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Abbreviation List

APEC	Asia-Pacific Economic Cooperation
APEC GOFD	APEC Group of Friends on Disability
AVS	Association for Victims Support
AWDG	Accessible Web Development Guidelines
BAROC	Bankers Association of the Republic of China
CEC	Central Election Commission
CEDAW Implementation Act	Enforcement Act of Convention on the Elimination of All Forms of Discrimination against Women
CITD	Conventional Industry Technology Development
COA	Council of Agriculture
COSWAS	Collective of Sex Workers and Supporters
CRC Implementation Act	Implementation Act of the Convention on the Rights of the Child
CRIPDS	Committee Responsible for Identification and Placement for Disabled Students
CRPD	Convention on the Rights of Persons with Disabilities
CRPD Implementation Act	Act to Implement the Convention on the Rights of Persons with Disabilities
ESA	Employment Service Act
FSC	Financial Supervisory Commission
ICF	International Classification of Functioning, Disability and Health
ILO	International Labour Organization
IRB	Institutional Review Board
LIAROC	Life Insurance Association of the Republic of China
LSA	Labor Standards Act
MND	Ministry of National Defense
MOC	Ministry of Culture
MOE	Ministry of Education
MOEA	Ministry of Economic Affairs
MOF	Ministry of Finance
MOHW	Ministry of Health and Welfare

MOI	Ministry of the Interior
MOJ	Ministry of Justice
MOL	Ministry of Labor
MOST	Ministry of Science and Technology
MOTC	Ministry of Transportation and Communications
NDC	National Development Council
NHI Card	National Health Insurance Certificate
NHRI	National Human Rights Institution
NICE	National Institute for Clinical Excellence
NLIA	Non-Life Insurance Association of the R.O.C.
PCYWRA	Protection of Children and Youths Welfare and Rights Act
PDRPA	People with Disabilities Rights Protection Act
PDRPA Enforcement Rules	Enforcement Rules of People with Disabilities Rights Protection Act
PIPA	Personal Information Protection Act
SCSED	Special Civil Service Examinations for the Disabled
SEA	Special Education Act
TDPs	Technology Development Programs
TIIP	Taiwan Industrial Innovation Platform
TRA	Taiwan Railway Administration
USPSTF	United States Preventive Services Task Force
W3C	World Wide Web Consortium
WAI	Web Accessibility Initiative
WCAG 1.0	Web Content Accessibility Guidelines 1.0
WCAG 2.0	Web Content Accessibility Guidelines 2.0
WHO	World Health Organization
WIPO	World Intellectual Property Organization

Articles 1 and 2

Purpose and definitions

1. Article 7 of the Constitution of the Republic of China (Taiwan) (the Constitution) expressly states that, “All citizens of the Republic of China, irrespective of sex, religion, race, class, or party affiliation, shall be equal before the law.” The principle of equality prescribed in this article does not mean an absolute and mechanical equality in formality. Rather, it aims to guarantee the substantive equality of people before the law. To ensure that everyone has the right to pursue their values or interests and acquire different resources, the government guarantees the implementation of “equality” by taking various legal measures to ensure that it is not restricted due to disabilities. Article 10, Paragraph 7 of the Additional Articles of the Constitution of the Republic of China (the Additional Articles of the Constitution) expressly specifies that, “The State shall guarantee insurance, medical care, obstacle-free environments, education and training, vocational guidance, and support and assistance in everyday life for people with disabilities, and shall also assist them to attain independence and to develop.” This indicates that the government recognizes people with disabilities as the subject of rights.
2. To further protect the rights of people with disabilities, the government is committed to implementing the Convention on the Rights of Persons with Disabilities (CRPD) although the R.O.C. is not a member of the United Nations. To ensure the enforceability of CRPD as a national law, strengthen the right of people with disabilities in Taiwan, and align the nation with the rest of the world, the President promulgated the Implementation Act of the Convention on the Rights of Persons with Disabilities (CRPD Implementation Act) on Aug. 20, 2014, which came into effect on Dec. 3, 2014. Government agencies at each level shall jointly protect the rights specified in CRPD in accordance with the law.
3. The Welfare Law for Handicapped Persons was enacted in 1980 to protect the life and welfare of people with disabilities. This law lays a solid foundation for the welfare of people with disabilities in Taiwan despite its establishment is primarily from the perspective of medical model. In order to protect the legitimate rights and life of people with disabilities and guarantee fair opportunities for them to participate in the society, the Welfare Law for Handicapped Persons was renamed and amended to Physically and Mentally Disabled Citizens Protection Act in 1997 considering the increasing number of people with disabilities, diversified individual needs and international trends. This Act was amended again to People

with Disabilities Rights Protection Act (PDRPA) and promulgated in 2007 to protect the rights of people with disabilities and ensure their equal opportunities to participate in the society, politics, economy and culture. In the meantime, the purposes and contents of the CRPD and different international disability issues were incorporated and converted into statutory provisions.

4. The 2007 PDRPA amendments include chapters dedicated to the rights and interests of health and medical care, rights and interests of education, rights and interests of employment, support services, economic security, and protection services. In addition to rename the law to show respect for people with disabilities as independent individuals, we define people with disabilities with reference to the International Classification of Functioning, Disability, and Health (ICF) promulgated by the World Health Organization (WHO) to meet their explicit needs. According to the PDRPA of 2007, “people with disabilities” refers to those who with significant deviation or loss resulting from disorder of or impairment of their physical or mental structure or function are limited or restricted in activities of daily living (ADL) and participation in the society, and, with disability identification or certification after processes of evaluation and assessment by the committee composed of professionals from medicine, social work, special education and employment counseling and evaluation. Since 2012 the original 16 categories of disabilities have been regulated into the 8 categories¹ by renewing the disability identification, expected to be completed by 2019² (Table 1.1). Therefore, “people with disabilities” referred to in this report are those who have undergone the evaluation and assessment and have been determined as qualifying. According to the data from the Ministry of Health and Welfare (MOHW) at the end of 2015, there are approximately 1.15 million people with disabilities in Taiwan, occupying 4.92% of the total population (Table 1.2).
5. The 2007 PDRPA amendments also focus on increasing employment and education opportunities and enhancing the quality of life for people with disabilities. The government no longer emphasizes monetary allowance, but replaces passive relief with positive welfare provisions. The current disability welfare policies are

¹ 1. Mental Functions & Structures of the Nervous System; 2. Sensory Functions & Pain; The Eye, Ear and Related Structures; 3. Functions & Structures of/involved in Voice and Speech; 4. Functions & Structures of/related to the Cardiovascular, Haematological, Immunological and Respiratory Systems; 5. Functions & Structures of/related to the Digestive, Metabolic and Endocrine Systems; 6. Functions & Structures of/related to the Genitourinary and Reproductive Systems; 7. Neuromusculoskeletal and Movement related Functions & Structures; 8. Functions & Related Structures of the Skin.

² The classification system is in transformation process and therefore the 16 categories are used in this report.

implemented based on the purposes of the PDRPA and CRPD. A White Paper on the Protection of the Rights of Persons with Disabilities was released on July 30, 2009. It details the short-term, medium-term and long-term tasks and specific strategies to promote the rights for people with disabilities on seven major aspects, which includes welfare service and protection of rights, right to medical care, right to education, right to employment, right to a barrier-free environment, right to economic security, and other general issues.

I. Discrimination

6. The 2007 PDRPA amendments protect the legal rights and interests of people with disabilities, and secure their equal opportunity to participate in society without discrimination due to disabilities. Their dignity and legal rights are respected and protected. Discrimination against them in access to education, examination, employment, residence, migration, and medical care services is prohibited to ensure substantial equality. No one shall refuse or impose limitations to people with disabilities, their minders and necessary auxiliary aids and services to access public areas, public buildings, business places, means of public transport, and other public facilities freely; doing so will constitute discrimination.

II. Reasonable accommodation

7. There is no explicit definition of “reasonable accommodation” in domestic law yet. However, to eliminate barriers and achieve substantial equality, the government makes efforts in making relevant accommodations and reflects their purposes in different laws and regulations. Multiple appropriate personalized assistances are provided to meet the needs of people with disabilities in their education, examination, employment and social participation.

III. Communication

8. To ensure accessibility of information and messages, free interaction with others and better social participation for people with disabilities, the government shall provide related services³ according to regulations. Article 52 of the PDRPA stipulates free access to public information and requests Internet, telecommunication, broadcasting, TV program providers to provide auxiliary aids and services for people with disabilities to read, watch, forward, or transmission.

³ Services or activities shall be carried out, including: organizing leisure and cultural activities or sports, providing barrier-free public information, ensuring fair participation in politics, providing law counseling and support, barrier-free environment, assistive devices and services, social advocacy and education, as well as other services related to social participation of people with disabilities.

Local governments must set up a window for the acceptance of sign language translation services and transcription services applications to meet their actual needs and provide them with more opportunities to participate in public affairs (Article 61 of the PDRPA).

Article 3

General principles

9. From the Welfare Law for Handicapped Persons of 1980 to the PDRPA of 2007, the name and the legislative purpose of the Act has been changed three times, indicating that the welfare policy in Taiwan has shifted from medical model to rights-based model. Equal participation in society, independence and development, multiple appropriate assistances, individualized and diversified services specified in the PDRPA displays respect for the autonomy of people with disabilities. In addition to the rights and interests of people with disabilities, the PDRPA protects their dignity and autonomy, and protects them from discrimination. It establishes an accessible environment, encourages them to participate and integrate in the society, and ensures equal opportunities for them.

10. The government ensures equal rights for the women with disabilities and protects them from discrimination in all respects by implementing the Gender Equality Policy Guidelines, Act of Gender Equality in Employment, and Gender Equity Education Act to provide them with more participation opportunities in different fields and assure their rights and interests. The government has also enacted the Protection of Children and Youths Welfare and Rights Act (PCYWRA) based on the best interests of children and youth to protect their rights and interests, including the right to express opinions. In order to protect these two relatively disadvantaged groups in the society, the government promulgated the Enforcement Act of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW Enforcement Act) and the Implementation Act of the Convention on the Rights of the Child (CRC Implementation Act) and put them into effect in 2011 and 2014, respectively. These two laws are enforced to observe and implement human rights as promulgated by the United Nations.

Article 4

General obligations

11. In order to attain the goals of the CRPD, Taiwan is committed to protect human rights of people with disabilities via policies, laws and relevant measures. The following are some important measures:

- (1) The Employment Service Act (ESA)⁴ expressly specifies that no employer shall discriminate any job applicant or employee due to disabilities. The Labor Standards Act (LSA)⁵ provides the same basic wage assurance for people with disabilities and average workers. Both PDRPA and LSA have provisions related to implementation of the vocational rehabilitation service⁶ and the subvention to enhance the work efficiency of people with disabilities.
- (2) The 1984 Special Education Act (SEA) specifies that no school shall reject a student for admission or testing based on disability (Article 22). Schools at all level, kindergartens, and social welfare institutions shall provide educational auxiliary devices, special education assistants and other support services for students with disabilities (Article 33).
- (3) To enable people with disabilities to participate in social and cultural life on an equal basis, buildings and activity arenas must be built in accordance with relevant building regulations. Set-up of accessible facilities at transportation terminals, including High Speed Railway stations, metro stations, airports and harbors, is a requirement of both the Building Design and Construction Part under the provisions of the Building Technical Regulations and the Design Specifications of Accessible and Usable Buildings and Facilities. The Regulation Governing Installation of Accessible Facilities in Public Transportation requires set-up of accessible facilities to help people with disabilities to board, alight, and ride public transportation vehicles.
- (4) The Act of Gender Equality in Employment of 2002 and the Gender Equity Education Act of 2004 prohibit discrimination against all R.O.C. citizens, including people with disabilities, based on gender or sexual orientation. Measures for the promotion of gender equality in the workplace and

⁴ Article 5, Paragraph 1.

⁵ Article 21.

⁶ The vocational rehabilitation services include occupational assistance evaluation, vocational training, employment service, redesign of job responsibilities, assistance in starting up business and other vocational rehabilitation services.

protection of rights and interests are available for all employees with disabilities. Schools shall provide a learning environment of gender equality to protect the right to education of people with disabilities.

12. According to the CRPD Implementation Act, government agencies at all levels shall review⁷ the legislations and administrative measures that may violate the CRPD, and submit a priority review list by December 2016. Any inconsistency with the provisions of the CRPD shall be corrected by addition, amendment or cancellation of the relevant legislations and administrative measures before 2017. Amendment, revision or cancellation of the remaining legislations and administrative measures shall be completed in 2019.⁸
13. The government invites representatives of disability organizations as well as experts and scholars in this field to participate in the development and promotion of relevant legislations and policies process. Moreover the government invites the representatives from different fields to participate in the decision making process of the issues related to people with disabilities.

Article 5

Equality and non-discrimination

14. Article 7 of the Constitution states that all citizens of the R.O.C., irrespective of sex, religion, race, class, or party affiliation, are equal before the law. The legislative body may, based on the value system of the Constitution and the purpose of enactment, consider the differences of the addressed subject areas and reasonably treat them differently. Moreover, it is the responsibility of the government to give aged citizens and people with disabilities appropriate assistance and relief.⁹ The Additional Articles of the Constitution expressly requires the government to guarantee the insurance, medical care, accessible environment, education and training, vocational guidance, and support and assistance in everyday life for people with disabilities, and give them assistance

⁷ Participants of the Priority Review List Meeting held in Aug. 2016 were the members of the Committee for the Promotion of the Rights of Persons with Disabilities, Executive Yuan, experts and scholars, representatives of relevant government agencies and local governments, and civil organizations that reported the alleged violation.

⁸ Since regulations to be amended by 2017 must be submitted to the Legislative Yuan and local councils for review, it is difficult to define the specific time required for the amendment. Therefore, relevant government agencies and local governments were asked to coordinate with legislators of the central and local governments to follow up the amendment progress. However, amendment of the administrative orders and measures shall be completed within the deadline.

⁹ Article 155 of the Constitution.

for their independence and development. The Additional Articles emphasize the importance of the rights and interests of people with disabilities.

15. The Constitution and other laws protect the rights and interests of the people and have them realized through the courts at all levels. The civil and criminal courts are traditionally the elements of the juridical system in Taiwan. Other elements include the Administrative Court for settlement of disputes about public laws, the Intellectual Property Court for quick settlement of intellectual property disputes and promotion of the technological and economic development in Taiwan, and the Juvenile and Family Court for protection of the rights and interests of women and children. The defendant who does not accept the decision of the court of first instance may carry out standard legal procedures and appeal to a higher court for remedy. An individual who suffers infringement of their constitutional rights and, after remedies provided by law for such infringement have been exhausted, questions the constitutionality of the laws or regulations cited in the final judgment may apply for interpretation of the Constitution. Interpretations from the Justices of the Constitutional Court of the Judicial Yuan are binding to all government agencies and citizens. Government agencies must take action in accordance with these interpretations, and any unconstitutional laws or regulations must be amended or repealed accordingly.¹⁰
16. A variety of legal remedies have been established with reference to the purpose of Article 16 of the Constitution. To protect people with disabilities who fail to seek judicial remedies, provisions of the domestically effective CRPD for protection of the rights and interests of people with disabilities, and Article 8, Paragraph 1 of the CRPD Implementation Act, specifying “persons with disabilities protected by the Convention and the relevant regulations that have their rights infringed, which cannot or may only with difficulty be implemented, shall make an appeal, file a claim or other way of petitioning to protect their rights”, directly gives people with disabilities the right to file suits according to the CRPD Implementation Act.
17. In addition to the explicit protection in the Constitution, Article 16 of the PDRPA expressly specifies the respect, protection, and non-discrimination of the dignity and legal rights and interests of people with disabilities. For non-discrimination, the government has established different laws and regulations to prohibit any

¹⁰ Refer to the attached Table 5.1 for the interpretation of the rights and interests of people with disabilities.

disadvantageous circumstances or treatments against people with disabilities. People who violate these laws and regulations not only may be imposed a fine penalty, but also may meet the requirements of infringement specified in Article 184, Paragraph 1 or 2 of the Civil Code.

