中華民國 112 年版



衛生福利年報簡介

2023 Taiwan Health and Welfare Report Introduction Ministry of Health and Welfare MOH 健康・幸福・公平・永續 **HEALTH • HAPPINESS • FAIRNESS • SUSTAINABILITY**

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中華民國 112 年版 衛生福利年報



序言

COVID-19 疫情於 111 年繼續蔓延,然而隨著疫苗覆蓋率增加、病毒變異株轉為輕症後,本部防疫政策從嚴守轉為共存,在過去累積的厚實應變量能下,逐步走向疫情解封,同時以作為「民眾最值得信賴的部會」為願景,持續精進衛生醫療專業、整合布建社會福利資源、接軌國際衛生福利體系。

高齡、少子女化仍是我國人口面臨的最大議題。本部賡續營造友善育兒環境,持續提供不孕症治療補助,加碼育兒津貼及托育補助,以減輕家庭育兒負擔;並於111年4月起擴大全國辦理「低(含極低)出生體重兒居家照護計畫」,以增進優質照護品質;另一方面,面對高齡社會,本部持續推動高齡社會,本部持續推動高齡社會,大智友善環境,截至111年底,於各縣市共設置585個據點提供長者健康促進課程,給予更周全及持續性的健康服務;補助全國22縣市維運社區營養推廣中心及分中心40處,輔導共餐據點及社區餐飲業者提供高齡友善飲食服務;擴展失智症認知與友善態度」及「降低罹患失智症風險」政策。

不只守護長者與幼者,同步提升全人全程生活環境,在建構健康支持性環境部分,本部賡續推動菸害防制法修法,管制新類型菸品;依《精神衛生法》保障病人權益,支持



Preface

The COVID-19 pandemic continued to spread in 2022. However, with the increasing distribution of vaccines and the emergence of less severe viral variants, the Ministry of Health and Welfare changed its focus from a strict containment epidemic prevention policy to a strategic policy of coexistence. Drawing upon the wealth of experience and adaptability gained from past challenges, we progressively embarked on a path towards easing pandemic restrictions. Furthermore, guided by our vision to be "the most trustworthy ministry for the people," we remained committed to continuously elevating healthcare professionalism, integrating and effectively allocating social welfare resources, and aligning ourselves with the global health and welfare system.

Aging and low birth rates remain the most pressing issues facing Taiwan's population. The Ministry continues to create a friendly parenting environment, providing ongoing assistance for infertility treatment, increasing child-raising allowance, and daycare subsidies to alleviate the child-rearing burden on families. In April 2022, we expanded the nationwide "Home Care Program for Low (including extremely low) Birth Weight Infants" to enhance the quality of care. On the other hand, in response to an aged society, the Ministry is actively promoting age-friendly and dementiafriendly environments. By the end of 2022, a total of 585 locations were established in various counties and cities, offering health promotion courses for the elderly to ensure comprehensive and sustained healthcare services. We also funded 40 community nutrition promotion centers and branch centers nationwide, supporting communal dining venues and community food service providers to offer age-friendly dining services. Our efforts further expanded to dementia prevention and friendly community initiatives, implementing policies to "enhance public awareness and friendly attitudes towards dementia" and "reduce the risk of developing dementia."

In addition to safeguarding not only the elderly and young but also every individual across their entire lifespan, we have been diligently cultivating a health-supportive environment. To this end, the Ministry continues to drive amendments to the Tobacco Hazards Prevention Act, effectively regulating novel nicotine and tobacco products. Simultaneously, under the provisions of the Mental Health Act, we ensure the protection of patients' rights, offering support and assistance to foster their integration into the community and promote the mental well-being of the people. Furthermore, through the comprehensive implementation of the "Five-Point Food Safety Policy" and a range of measures, such as the promotion of food business registration, intensified inspections and sampling, and more stringent penalties, we have steadfastly enforced food safety policies. At the same time, we have taken great strides in advancing Good Manufacturing Practices for pharmaceuticals, bolstering the monitoring of controlled drugs, and elevating the quality management standards of traditional Chinese medicines, thereby fortifying the foundations of medication safety. In 2022, the "Review Meeting of the ROC's Second Report under the Convention on the Rights of Persons with Disabilities" in August and the "Review Meeting of the ROC's Second Report under the Convention on the Rights of the Child" in November, were held in Taiwan and the international experts were invited to review

並協助病人於社區平等生活,促進國人心理健康;透過食安五環、推動食品業者登錄、加強稽查抽驗、加重裁罰等方法落實食安政策,並推動藥品優良製造規範、加強查核管制藥品流向、落實中藥品質管理以具體強化用藥安全;111年8月、11月分別舉辦「身心障礙者權利公約(CRPD)第二次國家報告國際審查會議」及「兒童權利公約(CRC)第二次國家報告國際審查會議」,邀請國際專家審查我國落實權利公約情形,接受各界意見,積極促進公約實踐。

分析全球疫情趨勢、並兼顧防疫韌性與經濟活動。本部持續推動COVID-19 疫苗接種作業,提供追加接種雙價次世代疫苗、滾動調整邊境檢疫暨管制措施,提供住宿型及社區式機構公費快篩,並延長定期快篩措施,以降低弱勢及高風險族群感染風險;同時為加強經濟安全,加發低收入戶及中低收入戶生活補助,約有62萬餘人受惠;並以「正常生活、積極防疫、穩健開放」為目標,調整接觸者居家隔離政策、適度放寬口罩規定、降低醫療機構探病管制,逐步走向解封生活。

第75屆世界衛生大會(WHA)於111年5月於瑞士日內瓦召開,我國雖未受邀參與WHA,本部仍由李政務次長麗芬率「世衛行動團」前往日內瓦,透過舉辦專業論壇、雙邊會談及參與相關周邊活動,持續深化與各國及國際組織之醫衛合作關係,向國際社會表達我國欲持續專業、務實、有貢獻參與國際衛生事務之決心。

為加深國際合作與交流援助,臺灣數位新冠病毒健康證明於111年5月加入由美國為首的國際組織VCI(Vaccination Credential Initiative),可發行Smart Health Card(SHC)格式數位證明並取得認證;本部持續推動醫衛新南向政策,依據新南向重點國家各國政經狀況及我國與其合作發展之差異,於越南、馬來西亞、印尼三國各增加1中心,擴大為「七國十中心」,拓展臺灣醫療產業國際化。

在疫情政策走向共存、疫後生活逐步 回歸常態,本部也將持續優先照顧弱勢族 群、推動健全福利服務體系,建置並完備長 照體系與服務資源,優化保護服務體系、營 造互助祥和社會,拓展醫療照護體系、保護 民眾就醫權益,守護食藥安心的環境,增進 全民健康與福祉。

衛生福利部 部長



the reports. Their expertise promoted the effective implementation of these conventions in Taiwan, while the invaluable insights from diverse stakeholders were warmly embraced.

