
Tobacco Excise Taxes (The Health and Welfare Surcharge) and Health Promotion — Taiwan's Experiences

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2011 Taiwan Health Profiles

Total population	23 m
Population \geq 65 y (%)	11
Crude birth rate (‰)	8.5
Crude death rate (per 10^5)	660
Total fertility rate (‰)	1.15
Life Expectancy (m:76.1 F:82.6)	79.2



Source : 2011 Statistical Yearbook of Interior, R.O.C

Tobacco Excise Tax (Health and Welfare Surcharge)

■ Background

In 1998, NGOs started the campaign of levy on tobacco taxes. In 2000, the Tobacco and Alcohol Tax Act was passed and started to levy on tobacco taxes in 2002.

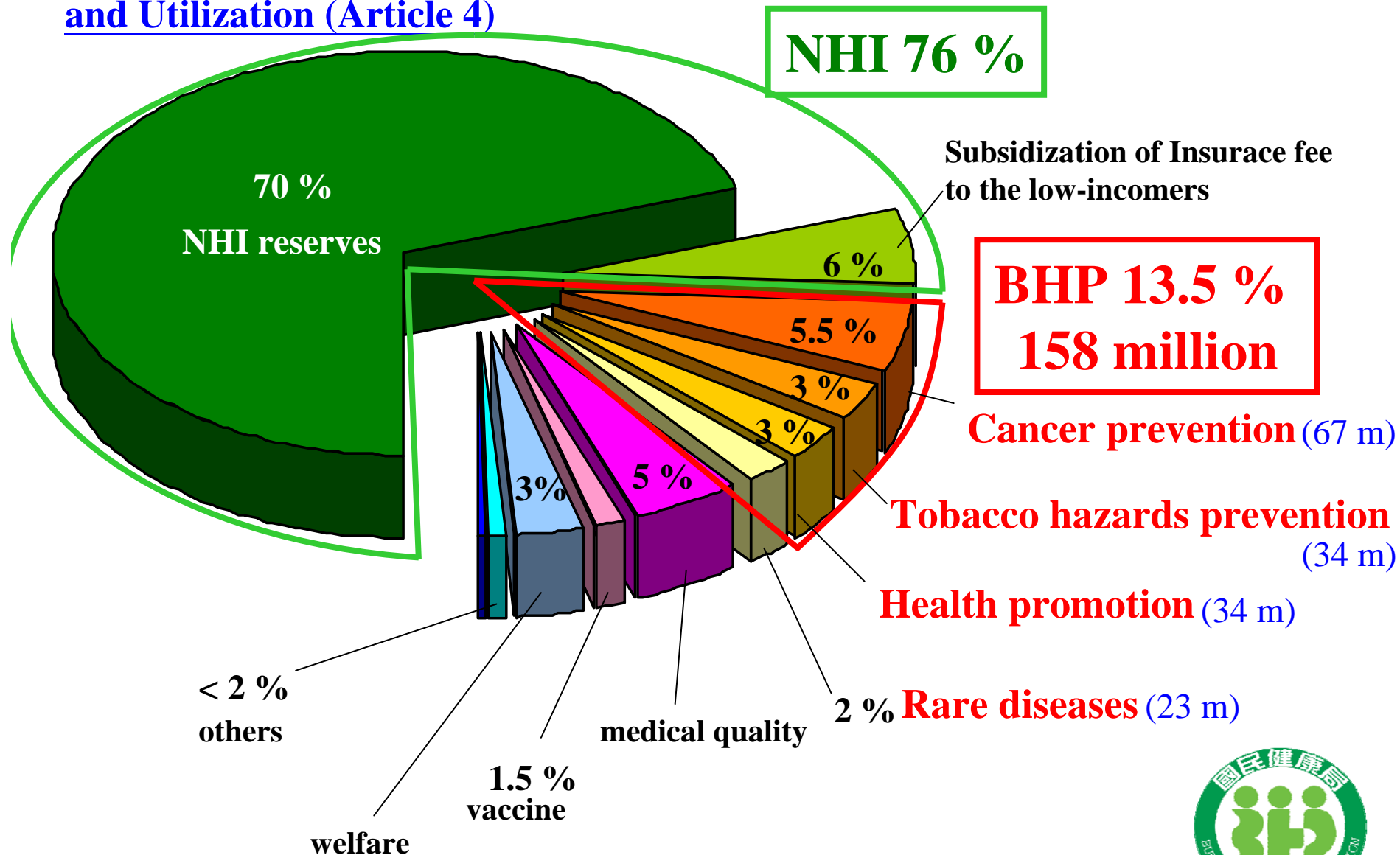
■ Legislation

Year	Content
1997	Tobacco Hazards Prevention Act was passed and implemented
2000	Tobacco and Alcohol Tax Act was passed
2002	Tobacco Excise Tax US\$ 0.17 per pack
2006	US\$ 0.33 per pack
2009	US\$ 0.67 per pack



Distribution of the Tax Revenue

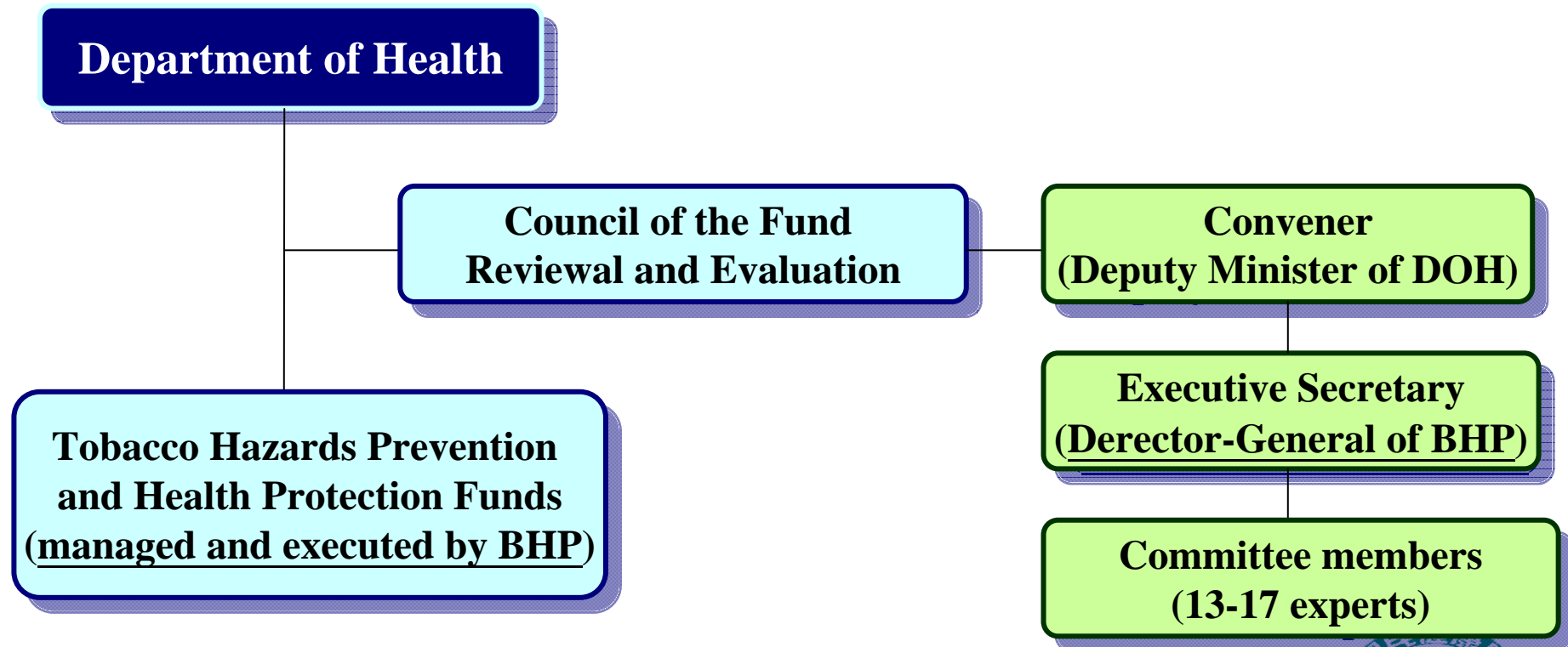
The Regulation of the Tobacco Health and Welfare Surcharge Distribution and Utilization (Article 4)



