

## National Human Rights Index

<https://index.belhelcom.org>

2025

### Right to Health

Expert Commentary

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

In assessing the realization of the right to health in 2025, the Index experts recorded a more significant decline in the score for the "General Principles" component than in previous years – owing to the cumulative effect of a number of systemic problems that received documentary confirmation specifically in 2025. Among the principal reasons for the decline:

- A personnel crisis in the healthcare system – approximately one-third of nurses are not working in their specialty; the legislative entrenchment of reductions in vacant positions, rather than their being filled, aggravates the problem;
- Documented violations of standards in the testing and application of the "BelCovidVac" vaccine, entailing a violation of the principle of informed consent with respect to tens of thousands of citizens;
- Disruptions to antiretroviral (ARV) therapy and deterioration of the diagnostic base for people living with HIV, compounded by non-transparent public procurement;
- Reduction of health information and prevention programs in connection with the freeze on grant financing;
- Growing opacity of medical statistics, making independent assessment of the state of the healthcare system increasingly difficult.

At the same time, experts noted a significant positive development: the inclusion of HPV vaccination in the National Immunization Schedule.



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- **General Principles**

In 2025, the state program "Public Health and Demographic Security" for 2021–2025<sup>1</sup> was drawing to a close. In late 2025, the Government approved the state program "National Health" for 2026–2030<sup>2</sup> which, among other provisions, envisages a transition from line-item financing of healthcare organizations to a results-based financing system, as well as the introduction of a national system of medical accreditation for healthcare organizations. Among the critical observations from the independent medical community regarding the new program, the "Belye Halaty" ("White Coats") project noted that the Ministry of Health had removed from the program specific numerical targets directly related to mental health and substance use disorders – in particular, indicators for reducing suicide mortality, reducing alcohol consumption, and increasing the coverage of rehabilitation services for persons with substance use disorders.<sup>3</sup>

The key legislative development of 2025 in the field of health protection was the continued work on the draft Code of the Republic of Belarus "On Healthcare."<sup>4</sup> The Code is intended to consolidate eight existing laws, including the laws on healthcare, on psychiatric care, and on the prevention of HIV. Discussion of the draft Code was conducted on a very compressed timeline and primarily in closed format, which limits the possibilities for expert discussion and public oversight.<sup>5</sup> In what was an atypical response by the authorities to public requests, the period for public discussion of the draft on the "Legal Forum" (initially set at only 10 days) was extended to 1 February 2025; as a result of the discussion, 657 submissions were received and the Ministry of Health acknowledged that "the legislative changes proposed by the draft Code are of great public interest and require additional elaboration."<sup>6</sup> Under Presidential Decree of 30 December 2024 No. 477 "On the Plan for Preparation of Draft Legislative Acts for 2025," it was intended that the draft Code be submitted to the House of Representatives in September 2025; however, this did not occur by the end of 2025. In connection with the preparation of the draft Code, the narrowing of the space for participation by the public and the professional community in the formulation of healthcare policy once again became evident.

Independent medical initiatives point to a mounting opacity within the system: restrictions on the ability to document what is taking place in medical institutions, a deficit of secure feedback channels, and a general atmosphere in which public criticism of the state of medicine is becoming risky. In this

<sup>1</sup> [«О Государственной программе "Здоровье народа и демографическая безопасность" на 2021-2025 годы» – тематические подборки НПА на Pravo.by](#)

<sup>2</sup> [Постановление Совета Министров Республики Беларусь от 30.12.2025 г. № 798 «О Государственной программе "Здоровье нации" на 2026–2030 годы» – Pravo.by](#)

<sup>3</sup> [Теперь не до суицидов и зависимых](#)

<sup>4</sup> [https://forumpravo.by/upload/pdf/2024-11-27\\_Minzdrav\\_proekt\\_kodeksa\\_o\\_zdravoohranenii.pdf](https://forumpravo.by/upload/pdf/2024-11-27_Minzdrav_proekt_kodeksa_o_zdravoohranenii.pdf)

