

Strasbourg Charter

Conference European Parliament – Strasbourg: "Neuroscience, Prenatal and Postnatal Violence, and Legal and Medico-Legal Protection: Towards Integrated Protection for Mothers, Newborns, and Children" Consensus Conference – Strasbourg, December 3, 2025

PROTECTION OF THE RIGHTS TO HEALTH OF THE FETUS, THE MOTHER, AND THE PARENT-CHILD RELATIONSHIP

Unanimously approved by the Consensus Conference of the following organizations:

- **PSAF** – Scientific Association of Insurance and Forensic Professionals
- **ASMI** – Association for Infant Mental Health
- **FRANCOPHONE ALLIANCE**
- **AEPEA** – European Association for Child and Adolescent Psychopathology
- **APRODEME** – Association for the Defense of Minors
- **DEPARTMENT OF PSYCHOLOGY, UNIVERSITY OF YAOUNDÉ 1**
- **AIPU** – Italian Association of University Posturologists
- **ASI** – Association of Italian Sociologists
- **ANILDD** – National Association of People Disabled at Work and Diffuse Disability
- **IDMA** – International Disaster Medicine Association
- **SPEs** – School of Neo-Existential Psychotherapy
- **FEM COURAGE**
- **POLISPORTIVA GIUGLIANO**
- **ACADEMY OF THE HISTORY OF HEALTHCARE ART**
- **HUMAN VERTUS ASSOCIATION**
- **PAID TOGO ASSOCIATION**
- In collaboration with experts in neuroscience, forensic medicine, juvenile law, perinatal psychiatry, and social and health services.
- With the participation of members of the European Parliament.

Preamble

Violence during pregnancy is one of the most serious and often underestimated threats to the mental and physical health of pregnant women, fetuses, and children.

Modern neuroscientific research demonstrates that prenatal trauma profoundly influences the neurological development of the fetus, affecting its emotional balance and future cognitive and social abilities.

Forced separations between mother and child, when not based on solid scientific or clinical criteria, represent a form of postnatal violence with grave consequences for child development, maternal health, and family stability. The scientific evidence is clear: early and traumatic separations of mothers from their children generate long-term effects on the emotional regulation, cognitive, and social skills of the children, and increase vulnerability to the development of psychopathological conditions in childhood and adulthood.

This Charter of Rights regarding perinatal mental health arises from the urgent need to recognize, prevent, and address perinatal and postnatal violence in all its forms, laying the foundations for the integrated, multidisciplinary, and legally recognized protection of the fundamental rights of the fetus, the newborn, and the mother-child bond.

Article 1 - Right to Prenatal Health

Every fetus has the right to a safe and healthy intrauterine environment, unimpaired by the damaging consequences of violence on its physiological development. Prenatal violence is to be considered a form of abuse that must be prohibited through the adoption of preventive and protective measures based on scientific evidence, ensuring the psychophysical health of both the mother and the unborn child.

Article 2 - Right to Perinatal Mental Health

Perinatal mental health and psychological well-being are to be considered a fundamental right of the child. They are strictly linked to the physical, psychological, and social well-being and balance of the mother, the child, and the family from the prenatal stage until three years of age. The protection of perinatal mental health requires continuous biopsychosocial attention, including prevention, the identification of disorders and emotional suffering during this period of the child's psychophysical development, and the adoption of necessary measures to resolve them.

Article 3 - Right to Protection of the Mother-Child Bond in the Perinatal Period

The emotional bond between mother and child must be protected, as it constitutes a fundamental asset for the healthy development of the child during the perinatal period. Separation of mother and child shall only be enacted when clinical or medico-legal assessments confirm conditions that, in the absence of such separation, would jeopardize the child's perinatal mental health.

Article 4 - Right to Multidisciplinary Integration

The protection of perinatal mental health and psychological well-being requires effective coordination between health services, social services, and judicial systems, as well as the involvement of experts in perinatal mental health and forensic medicine.

Article 5 - Right to Adequate Facilities and Services

During the perinatal period, minors and families must be guaranteed access to specialized facilities and services in perinatal psychopathology that ensure care and assistance for the mother, the child, and the family.