BHP Portion of the Tax Revenue

Tobacco Hazards Prevention and Health Protection Funds

Governance of the Fund



Goal and Policies of BHP

■ Goal

- To construct a supporting environment for health by mobilizing the communities and promoting public health

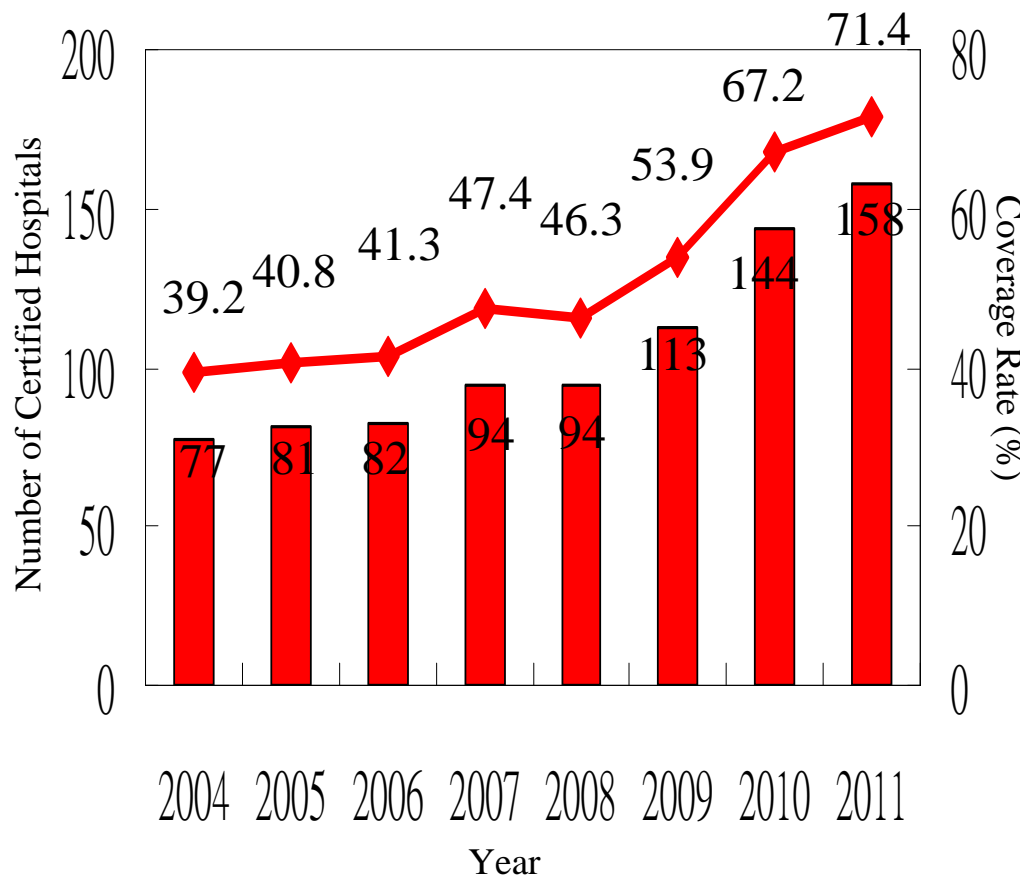
■ Policies

- Healthy birth and growth
- Healthy aging
- Healthy lifestyles and community development
- Healthcare for the underprivileged
- Health surveillance systems

