## Statement in the 64<sup>th</sup> World Health Assembly Chinese Taipei (中華台北) May 18, 2011

Mr. President, Madam Director-General, Health Ministers, Distinguished Guests, Ladies and Gentlemen,

It is a great honor for me to address the World Health Assembly. I first would like to extend my congratulations to Mr. President on your election. I would also like to express my sincere appreciation for Chinese Taipei (中華台北) being invited to this year's Assembly.

We join the rest of the world in sharing deep concern about the damage caused by the natural disaster in Japan. The nuclear accident in Fukushima highlights the importance of global cooperation and solidarity. The WHO/IHR plays an indispensible role by weaving a sound network for responding to public health emergencies. We hope that all parties concerned can make the best use of this platform to exchange information and strive as a single entity to safeguard the wellbeing of all mankind.

The WHO attaches great importance to the construction of healthcare systems. In 1995, we launched a comprehensive and universal health insurance program. This insurance programme, with an affordable premium and using the smart IC card, covers 99% of the population with near 80% satisfaction rate. It has helped extend life expectancy from 74.5 years in 1995 to nearly 79 years in 2009. Currently, medical insurance expenditures account for only 6.9% of our GDP, lower than that of OECD countries. In recent years, the premium scale has been adjusted to make the payments fairer to everyone. We welcome all opportunities to share with others our experiences in this regard.

We also place high priority on the prevention and control of non-communicable diseases (NCDs). Over the years, we have developed a comprehensive surveillance system for NCDs and related risk factors. We provide universal coverage for NCD detection and control, including population-based screening for major cancers and management programs for chronic diseases. This year, we are working on legislation to promote health and nutrition. We also have launched a campaign for reducing obesity with the goal to inspire 60 0,000 people to lose 600 metric

tons of excessive body weight in one year.

In 1997, we passed the Tobacco Hazards Control Act, which has been updated over the years to parallel the WHO's FCTC. Since 2009, smoking has been banned in nearly all indoor public areas and working places. Our environmental tobacco exposure rate is merely 7.2%, and 90% of the public is satisfied with this policy. Smoking cessation counseling is available in 97% of all urban areas. In 2003, we set up the first helpline for smokers in Asia. We hope to attend FCTC-related technical meetings, in order to better contribute to the international community's efforts to combat tobacco-smuggling.

With regard to public safety and health matters, road safety continues to be a focus of our concern. Motor-vehicle accidents used to be our third major cause of death. Given the large number of fatal injuries, we passed a law in 1997 requiring that all drivers and riders wear a helmet. This has saved at least 3,000 lives each year, making motor-vehicle accidents currently the sixth major cause of death. Early this year, a new regulation was passed requiring backseat passengers in cars to wear safety belts, which should

further reduce fatal traffic accidents.

Mr. President and fellow Health Ministers, Chinese Taipei reiterates its commitment to taking part in the WHO's endeavors in promoting international health cooperation. We seek to not only benefit the people in Taiwan, but also help strengthen the global disease-prevention network. It is a great pleasure for me to have this chance to discuss issues of mutual concern with the other participants and share with them our experiences, knowledge and expertise.

In closing, I wish to thank the Director-General for inviting Chinese Taipei to the WHA for the third time. I am sure that, with our concerted efforts, this practice and related arrangements, which may be called "WHA model", will be reflected to other WHO meetings, mechanisms, information sources and documentation, so that relevant procedures and terminology will be consistent with the practice in the WHA.

I wish the 64<sup>th</sup> WHA a resounding success! Thank you.