Coronavirus COVID-19 outbreak in the EU
Fundamental Rights Implications

Country: Finland
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1. Measures taken by government/public authorities

The Ministry of Social Affairs and Health is responsible for providing general planning, guidance and supervision regarding infectious diseases. Their prevention as well as use of restrictive measures, such as isolation and quarantine, is regulated in the Communicable Diseases Act (tartuntatautilaki/Lag om smittsamma sjukdomar, Act No. 1227/2016) and in the Government Decree on Communicable Diseases (Decree No. 146/2017). The National Institute for Health and Welfare (THL) is responsible for planning and monitoring the necessary measures and for provision of information and guidance to the authorities and the general public. The supervision of the legality of the measures lies with Regional Authorities at the local and regional level and the National Supervisory Authority for Welfare and Health (Valvira) at the national level.

The first laboratory confirmed coronavirus infection was detected in Finland on 30 January 2020. The epidemic stage has not been reached yet, officially, the number of confirmed infections standing at 700 as of 23 March 2020. According to THL, however, the actual number may be 20–30 times higher, which would mean that there is an epidemic.

On 4 March 2020, the Ministry for Social Affairs and Health issued guidelines for municipalities and health care district on preparations for the coronavirus (Kuntainfo 1/2020).

At the early stages of the outbreak, where only isolated cases of infections had been identified, the main measures to curb the spread of the virus comprised of ordering infected and predisposed individuals to stay in quarantine or self-quarantine, affecting their freedom of movement and freedom of assembly, in the first hand. Several schools, where infections had been identified, were temporarily shut down and pupils asked to stay at home impacting their right to receive education and potentially and indirectly also their parents’ right to work. Decisions ordering people into quarantine need to be taken by a physician in charge of infectious disease response for the municipality or hospital district (Section 60 of the Communicable Diseases Act) and in those cases, the persons subjected to them have a right to a special communicable diseases allowance in accordance with Section 82 of the Communicable Diseases Act, which is paid by the Social Insurance Institution of Finland (Kela, please see below). On 12 March, the government issued its first recommendations and preparedness measures. All gatherings of more than 500 people were recommended to be cancelled until the end of May. Employees were recommended to work remotely, if possible, and employees returning from areas affected by the epidemic to work from home for a period of two weeks. Non-essential work-related travel and holiday travel was advised to be postponed. These measures were widely

1 Finland, Communicable Diseases Act (Tartuntatautilaki/Lag om smittsamma sjukdomar, 1227/2016), Valtioneuvoston asetus tartuntataudeista 146/2017.
2 Finnish Institute for Health and Welfare (Terveyn ja hyvinvoinnin laitos/Institutet för hälsa och välfärd).
3 Finnish Institute for Health and Welfare, The first 2019-nCoV infection has been detected in Finland, press release, 30 January 2020.
5 Finland, Ministry for Social Affairs and Health (sosiaali- ja terveysministeriö/social- och hälsovårdsministeriet) Koronatilanteeseen varautuminen kunnissa ja sairaanhoitopiireissä, Kuntainfo 1/2020
6 Media source: Finnish Broadcasting Company (Yleisradio/Rundradion), ‘Why are Finland’s coronavirus cases being quarantined at home?’, news release, 7 March 2020.
7 Media source: Finnish Broadcasting Company (Yleisradio/Rundradion), ‘Why are Finland’s coronavirus cases being quarantined at home?’, news release, 7 March 2020.
8 For the effect of the situation on Kela benefits, please see institution’s coronavirus updates.
welcomed, since repeated demands had been voiced by individual experts and the general public for weeks calling for more information and stricter measures and criticising the government for non-action and a wait-and-see policy. The prime minister, although still refuting the opposition’s demand to declare a state of emergency, convened parliamentary groups to discuss their preparedness to resort to emergency legislation.

On 16 March 2020, the government together with the president of the republic declared a state of emergency\(^ 11\), which is a precondition for passing emergency legislation according to Section 6(1) of the Emergency Powers Act (valmiuslaki/beredskapslagen, Act No. 1552/2011, please see further below).

