

Keynote Speech

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Moderator :

Yung-mau CHAO (趙永茂) / Emeritus Professor, Dept. of Political Sciences,
National Taiwan University, Taiwan

Keynote speaker :

Shu-ti CHIOU (邱淑媿) / MD, PhD, MSc

Topic:

The Issues and Strategies of the Epidemic Prevention Measures during/after the
Epidemic Moderator

Speech Materials of Dr. Shu-ti CHIOU

Live Streaming Video on Youtube

Chin-chang LIN (林晉章 / Honorary President of Taiwan Councilors Forum) :

Now, it's 3:40. We are about to enter the next session, the keynote speech of the meeting. Now, we are very honored to have invited the Emeritus Professor of National Taiwan University, Professor Yung-mau Chao as the moderator. Now I'll pass the mic to Professor Chao.

Yung-mau CHAO (趙永茂 / Emeritus Professor, National Taiwan University) :

I would like to thank our chairman and our honorary chairman. On site, we have participants, friends and distinguished guests from 8 different countries, and local councilors. Good afternoon!

The next keynote speech, as you can see, Professor Chiou is already online. We are very happy that you'll be here to act as our keynote speaker. Let me briefly introduce Professor Chiou. Doctor Chiou graduated from one of the best medical universities in Taiwan, Yang-Ming University. Also, she received her PhD at National Taiwan University on epidemic studies.

Doctor Chiou is a famous doctor as well as a prestigious professor. She has done extensive studies in epidemiology. Doctor Chiou also served in the local government in Yilan City and Taipei City. She had worked as the Director of the Health Promotion Administration of Taiwan, so, she is able to combine theories and practices. Doctor Chiou has also attended numerous international meetings. She helped Taiwan get through the crisis of SARS and has been paying close attention to the pandemic prevention activities of COVID-19 during the past two years. We are very honored to have invited Professor Chiou to be here. The topic of her presentation is Building

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Forward a Better Future Beyond the Pandemic. And I believe she is the perfect speaker for this topic with her extensive experience serving in local and central governments as well as her experience and studies expertise in academia. Please welcome Professor Chiou for the keynote speech.

Shu-ti CHIOU (邱淑媿 / MD, PhD, MSc) :

Thank you, Professor Chao, for this kind introduction. Thank you to Chairman Wang and Honorary Chairman Lin for this invitation. And I'm also very happy to see the local councilors, who are extremely concerned of the welfare of the public. As introduced by Doctor Chao, I'm personally involved in the pandemic prevention of SARS. I am not serving in the government now, but I've attended many international organizations. Actually, last year, I've attended meetings of the international union for health promotion and education and other international organizations. So, we have some observations about the global pandemic situation. Doctor Chao wants me to talk about what we should do beyond the pandemic. Although the pandemic is not over and damages has been done in the previous waves, we believe that one day the pandemic will pass. And what have we learned in the process? How to prepare and build forward a better future beyond the pandemic? First, I will talk about pandemic prevention, starting with the impacts caused by the pandemic. Impacts on health and 8 major systems. I will talk about them one by one: healthcare, long-term care, education, gender equality, work, environment building, economy, as well as government's role.

I will report first on the foregoing and later on, I will talk about the importance of prevention as WHO mentioned previously. We hope that in the future, we will no longer have such a severe global pandemic. So, I will share my insights on what we have learned from COVID-19. As I've mentioned, I'm not working in the government right now, so my perspective may be different from that of Minister Chen's (陳時中). But even if it's different, this proves that we can accommodate different perspectives.

Okay, let's first talk about the impact brought by the pandemic, the impact on health. This is the data from WHO. These are the new confirmed cases per week. It seems that the area with the highest number of confirmed cases – is it the Americas, Asia, or Africa? No. The region with the highest number of new confirmed cases is Europe. It has been like this last year. And now Europe takes up about 68.8% of total confirmed cases. By the end of November, the pandemic has caused more than 5 million deaths. Europe, as we know, is a very developed area and has a very advanced medical system. But the death rate, the new confirmed deaths, is extremely high. I should have let you take a guess, but I've already shown it on the slide. It's 61.4%. So, the

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performance of Europe. Are you satisfied to see this kind of performance by Europe? I guess not. What exactly happened to the world? Let's compare Europe, Asia, and Africa. This is the number of vaccine doses per one hundred people. Europe has much higher number than Africa and Asia. However, the death rate of Europe is also much higher than Asia and Africa. So, the vaccination rate, it seems, is not related to the number of deaths. Yes, vaccination is important. But taking vaccinations is not the only solution.

