She joined the Society for Promoting the Employment of Women, a group responsible for valuing the medical careers of women and promoting Elizabeth Blackwell's lectures in London on "medicine as a profession for ladies," as this was someone with with whom Anderson had a close relationship. At Middlesex Hospital, she learned preparatory subjects for medical training from the hospital apothecary as a nurse. She attended private Anatomy and Physiology classes to obtain a certificate of achievement. The male students' objection to her presence in medical school (1861) led her to leave the hospital; however, she received certificates of merit from Chemistry and Materia Medica. After multiple failed attempts at entering medical schools in the United Kingdom, she joined the Society of Apothecaries in 1862. She continued her studies with private lessons at St. Andrews, Edinburgh, and London. In 1865, she was granted a license to practice Medicine by this Society, the first of its kind in England. Unable to practice in a hospital, she dedicated herself to private practice. In 1870, she received her degree in Medicine from the Faculty of Medicine of the University of Paris and, in that year, was elected to the first London School Board and assumed the role of visiting doctor at the East London Hospital for Children, as she declined to dedicate herself to her private clinic. Anderson was the first female physician to hold a university degree in France. The first woman of French nationality was Madeleine Brès (1842–1921) in 1875. She was a co-founder and director of the London School of Medicine from 1883 to 1902, and a lecturer at the New Hospital for Women, the only English hospital that offered courses to women. She was a member of the British Medical Association (1873) and president of its East Anglian Branch. She was a member of the Central Committee of the National Society for Women's Suffrages in 1889. Her name is attributed to the secondary and higher education schools, archives, and health institutions that she founded (Kelly 2017; Ogilvie 1986).

Madeleine Alexandrine Brès (1842–1921) was a self-taught woman who decided to study Medicine at the Faculty of Medicine in Paris and requested an audience from the director of this faculty, Charles A. Wurtz (1817–1884), who recommended that she obtain a prior baccalaureate in Arts and Sciences. After completing three years of training, she resumed her request, accepted only after favorable deliberation by the Council of Ministers. She was 26 years old and had three children. She started the medical course in 1869. When she entered the Faculty, women studying medicine included the Englishwoman, Elizabeth G. Anderson; the Russian, Catherine Gontcharoff; and the American, Mary Putnam. At the time, faculty members were divided by their convictions about admitting women. Wurtz, Sappey, Broca, Landouzy, and Verneuil were in favor. Charcot considered feminine "nature" to be an obstacle for physical, aesthetic, psychic, and sensitivity reasons. Many male students protected and expressed consider-

ation for their colleagues, as is evident from the dedication and acknowledgments of their dissertations. Brès worked for seven years in the Chemistry Laboratory under the direction of Professor Wurtz. For five years, she was guided by Broca, who advised her on a temporary internship at the Hospital de la Pitié in Paris. These two professors praised her exemplary behavior, dedication to studying, and zeal in the hospital, which earned the respect of all the students. The quality of her work gave the faculty the confidence to accept other female candidates. In 1871, she requested authorization from the Director of Public Assistance to conduct internal and external examinations, which were not granted. After that, female students sent several petitions requesting the same rights as male students. The Council for the Surveillance of Administration of Public Assistance opened externships and internships for women in 1881 and 1885, respectively. She completed the course with merit in 1875 after defending her dissertation, entitled "L'Hygiene de la Femme et de l'Enfant," which was dedicated to Broca. She was the first French doctor to obtain a university degree in her country. She provided training in Hygiene and Childcare to daycare center managers, and, at the request of the Minister of the Interior, she traveled to Switzerland to learn about developments in the organization and development of daycare centers. She oversaw the magazine "L' Hygiène de la Femme et de L' Enfant" (1883) (Schultze 1888; Pigeard-Micault n.d.).

The career of Mary Putnam (1842–1906), although she was not among the first graduates, deserves attention. Putman completed her studies at the New York College of Pharmacy in 1863. In the following year, she completed Woman's Medical College in Philadelphia. Arriving in Paris in 1866, she followed the hospital practice of a friend of her father, Dr. Hippolyte Herard (1819–1913), who introduced her to the medical world at that time. In 1867/68, she obtained authorization to study at the Library of the Medical Faculty. In November 1867, she officially requested enrolment at the faculty but was denied because of the opposition of the Public Instruction Council and several professors, as they considered it contrary to moral and social conditions. In favor of Putnam, Director Wurtz warned about the recent admission of Madeleine Brès through ministerial determination. At the end of the school year (1868), she requested direct admission to the minister position. On 23 July 1871, she completed her graduation with the defense of her dissertation "De la graisse neutre et des acides gras," becoming the second woman to hold a medical degree in this Faculty, after Elizabeth Anderson (1870) (Bowman 2001).

The University of Zurich was among the favorites for women who aspired to be medically trained with certification and the possibility of clinical practice. Therefore, it seemed interesting to learn about the decisions by the teaching staff in this context, the number of female students enrolled, and their origins. On 5 May 1865, the Senate of the University of Zurich decided that it was time to regularize the situation of female students and choose whether, in the future, they would be admitted to all courses as a formal right or just as a special favor, subject to the opinions of teachers. In 1864, a young Russian woman asked the chancellor of the university for permission to attend anatomy and microscopy courses and received no objection. Before 1867, she was absent from the university. The same did not happen with another young Russian woman who entered college six months later and showed solid preparatory knowledge, zeal, and perseverance, winning her teachers' esteem. To take the exams, she needed to be enrolled; thus, she asked the chancellor to obtain this mandatory formality, which happened, and to obtain her degree from the Faculty of Medicine of this University. In the following years, the turnout was not considerable: the end

of 1867 saw a turnout of two English women; in 1868, a Swiss and an American; in 1869, 9 Russian women registered; in 1870, a German and an Austrian; while in 1871, 17 Russian women enrolled. In this year, of the 63 students at the university, 12 attended the Faculty of Philosophy, and 51 attended the Faculty of Medicine: 44 Russian, 1 English, 3 Swiss, and 3 German. In 1872, the Faculty of Medicine at the University of Zürich had 208 students, a quarter of whom were female. Of the graduates, six would go on to have successful medical careers: one was the wife of a doctor from St. Petersburg; another established herself in the same city and with a vast clientele; the third was the first doctor at the London New Hospital for Women, directed by Elizabeth Anderson; the fourth would direct the Birmingham Hospital for Women; the fifth was an American doctor at the children's hospital in Boston; and the last was an assistant at the Zurich Hospital Medical Clinic (Variétés. Les femmes de l'Université de Zurich 1872).

Lehmus (1857–1928) completed her studies in Paris to become a professor of language. She taught Marienstift in The Furth. She studied medicine at the University of Zürich, and she completed her studies in 1870. She was the first German woman to receive a degree from a Swiss university. She completed an internship in gynecology and obstetrics in Dresden with Franz von Winckel (1837–1911). Together with a fellow student, she opened a clinic for women in Berlin-Mitte and, later, in 1881, the first "Poliklinik fur Frauen" in Berlin, which offered medical services to women and children at low cost or even free of charge. She stopped practicing in 1900 for health reasons (Ogilvie and Harvey 2003).

Because the history of the first Portuguese doctors was unknown internationally, this memory seemed pertinent to us. Aurélia Morais Sarmento (1869–?) and Laurinda Morais Sarmento (1867–?) were two of the first five trained in Medicine and Surgery at the Medical–Surgical Schools of Porto and Lisbon in 1891 and possibly the first sisters, at an international level, to graduate from medicine in the same year. They were the daughters of Rita Cássia Oliveira Moraes and Anselmo Evaristo Morais Sarmento, business owner of Typography "*Imprensa Portuguesa*" and journalist director of the periodicals "*Gazeta Literária do Porto*," "*A Actualidade*" and, later, "*A Ideia Nova-diário democrático*." They were influenced by their paternal family and imbued with a strong liberal spirit, for whom education was a relevant factor, regardless of sex. Their close relationships with professionals and friends of their fathers, namely, renowned national writers and historians, were also important. Aurélia and Laurinda had two sisters, Guilhermina (1870–?), and Rita (1872–?), and a brother. Joaquim. Rita Mores Sarmento became the first Civil Engineer in Portugal in 1894, and her brother graduated in law.

Aurélia and Laurinda entered the Polytechnic Academy in the 1885–86 academic year to take the preparatory exams required for access to medicine courses. That year, they passed General Physics, General Inorganic Chemistry, and General Organic and Biological Chemistry. In September 1866, they enrolled in the Medicine and Surgery course at the Porto Medical–Surgical School after passing preparatory studies in Botany and Zoology. They attended classes and underwent all the examinations on the same day. In 1891, they completed the course with the defense of a dissertation: Aurélia, "*Hygiene da Primeira Infância*" and Laurinda, "Breves considerações sobre a Hygiene do Vestuário Feminino," both published by *Imprensa Portuguesa*. After completing the course, they opened a private medical office in the city center on the same street where the family lived to address the health of women and children

with a permanent birth service. Laurinda abandoned clinical practice shortly after marrying a colleague. In 1900, Aurélia married a prestigious opera singer and music teacher based in Porto, Júlio Gustavo Romanoff Salvini, the son of the Polish Gustavo Romanoff Salvini, who is linked to the imperial Romanov family (Russia). Their marriage produced three children. In the "*Maximiano Lemos*" Museum of the History of Medicine at the Faculty of Medicine of the University of Porto, gynecological examination chairs and instruments were used by Aurélia Moraes Sarmento (Santos 2018, 1991).

In the second half of the 19th century and the early years of the following one, the eminent scientist Marie Curie (1867–1934) stood out. Born in Warsaw, Poland, she was the first woman to be awarded a Nobel Prize (Physics, 1903), shared with Pierre Curie (1859–1906) and Henri Becquerel (1852–1908). She was the first and only person to receive two Nobel Prizes in different scientific fields (Physics, 1903, and Chemistry, 1911). Marie Curie was the first female professor at the Sorbonne University in Paris, France, and the first woman to be interred in the Pantheon of Paris in 1955. Although she was not a medical professional, her discoveries and actions had an invaluable influence on the development of Medicine (Curie 2001; Pasachoff 1996).

In her homeland, she completed her pre-university studies, taught, and worked as a governess to raise funds to attend the University of Paris. Her gender prevented her from entering the University of Warsaw. At the University of Paris, she completed degrees in Physics (1893) and Mathematics (1894). There, she met Professor Pierre Curie of the École Supérieure de Physique et Chimie Industrielles de Paris, whom she married in 1895. They shared interests in scientific research. With his collaboration, she developed techniques for isolating radioactive isotopes and discovered two new chemical elements (1898), polonium and radium. These findings initiated the study of radioactivity and its potential for destroying neoplastic cells (Curie 2001; Pasachoff 1996).

Marie Curie progressively documented her studies in various scientific articles, confirming her pioneering work. During World War I, she established mobile radiography units for field hospitals. She led the Radium Institute, now known as Institut Curie, created by the Pasteur Institute and the University of Paris. She traveled throughout Europe and the United States, giving lectures, raising funds for research, and inspiring different scientific communities to follow her example (Curie 2001; Pasachoff 1996).

Marie Curie was a member of the French Academy of Medicine, the International Committee on Intellectual Cooperation of the League of Nations, the International Committee on Atomic Weights, and the first woman member of the Royal Danish Academy of Sciences, among other prominent international associations. She was an honorary member of prestigious scientific societies of her time and was repeatedly awarded the title of Doctor Honoris Causa. She received numerous prizes and other distinctions. The curie, symbol Ci, a unit of radioactivity, was named in honor of the scientific couple. She passed away in Paris on July 4, 1934, due to aplastic anemia resulting from constant exposure to radioactive agents. (Curie 2001; Pasachoff 1996).