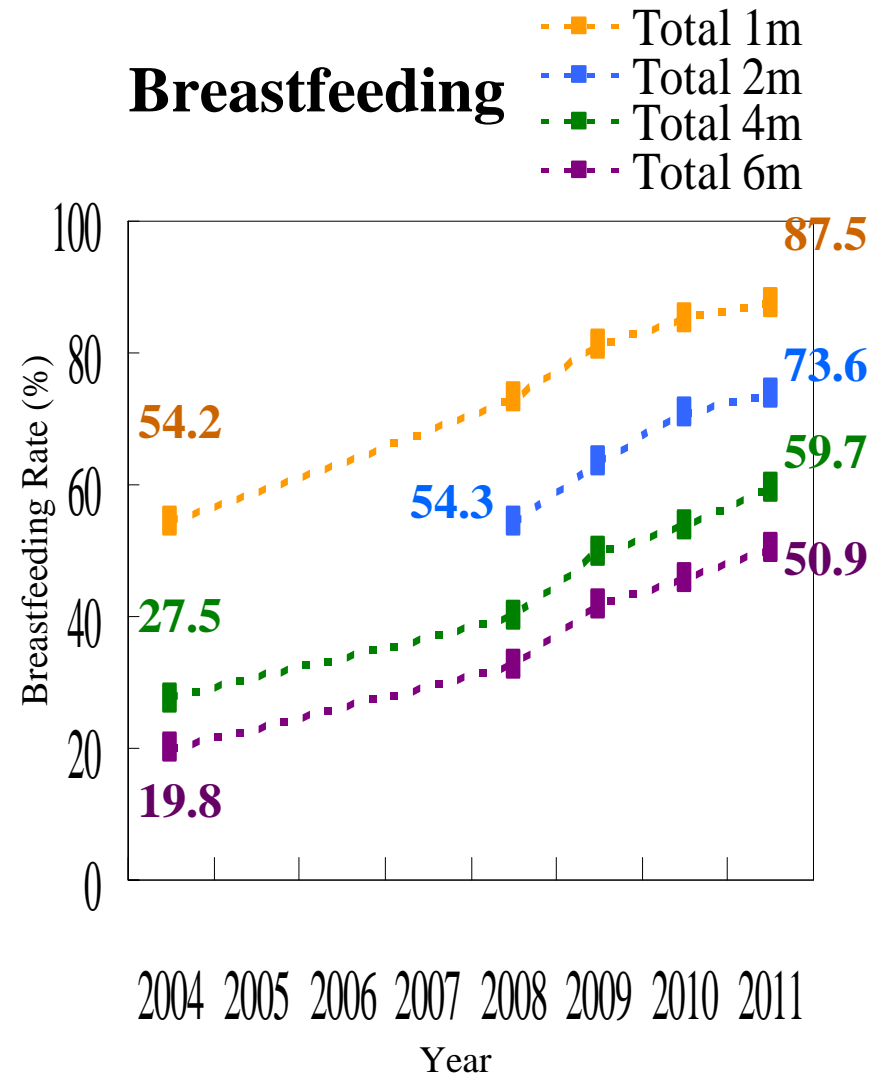


Healthy Birth and Growth

Baby-Friendly hospitals



Breastfeeding

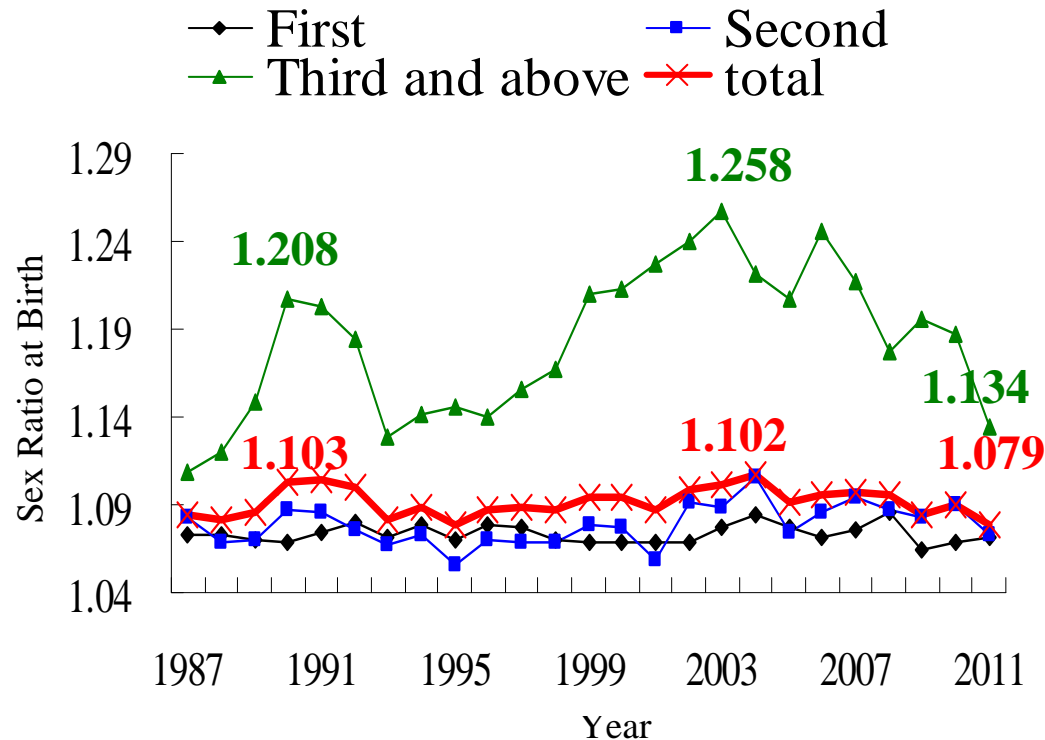


Source : Bureau of Health Promotion, Department of Health, Taiwan, 2004-2011



Healthy Birth and Growth

Sex Ratio at Birth



SRB dropped to 1.079,
the lowest in the past 16 years in Taiwan.

Source : 1. Ministry of Interior, 1987-2003

2. Bureau of Health Promotion, Department of Health, Taiwan, 2004-2011

10 free prenatal exam.

Genetic services
(inclusive of genetic
counseling)

Preventive health exam.
for children
(vaccines, development,
vision, hearing, oral health
screening)



Healthy Aging

Cancer is 1st leading cause of death since 1982.

Standardized mortality 131.6/10⁵

Standardized incidence 347/10⁵

Cancer screening services

Cancer	Target	Tool	Interval
Cervix	Women aged ≥ 30	Pap smear	1 y
	Women refused Pap Smear	HPV test	6 y
Breast	Women aged 45-69, 40-44 with family history	Mammography	2 y
Oral cavity	Betel-quid chewers or smokers aged ≥ 30	Oral inspection	2 y
Colo-rectum	People aged 50-69	i-FOBT	2 y



Healthy Aging

Age-Friendly Cities creative plan and initiatives



AF pharmacy



AF facilities

temple, convenient store, real estate agency provide rest room, free emergency call, seats...etc