The same day, the government published a 19 point list of policy recommendations affecting, in particular, freedom of movement and assembly, right to education and cultural rights.\(^ 12\) School premises were to be closed and contact teaching suspended, except for children in grades 1–3 whose parents work in sectors critical to the functioning of society. Also university premises were to be closed, but teaching to continue using digital methods. Day care centres were to remain in operation to safeguard the care of children whose parents work in key professions, such as health care, the police etc., but children were recommended to stay at home, when possible. Gatherings of more than ten people were banned and museums, theatres, libraries, hobby facilities etc. closed. Third sector organisations and religious congregations were recommended to do the same. Persons over 70 years of age were asked to stay at home, and not to meet other people. Restrictions on cross-border traffic at Finland’s borders would be made, some border-crossing points were to be closed and border controls were to be reintroduced.\(^ 13\) On 17 March, the Government submitted two enforcement decrees concerning the application of powers under the Emergency Powers Act (valmiuslaki/beredskapslagen, Act No. 1552/2011) to Parliament.\(^ 14\) According to section 23 of the Constitution (Suomen perustuslaki/Finnland grundlag, Act No. 731/1999, as amended by Act No. 1112/2011) “such provisional exceptions to fundamental rights and freedoms that are compatible with Finland’s international human rights obligations and that are deemed necessary in the case of an armed attack against Finland or in the event of other situations of emergency, as provided by an Act, which pose a serious threat to the nation may be provided by an Act or by a Government Decree to be issued on the basis of authorisation given in an Act for a special reason and subject to a precisely circumscribed scope of application”.\(^ 15\)

The first decree (No. 124/2020) concerned the use of powers laid down in section 87 of the Act, according to which the sale of medicines, goods and services used in healthcare services may be

\(^{11}\) Finland, Finnish Government, Declaration of state of emergency (Poikkeusolojen toteaminen), agenda item, Government decision VNK/2020/31, [the decision itself is not a public document], and Finnish government, ‘Government, in cooperation with the President of the Republic, declares a state of emergency in Finland over coronavirus outbreak’, press release, 16 March 2020.


\(^{13}\) Finland, Finnish government, ‘Finland will restrict cross-border traffic - retired border guards and police officers may be called back to work’, press release 17 March 2020.


\(^{15}\) Finland, Constitution of Finland, Act No. 731/1999.
restricted in the whole country. The second decree (No. 125/2020) specified the application of powers laid down in sections 86, 88, 93–95 and 109 of the Emergency Powers Act\(^\text{17}\): Section 86 containing provisions on the functioning of healthcare and social welfare units, section 88 on healthcare and social welfare services and health protection, section 93 on derogations from the terms and conditions of employment relationships, section 94 on restricting the right concerning dismissal, section 95 on the obligation to work, and section 109 on the provision or suspension of instruction and education. This decree took effect on 18 March 2020. Both decrees will remain in force until 13 April 2020.

The Constitutional Law Committee approved the decrees on 19 March, with one exception of a technical nature, and the Parliament the same day.\(^\text{18}\) Application of the emergency powers was based on Section 3(5) of the Emergency Powers Act (valtiuslaki/beredskapslagen, Act No. 1552/2011) which refers to exceptional circumstances due to a particularly serious major accident or a widespread infectious disease. The original proposal to base the powers also on the severely deteriorated economic situation, in accordance with Section 3(3) of the Act was withdrawn.\(^\text{19}\) The Government has later declared the state of emergency also based on this subsection 3(3) but has not todate enacted any provisions on this basis. Also the time table for passing the decrees was criticised both by the Constitutional Law Committee and constitutional law experts for being overly urgent and not allowing a thorough analysis of the proposed measures.\(^\text{20}\)