<sup>5</sup> For an analysis of the draft Code and a discussion of the systemic lack of public participation in the development of such a significant sectoral document—which codifies a substantial body of legislation—see the draft prepared by the human rights organization "Doctors for Truth and Justice" and the "White Coats" initiative: <https://www.belhalat.news/guides/minzdrav-napisal-kodeks-o-zdravoohranenii---i-spyatal-ego>

<sup>6</sup> [https://forumpravo.by/upload/pdf/itogi/Informacija\\_ob\\_itogah\\_obsyzhdenij\\_Minzdrav\\_29.11.2024.pdf](https://forumpravo.by/upload/pdf/itogi/Informacija_ob_itogah_obsyzhdenij_Minzdrav_29.11.2024.pdf)



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context, an illustrative episode was the conviction in August 2025 of Yauhen Krasnyansky to 7.5 years' imprisonment and a fine for conducting a sociological study on COVID-19 in Belarus.<sup>7</sup>

An important positive development was the commencement of systematic HPV vaccination, which was included in the National Immunization Schedule as of 2025. The vaccination rollout encountered certain difficulties from the standpoint of public procurement.<sup>8</sup> In April 2025, the Head of the WHO Regional Office for Europe, Hans Kluge, in an address to the "Healthcare Belarus" forum, welcomed the strengthening of primary care, the expansion of rural healthcare services, and the inclusion of HPV vaccination in the immunization schedule, while simultaneously noting the continuing need to address the principal risk factors for non-communicable diseases.<sup>9</sup>

The quality and accessibility of medical care were affected by staff shortages,<sup>10</sup> overwork, and administrative pressure.<sup>11</sup> The official authorities responded to the personnel deficit by increasing the number of state-funded places in medical universities: in 2025, state-funded enrollment was increased by 205 places, and the proportion of targeted enrollment reached 79.8%.<sup>12</sup>

The reduction of the bedspace continues in tandem with a reduction in medical personnel positions. According to calculations<sup>13</sup> by the "White Coats" project based on data from "BelPol," a trend is evident: for every 100 beds reduced, 120 positions are also reduced. This means that staff overwork has been effectively enshrined in legislation – the reduction of vacant positions, which formally were being covered by overtime, eliminates the incentive to hire new staff and intensifies the outflow of personnel. A retrospective study<sup>14</sup> showed that approximately 30–35% of nurses are currently not working in their specialty. Although this is a long-term trend, reliable data became available for the first time specifically in 2025.

In late 2025, an important act on occupational health within the healthcare system itself was adopted: Resolution of the Ministry of Health of 3 November 2025 No. 177<sup>15</sup> approved the Model Occupational Health and Safety Instruction for the Provision of Medical Care in Healthcare Organizations, which consolidates safety requirements, replaces a number of narrower sectoral instructions, and explicitly lists harmful and dangerous occupational factors for healthcare workers, including chemical, biological, radiation, sensory, and emotional overloads.

Experts noted the persistence of non-transparent schemes in pharmaceutical public procurement:

<sup>7</sup> [Man convicted for sociological research on COVID in Belarus](#)

<sup>8</sup> [Вакцинация от ВПЧ не начнется в намеченный срок](#)

<sup>9</sup> [Обращение д-ра Ханса Клюге к участникам Международного медицинского форума «Здравоохранение Беларуси»](#)

<sup>10</sup> [Десятки тысяч за два десятилетия](#)

<sup>11</sup> [«Старшим медсестрам угрожали уголовными делами за график дежурств» - Салідарнасць](#)

<sup>12</sup> [Минздрав: набор на бюджетные места в медвузы значительно увеличен](#)

<sup>13</sup> [https://t.me/belhalat\\_by/9283](https://t.me/belhalat_by/9283)

<sup>14</sup> [Десятки тысяч за два десятилетия](#)

<sup>15</sup> [Постановление Министерства здравоохранения Республики Беларусь от 03.11.2025 г. № 177 «Об утверждении Типовой инструкции по охране труда при оказании медицинской помощи в организациях здравоохранения» – Pravo.by](#)



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Western pharmaceutical companies have been practically excluded from tenders in favor of Russian suppliers connected to structures affiliated with the authorities. Sanctions are not the primary cause – this involves the deliberate restriction of competition in public procurement in the absence of independent patient-side oversight.