18. The government provides subventions for required learning aids and student assistants (referring to Article 24 – Education) to eliminate disadvantages that people with disabilities experience in their daily lives, as well as protect their rights and interests. During the examination, government agencies provide multiple appropriate assistances for test-takers with disabilities to protect their examination opportunities. To enhance the social participation of people with disabilities, local governments provide sign language translation services and transcription services. Internet, telecommunication, broadcasting, TV program providers must set up accessible facilities for people with disabilities to assure their free access to public information.
19. For the purpose of ensuring national's equal opportunity in employment, employer is prohibited from discriminating against any job applicant or employee on the basis of race, class, language, thoughts, religion, political party, place of origin, place of birth, gender, gender orientation, age, marital status, appearance, facial features, disability, or past membership in any labor union. Violations of these regulations are subject to a fine of TWD 300,000 to TWD 1.5 million. In addition, Employers must provide personalized professional vocational rehabilitation services to meet the requirements of people with disabilities in their employment.

Article 6

Women with disabilities

20. The number of people with disabilities in Taiwan stood at 1.15 million by 2015, occupying 4.92% of the total population. Among them, the number of males was 655,444 (56.72% of people with disabilities in total and 5.60% of the total male population) and the number of females was 500,206 (43.28% of people with disabilities in total and 4.25% of the total female population).
21. Women with disabilities are often in a disadvantageous situation in education, employment and culture due to their gender and disabilities. To protect the rights and interests of women with disabilities, the PDRPA and other legal measures

such as the Act of Gender Equality in Employment, Gender Equity Education Act, ESA, LSA, SEA, and Indigenous Peoples Basic Law have expressly incorporated provisions for protection of the rights and interests of all women including those with disabilities. In 2011, the government promulgated the CEDAW Enforcement Act and published the Gender Equality Policy Guidelines as a guide for implementation of the gender equality policies in future.

22. According to the Statistical Survey on the Employment Conditions of People with Disabilities that the Ministry of Labor (MOL) released in 2014, the labor participation rates of men and women with disabilities over the age of 15 were 24.7% and 13.1%, respectively, and the employment rates of men and women with disabilities over the age of 15 were 22.0% and 11.8%, respectively. The labor participation rate and employment rate of women in general were 50.5% and 48.7%, respectively (Table 6.1). The labor participation rate of women with disabilities was lower than that of men with disabilities and women in general. The MOL has incorporated the “employment promotion measures for women with disabilities” and “enhancement of vocational training participation rate of women with disabilities” in the KPIs of its Implementation Plan for Promotion of Gender Mainstreaming 2014-2017, and urges its subordinate agencies to implement these measures more actively by, among others, training women with disabilities in employment skills and help them return to the job market.
23. The MOL continues to help women with disabilities in their employment by implementing a quota-based employment system and developing employment opportunities. Through vocational rehabilitation case management, it provides personalized vocational rehabilitation and employment services based on obstacles and difficulties, and offers a variety of employment services ranging from general employment, supportive employment, sheltering employment, and home-based employment to business start-up assistance services according to one’s employment requirements and abilities. Diversified vocational training is another service linked with training and living subsidies to increase functional competency. It provides employers with hiring subsidies to boost the willingness of employers to hire people with disabilities. The MOL also subsidizes employers to increase their willingness to employ people with disabilities and redesign jobs (or working environments) to remove employment obstacles.

24. The number of female students with disabilities is generally lower than of male students with disabilities. Statistics from the academic years¹¹ 2011 to 2015 show that the annual average rate of male and female students with disabilities from preschool to college was 67.08% and 32.98%, respectively (Table 6.2). The female students with disabilities occupy 1.76% of all female students (Table 6.3).
25. The government enforces the Special Education Act, Gender Equity Education Act and other relevant laws to protect the right to education of women with disabilities and to ensure that no discrimination against them based on gender or disability exists. Supportive services including education aids, adaptive teaching materials, learning and living assistances and accessible facilities are available for women with disabilities.
26. To increase the opportunities of women's participation in politics and public affairs, the government has been working to encourage the civil servants at all levels, the members of subordinate committees, and local legislators to implement the one-third gender rule, requiring that the number of committee members of any single gender shall not be less than one-third. Currently, the formation of all committees for promotion of the rights and interests of people with disabilities at the Executive Yuan, ministry and local government levels conform to this one-third gender rule. Further, in 2016 the Committee for the Protection of the Rights of Persons with Disabilities of the ministry-level expanded the one-third gender rule to the subset of committee members with disabilities.¹²

Article 7

Children with disabilities

27. The number of children with disabilities in Taiwan was 56,885 in 2015, making up 4.92% of the total population with disabilities. Of those, 33.17% of them had intellectual and developmental disability, 17.26% had multiple disabilities, and 14.65% suffered from autism (Table 7.1). In addition to national laws and regulations, the government has enforced the CRC Implementation Act since November 20, 2014 to protect the rights and interests of the children with

¹¹ An "academic year" in Taiwan is made up of 2 semesters and begins in August and ends in July the next year. For instance, the 2011 academic year began in August 2011 and ended in July 2012.

¹² Amended via the MOHW Letter Bu-Shou-Jia-Zi No. 1050700940, June 29, 2016.

disabilities.

28. The government sets great store by early intervention services for children. Before diagnosis of a disability assessment, professionals from social welfare, education and health fields work together to provide treatment, special education, consultation, referral and placement services¹³ based on the individual needs of the children with developmental delay as well as their families. Children showing no improvement after early intervention may apply for disability assessment according to the PDRPA.
29. The government has implemented the Child Development Screening and Referral Service to encourage healthcare institutions to provide child preventive healthcare services, atypical case referrals, and follow-up services. By 2015, the government has established 46 Child Development Joint Evaluation Centers to improve the accessibility of health care services and reduce the assessment time for children with suspected developmental delays (Table 7.2 and Table 7.3).
30. All children in Taiwan have access to medical services of the same quality level. The assessment criteria and scales to which children's hospitals are subject contain required medical services. They must set up accessible facilities in accordance with building laws and regulations and provide dedicated bathrooms, patient beds, and safe environments for children. In addition to the discharge preparation plan as Article 23 of the PDRPA requires, they must expressly establish policies or regulations to protect the rights of children and their families with the "family-centered" idea as the core.
31. The Ministry of Education (MOE) actively implements the integration of educational goals and proposes measures to protect the right to education of children, including increase of the assessment rate, school enrollment and other placements, curriculum adaptation and supportive services. The MOE provides tuition waivers for both students with disabilities and children of people with disabilities.
32. The government provide economic supports to low-income and medium-to-low income households having children with disabilities. In addition to living support for low-income households, they can apply for disability living assistance (Table

¹³ Article 8 of the Enforcement Rules of Protection of Children and Youths Welfare and Rights Act.

7.4), health care subsidy for children and youth of medium-to-low income households, and living allowances for school-age children, and additional living allowances for low-income households. Parents who cannot work due to child care and are subject to the income tax rate below 20% may apply for child care allowance.

33. The Juvenile Delinquency Act and Family Act expressly stipulate that children and youth involved in a case must have the opportunity to make statements in order to protect the right of children with disabilities to be heard. Relevant mechanisms and systems are available for implementation of both laws¹⁴. The right to information and protection during judicial procedures for children with disabilities include appointment of an appropriate interpreter, the investigation and hearing shall not be public, prohibition of signature on affidavits, to be sent to a relevant treatment center for rehabilitation without trial, information about the right to select a defender and defenders, private hearings, to be sent to a relevant treatment center for rehabilitation without protective measures, to be sent to a relevant treatment center for rehabilitation with protective measures, sent to a proper welfare or cultivation institute depending on the physical and mental conditions of the children, concealment of information, and cancellation of previous criminal records.
34. To protect his procedural rights, the juvenile who is unable to make full statements due to his disorder of or damage to the structure of the nervous system or psychological or mental function, and does not select a defender during the investigation or trial, or for any juvenile delinquency, may apply for legal aid if the presiding judge deems retaining an assistant is necessary. (Refer to the Legal Aid Act.) Individuals who suffer from disorder of or damage to the structure of the nervous system or psychological or mental function, and individuals under eighteen may apply for legal aid with all branches of the Legal Aid Foundation. Applicants are not subject to financial investigation when applying for this legal aid (Table 7.5).

¹⁴ The systems requiring the juvenile investigator to make preliminary investigation and allowing the guardian, a person currently protecting the juvenile, a defender and the defender in a criminal case to be present and make statements are established for juvenile delinquencies. The systems regarding social worker accompanying, show-up of the defendant or guardian, minor children over seven years of age having the capacity to represent in the proceeding, power of attorney, guardian ad litem, visits and investigations of the family matter investigation officer, appointment of the interpreter, professional mediator committee members, competent authorities or social welfare bodies, and child and youth psychologists or other professional assistances are specified for family matter cases in relevant laws.

35. In consideration of the assistance that children with disabilities might need in a litigation and their understanding of the litigation procedure, the systems of attorneys, guardian and special representatives in the Taiwan Code of Civil Procedure (the Code of Civil Procedure), Code of Criminal Procedure and Administrative Litigation Act provide enhanced protection for children with disabilities in any litigation, including protection during a legal procedure, service of notices with respect to any litigation proceedings, and the system of representation. These enable children with disabilities to fully participate in the legal procedure to protect their rights and ensure that they will not lose their rights or bear any legal responsibilities because of misunderstanding of the procedure. In addition, the revised draft of the Juvenile Delinquency Act intends to protect children with disabilities during the litigation procedure through professional assistance as needed, accompanying for interrogation, sign language assistance, and other proper statement approaches.
36. The Criminal Code of the Republic of China (The Criminal Code) has a special punishment increase provision to strengthen the protection of children and people with disabilities in sexual assault cases. In recent years, the Ministry of Justice (MOJ) and its subordinate agencies have provided training courses on professional interrogation in sexual assault cases in which children and people with mental health conditions are involved. They encourage prosecuting organs to cooperate with other government agencies and Non-Governmental Organizations (NGOs) to provide training courses that are useful for improving the professional capability of prosecutors in the interrogation and investigation of children and people with mental health conditions to enhance the reliability of their testimonies and reduce the repeated statements of these victims.

Article 8

Awareness-raising

37. The government has initiated promotion activities in education and media to improve understanding about people with disabilities and enhance respect for their rights and dignities. The MOE produces broadcasting programs on special education to help teachers, students, parents, and the public understand the characteristics of disabilities. The Ministry also subsidizes universities, colleges, and civil associations to organize supporting activities for special education, and encourages universities and colleges to incorporate special education in their general curricula.

38. To help the public and the radio and television broadcasters better understand people with disabilities, the National Communications Commission (NCC) has authorized Taiwan Public Television to assist commercial terrestrial television stations with the production of audio description programs. The government has incorporated the media accessibility for people with visual or hearing impairment in the license renewal conditions and subjects it to a review process.
39. The NCC subsidizes radio and TV media, universities, colleges, and relevant institutions every year to organize media literacy education activities related to the rights and interests of people with disabilities in communication. The Institute of Watch Internet Network and the Satellite Television Broadcasting Association R.O.C. founded by the radio and television broadcasters have established self-regulatory rules to avoid labeling people with disabilities with discriminatory words or special physical and mental characteristics. Media runners comply with the Guidelines for Reporting on Mental Illness Cases to protect the rights and interests of people with disabilities and produce more positive effects in the media.
40. The MOHW organizes promotion activities through the media and incorporates awareness raising of disability issues as one of the major subvention items in the promotion of social welfare (community development), community growth, and community publications. The purpose of these efforts is to help the public understand CRPD and “disabilities”, and encourage communities to promote education of the aforementioned issues in the form of workshops, seminars, community book clubs, and cohesion of community sense, and cooperate with civil associations or institution to organize activities that are diverse and inclusive (Table 8.1).
41. The MOL promotes the employment and training policies for people with disabilities via media to help the public better understand and accept them, and acknowledge their capability and contribution. It also organizes promotion activities targeting the employers to help them eliminate their misunderstanding about the employment right of people with disabilities and the discrimination at the workplace. The Ministry publicly honors outstanding organizations (institutions) hiring these people with the Golden Display Award, makes employers aware of their work capabilities, and eliminates stereotypes among the general public. It has commissioned communication media to shoot videos of their employment showing their initiative and how they make efforts to find a job. The Ministry also supports advocacy and promotion activities of social enterprises on

an ongoing basis, and gives assistance to civil associations in their development toward a social enterprise, create local employment opportunities, and encourage employment of people with disabilities based on the MOL Multi-Employment Promotion Program and Empowerment Employment Program.

Article 9

Accessibility

42. The MOHW expressly specifies the matters that competent authorities must carry out, including construction, public information, transportation, communication issues and so on, in the PDRPA in order to create an accessible environment for people with disabilities. The Committee for the Promotion of the Rights of Persons with Disabilities, Executive Yuan, and the Committee for the Protection of the Rights of Persons with Disabilities, MOHW, convene regular meetings with representatives from the competent authorities, scholars and experts, and organizations of people with disabilities to plan, study, consult and coordinate with each other with respect to the issues of promoting the rights that people with disabilities shall have to create an accessible living environment.
43. The government promotes an accessible environment based on the basic needs of people with disabilities, including residence, education, work and medical care service, to ensure that they have equal rights to live in the community and can use community services and facilities equally to live an independent life and integrate themselves into the community.
 - I. Construction
44. The Ministry of the Interior (MOI) announced in 1988 that accessible facilities must be available in newly constructed public buildings. The government shall not issue construction permits for any public buildings that are not in compliance with this regulation. The application scope of the announcement was expanded gradually and, in 2012, the MOI announced that set-up of accessible facilities is required for both new and additional constructions of a building, no matter whether it is public or not.
45. In 2004, MOI formed the Accessible Living Environment Supervisory Team with experts, scholars, relevant units, and groups for the welfare of people with disabilities to improve the accessibility of existing public buildings. The team is responsible for supervising the investigation and improvement activities of the local governments. Out of 46,374 recorded cases, 51% have been completed by

2015. Local governments will make improvement continuously by category, phase and region. From 2013 to 2016, the Ministry has budgeted a total of TWD 366.03 million to encourage and subsidize arcade leveling projects. The subvention is allocated with the road sections of urgent leveling needs as the first priority, such as shopping areas, travel itineraries, public transit stations and student commuting routes among the communities.
46. The MOE budgeted TWD 960 million from 2012 to 2015 to help schools at all levels improve their accessible campus. It has established a Task Force for the Promotion of Accessible Environments and invites experts and scholars in the construction and special education fields and the organizations of people with disabilities to join the team. The task force convenes meetings to review the promotion results of accessible campus environment and subventions. The MOE and local governments hold dedicated seminars on accessible campus to spread the accessible concept, and incorporate the accessible environment in the evaluation of the schools.
 47. In 2009 the MOL established the Implementation Plan of Job Redesign Services for people with disabilities. It budgeted TWD 76.450 million from 2011 to 2015 for subventions to employers that improve the work environment, equipment or machine tools and adjust the working methods to eliminate barriers in the workplace. Since 2015, employers have been able to apply for employment assistive devices, transcription services and employment assistance at the workplace for people with severe physical disabilities.
 48. The MOL incorporates accessible facilities in the evaluation of sheltered workshops. It carries out on-site evaluations every two years to ensure a friendly workplace for sheltered employees. The Ministry encourages authorized private organizations to implement pre-service training in accessible areas.
 49. The MOHW has formulated relevant regulations and penalties in the Criteria for the Establishment of Medical Care Institutions. It requires hospitals and clinics to adopt accessible design and establish accessible facilities according to the relevant building regulations and other regulations, and incorporates set-up of these facilities in hospital accreditation.
 50. The MOHW has established the Regulations on Subsidization for Medical Treatment and Auxiliary Appliances for the Disabled and subsidizes 21 accessible

assistive devices¹⁵ for the home life of people with disabilities. The subsidy each household may receive is up to TWD 60,000. The assistive device center provides assessment and consulting services depending on the needs of the applicant (Table 9.1).