And if we divide the countries by income level. Those countries with higher or upper-middle income, of course, have higher vaccination rate. However, the number of deaths is still higher in these countries. So, there are so many countries who thought that by increasing the vaccination coverage, we will be able to live together with the virus. But that's not the case. Singapore and South Korea are the two countries which people often refer to as role models in terms of vaccination. Singapore, with a vaccination rate of 80%, thought they could live together with the virus, but the death rate peaked afterwards. And same in South Korea. I have to remind you that vaccine is like an umbrella. If the rain is heavy, you will still get wet. Having an umbrella is better than having no umbrella at all. If the rain is too heavy, you need to have other measures such as border control. With or without umbrella, if you are under the roof, the roof means the border control, you will be safe. You will not get wet. But vaccine alone will not prevent you from getting affected 100%.

In developed countries like the United States, the cumulative deaths per million is 273 times the number of New Zealand. It's not 20 percent. It's not 2 times. It's 273 times. Some said it may be due to culture. But you see, in Scandinavian countries, Sweden's number is much higher than other countries' such as Finland and Norway, which are very close to Sweden.

The Independent Panel for Pandemic Preparedness and Response Committee of WHO has been keeping records of all these numbers. At least 17,000 health workers died from COVID-19 during the pandemic's first year. Now, the global economy shock has been its deepest since the Second World War. Also, people are facing the largest simultaneous contraction of national economies since the Great Depression of 1930s. We have 90% of students who cannot go to school. We also have educational and economic impacts resulting in 10 million more girls at risk of early marriage because of the pandemic. Gender-based violence support services have been fivefold increases in demand. And we have over one hundred million people who will be pushed into extreme poverty. So, the world has regressed because of the pandemic. You can see that we have infections, and we have aftereffects. Even if you weren't infected, you

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will still be psychologically and mentally affected by human rights and ethical issues such as isolation and loneliness. These are the issues that we have been discussing. It's not just impacts on health. We need to also ask questions about the social and economic effects such as domestic violence, education, poverty, and hunger. And when we are rehabilitating our society, these are some of the demographics that we have to focus on. For example, in a rich society like the UK, they realized that men are directly affected by the pandemic, but females are indirectly affected by some of the measures preventing the pandemic. So, these are different factors affecting different genders. When we have an outbreak of infectious disease, some people are under high risk factors such as age, obesity, and smoking habit. People living in different areas are also exposed to different risk factors. People living in remote or rural areas have a higher percentage of severe cases and infections. So, the impacts are different and affecting different demographics.

It's not just the infection. You also have aftereffects of the infection. If you are infected, 43% will have aftereffects, even early dementia and cardiovascular disease. And for those who have been hospitalized, 60% will have aftereffects. Also, this year, the International Dementia Convention are warning the world that there is a hidden risk of our population having early dementia, with or without vaccination.

Of course, when you are fully vaccinated, you won't be severely infected. But once you are infected, you'll still get these aftereffects.

So again, we need to be vaccinated. But we cannot rely only on vaccines. And even if you are infected and you are not a severe case, eventually you will be affected by this virus. You have higher risk of cardiovascular disease. You will also affect other patients with other disease like cancer patients. So, you can see the x axis, the mortality rates are all on the rise. And we are also reducing the life expectancy, even in Sweden, up to 6 months. The entire population's life expectancy is shortened by over 6 months.

So, there's a spillover of this impact. In Taiwan, during the peak of the pandemic, we had a 70% more mortality rate compared to the same period last year. And altogether this year, we have over 5,500 more deaths than last year. But people dying from the pandemic was only 800 something. And that's how it's going to affect elderly citizens. If we do not have a social security network, we cannot take care of people who are without income, low-income families, and elderly citizens. And sometimes, when they already have a doctor's appointment, they will be postponed because of the pandemic and pandemic prevention.