8. 20th and 21st Centuries

The advent of the 20th century introduced new scientific and technological advances in Health Sciences associated with better preventive, diagnostic, and treatment results. Highlights include health literacy, improvements in public health and basic

sanitation, healthier lifestyle changes, cancer screening programs, global prevention of emerging infectious diseases, outbreaks and disease control measures, sexually transmitted diseases, the prevention of cardiovascular diseases thanks to surgical and pharmacological advances, the development of maternal and child health programs, the prevention of child malnutrition, the implementation of preventive approaches based on scientific evidence, and the prevention of smoking and obesity.

Following developments observed in the previous century, we are witnessing an increase in vaccine production. Simultaneously, the implementation of mass vaccination programs has made it possible to control and eradicate infectious diseases.

In 1921, the discovery of insulin by Frederick Banting (1891–1941) and Charles Best (1899–1978) made survival and a better quality of life possible for type 1 diabetics. The discovery of penicillin (1928) by Alexander Fleming (1881–1955) marked the beginning of the antibiotic era, which led to a clear reduction in morbidity and mortality associated with bacterial diseases, particularly in the postoperative period. Many medications have been introduced for different purposes, such as controlling high blood pressure, psychiatric disorders, and autoimmune diseases. Hormone replacement therapy has improved the quality of life in many patients. The introduction of different forms of birth control has been revolutionary. The technological development of implantable medical devices, such as pacemakers, cochlear implants, and joint prostheses, has enabled the resolution of chronic situations. Lasers have revolutionized surgery because of their precision and ability to reduce tissue damage. The introduction and evolution of radiation therapies, more recently, with modulated beams, have made it possible to reduce malignant neoplastic processes with less damage to healthy tissues.

The discovery and development of other imaging techniques, such as computed tomography and magnetic resonance imaging, positron emission tomography, functional magnetic resonance imaging, and image-guided biopsies, have constituted powerful means of clinical diagnosis, as have diagnostic techniques in the field of Nuclear Medicine. Advances in drugs, techniques, and equipment for anesthesiology have continued. Minimally invasive medicine has favored the diagnosis and treatment of different clinical situations with fewer complications and shorter recovery times.

Organ transplantation stems from intense multidisciplinary efforts. The first successful kidney transplant occurred in 1945. This practice began to save patients and guarantee an improved quality of life. Research in Regenerative Medicine has opened new avenues for the knowledge and treatment of degenerative diseases. Innovative techniques introduced in plastic and reconstructive surgery have guaranteed surprising functional and aesthetic results in cases of congenital and traumatic pathologies. Overall, all specialties showed scientific, technical, and technological developments before they were observed.

James Watson (1928–) and Francis Crick (1916–2004) identified the double-helix structure of DNA (1953) and created the foundations of modern genetics, which is fundamental for the knowledge and treatment of diseases in this field. In 2001, the complete sequencing of human DNA provided better knowledge of certain diseases. Gene therapy has become a reality with an inexhaustible potential. Meanwhile, the discovery of RNA and its function in genetic regulation raised new challenges in the field of Molecular Biology. Preimplantation screening, prenatal screening, and ultrasound have opened new avenues in maternal–fetal medicine. Medically

assisted reproduction and gamete conservation techniques have enabled many cases of marital infertility.

Robotic surgery, which is a less invasive and more precise procedure, has better results and longer recovery times. Three-dimensional printing technology in medicine supports scientific research and is a promising reality from a clinical perspective, given the personalized functional results obtained. Telecommunications and digital technologies have made telemedicine possible, resulting in consultations, guidance, and discussions of peer-to-peer medical and surgical cases necessary in urgent situations or remote locations. Artificial Intelligence has invaded healthcare services, promoting easier access to information and reducing decision-making time (Duin and Sutcliffe 1992; Sournia 1995). Throughout the 20th century, there has been exponential growth in the number of women trained in medicine worldwide.

We selected the lives and work of some people we consider to be representative who conducted exhaustive research work in the laboratory or in hospital practice to resolve clinical situations, with the consequent introduction of surgical techniques or innovative diagnostic means, including doctors such as Mr. Brooke Taussig and Virginia Apgar. Transversal to the different biographies is the progression in academic career, teaching, management positions in health units, the presidency of scientific associations, and honorary distinctions.

Beyond a widespread awareness of the relevance of technology in developing countries, some works ensured better medical care services. The noted quote by Mae Jamison, the first African American female doctor, NASA astronaut, and the first African American to travel to space, makes perfect sense: "People always think of technology as something having silicon in it. However, the pencil is a technology. Language is a form of technology. Technology is a tool used to accomplish a particular task, and when one talks about appropriate technology in developing countries, it may mean anything from fire to solar electricity" (Creasman 1997).

Still, with Mae Jamison, research horizons went beyond the limits of planet Earth toward space, seeking a better understanding of life under the action of new stimuli to allow us to better prepare ourselves for hypothetical future demands. Ursula von der Leyen is a doctor (and economist) who holds the highest position in the European Commission. Considering the adversities observed during her mandate given the COVID-19 pandemic, she valued the importance of the union of member states: "We should not hide away from our inconsistencies and imperfections (. . .). But imperfect as it might be, our Union is both beautifully unique and uniquely beautiful" (Von der Leyen 2021). In young people, she reaffirmed her greatest hope: "Our Union will be stronger if it is more like our next generation: reflective, determined and caring. Grounded in values and bold in actions" (Von der Leyen 2021).

Mr. Brooke Taussig (1898–1986) completed her pre-graduate studies in 1917 at Radcliffe College and subsequently at the University of California, Berkeley, where she obtained a B.A. degree in 1921. She continued her training at the Harvard Medical School and the University of Boston, and later at the Johns Hopkins University School of Medicine in the field of cardiology (1927). From 1930 to 1963, she was the director of the Children's Heart Clinic at the Johns Hopkins Hospital Pediatric Unit, The Harriet Lane Home. She dedicated herself to the study of anoxemia or "blue baby" syndrome using a new radiological technique, fluoroscopy, and, in 1941, she proposed corrective surgery to her fellow Hopkins surgeons Alfred Blalock and Vivien Thomas. After extensive research, on November 9, 1944, this surgery

was performed for the first time on a child with this pathology, and this technique was later performed worldwide. A paper describing the first instance of its use was published in the *Journal of the American Medical Association*. She continued her studies on congenital heart defects and published, in 1947, the study "Congenital Malformations of the Heart." She was the first female president of the American Heart Association (1965). She was awarded several awards by President Lyndon Johnson (1964), including the Albert Lasker Award (1954) and the Medal of Liberty (Van Robays 2016; Stevenson 1977).

Virginia Apgar (1909–1974) graduated from Westfield High School (1925) and entered Mount Holyoke College (1929). In 1933, she graduated from the College of Physicians and Surgeons at Columbia University. She completed her residency during surgery in 1937. Her director, Allen Whipple, encouraged her differentiation in anesthesiology, the training she acquired at the University of Wisconsin–Madison and Bellevue Hospital in New York. In 1938, she was appointed director of the new anesthesia wing of the College of Physicians and Surgeons at Columbia University. In 1949, she was appointed full professor at this university. In 1952, Apgar introduced the first clinical method to assess the health status of newborns, which constitutes a standardized practice in all hospitals worldwide, known by the name of the prestigious researcher and clinician. She received a master's degree in public health from the Johns Hopkins School of Hygiene and Public Health (1959). From 1959 to 1974, she worked with a non-profit foundation, the March of the Dimes Foundation, to improve the health status of pregnant women and newborns, assuming the roles of vice presidency and director of the program for the prevention and treatment of birth defects (1967). She was a spokesperson for vaccination against rubella during the 1964–65 epidemic and promoted testing of pregnant women with the RH blood group to prevent isoimmunization. She was a lecturer (1965–1971) and professor of Pediatrics (1971–1974) at the Cornell University School of Medicine, where she taught Teratology. In 1973, she was a lecturer in Medical Genetics at the Johns Hopkins School of Public Health. In 1973, she was named the Woman of the Year in Science by the *Ladies' Home Journal*. She was awarded several awards and an honorary doctorate (Amschler 1999).

Mae Carol Jemison (1956–) graduated from Chicago's Morgan Park High School in 1973 and entered Stanford University at the age of 16 when she was the leader of the Black Collective, the Black Students Union. She graduated with degrees in Chemical Engineering (B.S. degree) and African and African American Studies (B.A. degree) in 1977. She studied Medicine at Cornell Medical School and complemented her training in Cuba by developing a project for the American Medical Student Association in Thailand in a refugee camp as a member of the Flying Doctors in East Africa. She completed her course in 1981 (M.D. degree) and residency at the Los Angeles County-USC Medical Center. She worked with the Peace Corps and served as a medical officer to oversee the health of the center's volunteers in Liberia and Sierra Leone (1983–1985) and the Centers for Disease Control in research on various vaccines. In 1987, she was the first African American woman accepted into NASA's astronaut training program. In 1992, she became the first African American woman to go to space. She traveled on the Space Shuttle Endeavor, on the American and Japanese mission STS-47, totaling 190 h in space, and conducted several experiments, including the autogenic feedback training exercise, NASA's Fluid Therapy System,

bone cell research, and induction of ovulation, fertilization, and development in frogs from tadpoles to zero gravity.

After leaving NASA in 1993, she founded the Jemison Group, Inc., which developed a satellite telecommunications system (ALAFIYA) to promote medical care in developing countries. She also founded the Dorothy Jemison Foundation for Excellence and, as a professor, partook in an environmental studies program at Dartmouth University directed by the Jemison Institute for Technological Advancement in Developing Countries (1995–2002). In 1999, she founded BioSentient Corp. and obtained a license to commercialize the AFTE. In 2018, she collaborated with Bayer Crop Science and the National 4-H Council to raise young people's awareness of agricultural science. She is a member of the faculty at Cornell University and Dartmouth College. She is a member of the American Medical Association, American Chemical Society, Association for Space Explorers, and the American Association for the Advancement of Science. She has received several honorary doctorates and distinctions, such as the National Women's Hall of Fame (1993), International Space Hall of Fame (2004), Buzz Aldrin Space Pioneer Award (2017), and Sylvanus Thayer Award from the United States Military Academy (2021) (Creasman 1997; Hine 1994).

Ursula von der Leyen (1958–) was the daughter of Ernst Albrecht (1930–2014), Prime Minister of the state of Lower Saxony, from 1976 to 1990. She attended the European School of Brussels I (1964–1971) and received secondary education in Lehrte. She studied Economics at the Universities of Gottingen and Munster (1977–1980) and the London School of Economics (1978–1979). She attended the Faculty of Medicine in Hanover between 1980 and 1987. She was an assistant doctor at the Maternity Hospital of the University of Hanover between 1988 and 1992, specializing in women's health. She lived in Stanford, California between 1992 and 96, where she rededicated herself to economics. From 1998 to 2002, she worked as a researcher in the epidemiology department of the Hannover Faculty of Medicine.

From a political perspective, it is worth highlighting her appointments as the Federal Minister of Family, Elderly, Women, and Youth by Angela Merkel in her first and second terms (2005 and 2009); the Minister of Labor and Social Solidarity (2009–2013); the Minister of Defense, appointed by the German Chancellor (2013–?); and 13th President of the European Commission (2019–2024).

She married Heiko von der Leyen, a doctor, university professor, and the manager of a biomedical engineering company. They were parents of seven children. She was considered to be one of the 100 most influential personalities worldwide by *Times* magazine in 2020 and 2022 and the most influential woman by *Forbes* in 2022. She was awarded several distinctions such as the Grand Cross of The Order for Merits to Lithuania (2017), Commander of the National Order of Mali (2016), Order of Prince Yaroslav the Wise, first class (2022), and an honorary doctorate from Ben-Gurion University of the Negev (2022) (Von der Leyen 2021; Von der Leyen 2020; Von der Leyen 2022; Forbes 2022).