51. The MOHW requires in the respective establishment criteria that care institutions, welfare institutions for senior citizens, welfare institution for people with disabilities, and mental health care institutions shall and provide accessible environments in compliance with the Design Specifications of Accessible and Usable Buildings and Facilities. It incorporates accessible facilities as an indicator in the evaluation criteria of general care homes, welfare institutions for senior citizens, and welfare institutions for people with disabilities since 2016.
52. The tax authorities under the Ministry of Finance (MOF) provide various accessible facilities, service counters or arrange a designated person to guide and help the people with disabilities to handle their tax affairs. The Financial Supervisory Commission (FSC) always respects the rights of people with disabilities to access financial services, and requires banks to take friendly financial measures to help them. Banks shall provide an accessible environment, arrange service assistants, and set up accessible ATMs for wheelchair users and voice ATMs for people with visual impairment. By June 2015, 76% of the ATMs (19,173 sets) had been adapted to wheelchair users and 1% of them (260 sets) are voice ATMs for the people with visual impairment¹⁶. Credit card issuers have provided telephony for card activation and loss reporting services. (Persons other than the card holder can also report loss for the card holder.) The FSC has required the Bankers Association of the Republic of China (BAROC) to set up a consultation hotline for people with hearing impairment, and has requested banks to provide online card activation and loss reporting services. Now, accessible facilities are available in the business offices of all financial institutions. Financial associations have formulated the Friendly Financial Service Guidelines to provide accessible friendly financial environment. The FSC will continue to supervise financial institutions and ensure they will provide such friendly financial services. The Ministry of Economic Affairs (MOEA) has specified that the establishment

¹⁵ The facilities include doors, handrails, ramps, faucets, anti-slippery facilities, toilet and bathroom equipment, and so on.

¹⁶ In the coming year, one voice ATM will be set up at each of the 154 MRT stations in Taipei and Kaohsiung and each of the 27 locations that the organizations of people with visual impairment suggest. A total of 441 voice ATMs will be available for people with visual impairment in the next year.

of retail markets must comply with the regulations of accessible facilities. In its Assistance Plan from 2016 to 2020, the MOEA has incorporated the establishment of accessible facilities as a bonus point in the “Outstanding Market” evaluation process.

53. The MOI enacted the Principles for the Establishment of Accessible Facilities at the Main Entrance of Urban Parks and Greeneries in 2014, and checked 3,858 parks and greeneries in cities and excluded 1,123 obstructions. Since 2014, it has invited representatives of welfare institutions for people with disabilities, experts, and scholars to form a task force to carry out a Supervision Plan for the Accessible Environment of Main Entrance of Urban Parks and Greeneries. The MOI has enacted The Design Standards of Accessible Equipment and Facilities for MOI authoritative gathering places in 2015, and specifications for facilities such as entrance, construction facilities, signs, etc., which are extended to the urban parks and places within the national parks declared by the MOI.

II. Public information

54. To ensure that people with disabilities have access to new information and communication systems and equal rights to access public information, the NCC worked with the World Wide Web Consortium (W3C) and released the Web Content Accessibility Guidelines 2.0 (WCAG 2.0) in 2008. It revised the Regulations on Examination and Issuance of Web Accessibility Compliance for Websites Established by All Levels of Government Agencies, Institutions and Schools and the Accessible Web Development Guidelines (AWDG) in 2013. In addition to the Mobile Accessible Web Development Guidelines (draft), it will next draw up the Mobile Application (APP) and Accessible Web Technical Guidelines.
55. The NCC has announced amendments of the Technical Specifications for Mobile Broadband Business Terminal Devices and the Technical Specifications for Third-Generation Mobile Telecommunication Terminal Devices in 2015 to help promote the “disaster prevention warning cellular broadcast messaging service”. Mobile phones and terminal devices must make special warning sounds and vibrate for easy identification when people with disabilities receive the disaster prevention and response message. This function has become a required test item of products, and mobile phones and terminal devices must pass this test before launching to the market. As the type approval results show, the function of receiving a complete disaster prevention warning message was available in 60 mobile phones by

October 2016; this function is also available after update of OTA (over the air) software. A total of 46 fixed network telecommunications operators provided special services for people with disabilities by October 2016. For example, special phone rental and sale service, telecommunication relay service, and special fax numbers for access to telecommunication services are available for people with visual and hearing impairments.

56. The government formulated the national standard of “Guide for Information and Communications Accessibility Technology – General” to facilitate the development of information and communications technologies. The government budgets TWD 67.89 million in ICT development projects for people with disabilities, and, with these projects, encourages development of assistive seeing, hearing, reading, writing and communicating devices. People with visual impairment may use assistive devices (G-mouse and NVDA) or follow the instructions of the voice guidance system to carry out the income tax paying procedure online. Financial securities websites are expected to provide a special accessible area to offer friendly financial services.

III. Transportation

57. The Ministry of Transportation and Communications (MOTC) formed the MOTC Committee for the Promotion of Accessible Transportation Environment in 2011. It has invited representatives from organizations of people with disabilities and relevant experts and scholars to serve as members of the Committee to carry out overall inspection of accessible facilities. The Ministry has formulated the Regulations Governing Installation of Accessible Facilities in Public Transportation and requires establishment of accessible facilities for the people with disabilities to board, alight, and ride public transportation vehicles.
58. Since 2010, the MOTC has subsidized bus transportation operators to purchase low-floor buses and universal accessible buses. By 2015, over 46% of city buses around Taiwan were low-floor buses. The Ministry has allocated subsidies for replacement of freeway buses since 2014, and at least one-eighth of the buses must be accessible. Encouraging local governments to apply for subsidies and purchase wheelchair-accessible taxis has been an ongoing policy since 2013, and 404 wheelchair access taxis had been put into service by the end of 2015. In addition to incentives for taxi companies complying with the regulations, the Ministry subsidizes local governments for their expenditure on educational training and marketing activities.

59. Areas exclusive to the people with disabilities and mobility limitations and special wheelchair accessible restrooms have been available in the 7th car of every High Speed Rail train. The Taiwan Railway Administration (TRA) has improved the accessibility for people with disabilities. Wheelchair-accessible elevators are available at 47% of train stations. The first stage of the floor and platform alignment project has been completed, and the second stage is specified in the Six-Year Plan for Improvement of the Train Operation Safety. The TRA expects to complete 83% of the wheelchair-accessible elevators at TRA train stations by 2021. Wheelchair spaces and priority seats are available in each car of metro trains. The floor is almost aligned to the platform. Passengers can hear the alarm before door closing.
60. The MOTC requires national airlines to install accessible facilities in their aircraft of scheduled flights in accordance with the Regulations Governing Installation of Accessible Facilities in Public Transportation. The Ministry pays extra attention to the accessible equipment and facilities on new passenger ships to ensure they are installed in accordance with relevant regulations. The Ministry expects to finish the revision of the Regulations for Adminstrating Passenger Ships by the end of 2016. These will require passenger ship companies to announce the wheelchair-accessible scheduled ships to and from offshore islands, to enable passengers to board and ride ships following the announced schedule. These companies must arrange specialists to serve people with disabilities on the ship. The Committee for Promotion of Universal Accessible Sea Freight Environment, Maritime Port Bureau, MOTC, discusses the possibilities for installation of accessible facilities on board ships and at boarding piers.
61. The MOI revised the Design Specifications for Urban Road and Accessory Works in 2015. In addition to a special chapter on “barrier-free facilities”, the revision incorporates the regulations of guidance facilities to meet the access needs of people with visual impairment. In 2012, warning facilities for people with visual impairment were set up at 17 selected curb ramps of urban walkways. The User Experience Evaluation of Warning Facilities at Curb Ramps of Walkways has been completed and improvement policies for the intersections have been proposed. In addition, the Evaluation Plan for Accessibility of Pedestrian Environments and the Maintenance Management of Urban Roads is implemented every year. Representatives from organizations of people with disabilities, experts, scholars, and the National Police Agency, MOI, now form an evaluation group for on-site investigation. Statistical data of county and city governments shows that

the suitability of the walkways has increased from 12.09% in 2011 to 55.34% in 2015.

IV. Future improvements

62. The MOHW will continue to revise the Standard for Medical Facilities and Establishment of Medical Care Institutions and incorporate the regulations of accessible facilities in these criteria. It will enhance its 113 protection hotlines with 24-hour accessible reporting channels, and promote the accessible concept and mutual-help awareness through schools and social education to build an accessible and inclusive society.
63. The MOL will continue to carry out improvements of accessible facilities at vocational training sites, and provide hardware and software assistive devices. In addition, MOL will help people with disabilities overcome participation obstacles through adapted teaching materials and tools as well as job redesign.
64. The NCC will continue to carry out the certification of web content accessibility for public and private websites in accordance with the Regulations on Examination and Issuance of Web Accessibility Compliance for Websites Established by All Levels of Government Agencies, Institutes and Schools to ensure information accessibility for people with disabilities.
65. The MOEA will continue to establish and implement national standards related to the information and communications technologies for people with disabilities to ensure effective promotion of these technologies in design, development, and production.
66. The MOI has begun to implement an overall review of relevant construction regulations, improvement procedures, and approval principles. It also subsidizes local governments to support the provision of social housing with full accessibility based on the Mid-Long-Term Social Housing Promotion Project that the Executive Yuan approved in 2014.

Article 10
Right to life

67. Article 15 of the Constitution protects the people's right to exist. According to Articles 288 to 292 of the Criminal Code, abortion is a crime, it is to protect the right of the fetus to live. However, a pregnant woman may request an induced abortion due to potential health risk to her life or the life of the fetus as stated in Article 9 of the Genetic Health Act.
68. According to the Criminal Code, an offense is not punishable or the punishment may be reduced if the offense is committed by a person who suffers from mental health conditions or with intellectual and developmental disability. The trial or execution of death penalty in progress must be interrupted if the defendant or inmate suffers from a mental disorder. Practically, the MOJ examines such death penalty cases strictly according to the Guidelines for Execution of Death Penalty Cases. It pays close attention to whether the inmate suffers from a mental disorder such as loss of mental capacity. If there is any doubt, the death penalty shall not be executed before the mental health of the inmate has been examined and confirmed.

Article 11
Situations of risk and humanitarian emergencies

69. The Fire Services Act requires implementation of fire safety management including fire prevention propaganda, setup of fire safety equipment, maintenance reporting, and fire prevention management to ensure the fire safety of the places concerned. The welfare and training institutions for people with disabilities as well as special schools are subject to the Fire Services Act (Table 11.1). According to the Implementation Plan of Housing Fire Prevention Strategies, local governments shall focus on the disadvantaged people in their promotion activities. On the website of the National Fire Agency, MOI, there is a special area providing the disadvantaged people with relevant disaster prevention knowledge.
70. As for the flood and debris flow, the government has formulated the Flood Prevention and Protection Plan and the Debris Flow Prevention and Protection Plan for disaster prevention, preparation, emergency response, as well as recovery and reconstruction after disasters. For the areas where disasters may occur, local governments shall advise disadvantaged people, such as people with disabilities, of the evacuation.

71. When executing the annual disaster prevention and protection exercises and paying evaluation visits, the MOHW directs local governments to take care of disadvantaged people in their shelters, such as checking whether the arrangement of the shelter for the senior citizens and people with disabilities has put their needs and genders in consideration, and whether livelihood products to meet their special needs have been stored.
72. In order to prevent people with disabilities who are dependent on life-sustaining machines from having health or life danger during the power outage, it is necessary to check all existing power generator resources. Public electricity retailer shall remind local governments to take proper response if electricity rationing can impact residential use of life-sustaining machines to people with disabilities.
73. To ensure that people with hearing or vocal and speech impairment can call 119 to report emergencies, the National Fire Agency, MOI, has established three case reporting channels including mobile phone SMS, 119 key detection sound, and facsimile hotline service.
74. Taiwan was invited by the Swiss government to participate in the diplomatic conference for negotiation about conventions on the protection of war victims in Geneva from April to August 1949. The Geneva Convention for the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field, Geneva Convention for the Amelioration of the Condition of Wounded, Sick and Shipwrecked Members of Armed Forces at Sea, Geneva Convention Relative to the Treatment of Prisoners of War, and Geneva Convention Relative to the Protection of Civilian Persons in Time of War were approved during the conference. The Ministry of National Defense (MND) promulgated the Guidelines for the Establishment of Promotion Group of International Humanitarian Law Incorporated into Domestic Laws on January 30, 2014, and formed the Promotion Group of International Humanitarian Law Incorporated into Domestic Laws according to the Guidelines. The Promotion Group successfully converted the four aforementioned conventions and three additional protocols into domestic law, showing the determination of the government to pro-actively implement these conventions.

Article 12
Equal recognition before the law

75. People with disabilities are under the protection of the Civil Code and they have legal capacity as a natural person. The Civil Code uses the commencement order of guardianship and assistance to protect the rights over property of the people who do not have behavioral capacity or mental capacity to do so. The Civil Code further stipulates that these people are entitled to pure legal benefits, such that a person who has become the subject to the order of commencement of guardianship or assistance may also exercise the right to consent in consideration of his/her age, status, and necessities of life. In addition, the Trust Law only governs trust acts involving the legal capacity or commencement order of guardianship and assistance to ensure the rationality of the trust system, its normal operation, and protection of transactions. These stipulations are not limited to people with disabilities.
76. The financial institutions review credit extension cases according to the regulations of the Banking Act and relevant laws without considering the disability of the borrower. Opening of accounts for the people with disabilities is subject to applicable laws and regulation. If any rejection from opening of the account occurs, they may report to the FSC to request the financial institution to take appropriate actions.
77. When a person with a visual impairment opens a regular current saving account, the current notarization system is used with a designated sighted person as the witness to help the person understand the agreement to be entered into with the bank and protect his/her rights and interests. If the person has difficulties in finding a friend or relative to accompany him/her for this task, the bank employee may assist during the process.
78. The FSC has taken enhancement measures to protect the right of the people with disabilities when they enroll in commercial insurance. For example, it urges the Life Insurance Association of the Republic of China (LIAROC) to amend the Guidelines for Insurers to Insure People with Disabilities, and requests the insurance enterprise not to reject the solicitation and policy underwriting involving people with disabilities without justified reasons. The Regulations Governing Business Solicitation, Policy Underwriting and Claim Adjusting of Insurance Enterprises revised in March 2012 expressly specify that the risk

assessment conducted when signing insurance contracts must only be subject to actuarial factors and statistical data. No insurance enterprise shall treat any specific applicant or policyholder unfairly or act against the insured because of his/her disability. To ensure the rights and interests of people with disabilities, the competent authorities have invited relevant agencies to deliberate about ways to strengthen their right to take out the insurance in the practice.

