

situation in Russia, according to which a deficit of dietary nutrients recorded in the diet of the population. Besides, institutional changes have brought to the loss of food determinacy.

1. Tambovtsev V.L., Kapoguzov E.A. Reforms of public administration: theoretical basis and practical implementation. M. TEIS-Publ., 2010 (In Russian)
2. Kapoguzov E.A., Chupin R.I. Social control in the field of food quality in Russia: theory and practice of self-regulation // Journal of Economic Regulation. 2016.V. 7. No. 2. P. 38-48. (In Russian).
3. Malkina M.Yu. Institutional framework for reducing the quality of goods and services in a market economy (answer to I. V. Rozmainsky) // Journal of institutional studies. - 2014. - No. 4. - C. 77-97. (In Russian).
4. Usenko N.I., Poznyakovsky V.M., Otmakhova Yu.S. Palm Paradise or Palm Octopus? Modern trends and threats of the food market // EKO. - 2014. - No. 9. - S. 135-152. (In Russian).
5. Khurshudyan S.A. Falsified food products: classification and definitions // Pishchevaya promyshlennost'. - 2008. - No. 10. - p. 86-86. (In Russian).
6. Dubrovskaya Yu.V., Chupin R.I. Transaction costs of rational nutrition: a comparison of neoclassical and institutional approaches // Aktual'nyye problemy ekonomiki i prava. - 2013. - No. 1 (25). - p. 68-74. (In Russian).
7. Usenko N.I., Yakovleva L.A., Otmakhova Yu.S. Information asymmetry and features of consumer behavior in the dairy market // Tekhnika i tekhnologiya pishchevykh proizvodstv. - 2016. - No. 2 (41). - p. 156-163. (In Russian).
8. Barsukova S.Yu. Domestic food market: how and in whose interests is import-export policy carried out // Mir Rossii. - 2010. - No. 2. - p. 148-167. (In Russian).
9. Shagayda N.I., Uzun V.Ya., Shishkina E.A. How food flows have changed under the embargo // Operativnyy monitoring ekonomicheskoy situatsii v Rossii. Tendentsii i vyzovy sotsial'no-ekonomicheskogo razvitiya. - 2016. - No. 6 (24). - p. 18-23 (In Russian).
10. Kapoguzov EA, Chupin R.I. Technical regulation of food quality: theoretical foundations in the context of the neoinstitutional approach and Russian experience // Gosudarstvennoye upravleniye i gosudarstvennaya sluzhba - 2014. - No. 4. - p. 109-122. (In Russian).
11. Usenko N.I., Otmakhova Yu.S., Poznyakovsky V.M. Structural and qualitative transformations in the bread market // EKO. - 2016. - No. 1. - p. 109-124. (In Russian).

## **CHILD RIGHTS IN HEALTH**

**Marina Dorofeeva**

VSU named after P.M. Masherov, Vitebsk, Belarus

The content and scope of human rights and freedoms in different historical periods were not the same. However, in the first constitutional acts the idea arose that people from birth are given equal rights and freedoms, as well as a number of natural inalienable rights.

The relevance of the topic lies in the fact that the right to life is the fundamental significant right of every person who belongs to him from birth. And no one can be deprived of it, since this right is protected by law and the state.

The purpose of this article is to analyze and identify the features of the legal regulation of the rights of the child in the field of health.

**Material and methods.** The scientific and theoretical basis is the normative legal acts in the field of health care, the works of constitutional scientists, considering the legal regulation of the rights of the child in the field of health care. When writing the article, the method of analysis of theoretical and legal views was used. The analysis method is used in conjunction with the synthesis method, which made it possible to combine various points of view and identify the features of securing the rights of the child in the field of healthcare.

**Findings and their discussion.** The state guarantees the right to life, and also protects a person's life from any illegal encroachment, and this issue is considered not only in the framework of internal jurisprudence, but also at the international level.

At present, vigilant attention is being paid to the rights and freedoms of children, both in terms of their consolidation in the legislation and in matters of their implementation. Over the past decade, a new state policy on children has been formed in the Republic of Belarus, which was built taking into account the post-industrial technogenic positions of the world community and in accordance with international treaties and acts.