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And, it's not just in the United States or in the UK. In some other countries, even though the outbreak is not that serious, some older people are afraid to go to hospitals. And that also affect their treatments. So, you need to look at the statistics comprehensively. It's not just about infections. It's not just about mortality rate. You should examine the entire health statistics and data to see how we can patch up the holes to make improvements in different areas.

And we also have elderly citizens who need to be taken care of on a day-to-day basis. However, they cannot receive any care. In the UK, the elder citizens have over 90% of vaccination rate. But in New Zealand and other countries where these people didn't get vaccinated as early as possible. You can see there are impacts on different levels and in different aspects.

So, who will be affected more? Elderly citizens. What kind of elderly citizens? You can see that the Asians and Caucasians are not affected as much. But if you are poor, the effect is greater. Even if you're Asian. If you're an elderly citizen, or if you're poor, you would be affected more. Income is a factor. Race is a factor. For African Americans and Latin Americans, they tend not to get good medical care. For Asian men, who are better protected, they are not affected as much.

So, for elderly citizens in long-term facilities, they are more vulnerable, and you have to pay attention to their mental health and psychological health. Financial health is very important as well. We need to pay attention to that. Also, for the vulnerable elderly citizens, they can also contribute to our society, we should also involve elderly citizens.

And when we provide care for elderly citizens through a contactless way, we need to respect them and also pay attention to their human rights as well as their mental health. Even though we keep our physical distance, we need to continue to involve them socially. We need to overcome these physical barriers to reach out to them, to involve them, and to engage them. In terms of elderly citizens benefits, we need to reconsider whether we have sufficient resources, social security, or a patient plan to respond to these impacts within our health system. We've already talked about some of these actions that we need to pay attention to.

The impacts of the medical system. First of all, for patients who does not have COVID, there's squeeze-out effect. When we have insufficient manpower, it's important for us to protect our medical professionals, and we have to make arrangements for their workload. For these medical professionals who are taking care of patients, we need to provide them with full support, so they won't bring the virus

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home, and to make sure they have enough time to spend with their family. We have to protect their family and children. So, these are some of the things that we need to take care of because the medical professionals are not just heroes or angels. They are vulnerable. They might become victims of the system, and virus as well. They are protecting us on the first line, so we need to provide them with full backup.

We need to utilize technologies to help the medical professionals, and we need to have quality statistics and reporting/alerting systems. We need to provide them with personal protective gear. Because when they go in and out of different wards, they need to put on protective gear, and that's a lot of hassle. So, if we establish a smart system, we can utilize technology that helps us constantly monitor our patients. They have smart diagnoses; they monitor the blood oxygen, the breathing, and the heart rate of patients. This helps to lessen the burden of medical professionals. We should classify our hospitals and carry out patient triage system. Of course, this requires money. We need to be smart with how we allocate our budget, and we need to cooperate across different agencies, facilities, and hospitals.

We can utilize social media and the internet to reach out to our patients and provide information. We can also utilize technology for remote medical services. And we should also narrow the digital gap between different generations, especially, to help the elderly citizens to access the Internet.

We also have to pay attention to our human resources, because we have seen a lot of females quit their jobs. And in the future, how can we help them to go back to workplace? How can we ensure gender equality in workplace? How can we ensure equal opportunities?

Also, in terms of vaccinations, should we have a family doctor system to effectively reach out to the community? For long term care, we should also cooperate with family doctors, so that they can identify elderly citizens with needs. And we can identify high-risk individuals without social security network, people who live alone, to identify the problems as early as possible. Then, when you carry out remote medical services, you will know your targets, you'll know who needs your service. And you know through which channels to reach out to them.

The WHO provided us with some simple tools. For example, we can help elders to know how to maintain their health. Sometimes, they are afraid to go out; but if they don't go out and exercise, it will affect their health as well. We should teach them on how to maintain physical and mental health, because they have this sense of loss and loneliness. We should also pay attention to their mental health.