79. Practically, the signature of the policyholder is subject to Article 3, Paragraph 3 of the Civil Code. The “people who cannot sign” must affix their fingerprint in the signature column, and this mark is equivalent to the effect of a signature only if it is certified with the signatures of two witnesses. The aforementioned “people who cannot sign” include those who are illiterate, blind in both eyes, physically injured or functionally disabled. However, no procedure requires two witnesses' signatures for enrollment of insurance is provided in the law for the people with visual impairment. Hence, if these people are able to sign, they may personally affix their signatures to the insurance documents without any witness.

Article 13

Access to justice

80. To ensure equal access to justice for the people with disabilities, the government has made efforts as possible to make sure that people with disabilities may resort to judicial and administrative procedures on an equal basis with other people.
81. Where an accused or a suspect of crime is unable to make a full statement due to mental health conditions or intellectual and developmental disability, a notice must be given to his/her guardian, spouse, lineal blood relative, collateral blood relative within the third degree of kinship, family head, or family member to retain defense attorneys for him/her.¹⁷ To protect the rights and interests of the accused or suspect of crime, Article 35 of the Code of Criminal Procedure and Article 118 of the Criminal investigation Handbook for Policemen specify that the accused or suspect shall be investigated in the presence of his/her spouse, lineal blood relatives or collateral relatives by blood within three generations, family head, family member, or guardian who may act as his/her assistant, or his/her authorized agent, or a social worker appointed by a social welfare organization, or other professionals. The involved party failing to make complete statement in court due

¹⁷ Article 27 of the Code of Criminal Procedure and Article 118 of the Criminal Investigation Handbook for Policemen.

to disability may apply to the court for presence at the court together with an assistant, or the chief judge may *ex officio* order the party to be accompanied by an assistant for help, including notifying the Legal Aid Foundation to assign a legal counsel to serve as defense for the party in the trial¹⁸.

82. According to the interrogation procedure, the interrogator must present the record to the person being interrogated for reading or read it out to him/her, and ask him/her whether there are mistakes or needs for additions. If the person being interrogated requests an addition, deletion, or change, his/her statement shall be added to the record. People with disabilities are protected under the aforementioned regulations on an equal basis.
83. To protect the rights of people with disabilities who do not have a disability identification or certification, the judge *ex officio* gives them procedural protection according to relevant laws when he/she notices the disability of the involved party. If the involved party fails to make a complete statement in court due to disability, he/she may apply to the court for presence at the court together with an assistant, or the chief judge may *ex officio* order the party to be accompanied by an assistant for help.
84. As Article 95, Paragraph 1 of the Code of Criminal Procedure specifies, the interrogator shall inform the accused of the suspicion and all of the offenses charged, the right to remain silent without the need to make statements against his/her own will, appointment of defense attorneys, and request for investigation of evidence favorable to him/her. Since the information is given orally and put down in the record, the accused with vocal and speech impairment or with intellectual and developmental disability may not understand what he/she is informed, and the interrogator must use other appropriate tools to make him/her understand the information, including writing it down and presenting it to the accused for reading, if necessary. (Refer to Point 33 of the Guidelines for the Prosecuting Organs to Handle Criminal Cases.)
85. People with disabilities may appoint sign language interpreters or communicate by writing during the interrogation or trial to protect their rights and interests. In addition to the appointment of sign language interpreters, people with hearing or vocal and speech impairment may choose to make statements by writing during

¹⁸ Article 31 of the Code of Criminal Procedure.

the interrogation. The application form for sign language interpreters is available at the prosecuting organ for the party or other persons involved in a criminal case to fill in, if required. The Code of Criminal Procedure has a provision requiring an oral reading of the record to ensure that people with visual impairment understand the information in the record.

86. To protect the right to be heard of the party and comply with the requirement for the preparation period for the first oral argument session, litigation documents related to the party who does not possess capacity to litigate due to disabilities shall be served to his/her guardian.
87. The special representative and guardian systems are especially applicable to the party who does not possess the capacity to litigate due to disabilities. The purpose of these systems is to protect the right to be heard of the party and ensure statute of limitations, so he/she will not lose the procedural rights due to lack of awareness of the litigation procedure. Provisions with respect to the service of process and stay of litigation proceedings are also stipulated in order to protect the rights and interests of the people with disabilities.
88. To ensure the right to counsel of the accused who suffers from mental health conditions or with intellectual and developmental disability, the revised Article 31 of The Code of Criminal Procedure, promulgated on January 14, 2015, changes the text of "... obviously unable to make a complete statement due to unsound mind ..." in Paragraph 1, Subparagraph 3 and Paragraph 5 to "...unable to make a complete statement due to mental disturbance or intellectual disability ..." to extend the applicability of the compulsory defense to the people suffering from autism, mental health conditions, dementia and other intellectual and developmental disabilities, and give them effective assistance during the litigation.
89. With regard to the admissibility of the evidence, the Code of Criminal Procedure does not exclude the oral or written statements made by people with disability. Rather, it only incorporates the provision to protect the witness who suffers from mental health conditions and may not understand the legal effect of a sworn testimony. The testimony that a witness with disabilities gives shall not be excluded as evidence just because the witness is a person with disability.

90. According to the Code of Criminal Procedure, the court shall suspend the trial if the accused shows symptoms of mental health conditions or intellectual and developmental disability during the trial and it is serious to the degree of insanity according to expert examination or other assessment results, or if the accused is unable to attend the court due to mental health conditions (Article 294, Paragraphs 1 and 2).
91. The Juvenile Delinquency Act has many provisions to protect the juveniles with disabilities, including preliminary investigation (such as juvenile's physical or mental condition), appointment of an appropriate interpreter, the investigation and hearing shall not be public, prohibition of signing affidavits, to be sent to a relevant treatment center for rehabilitation without trial, information about the right to select a defender and defenders, private hearings, to be sent to a relevant treatment center for rehabilitation without protective measures, to be sent to a relevant treatment center for rehabilitation with pronounce a ruling of protective measures, arrangement to an appropriate institution for appropriate tutoring or corrective education depending on the physical and mental conditions of the juvenile, keeping information non-public, and cancellation of previous criminal records.
92. For the people who suffer from mental or physical disabilities and are involved in commencement of guardianship or assistance, protective placement, emergency placement or compulsory hospitalization, the Family Proceedings Act, enforced in June 2012, and its sub-laws provide for many procedural protection measures to protect their rights and interests, including exclusive jurisdiction, non-public procedure, social workers, or assistants as a company present before the court with the opportunity to be heard, proceedings in separate sessions, family matter investigation officers, appropriate and necessary privacy and safety protection measures, capacity to represent in proceedings, designation of a guardian *ad litem*, interpreter, injunction, assistance of child and juvenile psychologists or other professionals, participation of the psychiatrists in expert examination, emergency treatment of the patient with severe illness.
93. The MOJ has established the Guidelines for Prosecuting Organs to Protect Sexual Assault Victims from Repeated Statements to avoid repeated interrogation of the victim in a sexual assault case. After the judicial police officer or the sexual assault prevention center has accepted a sexual assault case, the social worker must visit the victim before commencement of the interrogation and report to the prosecutor to start the interrogation when he/she finds the victim in a suitable condition for

it. When recognizing the disabilities of the victim, the prosecutor shall ask experts to give on-site assistance in the statement to meet the needs of the victim (Point 3).

94. To help judges and judicial officials understand more about CRPD and the human rights of people with disabilities to ensure that they can protect their safety, independency and dignity through juridical proceedings, the Judicial Yuan had organized 28 workshops regarding the rights and interests of the people with disabilities from 2011 to 2015, and about 1,900 judicial personnel (including 1,399 judges and 501 judicial officials) have participated in the training (Table 13.1).
95. The Judicial Yuan arranges courses regarding protection of fundamental rights in the pre-service training and gives relevant advanced courses in the on-the-job training for all participants to meet their needs in different judicial circumstances and functions (Table 13.2). Correctional personnel of the MOJ also participate in the courses regarding the fundamental rights of people with disabilities.
96. The Judicial Yuan will increase the contracted alternate interpreters in consideration of the actual requirements. According to Article 4, Paragraph 1, Subparagraph 2 of the Regulations on Contracted Interpreters of the Court, application for the post of a contracted alternate interpreter must "have a certificate of intermediate language proficiency or above issued by a legal language test center approved by the government." (Table 13.3)
97. The Revised Draft of the Juvenile Delinquency Act that the Judicial Yuan is drawing up enhances the protection of juveniles with disabilities to make the law more compliant to the purpose of Article 7 of the CRPD¹⁹. The Judges Academy, Judicial Yuan, is drawing up a concrete mid-term training program with this regard (2016-2019).²⁰

¹⁹ The Revised Draft of the Juvenile Delinquency Act contains the following amendments:

- (I) Interrogation of a juvenile must be conducted in the presence of his/her guardian or other appropriate persons.
- (II) Where a juvenile fails to make a full statement due to mental health conditions or intellectual and developmental disability, the person accompanying the juvenile shall be informed about the right to appoint a defender or defender for him/her.
- (III) Child and juvenile psychologists can be appointed to give assistance.
- (IV) Use of interpretation shall be increased and the juvenile with disabilities may make statements or express opinions with texts, sign language or other appropriate methods.

²⁰ The mid-term training program contains the following courses :

- (I) Pre-service training:
 - (1) Conventions with respect to the human rights and other interests of the people with disabilities will become a focus in the pre-service training for selected judges, the juvenile

Article 14
Liberty and security of the person

98. No one in Taiwan shall be deprived of his/her liberty because of their disability. Assessment and other measures are necessary in accordance with laws to protect the people who must receive mandatory treatment due to mental health conditions.
99. Mental Health Act Article 32: People who find the persons who harm others or themselves or have the danger of harm, shall immediately notify the local police agency or fire-fighting agency, they should escort the patients or persons to nearby appropriate medical care institution for medical care.
100. The National Police Agency, MOI, has established the Procedure for Escorting Patients Suffering from Mental Illness to Medical Institutions as a basis for the personnel on duty to handle such emergency matters. The personnel on duty shall notify the local health authority to give assistance or work together to deal with

investigator, the juvenile protection officer, family matter investigation officers, and mediation committee members. The courses will include Introduction of the CRPD, understanding of dementia, understanding of rare diseases, rights of people with disabilities and their protection in family matters from the perspective of CRPD, visit and interview skills as well as group exercises – people with physical disabilities (including intellectual disorders), mental health conditions, physical and psychological treatment and counseling assessment for juvenile sex offenders, rights of the people with disabilities and their protection from the perspective of CRPD, and so on) to enhance basic awareness among personnel.

(II) On-the-job training:

- (1) Relevant courses (including Introduction of the CRPD, protection of disadvantaged people such as people with disabilities and senior citizens, characteristics of children and people with intellectual and developmental disability, interrogation skills and cases, diagnosis and treatment of mental health conditions of children and juveniles, types of discrimination against people with disabilities and exploration of the problems, learning disabilities, discussion on the emotional and behavioral problems of the youth with intellectual and developmental disabilities and possible countermeasures, how to implement the International Covenants on Human Rights (including Convention on the Rights of the Child and CRPD) in the trial of juvenile criminal cases, rights of the dementia patients and their protection – “what Still Alice told me”, Introduction of the PDRPA, Rock Me to the Moon leads me to know rare disease, and so on) will be incorporated in the training of family matters and juvenile delinquency judges as well as workshops for the juvenile investigator and protection officer, family matter investigation officers, judicial associate officers, and professionals other than judges in the field of family matters.
- (2) "Human Rights Protection (for People with Disabilities) Workshops" will be organized to conduct interactive deep discussion of the issues in the form of a seminar. The courses include how to help people with disabilities, analysis of the adult guardianship system in Taiwan from the perspective of the CRPD, rights of the people with disabilities and current legal system – a study from the perspective of the CRPD, and care and attention of rare disease patients.
- (3) The number of relevant training courses will be increased to 1,200 judges within four years. (There are prescriptively about 2,100 judges and all judges will have the opportunity to participate in the courses regarding protection of people with disabilities in terms of their rights and interests during the period from 2011 to 2019.)

people who harm others or themselves or have the danger of harm and escort them to a medical care institution for treatment.

101. Regarding severe patients harming others or themselves or having the danger of harm, who have been diagnosed by specialist physicians such that it is necessary for them to be hospitalized full day, their protectors shall assist the severe patients to go to psychiatric institutions for going through hospitalization formalities. When the severe patients mentioned in the preceding Paragraph refuse to accept full day hospitalization, the municipality and county (city) competent authorities may designate psychiatric institutions to enforce emergency placement and assign them to more than two specialist physicians designated by the municipality or county (city) competent authorities for mandatory examination. When there is still necessity of full day hospitalization according to the result of the mandatory examination mentioned in the preceding Paragraph, and when asked for their opinions the severe patients still refuse to accept hospitalization or are unable to express their decisions, the designated psychiatric institutions shall immediately fill out the mandatory hospitalization basic information and reporting sheets, attach documents of the opinions of the severe patients and their protectors and other relevant diagnosis certificates, and file application to the Review Committee for its permission of mandatory hospitalization; the decision of whether mandatory hospitalization is approved shall be served to the severe patients and their protectors.

102. Article 41 of the Mental Health Act specifies the following requirements for mandatory hospitalization of a severe patients. (1) The severe patients who have been diagnosed by specialist physician; (2) severe patients harming others or themselves or having the danger of harm; and (3) the assessment results of the specialist physicians show the necessity of full day hospitalization and the patient refuses to accept it. The designated psychiatric institutions shall immediately fill out the mandatory hospitalization basic information and reporting sheets, attach documents of the opinions of the severe patients and their protectors and other relevant diagnosis certificates, and file application to the Review Committee, for the Review Committee Category 5 psychiatric specialists, legal experts and Category 7 representatives of organizations of patients' rights and interests review the application together. Mandatory hospitalization of the patient is only allowed after the Review Committee has given its permission. The Mental Health Act defines the judicial relief procedure to protect the rights and interests of mentally health conditions patients and ensures proper medical care for them.