We analyzed global pandemic trends while considering both epidemic resilience and economic activities. The Ministry continues to promote COVID-19 vaccination, providing bivalent second-generation vaccines to the public. We have implemented rolling adjustments to border quarantine and control measures. Residential and community-based care institutions are provided with free rapid test kits, and regular screening measures have been extended to reduce infection risks for vulnerable and high-risk populations. To strengthen economic security, we have increased subsidies for low-income and middle-low-income households, benefiting over 620,000 people. With the goal of "normalcy in daily life, proactive epidemic prevention, and stable opening," we have adjusted the home quarantine close contacts, moderately relaxed mask regulations, and reduced restrictions on hospital visits, gradually moving towards a phased reopening of daily life.

The 75th World Health Assembly (WHA) was convened in Geneva, Switzerland, in May 2022. Although Taiwan was not invited to participate in the WHA, MOHW Deputy Minister Li-Feng Lee led the "WHA Action Team" to Geneva. Through hosting professional forums, bilateral meetings, and engaging in related side events, we have continued deepening our collaborative relationships with various countries and international organizations in health. All this serves to convey to the international community Taiwan's determination to persistently engage in international health affairs with professionalism, pragmatism, and a commitment to contribute to international health affairs.

To enhance international cooperation and exchange, Taiwan joined the Vaccination Credential Initiative (VCI) led by the United States in May 2022. The MOHW can issue digital vaccination certificates in Smart Health Card (SHC) format that can be certified. Furthermore, the MOHW continues promoting the New Southbound Policy in Healthcare. Based on country risk and different cooperation development of the NSP priority countries with Taiwan, additional centers were established in Vietnam, Malaysia, and Indonesia, expanding the "7 Countries, 7 Centers" to "7 Countries, 10 Centers" program and promoting the internationalization of Taiwan's healthcare industry.

As the COVID-19 policy moves towards coexistence and people's lives gradually return to normalcy after the pandemic, the Ministry will continue to prioritize the care for vulnerable groups and improve the welfare service system. We are committed to establishing and perfecting long-term care systems and service resources, optimizing protection services, fostering a harmonious and supportive society, expanding the healthcare system, and safeguarding the rights and interests of the public in seeking medical care. Our mission is to ensure a safe and secure environment for food and drugs and to enhance the health and well-being of the people in Taiwan.

Sincerely Minister of Health and Welfare

Jui-ym Head



衛生福利政策 Organization and Policy



由部長綜理部務,置政務次長2 人、常務次長1人及主任秘書1 人,並設10司、6處及45個所 屬機關(構)。

111年度主管決算數共 2,897億 9,225萬餘元,其中以社會保險支 出 68.03%占決算比率最高。

本部秉持創新思維,追求全球化、 在地化之政策目標,整合社會福 利及衛生醫療資源,制定連續性 政策,包括健康促進、疫病防治、 醫療照護、全民健保、食品藥物 管理、福利服務到長期照顧等議 題,期提供完善之整合服務,促 维全民健康與福祉。

為呼應國際重視性別平等議題之潮流,本部之政策、計畫及措施皆積極融入性別觀點,並落實性別平等政策綱領及CEDAW,期能提升衛生福利各面向之性別平等。

The minister oversees ministry affairs, he is aided by two deputy ministers, one vice minister and one secretary general. The Ministry of Health and Welfare consists of ten departments, six administrative departments and 45 affiliated agencies.

The ministry's financial statement for 2022 came to a little over 289.79225 billion NTD, with social insurance expenses making up the largest portion at 68.03% of the total budget.

Guided by the policy objectives of innovative thinking, pursuit of globalization and localization, the Ministry integrates social welfare and healthcare resources and formulates continuing policies including health promotion, disease prevention, medical care, National Health Insurance, food and drug administration, welfare services and long-term care etc. so that we can deliver comprehensive, integrated services that promote the health and welfare of the people.

In response to the current international trend of gender equality, we have endeavored to incorporate gender perspective in all our policies, plans and measures. Not only that, the Ministry has also embraced gender equality policies and CEDAW in the hopes of improving gender equality in all aspects of health and welfare.





衛生福利重要指標 Health and Welfare Indicators



隨著國民所得提高、醫藥衛生進步 及醫療保健意識增強,國人平均壽 命逐年延長,人口老化衍生的健康 與照護議題,影響國民醫療保健支 出與資源配置,亦牽動國家整體經 濟成長動能,本篇將簡要陳述衛生 福利統計相關重要指標。

111年底我國戶籍登記 2,327 萬人,較去年減 4.71‰,人口結構續呈幼年人口比率降低,老年人口比率提高之現象;111年平均壽命為 79.8 歲,女性較男性長壽。

111年國人死亡人數 20.8萬人, 死亡率為每十萬人口 893.8人,較 去年上升 13.9%;前三大死因為癌 症、心臟疾病及嚴重特殊傳染性 肺炎(COVID-19),居首之癌症死 亡人數 5.2萬人,平均每天有 142 人死於癌症,即每 10 分 7 秒就有 1 人因癌症死亡,較去年快 3 秒。

我國國民醫療保健支出穩定成長, 110年達1.4兆元,占GDP比率 由100年之6.4%增至6.6%;平 均每人醫療保健支出由3.9萬元 增至6.1萬元。

111 年底納入社會救助保障之低收入户及中低收入戶共 25.4 萬戶、58.5 萬人。提供低收入戶及弱勢等家庭之兒童生活扶助金額共 51 億元,以維持其基本生活水準。

Rising incomes, advances in medicine and health care, and greater health awareness have led to a gradual increase in Taiwan's life expectancy. Nevertheless, relevant issues of health and care that come with an aging population may affect not only national health expenditure (NHE) and resource distributions, but also the rate of economic growth. In this chapter, we will present a summary of key indicators in health and welfare statistics.

At the end of 2022, Taiwan had a registered population of 23.27 million, which is a decrease of 4.71% compared with the previous year. Life expectancy in Taiwan reached 79.8 in 2022. Women live longer than men.

In 2022, there were 208 thousand deaths and the crude mortality rate was 893.8 per 100 thousand - an increase of 13.9% compared to the previous year. The top three leading causes were cancer, heart disease and COVID-19. Being the leading cause of death, cancer claimed 52 thousand lives and on average, 142 people were dying of cancer each day. Further calculation indicates that every 10 minutes and 7 seconds, a person would die because of cancer. The duration is 3 seconds shorter compared to that from 2021.

Taiwan's National Health Expenditure (NHE) has shown steady growth. The figure has reached NTD 1.4 trillion in 2021. NHE as a share of GDP increased from 6.4% in 2011 to 6.6%, while per capita NHE increased from NTD 39,000 to NTD 61,000.

