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LEGAL REGULATION OF MEDICAL SECRECY IN THE REPUBLIC OF BELARUS AND FOREIGN COUNTRIES: COMPARATIVE LEGAL ANALYSIS

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The problem of medical secrecy is one of the most pressing. This is due to the fact that ensuring privacy is one of the significant factors for a full and convenient citizen's existence in society. However, the legal regulation of system that protects the privacy of citizens from outside interference is complicated by the fact that each person determines for himself which aspects of his life constitute a personal secrecy. The need for protection personal information, in particular information about health, from disclosure is universally recognized. Among these, first of all, it is necessary to name the information constituting a medical secrecy.

The aim of this work is an objective and comprehensive study of the characteristics of the institution of medical confidentiality in the Republic of Belarus and foreign countries. A research of the legislation of several countries will allow a deeper study of the issue, find possible solutions to existing problems, and eliminate gaps in the legislation.

Material and methods. When studying this issue, the following sources were of particular importance: The Law of the Republic of Belarus "On Health Care", Health Insurance Portability and Accountability Act of 1996 of the USA, Personal Information Protection and Electronic Documents Act of 2000 of Canada, etc. Formal legal and comparative methods were used in the writing of the work.

Finding sand their discussion. The legislative basis of medical secrecy comes from Art. 28 of the Constitution of the Republic of Belarus, which states: "everyone has the right to protection against unlawful interference in his personal life" [1]. It should be noted that information about the health of a citizen is of a personal nature, and therefore medical confidentiality should be identified as an primary part of personal secrecy – information concerning only one person and kept from other people, except the person's public and service activities. On the basis of which, a special procedure for its disclosure and use is established [2].

The main legal act in Belarus establishing the protection of medical confidentiality is the Law "On Health Care": Art. 46 determines what information relates to medical secrecy, subjects of medical secrecy, their rights and obligations,

the procedure for providing data on the patient's health status [3]. It attributes medical secrecy to the basic principles of public health and defines the circumstances in which information is allowed to be passed on to other citizens, officials with the consent of the citizen or its legal representative, and without such consent.

Secrecy of data regarding health status is also guaranteed by Art. 18 of the Law "On Information, Informatization and Protection of Information", which prohibits (with the exception of cases) the processing, collection, storage, use of such data [4].

There is no definition of medical secrecy in the legislation of Belarus. The law defines it by listing the information that makes up its contents. So, medical secrecy in accordance with Part 6 of Art. 46 of the Law "On Health Care" compiles information about the fact of a need for medical care, health condition of the person, a disease and diagnosis, possible methods of medical care, the risks of medical intervention, possible alternatives to the proposed medical treatment, and the results of pathoanatomical research [3]. The list is open, allowing recognition as medical secrecy and other information, including personal information obtained in the provision of medical care to the patient. Information about the use of assisted reproductive technologies, about the personality of the patient and the donor also constitute a medical secrecy [part. 1 article. 8-9, 5]. According to Part 2 of Art. 20 of the Law "On the provision of psychiatric care", medical secrecy includes: information about the fact of the request for mental health care and the mental health status, information about a mental disease, diagnosis, other information, including personal nature obtained during the provision of mental health care [6].

Not only medical and pharmaceutical workers have the obligation to maintain medical secrecy, but people who become aware of information constituting medical secrecy have the same obligation [4]. For example, students of medical universities and colleges who practice at medical institutions, and employees of the registry. It should be noted that the discussion by the attending physician of information on the treatment with any doctors, nurses directly related to the care of the patient is not recognized as a violation of confidentiality. And patient consent is not implied [4].

Analyzing the legislation of foreign countries, we will pay attention to the experience of the United States. In the United States, the primary legal act governing the area under study is the 1996 Health Insurance Portability and Accountability Act (HIPAA). The Act is the minimum standard at the federal level that establishes the confidentiality of patient information, cases of use and disclosure of medical secrets, and also provides for civil and criminal liability for illegal use of information. This Act is crucial, since before its adoption only certain groups of people were protected from illegal dissemination of information, for example, HIV-infected people. The Act establishes a period of 50 years after death, during which the protection of patient information is in force [7]. According to the Act, dissemination of information is possible during

a state of emergency. This was the case with Hurricane Harvey in 2017 [8]. Many states have passed their own laws protecting medical confidentiality.

Medical secrecy in Canada is guaranteed both at the federal and local levels. The Act establishes requirements for the information gathering, use and protection of information by medical professionals. The main document in this area is Personal Information Protection and Electronic Documents Act (PIPEDA) [9]. PIPEDA is comparable to HIPAA in the USA, discussed above, but there are a number of differences. In the United States, the Act regulates the confidentiality of medical confidentiality only for health care providers, medical insurers, and medical information exchange organizations. In Canada, PIPEDA applies to all medical confidential information, regardless of organization. The provincial privacy commissions play an important role in protecting the rights of patients.

Conclusion. Thus, it must be emphasized that the preservation of medical secrecy is an important moral obligation of every medical worker. Heads of medical institutions, in turn, should be aware of the need to preserve information that is legally classified as medical secrecy, and the grounds that provide a legal right to disclosure, because illegal disclosure this information is a sign of professional unfitness. In this regard, the legislator in the Republic of Belarus needs to develop a more precise concept of medical secrecy, as well as to define a time frame setting a time limit for which information should not be disclosed. To solve these problems, it is necessary to analyze the legislation, on sacred issues of medical secrecy, including the legislation of foreign countries. In turn, the improvement of a unified electronic database of all patients, the creation of recommendations for medical workers and institutions dealing with the protection of confidential patient information, including medical information, is required.

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FIGHT AGAINST CORRUPTION IN THE EU

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Corruption is an urgent problem for many countries, but it is often hidden, which makes it difficult to identify the affected areas and consequences. Corruption is a constant phenomenon in society and it takes place in all countries and periods of development of civilization, but only in the last 20 years this phenomenon began to be seriously studied.

The relevance of the topic is that corruption has many different forms, as well as many different effects that affect both the economy and society as a whole.

The purpose of this article is to consider and identify the features of the fight against corruption in the European Union.

Material and methods. The scientific and theoretical basis is the statistics published by the international organization against corruption - Transparency International. Also, EU anti-corruption reports and anti-corruption normative legal acts. 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 allowed us to examine in more detail the EU legal framework in this area.

Findings and their discussion. The fight against corruption is carried out not only in individual EU countries, but throughout Europe as a whole, with each year the EU government is increasingly improving the legal framework in this area.

First of all, we will define what corruption is. Transparency International, a non-governmental international organization for the fight against corruption and the study of corruption levels worldwide, gives the following definition: corruption is the abuse of trusted power for personal gain, which can be classified as large, small, and political, depending on the amount lost and the sector in which it occurs [1].

The EU Treaty recognizes corruption as a “crime against the euro,” and ranked it as a particularly serious crime, having a Euroregional space. With the adoption of the Stockholm program, the European Commission received a