The scandal surrounding the "BelCovidVac" vaccine received documentary confirmation in 2025: following access to internal documents on the clinical trials, it became evident<sup>16</sup> that the trials were conducted with gross violations of methodological standards, and patients were not properly informed of the risks – a violation of the fundamental principle of medical ethics: informed consent. In the assessment of experts, tens of thousands of individuals received a drug whose safety had not been confirmed. This constitutes a significant case touching simultaneously on the criteria of quality of medical care and medical ethics.

- **Maternal, Child, and Reproductive Health**

In 2025, a specialized clinical protocol was adopted in the field of reproductive health: Resolution of the Ministry of Health of 26 June 2025 No. 60<sup>17</sup> approved a protocol for the provision of medical care to women of reproductive age with short stature attributable to genetic syndromes. While this concerns a comparatively narrow group, the very fact of the development of a separate protocol reflects a movement toward differentiated care for women with special medical needs.

Resolution of the Ministry of Health of 7 October 2025 No. 139<sup>18</sup> approved an instruction on the procedure for implementing **early intervention** measures aimed at identifying children under the age of three with developmental disorders or risks thereof, providing them with medical and other assistance, and supporting their families.

At the same time, experts noted difficulties for certain groups of children: the absence of pediatric pharmaceutical forms of antiretroviral (ARV) drugs. In 2025, a situation was documented in which newborns and children are receiving adult tablet forms of ARV drugs that must be divided or crushed. This creates serious risks for dosage accuracy and treatment adherence, particularly in socially vulnerable families.

The most notable change in reproductive health was **HPV vaccination**, included as of 2025 in the National Immunization Schedule. Official clarifications from the Ministry of Health explicitly state<sup>19</sup> that vaccination is administered to girls aged 11, and in 2025 was to have been offered to girls born in 2014; separate provision is made for vaccination on epidemiological indications for girls and women aged 11–45 with HIV. In October, the Ministry of Health reported the receipt of the vaccine and the

<sup>16</sup> [Какой официальный итог разработки БелКовидВак?](#)

<sup>17</sup> [Постановление Министерства здравоохранения Республики Беларусь от 26.06.2025 г. № 60 «Об утверждении клинического протокола» – Pravo.by](#)

<sup>18</sup> [Постановление Министерства здравоохранения Республики Беларусь от 07.10.2025 г. № 139 «О порядке проведения мероприятий по раннему вмешательству» – Pravo.by](#)

<sup>19</sup> [Вопросы и ответы о вакцинации против инфекции, вызванной вирусом папилломы человека \(ВПЧ-инфекции\). Полезная информация для родителей](#)



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invitation of families for free vaccination in schools and polyclinics.<sup>20</sup> From the standpoint of the right to health, this is arguably the most significant preventive decision of the year in the area of women's health, as it is aimed at preventing cervical cancer.