9. Conclusions

At all times, there has been evidence of the recognition of women's intellectuality and the advantages of investing in their education, although, in some periods, there has been strong opposition to its implementation. Women and their health are inseparable ancestral partners in all stages of human development. Regardless of the secular, religious, or spiritual environment in which it has evolved, humanism

is a transversal secular characteristic. We learn, for example, that this exhibition of the lives and work of so many women is an exercise in health literacy, strong encouragement, tribute, and collective recognition.

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Conclusions

Given past and present gender inequalities, the international community has proposed and approved a sequence of political and regulatory instruments: the Convention on the Elimination of all Forms of Discrimination against Women, the Declaration on the Elimination of Violence Against Women adopted by the United Nations General Assembly on the 20th of December 1993, the Beijing Declaration and Platform for Action, and the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention).

These conventions and declarations have fundamental symbolic importance given the values proposed, the explicit goals suggested, and the key areas for action. Additionally, the organizations that approved and enforced them should be highly valued in the particular historical moment they were built. Indeed, the instruments represent significant steps along the path to a generalized culture of respect for human rights and the promotion of full gender equality.

The importance of political action in implementing these goals is of utmost relevance. Nevertheless, it seems that a complementary approach might also be envisaged. In fact, a durable change, with a growing impact on future generations, will be accomplished if human rights and gender equality are primarily educational goals and cultural endeavors. Only by changing people's minds during the formation of personality will it be possible to achieve non-discrimination and an endurable change in the acceptance of equality of opportunities for all. A human rights culture should, therefore, be an essential element in building any child's character.

The law (even soft laws) has a powerful symbolic nature. Regarding the implementation of human rights, this symbolic (even pedagogic) dimension of national and international law is of utmost importance. For instance, it is vital that, at least transitorily, a gender-parity measure exists regarding access to political offices. Assuring, by law, a 50% representation of men and women is a welcomed transitory measure with an immediate impact. However, if equality in access to political offices were to be an open discussion in elementary and secondary schools, the impact would probably be greater and more stable over generations. Indeed, through education, cultural practices are sustainably changed.

Thus, it makes sense for the global institutions related primarily to education and culture to upgrade to the overall global policy on human rights and gender equality. That is, UNESCO might implement a new dynamic regarding gender equality. Hence, UNESCO would better fulfill its statuary obligations to build peace through international cooperation in education, sciences, and culture. The diffusion of this strategy throughout UNESCO's worldwide network of elementary and secondary schools would be a powerful tool for ensuring that the policy regarding human rights education is efficient and effective.

Considering the notion that the promotion of a natural awareness of gender equality at all levels of education is an efficient tool for promoting a prosperous future and sustainable human development, education on values and human rights should be a priority in global public policies.

Appendix A. Universal Declaration on Gender Equality: A Proposal

Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes

The General Conference

The following attributes were decided upon:

Consciousness of the unique capacity of human beings to reflect upon their existence, perceive injustice, assume responsibility, promote tolerance and respect for the human person, promote solidarity, seek cooperation, and exhibit the moral sense that gives expression to ethical principles,

Reflecting on the effects of globalization in a multicultural world, resulting in a strong demand for a universal response to the ethical, social, and legal implications of such an evolution.

Recognizing that ethical values in a multicultural context imply a multilateral approach and should be examined with due respect to the dignity of the human person and universal respect for, and observance of, human rights and fundamental freedoms.

Resolving that it is necessary and timely for the international community to state universal principles that will provide a foundation for humanity's response to the problem of gender equality, especially regarding an ever-increasing demand for gender balance.

Recalling the Universal Declaration of Human Rights of 10 December 1948, the Universal Declaration on the Human Genome and Human Rights adopted by the General Conference of UNESCO on 11 November 1997, the United Nations Convention on the Elimination of All Forms of Discrimination against Women of 18 December 1979, and the Declaration on the Elimination of Violence Against Women adopted by the United Nations General Assembly on 20 December 1993.

Noting the United Nations International Covenant on Economic, Social, and Cultural Rights and the International Covenant on Civil and Political Rights of December 16, 1966, the United Nations International Convention on the Elimination of All Forms of Racial Discrimination of 21 December 1965, the United Nations Convention on the Rights of the Child of 20 November 1989, the United Nations Convention on Biological Diversity of 5 June 1992, the Standard Rules on the Equalization of Opportunities for Persons with Disabilities adopted by the General Assembly of the United Nations in 1993, the UNESCO Declaration on Race and Racial Prejudice of 27 November 1978, the UNESCO Declaration on the Responsibilities of the Present Generations Towards Future Generations of 12 November 1997, the UNESCO Universal Declaration on Cultural Diversity of 2 November 2001, the Doha Declaration on the TRIPS Agreement and Public Health of 14 November 2001, and other relevant international instruments adopted by the United Nations and the specialized agencies of the United Nations system, in particular the World Health Organization.

Noting international and regional instruments in the field of gender equality.

Recognizing that this Declaration is to be understood in a manner consistent with domestic and international law in conformity with human rights law.

Recalling the Constitution of UNESCO adopted on 16 November 1945.

Considering UNESCO's role in identifying universal principles based on shared ethical values to guide societal changes.

Displaying awareness that human beings are all equal and that any form of discrimination is an unacceptable practice.

Recognizing that education is a basic tool for promoting the welfare of individuals, families, groups, or communities and humankind in the recognition of the dignity of the human person and universal respect for, and observance of, human rights and fundamental freedoms.

Recognizing that health depends on psychosocial and cultural factors and is an essential driver for self-fulfillment, personal autonomy, and the promotion of social cohesion globally.

Also recognizing that physical integrity is an essential dimension of personal identity and that protecting personal privacy, physical and psychological, is a special valued human goal.

Bearing in mind that a person's identity includes biological, psychological, social, cultural, and spiritual dimensions.

Also bearing in mind that cultural diversity is a source of exchange, innovation, and creativity and that it is necessary for humankind but may not be invoked at the expense of human rights and fundamental freedoms, namely to promote any kind of sexual and gender discrimination.

Recognizing that an important way to evaluate social realities and achieve equity is to pay attention to the position of the vulnerable gender in society,

Recognizing that gender equality is a precondition for advancing development and reducing poverty and requires a commitment to challenging and transformative approaches.

Stressing the need to reinforce international cooperation in the field of human rights and gender equality, considering, in particular, the special needs of countries where such values are less developed and embraced.

Proclaiming the principles that follow and *adopting* the present Declaration.

General Provisions

Article 1—Scope

This Declaration addresses ethical issues and social practices related to gender equality, meaning a balance between women and men in every society, at local and global levels. For the purpose of this Declaration, gender equality means that women and men enjoy equal conditions for achieving their full human rights and contributing to and benefiting from economic, social, cultural, and political development. Gender equality is, therefore, the equal valuing of the similarities and differences between men and women by society, including the roles they play. It is based on women and men being full partners in their homes, communities, and society.

This Declaration is addressed to all States. As appropriate and relevant, it also provides guidance on the decisions or practices of individuals, groups, communities, institutions, and corporations, public and private.

Article 2—Aims

This Declaration aims:

a. To provide a universal framework of principles and procedures to guide States in the formulation of their legislation, policies, or other instruments in the field of gender equality;
b. To guide the actions of individuals, groups, communities, institutions, and corporations, public and private;
c. To promote respect for human dignity and protect human rights by ensuring respect for the life of human beings and fundamental freedoms, consistent with international human rights law;
d. To foster multidisciplinary and pluralistic dialogue about gender equality issues between all stakeholders and within society;
e. To promote equitable access to education, knowledge, and cultural development, including healthcare and family planning, with particular attention to the needs of developing countries;
f. To safeguard and promote the rights of women and men in society and special settings such as the labor market, as a common concern of humankind.

Principles

Within the scope of this Declaration, in decisions taken or practices conducted by those to whom it is addressed, the following principles are to be respected:

Article 3—Human dignity and human rights

1. Human dignity, human rights, and fundamental freedoms are to be fully respected.
2. Equality of opportunities for social and economic goods is a fundamental way to promote human dignity.
3. Gender equality is crucial for women and men to realize their fundamental human dignity and their human rights.

Article 4—Personal autonomy and individual responsibility

A person's autonomy to make decisions, while taking responsibility for those decisions and respecting the autonomy of others, is to be respected. For persons who cannot exercise autonomy, special measures must be taken to protect their rights and interests.

Article 5—Respect for human vulnerability and personal integrity

In any social interaction in education, healthcare, workplace, and everyday-life settings, human vulnerability should be considered. Individuals and groups of special vulnerability should be protected, and the personal integrity (namely physical integrity) of such individuals respected.

Article 6—Privacy and confidentiality

The privacy of the persons concerned and the confidentiality of their personal information should be respected.

Article 7—Equality, justice, and equity

The fundamental equality of all human beings in dignity and rights should be respected such that they are treated justly and equitably. Equal opportunities for fundamental social goods should be fully promoted.

Article 8—Non-discrimination and non-stigmatization

No individual nor group should be discriminated against or stigmatized on any grounds, in violation of human dignity, human rights, and fundamental freedoms.

Article 9—Respect for cultural diversity and familiar background

The importance of cultural diversity and familiar background should be given due regard. However, such considerations must neither be invoked to infringe upon human dignity, human rights, fundamental freedoms, and the principles set out in this Declaration nor to limit their scope. Any form of familiar violence is considered unacceptable.

Article 10—Solidarity and cooperation

Solidarity among human beings and international cooperation toward that end must be encouraged, promoting global solidarity by challenging global structural injustices.

Application of the Principles

Article 11—Access to education and knowledge

1. Education and access to knowledge are core elements of personal development, self-fulfillment, and social integration. Every endeavor should be made to use the best available tools to increase knowledge on an equal opportunity basis and guarantee that all genders have access to the same level of education.
2. Opportunities for informed pluralistic public debate about how to engage every child, male or female, in a continuous life learning process should be promoted.
3. Access to adequate sexual education, including family planning, should be considered a priority in health education.

Article 12—Equity in healthcare access

1. The promotion of health and social development is a central government purpose all sectors of society share.
2. Given that the enjoyment of the highest attainable standard of health is among the fundamental rights of every human being, regardless of race, gender identity, sexual orientation, ethnicity, language, religion, political ideology or other opinion, and civil, political, social, or other status, society should advance the following:
    a. Access to quality health care, because health must be considered a fundamental human good, independent of gender or sexual orientation;
    b. Access to adequate nutrition and water;
    c. Improvement of living conditions and the environment;
    d. Elimination of the marginalization and the exclusion of persons based on any grounds;
    e. Reduction of poverty and illiteracy;
    f. Protection of all genders from sexual harassment, violence, mutilation, intimidation, retaliation, or other denial of their basic human rights;

g. Access to reproductive health care from a broader perspective that covers all genders, including sex education, contraception methods, reproductive technologies, and consent.

Article 13—Labor, social, and political equality

1. States should take appropriate measures to guarantee that women have access to the same job opportunities as men.
2. States should take appropriate measures to guarantee that access to career progression and salary levels should be the same for all genders.
3. States should take appropriate measures to ensure job security by allowing interruptions in work for maternity leave, parental leave, and family-related responsibilities.
4. States should take appropriate measures to eliminate and disclose unsafe working conditions and ensure the health, safety, and well-being of all women and men workers.
5. States should take appropriate measures to guarantee equitable access to political positions for all genders.
6. States should promote access to justice by negotiating equitable rules and processes for effective and sustainable changes by influencing the form and function of institutions that deliver public services and regulate access to resources and by empowering all people to challenge inequalities.
7. States should promote social justice and global solidarity by challenging global structural injustices and addressing the root causes of poverty and injustice.