By the end of 2022, a total of 254,000 households, encompassing 585,000 people, were included in the social assistance program for low-income and middle-low income households. An amount of 5.1 billion NTD was allocated to provide child living assistance to low-income households and children from vulnerable families, aiming to sustain their fundamental standard of living.



健康支持環境

An Environment Conducive to Health

為達成「全民健康」,本部國民健康署持續推動全人口及各生命週期之監測與調查,完備生命歷程健康促進、國民飲食營養及非傳染性疾病防治之監測數據蒐集與應用。

在健康促進,積極於各場域推廣 健康生活型態,提升民眾健康識 能。與教育部、勞動部、22縣市 政府等跨部門合作,推行健康促 進學校、健康職場、健康醫院及 健康城市等計畫,應用渥太華憲 章,從政策面、健康環境、社區 行動、健康服務到強化個人健康 生活型態,引導健康服務體系, 以人為中心,系統性減少健康風 險因子(菸、酒、不健康飲食、身 體活動不足),協助民眾實踐健康 生活,截至111年底,共有4,019 家健康促進學校、2萬8,055家健 康職場、203家健康醫院,40個 社區營養推廣中心,另補助 22縣 市推動高齡友善,讓健康成為縣 市首長施政首選任務。

在健康照護措施,提供孕婦產前檢查、新生兒先天性代謝異常篩檢、新生兒聽力篩檢、兒童預防保健、成人預防保健服務、慢性病防治、癌症篩檢、多元戒菸服務等,透過各式服務以期早期發現異常早期照護,以維護國人健康。110年更增加產檢次數及項

In order to achieve the goal of "Health for All," the Health Promotion Administration has been steadfast in promoting comprehensive monitoring and surveys of the entire population and different life stages. This effort aims to establish a comprehensive dataset for monitoring and utilizing health promotion throughout the life course, national dietary nutrition, and non-communicable disease prevention and control.

In terms of health promotion, we have actively promoted healthy lifestyles in different settings to raise health literacy for the general public. We collaborate with the Ministry of Education, Ministry of Labor and 22 municipal governments across Taiwan to promote various programs for Health Promoting Schools, Healthy Workplace, Healthy Hospitals, Healthy Cities and so forth. Guided by the Ottawa Charter for Health Promotion, we endeavor to build health policy, create supportive environments, strengthen community action, offer health services and enhance personal health behaviors as pillars that steer our system of health services. Our services shall be people-centered and enable the general public to systematically reduce risk factors to health, such as tobacco, alcohol, unhealthy diet, lack of physical activities and so forth, so that people can live healthier lifestyles. As of the end of 2022, there are 4,019 Health Promoting Schools, 28,055 Healthy Workplaces, 203 Healthy hospitals and 40 Community Nutrition Promotion Centers. We also subsidized 22 counties and cities to promote age-friendly initiatives, making health a top priority for the leaders in their governance agenda.

With regards to health care measures, we offer a variety of services including prenatal check-ups for pregnant women, neonatal congenital metabolic disorder screening, newborn hearing screening, children's preventive healthcare, adult preventive healthcare services, cancer screening, chronic disease prevention, comprehensive smoking cessation services and so forth. Through these services, we stand a better chance of early detection of symptoms, so that preemptive care can be administered to protect the health of the general public. In 2021, additional increases in the number and scope of prenatal checkups for pregnant women are provided, and

目與推動擴大不孕症治療(試管嬰兒)補助,增進生育健康。

另,為提升高齡人口生活品質、 延緩慢性病威脅,積極推動高齡 友善城市及社區計畫與輔導健康 照護機構提供對高齡友善的照護 服務,111年共174個社區參與, 高齡友善社區涵蓋率為47%。887 家高齡友善健康照護機構認證, 共同營造健康老化尊嚴社會。 the subsidization for infertility treatment (IVF) has been expanded. These measures are intended to enhance reproductive health.

In addition, in light of population aging, we are committed to helping seniors to improve the quality of their lives by mitigating the threat of chronic diseases. Active efforts have been made to promote age-friendly cities and community programs, as well as to provide guidance to healthcare institutions in delivering age-friendly care services. In 2022, 174 communities participated in a coverage rate of 47% for age-friendly communities. 887 healthcare institutions were certified as age-friendly and health-focused. Together, these initiatives aim to foster a society that values healthy aging and dignity for all.





為建構敏捷韌性醫療照護體系, 持續推動醫療網計畫,平衡各區 域劃分之醫療資源,精進緊急醫 療救護網絡運作機制,以區域聯 防落實在地化醫療照護;以「安寧 緩和醫療條例」及「病人自主權利 法」,保障病人善終權;辦理「優 化兒童醫療照護計畫」,強化自周 產期起之全方位兒童醫療照護。

為落實均等全人口腔照護,推動各生命週期口腔健康政策及加強特殊需求者醫療服務,109年12歲學童齲齒經驗指數下降至2.01顆。

在心理健康方面,推動心理健康 促進方案、提供24小時1925心 理支持專線,辦理自殺個案通報 與關懷訪視;補助地方政府辦理精 神衛生法定各項業務,提供精神 To construct an agile and resilient healthcare system, the Ministry has continued to promote the plan of health care network which includes the balance of medical resources in each regional hospital, the progress of emergency medical network, and the fulfill of local medical care via regional emergency. The "Hospice Palliative Care Act" and "Patient Right to Autonomy Act" were implemented to protect patient's rights of hospice, while the "Program for Excellence in Child Health Care" were conducted to reinforce the comprehensive child health care since perinatal period.

In order to promote equal oral care for the entire population, various oral health policies targeting different life stages have been implemented. Furthermore, efforts have been made to strengthen medical services for individuals with special needs. As of 2020, the dental caries experience index for 12-year-old students has decreased to 2.01 teeth.

In terms of mental health, a mental health promotion program has been implemented, and a 24-hour 1925 suicide prevention hotline is provided for psychological support, and "Mental Health Network Promotion Project" is promoted for suicide reporting cases visiting and caring. In addition, the Ministry subsidized municipal





病人社區關懷訪視保護、強制住院及強制社區治療;持續布建藥癮醫療多元處遇資源及藥酒癮治療費用補助,辦理司法精神醫療工作,持續優化司法精神鑑定服務品質。

在醫事人力方面,訂定15類醫 事人員管理法規,持續辦理各類 醫事人員培育、養成計畫及在職 訓練、專科醫師甄審領證及畢業 後一般醫學訓練計畫,111年醫 事人員執業人數共計35萬4,101 人。另為保障醫師勞動權益,住 院醫師自108年9月1日起適用 勞動基準法並同步推動醫療法修 法,增訂醫師勞動權益專章草案。 此外,為減少醫療糾紛,促進醫 病關係和諧,持續進行生產高風 險管控及通報機制,辦理生產事 故救濟,111年度審定核予救濟 計311件,及積極推動多元化訴 訟外處理機制,並於111年6月 22 日經總統公布制定「醫療事故 預防及爭議處理法」。另為建立中 醫師臨床訓練制度,111年輔導 133 家院所收訓 555 位學員進行 負責醫師訓練;並試辦中醫專科醫 師訓練。

於醫療服務品質方面,推行醫院 評鑑制度,111年底計有415家 醫院經醫院評鑑合格;訂定醫療品 質及病人安全工作年度目標,建 置病人安全事件通報機制,辦理 器官勸募及推廣,建置器官移植 資料,促進捐贈器官有效運用, 增進國民健康。111年電子病歷 交換中心完成OHCA及TRAUMA governments to promote several mental health affairs which is stipulated by law, such as paying follow-up visits to psychotic patients in the community and mandatory hospitalization/community treatment and so on. The Ministry has also continued to provide diverse resources to bolster medical care for drug addicts and fee subsidies for addiction treatment for patients with drug or alcohol addiction. The MOHW also conducted forensic psychiatry medical work to optimize the service quality of forensic psychiatry assessment.