At the same time, reproductive and maternal health in Belarus in 2025 continued to exist within a broader demographic and political context in which the state discourse on "traditional and family values" is becoming overtly pronatalist. In 2025, information discrediting the institution of the family and marital and family relations, and aimed at the propaganda of homosexual relations, gender reassignment, paedophilia, and childlessness, was declared harmful, and parents were charged with the obligation to shield children from it. Also in 2025, amendments to the Code of Administrative Offences providing for liability for "propaganda of homosexual relations, gender reassignment, paedophilia, and childlessness" were submitted to the House of Representatives and passed their first reading. This discriminatory trend<sup>21</sup> clearly demonstrates the state's intention to interfere in reproductive choices, effectively substituting demographic objectives for human rights, as well as its readiness to discriminate on the basis of gender identity and sexual orientation. In parallel, statements by officials representing abortion as a demographic problem rather than a matter of women's reproductive choice have been voiced in the public sphere. Deputy Minister of Health described women's refusal of abortion as "a contribution to the population bank of Belarus."<sup>22</sup>

Despite the absence of a direct legislative prohibition in 2025, discrimination on grounds of SOGI was already gathering momentum with concrete consequences for access to medical information. Thus, organizations working with the group of men who have sex with men (MSM) – a key target group for HIV prevention – were compelled to completely alter the public-facing language of their work: the term "MSM" was replaced with "men's health." This impedes targeted preventive communication, although the organizations continue their work.

- **Healthy Natural Environment and Occupational Health**

In 2025, work was conducted on a legislative package concerning drinking water supply and sewerage. The adoption of the law is intended to strengthen guarantees of citizens' access to drinking water; the draft law provides for programs of production-level safety monitoring of drinking water, and amendments are also introduced to related water legislation.<sup>23</sup> Final adoption of the law is scheduled for 2026.

Also in 2025, the preparation of the draft Environmental Code of Belarus advanced to the stage of the creation of a working group<sup>24</sup> and its submission for public discussion on the "Legal Forum."<sup>25</sup> In

<sup>20</sup> [В Беларуси начали бесплатно вакцинировать против вируса папилломы человека девочек 11 лет](#)

<sup>21</sup> [Amendments to the Code of Administrative Offences: What They Mean for LGBTQ+ People and the Childfree | Беларускі Хельсінкскі Камітэт](#)

<sup>22</sup> [Более 2,1 тыс. женщин за полгода сохранили беременность после преабортного консультирования](#)

<sup>23</sup> [Законопроект о питьевом водоснабжении и водоотведении: каких новаций ожидать?](#)

<sup>24</sup> [В Беларуси приступили к подготовке проекта Экологического кодекса](#)

<sup>25</sup> [Публичное обсуждение проектов НПА](#)



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contrast to the draft Healthcare Code, the draft Environmental Code did not attract significant attention: over the standard 10-day period of "discussion," only 67 comments were received.<sup>26</sup> The Environmental Code governs matters of air and water quality, waste management, and environmental information, which are significant factors in public health protection.

In 2025, environmental standards and regulations on environmental safety were updated,<sup>27</sup> as was the strategy on waste management,<sup>28</sup> which explicitly states that "preventing the harmful impact of waste on the environment, human health, and property is the foundation of effective waste management."<sup>29</sup>

In 2025, the second power unit of the Belarusian Nuclear Power Plant (BelNPP) was twice disconnected from the grid. In July 2025, it was shut down due to the activation of an alarm indicating an anomaly in the operation of the generator cooling system;<sup>30</sup> the Ministry of Energy characterized<sup>31</sup> the situation as routine, not affecting the nuclear component of the unit. In November, the second power unit was again shut down – officially for scheduled maintenance. Independent oversight of NPP safety remains practically impossible: more than 110 independent environmental organizations have been liquidated, the practice of liquidation has acquired a systemic character; in the current political conditions, citizens have well-founded fears of engaging with state authorities on environmental matters and cannot obtain the support of independent experts.<sup>32</sup>

Following Belarus's withdrawal from the Aarhus Convention, problems with access to environmental information persist.