Article 14—Transnational practices

1. States, public and private institutions, professionals, civil society, and academia associated with transnational activities should endeavor to ensure that any activity within the scope of this Declaration, undertaken, funded, or otherwise pursued in whole or in part in different States, is consistent with the principles set out in this Declaration.
2. States should take appropriate measures, both at the national and international levels, to combat any form of gender discrimination, ensuring a balance between women and men in all societal practices.

Promotion of the Declaration

Article 15—Role of States

States should take all appropriate measures, whether of a legislative, administrative, or other nature, to give effect to the principles set out in this Declaration in accordance with the international human rights law. Such measures should be supported by action in the spheres of education, training, and public information.

Article 16—Gender equality education, training and information

1. To promote the principles set out in this Declaration and achieve a better understanding of gender equality, in particular for young people, States should endeavor to foster human rights education and training at all levels and encourage information and knowledge dissemination programs about these issues.

2. States should encourage the participation of international and regional intergovernmental organizations and international, regional, and national non-governmental organizations in this endeavor.

Article 17—International cooperation

Within the framework of international cooperation, States should promote cultural and scientific cooperation and enter into bilateral and multilateral agreements, enabling developing countries to build up their capacity to promote the values and principles of this Declaration.

Article 18—Follow-up action by UNESCO

UNESCO shall promote and disseminate the principles set out in this Declaration. Every five years, a special committee designated by UNESCO should make a detailed report on the implementation and application of this Declaration.

Appendix B. Declaración Universal Sobre Igualdad de Género: Una Propuesta

Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes

La Conferencia General

Consciente de la capacidad única de los seres humanos para reflexionar sobre su propia existencia, para percibir las injusticias, para asumir sus responsabilidades, para fomentar la tolerancia y el respeto por el ser humano, para fomentar la solidaridad, para buscar la cooperación y para mostrar el sentido moral que expresa los principios éticos,

Reflexionando sobre los efectos de la globalización en un mundo multicultural, lo que da lugar a una fuerte demanda para una respuesta universal a las implicaciones éticas, sociales y legales de dicha evolución,

Reconociendo que los valores éticos en dicho contexto multicultural implican un enfoque multilateral y se deben examinar con el debido respeto a la dignidad del ser humano y con el respeto universal por, y la observancia de, los derechos humanos y las libertades fundamentales,

Resolviendo que es necesario y oportuno para la comunidad internacional establecer los principios universales que sentarán las bases de la respuesta de la humanidad al problema de la igualdad entre géneros, especialmente en relación a una demanda creciente para el equilibrio entre géneros,

Recordando la Declaración Universal de los Derechos Humanos del 10 de diciembre de 1948, la Declaración Universal sobre el Genoma Humano y los Derechos Humanos adoptada por la Conferencia General de la UNESCO del 11 de noviembre de 1997, la Convención de las Naciones Unidas sobre la Eliminación de Todas las Formas de Discriminación contra la Mujer del 18 de diciembre de 1979 y la Declaración sobre la Eliminación de la Violencia Contra las Mujeres adoptada por la Asamblea General de las Naciones Unidas del 20 de diciembre de 1993,

Mencionando el Pacto Internacional de Derechos Económicos, Sociales y Culturales de las Naciones Unidas y el Pacto Internacional de Derechos Civiles y Políticos del 16 de diciembre de 1966, la Convención Internacional sobre la Eliminación de todas las Formas de Discriminación Racial de las Naciones Unidas del 21 de diciembre de 1965, el Convenio sobre los Derechos del Niño de las Naciones Unidas del 20 de noviembre de 1989, el Convenio sobre la Diversidad Biológica de las Naciones Unidas del 5 de junio de 1992, las Normas Uniformes sobre la Igualdad de Oportunidades para las Personas con Discapacidad adoptadas por la Asamblea General de las Naciones Unidas en 1993, la Declaración de la UNESCO sobre la Raza y los Prejuicios Raciales del 27 de noviembre de 1978, la Declaración de la UNESCO sobre las Responsabilidades de las Generaciones Actuales para con las Generaciones Futuras del 12 de noviembre de 1997, la Declaración Universal de la UNESCO sobre la Diversidad Cultural del 2 de noviembre de 2001, la Declaración de Doha relativa al Acuerdo sobre los ADPIC y la Salud Pública del 14 de noviembre de 2001 y otros instrumentos internacionales relevantes adoptados por las Naciones Unidas y las agencias especializadas del sistema de Naciones Unidas, en particular la Organización Mundial de la Salud (OMS),

Mencionando también los instrumentos internacionales y regionales en materia de igualdad entre géneros,

Reconociendo que esta Declaración se debe entender de forma consistente con las leyes nacionales e internacionales de conformidad con la ley de derechos humanos,

Recordando la Constitución de la UNESCO adoptada el 16 de noviembre de 1945,

Considerando el papel de la UNESCO a la hora de identificar los principios universales basados en valores éticos comunes para dirigir el cambio social,

Siendo consciente de que los seres humanos son todos iguales y que es inaceptable cualquier forma de discriminación,

Reconociendo que la educación es la herramienta básica para fomentar el bienestar de las personas, las familias, los grupos o las comunidades y la humanidad en su conjunto, en el reconocimiento de la dignidad del ser humano y el respeto universal por el mismo, y la observancia de los derechos humanos y las libertades fundamentales,

Reconociendo que la salud depende de factores psicológicos y culturales y que es un impulsor clave de la autorrealización, la autonomía personal y la promoción de la cohesión social a nivel mundial,

Reconociendo también que la integridad física es una dimensión fundamental de la identidad personal y que proteger la privacidad personal, tanto a nivel físico como psicológico, es un objetivo humano especialmente valorado,

Teniendo en cuenta que la identidad de una persona incluye la dimensión biológica, psicológica, social, cultural y espiritual,

Teniendo también en cuenta que la diversidad cultural es una fuente de intercambio, innovación y creatividad, y que es necesario para la humanidad, pero, sin embargo, no se puede invocar a expensas de los derechos humanos y las libertades fundamentales, en concreto para fomentar cualquier tipo de discriminación sexual y de género,

Reconociendo que una manera importante para evaluar las realidades sociales y lograr la equidad es prestar atención a la posición del género vulnerable en la sociedad,

Reconociendo que la igualdad de género es una condición previa para avanzar en el desarrollo y reducir la pobreza, y requiere un compromiso con enfoques desafiantes y transformadores,

Haciendo hincapié en la necesidad de reforzar la cooperación internacional en el ámbito de los derechos humanos y la igualdad de género, considerando, en particular, las necesidades especiales de los países en donde dichos valores están menos desarrollados y aceptados,

Proclama los siguientes principios y *adopta* la presente Declaración.

Disposiciones Generales

Artículo 1—Alcance

1. Esta Declaración aborda las cuestiones éticas y las prácticas sociales relacionadas con la igualdad entre géneros, lo que significa un equilibrio entre hombres y mujeres en todas las sociedades tanto a nivel local como mundial. A efectos de la presente Declaración, igualdad de género significa que las mujeres y los hombres se encuentran en igualdad de condiciones en lo tocante a los derechos humanos y a la hora de contribuir a y beneficiarse del desarrollo económico, social, cultural y político. Así pues, la igualdad de género consiste en la igual

valoración por parte de la sociedad de las similitudes y diferencias entre hombres y mujeres y las funciones que desempeñan. Se basa en la consideración de hombres y mujeres como miembros totalmente equiparados de su hogar, su comunidad y su sociedad.

2. La presente Declaración va dirigida a todos los Estados. Si procede, proporcionará también directrices relativas a la toma de decisiones o implementación de prácticas por parte de individuos, grupos, comunidades, instituciones y corporaciones públicas y privadas.

Artículo 2—Objetivos

Los objetivos de la presente Declaración son:

a. Proporcionar un marco universal de principios y procedimientos para orientar a los Estados en la formulación de su legislación, sus políticas u otros instrumentos en el ámbito de la igualdad de género;
b. Orientar las acciones de individuos, grupos, comunidades, instituciones y corporaciones públicas y privadas;
c. Promover el respeto a la dignidad humana y proteger los derechos humanos garantizando el respeto a la vida de los seres humanos, y a las libertades fundamentales, en consonancia con el la ley internacional de los derechos humanos;
d. Fomentar el diálogo multidisciplinar y plural sobre cuestiones relativas a los derechos humanos entre todas las partes interesadas y dentro de la sociedad en general;
e. Promover el acceso equitativo a la educación, el conocimiento y el desarrollo cultural, a la sanidad y la planificación familiar, prestando especial atención a las necesidades de los países en vías de desarrollo;
f. Salvaguardar y promover los derechos de las mujeres y los hombres en la sociedad en general y también en ámbitos específicos como el mercado laboral, que constituyen un asunto de interés para la humanidad.

Principios

Dentro del ámbito de la presente Declaración, en lo tocante a decisiones tomadas o prácticas implementadas por aquellos a quienes va dirigida la presente, deben respetarse los principios incluidos a continuación.

Artículo 3—La dignidad humana y los derechos humanos

1. La dignidad humana, los derechos humanos y las libertades fundamentales deben respetarse totalmente.
2. La igualdad de oportunidades con respecto a las ventajas sociales y económicas es fundamental para promover la dignidad humana.
3. La igualdad de género es crucial para que los hombres y mujeres desarrollen plenamente su dignidad como seres humanos y sus derechos humanos.

Artículo 4—Autonomía personal y responsabilidad individual

Debe respetarse la autonomía de la persona para tomar decisiones responsabilizándose al tiempo de las mismas y respetando la autonomía de los demás. En el caso de quienes no puedan ejercer dicha autonomía, deben tomarse medidas especiales para proteger sus derechos e intereses.

Artículo 5—Respeto por la vulnerabilidad del ser humano y la integridad personal

En cualquier interacción social, esto es, en los ámbitos educativo, sanitario, laboral y en el día a día, debe tenerse en cuenta la vulnerabilidad del ser humano. Debe protegerse a los individuos y grupos en situación especialmente vulnerable y debe respetarse la integridad personal (esto es, la integridad física) de dichos individuos.

Artículo 6—Privacidad y confidencialidad

Debe respetarse la privacidad de las personas y la confidencialidad de su información personal.

Artículo 7—Igualdad, justicia y equidad

Debe respetarse la igualdad fundamental de todos los seres humanos en lo tocante a dignidad y derechos para que todos puedan ser tratados de forma justa y equitativa. Debe promoverse la igualdad de oportunidades con respecto a los beneficios sociales.

Artículo 8—No discriminación y no estigmatización

Ningún individuo o grupo debe ser discriminado ni estigmatizado por razón alguna, puesto que ello constituiría una violación de su dignidad como ser humano, sus derechos humanos y sus libertades fundamentales.

Artículo 9—Respeto de la diversidad cultural y los antecedentes familiares

Deben tenerse en debida consideración la diversidad cultural y los antecedentes familiares. Con todo, ello no debe emplearse como excusa para atentar contra la dignidad como ser humano, los derechos humanos o las libertades fundamentales, ni para violar los principios estipulados en la presente Declaración o limitar el alcance de los mismos. Se considera inaceptable cualquier forma de violencia dentro de la familia.

Artículo 10—Solidaridad y cooperación

Deben promoverse la solidaridad entre los seres humanos y la cooperación internacional a tal fin. Debe promoverse la solidaridad desafiando las injusticias estructurales globales.