In terms of medical manpower, Taiwan currently has 15 laws and regulations governing the licensing requirements of medical personnel and the Ministry has continued to organize and host talent training, education program and OTJ training for different medical personnel, specialist physician certification programs and general post-graduated medical training programs. As of 2022, Taiwan had 354, 101 practicing health professionals. In addition, effective from September 1, 2019, resident physicians shall be subject to the Labor Standards Act amendment of the Medical Care Act and has been promoted by adding a draft section on the labor rights of physicians. Also, in an effort to reduce disputes over medical care and harmonize physician-patient relationships, the MOHW has continued to conduct high birth risk control and report mechanism, and provided relief for childbirth accidents approved a total of 311 applications in 2022 while actively promoting diverse alternative dispute resolution mechanisms. On June 22, 2022, the "Medical Accident Prevention and Dispute Resolution Act" was enacted and publicly announced by the President. On top of that, a clinical training system for Chinese medical physicians is going to be established. In 2022, guided 133 institutions to accept 555 students for responsible doctor training, and conducted trial training for specialized Chinese medicine doctors.

With regards to improving the quality of medical care, the Ministry sought to promote a patient-centered hospital accreditation system, as of the end of 2022, a total of 415 hospitals were certified, stipulated annual objectives for healthcare quality and patient safety and a patient safety reporting system. By persuading and promoting organ donation and establishing a database for organ transplant data, the Ministry maintained the effective operation of EMR Exchange Center to enable interinstitutional exchange of records improving the health of citizens. In 2022, the EMR Exchange Center (EEC) completed the development of two critical care record

二類急重症單張;另截至 111 年底 已有臺大醫院等 35 家醫院申請使 用醫事人員行動憑證。

另為促進原住民族健康平等,本部自107年起致力推動「原鄉健康不平等改善策略行動計畫」,目前已具有成效;依內政部統計,110年原住民族與全國差距已由106年8.17歲縮小為6.94歲。

同時,為照護國人健康,消弭健康上的差距,提升新住民生育健康,減少因語言隔閡,造成生活適應或就醫障礙;並針對罕見疾病、油症等特殊疾病患者,協助其獲得醫療照護及補助就醫時之部分負擔。

templates, namely OHCA and TRAUMA. Additionally, as of the end of 2022, 35 hospitals, including National Taiwan University Hospital, have applied for the use of healthcare professionals' mobile certificates.

By utilizing telehealth technology and providing professional technical support, active efforts are made to support hospitals located in remote and outlying areas, aiming to improve service quality and ensure local healthcare to safeguard the rights of the population. In order to enhance accessibility and quality of healthcare for indigenous peoples and residents in remote areas, the principles of "physicians move, patients stay" and "local healthcare" are upheld, actively strengthening the functionality of local healthcare. This includes initiatives such as nurturing local medical personnel, providing subsidies for healthcare professionals to establish practices, offering support for the renovation and improvement of medical facilities and clinics, establishing telemedicine specialty services, providing transportation subsidies for medical visits, and implementing emergency medical air transport projects for remote islands.

Furthermore, to promote health equality among indigenous peoples, the Ministry has been committed to implementing the "Indigenous Health Inequality Improvement Strategy Action Plan" since 2018, which has shown positive results. According to statistics from the Ministry of the Interior, the life expectancy gap between indigenous peoples and the overall population has decreased from 8.17 years in 2017 to 6.94 years in 2021.

At the same time, in an effort to safeguard the health of general public and eradicate the discrepancy in healthcare provision, we have endeavored to improve prenatal health of new immigrants and reduce life and medical difficulties caused by language barriers. Not only that, for patients of illnesses such as rare diseases, Yu Cheng patients and other diseases requiring special treatments we have also helped patients receive medical care and subsidized the copayment.





長期照顧服務

Long-Term Care Services



臺灣整體人口結構受少子女化及國民平均壽命延長影響,65歲以上人口急遽增加,在我國107年3月底正式進入高齡社會,至115年預計老人人口將占總人口21%,成為超高齡社會。據此,建設健全長期照顧服務體系、發展服務資源及確保服務品質越顯其重要性,故本部於106年起實施長照十年計畫2.0(以下稱長照2.0),以推動社區整體照顧服務體系,回應高齡化社會的長照需求。

本部持續發展以社區為基礎的整合式照顧服務模式,以培植社區整合型服務中心(A)、擴充各類長照服務提供單位(B)、廣設巷弄長照站(C)為原則,鼓勵各縣市政府廣結長照、醫療、護理以及社福單位辦理。若民眾有長照需求,可撥打1966長照服務專線,經所在地照管專員到府評估符合長照需要等級者,協助連結民眾所需之長照服務,111年長照2.0服務涵蓋率達69.51%。

長照 2.0 推動以來,服務資源及人數已大幅成長,未來除將持續拓展居家式及社區式長照服務資源,充實長照服務人力外,亦將布建住宿式機構。長照 2.0 下一階段的重要任務,從強化地方政府輔導與管理量能、完備長期照顧服務法相關規範機制以及建立服務品

Taiwan's population structure is affected by low birth rate and an increase in life expectancy. The population aged 65 years and older has been growing rapidly. As of the end of March 2018, Taiwan officially became an aged society and, by 2026, the population aged 65 and over is expected to reach 21%, consequently making Taiwan a "super-aged" society. In light of this trend, there's greater urgency to establish a sound long-term care system, to develop human resource and facilities, and to ensure service quality. Consequently, the Ministry began its implementation of the MOHW's National Long-term Care 10-year Plan 2.0 (hereafter referred to as "Long-Term Care Plan 2.0") from January 2017 to promote an integrated Community Care Service Networks as a response to the long-term care needs of Taiwan's aging population.