According to occupational injury statistics for the first half of 2025 (770 injuries/54 deaths), compared with 2024 (802/43), there were fewer injuries but more deaths.<sup>33</sup> In mid-2025, by Resolution of Belstat of 29 August 2025 No. 68,<sup>34</sup> as of 1 September 2025, the collection of information on workplace injuries through the physical form of state statistical reporting 1-t (injuries) – "Report on the Number of Victims of Workplace Accidents and Instructions for Its Completion" – was discontinued. Professional communities were awaiting a new form,<sup>35</sup> but none appeared. From 1 January 2026, injury data are to be collected through an electronic database. However, based on available information, the period from

<sup>26</sup> <https://forumpravo.by/upload/iblock/f85/x4tg7kq3eak602jehs6p4znp15o0hcnp.pdf>

<sup>27</sup> [В Беларуси актуализированы требования экологической безопасности по вопросам охраны окружающей среды и природопользования](#)

<sup>28</sup> [В Беларуси утверждена Стратегия по обращению с отходами производства и потребления](#)

<sup>29</sup> [Постановление Совета Министров Республики Беларусь от 18.08.2025 г. № 444 «О Стратегии по обращению с отходами производства и потребления в Республике Беларусь» – Pravo.by](#)

<sup>30</sup> [Второй энергоблок БелАЭС отключили от сети из-за срабатывания сигнализации](#)

<sup>31</sup> [https://t.me/belaes\\_oficial/2569](https://t.me/belaes_oficial/2569)

<sup>32</sup> [UPR-Belarus-2025\\_Ecohome\\_eng.pdf](#)

<sup>33</sup> [Травматизм в Республике за 6 месяцев 2025 года - Охрана труда в Беларуси](#)

<sup>34</sup> [Постановление Национального статистического комитета Республики Беларусь от 29.08.2025 г. № 68 «О признании утратившими силу постановлений Национального статистического комитета Республики Беларусь» – Pravo.by](#)

<sup>35</sup> [Статистика по травматизму отменена - Охрана труда в Беларуси](#)



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September through December 2025 passed without proper collection and publication of injury data, meaning that comparable data for the entire year 2025 are absent.

Council of Ministers Resolution of 21 November 2025 No. 660<sup>36</sup> introduced significant changes to the Rules for the Investigation and Registration of Workplace Accidents: the scope of cases subject to investigation was clarified; the investigation period was extended from 3 to 5 working days; accidents are now investigated not only during working hours but also during periods not classified as working hours when the victim was present in connection with the performance of work – however, an accident is classified as non-occupational if it occurred during a rest and meal break, additional special breaks, or if the health damage to the victim "was not caused by the impact of a harmful or dangerous occupational factor upon them"; a further innovation is that a sudden deterioration of the victim's health immediately before the accident can only be confirmed by CCTV footage – the questioning of the victim, the testimony of eyewitnesses, and statements by the victim's spouse and close relatives are not accepted as evidence.<sup>37</sup> This enters into force on 1 March 2026.

Experts note the persistence of the practice of reclassifying occupational injuries as non-occupational with a view to improving performance indicators. In the absence of independent trade unions, workers have few opportunities to challenge such reclassification.

By 2025, the large-scale task of introducing occupational health and safety management systems in all organizations with more than 16 employees was to have been completed. As of 2023, such systems had been introduced in 91% of organizations; by the end of 2025, the goal was to ensure their universal implementation.<sup>38</sup>

#### • Disease Prevention

The most evident positive developments of 2025 relate to the field of disease prevention. The principal among them was **the inclusion of HPV vaccination** in the immunization schedule. The inclusion of hepatitis B vaccination in the extended list of available vaccinations should also be recorded as a specific improvement.