桃園交通新亮點:開創友善長者的交通環境

由 Andy.Ao 於 四, 2011/10/06 - 12:07pm 發表
閒聊話題 國內新聞 交通 3m 智慧號誌系統 桃園 桃園縣 銀髮族



AF transportation environment

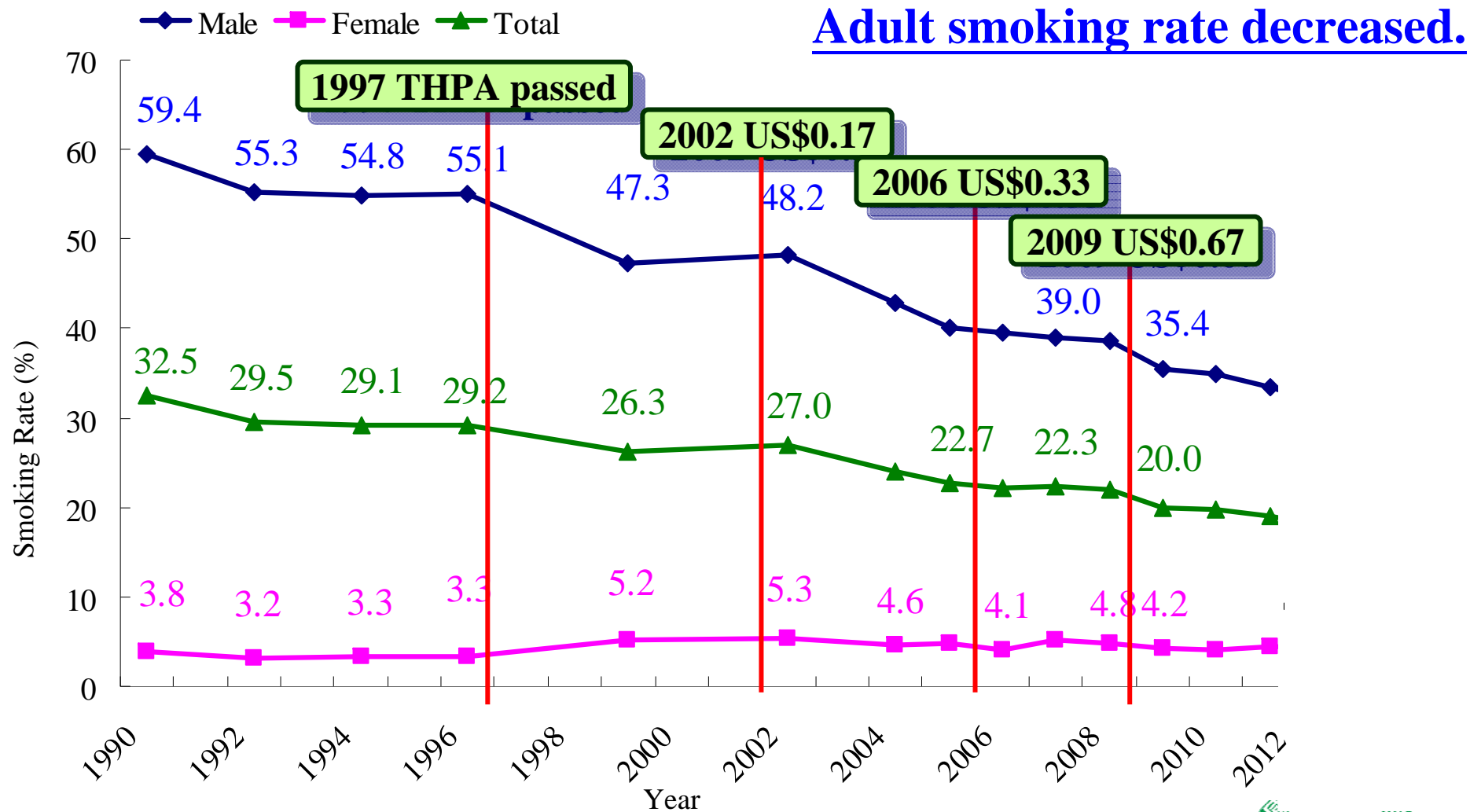
LED light on the road and reflective arm band for the elderly