Aplicación de los Principios

Artículo 11—Acceso a la educación y el conocimiento

1. La educación y el acceso al conocimiento son elementos esenciales del desarrollo personal, la autorrealización y la integración social. Deben realizarse todos los esfuerzos posibles para emplear todas las herramientas al alcance de la mano para aumentar el conocimiento en igualdad de oportunidades y garantizar que todos los géneros tengan acceso al mismo nivel educativo.
2. Deben promoverse las oportunidades para un debate público plural e informado sobre el modo de comprometer a los niños y niñas en un proceso de aprendizaje continuo.
3. Debe considerarse una prioridad de la educación sexual el acceso a una educación sexual adecuada, incluida la planificación familiar.

Artículo 12—Equidad en el acceso a la sanidad

1. La promoción de la salud y el desarrollo social es un objetivo central de los gobiernos que comparten todos los sectores sociales.

2. Habida cuenta que el disfrute de un estándar sanitario superior es uno de los derechos fundamentales del ser humano sin distinción de raza, identidad de género, orientación sexual, etnia, idioma, religión, ideología política u opinión, estado civil, político, social y civil, o de otro tipo, la sociedad debe avanzar en:
    a. el acceso a la calidad en sanidad, puesto que la salud debe considerarse un bien fundamental para el ser humano, independientemente del género o la orientación sexual;
    b. el acceso al agua y a una nutrición adecuada;
    c. la mejora de las condiciones de vida y el medio ambiente;
    d. la eliminación de la marginación y la exclusión de las personas por cualquier razón;
    e. la reducción de la pobreza y el analfabetismo;
    f. la protección de todos los géneros ante el acoso sexual, la violencia, la mutilación, la intimidación, la represión o cualquier otra forma de negación de sus derechos humanos básicos.
    g. el acceso a la salud reproductiva desde un punto de vista más amplio que aborde las preocupaciones de todos los géneros, incluidos la educación sexual, los métodos anticonceptivos, las tecnologías reproductivas y el consentimiento.

Artículo 13—Trabajo, igualdad social y política

Los Estados deben tomar las medidas oportunas para garantizar las mismas oportunidades laborales para hombres y mujeres.

1. Los Estados deben tomar las medidas oportunas para garantizar el desarrollo profesional y el mismo salario para hombres y mujeres.
2. Los Estados deben tomar las medidas oportunas para garantizar la seguridad laboral, permitiendo las interrupciones por baja por maternidad, baja por paternidad y responsabilidades familiares.
3. Los Estados deben tomar las medidas oportunas para eliminar y revelar las condiciones laborales que no sean seguras, y para garantizar la salud, la seguridad y el bienestar de todos los trabajadores y las trabajadoras.
4. Los Estados deben tomar las medidas oportunas para garantizar el acceso equitativo a los puestos políticos para todos los géneros.
5. Los Estados deben promover el acceso a la justicia, negociando reglas y procesos equitativos para que haya cambios efectivos y sostenibles, influyendo en la forma y función de las instituciones que ofrecen servicios públicos y regulan el acceso a los recursos, y permitiendo que todo el mundo pueda plantarle cara a la desigualdad.
6. Los Estados deben promover la justicia social y la solidaridad global plantando cara a las injusticias estructurales globales y abordando las causas de la pobreza y la injusticia.

Artículo 14—Prácticas transnacionales

1. Los Estados, las instituciones públicas y privadas, los profesionales, la sociedad civil y las instituciones académicas asociadas con las actividades transnacionales deben esforzarse por garantizar que cualquier actividad que caiga dentro del ámbito de la presente Declaración, llevada a cabo, fundada o desarrollada en

todo o en parte en distintos Estados, respete los principios establecidos en dicha Declaración.

2. Los Estados deben tomar las medidas oportunas, a nivel nacional e internacional, para combatir cualquier forma de discriminación por género, garantizando un equilibrio entre las mujeres y los hombres en cualquier práctica social.

Promoción de la Declaración

Artículo 15—Función de los Estados

Los Estados deben tomar las medidas oportunas, desde el punto de vista legislativo, administrativo o desde otro punto de vista cualquiera, para dar efecto a los principios establecidos en la presente Declaración, de acuerdo con la ley internacional de los derechos humanos. Dichas medidas deben traducirse en acciones en los ámbitos de la educación, la formación y la información pública.

Artículo 16—Igualdad de género, educación, formación e información

1. Para promover los principios establecidos en esta Declaración y conseguir un mayor entendimiento sobre igualdad de género, concretamente, entre los jóvenes, los Estados deben tratar de promover la educación sobre derechos humanos y la formación a todos los niveles, y fomentar los programas dirigidos a divulgar información y conocimientos acerca de estos asuntos.
2. Los Estados deben promover la participación de las organizaciones intergubernamentales regionales e internacionales y de las organizaciones no gubernamentales nacionales y regionales en este esfuerzo común.

Artículo 17—Cooperación internacional

En el marco de la cooperación internacional, los Estados deben promover la cooperación cultural y científica y llevar a cabo acuerdos bilaterales y multilaterales que permitan a los países en desarrollo desarrollar su capacidad para promover los valores y principios de la presente Declaración.

Artículo 18—Acciones de seguimiento por parte de la UNESCO

La UNESCO debe promover y divulgar los principios de la presente Declaración. Cada cinco años, un comité especial designado por la UNESCO debe redactar un informe detallado sobre la implementación y aplicación de la presente Declaración.

Appendix C. 性别平等宣言: 提案

Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes

大会内容

应意识到人类具有独特的能力来反思自身的存在，来感知不公，来承担责任，来提高对人类的忍让以及尊重，来营造团结，来寻求合作以及来表达出体现伦理原则的道德观念，

由于全球化对世界多元文化造成的影响，该宣言产生于对统一回应这一变革在道德，社会和法律方面产生的影响的强烈诉求，

我们意识到在这样一个多元文化并存的环境下，道德价值隐含着多边方式并且应在抱有对人类尊严，人权和自由的一致尊重和自觉遵守的情况下来进行考察，

为了解决这个问题，尤其是在对性别平衡的渴望不断增加的当下，国际社会提出一个普遍原则是十分必要以及迫切的。该原则将会为人们对性别平等这一议题的关注提供基础，

这可以追溯到1948年12月10日提出的《世界人权宣言》，1997年11月11日教科文组织大会通过的《世界人类基因组与人权宣言》，1979年12月18日的联合国《消除对妇女一切形式歧视公约》，1993年12月20日联合国大会采纳的《消除对妇女的暴力行为宣言》，

同时亦有以下国际文书可供参考，包括1966年12月16日的联合国《经济、社会及文化权利国际公约》和《公民权利和政治权利国际公约》，1965年12月21日的联合国《消除一切形式种族歧视国际公约》，1989年11月20日的联合国《儿童权力公约》，1992年6月5日的联合国《生物多样性公约》，1993年联合国大会通过的《残疾人机会均等标准规则》，1978年11月27日的教科文组织大会《关于种族和种族偏见的宣言》，1997年11月12日的教科文组织大会《当代人对后代人职责的宣言》，2001年11月2日教科文组织大会《世界文化多样性宣言》，2001年11月14日《关于与贸易有关的知识产权协定和公共卫生的多哈宣言》以及其它联合国及联合国系统下的特殊机构－特别是世界卫生组织通过的相关国际文书，

同时请注意，国际和区域文书亦在性别平等这一领域中有所体现，

这个宣言可以通过地区和国际法中符合人权法的条例来解读，

1945年11月16日，《教科文组织组织法》被采纳，

考虑到教科文组织在确立基于共同的道德准则之上的普遍原则来引导社会变革的职责，

亦意识到人人生而平等，任何形式的歧视都是不可接受的行为，

在对人类尊严的承认以及对人权和基本自由的普遍尊重和实现的过程中，应认识到教育是提升个人，家庭，群体或社团乃至全体人类福利的基本工具，

亦应意识到，人类健康的状态取决于心理和文化因素，而且健康是自我实现，个人自主，以及在全球层面上提高社会凝聚力的不可缺失的驱动力，

同时也应该认识到，人身安全是个人身份认同不可或缺的因素，同时对个人隐私的保护－包括身理和心理隐私－是一个值得人类特别重视的目标，

请谨记，个人身份包括生物学，心理学，社会学，文化和精神层次等多种维度，

同时亦请牢记，文化多样性是交流，革新和创造力的来源。它对人类是必要的，且文化多样性的实现未必会以人权和基本自由为代价－即加强任何形式的性别歧视，

请注意，关注社会上的弱势群体是评判社会现实和实现社会平衡的重要方式，

请认识到性别平等是推动发展和减轻贫困的一个先决条件，并且实现性别平等需要坚持采纳充满挑战性和变革性的方式，

我们应强调对加强人权和性别平等领域上的国际合作的需求，特别要重视这种价值观尚未发展完善且尚不被大众拥戴的国家的情况，

基于以上，在此宣布以下准则，这些准则遵循且采纳该宣言的内容。

总则

第一条－范围

1. 该宣言强调了与性别平等－即在地区以及全球水平上，女性和男性在各个社会层面上的平等关系－相关的道德问题和社会习俗。为了阐释该宣言的目标，性别平等指女性和男性在实现人权，和对经济，社会，文化和政治发展做出贡献以及获得酬劳等方面，拥有平等的条件。因此，性别平等意味着社会平等地看待男女的相似和差异，以及他们各自发挥的作用。这是基于男女在家庭，团体和社会成为完全的合作伙伴的基础之上的。
2. 本宣言以国家为对象，必要时也为个人、群体、社区、公共或私人机构和公司的有关决策和实践提供指导。

第二条－目标

本宣言的目标如下：

a. 为国家在制定性别平等领域的法律，政策或者文书提供普遍适用的原则；
b. 为个人、群体、社区、公共或私人机构和公司实践提供指导；
c. 遵循国际人权法，通过确保对人类生命和基本自由的尊重，促进对人类尊严的尊重，以及对人权的保护；
d. 推动所有相关方之间和全社会就性别平等问题开展跨学科和多元化的对话；
e. 促使男女在教育，知识和文化发展以及在医疗保健和计划生育等领域拥有平等的机会，同时特别关注发展中国家的需求；
f. 保护和提升男女在整体社会以及在特殊场合的权力－如职场这个人类共同关注的领域。

基本原则

在本宣言的范畴中，涉及对象的决策和实践需遵守以下原则。

第三条－人类尊严和人权

1. 绝对尊重人类尊严，人权和基本自由。
2. 在社会和经济商品方面提供平等的机会是提高人类尊严的根本途径。
3. 性别平等是男性和女性认同自我尊严和人权的重要条件。

第四条－个体自主和个人责任

个体自主决策，以及为之承担责任和尊重他人自主性的要求需被认可。对于无法行使自主权的公民，要采取特殊的方法来保障他们的权力和利益。

第五条—尊重弱势群体和人格完整性

在任何社会活动中－即教育和医疗保健场所，以及工作场所和日常生活中－需考虑弱势群体的需求。弱势群体和个人应被特殊保护，同时他们的人格完整性（即身体完整性）需被尊重。

第六条－隐私和机密

个人隐私以及个人信息的保密应被尊重。

第七条－平等，正义和公平

为了得到公正公平的对待，人类尊严和权力的根本平等应被尊重。应大力提倡在基本社会物品提供方面实现机会均等。

第八条－拒绝歧视和标签化

任何个体和组群都不应该因为任何原因被区别对待或者被标签化，因这种行为破坏了人类尊严，人权和基本自由。

第九条－尊重文化多样性和相似背景

应当充分重视文化多样性和相似背景。但是，该考量既不应侵害人类尊严，人权和基本自由或者该宣言中的基本原则，也不应缩小它们的范围。任何常见的暴力行为都是不可接受的。

第十条－团结与合作

人类团结和国际合作，因此走向平等的目标是值得鼓励的。应提倡全球联结以撼动全球结构性不公。

基本原则的应用

第十一条－获得教育和知识的途径

1. 教育和知识的获得是通向个人提升，自我实现和社会共融的重要因素。应用尽一切可行办法，在机会平等的条件下，提高知识水平，并且保障不同性别的个体拥有同等的教育资源。
2. 应倡导有关如何让每个孩子－男孩和女孩－参与终身学习这样知识性强的多元化的公开辩论。
3. 在健康教育的范畴，应优先优化获取充足性教育－包括计划生育－的途径。