The MOHW has been working to integrate different services into the community-based integrated care service network based on the basic concept of cultivating community integrated service centers ("A"), expanding combined service center ("B"), and widely establishing long-term care stations around the blocks ("C") throughout Taiwan. All municipalities have been encouraged to work with long-term care service providers, medical care, nursing institutions and non-profit organizations. The Long-Term Care Hotline "1966" offers efficient assistance for those seeking for long-term care services. The care managers will visit their home to assess the disability levels for long-term care services based on their needs and link people with resources to meet their further needs. In 2022, the coverage rate of the Long-Term Care 2.0 services reached 69.51%.

Since Long-Term Care 2.0 was launched, there has been a big increase in service resources and personnel. In the future, the MOHW will continue to put emphasis on setting up residential institutions as well as expanding home-based and community-based long-term care resources and strengthening long-term care manpower. The following important mission of Long-Term Care 2.0 is to enhance the guidance and management capability of municipal government, improve mechanisms required under the Long-Term Care Services Act and establish open information to ensure the service quality of various long-term care service resources and

質公開資訊,以確保各類長期照 顧服務資源服務品質與持續提升, 提供民眾近便、能負擔、有選擇、 可安心的長照服務。 continuing improvement; thus, to provide people long-term care services that are accessible, affordable, and premium in quality.



傳染病防治 Communicable Disease Control



傳染病防治為保障全民健康,甚 Communicable disease p is even an important link i Disease Control Act" and Protection Act" serve as

至為維護國家安全重要的一環。 《傳染病防治法》及《人類免疫缺乏病毒傳染防治及感染者權益保障條例》為我國執行傳染病防治的兩大重要法規。另針對可以疫苗預防的傳染病,衛福部疾管署持續推行國家預防接種政策,目前幼童免費常規疫苗共10項,可預防15種傳染病。

因應嚴重特殊傳染性肺炎 (COVID-19) 疫情, 我國於 109年 1月15日公告新增COVID-19為第 五類法定傳染病;同年1月20日 起開設「嚴重特殊傳染性肺炎中央 流行疫情指揮中心」,統籌各項防 疫應變動員措施。立法院於 109 年 2月25日通過《嚴重特殊傳染性肺 炎防治及紓困振興特別條例》,後 因 110 年 COVID-19 疫情於國際間 仍亟嚴峻,爰再修正延長該條例施 行期間至112年6月30日止;復 衡酌 COVID-19 疫情變化快速,立 法院於111年5月27日第10屆 第5會期第14次會議決議,同意 延長該條例及其特別預算施行期間 至 112 年 6 月 30 日止,本部並配 Communicable disease prevention protects people's health and is even an important link in national security. The "Communicable Disease Control Act" and "HIV Infection Control and Patient Rights Protection Act" serve as key regulations governing infectious diseases prevention and control. Also, for communicable diseases that can be prevented with a vaccine, the MOHW has continued to promote the national vaccination policy. At present, 10 vaccines are available to children free of charge and can prevent 15 communicable diseases.

In response to the COVID-19 outbreak, Taiwan officially designated COVID-19 as a Category V communicable disease on January 15, 2020. This was followed by the establishment of the Central Epidemic Command Center (CECC) on January 20 the same year to take charge of the mobilization required to meet the emergency. To achieve the goal of epidemic prevention and control, the CECC has taken all necessary measures and coordinated epidemic prevention efforts. On February 25, 2020, the Legislative Yuan passed the "Special Act for Prevention, Relief and Revitalization Measures for Severe Pneumonia with Novel Pathogens." Due to the severity of the COVID-19 pandemic worldwide in 2021, the aforementioned regulation was further amended to extend its implementation period until June 30, 2023. Additionally, considering the rapidly changing COVID-19 situation, the 14th meeting of the 5th session of the 10th term of the Legislative Yuan, held on May 27, 2022, passed a resolution to extend the implementation periods of the said regulation and its special budget until June 30, 2023. The MOHW continues to amend related regulations and orders. In response to the pandemic, in order to provide a collaborative treatment model between Western and Chinese medicine for confirmed COVID-19 cases, the government has been 合防疫業務需要,持續修正相關重 要法規命令。因應疫情,為提供確 診者中西醫合作治療模式,自 110 年 12 月 1 日起公費補助 COVID-19 確診者「臺灣清冠一號」。

本部疾病管制署透過多元的傳染 病監測通報與調查系統及全國傳 染病檢驗網絡,及時對新興傳染 病進行偵測預警,同時因應國際 COVID-19疫情,我國邊境檢疫策 略依疫情變化調整各項管制措施, 並逐步穩健開放邊境管制措施。 另為提升國人完整保護力,持續 採購疫苗、藥物,並擴大快篩供 應,妥善維運「傳染病防治醫療 網」,以有效調度緊急應變量能, 落實醫療照護機構感染管制。

為提升防疫量能,優化智慧科技 發展智慧防疫系統,於111年5 月1日啟動「確診個案自主回報疫 調系統」,簡化地方政府疫調及減 輕開立紙本通知書等。

subsidizing the "NRICM101" treatment for COVID-19 patients since December 1, 2021.

Through diverse communicable disease surveillance, reporting, and survey systems, and the national communicable disease testing network, Taiwan CDC of the MOHW carries out timely surveillance and issues warnings for new communicable diseases. In response to the global COVID-19 situation, Taiwan has adjusted various control measures and gradually eased border restrictions according to the changing pandemic situation. Additionally, we continue to procure vaccines and medications and expand the supply of rapid tests to enhance the protection of our citizens. The Communicable Disease Control Medical Network remains operational to effectively deploy emergency response capabilities and implement healthcare infection control in normal times.

To enhance our epidemic prevention capacity, we have optimized smart technology and implemented smart epidemic prevention systems. On May 1, 2022, we launched the "Self-Reporting System" for Confirmed Cases" to simplify the contact tracing process conducted by local governments and reduce the need for paperbased notifications.



食品藥物管理

Management of Food and Drug



本部食品藥物管理署以「藥求安全 有效、食在安心健康」為使命,持 續執行「食安五環」政策,從源頭 控管、生產管理、市場查驗、業者 責任及全民監督等面向跨域整合, 建構完善食品安全防護網,結合法 規政策管理重點,整合規劃全國性 稽查專案;111年度完成國內業者

drugs, safe and healthy food" as its mission and has therefore continued to implement its "Five-Point Food Safety" policy to achieve inter-domain integration of five major aspects: source control management, production management, market inspection, manufacturers and vendors liability, and supervision by the citizens in order to establish a comprehensive food safety protection network. In addition, in 2022, the TFDA launched nationwide inspection projects and audited 120,717 domestic businesses, with a GHP

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查核 12 萬 717 家次,食品良好衛生規範準則合格率達 9 成以上;食品及相關產品標示查核及抽樣檢驗59 萬件,合格率達 99%。

