In the Tidö agreement between the parties which form the basis for the Swedish Government, the stated purposes of the proposed changes to health care include increasing access, improving efficiency and equality in health care as well as improving working conditions. At the same time, some proposed measures will lead to significant negative impacts for people without residence permits (asylum seekers and undocumented migrants). In practice, it is proposed that the right to emergency dental care and dental care that cannot wait be abolished for patients who are seeking asylum or are undocumented migrants, which will lead to increased morbidity rates and suffering. Restrictions on the right to an interpreter are also proposed for people with residence permits, which risks leading to increased medical risks. Another proposal is a duty to report undocumented migrants to the Migration Agency and the Police Authority, and there is no guarantee that health care staff will be exempted from this notification requirement. Introducing such a notification requirement could entail a risk that fewer people will dare to seek treatment for serious conditions, for themselves or their children. If the Government decides to put these proposals into practice, the health and lives of people who are already vulnerable risk becoming even worse, while the opportunities for health care professionals to provide health care based on ethics and patient safety will be severely limited.

The United Nations Universal Declaration of Human Rights states that all human beings are born free and equal in dignity and rights. Under The United Nations Convention on the Rights of the Child, no child should be deprived of their right of access to health care services.

The United Nations International Covenant on Economic, Social and Cultural Rights also states that its parties, which include Sweden, recognise the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. The universal right to health without discrimination is one of the fundamental human rights.

All health care professions have clear ethical codes and guidelines, based on international declarations, developed in order to guide health care staff in providing health care to high ethical standards. Their point of departure is that the primary goal for health care staff should be the patient’s health, while never deviating from the principal that all human beings are equal. Every patient, without discrimination, should also have the right to appropriate treatment, and health care staff have a duty to provide health care regardless of the legal status of the patient.

Human rights and professional ethics in health care have been developed based on experiences in which the lack of such guidelines have led to serious abuse, including within health care, towards marginalised and vulnerable groups. There are tragic examples of this within our own country.

Hence, the health care professions are of the view that the following principles should guide health care staff in their treatment of every human being, without exception. This includes asylum seekers and undocumented migrants.

- The role of health care staff is to provide health care, treatment, care and rehabilitation to every patient on the same terms.
- The assessment of health care staff should be based on each patient’s needs, on science and best practice, without discrimination.
- The legal status of the patient should not affect health care staff when deciding whether or not to provide treatment, and which treatment to provide.
- Patient confidentiality applies to every patient on the same terms.
- Every patient has the right to information which they can understand and which is adapted to their needs and prerequisites.

Several of the international organisations for health care professionals urge health care staff to take a stand against people being refused health care because of citizenship or legal status, and to provide support for everyone’s right to health care based on their needs.
The proposals in the Tidö agreement detailed above risk leading to an increase in medical risks because of a reduction in the use of interpreters, the risk of patients avoiding health care and instead seeking medication and treatment through non-professional channels, seeking health care too late or using borrowed identities, as well as a risk of an increased spread of disease. If these proposals are implemented, they will not only lead to infringements of human rights and reductions in health for some of the most vulnerable groups in Sweden, but also to a risk of reductions in public health through the proposals for changes to migration and integration policies. The proposals contradict professional ethical codes and the ethical guidelines which have been determined and practised by the health care profession’s organisations for years. If the Government puts them into practice, they will also put large groups of professionals who are already under severe pressure under aggravated ethical stress and working conditions in their professional activities.

Adopted in March 2023.

THE RIGHT TO HEALTH CARE ON EQUAL TERMS MUST NOT BE ERODED


VI STÖTTAR VÅRDEN I DETTA:
Caritas Sweden, Center for Support and Treatment at Save the Children Sweden, HMR The Swedish Association for Health and Human Rights, The Rosengrenska Foundation, Alsike monastery, Positivhiva Grupper, The Trade Union Center for Undocumented Migrants, Swedish Refugee Law Center, SKAIS.

More signatories may be added over time and will be published on the website vardforpappendlaosa.org

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