Article 6 - Right to Early Diagnosis and Prevention

The protection of perinatal mental health requires early identification and active prevention of perinatal mental disorders. To this end, the development and adoption of appropriate screening and diagnostic tools are recommended, along with constant professional updating for health and social workers trained in integrated therapies.

Article 7 - Right to Fair and Informed Justice

Mothers, newborns, and families have the right to ensure that judicial decisions regarding perinatal mental health are based on up-to-date scientific knowledge and objective clinical evaluations. Forensic medicine is tasked with documenting signs of prenatal and postnatal violence; providing scientific evidence to support legal protections; preventing unjustified separations; and collaborating with the judicial system to ensure timely, proportionate, and well-founded interventions to protect prenatal and perinatal health.

Article 8 - Right to Independent Monitoring

Children placed in state-run homes or care centers have the right to continuous, individual monitoring by independent teams with specific expertise in perinatal mental health. This is to ensure the early identification, prevention, and treatment of perinatal mental disorders, thereby guaranteeing their physical, psychological, emotional, and social well-being.

Article 9 - Right to Harmonized European Policies

Mothers, newborns, and families have the right to benefit from consistent and coordinated policies that guarantee equitable protection across all Member States.

Article 10 - Right to Protection in High-Risk Contexts

Families in situations of vulnerability or at high psychosocial risk have the right to enhanced and coordinated protection that preserves the mother-child emotional bond and prevents traumatic separations.

Article 11 - Right to a Culture of Prevention

Every Member State must promote a public culture of prevention that recognizes the importance of perinatal mental health and the value of the parental bond. Prevention must be treated as an essential ethical, political, and cultural priority for a more just and emotionally healthy society.

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This Charter aims to serve as a fundamental pillar for a renewed "**Europe of Care**": a civil ecosystem founded on the mandatory protection of maternity, childhood, and family cohesion. This vision finds its center of gravity in the absolute respect for **human dignity**, the rigor of **scientific evidence**, and the safeguarding of **inalienable rights**. It is offered to States, EU institutions, and the professional community as an **operational and value-based instrument**, aimed at ensuring the protection of the most vulnerable individuals from the moment of conception. The goal is to

promote public policies that are synergistic, sustainable, and structurally oriented toward a culture of prevention.



As a culmination of the Consensus Conference proceedings, the establishment of the "**Giulia Zinno**" **International Observatory** has been solemnly decreed. The body, headquartered in **Rome**, brings together an authoritative assembly of experts and representatives from the signatory organizations.

The Observatory is established as a center of excellence and coordination, entrusted with the following high functions and purposes:

1. Monitoring and Protection of Rights

- **International Oversight:** To monitor the application of the Strasbourg Charter principles and European standards regarding perinatal mental health.
- **Analysis of Violence:** To analyze, bring to light, and prevent all forms of prenatal and postnatal violence—including institutional, healthcare, and relational violence—with particular focus on forced separations and violations of the rights of the fetus and the mother-child bond.

2. Scientific Research and Technological Innovation

- **Promotion of Research:** To support interdisciplinary research (medical, psychological, and social) for the protection of minors and maternal health.
- **Advanced Diagnostics and AI:** To establish specialized research centers that implement **Artificial Intelligence** for the early diagnosis of fetal distress and the prevention of pathologies arising from contexts of violence.
- **Information Systems:** To develop and maintain integrated systems for the collection and dissemination of relevant scientific and legal data.

3. Advisory and Legislative Function

- **Institutional Recommendations:** To draft reports, regulatory proposals, and strategic recommendations addressed to European Union bodies, Member States, and national institutions.
- **Policy Evaluation:** To evaluate the effectiveness of public policies and assistance mechanisms, guiding every regulatory evolution toward the principle of the best interests of the child.

4. Cooperation, Training, and Awareness

- **International Synergies:** To foster cooperation between institutions, universities, clinical networks, NGOs, and international bodies committed to perinatal protection.
- **Advanced Training:** To promote interdisciplinary training programs for healthcare, social, legal, and educational professionals, raising the level of awareness within civil society.

- **Scientific Dissemination:** To organize annual conferences and oversee sector publications to highlight progress made and emerging challenges.