AF hospital



Healthy Life and Community Development

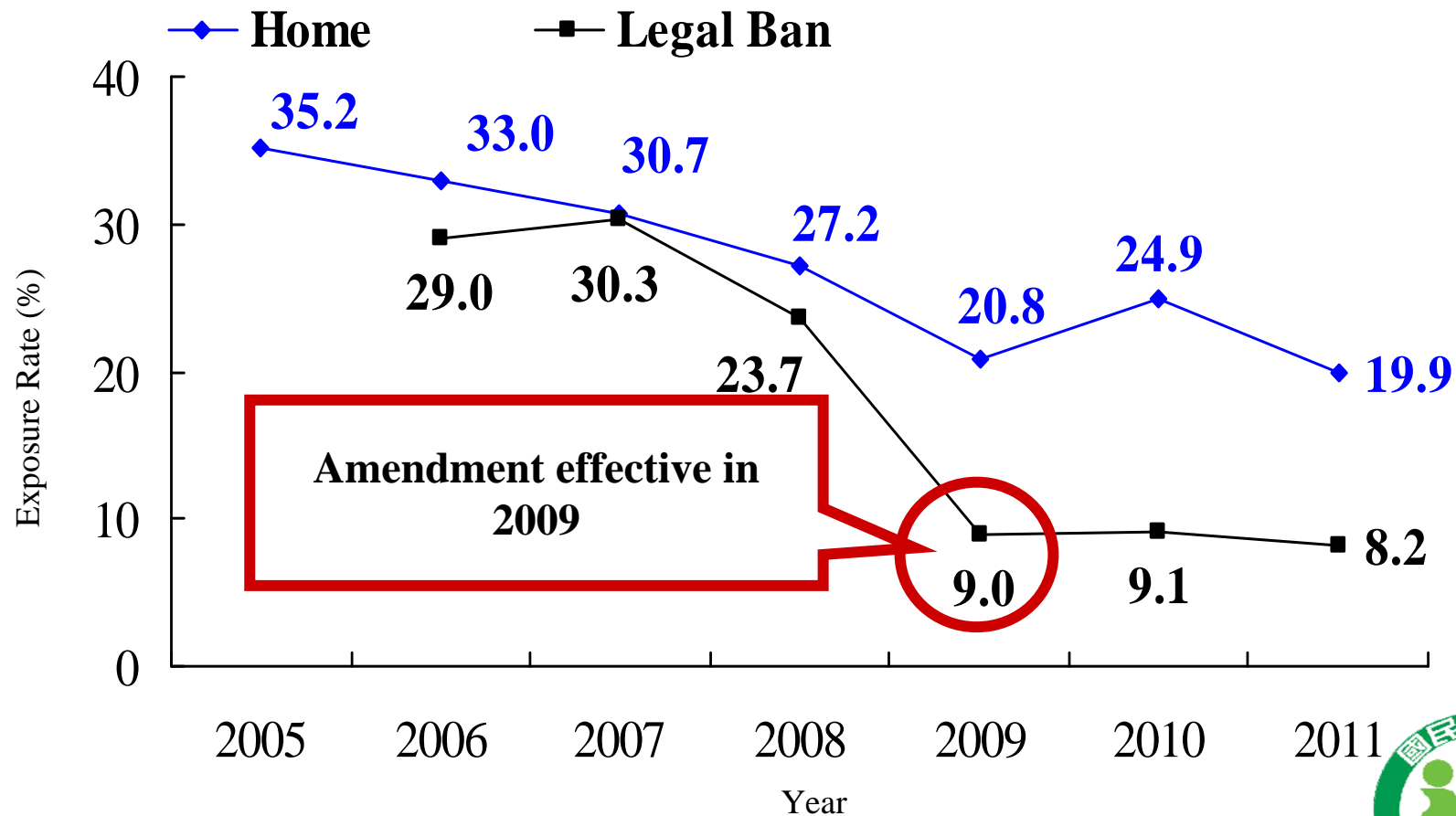


1. 1973-1996(TTLM) ; 1999(Lee etc) ; 2002(BRFSS) ; 2004-2010(GATS)
2. Smoker: current smoker, more than 100 cigarettes
