Refugee’s Rights to HIV/AIDS Healthcare in Korea under the UNAIDS Guidelines

Sunjoo Kang* & Younjoo Kim** & Insook Kim***

HIV/AIDS is an important global issue in human rights and health. The United Nations Refugee Convention clearly addresses to guarantee healthcare rights to refugees at the same level as those provided to citizens. In Korea, the number of refugee applicants has surged since the enactment of the Refugee Act in 2012. Regarding human dignity and human rights, however, there are serious concerns that Korea’s healthcare laws and policies would not fully protect the right of foreigners who are suffering from financial hardship. This paper proposes the ways to improve healthcare equity by comparing the UNAIDS Guidelines to Korean policies on HIV-positive refugee applicants.

Keywords
Refugees, HIV/AIDS, Healthcare, Korea, UNAIDS Guideline 6, Global Health Security, WHO

* Professor at the Department of Nursing of Cheju Halla University. LL.B./MSN(Yonsei), LL.M./Ph.D. in Law (Daejeon Univ.). She may be contacted at: ksj5139@chu.ac.kr. This article is a fully revised and updated version of the paper presented at the Annual Conference of the Korea Association of Medical Law (Discrimination Issue of Medical Care) held in Seoul, Korea on June 3, 2017.

** Vice-director at Daegu Center for Infectious Diseases Control and Prevention and former counselling nurse for hospital based counselling service for people living with HIV at Kyungpook National University Hospital. She may be contacted at: fieldhappy@naver.com

*** Professor at College of Nursing, Mo-Im Kim Nursing Research Institute, Yonsei University; Senior Fellow at the Department of Medical Law and Ethics, Graduate School of Yonsei University Seoul, Korea. Ph.D.(Yonsei). She may be contacted at: iskim@yuhs.ac.kr

DOI: http://dx.doi.org/10.14330/jeail.2017.10.2.10
1. Introduction

Maria Hoffman\(^1\) is a 36-year-old married woman who entered Korea with her husband and applied for refugee status. While undergoing a medical check-up during the refugee application process, she was confirmed HIV-positive, and the test center reported the results to the local public health center. The public health center referred Maria to a local non-governmental organization (“NGO”), because Korea’s National Health Insurance System does not cover refugee applicants. When Maria wanted medical services, she should visit the NGO and then a local public medical center for treatment with a nurse. In case of HIV/AIDS, after a two-day and one-night inpatient stay, three outpatient treatment sessions would be available to her until she is readmitted to the hospital. Maria also needed gynecological treatment, but she was reluctant to visit the hospital because she had heard that refugee applicants were charged 10 percent of the treatment costs incurred at medical institutions. She was also informed that NGOs have difficulty in funding foreign workers’ healthcare services at the end of the year because they ran out of money. Although the nurse at the NGO told that the organization would cover her costs even if she could not afford the 10 percent of the total cost, and that they expected to receive charitable donations that year so that the treatments would not be interrupted. Maria felt burdened by receiving the medical services because she was financially strained. An experienced NGO nurse stated:

I have never seen any of the visitors to my office as refugee applicants [become] recognized refugee, but after they are not approved, most of them went back to their home except some who stayed with illegal residence. I understand their situation and Korea’s government policy, but, rather than imposing burdensome costs on financially challenged refugees and illegal immigrants, necessary HIV/AIDS treatment and adequate general medical care should be offered to them similar to the medical and human rights practices of developed countries.\(^2\)

During the 1980s, HIV diagnoses were equivalent to death sentences. Currently, however, medical progress allows us to preserve life through antiretroviral treatments. As HIV/AIDS, along with tuberculosis and malaria, is a threat to global health

---

\(^1\) Maria Hoffman (pseudo name) is a refugee applicant with HIV-positive who entered Korea from South Africa. She had personal interview with a NGO nurse on September 1, 2017.

\(^2\) Personal interview on September 1, 2017.