**HIV Prevention.** At the end of 2025, the Ministry of Health reported that approximately 26,000 HIV-positive individuals are living in Belarus, of whom more than 22,000 are receiving antiretroviral therapy; the primary route of transmission remains sexual, accounting for more than 80% of all cases, while the largest number of new cases is registered among persons aged 30–49.<sup>39</sup> The official campaign "Reduce the Risks" ("Snizhai riski") indicates that HIV prevention remained among the priorities in 2025, at least at the level of public preventive communication and treatment provision. In

<sup>36</sup> [Постановление Совета Министров Республики Беларусь от 21.11.2025 г. № 660 «Об изменении постановлений Совета Министров Республики Беларусь» – Pravo.by](#)

<sup>37</sup> [Расследование несчастных случаев по новым правилам - БЕЛОРУССКИЙ ПРОФЕССИОНАЛЬНЫЙ СОЮЗ РАБОТНИКОВ СВЯЗИ](#)

<sup>38</sup> [Замминистра труда и соцзащиты — об основных трендах профилактики производственного травматизма | Навіны | Беларуская версія](#)

<sup>39</sup> [Республиканская акция «Снижай риски»](#)



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2025, the positive trend of declining HIV incidence continued. In the first six months of 2025, 578 new HIV cases were registered in Belarus – 7.4% fewer than in the same period of 2024<sup>40</sup>. As of 1 July 2025, 25,800 persons with HIV were living in the country, of whom approximately 83% had an undetectable viral load thanks to antiretroviral therapy, meaning a zero risk of sexual transmission of the virus to partners.

At the same time, the funding of HIV information and prevention programs in 2025 was significantly reduced in connection with the freeze on Global Fund grants following decisions by the US administration. Printed materials, educational events, and a significant portion of prevention programs were curtailed.

Experts noted that the active rhetoric of state bodies against vaping is built on the manipulation of data: vaping is presented as more dangerous than cigarettes and useless as a smoking cessation tool, contrary to the international scientific consensus.<sup>41</sup> Experts characterize this as the protection of the state tobacco market's interests rather than evidence-based policy.

#### • **Medical Care and Nursing Care in the Event of Illness**

In 2025, a number of regulatory acts governing the procedure for the provision of medical care were adopted. In June 2025, the Ministry of Health approved an instruction on the organization of care in the event of mass casualties with traumatic injuries.<sup>42</sup> In October 2025, the medical indications and contraindications for the provision of medico-social and palliative care were updated.<sup>43</sup> Amendments to the Law "On Healthcare"<sup>44</sup> clarified, in particular, the procedure for the application of biomedical cell products and enshrined the possibility of providing – at the expense of the national or local budgets – certain categories of patients with oncological, orphan, and other diseases with medicinal products not included in the National Formulary of Medicinal Products.

In the view of experts, the rhetoric concerning the introduction of fee-based medical care for citizens who have left Belarus is intensifying. Although the relevant legislation had not been adopted as of the end of 2025, public statements by officials in 2025 create a discriminatory narrative with respect to a specific group of citizens in the context of equal access to medical care.

#### **Medical Care for Persons Deprived of Liberty**

A range of problems relating to the right to health persisted in the penitentiary system, particularly with respect to political prisoners. According to data from the Human Rights Center "Viasna," as of the end of 2025, a minimum of 164 political prisoners were in a particularly vulnerable condition. Among

<sup>40</sup> [В Беларуси продолжает снижаться число новых случаев ВИЧ – узнали подробности](#)

<sup>41</sup> [https://t.me/belhalat\\_by/9352](https://t.me/belhalat_by/9352)

<sup>42</sup> [Постановление Министерства здравоохранения Республики Беларусь от 30.06.2025 г. № 62 «Об оказании медицинской помощи при массовом поступлении пациентов с травмами» – Pravo.by](#)

<sup>43</sup> [Постановление Министерства здравоохранения Республики Беларусь от 25.09.2025 г. № 119 «Об изменении постановления Министерства здравоохранения Республики Беларусь от 24 декабря 2014 г. № 107» – Pravo.by](#)

<sup>44</sup> [Об изменении Закона Республики Беларусь «О здравоохранении»](#)



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them: at least 56 individuals in a serious physical health condition, 7 with disabilities, 26 elderly persons over the age of 60 (many of whom have serious health problems), and 10 individuals with mental disorders.<sup>45</sup>