The right to life, as well as subsequent rights of children, depends not only on its consolidation in legislative acts. Its implementation depends on a huge number of factors, both legal and social, and economic. The protection of the health of mothers and children is a priority dominant area in the field of healthcare of the Republic of Belarus. Tasks that are addressed to protect children's health are set at the state level and carried out in accordance with the Constitution of the Republic of Belarus, the Law of the Republic of Belarus "On Health Care", the Law of the Republic of Belarus "On the Rights of the Child", and the Code of the Republic of Belarus on Marriage and Family and other normative legal acts.

In accordance with programs such as: The Presidential Program "Children of Belarus" for 2006-2010, the Health Development Program for 20016–2020 and others, differentiated measures aimed at improving the health of children, reducing the growth of disease and mortality. Article 184 of the Code of the Republic of Belarus on marriage and the family stipulates that children have the right to live in peaceful, as well as safe and dignified conditions. Also, article 5 of the Law of the Republic of Belarus "On the Rights of the Child" stipulates that the child has the right to protection as well as health promotion, and the state creates appropriate conditions for this. Children are provided with medicines according to prescriptions of treating doctors free of charge in the manner prescribed by law. In order for this stated right to be realized, we need a whole mechanism, which is built into the subsequent system.

The child's right to protection and promotion of health includes, first of all, affordable medical care, which is ensured through the provision of free medical care on the basis of state minimum social standards in the field of public health in public health institutions; the availability of medicines and their free

provision under certain conditions; the implementation of measures for the sanitary-epidemiological well-being of the population and others. In the Republic of Belarus, perinatal care is created in the form of a multilevel system. The fundamental principle is the modern and high-quality medical care for a pregnant woman and a newborn child at the very level where the necessary conditions are created for the maximum preservation of the life and health of the woman and the child. Also, the adoption of standards ensuring the legal consolidation of surrogate motherhood can also be combined with guaranteeing the right of the child to life. In 2019, it is planned to clarify and expand the scope of regulation of the Law of the Republic of Belarus “On Assistive Reproductive Technologies”.

The totality of microsystems, combined into a holistic health care system, sets itself certain tasks: accessibility, phasing and continuity using innovative advanced technologies; the provision of qualified assistance by highly qualified specialists in the field of medicine; creation of a modern consultative base for women with gynecological pathology and others. Belarus is among the ten countries in Europe with the highest percentage of child survival.

Violations of the rights of the child, as well as non-observance of these rights in the field of healthcare or lack of attention to them, can have serious consequences for the health of children. Explicit or latent discrimination of children's rights in health care and by health workers, parents, and legal representatives can become a barrier to access to full-fledged medical services and affects their quality. The right to health does not exist separately from other rights, such as the right to food, or the prohibition of torture and non-humane or degrading treatment. “An improvement in compliance with a single right contributes to improvements in compliance with other rights. Similarly, a deterioration in the observance of any one right negatively affects the observance of other rights” [2].

**Conclusion.** Thus, we can conclude that all measures that set specific goals, together, allow you to achieve certain results. According to official statistics, Belarus belongs to countries with a low level of child mortality. And this level reflects not only the influence of biological risk factors on mortality, but also the level of their social well-being. Thanks to the implementation of health programs that the state sets for itself, the country's right to life is ensured quite high in the country, and subsequently other rights enshrined in law. After analyzing the regulatory legal acts, we came to the conclusion that the Republic of Belarus does not infringe on the rights of the child, both at the legislative and social levels in the health sector. The state fully implements both intra-state and ratified international standards [1].

1. Belyakovich, N.N. Human rights and freedoms: a practical aid / N.N. Belyakovich. – Minsk: INR, 2001. – 547 p.
2. The Charter (Constitution) of the World Health Organization (WHO). Adopted in New York on 07.22.1946, as amended. from 05.24.1973 / [Electronic resource]. Access mode: [http://www.un.org/en/documents/decl\\_conv/conventions/childcon](http://www.un.org/en/documents/decl_conv/conventions/childcon) – Date of access: 02.11.2019.