In addition to the enforcement decrees, three implementing decrees, one concerning restrictions in the area of education (Decree No. 126/2020),\(^\text{21}\) another concerning municipalities right to derogate from the maximum waiting time for access to non-urgent medical treatment (127/2020)\(^\text{22}\) and a third one (A 4128/2020) allowing derogations in the implementation of the Working Hours Act (työaikalaki/arbetstidslagen, 872/2019), the Annual Holidays Act (vuosilomalakisemesterlagen, 162/2005) and the Employment Contract Act (työopimuslaki/arbetstidslagen, 55/2001), were issued the same day. Constitutional law experts have pointed out that issuing the implementing decrees should have been done first after the enforcing decrees had been approved by Parliament.\(^\text{23}\)

The Regional Authorities issued a set of the government’s policy recommendations corresponding orders on 17 March.\(^\text{24}\) Also on 17 March, the Ministry of the Interior announced that restrictions concerning the cross-border traffic of persons would be started by midnight on 19 March. People are


\(\text{21}\) Finland, Government decree, Valtioneuvoston asetus varhaiskasvatukseen sekä opetuksen ja koulutuksen järjestämisvelvollisuuutta koskevista välialaisista rajoituksista.

\(\text{22}\) Finland, Government decree, Valtioneuvoston asetus kunnan oikeudesta poiketa terveydenhuollon kiireettömän hoidon määräikäisten moudattamisesta ja sosiaalihuollon palvelutapauksia avoimeen.


\(\text{24}\) Finland, Regional State Administrative Agencies general communications of, Aluehallintovirastot määäväät oppilaitokset suljettavaksi ja kieltävät yli 10 hengen yleisötilaisuudet, press release, 17 March 2020 (including a link to the orders in question).
not to travel abroad between 18 March and 13 April. A person returning to Finland from abroad should remain in quarantine-like conditions for 14 days. Necessary traffic for work could still continue and the restrictions were not to affect the right to seek asylum. The government is in the process of preparing further restrictions on freedom of movement, such as internal travel bans and closing of non-essential shops, bars and restaurants. These decisions were expected to be taken at the earliest on 25 March 2020.

The Emergency Powers Act (Chapter 20), the Criminal Code (e.g. Chapter 44, Section 2 on health protection violations) and other relevant legislation include sanctions that can be applied to breaches of the emergency rules.

The disease caused by Covid-19 was added to the list of generally hazardous communicable diseases on 13 February 2020, but even before that it was being treated as one. This classification means that all examinations and care related to the disease are free of charge. On 12 March 2020, the Minister of Treasury stated that the government is prepared to cover the costs of the necessary measures in the social and health care sector, by means of an additional budget, if needed.

Persons who are placed into quarantine will receive an infectious diseases sickness allowance, which covers fully the loss of income resulting from absence from work, isolation or quarantine due to an infectious disease, such as COVID-19. The allowance is available for all upon application from the Social Insurance Institution of Finland (Kela). The sum is calculated based on the amount the employee would have received had they been at work. In the case of self-employed persons, the compensation is based on the annual income reported for the purpose of paying entrepreneur’s statutory pension insurance contributions. The payment is also available for parents or guardians of under-16-year-olds who are placed in quarantine, preventing caregivers from going to work.

Specific health care centres have been designated for attendance of suspected cases of corona virus in larger cities. Before the declaration of a state of emergency the measures undertaken at the municipal level were varying a lot, creating confusion and putting people in an unequal position depending on their place of residence. In certain municipalities, e.g. schools were closed, whereas e.g. in Helsinki, which is the most infected area, this was not done. This also contributed to a general sense of confusion and insecurity. The authorities, on the other hand, have been stressing that equal access to treatment will be ensured for all. As concerns the treatment of other diseases than corona, municipalities were given the right to deviate from the time lines in accessing health care on 17 March.