積極健全藥品管理法規,接軌國 際,落實藥品源頭管理、品質與 安全監測,保障民眾用藥安全。 強化管制藥品流向管理及擴大列 管品項;落實反毒策略,加強藥 物濫用防制宣導及進口原料藥查 驗,提升檢驗量能。各年度不法 藥物查獲率已由99年之11.81% 大幅下降至111年之2.47%。此 外,精進「醫療器材管理法」及 「化粧品衛生安全管理法」各項規 定,落實多元上市管理機制,強 化法規諮詢輔導,促進產業發展; 持續確保藥品與醫療器材製造與 運銷作業符合國際PIC/S GMP及 ISO13485標準;並推動化粧品製 告場所符合國際ISO22716標準。 另發布「上市中藥監測辦法」, 111年中藥材合格率90%,中藥 製劑合格率97%。110年9月公 告臺灣中藥典第四版,於111年 出版英文版,精進中藥品質管理 並與國際接軌。

因應管理各類產品需求,積極開發檢驗方法,111年新增或修訂檢驗方法達74篇,參與33場國際共同研究或實驗室間能力比對,獲國際肯定。亦辦理風險管理及危機處理研討會,強化食品藥物安全危機處理之量能及緊急應變能力,運用新興媒體FB及TFDALINE@,即時傳播食藥醫粧知識及政策,提升民眾正確知能。

inspection passed rate of over 90%. A total of 590,000 food and related products were inspected and sampled, resulting in a pass rate of 99%.

We actively enhance the regulatory framework for Medicinal product management, aligning it with international standards, to ensure the management of drug sources, quality, and safety monitoring, thereby safeguarding the public's drug safety. We reinforced the flow management of controlled drugs and expanded the items being controlled. We implement anti-drug strategies, and intensify efforts to prevent drug abuse, as well as enhance inspections of imported active pharmaceutical ingredients (APIs), simultaneously, improving our testing capabilities. The annual rate of illicit drug seizures has significantly decreased from 11.81% in 2010 to 2.47% in 2022. Furthermore, we have refined the regulations under the "Medical Devices Act" and "Cosmetic Hygiene and Safety Act," implemented diversified mechanisms to manage medical devices on the market, strengthened regulatory consultations and guidance, and promoted industry development. We continue to ensure that the manufacturing and distribution operations of drugs and medical devices comply with international standards such as PIC/S GMP and ISO 13485. We also promote compliance with the international ISO 22716 standard for cosmetic manufacturing facilities. Additionally, we have issued the "Regulations for the Post-market Monitoring of Chinese Medicine Product," with 90% compliance rate for Chinese medicine materials and 97% compliance rate for Chinese medicine preparations. In September 2021, we announced the fourth edition of the Taiwan Herbal Pharmacopeia, and the English version was published in 2022, enhancing the quality management of Chinese herbal medicines and aligning with international standards.

In response to the management of various product needs, we have actively developed testing methods. In 2022, we promulgated, amended, published or revised a total of 74 testing methods. We also participated in 33 international collaborative research projects or laboratory proficiency testing programs, receiving international recognition. Furthermore, we conducted risk management and crisis handling seminars to strengthen our capacity for food and drug safety crisis management and emergency response. We utilized emerging media platforms such as Facebook and the TFDA LINE@ to disseminate timely information on food, drugs, medical devices, and cosmetics, enhancing the public's knowledge and understanding of relevant policies and promoting accurate awareness among the public.



全民健保與 國民年金

National Health Insurance and National Pension



全民健保擁有「普及、經濟、便利、滿意度高」等亮點,在國內獲得滿意度超過九成。截至111年底,總投保人數2,378萬人,納保率達99.9%,全國92%醫療院所參與健保特約,就醫可近性高。健保財務主要來自保險對象、雇主及政府共同分擔的保險費。

111 年平均每人每年門診就醫次數 14.26 次,住院 0.13 次,平均日數 1.24 日。隨著人口高齡化及醫療科技進步,醫療費用逐年增加,在健保資源有限的情況下,透過醫療科技評估,持續檢視支付標準,落實公平負擔原則。

未來以全人全程照顧為目標,向 前延伸預防保健,向後銜接長 照服務,推動數位轉型服務, 持續精進健保快易通 | 健康存摺 APP、虛擬健保卡等個人化服務, 同時強化資安,保障個資安全, 持續與各部會、醫界及民眾溝通, 共創健保、醫療提供者與被保險 人三贏永續發展。

國民年金納保對象為未參加軍、 公教、勞、農保的25~64歲國 民,111年底國保被保險人281萬 餘人、核發給付人數196萬餘人、 Taiwan's National Health Insurance (NHI) is well known for its advantages such as accessibility, affordability, convenience and high satisfaction. It has maintained a satisfaction rate of over 90% domestically. As of the end of 2022, the total number of insured people came to 23.78 million and the NHI coverage rate achieved 99.9%. 92% of the medical institutions in Taiwan have contracted with the National Health Insurance Administration (NHIA) enabling high accessibility to healthcare services. Health insurance funding mainly derives from insurance premiums paid by the insured, their employers and the government.

In 2022, the average number of outpatient visits per person per year was 14.26, with an average of 0.13 hospitalizations and a mean duration of 1.24 days. With the aging population and advancements in medical technology, healthcare costs have been increasing. Given the limited resources of the National Health Insurance (NHI) system, continuous evaluation of medical technology and review of payment standards are carried out to ensure fair burden-sharing.

Looking ahead, the goal is to achieve comprehensive and continuous care, connecting forward with preventive medicine and backward with long-term care. This involves promoting digital transformation services and further enhancing personalized services such as the "My Health Bank" app and virtual NHI card. Simultaneously, there is a focus on strengthening data security to safeguard personal information. Continuous communication with various government departments, medical professionals, and the public is maintained to foster sustainable development that benefits the NHI, healthcare providers, and insured individuals.

Taiwan's National Pension Insurance (NPI) was established to cover citizens aged between 25 and 64 years old who do not participate in relevant social insurances for military personnel, civil servants and

基金運用規模 4,523 億元,投資收益率-6.38%。本部將持續檢討國保制度以使制度永續發展。

teachers, laborers or farmers. As of the end of 2022, there were more than 2.81 million insured persons and 1.96 million benefit recipients of NPI, which operates at a scale over 452.3 billion NTD. In 2022, the Return on Investment for NPI came to -6.38% and the Ministry will continue to review the NPI schemes to ensure its sustainable development.