103. The duration of emergency placement shall not exceed five days and the attention shall be paid to the protection of rights and interests of severe patients and the engagement in necessary treatment; mandatory examination shall be completed in two days counted from the date of emergency placement. The emergency placement shall be terminated when shown by the examination there is no necessity of mandatory hospitalization or when the permission of mandatory hospitalization is not obtained in the aforementioned five-day duration. The severe patients subject to emergency placement or mandatory hospitalization or their protectors may petition the court for the ruling of ceasing the emergency placement or mandatory hospitalization. Those severe patients or their protectors who refuse to accept the rulings may appeal within 10 days counted from the date the ruling is served. No further appeal may be filed against the appeal court's ruling. During the period of petitioning and appealing, the emergency placement or mandatory hospitalization of the severe patients may continue. Public interests associations for the promotion of patients' rights recognized by the central competent authority may conduct case monitoring and review of mandatory treatment and emergency placement; if they find events of impropriety, applying the provisions of Paragraph 3 *mutatis mutandis* they shall immediately notify the individual competent authorities with jurisdiction to take improvement measures, and based on the consideration of the best interests of severe patients they may petition the court for the ruling of ceasing the emergency placement or mandatory hospitalization.

104. The correctional institution shall refuse to accept inmates with disabilities if they cannot take care of themselves in their daily life and their conditions meeting Article 11 of the Prison Act²¹. The prosecutor may take these into account and send them to hospital, guardian or other appropriate institutions. In 2015, prisons refused 23 inmates because of their senile feeble conditions, disabilities or inability to take care of themselves in daily life.

105. The correctional institution shall provide clinical services in the jail for inmates with disabilities who have slight problems with taking care of themselves, or may transfer them to specific prisons or hospitals. In severe conditions of inmates with

²¹ Every inmate shall have a regular health examination on reception. The prison shall refuse to accept any person as an inmate in following cases:

1. The person is insane or falls ill and may make harm to life by putting sentence in execution.
2. A female inmate is pregnant for five months or has given birth less than two months ago.
3. The person suffers from an acutely contagious disease.
4. The person is old, suffers from disabilities or cannot take care of himself.

disabilities, the correctional institution may release them on bail for medical treatment according to the Prison Act with the permission of the supervisory authority.

106. It is required to get a comprehensive understanding of the psychological and physical conditions, family background and offense process of the inmate when he/she is accepted to the correctional institution. It is necessary to ask the inmate with disabilities, if any, about his/her medical history or visit record. The Prison Act, Detention Act, Regulations on the Assessment of Abstention and Treatment, and other correction regulations establish proper treatment of the inmates with disabilities and ensure their rights and interests²².
107. The correctional institution makes an investigation, re-examination and promotion with respect to the protection and rehabilitation of the inmates discharged from the correctional institution to help them reintegrate into society. It makes proper arrangements before they leave the correctional institution and help them go home. For example, it contacts the family of the inmates or designates a specialist to escort them home, or asks an after-care association and its branch or charity organizations to assist in placement to ensure the connection between the correction and protection.
108. The National Police Agency, MOI, has established the Regulations Governing Fingerprints of Suspected Developmentally Delayed, Developmentally Delayed, and Physically & Mentally Disabled Children and Youths in 2012. It suggests parents or guardians of children and youth mentioned above to go to the forensic science section (center) of the city/county police department or the investigation unit of its precinct to press fingerprints. The Regulations prohibit use of the fingerprints for any purpose other than seeking lost children and youth. A total of 291 fingerprint specimens were collected in 2015 (Table 14.2).

Article 15

Freedom from torture or cruel, inhuman or degrading treatment or punishment

109. Correctional institutions shall not abuse or torture inmates. Where illegal acts are detected, authorities shall investigate the accountability according to relevant

²² Correction agencies are different in nature and many inmates go to or are discharged from the prison very often. By Jan. 2015, a total of 2,249 inmates who hold or have held a disability identification or certification in the past three years are detained in the correction agencies (Table 14.1). No yearly statistical data of inmates with disabilities are available with this aspect.

laws. Correctional officers shall only use batons or firearms legally and appropriately to bring about the least harm to the rights and interests of the inmates. Inmates with disabilities bullied in any correctional institution may report their grievances to correctional officers or file it to the competent authority, and make complaints or press charges according to relevant laws.

110. As Article 79 of the Medical Care Act specifies, medical care institutions shall pay necessary attention to medical procedures when conducting human research, and must obtain the written consent from the research subjects before the human research begins. The subjects of human research must be adults with disposing capacity. Medical care institutions have the obligation to submit the human research protocol to a board consisting of medical technologists, legal experts, and impartial citizens or representatives of civil groups for review and approval. Teaching hospitals may submit their protocols to the competent authority of the central government and conduct human research upon approval or under authorization of this competent authority to improve the medical level in Taiwan or meet the disease prevention requirements. The Ministry of Science and Technology (MOST) shall observe the requirements of the Human Subjects Research Act when funding colleges, universities, and research institutions to conduct medical or scientific research. It shall organize an Institutional Review Board (IRB) to approve the protocol and other required documents before executing the funding project.

111. A subject may be accepted for a human research based on his/her willingness only when he/she understands the possible risks and research-related damage compensation. (Refer to Medical Care Act and Human Subjects Research Act). However, the MOJ gave a letter to correctional institutions in December 2011 and required that they shall not accept the application of the inmates for any medical or scientific research to protect their rights and interests. In particular, this letter protects the inmates with disabilities from participating in human research without sound willingness.

Article 16

Freedom from exploitation, violence and abuse

112. For domestic violence prevention, the Domestic Violence Prevention Act specifies relevant protection measures for the personal safety and rights of the victims and their families. In the past four years, 3% of the victims in intimate

partner violence offenses were people with disabilities. Though they were the minority in the intimate partner violence cases, most of them were women and especially those with mental health conditions or intellectual and developmental disability. Special attention must be paid to the personal safety of this group (Table 16.1).

113. To ensure more opportunities for assistance, the 113 protection hotline offers free texting service to people with vocal and speech impairment for instant help and service.
114. Victims with disabilities and need shelter may apply to organizations for people with disabilities or medical care institutions for placement, in addition to private, privately managed public or state-owned shelters. Contracted hotels are also an option for these victims to protect their personal safety.
115. The MOHW supervises and encourages local governments to develop diverse treatment service projects by applying incentive policies to protect and assist the victims of domestic violence and meet their needs in different circumstances. People with disabilities in domestic violence and sexual assault cases may go to nearby social welfare organizations or police authorities for help when they need personal safety protection. Social workers will make assessments according to the need, mental and physical conditions of the victim, and coordinate with relevant agencies to provide resources. Currently, shelters provide services 24 hours a day if needed.
116. Of reported domestic violence victims, 70% are women and about 5~6% are people with disabilities. About 18% of the sexual assault victims are people with suspected and confirmed disabilities. About 5% of the children and youth protection cases are people with disabilities, and about 4% of them are developmentally delayed. A protective information system processes the reporting, treatment, management and statistic data with respect to the victims with disabilities in domestic violence, sexual assault and child abuse cases. The responsible agency will visit the person with disabilities involved in a reported case and makes an investigation on its own or may authorize other agencies or organizations to do so within 24 hours. The responsible agency shall submit an investigation report within four days.

117. The “opportunities and incentives for the service subjects of the institution to participate in activities” is incorporated in the evaluation indicators of the welfare institutions for people with disabilities. The institutions must take reasonable incentive measures that the Service Subject Rights Protection Committee has approved. The activities shall not exceed 4 hours every day, specialists must be designated to give guidance, and records must be retained to protect the rights and interests of people with disabilities. How institutions assist the service subjects to ensure their financial independency is also subject to evaluation. Institutions must establish guidelines as a basis to assist the service subjects for their independent financial status and shall help them open a bank account, deposit or withdraw money, and maintain income and expenditure records when necessary.
118. In case of abuse within the institution, the competent authority shall, after confirmation of the event, punish the institution with a fine of no less than NT\$60,000 and no more than NT\$300,000, and request it to make improvements with a specific time frame. Punishment will be imposed each time when required improvement is failed to be met within the given the time frame and the violator will be additionally punished with a fine of less than NT\$30,000 and no more than NT\$150,000. The competent authority may make the name of the violator public.
119. Where finding any employee of the institution guilty of violent crime, sexual harassment or sexual assault, or convicted of disorderly behavior seriously violating the rights and interests of the people with disabilities, the competent authority shall require the institution to suspend the duties of the violator and take actions such as transfer, severance, retirement or termination of the employee contract according to Article 63-1 of the PDRPA. If the violator is the responsible person of the institution, he/she shall not be in charge of the institution any more. Where any family member claims civil compensation against the institution, the competent authority shall help him/her retain a lawyer. It shall cooperate with the prosecutor to make investigations if any criminal responsibility is involved.
120. In order to enforce the training of institution professional workers from different areas and improve their professional knowledge, the MOHW has established the Regulations on Selection and Training of the Professional Workers Providing Welfare Service for the Disabled and has formulated relevant training course criteria as a reference for selection and training of professional workers to provide

welfare services for people with disabilities. Professional workers must take on-the-job training courses for at least 20 hours every year to enhance their professional knowledge.

121. Between 2011 and 2014, the Control Yuan investigated 30 cases related to the human rights of the people with disabilities. The majority of these cases are related to the health of the people with disabilities (26.6%), followed by cases involving the adequate standard of living and social security (23.3%) and cases related to exploitation, violence and abuse (20%) (Table 16.2). Of these 30 cases, the Control Yuan proposed corrective measures to the competent authorities in 20 cases (66.7%) and initiated impeachments against 17 officials in 2 cases. For the 7 cases related to exploitation, violence and abuse, 5 were subject to corrective measures and 2 involved the impeachment against 17 officials²³.
122. The legal basis for protection of crime victims is the 1998 Crime Victim Protection Act. The purpose of the Act is to protect the rights and interests of the family members of deceased victims, seriously injured victims, or victims of sexual assault crimes. Accordingly, people with disabilities who meet the abovementioned requirements shall also be under the protection of this law. The Association for Victims Support (AVS) provides the following protection services under the supervision of the MOJ and MOHW: 1. Legal assistance: litigation counseling, retaining fee support and civil damage compensation; 2. application for compensation: assistance in application for crime victim compensation; 3. rehabilitation to normal life: implementation of kindness projects to provide psychological counseling, financial support to crime victims or their children for

²³ In 2012, for example, the Control Yuan investigated a case of multiple, repeated sexual assaults and harassments at a public school for the hearing impaired in Tainan. It was found that there were 164 incidents of suspected sexual assault and harassment in 8 years with approximately 90 perpetrators and victims. Most of the victims are students, either hearing impaired or with multiple disabilities, and their communication ability is limited. However, the school and the educators did not take proactive action, report the offence for investigation according to law, provide timely psychological counseling, or take protection measures or offer assistance (Case number: 101-Jiao-Diao-0037, 101-Jiao-Diao-0038). In 2014, the Control Yuan also investigated a case in which the director of a private education center for people with development disabilities in Miaoli was suspected of abusing and torturing the students. The Control Yuan found that the education center was given bad rating many times but the competent authorities did not perform their duties of supervision, evaluation and assistance. The relevant regulations as well as the prevention and management measures for handling such incidents were also not comprehensive enough (Case number: 103-Nei-Diao-0016). The investigation showed a serious breach of duties by the government and its officials. The Control Yuan not only proposed corrective measures and impeached the related officials, but also demanded the competent authorities to make improvements with reference to the investigation opinions and punish the officials who had neglected their duties or had acted illegally. The Control Yuan follows up on the result of these improvements. See <http://www.cy.gov.tw/np.asp?ctNode=871&mp=1> (visited on 10/25/2015).

schools, occupational training, employment support, medical resources, home service and long-term care service for seriously injured victims; 4. financial support: emergency living support, and collection of social resources for seriously injured victims, such as diapers, nutrients and assistive devices.

Article 17

Protecting the integrity of the person

123. According to Article 63 of the Medical Care Act, medical care institutions shall explain the reasons for a surgery operation, success rates, possible side-effects and risks to the patient or his/her legal agent, spouse, kin, or interested party, and must obtain his/her signature on the letter of consent for surgery and anesthesia before commencing the surgical procedure. The legal agent, spouse, kin or interest party of the patient who is a minor or unable to affix his/her personal signature may sign the letter of consent for him/her. Since the Medical Care Act and other related regulations do not differentiate between people with or without disabilities, the aforementioned provision shall be applicable to the informed consent of the people with disabilities.
124. To protect women with disabilities from forced sterilization and to ensure women and young girls with disabilities from undergoing forced abortion, voluntary induced abortion and ligation can only be performed after the conditions stated in Articles 9²⁴ and 10²⁵ of the Genetic Health Act are satisfied. Violators will be

²⁴ Article 9 of the Genetic Health Act 9: Induced abortion may be conducted for a pregnant woman, subject to her own accord, if she has been diagnosed or proven to meet any one of the following:

1. She or her spouse acquires genetic, infectious or psychiatric disease detrimental to reproductive health.
2. Anyone within the fourth degree of kin relative of herself or her spouse acquires a genetic disease detrimental to reproductive health.
3. By medical consideration, pregnancy or delivery may cause life threatening risk or detrimental to her physical and mental health.
4. By medical consideration, risk of teratogenesis may present for the fetus.
5. Pregnancy as a result of being raped, lured into sexual intercourse or in sexual intercourse with a man prohibited to lawfully marry her.
6. Pregnancy or childbirth is likely to affect her mental health or family life. Induced abortion to an unmarried minor or a woman under guardianship or assistance according to the preceding provisions shall be subject to her statutory agent's or assistant's consent. Induced abortion to a married woman according to paragraph 6 above shall be subject to her husband's consent unless her husband is missing, unconscious or deranged.

For judgment of induced abortion requirements set forth in Section 1, the central level competent authorities, when necessary, may have the Genetic Advisory Committee research and review to establish standard and have them publicly announced.

²⁵ Article 10 of the Genetic Health Act: A married man or woman may, on his/her own accord and subject to his/her spouse's consent, receive ligation, provided that ligation may be imposed straight on his/her own accord if anyone of the following conditions founded through

punished according to the Offenses of Abortion and Offenses of Causing Injury in the Criminal Code.

125. In collaboration with the MOE, the Juvenile Sexual Health Project was initiated to help teenagers under 20 years old, including those with disabilities. The government has taken various service measures and approaches for implementation of the project, including construction of the website “Secret Garden” for teenagers to provide correct sexual knowledge, establishment of an anonymous and private environment for formation of relationships between boys and girls, video counseling service for interpersonal relationship and mental and physical health, cooperation with health promoting schools to organize on campus lectures with parents, and providing information on consultation and referrals for sexual health for teenagers (Table 17.1). Seventeen hospitals and medical care centers, at least one in each city/county, has established teenager-friendly clinics to provide services and advice regarding boy-girl relationships, interpersonal relationships, emotional problems and reproductive health and ensure that teenagers can have more friendly and complete healthcare service (Table 17.2).
126. The government amended the Mental Health Act, enforced in December 1990, in July 2008 to protect the human rights of mental health patients. The mandatory hospitalization that restrains the freedom of the patients is now subject to stricter application requirements and review procedures. More legal relief mechanisms have been incorporated in this law to protect their rights and interests. Patients suffering from severe mental health conditions have the opportunity to make statements to the Mental Illness Mandatory Assessment and Community Treatment Review Committee by video or phone conference since April, 2013 to protect their right to legal relief and statement of their opinions about the

diagnosis or certification:

1. She/he or her/his spouse acquires genetic, infectious or psychiatric disease detrimental to reproductive health.
2. Anyone within the fourth degree of kin relative of herself/himself or her/his spouse acquires a genetic disease detrimental to reproductive health.
3. Her or His wife’s pregnancy or delivery is endangering the mother’s health. An unmarried man and woman meeting anyone under provision above may receive sterilization straight on his/her accord; an unmarried minor or a person under guardianship or assistance shall be subject to consent from his/her statutory agent or assistant before receiving

The requirement for spouse’s consent as set forth in paragraph 1 above may be dispensed with if his/her spouse is missing, whereabouts unknown, becomes unconscious or deranged. For judgment of sterilization requirements set forth in section 1, the central level competent authorities, when necessary, may have the Genetic Advisory Committee research and review to establish standards and have them publicly announced.

mandatory hospitalization. The revised Habeas Corpus Act, July 2014, grants the patient the right to apply for legal relief directly to the court. The number of the mandatory hospitalization cases decreased from 835 in 2013 to 766 in 2014.