3. HWS: health welfare surcharge, THPA: Tobacco Hazards Prevention Act



Healthy Life and Community Development

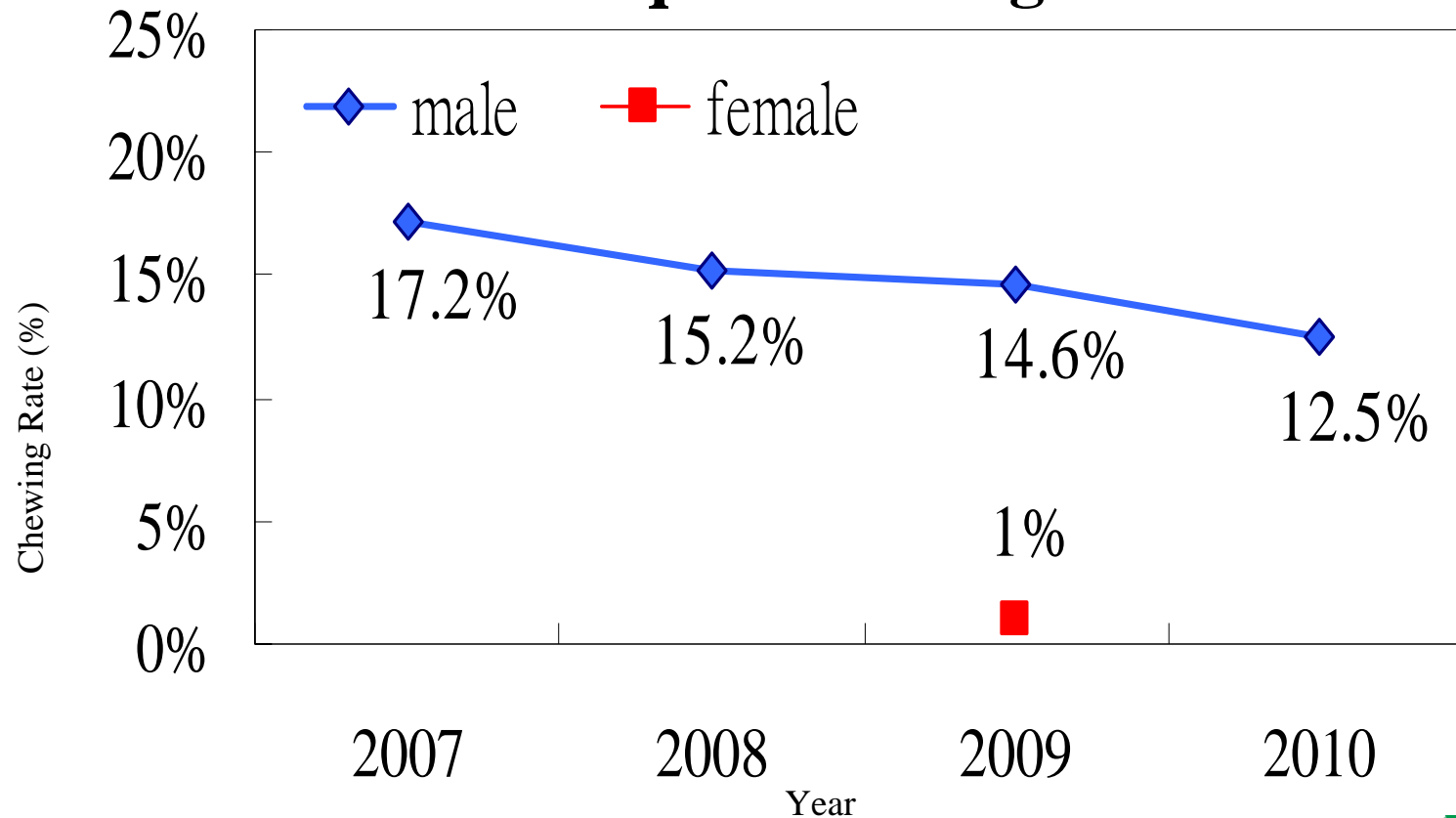
Second-hand smoking exposure decreased.



