

National Human Rights Index

https://index.belhelcom.org

2024

Right to Health

Expert Commentary

The score:	4,2	-0,1
Including scores by component:		
General principles	3,6	-0,1
Maternal, child and reproductive health	4,7	
Healthy natural and workplace environments	4,3	
Disease prevention	4,6	
Medical and nursing care in case of illness	4	-0,1

A description of the baseline situation regarding the realization of the right to health can be found in the 2019 review¹. Assessing the realization of the right to health in 2024, the Index experts noted a slight but steady decline in the overall score, from 4.3 to 4.2 points. This reflects both persistent systemic constraints and new risks that have intensified during the year. The scores for two of the five components — "General principle" and "Medical and nursing care in case of illness s" — were lowered by 0,1. **Among the main reasons**:

- Deteriorating access to health services, essential medicines and specialized care, especially for vulnerable groups. Persistent shortages of skilled personnel;
- Deteriorating provision of essential medicines, access to testing and psychosocial support, and diagnosis for persons living with HIV. Restrictions on access to IVF for women living with HIV;
- Increased stigmatization of certain population groups, including LGBTQI+ and persons who have made a conscious decision not to have children (childfree), limiting their access to medicine, information, and psychological support;
- Introduction of strict restrictions on the dissemination of information on sexual and reproductive health in the absence of adequate alternatives;
- Lack of adequate medical care in places of detention;
- Outbreaks of infectious diseases and weak response from the system;

¹ https://belhelcom.org/sites/default/files/13 pravo na zdorove 2019.docx .pdf

- Low effectiveness of the new preventive healthcare model due to high costs, a formal approach, and insufficient scientific basis;
- Worsening problems with drinking water quality and lack of reliable information.

General principles

In 2024, the authorities initiated a large-scale update of legislation – the preparation of a draft Health Code². The draft Code was developed throughout the year, with meetings between MPs and medical professionals, and on December 3, 2024, the text was submitted for public discussion at the Belarusian Legal Forum. Initially, only seven days were allocated for discussion, but after criticism and petitions, the deadline was extended to February 1, 20253. The Code is being prepared with the aim of "streamlining and updating" the regulatory framework for healthcare. The draft Code grants the president virtually unlimited powers in the field of healthcare: while under the old law he "determines state policy," the draft states that he "determines a unified state policy and exercises other powers..." In addition, the president is granted the right to "establish specific features of legal regulation of relations." The Council of Ministers is authorized to approve state programs and regulate key aspects, while reporting to the president at least once a year on the state of public health, but there is no explicit provision for public reporting to citizens. Under the draft, the Ministry of Health will be given an extremely wide range of functions (89 items) - from organising medical care to approving donor food rations. Such changes exacerbate the problems of centralisation, undermining the development of competition and independence among members of the medical community. Excessive centralization makes the state the dominant actor, reducing the role of doctors and patients in decision-making. In the long term, this leads to bureaucratization, slower decision-making, and a loss of trust in the entire healthcare system⁵.

Healthcare funding increased in 2024: 11.1 billion rubles were allocated from the consolidated budget, compared to 9.8 billion rubles in 2023. However, it is assumed that the allocated funds are only sufficient to meet the basic needs of the system, while there is not always enough money for equipment upgrades, innovation, and modern medicines. This is indirectly confirmed by patient complaints about the lack of expensive drugs or waiting lists for high-tech operations.⁶

There are periodic interruptions in the supply of medicines, which may disappear for certain periods. In particular, in 2024, there were interruptions in the supply of vital drugs for the treatment of HIV, as a result of which patients' treatment regimens were changed not for medical reasons, but due to the lack of the necessary drugs. Russian pharmaceutical companies began to win tenders for the supply of drugs, displacing Indian manufacturers. Experts note that Russian generics that have appeared in

² https://www.belhalat.news/articles/itogi-2024-go-chast-pervaya

³ https://www.belhalat.news/articles/itogi-2024-go-chast-pervaya

⁴ https://www.belhalat.news/articles/itogi-2024-go-chast-pervaya

⁵ https://www.belhalat.news/articles/itogi-2024-go-chast-pervaya

⁶ https://www.belhalat.news/articles/itoqi-2024-qo-chast-tretya

Belarus cause severe side effects from the first days of use, and their long-term effects are unknown. This leads to patients refusing treatment.

Experts also report corruption schemes in public procurement of medicines, which makes them more expensive for the population and reduces their economic accessibility.

Experts draw attention to falsification in the production of the Belarusian vaccine: clinical trials were conducted formally, and complaints about this were ignored by the Ministry of Health. According to experts, supervisory bodies have effectively removed themselves from oversight.⁷

Queues for specialized care remain. At the same time, isolated cases where treatment is provided "by order from above" only highlight the injustice and lack of transparency of the system.

