



**Ministry of Health and Social Affairs**  
Division for Public Health and Health Care

## Resolution 33/18: “Preventable maternal mortality and morbidity and human rights”

A human rights-based approach is a conceptual framework for the process of human development that is normatively based on international human rights standards and operationally directed to promoting and protecting human rights. It seeks to analyze inequalities which lie at the heart of development problems and redress discriminatory practices and unjust distributions of power that impede development progress.

The goal of health policy in Sweden is to offer the population a well-adapted and effective healthcare system. Such care should be equal and accessible. Equal care means that everyone is offered care based on needs, on equal terms and with good treatment regardless of sex, gender identity, gender expressions, sexual orientation, ethnicity, religion or other beliefs, disability, age, place of residence, education and economics. That women and men, girls and boys should have the same conditions for good health as well as being offered care on equal terms is one of the gender equality policy goals in Sweden and an extension of the overall gender equality policy goal, that women and men should have the same power to shape society and their own lives.

In Sweden, the county councils and, to some extent, the municipalities have the main responsibility for the planning, financing, organization and implementation of health care. The state is responsible for promoting and providing health service with good conditions in the broadest sense and to define overall health policy through legislation and agreements with the county councils.

Swedish healthcare is good in many ways, with generally high quality. However, there is a need for continuous development and there are challenges that need to be met. This is also the case for childbirth and maternal care, for example in terms of skills supply, availability and structure. Many county councils have difficulty recruiting and retaining staff with the required skills.

The Swedish Government has made a number of investments to support maternal health care. The Government and the Swedish Municipalities and Local Authorities (SKL) have concluded several agreements to improve childbirth care and women's health in general. From 2015–2022 the Government will distribute a total of SEK 7,3 billion to the county councils. In order to benefit from the funds provided by the agreements, the county council shall take steps to strengthen, first and foremost, the provision of skills, including staff. The efforts should create better conditions for increased accessibility, quality and patient safety and a better working environment for maternity care workers.

During the term of the agreement, the county councils have begun the efforts they chosen as most useful and appropriate to achieve the objectives of the agreement. SKL has also done a survey of identified improvement areas and submitted two reports to the Ministry of Health and Social Affairs in June 2016. In childbirth care, all county councils invested funds to train existing staff.

Regarding primary care interventions, county councils reported various efforts. All county councils have reported at least one intervention aimed at socio-economically vulnerable areas. A majority of the county councils have made efforts aimed at foreign-born women. Other interventions are mental health education among women, follow-up and care for women suffering from pelvic injury after childbirth, health promotion measures in reproductive health such as facilitating medical abortions, increased primary care staffing and treatment of endometriosis and efforts to reduce overweight in women.

In addition to the childbirth care investments, the Government has commissioned the National Board of Health and Welfare for an assignment concerning maternal healthcare. One of the aims of the assignment is to gather deficiencies and opportunities for development concerning for

example knowledge deficiencies, the influence of socio-economic factors and the follow-up care after childbirth.