Article 18

Liberty of movement and nationality

127. The government has never prohibited any citizen from leaving or entering Taiwan because of disability (Article 10 of the Constitution and Articles 16 and 75 of the PDRPA). Any person who has the required documents and is not subject to any control regulations can leave or enter Taiwan freely regardless of his/her disability. (Refer to the Immigration Act.) In addition, the government set up special counters at airports and harbours to help people with disabilities conveniently leave and enter Taiwan.
128. The Nationality Act grants the nationality of the R.O.C. on the basis of the jus sanguinis principle with the jus soli for special cases, and all citizens can acquire the nationality irrespective of sex, religion, race, class, party affiliation, birthplace, mental and physical disabilities. People with disabilities are subject to the same laws and regulations in the acquisition, loss, restoration and revocation of the nationality, unless it is revoked in an administrative disciplinary procedure or due to illegal conduct.
129. Article 6 of the Household Registration Act specifies that nationals under 12 years of age born in the R.O.C., including children with disabilities, are subject to birth registration. In case any abandoned or helpless children are identified, the person identifying these children or the welfare institutes for children and youth shall report to the police authority, and the applicant shall present the official document that the police authority issues with the name of the identifying person, the identifying place and time, and the physical characteristics of the abandoned or helpless children to apply for birth registration with the household registration office.

Article 19

Living independently and being included in the community

130. The PDRPA ensures the right of people with disabilities to enjoy life in community. The purpose of the law is to protect the rights and interests of people with disabilities including the opportunities to equally participate in social,

political, economic and cultural activities, promote their independence and development, and provide different protection measures in favor of their rights and interests²⁶. These are helpful for people with disabilities to integrate into the community with dignity, enjoy public resources equally, and participate in social life fully.

131. Article 50 of the PDRPA requires local government to provide home services according to the results of need assessment, including home care, daily living and psychological reconstruction, residence or housing in the community (Table 19.1), day care and residential care, home-based care services, support services for independent life (Table 19.2), and so on which personal support and care services required by people with disabilities so as to improve their quality of life, opportunities for social participation, and independence in daily life. The number of people with disabilities who have received home and community based services from the government increased from 5,610,540 in 2011 to 8,462,105 in 2015 (Table 19.3). Local governments implement a tracking system to take care of people with disabilities who live alone and provide them with required resources and services.
132. The MOHW assists local governments to implement a 5-year (2016-2020) care service resources plan for people with disabilities to provide appropriate required care service resources and ensure the development of aging-in-place and accessible care services. To enhance the right of the people to select services, the care service resources are deployed with consideration of “community care” and “localization”. Local governments cooperate with private organizations to build welfare resources networks for people with disabilities based on the “one community-based service per township” principle. Home and community based care services have the first priority and the institution-based service is provided as a support in the implementation. Localized and integrated resources are provided continuously for these services such as day facilities, day care centers, LOHAS supply bases of the community, community living and reconstruction, and many other resources.
133. The MOI revised "Regulations on Design Standards and Encouragement of Barrier-Free House" on September 19, 2016. The proprietor of a new house that meets the design criteria of an accessible house may apply to the local

²⁶ Including the rights and interests of health and medical care, education, employment, support service, and economic security.

government for the “Accessible House Household Label”²⁷ or “Accessible House Building Label”²⁸. Local governments may provide appropriate subvention for the owner who improves the accessible facilities in his/her house. The Regulations also loosen the restrictions on the installation of lifts in a private house down to apartment buildings of less than 5 stories.

134. The MOI revised the Voluntary Renewal Subvention Regulations of the Central Urban Renewal Funds in September 2014 to increase the subvention for the installation of lifts in a legal building of more than 20 years or less than 5 stories. For the base that meets the requirements of the designation criteria of renewal units specified by the local government, the applicant may apply for subvention for extension or improvement of existing accessible facilities or construction of new lifting equipment when he/she requests the subvention for renovation and maintenance of an old building subject to the procedure in the Urban Renewal Act.
135. The MOI provides housing subvention according to the Integrative Housing Subvention Guidelines. It integrates the housing subvention plans classified by occupation at the time and takes the household incomes and disadvantages of the family as major considerations in the subvention. The Ministry provides rent subsidies, home mortgage interest subsidies, and loan interest subsidies for house repair to help citizens live in appropriate housing (Table 19.4).

Article 20

Personal mobility

136. The government makes efforts to ensure the accessibility in every aspect including transport and building environment (referring to Article 9 - Accessibility). It also encourages R&D of technology, development of products, and promotion of industries.

²⁷ Requirements for the application include more than one dwelling unit (house) of the proprietary section in an apartment building or any building other than the apartment buildings that meets the requirements of accessible housing in terms of the types, ranges, accessible facilities and design criteria.

²⁸ Application must be made with a single house in an apartment building as a unit. Requirements for the application include more than five present or at least three dwelling units (houses) of the proprietary section that meets the requirements of accessible housing in terms of the types, ranges, accessible facilities and design criteria.

137. The government provides cash subsidies for people with disabilities to purchase assistive devices, including personal mobility aids, based on their needs and the economic condition of their family. The assistive device center recycles assistive devices and provides renting and lending or services to ensure utilization of limited resources and ease the burden of the people with disabilities to purchase assistive devices (Table 20.1). The MOHW will consider collective purchase of expensive assistive devices and provide them by renting or lending and subsidizes the rent.
138. The MOST executes research project of assistive devices every year (Table 20.2). The MOEA implements technical assistance projects to promote commercialization of assistive devices and encourage domestic manufacturers to develop advanced assistive devices for people with disabilities. Taiwan Industrial Innovation Platform (TIIP) Program, Conventional Industry Technology Development (CITD) and Technology Development Programs (TDPs) cover relevant subvention and assistance programs.

Program	Description
Taiwan Industrial Innovation Platform (TIIP) Program	The MOEA supports assistive device companies to develop competitive products or services. The "Development of the Full-Actuated Safety Protection Stair Lift Assistive Device ²⁹ ", one of the subvention programs, subsidizes manufacturers to develop products for people with disabilities and solve problems of senior citizens and people with difficulty in movement when they climb stairs. The program is also helpful for development of the electronic control and metal processing technologies for assistive lifts and sale of them at a lower price.
CITD Program	The MOEA builds a friendly environment by subsidizing the development of assistive products and encouraging domestic companies to develop advanced products for people with disabilities. From 2011 to 2014, the MOEA had assisted 21 companies in the development of advanced assistive products ³⁰ , granted subsidies of TWD 21.65 million, and encouraged companies to invest TWD 366.769

²⁹ The government provides a subsidy of TWD 5.2 million and encourages enterprises to invest TWD 7.8 million in R&D.

³⁰ Most of the companies develop wheelchairs, medical beds, canes, rehabilitation shoes based on ergonomics and rehabilitation therapies.

	million in the development of assistive products (Table 20.3).
Technology Development Programs (TDPs)	The MOEA assists companies in the technology industry to develop assistive devices and innovative technologies. It subsidized 20 industrial TDPs ³¹ (Table 20.4) and 4 TDPs for research institutions between 2011 and 2014. The legal entities develop critical technologies and modules to help manufacturers make a breakthrough in technology development and ensure that products can meet the requirements of the user via UI/UX experience feedback (Table 20.5).

139. The Taiwan Railways Administration and the Civil Aeronautics have established service processes and regulations for people with disabilities or difficulties in movement to provide a friendlier environment for them. The Directorate General of Highways, MOTC, has made a tutorial video of “Instructions for Low-Floor Bus Drivers to Operate Barrier-free Equipment” and held nationwide demonstration activities.
140. The MOST has provided training to demonstrate the use of TDP innovative assistive devices for people with disabilities and their assistants from 2013 to 2015. A total of 1,566 people have participated in the training.
141. The MOST will expand the program to attract more assistive technology projects in 2017, and will work with academic research institutions in ICT, mechanical control, Internet and clinical medicine. The MOST will promote cooperation among product testing and verification laboratories and preclinical testing centers to accelerate product development and evaluate prototypes in various application sites for feedback from broadened group of users.
142. The MOEA helps build friendly applications of mobile broadband according to the Mobile Broadband Service and Industry Development Initiative (2015-2017) of the Executive Yuan. It cooperates with innovative teams to develop 4G application software or service experience to meet the demand of people with disabilities (e.g. people with visual, hearing or vocal and speech impairment). The

³¹ The products include stair lifts, high safety evacuation lifting equipment and breathing sensor masks.

results include 4G mobile learning for people with visual impairment (smartphone hand gestures to create bookmarks for reading and listening, and help people with visual impairment play multimedia videos), sign language assistance for people with hearing impairment (sign language input for bilateral switching between text and sign language icons), and mobile icons for people with vocal and speech impairment (built-in graphic card to improve the portability of conventional assistive communication devices). They will continue to encourage manufacturers to invest in the development of products and services for people with disabilities.

Article 21

Freedom of expression and opinion, and access to information

I. Webpage accessibility

143. In 2003, the Research, Development and Evaluation Commission (changed to the National Development Council on January 22, 2014), Executive Yuan, cited the Web Content Accessibility Guidelines 1.0 (WCAG 1.0) released by the Web Accessibility Initiative (WAI) of the W3C in May 1999 to protect the rights of people with disabilities to access information and promote the development of accessible websites in Taiwan. It established, announced and implemented the Accessible Web Development Guidelines with reference to domestic and international web accessibility information.
144. The government updated and released the Regulations for the Accessibility of Government Websites in 2005, and requested all agencies to meet the conformance level A+ for their websites before the end of 2008. The NCC revised the Regulations on Examination and Issuance of Web Accessibility Conformance for Websites Established by all Levels of Government Agencies, Institutes and Schools and the AWDG in 2013. It builds the Web Accessibility Service and allocates a budget to deal with the requisition, registration and testing of the accessibility conformance level for public and private institutions (including private companies and civil associations). It has accepted applications for the conformance level of accessible webs since 2014.
145. In 2013, the NCC drew up the AWDG ver. 2.0 (draft) based on the WCAG 2.0 (December, 2008), and announced the draft immediately for comments. It expects to accept applications for the conformance level of accessible webs from January 2017.

146. A total of 8,123 subordinate agencies of the Executive Yuan and local government agencies (including schools) underwent webpage accessibility reviews (including human review and spot checks conducted by people with disabilities) by December 31, 2015. A total of 5,710 websites (about 70.3% of the websites meeting the conformance level) of the government agencies, institutions, and schools meet the conformance level. The NCC expects to finish the census of the websites of all agencies by the end of June 2017 according to the announced AWDG ver. 2.0 (draft). The government requires the agencies that have not made the application to meet the conformance level specified in the Guidelines by the end of August 2019. It also encourages private institutions (including private enterprises, schools and civil associations) to apply for the conformance level of accessible websites. A total of 814 private institutions have filed such application and 572 websites meet the conformance level.
147. The MOEA held a Web Accessibility Promotion Seminar in 2014 and helped online retail companies to build accessible websites. It called a press conference to call attention to online purchase accessibility and won the support from numerous domestic e-commerce companies. The Ministry has announced that it will facilitate simplification of member login and checkout processes, introduction of webpage anchors, and enhancement of website audio guides. Alternative texts are added to the images of daily consumer products to help consumers understand the products quickly. The Resource Center for the Visually Impaired of Tamkang University and the Technology Development Association for the Disabled will continue to provide companies with technical consulting services.
148. Banks have begun to provide accessible webpages that show the interest rate and exchange rate openly. The websites of 37 domestic commercial banks and Chunghwa Post Co., Ltd. have met the conformance level A+ to provide friendlier financial services for people with disabilities. The government guides the Taiwan Securities Association and the securities firms with a net worth above TWD 10 billion to add an Accessible Friendly Financial Service Area to their websites, and announce friendly financial service information and customer hotlines in this area. It is then adjusted to an accessible webpage to meet the conformance level A+ by the end of 2016.

II. Sign language and transcription

149. To ensure the rights of people with hearing or vocal and speech impairment to participate in society, local governments have set up windows to provide sign language translation services, and established regulations governing the services and operating procedures of sign language translation according to Article 61 of the PDRPA. In 2014, there were 242 certified sign language translators in charge of the service window of the local government and a total of 3,763 hours for sign language translation services were provided.
150. Local governments will finish setting up windows for transcription by December 2017. The MOHW has coordinated with local governments to implement trial operation of the transcription services and train transcription professionals from 2016 to ensure the service quality.
151. The Judiciary and Organic Laws and Statutes Committee made amendments in July 2016 and agreed on the proposal of providing transcription or sign language translation services for parliament broadcasts of the Legislative Yuan. It aims to ensure that people with disabilities may understand the parliamentary discussion and have the right to equal access to information.

III. Broadcast media

152. The NCC incorporates the promotion of media accessibility for people with visual and hearing impairments in its license reviews and renewal processes according to the Directions for Evaluating the Operating Plan of Television Businesses and the Regulations for License Renewal of Television Businesses. By integrating the incentives in the license reviews and renewal processes, the NCC encourages television broadcasters to promote media accessibility for people with visual and hearing impairments. It also incorporates the Corporate Assistance in Public Affair and Achievement in Corporate Social Responsibility as an incentive measure in the review and renewal of licenses for satellite television broadcasters.
153. Subtitles are available for all TV programs except for live broadcasts. The government encourages radio and television broadcasters to add subtitles to the headlines of their news reports. If the subtitle is not available in time, the broadcasters shall add assisting texts for people with hearing impair to understand the news. Cable Radio and Television Terminal Equipment Technical Specifications (draft) establish rules for multiple subtitles (i.e. closed caption) and electronic program menus on terminal devices.

154. The NCC has implemented the Television Viewing Behavior and Satisfaction Survey every two years since 2008, and has held focus group interviews with people with disabilities to understand their satisfaction with television and audiovisual media as well as their needs and viewing behavior. It has held 7 public interviews since 2015, and the broadcasters and people with disabilities have taken part in the interviews.

155. The NCC will continue to encourage broadcasters to offer special tariffs for people with disabilities. It has held the Telecom Carrier Discussion on the Discount Plan for People with Disabilities to lower the threshold and improve the accessibility for them with favorable tariffs, and help them use telecom services more easily.

IV. Others

156. The Judicial Yuan continually updates the hot and common links on its website. These links lead to sections of civil affairs, criminal affairs, administrative litigation, and juvenile and family affairs. People with disabilities and the general public may browse the latest news, advertisements and legal document examples. (No simplified litigation example is available. However, people may click Litigation Assistance to view the legal document samples. Simple and understandable explanations are available for each sample.) The Judicial Yuan uses these links to provide care to people with litigation needs. Family Cases Service Center has appointed social workers to provide access to the family court for people with disabilities.