社會福利服務 Social Welfare



因應少子女化、高齡化趨勢及社會結構家庭功能之改變,為使弱勢者獲得適切照顧,以促進全民福祉與權益為使命,規劃及整合婦女、兒童及少年、老人、身心障礙者福利服務政策,結合家庭與社區資源,期達到保障權益、支持家庭、友善社會及精進品質之願景。

110年7月29日核定「強化社會安全網第二期計畫(110~114年)」,透過增資源、補人力,深化「以家庭為中心、以社區為基礎」的服務模式。同時建立政府與家庭共同承擔育兒之協助機制,支持不同家庭之多元需求,養育兒童權利公約,減輕家庭養節,全方位守護兒少福祉;並培力兒少參與公共事務,支持其為自身權益發聲。

另從婦女觀點出發,以充權婦女 能力為主軸,透過各縣市32處婦 女福利服務中心提供婦女各項服 務,並經營管理台灣國家婦女館, 促進國內外婦女組織及公私部門 In order to ensure appropriate care for disadvantaged groups, following the trends of low birth rates, population aging and rapid changes in social structure and family functions, with promotion of the wellbeing and rights of all citizens as the mission, the government has planned and integrated welfare policies for women, children and youth, the elderly, and persons with disabilities. By pooling relevant family and community resources, we hope to realize our vision that provides guaranteed rights, supportive families, a friendly society and progress for all.

On July 29, 2021 the 2nd phase of Strengthening Social Safety Net Program (2021~2025) was approved. Through the addition of resources, we enhanced the family-centered and community-based service model. At the same time, an assistive mechanism has been built involving the government and families working together to shoulder the burden of childcare, support the different needs of different families, adhere to the Convention on the Rights of the Child, ease the burden of childcare on families so as and fully safeguard the wellbeing of children and youth. Furthermore, children and youth are empowered to take part in public affairs, and supported to voice for their own rights.

Also, social services for women are aimed to empower women from their standpoint and the Ministry has been offering diverse services for women through the 32 Women Welfare Service Centers around Taiwan. By operating the Taiwan Women's Center as a platform to facilitate interaction and connection between domestic and international women's organizations and between public and





之聯繫互動,創造及增進婦女公 平發展的機會。

截至111年底,全國老人人口數達408萬人,占總人口數17.56%,為因應高齡社會趨勢,以經濟安全、健康維護及生活照顧等面向推動老人福利服務,並廣布社區照顧關懷據點,促進老人社會參與,以達成活力老化之目標。

全國身心障礙者人數達 119 萬人 占總人口數 5.14%,透過實踐身 心障礙者權利公約,保障身心障 礙者經濟安全、多元連續服務措 施、無障礙生活環境及促進社會 參與等規劃,維護其享有自立生 活及社區融合的權利。 private agencies to create and offer more opportunities for equal development for women.

As of the end of 2022, the population of aged person in Taiwan came to 4.08 million, which accounted for 17.56% of the total population. In response to the trends towards an aged society, MOHW now seeks to promote a range of senior welfare services by focusing on aspects of economic security, health maintenance, living care and social participation. By expanding the number of community care stations and facilitating social participation for seniors, we aim to accomplish the goal of active aging.

There were 1.19 million persons with disabilities which account for 5.14% of total population in Taiwan. By implementing the Convention on the Rights of Persons with Disabilities, the Ministry ensures the economic security, provides diverse and continuous services, improves accessible environments, and enhances social participation for persons with disabilities, ensuring their right to independent living and social inclusion.



社會救助與 社會工作

Social Assistance and Social Work



我國社會救助業務,推動各項措施,如低收入戶補助、醫療補助等,並結合就業服務及脫貧方案,以確保其能得到適切的救助。

遊民收容輔導採「緊急服務、過渡 服務及穩定服務」三階段式服務, 輔導協助遊民生活重建。

本部設置 1957 福利諮詢專線提供 民眾免付費、全年無休之社會福 利諮詢與通報轉介服務。 The social assistance provided in Taiwan involves the promotion of relevant measures, including life assistance for low-income households, medical subsidies along with employment services and poverty alleviating solutions to ensure that people in need will receive appropriate assistance.

Counseling and Shelter Service for homeless people offers threestage services including "emergency service, transition service and stabilization service" to help homeless people rebuild their lives.

The Ministry has established the 1957 Social Welfare Consultation Hotline to provide free consultation and referral services all year round (from 8 am. to 10 pm.) for the public.

本部於災害救助業務主責「災民收容安置」、「民生物資整備」、「災民慰助關懷」等任務,111年各縣市災民收容所設置處所共5,752處,可收容238萬餘人。

依社會救助法第 21 條規定,針對 遭逢急難致生活陷困民眾,由直 轄市、縣(市)政府、公所及本部 核予急難救助,111 年計救助 2 萬 9,067 人次,救助金額 2 億 160 萬餘元。

為管理公益勸募活動,妥善運用 社會資源,95年制定公布《公益 勸募條例》,截至111年底本部核 可576個團體652件,計募得61 億8,840萬餘元。

為建立社會工作專業服務體系, 確保弱勢民眾之福利權利,本部 致力於社會工作人力培育及配置, 友善其執業環境。

為增進社區民眾福祉,凝聚社區 居民意識,本部結合社區發展組 織推展福利服務,擴充社區服務 能量。

為促進志願服務發展,90年公布《志願服務法》,建置「志願服務資訊整合系統」、「重大災害物資資源及志工人力整合網絡平臺管理系統」,管理志工資料及協助救災,111年全國志工人數達110萬5,061人。

The disaster relief services that MOHW provides encompass missions such as "residential relocation for victims," "material preparation for people's livelihood" and "consolation and care for victims." In 2022, there were a total of 5,752 shelters across Taiwan that could accommodate up more than 2.38 million people.

Pursuant to Article 21 of the Public Assistance Act, emergency aid shall be provided by competent authority at the local municipality for under any of the following situations for citizens in need of assistance due to difficult situations. In 2022, the number of beneficiaries who have received relief payment exceeded 29,067, with relief payment amount reaching 201.60 million NTD.

In order to manage the behavior of contribution solicitation activities, and to properly utilize social resources, the government issued "Charity Donations Destined For Social Welfare Funds Implementation Regulations" in 2006. As of the end of 2022, the Ministry has approved 652 donations for 576 groups, with a total amount of NTD 6,188,400,000.

In an effort to establish a professional service system of social work and safeguard the welfare and rights of disadvantaged minorities, the Ministry has committed to the training and deployment of social work manpower and create a friendly environment for relevant works to be performed.

The Ministry has also been working with community development organizations to promote relevant welfare services and expand community service capabilities so as to promote community residents' welfare and foster stronger sense of community affiliation.

To facilitate and encourage the development of volunteer services, the "Volunteer Service Act" enforced in 2001 along with the establishment of the "information integration system for national volunteer services" and "integrated platform system of materials and volunteers for major disasters" to manage volunteer data and assist disaster rescue. In 2022, the number of total volunteers in Taiwan has reached 1.105061 million.