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Because of the impacts on education, schools are closed. Students were being prevented from getting educated. They lost time to be educated. And their performance has lowered by 3%. That's on average. But which kind of students will have worse performance? For example, we have the urban-rural gap and wealth gap, so you can see that the more disadvantage students will be affected more. What's more, according to this UK institute, Educational Policy Research Institute, if we are making up for the lost time, we need to prolong the semesters. Not just that, we need to provide students additional help, and we need to pay attention to student's mental health. For schools with more underprivileged students, they should get more funding because these students are more vulnerable to the impacts of the COVID-19. They were falling behind, and they were left behind. Their families could not help them catch up. And that's why we need to invest more resources to help these people. And for teachers, we should support them with their continued professional training. For example, acquainting them with knowledge to utilize technology so that they can reach out remotely to more students.

Therefore, we have a so-called Remote Learning Readiness Index. We want all students to have the resources and access of remote learning system. And this kind of remote learning system can effectively provide the required or necessary education. We have this set of indicators, including family resources. They investigate community resources, family resources. In different countries, obviously, the situations are different. For example, in some families, they don't own a computer, only a TV set. So, in terms of remote learning, the channel for them to get remote education is TV. So that's why when we teach remotely, we need to also take into consideration of TV as one of the channels.

In terms of remote learning, we also need to consider the parents; policy-wise, related policy, related political support and training of teachers and so on. Next, the risk evaluation of the education system. Taiwan is trying to expand the capacity and infrastructure of remote education, and this is something that we need to prepare well. So, from school, teachers, to students, student communities, digital literacy is reducing the digital gap. And while we provide these facilities, we will try not to so-called double deprive the rights of these students. We want to mend the digital gap instead of enlarging it. And a lot of people thought that it would be better to go back to the schools, but the communities and the schools need to prepare it well. And of course, the learning environment also needs to be taken care of. If there is a digital gap, how can we provide additional digital assistance?

Another issue is the pandemic prevention at schools, including the social bubbles for

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students and teachers. Since air transmission is considered a very important transmission channel of COVID-19, improving the ventilation of air-purifying facilities are critical to the student's health. And the ventilation in bathrooms is also very important, but we will not talk too much about that.

Male and female have been impacted in different ways. While males are affected by infection itself, females are affected by the pandemic prevention measures. If the female in the family is also working, she will be affected in terms of her work. And there are certain occupations that tend to be impacted more by the pandemic. So, the economic impact or the work impact have become more severe for females. And females tend to work from home for longer hours than males do. The percentage of females returning to work after the pandemic is also lower than that of males.

Domestic violence is another issue. In addition to that, if women need obstetrician service or they are in their pregnancy, their rights and benefits should also be protected. While collecting data, we need to have the related data in a more comprehensive manner to visualize these problems so that we can take proper measures.

And for work, activities such as internet communication, food delivery service and online shopping seem to have increased. And the relations between the employers and employees have also changed. We see a bipolar situation in the employment market. High skill, high income families have higher demands. But low skill, low demand is the other end. Those in the middle are being affected the most. So, this is the situation that we see. How do we prevent those in the middle being pushed to the lower end?

Therefore, the skill training arrangement is also very important. Sometimes, making money is not enough. Those who make a lot of money may also have a higher occupational risk. So, the matter of the employee benefit is something we have to pay a lot of attention to. And while preparing for the future, we need to pay attention to the relation between the job market and employees. How can we provide basic protection for the workers and plan for the new employee-employer relations? The current Labor Act may not be able to cover the situation that we see nowadays.

In terms of environment building, we will come up with new ideas to cater to the needs of pandemic prevention, and to respond to climate change. Aging population is also a critical issue. I would urge the government to take all these factors into consideration. We need to have a total solution so that we will be able to use it as the basis when building new community residence in the future.