In 2024, rhetoric against LGBTQI+ people intensified. On March 19, 2024, the Ministry of Culture adopted Resolution No. 24, equating LGBTQ+ people with "non-traditional sexual relations," along with necrophilia and pedophilia, and classifying their display as "pornography." Against this backdrop, in 2024, it became known that the commissions on transgender transition had been suspended. No official order followed, but according to experts, the commissions stopped meeting and transgender persons cannot access the necessary services. Experts point out that the stigmatization of LGBTQI+ people, and transgender people in particular, has reached unprecedented levels, forcing people to leave the country.

In January 2024, the Ministry of Architecture and Construction announced that 18 healthcare facilities were planned to be built in Belarus in 2024.9 However, experts point out that at the same time, the closure of institutions in small settlements continued. This particularly affects first-aid stations and primary care facilities. No alternatives were offered to local residents, which exacerbates inequality in access to healthcare.

In December 2024, it became known that a new palliative care unit, "Hospice," had been opened in Vitebsk at the regional clinical oncology center, which was designed to be barrier-free so that patients with limited mobility and physically frail persons could move around freely. 10

The shortage of medical personnel remains a problem. Experts note that small towns often lack general practitioners, so patients are either referred to other cities or a specialist comes once a week. In 2024, the outflow of qualified personnel continued. According to independent estimates, the Ministry of Health artificially inflates the number of practicing doctors, and the real figure in Belarus is lower than stated: the total number of doctors is in the range of 26–40 per 10,000 population.¹¹ The reasons

⁷ https://www.belhalat.news/articles/pravda-o-vakcine-belkovidvak

⁸ https://pravo.by/document/?quid=12551&p0=W22441365

https://myfin.by/stati/view/skolko-v-belarusi-v-2024-qodu-planiruut-postroit-zila-skol-i-bolnic-rasskazali-vminstrojarhitektury

¹⁰ https://www.belhalat.news/articles/v-vitebske-otkryli-novoe-otdelenie-palliativnoy-pomoshchi

¹¹ https://www.belhalat.news/articles/itogi-2024-go-chast-vtoraya

remain the same: mass repression (detentions and trials)¹² and harsh working conditions, including overtime and low wages¹³.

Experts also report that the number of foreign doctors increased in 2024. However, the public reacted negatively to this due to communication problems: doctors do not speak the language of their patients, nurses act as interpreters, and patients only receive reliable information from prescriptions.

There is a noted increase in ideological control over staff and a shift towards more systematic repression.¹⁴ Law enforcement agencies send medical institutions "blacklists" of "disloyal" employees (including those who signed for alternative candidates during the 2020 presidential election). Undesirable employees are dismissed – either "at their own request" under pressure or by not renewing their contract, or using a formal pretext (e.g., absenteeism due to administrative arrest). 15 There are reports that employees are pressured to join a pro-government trade union or subscribe to state media.¹⁶ There is no case law protecting the labor rights of medical workers in such cases.

In April 2024, the rector of the Belarusian State Medical University signed an order changing the internal regulations, prohibiting employees of the country's leading medical university from attending conferences and other training events unless they were approved by the Ministry of Health, significantly limiting their ability to study, teach, and exchange experience. 17 This has severely limited the ability of doctors to improve their qualifications and exchange experience, which will ultimately affect the quality of treatment.

In addition, professional medical communities, which were created to enable medical professionals to exchange experience not only within the country but also to study abroad, have been massively eliminated in Belarus.18

• Maternal, child and reproductive health

Formally, the country maintains free access to abortion at the woman's request up to 12 weeks, as well as reproductive technologies (IVF, etc.) for married couples. However, state rhetoric and regulations

¹² https://t.me/belhalat_by/8882; https://t.me/belhalat_by/8896; https://t.me/belhalat_by/8902; https://spring96.org/be/news/114874; https://t.me/belhalat_by/8990; https://t.me/belhalat_by/8991; https://t.me/belhalat_by/8999; https://t.me/belhalat_by/9004; https://sprinq96.org/ru/news/115549; https://nashaniva.com/345654; https://t.me/belhalat_by/9117; https://t.me/viasnanazirae/951; https://prisoners.spring96.org/ru/person/alesja-dzernakouskaja; https://gomelspring.org/be/news/10906; https://qomelsprinq.org/be/news/11019; https://t.me/vitebsk info/6049; https://nashaniva.com/ru/357886

¹³ https://www.belhalat.news/articles/itogi-2024-go-chast-tretya

¹⁴ https://t.me/belhalat_by/9091; https://t.me/belhalat_by/9104

¹⁵ https://www.belhalat.news/articles/itogi-2024-go-chast-chetvertaya#:~:text=Image; https://dson6cqvys1hu.cloudfront.net/ru/naviny/v-gomele-uvolili-dvuh-vrachej-onkologov-posle-sutok-za-ekstremizm-odiniz-nih-kandidat-nauk-otlichnik-zdravoohranenija-belarusi.html