第十二条－医疗保健资源的公平分配

1. 推行医疗和社会建设是社会各个分区一致的重点目标。
2. 应考虑到享受尽可能高标准的医疗服务是每个人的基本权力。该权力不应该因种族，性别，性取向，族裔，语言，宗教，政治意识形态或者其它理念，以及公民，政策，社会或者其它身份的不同而受到区别对待，社会应当推进以下措施：
    a. 推行高品质医疗保健设施，因健康是人类首要福祉，这点不应因性别或者性取向改变；
    b. 获取充足营养和水份的途径；
    c. 生存环境和条件的提升；
    d. 消除因任何原因产生的对个体或者群体的边缘化以及排斥。
    e. 降低贫困和无知的情况；
    f. 保护各个性别的人，使他们不成为性骚扰，暴力，残害，恐吓，报复，或者其它剥夺了他们基本人权的行为的受害者。
    g. 从一个关乎每个性别的更大的角度，包括性教育，避孕措施，生殖技术和繁育许可，来提供生殖健康服务。

第十三条－劳务，社会和政治平等

1. 国家需采取适当措施以保障女性享有和男性平等的工作机会。

2. 国家需采取适当措施以保障不同性别享有相同的职业晋升机会和薪酬待遇。
3. 国家需采取适当措施，允许并制定产假，育儿假以及因其它家庭责任产生的休假，以保障劳务安全。
4. 国家需采取适当措施消除和曝光不安全的工作环境，并且确保男女工作者的健康，安全和福利。
5. 国家需采取适当措施保障各个性别在获取政治地位上有平等的通道。
6. 国家应通过以下途径推动正义：通过商议可产生有效且可持续性改变的公平条约和机制；通过影响提供社会服务和管理资源途径的机构的组成和职能；和通过授权大众对不公平现象发起挑战。
7. 国家应通过挑战国际结构性不平等以及通过强调贫困和不公平的根源，来提倡社会正义和国际团结。

第十四条－跨国实践

1. 与跨国活动有关的国家、公共和私立机构、专业人士、公民社会和学术界应致力于保证在宣言范围内的任何活动，无论是全部在国内，还是有部分在其他国家举行、资助或以其他方式进行的活动，都与该宣言的基本准则符合。
2. 国家需采取适当措施，在国家以及国际层面上，制止任何形式的性别歧视，以保障女性和男性在所有社会活动中的平衡。

宣言的倡导

第十五条－国家的职责

国家应采取所有适当的方法，不论是通过法律，行政还是其它方式，依照国际人权法，使该宣言的基本原则生效。同时该方法应有教育，培训和公共信息领域的支持。

第十六条－性别平等教育，培训和资讯

1. 为了提倡该宣言下提出的基本原则，也为了公众－尤其是年轻人－对性别平等有更好的理解，国家应致力于在各个层面开展人权教育及培训，同时也鼓励对在该领域传播相关信息和知识的项目的开发。
2. 国家应鼓励国际和地区的跨政府组织，以及国际，地区和国家非政府组织对该工作的参与。

第十七条－国际合作

在国际合作的框架下，国家应提倡文化和科研合作，并且应通过参与双边以及多边协议，使发展中国家建设实现该宣言中的价值观和基本原则的能力。

第十八条－教科文组织的后续工作

教科文组织应倡导和传播该宣言下的基本原则。每隔五年，由教科文组织指派的特别委员会应就该宣言的实施和实践，发表一份详细的报告。

Appendix D. Déclaration Universelle Sur L'égalité des Genres: Une Proposition

Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes

L'Assemblée Générale

Consciente de la capacité unique des êtres humains à réfléchir sur leur propre existence, à percevoir l'injustice, à assumer leurs responsabilités, à promouvoir la tolérance et le respect de la personne humaine, à promouvoir la solidarité, à rechercher la coopération et à manifester un sens moral à l'origine de principes éthiques,

Mesurant les effets de la mondialisation dans un monde multiculturel, entraînant la nécessité d'une réponse universelle aux implications éthiques, sociales et juridiques d'une telle évolution,

Reconnaissant que les valeurs éthiques dans un tel contexte multiculturel impliquent une approche multilatérale et doivent être examinées en tenant dûment compte de la dignité de la personne humaine et du respect universel et effectif des droits humans et des libertés fondamentales,

Décidant qu'il est nécessaire et opportun que la communauté internationale énonce des principes universels qui serviront de base à la réponse de l'humanité au problème de l'égalité des genres, en particulier en ce qui concerne la demande de plus en plus importante d'un équilibre entre les genres,

Rappelant la Déclaration Universelle des Droits Humains du 10 décembre 1948, la Déclaration Universelle sur le Génome Humain et les Droits Humains adoptée par la Conférence Générale de l'UNESCO le 11 novembre 1997, la Convention des Nations Unies sur l'élimination de Toutes les Formes de Discrimination à l'égard des Femmes du 18 Décembre 1979 et la Déclaration sur l'Élimination de la Violence à l'Égard des Femmes adoptée par l'Assemblée Générale des Nations Unies le 20 décembre 1993,

Prenant acte du Pacte International sur les Droits Économiques, Sociaux et Culturels des Nations Unies et le Pacte International sur les Droits Civils et Politiques du 16 décembre 1966, la Convention Internationale des Nations Unies sur l'Élimination de Toutes les Formes de Discrimination Raciale du 21 décembre 1965, la Convention des Nations Unies sur les Droits de l'Enfant du 20 novembre 1989, la Convention des Nations Unies sur la Diversité Biologique du 5 juin 1992, les Règles sur l'Égalisation des Chances des Personnes Handicapées adoptées par l'Assemblée Générale des Nations Unies en 1993 , la Déclaration de l'UNESCO sur la Race et les Préjugés Raciaux du 27 novembre 1978, la Déclaration de l'UNESCO sur les responsabilités des Générations Présentes Envers les Générations Futures du 12 novembre 1997, la Déclaration Universelle de l'UNESCO sur la Diversité Culturelle du 2 novembre 2001, la Déclaration de Doha au sujet de l'Accord sur les ADPIC et la Santé Publique du 14 novembre 2001 et d'autres instruments internationaux pertinents adoptés par l'Organisation des Nations Unies et les institutions spécialisées du système des Nations Unies, en particulier l'Organisation Mondiale de la Santé (OMS),

Prenant acte également des instruments internationaux et régionaux dans le domaine de l'égalité des genres,

Reconnaissant que cette Déclaration doive être compatible avec le droit national et international en conformité avec le droit des droits de humains,

Rappelant la Constitution de l'UNESCO adoptée le 16 novembre 1945,

Considérant le rôle de l'UNESCO dans l'identification des principes universels fondés sur des valeurs éthiques partagées pour orienter les changements sociétaux,

Consciente que tous les êtres humains sont égaux et que toute forme de discrimination est une pratique inacceptable,

Reconnaissant que l'éducation soit l'outil fondamental pour promouvoir le bien-être des individus, des familles, des groupes ou des communautés et la dignité de la personne humaine et le respect universel des droits humains et des libertés fondamentales,

Reconnaissant que la santé dépende de facteurs psychosociaux et culturels et constitue un moteur essentiel de l'épanouissement personnel, de l'autonomie personnelle et de la promotion de la cohésion sociale au niveau mondial,

Reconnaissant également que l'intégrité physique est une dimension essentielle de l'identité personnelle et que la protection de la vie privée—à la fois physique et psychologique—est un objectif humain capital,

Considérant que l'identité d'une personne comprend des dimensions biologiques, psychologiques, sociales, culturelles et spirituelles,

Considérant également que la diversité culturelle est une source d'échange, d'innovation et de créativité et qu'elle est nécessaire à l'humanité, elle ne peut, toutefois, être invoquée au détriment des droits humains et des libertés fondamentales, à savoir promouvoir toute forme de discrimination sexuelle et des genres,

Reconnaissant qu'une manière importante d'évaluer les réalités sociales et d'atteindre l'équité est de prêter attention à la position du genre vulnérable dans la société,

Reconnaissant que l'égalité des genres soit une condition préalable à la progression du développement et à la réduction de la pauvreté, et exige un engagement par le biais d'approches stimulantes et transformatrices,

Soulignant la nécessité de renforcer la coopération internationale dans le domaine des droits humains et de l'égalité des genres, en tenant compte, en particulier, des besoins particuliers des pays où ces valeurs sont moins développées et moins respectées,

L'Assemblée Générale proclame les principes qui suivent et *adopte* la présente Déclaration.

Dispositions Générales

Article 1—Portée

1. Cette déclaration aborde les questions éthiques et les pratiques sociales liées à l'égalité des genres, c'est-à-dire un équilibre entre les femmes et les hommes dans chaque société, à l'échelle locale et mondiale. Aux fins de la présente Déclaration, l'égalité des genres signifie que les femmes et les hommes doivent disposer de conditions égales pour réaliser pleinement leurs droits humains et pour contribuer au développement économique, social, culturel et politique et en bénéficier. L'égalité des genres est donc l'égale valorisation par la société des similitudes et des différences entre les hommes et les femmes et les rôles qu'ils y jouent. De fait, les femmes et les hommes sont des partenaires à part entière dans leur foyer, leur communauté et leur société.

2. Cette déclaration s'adresse à tous les États. Si nécessaire, elle fournit également des conseils pour les décisions ou les pratiques des individus, des groupes, des communautés, des institutions et des entreprises, publiques et privées.

Article 2—Objectifs

Les objectifs de cette déclaration sont:

a. Fournir un cadre universel de principes et de procédures pour guider les États dans la formulation de leur législation, de leurs politiques ou d'autres instruments dans le domaine de l'égalité des genres;
b. Guider les actions des individus, des groupes, des communautés, des institutions et des entreprises, publiques et privées;
c. Promouvoir le respect de la dignité humaine et protéger les droits humains, en assurant le respect de la vie des êtres humains et des libertés fondamentales, conformément au droit international des droits humains;
d. Favoriser un dialogue pluridisciplinaire et pluraliste sur les questions d'égalité des genres entre toutes les parties prenantes et au sein de la société dans son ensemble;
e. Promouvoir un accès équitable à l'éducation, au savoir et au développement culturel, ainsi qu'aux soins de santé et a la planification familiale, en accordant une attention particulière aux besoins des pays en développement;
f. Sauvegarder et promouvoir les droits des femmes et des hommes dans l'ensemble de la société et dans des contextes particuliers tels que le marché du travail, en tant que préoccupation commune de l'humanité.

Principes

Dans le cadre de la présente Déclaration, dans les décisions ou les pratiques prises ou exécutées par ceux à qui elle est adressée, les principes suivants doivent être respectés.

Article 3—Dignité humaine et droits humains

1. La dignité humaine, les droits humains et les libertés fondamentales doivent être pleinement respectés.
2. L'égalité des chances d'accès aux biens sociaux et économiques est un moyen fondamental pour promouvoir la dignité humaine.
3. L'égalité des genres est cruciale pour que les femmes et les hommes jouissent de leur dignité humaine fondamentale et de leurs droits humains.