Also very important is the economy. Some people would say that you either get sick

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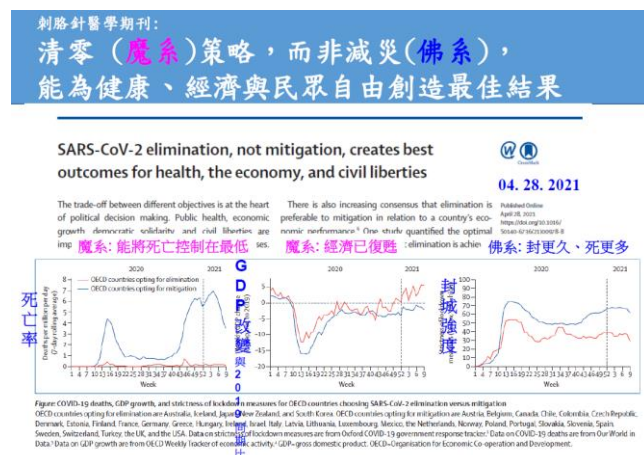
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and die or starve to death. So, people would rather choose not to starve to death. But data shows that this is the wrong description. Those countries would choose to open their economy while having lots of confirmed cases. But for those countries who try to prevent people dying from the disease will have a better economy performance. We want to choose the right way of sustainable development. And it has proved that this is the right path under the pandemic. Whether to open the border or not, it really depends on the situation of the pandemic. If we open the border too early, the economy will be affected.

For economy relief, of course, you need to support the families and sectors that were affected the most. However, the cash coupon policy in Taiwan is too complicated, and it only benefitted the sectors that were already benefitting from the pandemic. So, it caused more inequality. That is not something that we want to see.

So, this is the chart, in which you can see those with higher death rate are the ones whose economy damaged the most. As you can see, those with higher death rate basically used zero COVID (elimination-red line) strategy.

Another strategy is mitigation (blue line). As you can see, the death rate of the blue



line goes really high and their economy is not doing well. The impact of the pandemic (red line) is not as bad as the other countries choosing mitigation.

So, elimination, not mitigation, creates the best outcomes for health, economy, and civil liberties. It is playing an active role in recovering the economy.

As you can see, the economy has recovered significantly. In Taiwan, people are able to go around in some areas, sometimes even without a mask.

So, the red line, the elimination strategy, seems to be harsher. However, it provides less restrictions for the civilians.

The role of the government becomes very important. How to really meet the demand of the public? Civil organizations are also important. And it's crucial for professional organizations to provide their suggestions. There are some opposite parties that dissuade people from wearing masks or obeying stricter prevention measure. But it is more important to have opposition party that can promote the pandemic prevention

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measures.

For example, when some COVID cases traveled from Taipei City to other cities, we saw a lot of advanced deployments initiated by the local authorities, which was faster than the action of central government, to eliminate the infection.

An editorial endorsed by all the heavy weights in academia and published in the New England Journal of Medicine, the number one medical journal in the world, stated that lot of people are dying in a leadership vacuum, but what we really need to do is quarantine, isolation, social distancing, masks wearing, and border control.

Boris Johnson, British Prime Minister, was thinking about lifting lockdown measures with more than 40,000 cases per day. So, when UK was planning to lift most of the bans for pandemic prevention on July 19, British Medical Journal (BMJ), one of the top journals in the world, quoted the content of the editorial saying that it is unethical to take the umbrella away from persons while it is still raining. WHO also suggested non-medical prevention measures as the number one priority, and vaccination the second. It is something really important if you only use vaccines. I've shown you the case of Singapore and South Korea. This will cause the death rate to go up. You absolutely need to vaccinate. But other measures are also very important, which is the strategy of elimination. If not stop spreading the virus, we will see more variants like Omicron someday.

We need to do elimination. Even with vaccines, the virus will continue to change. So, we need to respect the opinions from professional scientists. Border control, as I mentioned, is important. If there's any cases, find them out, and make necessary lockdown measures. Also, while doing lockdown, you need to identify the cases so as to shorten the lockdown period.

In Taiwan, we have the SARS experience. On May 10th, we saw the breakout of the pandemic in Taipei area. The local governments of Taipei City and New Taipei City initiated community screening and asked citizens to stay at home. That's why we have been able to control the situation in ten days.

Considering the measures taken by the municipal governments were moving ahead of the central government, Commander Chen respected the opinions from the local governments and experts and was willing to accept their proposals. Because the medical professionals were still working on the front line, and they understood the feelings of patients. Our commander was saying that elimination was impossible, but we were trying so hard to achieve elimination. Lockdown is not our option, but we voluntarily stayed at home on weekends. And you can check the google traffic data,

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that we actually lockdown on weekends voluntarily. Two cities were like dead castles. We saved Taiwan.