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25 Finland, Ministry of the Interior (sisäministeriö/inrikesministeriet), ‘Finland will restrict cross-border traffic - retired border guards and police officers may be called back to work’, press release, 17 March 2020.
27 Finland, Ministry of the Interior (sisäministeriö/inrikesministeriet), ‘Novel coronavirus to be included in generally hazardous communicable diseases – the aim is to prevent the spread of the disease’, press release, 13 February 2020.
29 Finland, Social Insurance Institution of Finland (Kela), ‘Sickness allowance on account of an infectious disease provides loss-of-income compensation for persons placed in quarantine’, Kela news, 2 March 2020.
30 Yle news 16 March 2020.
The official policy regarding testing people with suspected infection has been criticised to lack consistency, causing unnecessary anxiety and insecurity as to accessing necessary care. On 12 March, the government informed that the authorities will adopt a normal practice in which tests will be taken based on a physician’s assessment and consultation with a specialist in infectious diseases. On 16 March, THL announced that only seriously ill persons, persons belonging to the risk groups and health care personnel would be tested from that day on. Those with mild symptoms were instructed to stay at home, and not to call or visit the over burdening health care centres. The same day the prime minister, however, announced that testing will be accelerated, in contrast to what THL was saying. Reports indicate that not even health care personnel are necessarily being systematically tested.

Consumer prices of medicines sold at pharmacies are regulated in Finland, but as far as other goods sold at pharmacies are concerned their pricing is free. Masks and, in particular, sanitizers are also sold in grocery shops. At least some of the pharmacies started regulating the amounts of masks sold per person already in the beginning of March, since they quickly ran out of stocks of masks after the outbreak of the virus. On 12 March the media reported that in some shops a bottle of sanitizer costs almost 40 euro. The emergency legislation that was passed on 17 March gives the government powers to intervene in this, as described above. The government has been strongly urging people not to hoard medicines.

On 16 March the Minister of Employment decided on a three-point action plan to safeguard the functioning of the labour market. On 20 March, the government announced an economic package to support enterprises and the labour market of altogether 15 milliard euros. An additional budget of 400 euros for social and health care was to be adopted on 20 March, and several more additional budgets were told to follow.

There are over 850,000 people over 70 years of age in Finland who now are being isolated in their homes or in care homes. The precarious situation of particularly those who do not have close relatives, and/or lack economic means has been raised by experts. Advice for older persons and their families and friends were issued on 19 March. The municipalities have been reminded of their obligation to see to it that older people receive necessary care. Another vulnerable group is children of poor families for whom the school meal is of particular importance. To mitigate the effects of the

35 Finland, Ministry of Economic Affairs and Employment ‘Minister of Employment Haatainen: Three-point action plan to safeguard the functioning of the labour market’, press release, 16 March 2020.
school closures, schools have been allowed to continue to offer lunches or take-away lunches for the pupils if this can be done avoiding social gatherings. The minister of education has also told that support for children in unstable homes would be maintained by phone and via digital chat services.

2. Impact of the outbreak on certain national or ethnic communities

The National Police Board, the Non-discrimination Ombudsman, the Ministry of Justice and the Finnish Section of Amnesty International all report not having been contacted about cases of xenophobic or discriminatory behaviour in the context of the virus outbreak, nor have they received any complaints concerning cases.

The Finnish Broadcasting company had interviewed four persons of Asian origin, who all told that they had experienced some type of prejudice and/or discrimination either in public or in private relationships, such as name calling, inappropriate staring and being avoided.

The Finnish Association of People with Physical Disabilities (Invalidiliitto) reports several cases of hate speech directed against persons with disabilities in the context of the outbreak, e.g. people accusing disabled persons for taking the health care resources that are needed to combat the virus.

3. Impact on privacy and spread of disinformation

There are no known cases of violations of privacy related to the coronavirus by the media or by employers as of 23 March 2020. One early case in the context of which risks of privacy violations were raised, however, concerned a suspected infection that turned out to be a false alarm. A person who was returning from an infected area and was experiencing flu like symptoms, called the emergency health care from the train on his way home. Part of the phone call had been overheard by a fellow passenger, causing all passengers in that train wagon to leave the wagon and the guards to enter to find out what it was that was causing this. Even though the potentially infected passenger’s name was not revealed in the media reports, he/she started receiving text messages from persons hardly known to him/her, inquiring if he had been infected. This caused him/her to feel intimidated and he/she started to fear for his/her privacy and safety and that of his/her entire family. On the other hand, there have been cases of infected persons, who have voluntarily come public in the (social) media to share information about the experiences of the disease to help others.