¹⁶ https://www.belhalat.news/articles/itogi-2024-go-chast-chetvertaya#:~:text=Image

¹⁷ https://t.me/belhalat by/8971

¹⁸ https://t.me/belhalat by/9124

increasingly stigmatize the decision not to have children. At the end of 2024, amendments were proposed to the legislation on the protection of children from harmful information: references to the promotion of "homosexual relations, gender reassignment, pedophilia, and childlessness" were added to the list of information prohibited for children. ¹⁹ Thus, the idea of voluntary childlessness (childfree) has been officially declared unacceptable – it has been placed on a par with truly dangerous things such as pedophilia.

This approach is confirmed by problems with ensuring women's rights to health throughout their lives. Experts point out that state policy focuses primarily on reproductive health: outside the childbearing cycle, women become "invisible" to the system. There are virtually no programs for women in premenopause, menopause, and postmenopause, and doctors generally lack sufficient training to work with such patients. At the same time, experts acknowledge that the state is making certain efforts: menopause centers have been opened, funds have been allocated for research in gynecological surgery aimed at women who have completed their reproductive function, screenings are being conducted, and doctors are being trained. However, according to experts, access to this information and services remains extremely limited, and the main focus is still on women of reproductive age.

Women's health in the prison system remains a serious problem. Although formally there are specialists in the institutions, in practice, according to experts, access to gynecologists is not guaranteed everywhere, and women's reproductive health issues in places of deprivation of liberty are often ignored.

A new Ministry of Health regulation restricts access to IVF for women living with HIV (no such restrictions exist for men living with HIV).²⁰ Experts point out that, formally, access to IVF is permitted for discordant couples (where one partner is living with HIV), but in practice it is virtually impossible to take advantage of this option. Doctors refuse to perform the procedure, citing the legally established possibility for women living with HIV to terminate a pregnancy at any stage. As a result, women face discrimination on the basis of their illness, despite their formal rights.

Experts also note that Ministry of Culture Resolution No. 24, which has come into force, imposes severe restrictions on the dissemination of information on sex education. All products related to sex education must now be approved, including display, distribution, sale, and advertising. 21 Experts emphasize that this restriction effectively blocks adequate sex education, while the state offers no effective alternative.

The same Resolution equates LGBTQ+ people with "non-traditional sexual relationships," along with necrophilia and pedophilia, and classifying their display as "pornography" has a negative impact on LGBTQ+ and queer adolescents, who, due to their gender identity, are effectively outlawed.

According to experts, the influence of international technical assistance, which contributes to the protection of children's health, remains a positive factor.

¹⁹ https://trends.belhelcom.org/storage/reviews/February2025/0RniSzTA2HuMfxM5W7Eo.pdf

²⁰ https://pravo.by/document/?quid=12551&p0=W22441877

²¹ https://pravo.by/document/?quid=12551&p0=W22441365



Healthy natural and workplace environments

In 2024, the legal regulation of environmental protection remained unchanged: the Law "On Environmental Protection" is in force, as well as a number of special laws (on air, waste, animal protection and use, etc.), and previously adopted state programs on ecology.

By 2024, virtually all independent environmental organizations have been eliminated, and activists have either left or been forced to remain silent. This reduces the ability of the public to monitor the environmental situation and the quality of the environment.

According to experts, the quality of drinking water remains a serious problem. Despite statements by state authorities about stability, citizens in various regions have filed complaints about water pollution and requests for independent investigations. However, the response is usually formal information about compliance with standards, even when the water clearly looks and smells suspicious. Thus, access to reliable information about water quality is limited.

Experts point out that the state lacks adequate mechanisms to respond quickly and deal with the consequences of emergencies, especially in remote or affected regions.

In 2024, government agencies reported a decrease in industrial injuries²², but independent verification is difficult. According to experts, Belarus continues to have problems with the recognition of occupational diseases, and cases of industrial injuries, especially minor ones, are systematically concealed. Following the elimination of independent trade unions (the Belarusian Confederation of Free Trade Unions and industry unions), workers lost an effective mechanism for defending their rights, including the right to healthy working conditions.

Disease prevention

In 2024, there was an outbreak of viral hepatitis A²³. The incidence of hepatitis A rose from 0.89 cases per 100,000 population in 2023 to 6.6 cases per 100,000 in the first six months of 2024, i.e. more than sevenfold. By the end of the year, up to 10 cases per 100,000 people were predicted, which means hundreds of people would fall ill. The probable cause of the outbreak was contact with imported food products, possibly a batch of berries or fruits from countries with high levels of hepatitis. This case showed the vulnerability of the prevention system: vaccination against hepatitis A is not included in the mandatory vaccination schedule in Belarus. It is provided free of charge only to children in Minsk aged 18 and 24 months, and in other regions only on epidemic indications (after contact)²⁴.