In 2025, the deaths in places of deprivation of liberty of at least two political prisoners were documented: A.Podnebenny<sup>46</sup> and V.Shtermer.<sup>47</sup>

In connection with the waves of releases of political prisoners, additional testimonies came to light in 2025 to the effect that prison medicine frequently functions not as a mechanism of assistance but as part of humiliation and punishment; examples cited included examinations conducted without privacy and the inaccessibility of care adapted to the needs of women.<sup>48</sup> The Human Rights Center "Viasna" documented numerous violations of the right to health in places of deprivation of liberty: 70-year-old Vatslau Aroshka has a number of illnesses, including eye problems that put him at risk of blindness. He has been sentenced to 8 years in a penal colony. 64-year-old activist Uladzimir Hundar is a person with a second-category disability with one leg amputated. In the remand prison, he was not permitted to keep his prosthesis and was not provided with necessary medications: his high blood pressure provoked a hypertensive crisis.<sup>49</sup>

Also in 2025, human rights defenders are becoming aware of a growing number of cases in which Belarusians persecuted on political grounds die shortly after release. In August 2025, it became known that a 66-year-old woman with cancer died several weeks after spending one day in the Brest temporary detention facility. According to "Viasna," she had been detained upon returning to Belarus for "likes" on social media. Three days later she was fined and released.<sup>50</sup>

The systemic nature of the problem is underscored by independent analysts: the draft Code "On Healthcare" contains no effective mechanism for upholding prisoners' right to medical care. Prison medicine is becoming increasingly removed from the sphere of influence of the Ministry of Health and is in practice turning into an isolated "island," severed from the healthcare system.<sup>51</sup>

Responding to documented violations, a group of UN Special Rapporteurs – including the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health – called in May 2025 on the Belarusian authorities to immediately consider the release of political prisoners with illnesses and disabilities.<sup>52</sup>

<sup>45</sup> [Human rights situation in Belarus in 2025](#)

<sup>46</sup> [Andrei Padniabenny – Political prisoners and repressed in Belarus](#)

<sup>47</sup> [Valiantsin Shtermer – Political prisoners and repressed in Belarus](#)

<sup>48</sup> [Три истории о белорусской тюремной медицине - Салідарнасць](#)

<sup>49</sup> ["Я, наверное, просто умру здесь": кто из политзаключённых подвержен особому риску за решёткой](#)

<sup>50</sup> [Как беларусы умирают из-за политического преследования](#)

<sup>51</sup> [Тюремная медицина в Беларуси: «Осужденным приходится добиваться даже обычных осмотров»](#)

<sup>52</sup> [Experts urge Belarus to release political prisoners with disabilities and serious health conditions | OHCHR](#)



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Amendments introduced by Resolution of the Ministry of Health No. 119 of 25 September 2025<sup>53</sup> updated the list of medical indications and contraindications for the provision of medico-social and **palliative care**. The document introduces a clear distinction in the procedure of care in nursing hospitals (bolnitsy sestrinskogo ukhoda, BSU) and palliative care units: BSUs are designated strictly for temporary round-the-clock observation of patients with chronic diseases; if a patient requires not temporary but permanent observation (and does not need intensive care or resuscitation), they are now officially to be transferred to palliative care units. The provision of palliative care is now strictly linked to clinical protocols and officially approved methods of care delivery. Nevertheless, experts noted that in practice the availability of palliative care has not improved. Access to home-based palliative care is extremely limited, and in a number of regions (Homiel Region being an example) access to nursing hospital units is in practice impossible for patients with certain diagnoses.

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<sup>53</sup> [Постановление Министерства здравоохранения Республики Беларусь от 25.09.2025 г. № 119 «Об изменении постановления Министерства здравоохранения Республики Беларусь от 24 декабря 2014 г. № 107» – Pravo.by](#)



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