



## **EUROPEAN UNION OF GENERAL PRACTITIONERS**

Alment Praktiserende Lægers Europæiske Organisation – UEMO  
European Union of General Practitioners – UEMO  
Europäische Vereinigung der Allgemeinärzte – UEMO  
Union Européenne des Médecins Omnipraticiens – UEMO  
Unione Europea dei Medici di Medicina Generale – UEMO  
Europese Huisartsen Vereniging - UEMO  
Unión Europea de Médicos Generalistas – UEMO  
Uniao Europeia de Clinicos Gerais – UEMO  
Euroopan Yleislääkärijärjestö – UEMO  
Europeiska Allmänläkarorganisationen – UEMO



**UEMO 2003/023**

Swedish Reply to Questionnaire on Equal Opportunities (2002/166)

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**UEMO – PRESIDENCY**

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## STANDING COMMITTEE EQUAL OPPORTUNITIES

### QUESTIONNAIRE ON EQUAL OPPORTUNITIES

1. Does your national medical organisation have a policy on equal opportunities? Yes  No

2. If yes give a brief description.

The Swedish Medical Association has a policy called "Equal Doctors". The policy contains four main goals:

A/ The salary level should be decided without prejudice to whether the doctor is a man or a woman. During a transitional period certain measures need to be taken in order to eliminate the difference in salary between female and male doctors.

B/ An overriding goal is to create good working conditions and working hours for all doctors. The working conditions must not stop any doctor from choosing a certain specialty.

C/ A goal for the work on equality is that female and male doctors can choose their career direction in accordance with their own abilities and interest without being stopped by traditional views or values.

D/ Female representation in boards and deciding bodies should increase so that the share of women represents the share of women in each body represents the share of women in each association.

3. If not what action is being taken in this respect?

4. What percentage of doctors are:

Foreign EU Doctors	<input type="text" value="10-15"/>	Foreign Non EU Doctors	<input type="text" value="10-15"/>	Disabled Doctors	<input type="text" value="4-5"/>
Returned to Work	<input type="text" value="na"/>	Female Doctors	<input type="text" value="40"/>		

5. What percentage of principal GP posts are held by:

Foreign EU Doctors	<input type="text" value="unknown"/>	Foreign Non EU Doctors	<input type="text" value="unknown"/>	Disabled Doctors	<input type="text" value="4-5"/>
Returned to Work	<input type="text" value="na"/>	Female Doctors	<input type="text" value="45"/>		

6. What percentage of state contracts are held by:

Foreign EU Doctors	<input type="text" value="0"/>	Foreign Non EU Doctors	<input type="text" value="0"/>	Disabled Doctors	<input type="text" value="unknown"/>
Returned to Work	<input type="text" value="na"/>	Female Doctors	<input type="text" value="30"/>		

7. What percentage of female doctors are employed as assistants or sessional workers?

N.a.

Do female doctors have the same pay and conditions as men doctors?

No, about 1500 SEK (€ 165) less

8. Do part time doctors have the same pay and conditions as full time?

Yes

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9. Do part time doctors have pensionable employment?

Yes

10. Does the balance of senior officers and council members in your national medical organisations reflect that of the profession?

Foreign EU Doctors	<input type="checkbox"/>	Foreign Non EU Doctors	<input type="checkbox"/>	Disabled Doctors	<input type="checkbox"/>
Returned to Work	<input type="checkbox"/>	Female Doctors	<input checked="" type="checkbox"/>	Ethnic Group	<input type="checkbox"/>

## STANDING COMMITTEE EQUAL OPPORTUNITIES

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## *QUESTIONNAIRE ON RETURN TO WORK POLICY*

11. Does your national medical organisation have a return to work policy? Yes  No

12. If not what action is being taken in this respect? If yes, please give a brief description.

Not a question for the national medical organisation. It is a responsibility for the employers (mainly the county councils).

13. Has your national medical organisation studied recruitment and retention of GPs with regard to manpower projections for the coming years?

Yes

14. What preventative measures exist to retain GPs with regard to:

Access to CME/CPD:

There are no regulated measures on national level. Everyone has an opportunity to participate in CME/CPD but to what extent they do varies a lot.

Part Time Work:

In Sweden in general there is a positive view on part time work.

Training:

This takes place sporadically upon initiative from the GP.

15. Do return to work courses exist in your country? Yes  No

If yes:

5.1 What access to return to work courses exists?

5.2 Are these courses mandatory?

5.3 Are these courses funded by the state; or contracting insurance company; or by the returning GP?

5.4 How are those courses organized?

16. What support, e.g. mentoring, exists for those doctors returning to work?

There is no general programme, only an individual plan for each case.

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17. What is the returned doctors position in respect of certification of competence and accreditation?

N.A. Sweden has no requirements regarding certification of competence and accreditation

18. Does your National Organization have a special follow up for doctors returned to work after suspension?

No

19. Does your National Organization have a programme to take care/support of sick doctors (mental illness, drug abuse, disabling conditions, etc)?

Yes, there is a "Network of Colleagues" existing all over Sweden.

20. What support, e.g. mentoring, exists for those doctors returning to work?

See answer to question 16 above.

21. What support exists for special groups, i.e. parental, after illness or suspension?

No specific support exists for special groups.

22. What is the returned doctors position in respect of certification of competence and accreditation?

See answer to question 17 above.