Also in 2024, there was an increase in the incidence of measles.²⁵

Against the backdrop of these episodes, it is worth noting important steps towards the development of vaccination. Resolution No. 111 of the Ministry of Health of the Republic of Belarus dated July 1, 2024,

²² https://otb.by/news/5059-travmatizm-yanvar-dekabr-2024-goda-predvaritelnye-itogi

²³ https://t.me/belhalat_by/8886

²⁴ https://www.belhalat.news/news/kakovy-prichiny-rosta-zabolevaniya-qepatitom-a-v-belarusi

²⁵ https://immunizationdata.who.int/global



introduces amendments to the National Preventive Vaccination Calendar. From January 1, 2025, girls will begin to receive vaccinations against human papillomavirus (HPV), and additional vaccinations against pertussis and pneumococcal infection will also be introduced.

Another positive step was the introduction of pre-exposure prophylaxis (PrEP) for HIV, implemented for the first time in the country with international technical assistance from the Global Fund. This is a significant achievement in the context of expanding access to modern methods of HIV prevention.

However, HIV/AIDS prevention information programs faced funding shortages in 2024, their effectiveness declined, and virtually no new projects were launched. The level of awareness and coverage remains insufficient.

The authorities regularly hold campaigns (No Tobacco Day, diabetes prevention events, medical checkups). Campaigns to detect hypertension and cancer screening (especially mammograms and cervical cancer tests) continued. However, accurate statistical results are not available, as the Ministry of Health's public reports have become less detailed. Independent analysts point out that access to health statistics is limited and it is difficult to assess the effectiveness of prevention programs. For example, it is known that health care spending is increasing, but there is little data on how this affects specific programs (including prevention).²⁶

In Minsk, regional social service centers held a campaign to prevent infectious and non-infectious diseases. The Ministry of Health's goal was to help elderly persons obtain necessary knowledge about their health without having to visit health care facilities. The activities included lectures and consultations with doctors of various specialties, including on vaccination and prevention of infectious diseases, joint diseases, etc.²⁷

Since 2024, the procedure for medical examinations of adults and children has been changed. 28 The changes have been generally well received by patients: for many, it has become a real opportunity to undergo a check-up without having to take time off work, as paid leave is provided, which generally increases motivation to undergo the check-up. However, according to experts, medical check-ups require significant resources, are often carried out formally, and appointments are made without clinical indications. In some cases, examinations can be potentially harmful. Experts emphasize that the current preventive medical examination system is not based on modern scientific data, which reduces its effectiveness and makes it costly without the desired effect.

Medical and nursing care in case of illness

In 2024, a number of hospitals in Minsk underwent renovations, new technologies for the treatment of chronic diseases were introduced, and promising scientific methods were developed and tested. The state began to pay more attention to creating a barrier-free environment in healthcare facilities. The

²⁶ https://www.belhalat.news/articles/itogi-2024-go-chast-tretya

²⁷ https://t.me/belhalat by/9200

²⁸ https://pravo.by/novosti/novosti-pravo-by/2023/september/75289/



authorities began to recognize the problem of inaccessibility of quality care and took measures to improve the efficiency of comprehensive medical care.

One of the notable trends in 2024 was the beginning of the decentralization of medical care, with orthopedic and cardiac surgery gradually being transferred from Minsk and regional centers to district hospitals. This brings care closer to where patients live. Despite remaining questions about the quality of such care, experts consider the trend itself to be important.

At the same time, the problem of inadequate medical care in places of detention remains relevant. In 2024, four deaths of political prisoners in places of detention were reported, bringing the total number of political prisoners who died in places of detention to seven persons.²⁹ In addition, at least 190 political prisoners are in detention with serious health problems, often incompatible with detention in prison.³⁰ Many political prisoners have experienced a significant deterioration in their health while in detention.31

In addition to the deterioration in the provision of medicines, access to testing and psychosocial support for persons living with HIV has declined, and helping accepting the diagnosis has also deteriorated.

In 2024, materials and evidence related to the use of punitive psychiatry began to appear openly –a phenomenon that had previously been discussed only quietly but had now entered the public domain. 32

²⁹ https://spring96.org/ru/news/117167

³⁰ https://prisoners.spring96.org/ru/list?view=1&cluster%5B%5D=1

³¹ https://spring96.org/ru/news/117167

³² https://www.belhalat.news/articles/bel-psychiatry-05; https://www.belhalat.news/articles/bel-psychiatry-01; https://www.belhalat.news/articles/bel-psychiatry-02