Two mayors pushed the central government to run forward. The two cities were in touch with the society and they continued to identify cases of infection day after day. They were relentless to finally identify all the confirmed cases. They were able to contain and eliminate.

That is why we have the experience to deal with the Delta variant case when a new confirmed case occurred in Pingtung. I think we relied a lot on the municipal governments, and then people voluntarily stayed at home on weekends. If people go out, the cases will reach another peak after seven days. This is a robust democracy. The government doesn't always make the right decisions. But we can all work together, especially from the bottom up. We have the society and the municipal governments. Sometimes, we may have different opinions with Minister Chen, because there are mayors of different municipal governments, city councils, experts, and scholars involved. I think we should be more open minded to more opinions, because we all want to achieve common good. So, I think this is a good thing that we accept each other's opinions.

I think the American government understands that they gave up too early. It was like opening up the Pandora's box, and they can never make up for mistakes they made. And of course, things happen, and we need to fix things. We have to pay attention to the trauma experience refinement. WHO's Pan-European Commission on Health and Sustainable Development advises that, in addition to focusing on the area of health, we should also regard health as a driving force of our economy.

I want to share with you the case in New Zealand regarding the budget allocation. They have the overall state budget called The Wellbeing Budget. The budget will be allocated to the different aspects that would affect the happiness of their people, like the indigenous people's medications, and children who are victims of domestic violence. These social problem are identified. When the government is budgeting, all the departments will be required to indicate whether their policy could make the citizens happier. And according to the happiness index, the government decides on the budget allocation.

So, this is a very long-term perspective to get our society prepared for, whether it's another pandemic in the future, or economic development. It's not just about money. We're not trading life for money. I think the UN really wants us to be responsible in terms of the economic measures as well as investments. To conclude, we need to

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understand or be aware that we have these compacts. And these compacts lead to inequality, and our decision is very important. We need to make positive and scientific decisions to create an all-win situation. Now back to Taiwan. Last year, we had less than 10% of vaccination rate, but we all worked together. Even though it took us a little longer, I think we achieved our success. This is just the mindset. You really need to identify all the hidden cases when you want to eliminate the infection. In New Zealand, they have this Wellbeing Budget and in Taiwan, we have the power of the local governments and the society. If the local governments and the society all work together, and interact with the central government well, and if the central government is willing to listen to people's opinions and to make some adjustments, I think we can constantly improve our life.

Also, we should pay attention to the resilience. I think the Bloomberg's Covid Resilience Ranking encouraged people to open up the borders. Some of the top-ranking countries opened up their borders and they fell down the ranking. Sometimes, professional media agencies could not provide accurate information which might cause an error of judgement. Let's think about the value of political decision. As politicians, I think if you value the wellbeing and health of your people, then obviously, you will make right decisions.

Okay. This is my presentation. Thank you for listening.

Yung-mau CHAO (趙永茂 / Emeritus Professor, National Taiwan University) :

Once again, thank you, Professor Chiou. We understand that Professor Chiou is a world-renowned expert, and she's very actively involved in, for example, WHO.

She focused on the spillover impact of the pandemic. But it's not just the health impacts, because of the pandemic, we have seen all these negative impacts on elderly citizens, disadvantaged children, female, and how we should focus on sustainability and coexistence with the environment for our future development.

Director general or Professor Chiou also mentioned that how professionals, the private sectors, NGOs, and municipal governments, even different political parties, cooperated during the period of pandemic. Even though sometimes we have opposition, we all work towards our common good to overcome all these different difficulties. And we all wish to continue working together to minimize the impacts of the pandemic and will continue to strengthen our control and prevention of the pandemic.

Once again, we thank Professor Chiou for the wonderful presentation. This is the end

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of our keynote presentation. Thank you.

Chin-chang LIN (林晉章 / Honorary President of Taiwan Councilors Forum) :

Thank you Professor Chao for moderating the keynote speech session, and thank Professor Chiou for giving us the wonderful presentation.

Next, we have an International Forum, which will be moderated by Professor Chen Li-kang from Soochow University.