157. The Judicial Yuan is currently promoting the E-Court Plan with an online indictment system as the core. People with disabilities and the general public may authorize a lawyer, accountant, patent attorney or patent agent to file a lawsuit, exchange legal documents, and appeal to a higher court via the online indictment and legal document submission platform that the Judicial Yuan provides for civil and administrative litigation. The Judicial Yuan activated the platform for the administrative litigation on intellectual property rights in July 2015 and has extended its availability to tax-related administrative litigation since September 2015. The platform is expected to become applicable to all civil litigation from 2016, making it more convenient and efficient to file lawsuits and accept legal documents. The court litigation system will be more transparent, convenient and reliable.

158. The FSC has instructed the BAROC to establish the Principle for Friendly Financial Service. It requests financial institutions to provide appropriate and friendly financial services for people with disabilities to meet their needs. Financial institutions shall provide online booking services and designate specialists to help them use the financial services with the aid of proper transaction and operating processes. They shall notify them in writing or by voice message, fax, text message or email. The FSC has requested financial associations to set up practical SOPs in consideration of the needs of people with disabilities by the end of 2016.
159. Insurance companies shall offer proper friendly service measures required by relevant laws and regulations to meet the needs of people with disabilities. For example, they may provide on-site services to assist them to use appropriate services.³² In addition to training employees, insurance companies enhance their communication channels for people with disabilities by promoting the policies among their sales representatives to help them take out insurance more easily.

Article 22

Respect for privacy

160. The Personal Information Protection Act (PIPA) protects the personal information of all currently existing natural persons. It requires all government and non-government agencies to collect, process and use personal information according to laws and regulations and perform their obligations to protect personal information files. The PIPA grants the party of the personal information the rights to 1.enquire or request to review one's personal information; 2.request to make duplications of the personal information; 3.request to supplement or correct the personal information; 4.request to discontinue collection, processing, or use of one's personal information; and 5.request to delete one's personal information. The party of the personal information may claim for damage compensation if any government or non-government agency acts in violation of

³² The services include walk-in service, written documents, email, phone, fax and text message. The insurance company provides the following for the solicitation and customer service based on the needs of the customers to protect the rights of people with disabilities to take out insurance:

- (1) The insurance company designates personnel to explain the contract and provides magnifiers, large-print contracts and policy terms to people who are unable to read and with reading difficulty.
- (2) The insurance company provides transcription services to people with writing difficulty and explains the document with the authorization and consent of the insured. It makes sure that the insured understands the document and he or she shall endorse the document or affix his/her seal.
- (3) The insurance company arranges appointed special services and exclusive spaces for people with special needs.

the PIPA and infringe upon his/her rights.

161. According to Article 9, Paragraph 3 of the Regulations of Social Insurance Premium Subsidies for Disabled, people with disabilities may apply for the elimination of media information exchange by providing salary certificate to local government in the purpose of protecting their privacy and rights and premium subsidies shall be appropriated to their bank account.
162. The National Health Insurance Administration, MOHW, also known as the National Health Insurer, has established the Guidelines for the National Health Insurer to Provide Information Outward³³ to ensure open information, reasonable utilization of personal information, and protection of personal rights.
163. Since implementation of the National Health Insurance in 1995, the information which the National Health Insurance Administration, MOHW, acquired within the scope of its authorization has been made public or kept in secrecy according to the PIPA and related laws. They are applicable to all the insured and people with disabilities are respected and protected equally in their privacy.
164. The National Health Insurance Certificate (or NHI Card) retains the information about the last six medical visits of the patient, and the doctor may consult this information during the diagnosis. The medical visit information of the patient has been saved in a cloud-based medication record system of health insurance since 2013 to increase query efficiency, avoid repeated prescription, enhance drug safety and improve medical quality. However, the insured has the option to restrict the contracted medical care institution or pharmacist in the rights to consult his/her medication records to protect his/her privacy. The NHI Card provides a password function for the patient³⁴, and the cloud-based medication record system of health insurance also provides this password function to restrict the access³⁵. The new NHI Card, issued since 2010, describes the password

³³ Article 3 of the Guidelines for the National Health Insurer to Provide Information Outward: "In addition to the Act, the business or personal information that the insurer provides outward shall be subject to The Freedom of Government Information Law, PIPA, and other related laws and regulations."

³⁴ Article 7 of the Regulations Governing the Production and Issuance of the National Health Insurance IC Card and Data Storage: "A beneficiary may set up a password on his or her NHI IC Card to restrict the access to his or her personal NHI data, data of medical services and data of health administration."

³⁵ Article 11 of the Regulations Governing the Production and Issuance of the National Health Insurance IC Card and Data Storage: "When providing medical services for beneficiaries, contracted medical care institutions shall access medical records already stored in or uploaded

setting function on its backside (and also on the website of the government). The patient may decide at his/her discretion whether to provide his/her information to the doctor for reference. The contracted medical care institution shall not force the patient to provide the password or refuse to provide medical service without justifiable reasons. To download the medication record of the patient by batch from the cloud-based medication record system of health insurance, the contracted medical care institution must acquire the written consent of the patient, sign the letter of consent for use of the medication record file, promise to observe the PIPA and related information protection regulations, submit the information security checklist of the institution, and explain to the patient the purpose of accessing the information.

165. According to Article 24 of the Mental Health Act, without consent by a patient, audio recording, video recording or photographing of the patient may not be performed, and the name or domicile (residence) of the patient may be reported either. The patient may file a complaint to the local government or the MOHW if such infringement of privacy occurs. The government deals with the complaint according to the Mental Health Act, PIPA, Administrative Procedure Act, and Guidelines for the Executive Yuan and Subordinate Agencies to Handle Citizen's Complaints.
166. Welfare institutions for people with disabilities are obligated to keep confidential the files and information of the party concerned confidential. In addition to common evaluation indicators, the government has also established individualized evaluation indicators for these institutions in consideration of their features and special needs in practice. For the indicators related to the privacy, standards and grades have been defined with respect to the facilities and maintenance of safety as well as protection of rights and interests, including privacy and convenience of toilets, bathing facilities, bedrooms, and management and confidentiality of personal information.
167. Within the necessary range of protecting the safety of patients, the installation of monitoring devices by mental health care institutions, but the patient shall be informed of the situation; in the case of severe patients, their protectors shall be informed. Hospitalized patients shall have the rights of personal privacy,

through NHI IC Cards based on medical needs. Notwithstanding, the medical care institutions may not access the aforementioned records if a beneficiary sets up a password to restrict the access to data.”

communication freedom, and receiving visitors; no restriction thereof may be implemented unless for the patient's disease conditions or medical care needs.

168. According to Article 10, Paragraph 1, Subparagraph 4, Item 3 of the National Health Insurance Act, the inmates who have served sentences in a correctional institution for more than two months and qualify to take out the insurance shall be the insured under the National Health Insurance Act. The government shall pay the benefits according to the National Health Insurance Act in case of illness, injury or maternity. Since the inmates other than those subject to Article 10, Paragraph 1, Subparagraph 4, Item 3 of the National Health Insurance Act and foreign inmates with an invalid residence permit are not insured under the National Health Insurance or in a situation in which payment of the benefits has been suspended, the correctional institution will allocate a budget to request contracted and part-time physicians to take care of them when they are sick in jail to protect their human rights to medical care. When an inmate is sick and receives outpatient service in the correctional institution using his/her National Health Insurance, the medical service institution shall hand over the medical visit record of the inmate to the correctional institution for retention according to the Regulations on Managing the Medical Visits of the Correctional institution's Inmates as the Insured of the National Health Insurance. Records must be made for future reference when an inmate is sick and the correctional institution asks a contracted and part-time physicians to provide medical care (Article 72, Paragraph 2 of the Enforcement Rules of the Prison serving Act) to ensure retaining the health information of the inmate. All the above-mentioned management measures are equally applicable to all inmates, including inmates with disabilities.

Article 23

Respect for home and the family

169. The Constitution safeguards the free development of personality based on respect of human dignity. The Constitution institutionally protects the marriage and family as a foundation for the formation and development of the society. The family system develops based on the free development of personality and is essential for ensuring the functions of inheritance, education, economy, and culture. It is vital for an individual's growth in the society and is a foundation for the creation and development of our society. There should be no difference solely because of disabilities.

I. Reproductive health service

170. Refer to Article 25 – Health - for the reproductive health service for women with disabilities.

II. Adoption and foster care

171. The PCYWRA and the Permit and Management Regulations for Children and Youth Adoption Service Providers specify that parents and guardians unable to take the responsibility for their children’s maintenance (including children and youth with disabilities) and are considering adoption shall entrust an adoption matching service agency to search for an appropriate adopter. The adoption matching service agency shall conduct the necessary interviews for the adoption after accepting the consignment and make an assessment report. The agency shall provide relevant welfare services or refer the children to the organization providing proper welfare services if it is proved after the assessment that the adoption is not applicable. Local adopters have priority to adopt the child or youth. The international adoption is allowed only if there is no proper local adopter matching the special needs of the children and youth. There were 1,187 adopted children and youth during the period from 2012 to 2015, and 42 of them (3.54%) had disabilities (Table 23.1). Children and youth with disabilities have equal rights and interests in the adoption service processes and review criteria, regardless of local or international adoption.

172. Article 62 of the PCYWRA³⁶ specifies that parents or guardians may apply to authorized local governments to place and protect the children or youth who are unable to lead a normal family life due to their families’ significant accidents. Authorized local governments are responsible to find a foster family or a proper placement institution that is best to the children or youth. The foster family or the placement institution shall provide education, care and protection based on the individual conditions of the children and youth to ensure their rights and interests (Table 23.2 and Table 23.3).

III. Support for families of people with disabilities

173. The government provides care subsidies for people with disabilities referred to and placed in a social welfare institution, mental health rehabilitation institution, care institution, veteran home and community residence center with reference to the assessment to mitigate the economic burden of the family that has members

³⁶ Parents, guardians, right parties or children and youth welfare institutes will apply to authorized municipal agencies and county (city) governments to place and protect children and youth who are unable to lead a normal family life due to their families’ significant accidents.

with disabilities. The government subsidizes the listed low-income families in full. For the remaining families, it provides subsidies equal to 25% to 85% of the charging standard of the institution based on the age of people with disabilities, number of people in placement and economic status of the family.

174. Senior high schools and below provide the following information, service and support for students with disabilities and their family according to the Family Education Act, the Regulations for Schools K-12 to Provide Family Education and Counseling Support and the Special Education Act 1. The school shall work with the Parent Association to conduct parental education and provide no less than four hours of family education courses and activities beyond regular curricula during each academic year. 2. The school shall promptly notify the parents or guardians and the people who actually take care of the student, and shall provide these adults with family education and advisory or counseling courses upon occurrence of any major disciplinary event or deviant behavior of any student. 3. Schools at all education stages shall develop an individualized education plan for each special needs student via a multidisciplinary team and invite parents to participate in the process. The parent may have professionals accompany them for the participation if necessary. 4. Schools shall offer the family who has special needs counseling service, guidance, parental education and transfer service.

Article 24 Education

175. The government enacted the Special Education Act in 1984 and has since added provisions of assessment consultation and complaint, exam service, professional team, educational subvention, and educational aid. It has a special education advisory committee and regularly gathers scholars, experts, private organizations and representatives of government agencies to solicit advice. The government incorporates the support and guidance for students with disabilities into the integrated inspection and review of the schools, and promotes the inclusive education to catch up with the development trend of the world. It arranges most of the students with special needs to study at regular schools and implements special education by establishing self-contained special education classrooms, resource classrooms and itinerant programs. It also implements special education programs and provides special education service for the students with special needs in regular classes. Some students with severe disabilities study at special

education schools (Table 24.1, Table 24.2 and Table 24.3).

176. The MOE takes great efforts to implement inclusive education at senior high schools and below. It makes plans for improvement of the identification rate, educational placement, curriculum adjustment, supportive service system, enhancement of the expertise in special education, transportation and its fare, reporting on students with disabilities, and subvention for identification of students with disabilities and placement of them to attend registered private kindergartens and social welfare institutions (Table 24.4). The inclusive placement rate at senior high schools and below was up to 85% during the period from 2011 to 2015. The statistics shows that senior high schools and below provide more sophisticated special education services every year and implement the inclusive education well.

I. No discrimination and equal opportunity

177. The MOE continues to review the admission of students with disabilities at senior high schools and below, required supportive service systems, and seminars for teachers to improve their expertise in special education to promote the 12-year national education policy. It has lowered the threshold for receiving kindergarten and nursery integration service to 2 years of age, and continues to review the current preschool education policy (including identification and placement subsidies, and preschool programs for special education) to provide comprehensive services.

178. The MOE holds screening tests for students with disabilities to enter college and university. It also encourages colleges and universities to provide resource classes and subsidizes the startup, consultation service, schoolwork guidance, teaching assistants for students with disabilities, teaching materials, student guidance activities, and purchase of administrative and teaching equipment. The aforementioned subsidies are up to TWD 300 million annually and increase year by year. More than ten thousand students receive these services every year.

179. The MOE also provides appropriate entrance examination services for students with disabilities, including English listening tests, subject competence tests, assigned-subject tests, and integrated competence tests. The department of admission and examination affairs provides exam services for test takers with disabilities, including early entrance, extension of test time, exam papers with enlarged text, braille exam paper, braille computer, playback of text questions,

transcription service, and other services for the students with functional disabilities. Since 2000, the MOE has subsidized the examination affairs related to the test takers with disabilities to protect their rights and interests and ensure the service quality.

II. Support service

180. The MOE plans the stage-based compulsory education to promote the 12-year national education policy. It protects the learning rights of the students with disabilities by improving the accessible environment, subsidizing the transportation, purchasing shuttle buses as well as providing and subsidizing teaching aids. The Ministry budgeted TWD 100 million in 2014 and 2015, respectively, and carried out the Improvement Plan of Barrier-Free Facilities at Senior High and Vocational Schools (Table 24.5). It also allocates a budget of TWD 80 million to help local governments improve the accessible campus and arrange relevant facilities according to laws, in addition to replacing 89 shuttle buses for students with disabilities from 2012 to 2015. Article 28 of the Special Education Act provides that schools under senior high schools shall develop an individualized education plan for each student with special needs via a multidisciplinary team and invite parents to participate in the process. The parent may have professionals accompany them for the participation if necessary.

181. The MOE has six service centers, including a service center for students with hearing impairment, according to the Regulations on Support Services for Students with Disabilities to give administrative support to senior high schools. It subsidizes local governments, has resource centers, hires special education experts, and assists students with disabilities in admission. The Ministry has authorized 13 universities with special education departments to set up a special education center and provide professional counseling service for other colleges and universities. It also has authorized Tamkang University, Chung Shan Medical University Hospital, and National Kaohsiung Normal University to establish assistive technology centers for students with visual, physical and hearing impairments (Table 24.6), and provides suitable teaching materials (including large-print books, braille books and talking books) for the students with disabilities at all levels of their education. For students with disabilities at senior high schools and below, the MOE will review their needs for assistive technology and subsidies for these devices. It will continue to provide assistive technology, arrange counseling training in the maintenance of braille computers, and provide adaptive teaching materials to improve the learning effectiveness of the students

with disabilities at colleges and universities.