Article 4—Autonomie personnelle et responsabilité individuelle

L'autonomie de la personne à prendre des décisions, tout en assumant la responsabilité de ces décisions et en respectant l'autonomie des autres, doit être respectée. Concernant les personnes se trouvant dans l'incapacité d'exercer leur autonomie, des mesures spéciales doivent être prises afin de protéger leurs droits et intérêts.

Article 5—Le respect de la vulnérabilité humaine et de l'intégrité personnelle

Dans toute interaction sociale, notamment dans les milieux de l'éducation et de la santé, ainsi que sur le lieu de travail et dans la vie quotidienne, la vulnérabilité humaine doit être prise en compte. Les individus et les groupes particulièrement vulnérables devraient être protégés et l'intégrité personnelle (à savoir l'intégrité physique) de ces individus devrait être respectée.

Article 6—Vie privée et confidentialité

La vie privée des personnes concernées et la confidentialité de leurs informations personnelles doivent être respectées.

Article 7—Égalité, justice et équité

L'égalité fondamentale de tous les êtres humains dans la dignité et le droit doit être respectée afin que ces derniers soient traités de manière juste et équitable. L'égalité des chances d'accès aux biens sociaux fondamentaux devrait être pleinement encouragée.

Article 8—Non-discrimination et Non-stigmatisation

Aucun individu ou groupe ne devrait être discriminé ou stigmatisé pour quelque raison que ce soit, en violation de la dignité humaine, des droits humains et des libertés fondamentales.

Article 9—Le respect de la diversité culturelle et du cadre familial

L'importance de la diversité culturelle et du cadre familial devrait être dûment prise en compte. Toutefois, ces considérations ne doivent pas être invoquées pour porter atteinte à la dignité humaine, aux droits humains et aux libertés fondamentales, ni aux principes énoncés dans la présente Déclaration, ni pour en limiter la portée. Toute forme de violence familiale est considérée inacceptable.

Article 10—Solidarité et coopération

La solidarité entre les êtres humains et la coopération internationale visant celle-ci doivent être encouragées. La solidarité mondiale remettant en cause les injustices structurelles mondiales doit être promue.

Application des principes

Article 11—Accès à l'éducation et au savoir

1. L'éducation et l'accès au savoir constituent un élément nucléaire du développement personnel, de l'épanouissement personnel et de l'intégration sociale. Tout doit être mis en œuvre pour utiliser les meilleurs outils disponibles afin d'accroître le savoir sur une base d'égalité des chances et de garantir que tous les genres aient accès au même niveau d'éducation.
2. Les possibilités d'un débat public pluraliste éclairé sur la manière d'impliquer chaque enfant, homme ou femme, dans un processus continu d'apprentissage tout au long de la vie, devraient être encouragées.
3. L'accès à une éducation sexuelle adéquate, y compris la planification familiale, devrait être considéré comme une priorité dans l'éducation pour la santé.

Article 12—Equité de l'accès aux soins de santé

1. La promotion de la santé et du développement social est un objectif central des gouvernements que partagent tous les secteurs de la société.
2. Considérant que la jouissance du meilleur état de santé possible est l'un des droits fondamentaux de tout être humain sans distinction de race, d'identité de genre, d'orientation sexuelle, d'appartenance ethnique, de langue, de religion, d'idéologie politique, sociale ou autre, la société devrait garantir:

a. l'accès à des soins de santé de qualité, car la santé doit être considérée comme un bien humain fondamental, indépendamment du genre ou de l'orientation sexuelle;
b. l'accès à une alimentation et à une eau adéquates;
c. l'amélioration des conditions de vie et de l'environnement;
d. l'élimination de la marginalisation et de l'exclusion des personnes pour quelque motif que ce soit;
e. laréduction de la pauvreté et de l'analphabétisme;
f. laprotection de tous les genres contre le harcèlement sexuel, la violence, lamutilation, l'intimidation, la rétorsion ou tout autre déni de leurs droitshumains fondamentaux;
g. l'accèsaux soins de santé en matière de procréation dans une perspective plus largeconcernant tous les genres, y compris l'éducation sexuelle, les méthodes decontraception, les techniques de reproduction et de consentement.

Article 13—Égalité professionnelle, sociale et politique

1. Les États devraient prendre des mesures appropriées pour garantir que les femmesaient accès aux mêmes possibilités d'emploi que les hommes.
2. LesEtats devraient prendre des mesures appropriées pour garantir que l'accès à laprogression professionnelle et que le niveau des salaires soient les mêmes pourtous les genres.
3. Les États devraient prendre des mesures appropriées pour assurer la sécurité del'emploi en autorisant des interruptions du travail pour les congés dematernité, les congés parentaux et les responsabilités familiales.
4. Les États devraient prendre des mesures appropriées pour éliminer et prévenir lesconditions de travail dangereuses, ainsi que pour assurer la santé, la sécuritéet le bien-être de tous les travailleurs, hommes et femmes.
5. Les États devraient prendre des mesures appropriées pour garantir à tous les genresun accès équitable à des postes politiques.
6. Les États devraient promouvoir l'accès à la justice en négociant des règles et desprocessus équitables visant des changements efficaces et durables, eninfluençant la forme et la fonction des institutions fournissant des servicespublics et réglementant l'accès aux ressources et en permettant à tous delutter contre les inégalités.
7. Les États devraient promouvoir la justice sociale et la solidarité mondiale enremettant en question les injustices structurelles mondiales et en s'attaquantaux causes profondes de la pauvreté et de l'injustice.

Article 14—Pratiques transnationales

1. Les États, les institutions publiques et privées, les professionnels, la sociétécivile et les milieux universitaires associés aux activités transnationalesdevraient s'efforcer de garantir que toute activité entrant dans le cadre de laprésente Déclaration, entreprise, financée ou poursuivie en tout ou en partiedans différents États, réponde aux principes énoncés dans cette Déclaration.
2. Les États devraient prendre des mesures appropriées, tant au niveau nationalqu'international, pour lutter contre toute forme de discrimination fondée surle

genre, en assurant un équilibre entre les femmes et les hommes dans toutesles pratiques sociétales.

Promotion de la Déclaration

Article 15—Le rôle des États

Les États devraient prendre toutes les mesures appropriées, de nature législative, administrative ou autre, pour mettre en œuvre les principes énoncés dans la présente Déclaration, conformément au droit international des droits humains. Ces mesures devraient être soutenues par des actions dans les domaines de l'éducation, de la formation et de l'information publique.

Article 16—Education, formation et information sur l'égalité des genres

1. Afinde promouvoir les principes énoncés dans la présente Déclaration et de parvenirà une meilleure compréhension de l'égalité des genres, en particulier pour lesjeunes, les États devraient s'efforcer de promouvoir l'éducation et laformation aux droits humains à tous les niveaux ainsi que d'encourager lesprogrammes de diffusion de l'information et des connaissances autour de cesquestions.
2. Les États devraient encourager la participation d'organisationsintergouvernementales internationales et régionales et d'organisations nongouvernementales internationales, régionales et nationales dans cetteentreprise.

Article 17—Coopération internationale

Dans le cadre de la coopération internationale, les États devraient promouvoir la coopération culturelle et scientifique et conclure des accords bilatéraux et multilatéraux permettant aux pays en développement de renforcer leur capacité à promouvoir les valeurs et les principes de la présente Déclaration.

Article 18—Plan d'action de l'UNESCO

L'UNESCO s'engage à promouvoir et diffuser les principes énoncés dans la présente Déclaration. Tous les cinq ans, un comité spécial désigné par l'UNESCO devrait établir un rapport détaillé sur la mise en œuvre et l'application de la présente Déclaration.

Appendix E. Declaração Universal de Igualdade de Género: Uma Proposta

Rui Nunes, Carla Serrão, Francisca Rego, Guilhermina Rego, Helena P. Melo, Isabelle Oliveira, Ivone Duarte and Sofia B. Nunes

A Conferência Geral

Consciente dacapacidade única dos seres humanos de refletir sobre a sua própria existência,de perceber a injustiça, de assumir responsabilidade, de promover tolerância erespeito pela pessoa humana, de promover solidariedade, de buscar cooperação ede exibir o sentido moral que confere expressão a princípios éticos,

Refletindo sobre os efeitos da globalização num mundo multicultural, resultando numa forte demanda por uma resposta universal às implicações éticas, sociais e legais de tal evolução,

Reconhecendo que os valores éticos nesse contexto multicultural implicam uma abordagem multilateral e devem ser examinados com o devido respeito pela dignidade da pessoa humana e o respeito universal e a observância dos direitos humanos e das liberdades fundamentais,

Chegando à conclusão que é necessário e oportuno para a comunidade internacional declarar princípios universais que fornecerão uma base para a resposta da humanidade ao problema da igualdade de género, especialmente no que diz respeito a uma demanda cada vez maior por um equilíbrio entre os géneros,

Relembrando a Declaração Universal dos Direitos Humanos de 10 de dezembro de 1948, a Declaração Universal do Genoma Humano e dos Direitos Humanos adotada pela Conferência Geral da UNESCO em 11 de novembro de 1997, a Convenção das Nações Unidas para a Eliminação de Todas as Formas de Discriminação contra as Mulheres de 18 dezembro de 1979 e a Declaração sobre a Eliminação da Violência contra as Mulheres, adotada pela Assembleia Geral das Nações Unidas em 20 de dezembro de 1993,

Tendo em conta o Pacto Internacional das Nações Unidas sobre os Direitos Económicos, Sociais e Culturais e o Pacto Internacional sobre Direitos Civis e Políticos de 16 de dezembro de 1966, a Convenção Internacional das Nações Unidas para a Eliminação de Todas as Formas de Discriminação Racial, de 21 de dezembro de 1965, a Convenção das Nações Unidas sobre os Direitos da Criança, de 20 de novembro de 1989, a Convenção das Nações Unidas sobre Diversidade Biológica, de 5 de junho de 1992, as Regras Gerais sobre a Igualdade de Oportunidades para as Pessoas com Deficiência, adotadas pela Assembleia Geral das Nações Unidas em 1993, a Declaração da UNESCO sobre a Raça e os Preconceitos Raciais de 27 de novembro de 1978, a Declaração da UNESCO sobre as Responsabilidades das Gerações Presentes para com as Gerações Futuras de 12 de novembro de 1997, a Declaração Universal da UNESCO sobre Diversidade Cultural de 2 de novembro de 2001, a Declaração de Doha sobre o Acordo TRIPS e a Saúde Pública de 14 de novembro de 2001 e outros instrumentos internacionais relevantes adotados pelas Nações Unidas e as agências especializadas do sistema das Nações Unidas, em particular a Organização Mundial da Saúde (OMS),

Tendo ainda em conta os instrumentos internacionais e regionais no campo da igualdade de género,

Reconhecendo que esta Declaração deve ser entendida como sendo consistente com o direito nacional e internacional e em conformidade com a lei sobre os direitos humanos,

Relembrando a Constituição da UNESCO, adotada em 16 de novembro de 1945,

Considerando o papel da UNESCO na identificação de princípios universais com base em valores éticos compartilhados para orientar as mudanças sociais,

Na consciência de que todos os seres humanos são iguais e que qualquer forma de discriminação é uma prática inaceitável,

Reconhecendo que a educação é a ferramenta básica para promover o bem-estar de indivíduos, famílias, grupos ou comunidades e da humanidade como um todo, no reconhecimento da dignidade da pessoa humana e no respeito universal pelos direitos humanos e liberdades fundamentais,

Reconhecendo que a saúde depende de fatores psicossociais e culturais e é um fator essencial para a autorrealização, autonomia pessoal e para a promoção da coesão social a nível mundial,

Reconhecendo ainda que a integridade física é uma dimensão essencial da identidade pessoal e que proteger a privacidade pessoal—tanto física quanto psicológica—é uma meta humana de valor especial,

Tendo em mente que a identidade de uma pessoa inclui dimensões biológicas, psicológicas, sociais, culturais e espirituais,

Tendo ainda em mente que a diversidade cultural é uma fonte de intercâmbio, inovação e criatividade, e que é necessária à humanidade, mas, no entanto, não pode ser invocada em detrimento dos direitos humanos e das liberdades fundamentais, nomeadamente para promover qualquer tipo de discriminação sexual e de género,

Reconhecendo que uma maneira importante de avaliar as realidades sociais e alcançar a equidade é prestar atenção ao estatuto do género vulnerável na sociedade,

Reconhecendo que a igualdade de género é uma condição prévia para avançar no desenvolvimento e reduzir a pobreza, e requer um compromisso com abordagens desafiadoras e transformadoras,

Salientando a necessidade de reforçar a cooperação internacional no campo dos direitos humanos e da igualdade de género, levando em conta, em particular, as necessidades especiais dos países onde esses valores são menos desenvolvidos e adotados,

Proclama os princípios que seguem e *adota* a presente Declaração.