性別暴力防治與 保護服務

Gender-Based Violence Prevention and Protective Services



111年通報性侵害被害人數 8,401 人,83.1%為女性;受理性騷擾申 訴調查案件 1,894 件,成立 1,374 件。性侵害及性騷擾易涉及性別 不對等、權力控制等議題,且社 會大眾常對被害人存在性別偏見 迷思,為增進被害人接受服務之 意願,除透過提供多元適切之處 遇服務,並對大眾進行相關防治 教育,同時強化網絡人員專業知 能與處理技巧,確保服務對象之 權益。

另配合強化社會安全網計畫,整 合保護服務、高風險家庭通報及 相關服務體系,本部透過建立集 In 2022, the number of domestic violence victims that have called to report their situation came to 123,741; among all the reported incidents, most fall into the category of intimate violence, with women being the majority of victims (76.5%). To prevent and address domestic violence and protect the rights of victims, the Ministry of Health and Welfare (MOHW) has promoted and supervised local governments to actively develop a variety of victim protection and assistance solutions along with the establishment of relevant service resources and strengthen offender intervention plans while developing preventive service programs. Additionally, education and training efforts are made to strengthen the professional competency of service personnel. Collaborating with the Strengthening Social Safety Net Program, the Ministry will ensure task division between public and private departments and mechanisms for collaboration to expand the domestic violence protection network's functions to improve the efficacy of case processing and deepening the services.

In 2022, a total of 8,401 victims of sexual assault have reported their cases and 83.1% of the victims were women. The number of sexual harassment complaints received by relevant units and organizations came to 1,894 and 1,374 cases were established. Sexual assault and sexual harassment tend to be tied to issues of gender inequality, power control and so forth and the general public tend to have misconception and gender biases towards victims of sexual harassment and assaults. In order to help victims become more willing to receive assistance through our services, in addition to providing diverse and appropriate intervention services and implementing relevant prevention education to the general public, the Ministry has also sought to enhance the professional competence and techniques of service personnel and ensure the rights of service recipients.

In addition, in line with the strengthening of the social safety net program, the integration of protective services, reporting of high-risk 中派案窗口,優化各項保護服務 流程及時效品質管控機制,串接 多樣風險資訊,評估兒少、老人 與身心障礙者之保護及風險因子, 提供多元處遇服務,並依需求積 極布建相關服務資源,以增進保 護服務品質與量能,落實保障被 害人及其家庭之安全與福祉。 families, and relevant service systems, the Ministry has established a centralized case management system. This initiative aims to optimize the processes and time spent to ensure the quality control of various protective services, while integrating diverse risk information. Assessments are conducted to evaluate the protection and risk factors for children, the elderly, and individuals with disabilities. Multiple intervention services are provided, and relevant service resources are actively deployed based on demand, with the aim of enhancing the quality and capacity of protective services and ensuring the safety and well-being of victims and their families.



研究發展與 國際合作

Research, Development and International Cooperation



111 年度衛生福利科技研究預算約 47.2 億元,分別投入三大面向:任 務導向型的實證政策研究、創新及 轉譯研究、衛福資料統計應用。

任務導向的實證研究面向包括民 眾健康促進、食品藥物管理、中 醫藥研發與推廣、精進醫療照護 及政策、強化全民健康保險體 制、傳染病防治與完善福利服務 體系。

創新及轉譯研究面向包括專利技術授權、因應嚴重特殊傳染性肺炎(COVID-19)及推動癌症轉譯研究。

衛福資料統計應用面向包括應用 服務平臺管理、平臺服務量能統 計及推動以數據為導向之生醫研 In 2022, the Ministry of Health and Welfare had 4.72 billion NTD in budget for technological development. It has been spent in three main areas: 1. task-oriented empirical research, 2. development of innovative and translational research and 3. Health and welfare statistics use.

Task-oriented empirical research includes health promotion for people, food and drug management, Chinese medicine research and development and promotion, refining of healthcare and policies, reinforcing national healthcare insurance, infectious disease prevention and control, and improving the welfare service system.

Innovative and interpretation research includes patent technology licensing, response COVID-19, and promotion of cancer translational research.

Statistical application of health and welfare application includes applied service platform management, statistics for platform service efficiency, and promotion of statistics-oriented biomedicine R&D. MOHW further conducted cross-agency (Ministry of Science and

發,本部進一步進行跨部會(科技部、經濟部及本部)健康大數據永續平臺科技政策之規劃合作。

111年5月本部李麗芬次長率「世衛行動團」赴日內瓦爭取參與WHA,以實際行動展現臺灣貢獻健康人權的承諾和決心。期間,臺美召開雙邊會議,美方重申支持臺灣擴大國際參與外,雙方並共同承諾應對未來威脅,同時表達公開透明和及時準確訊息共享的重要性。友邦及理念相近國家也在WHA為臺灣強力發聲。

111年8月本部石崇良次長赴泰國參與APEC衛生與經濟高階會議,分享臺灣從SARS以來建立之防疫經驗。另,我國領導「數位健康次級工作小組」彙整各經濟體之COVID-19數位防疫措施,並公布「數位科技防疫報告」於APEC官網。

醫衛新南向政策持續深耕7個新南向重點國家(印度、印尼、泰國、菲律賓、馬來西亞、越南及緬甸),111年新增三中心,發展成「七國十中心」,並透過「以醫帶產」模式組成「醫療國家隊」,推動臺灣醫療產業國際化。

推展醫療服務國際化方面,輔導 醫院開拓創新經營策略,展現我 國醫療服務的優勢,帶動生技等 產業發展,提升國際競爭力。 Technology, Ministry of Economic Affairs, MOHW) health big data sustainable platform technology planning cooperation planning.

In May 2022, MOHW Deputy Minister Li-Feng Lee led the "WHA Action Team" to Geneva, striving to participate in the World Health Assembly (WHA) and demonstrate Taiwan's commitment and determination to improve the right to health by practical actions. During this period, Taiwan and the United States held a bilateral meeting, with the US reaffirming its support for Taiwan to boost international participation. Both sides also pledged to address future threats and emphasized the importance of open, transparent, and timely information sharing. Taiwan's diplomatic allies and like-minded nations also strongly voiced their support at the WHA.

In August of 2022, MOHW Deputy Minister Chung-Liang Shih attended the APEC High-Level Meeting on Health and the Economy in Thailand and shared Taiwan's built up anti-epidemic experience from SARS. Furthermore, Taiwan-led "Digital Health Sub-Working Group" compiled digital anti-epidemic measures from various economies and published the "Summary Report of APEC Economies' Digital Policy Measures to Combat COVID-19" on the APEC website.

Healthcare New Southbound Policy continues deepening Taiwan's engagement with the 7 NSP priority countries (India, Indonesia, Thailand, the Philippines, Malaysia, Vietnam, and Myanmar). In 2022, three new centers were established, expanding the "7 Countries, 7 Centers" to "7 Countries, 10 Centers" program. Through the "healthcare-led industrial development" model, a "Medical National Team" was formed to promote the internationalization of Taiwan's healthcare industry.

In the area of promotion of internationalization of medical services, guidance is provided for hospitals to develop innovative operating strategies to display the advantages of medical services in Taiwan and drive the development of the bio-tech and other industries to increase international competitiveness.



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