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44 Finland, information obtained from the Ministry of Justice (oikeusministerio/justitieministeriet) via email on 16 March 2020 and the National Police Board (poliisihallitus/polisstyrelsen) via email on 24 March 2020 and from the Non-discrimination Ombudsman (yhdenvertaisuusvaltuutettu/diskrimineringsombudsman) via email on 17 March 2020.
46 Information obtained from the Finnish Association of People with Physical Disabilities (Invalidiliitto) via email on 18 March 2020.
47 Finland, information obtained from the Data Protection Ombudsman (tietosuojaavaltuutettu/dataskyddsombudsmannen) via email on 24 March 2020.
The authorities have been cautious with privacy protection from the beginning of the outbreak, trying to strike a balance between the people’s right to receive information, the societal importance of the information and the infected persons’ right to privacy. The city of Helsinki health centres leading medical official, e.g., stated in a media interview that privacy limits are always considered when deciding whether to inform about new cases of infections in order to protect privacy, and information is revealed only if it is considered to be of general societal importance. As regards schools, the situation may be different, he noted, since telling which class the infection concerns, e.g., may help to reassure parents’ sense of security.\(^{50}\)

On 12 March 2020, the Data Protection Ombudsman issued a press release on data protection and measures to combat the spread of the corona virus, reminding that processing of personal data must always be necessary and proportional. Addressing employers, the ombudsman stressed that health data belongs to the special categories of personal data that require specific protection, and may only be processed by people designated to the job. If an employee is diagnosed with the virus, the employer may not, as a rule, name the employee in question.\(^{51}\) If an employee is diagnosed with the virus, the employer must only inform the other employees about the situation in general terms, he noted.\(^{51}\)

The amount of disinformation, particularly in the social media, seemed to increase drastically after the government’s first announcement of tightened measures to prevent the spread of the virus on 12 March 2020. The government’s main method of combating disinformation has been to increase the amount of accurate information and to react immediately to concrete cases of disinformation.\(^{52}\) At the government’s press conference on 16 March, the prime minister told that the government will start holding press conferences from that day on, on a daily basis. Also, e.g. the National Supervisory Authority for Welfare and Health (Valvi) has been tweeting about the need to be cautious and critically evaluate the sources of corona information, and the National Cyber Security Centre has warned about the digital safety risks related to fake corona information.\(^{53}\) A digital coronavirus information service was opened on 16 March 2020.\(^{54}\)

The main public channel to provide information and instructions on coronavirus and thereto related issues both for the authorities and for the general public is the National Institute for Health and Welfare (THL). THL issued its first press releases on the subject on 31 of January and 5 February 2020.\(^{55}\) After 9 March 2020, it has been issuing press releases on a daily basis, in addition to holding press conferences and being active in the social media. All authorities at different levels have linked their websites to THL corona information website. THL, along with several other authorities, such as the Ministry for Foreign Affairs, Business Finland, the Ministry of Education and Culture and e.g. the city of Helsinki have also published corona virus information packages.

The Finnish Broadcasting Company started sending special broadcasts on the corona virus situation on a daily basis on 16 March 2020.\(^{56}\) The media have also been publishing advice, and e.g.

\(^{50}\) Media source: Ilta Sanomat, 'MTV: Juhlissa olleella todettiin koronavirustartuntuta Helsingissä – noin 60 altistui', 10 March 2020.

\(^{51}\) Finland, Data Protection Ombudsman (tietosuojavaltuutettu/dataskyddsombedsmannen), 'Data protection and limiting the spread of coronavirus’ press release’, 12 March 2020 (in English on 17 March 2020).


\(^{55}\) ‘THL has updated daily guidelines for people arriving in Finland from the epidemic area’

interviewing media education professionals about how to identify disinformation. One media house published advice targeting social media influencers, whose role in combatting disinformation is critical.