Healthy Life and Community Development

Oral cancer: 4th cause of death in male cancer

Betel-quid chewing rate



Areca quid chewing rate: referring to those who have done it within the past 6 months

Source : Behavioral Risk Factor Surveillance System Survey.



Healthy Life and Community Development

Weight loss campaign in 2011

Estimated target	No. of participant
660 tons	724,564



Actual weight loss
1,104 tons

President Ma



Priminister



Healthy Life and Community Development

Healthy Settings

- **Healthy Cities:** 19 cities and counties joined in the Alliance For Healthy Cities.
- **Safe Communities and Safe Schools :** 19 communities and 46 schools were approved by the WHO International Community Safety Promotion Center.



**WHO Collaborating Centre on
Community Safety Promotion**



- **Health Promoting Hospitals (HPH):** 76 Hospitals have joined the WHO International Network of Health Promoting Hospitals.



WHO Collaborating Centre

for Evidence-Based Health Promotion in Hospitals



Healthcare for the Underprivileged

Rare Diseases Prevention and Pharmaceutical Act

1. 5th in the world to legislatively protect these patients
2. 1st nation to cover rare disease prevention and orphan drugs
3. Subsidize the costs not covered by insurance and home-care equipment; special nutritional supplements also covered.

BHP provides:

1. Oral care for people with physical or mental disabilities
2. Preventive services to aboriginals aged 55-64 annually
3. Health care for oil disease patients

Challenges and Future Prospects

- **Allocation of the tax revenue**
 - Distribution and utilization of the fund – not all for health promotion.
- **How to evaluate the outcomes?**
- **How to work together with other intersectoral partnerships?**
- **How to expand financial resources?**



Expected Key Performance

Indicators	2012	Goals
Age-Friendly City	20	2016: 22
Age-Friendly Care Institute	35	2016: 120 2020: 140
Cancer Mortality Rate (per 10⁵)	2010: 131.6	2016: 119.3 2020: 106.0
Adult Betel quid chewing rate	6.0%	2016: 5.5% 2020: 4%
Adult Smoking rate	18.0%	2016: 15% 2020: 10%
Adult Physical activity rate	28%	2016: 38% 2020: 52%



Thank You

**Cherishing Life,
Promoting Health**