Disposições Gerais

Artigo 1—Âmbito de aplicação

1. Esta Declaração aborda questões éticas e práticas sociais relacionadas com a igualdade de género, significando um equilíbrio entre mulheres e homens em todas as sociedades, a nível local e global. Para os fins desta Declaração, igualdade de género significa que mulheres e homens têm condições iguais para alcançar os seus plenos direitos humanos e para contribuir e beneficiar do desenvolvimento económico, social, cultural e político. A igualdade de género é, portanto, a valorização equivalente pela sociedade das semelhanças e diferenças entre homens e mulheres e dos papéis que desempenham. Baseia-se no facto de mulheres e homens serem parceiros de pleno direito na sua casa, comunidade e sociedade.

2. Esta Declaração é dirigida a todos os Estados. Sendo apropriado e relevante, também fornece orientação para decisões ou práticas de indivíduos, grupos, comunidades, instituições e corporações, públicas e privadas.

Artigo 2—Objetivos

Os objetivos desta Declaração são:

a. Fornecer uma estrutura universal de princípios e procedimentos para orientar os Estados na formulação da sua legislação, políticas ou outros instrumentos no campo da igualdade de género;
b. Orientar as ações de indivíduos, grupos, comunidades, instituições e corporações, públicas e privadas;
c. Promover o respeito pela dignidade humana e proteger os direitos humanos, garantindo o respeito pela vida dos seres humanos e as liberdades fundamentais, consistentes com o direito internacional dos direitos humanos;
d. Promover o diálogo multidisciplinar e pluralista sobre questões de igualdade de género entre todas as partes interessadas e na sociedade como um todo;
e. Promover o acesso equitativo à educação, conhecimento e desenvolvimento cultural, e também aos cuidados de saúde e planeamento familiar, com especial atenção às necessidades dos países em desenvolvimento;
f. Salvaguardar e promover os direitos de mulheres e homens na sociedade em geral e também em contextos especiais como o mercado de trabalho, como interesse comum da humanidade.

Princípios

No âmbito desta Declaração, nas decisões ou práticas adotadas ou executadas por aqueles a quem se dirige, devem ser respeitados os seguintes princípios.

Artigo 3—Dignidade humana e direitos humanos

1. A dignidade humana, os direitos humanos e as liberdades fundamentais devem ser plenamente respeitados.
2. A igualdade de oportunidades no acesso a bens sociais e económicos é uma maneira fundamental de promover a dignidade humana.
3. A igualdade de género é crucial para que mulheres e homens possam realizar a sua dignidade humana fundamental e seus direitos humanos.

Artigo 4—Autonomia pessoal e responsabilidade individual

A autonomia da pessoa para tomar decisões, embora assuma a responsabilidade por essas decisões e respeite a autonomia dos outros, deve ser respeitada. Para pessoas que não são capazes de exercer a sua autonomia, devem ser tomadas medidas especiais para proteger os seus direitos e interesses.

Artigo 5—Respeito pela vulnerabilidade humana e pela integridade pessoal

Em qualquer interação social—nomeadamente na educação e na área da saúde, bem como no local de trabalho e na vida quotidiana—a vulnerabilidade humana deve ser levada em consideração. Indivíduos e grupos especialmente vulneráveis devem ser protegidos e a integridade pessoal (ou seja, integridade física) desses indivíduos deve ser respeitada.

Artigo 6—Privacidade e confidencialidade

A privacidade das pessoas envolvidas e a confidencialidade das suas informações pessoais devem ser respeitadas.

Artigo 7—Igualdade, justiça e equidade

A igualdade fundamental de todos os seres humanos no que diz respeito à sua dignidade e os seus direitos deve ser respeitada, para que sejam tratados de maneira justa e equitativa. A igualdade de oportunidades no acesso a bens sociais fundamentais deve ser totalmente promovida.

Artigo 8—Não discriminação e não estigmatização

Nenhum indivíduo ou grupo deve ser discriminado ou estigmatizado por qualquer motivo, em violação da dignidade humana, dos direitos humanos e das liberdades fundamentais.

Artigo 9—Respeito à diversidade cultural e antecedentes familiares

A importância da diversidade cultural e do contexto familiar deve ser levada em consideração. No entanto, essas considerações não devem ser invocadas para violar a dignidade humana, os direitos humanos e as liberdades fundamentais, nem os princípios estabelecidos nesta Declaração, nem limitar o seu âmbito de aplicação. Considera-se inaceitável qualquer forma de violência familiar.

Artigo 10—Solidariedade e cooperação

A solidariedade entre os seres humanos e a cooperação internacional para esse fim devem ser incentivadas. Deve promover-se a solidariedade global, desafiando as injustiças estruturais globais.

Aplicação dos Princípios

Artigo 11—Acesso à educação ao conhecimento

1. A educação e o acesso ao conhecimento são um elemento importante para o desenvolvimento pessoal, a autorrealização e a integração social. Todos os esforços devem ser feitos para utilizar as melhores ferramentas disponíveis para aumentar o conhecimento numa base de igualdade de oportunidades, e garantir que todos os sexos tenham acesso ao mesmo nível de educação.
2. Devem ser promovidas oportunidades para um debate público pluralista e informado sobre a maneira de envolver todas as crianças, homens ou mulheres, num processo de aprendizagem contínuo ao longo da vida.
3. O acesso a uma educação sexual adequada, incluindo planeamento familiar, deve ser considerado uma prioridade na educação em saúde.

Artigo 12—Igualdade no acesso à saúde

1. A promoção da saúde e do desenvolvimento social é um objetivo central dos governos que todos os setores da sociedade compartilham.
2. Levando em conta que o gozo do mais alto padrão de saúde possível é um dos direitos fundamentais de todo ser humano, sem distinção de raça, identidade de género, orientação sexual, etnia, idioma, religião, ideologia política ou outra opinião e opiniões civis, políticas, estatuto social ou outro, a sociedade deve promover:

a. o acesso a cuidados de saúde de qualidade, porque a saúde deve ser considerada um bem humano fundamental, independente de género ou orientação sexual;
b. o acesso à água e a nutrição adequada;
c. a melhoria das condições de vida e do meio ambiente;
d. a eliminação da marginalização e exclusão de pessoas com base em qualquer motivo;
e. a redução da pobreza e do analfabetismo;
f. a proteção de todos os sexos contra o assédio sexual, violência, mutilação, intimidação, retaliação ou outra negação dos seus direitos humanos básicos;
g. o acesso aos cuidados de saúde reprodutiva, a partir de uma perspetiva mais ampla que envolve todos os sexos, incluindo educação sexual, métodos contracetivos, tecnologias reprodutivas e consentimento.

Artigo 13—Igualdade no trabalho, social e política

1. Os Estados devem adotar medidas apropriadas para garantir que as mulheres tenham acesso às mesmas oportunidades de emprego que os homens.
2. Os Estados devem adotar medidas apropriadas para garantir que o acesso à progressão na carreira e ao nível salarial sejam iguais para todos os sexos.
3. Os Estados devem adotar medidas apropriadas para garantir a segurança no emprego, permitindo interrupções no trabalho por licença de maternidade, licença parental e responsabilidades relacionadas com a família.
4. Os Estados devem adotar medidas apropriadas para eliminar e divulgar condições inseguras de trabalho, além de garantir a saúde, a segurança e o bem-estar de todos os trabalhadores, mulheres e homens.
5. Os Estados devem adotar medidas apropriadas para garantir acesso equitativo às posições políticas a todos os sexos.
6. Os Estados devem promover o acesso à justiça, negociando regras e processos equitativos para mudanças efetivas e sustentáveis, influenciando a forma e a função das instituições que prestam serviços públicos e regulam o acesso aos respetivos recursos, e capacitando todas as pessoas a desafiar as desigualdades.
7. Os Estados devem promover a justiça social e a solidariedade global, desafiando as injustiças estruturais globais e abordando as causas da pobreza e da injustiça.

Artigo 14—Práticas transnacionais

1. Os Estados, instituições públicas e privadas, profissionais, sociedade civil e universidades associados às atividades transnacionais devem procurar garantir que qualquer atividade no âmbito desta Declaração, realizada, financiada ou de outra forma levada a cabo no todo ou em parte em Estados diferentes, seja consistente com os princípios estabelecidos na presente declaração.
2. Os Estados devem adotar medidas apropriadas, tanto a nível nacional quanto internacional, para combater qualquer forma de discriminação de género, assegurando um equilíbrio entre homens e mulheres em todas as práticas sociais.

Promoção da Declaração

Artigo 15—Papel dos Estados

Os Estados devem tomar todas as medidas apropriadas, de caráter legislativo, administrativo ou outro, para efetivar os princípios estabelecidos nesta Declaração, de acordo com o Direito Internacional dos Direitos Humanos. Tais medidas devem ser apoiadas por ações no âmbito da educação, da formação e da informação pública.

Artigo 16—Educação, formação e informação sobre a igualdade de género

1. Para promover os princípios estabelecidos nesta Declaração e alcançar um melhor entendimento sobre a igualdade de género, especialmente para os jovens, os Estados devem procurar promover a educação e a formação em direitos humanos a todos os níveis, bem como incentivar a divulgação de programas de informação e conhecimento sobre essas questões.
2. Os Estados devem incentivar a participação de organizações intergovernamentais internacionais e regionais e organizações não-governamentais internacionais, regionais e nacionais neste empreendimento.

Artigo 17—Cooperação internacional

No âmbito da cooperação internacional, os Estados devem promover a cooperação cultural e científica e celebrar acordos bilaterais e multilaterais que permitam aos países em desenvolvimento fortalecer a sua capacidade de promover os valores e princípios desta Declaração.

Artigo 18—Ação de acompanhamento da UNESCO

A UNESCO promoverá e divulgará os princípios estabelecidos nesta Declaração. A cada cinco anos, uma comissão especial designada pela UNESCO deve elaborar um relatório detalhado sobre a implementação e aplicação desta Declaração.

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This book intends to provide a comprehensive review of the field of gender equality and aims to challenge the reader through in-depth discussions on the fundamental values of modern societies. This book critically analyses experiences of gender equality practices and identifies common challenges and interests. It addresses the basic question of the goals of education for gender equality in the context of a plural and diverse world. The reader is invited to engage with a vast array of topics illustrating the importance of implementing gender equality, and it includes, as an example, a proposal of an international declaration specifically dedicated to education for gender equality. It proposes the need for a core global strategy for gender equality grounded on human rights, specifically, women's human rights and intersectional public policies. Launching by presenting the foundations of human rights and gender equality, this book goes on to approach specific areas such as gender mainstreaming policies. This book is a challenge to anyone interested in gender equality, as well as to researchers and policymakers who view gender equality as a way to promote democracy and economic development.

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