III. Teacher and professional team

182. The statistics of the Special Education Transmit Net in October 2015 showed that it was required to hire qualified sign language and braille teachers for 104 classes in Taiwan. The current pre-service education courses for elementary and middle school teachers include Introduction to Special Education or Education for Special Needs Student with two to three credits. Teacher education students in general education may take these courses to strengthen their competence in special education. The MOE makes great efforts to promote the inclusive education and enhance the quality of the special education teachers while taking different learning needs of students with disabilities into account. It implements the enabling conferences of on-the-job training for teachers, and the workshops and seminars of special education, administrative affairs, special education teaching, and scholarship work. It will provide subvention to schools for teacher training programs, accelerate the integration of policy directions and resources of relevant agencies to effectively promote the training program for sign language and braille teachers.

183. The MOE requests schools to hire counselors for the resource classroom according to the Regulations Governing the Establishment and Administration of Special Education Facilities and Personnel at Higher Education Institutions. These counselors must attend special education seminars to increase the quality of the special education for students with disabilities in college and university. The MOE will strengthen the pre-service and on-the-job training and implement the standard-oriented teacher training system to enhance the professional knowledge and quality of special education teachers.

IV. Physical fitness

184. The MOE holds seminars to enhance the professional knowledge of the teachers and establishes focus schools to build inclusive education models. It implemented two Enabling Seminars for Physical Education Teacher every year from 2011 to 2015. The MOE supported 50 focus schools and held 10 teaching seminars and 8 teaching workshops. It subsidized the Republic of China Sports Federation to organize the Chairman Cup Championship for Students with Disabilities at Middle Schools and the Physical Training Camp for Students with Disabilities. A total of about 800 students participated in these events every year. There is lack of adapted physical education teachers and resources. The number of students

with disabilities participating in sports and the physical fitness of these students are insufficient. The MOE has been working on improving the aforementioned issues. It will make a four-year physical education adaptation program and plan to promote the policy on adapted physical education, increase teaching resources, strengthen relevant professional knowledge, and encourage students with disabilities to participate in sports events.

V. Gifted education

185. The government revised the Special Education Act in 1997 to extend the scope of this Act and categorized the giftedness and talents into Intelligence, Scholarship, Arts, Creativity, Leadership and Other Areas. Since 2007, the government has prohibited centralized special education classes at the compulsory education stage except for the arts gifted class. It has raised the identification criteria for gifted students to two standard deviations or 97 percentile. The government revised the Special Education Act in 2009 again and specified the following in Article 35, Paragraph 2 of the Act, “Civil education: in the form of resource classroom, itinerant program, or special education project.” This Act prohibits self-contained special education classrooms at elementary and middle schools including the class for students gifted in arts. The government raises the “gifted” criteria and enforces restrictions on the grouping of gifted classes at the compulsory education stage. It attempts to provide substantial education opportunities in a flexible and diverse way. It is possible to carry out the gifted education through club activities, holiday seminars, summer and winter camps, contests and online learning.

VI. Career and vocational transition

186. The MOE will make a comprehensive plan by improving the accessibility of vocational training sites, organizing training courses, appointing experts for counseling and providing assistive technology, to provide people with disabilities with fair and reasonable opportunities to participate in adapted vocational training, and assist them in the enhancement of employability skills.
187. The following are three major measures that the MOL takes for the career development and vocational training of people with disabilities:
- (1) Implementation of special vocational training for people with disabilities: The MOL holds vocational training in special classes for people with disabilities based on their physical and mental development and category of their disabilities. It offers customized training courses and assigns experts to

provide guidance and appropriate assistive devices for their training. A total of about 1,860 people with disabilities participated in vocational training on average from 2011 to 2015 (Table 24.7).

(2) Promotion of inclusive vocational training: The MOL encourages people with disabilities and the general public to take part in inclusive vocational training. It plans accessible training sites, teaching material and required tools and provides sign language translation to remove obstacles that may hinder people with disabilities to participate in the training and enhance their competitiveness on the job market. The average percentage of the people with disabilities among all participants in the inclusive vocational training was approximately 2.66% from 2011 to 2015 (Table 24.8).

(3) The MOL supervises and subsidizes local governments to hold localized and timely vocational training sessions based on the characteristics of local industries and the needs of the people with disabilities for vocational training. The Ministry requests local governments to hold or authorizes private organizations to provide vocational training courses (innovative job categories included) according to the physical and mental development and the category of the disability. The county and city governments provide the following vocational training courses with adaptation to local employment needs: The mobile painting style in Taipei, manufacturer of leather products in Tainan and computer-aided engineering drawing in Kaohsiung.

VII. Lifelong learning

188. Local governments shall reserve at least a 5% quota for adults with disabilities when implementing their adult education plans according to the Enforcement Regulations Governing the Lifelong Learning Regulations for Disabled Adults. They shall make plans for the adult education of people with disabilities and implement them accordingly after they have been approved.

Article 25 **Health**

I. Legislative measures for equal opportunities to acquire health and medical care services

189. The government always values the health of the people and pays close attention to the health right of the people with disabilities. It established the National Health Insurance Act based on the spirit of the Constitution and started national health

insurance in 1995. The government implements this mandatory social insurance to enhance the health of the people, and all individuals who meet the requirements must enroll the insurance. It promotes equal rights to medical treatment and aims to address the problem of people falling into poverty because of illness or vice versa. This Act protects the rights of disadvantaged people, enhances healthcare quality and follows the principle of ability-to-pay and the information transparency principle.

190. Article 8 of the PDRPA requires that the competent authorities in charge of health and medical care services at all levels of the government shall instigate the prevention of disabilities related to hereditary, disease, disaster, environmental pollution and other factors, through systematic promotion of the knowledge and advocacy on reproductive health and health education. The competent authorities shall also prevent and reduce the occurrence of disability by undertaking promotion activities of reproductive health or health education and implementing social education and training. Articles 21 to 26 of this Act define the rights and interests of health and medical care. The government shall plan and integrate medical resources to provide appropriate services concerning health maintenance and reproductive health for people with disabilities, and provide individualized health and medical care services for them. Furthermore, hospitals shall set up services for people with disabilities who have difficulty expressing their own needs. Special clinics shall be set up for people with disabilities according to the size of their populations and the needs of the people with disabilities for medical service. In addition, the government shall set up or encourage the establishment of medical and rehabilitation facilities/institutions or care homes to provide the medical care, rehabilitation, assistive device service, day care and home care services.

191. This insurance has covered mental illness treatment since 1995. Patients with mental health conditions and the general public have equal access to medical treatment. According to Article 8 of the Mental Health Act, the central competent authority shall, in collaboration with the central competent authorities of social affairs, labor affairs, and education, establish systems of community care, support and rehabilitation, provide patients with services of medical care, employment, schooling, elderly care, psychological treatment, psychological counseling, and other community care. The authority aims at creating a comprehensive patient-centered health care system.

192. According to the Genetic Health Act and the Regulations for Reduction, Exemption or Subsidization of the Fees of Genetic Health Measures, the government shall subsidize ten prenatal examinations, one ultrasound examination, two prenatal health education services and one Group B Streptococcus screening test for pregnant women. The government shall provide a subsidy of up to TWD 5,000 per prenatal genetic diagnosis to pregnant women in the high-risk group of genetic diseases³⁷. Furthermore, a subsidy of TWD 3,500 to TWD 8,500 per case of specimen collection shall be provided to low-income households and residents of 80 regions with inadequate medical resources for genetic health. From 1995, pregnant women with high-risk pregnancy or those with medical needs, may seek medical treatments that are covered by the national health insurance without the limitation of ten prenatal examinations. The government has provided the subsidy for prenatal genetic diagnosis to about 52,000 pregnant women every year for the past three years. On average, 1,438 abnormal cases were identified and referred for diagnosis and treatment every year (Table 25.1). The government also provides reproductive examination and counseling for genetic diseases (Table 25.2 and Table 25.3), subsidizes congenital metabolic disorders screening (Table 25.4) and hearing screening for newborns (Table 25.5), seven preventive health check-ups for children under seven (Table 25.6) and health education guidance for children.³⁸ The MOHW provides subsidies for installation of IUD and ligation for qualified special groups, and subsidizes induced abortion for pregnancy as a result of being raped or lured into sex intercourse (Table 25.7).

193. Since September 2002, designated rare diseases have been included in the list of major injury and illness of the national health insurance. Patients with rare diseases are exempted from co-payments making it more convenient for the patients to seek medical treatments. The government has allocated budgets to subsidize costs for rare disease diagnosis, treatment, pharmaceuticals, special nutritional foods and facilities for home medical care essential for the

³⁷ The pregnant women in the high-risk group for genetic diseases include the ones above 34 years old. They or their family or their spouse or the family of their spouse might suffer from genetic diseases. They gave birth to abnormal infants. Their chance of suspected chromosome abnormality that the serum screening detected is above 1/270. The results of ultrasound screening show that infants of these pregnant women might be abnormal or suffer from suspected genetic diseases.

³⁸ The guidance focuses on the holistic health care. The government provides the free national maternal care hotline 0800-870-870, Maternity Care Cloud APP and Maternity Care Website (<http://mammy.hpa.gov.tw/>) to provide parent-child health care, breastfeeding guidance, pregnancy nutrition and weight management, promotion of infant and toddler health, physical and mental adjustment, psychological support for emotional disturbance, referral service, health care consultation, listening service, caring service, support service and necessary resource referral.

maintenance of life, domestic and overseas examination of diagnosis, nutrition consultations, supportive and palliative care, and psychological support and consultation services that are not covered by the National Health Insurance Act. This is aimed to provide better and appropriate medical services to rare disease patients.

194. The government established and enacted the Subsidy Regulations of Medical & Assistive Technology Expense for People with Disability on July 9, 2012. It specifies partial subsidy for the medical expenses of rehabilitation and assistive device not covered by the national health insurance. This subsidy that the local government provides, covers 16 medical assistive devices and 3 medical expenses (Table 25.8) and it serves people with disabilities.

II. Accessibility to health and medical care services in the community

195. The MOHW helps people with disabilities receive integral, diverse and professional medical assistive services. It authorizes hospitals nationwide to execute the plan of medical rehabilitation assistive device center to provide professional services for counseling, evaluation and customization of the assistive device and helps people with disabilities live independently with the help of assistive devices.

196. According to the Notice Regarding Medical Institutions Providing Preventive Healthcare Service that the government subsidizes eligible people for four cancer screening and adult preventive health care services. (Table 25.9 and Table 25.10). In 2014, 35.3% of people with disabilities above 40 had abnormal blood pressure, 20.1% of them had abnormal blood glucose levels and 36.3% of them had dyslipidemia levels. The government helps them detect and treat these abnormalities as soon as possible by way of referral and tracking. It will also authorize welfare care facilities and institutions to encourage people with disabilities to use the adult preventive healthcare service.

197. People who have the disability identification pay only TWD 50 when visiting outpatient departments at the clinic level. The government executes the Special Medical Service Plan for the Dental Outpatient Global Budget of National Health Insurance (Table 25.11) for specific people with disabilities and it continues to promote and examine this plan.

III. Prevention, early detection and intervention of disabilities

198. The government takes reference from professional advice and evidence-based results of the US Preventive Services Task Force (USPSTF) and the National Institute for Health and Care Excellence (NICE) on preparing amendment and announces the Notice Regarding Medical Institutions Providing Preventive Healthcare Services based on the age and risk of the general public.

199. The government shall provide preschool special education for students with special needs according to the assessment of the Committee Responsible for Identification and Placement for Disabled Students (CRIPDS) of county and city governments. The above mentioned students include those who have special needs in learning and require special education services. The government places them in kindergartens or preschool department of special education schools. It provides supportive services based on the learning and living needs of the students with disabilities (including developmental delay) at schools or kindergartens.

IV. Public health program and information accessibility

200. Individuals with medical service needs may apply to the local government for sign language service. The health departments of local governments have community mental health centers to provide psychological consultation. These departments seek resources to support the community residents according to their individual needs (e.g. visual and hearing impairments).

201. The MOE has subsidized special education schools since 2010 to purchase dental equipment for students with disabilities, so they can receive dental treatment as early as possible. Special education schools collaborate with the dental associations and ask dentists to provide services in the schools every year, including oral examination, brushing teeth and applying fluoride to the teeth. They invite professional teams to give seminars to improve the interaction between students and their parents, assist parents in learning oral health and how to help their children brush their teeth correctly, to increase the support from parents for the oral health of the students with disabilities.

202. Special education schools have a student health management system and arrange student health examinations on a regular basis. They assign nurse practitioners and designate departments or personnel to take charge of the planning, design and implementation of health promotion at school. They plan for the health seminar

and promotional activity to provide students, parents and faculties with health-related physical fitness, healthy diet, pressure adjustment, sex education, tobacco control and drug abuse control. They release the contact and promotion information to parents occasionally, and post health promotion information in a special area on the website to strengthen the awareness of health among students, parents and faculties.

V. Enhancing the knowledge of health and medical care personnel about the rights of people with disabilities

203. Medical personnel must continue to take education and training courses according to laws and regulations to ensure the quality of the service for people with disabilities. The training covers gender and ethics courses.

204. A total of 278 dentists finished the basic training of the dentists regarding service for people with disabilities, and 757 dentists finished the advanced training in 2015.

VI. Protection of rights to informed consent and self-determination

205. The 2011 Human Subjects Research Act passed defines the protection of research subject rights. The research subjects shall only be adults capable of communication and fetuses or corpses are excluded. Research obviously benefitting specific groups or irreplaceable subjects is not subject to this rule. The research protocol shall obtain the consent of participating research subjects with the approval of the IRB. The research protocol within the scope of exemption categories for consent requirements as announced by the competent authority shall not apply. It is required to obtain the consent that the first Paragraph specified from the mother if the research subject is a fetus. It is necessary to obtain the consent from both the individual and their legal representative or assistant if the subject has been judicially declared to be of limited legal capacity or under assistance. It is required to obtain the consent from the legal representative or guardian of the subject if this person is incompetent or under guardianship. It is necessary to obtain the consent from an appropriate relation if the proviso in the first Paragraph is applicable.

206. The 2004 Guidelines for Informing the Patients and Obtaining Their Consent for Surgery and Anesthesia Performed by the Medical Institution give instructions that medical institutions and physicians must observe about informed consent³⁹.

³⁹ It is required to pay attention to the following when announcing the Guidelines for Informing the

207. According to the Mental Health Act, without consent by a patient, audio recording, video recording or photographing of the patient may not be performed. Psychiatric institutions must explain to patients the illness conditions, treatment policies, aspects of prognosis, reasons for hospitalization and their rights.

208. According to Article 19 of the Mental Health Act, who diagnosed or examined by a specialist physician to be a severe patient, a protector shall be designated. Article 20 of the Mental Health Act that requests the protector to take emergency management for those severe patients under critical conditions whose life and body is in imminent danger or a likelihood of danger unless immediate protection or access to medical care is provided. Believing that mental health care institutions and their staff infringe on the patients' rights and interests, patients or their protectors may file complaints in writing to the competent authorities of municipalities or counties (cities) where the mental health care institutions are located.

VII. Non-discrimination in health insurance

209. The national health insurance covers the medical service for the insured regardless of their disability in case of illness, injury, or maternity occurred to the beneficiary. The government agency subsidizes the co-payment of the national health insurance (Table 25.12 and Table 25.13) ⁴⁰ for - insured people with disabilities based on the severity of the disability to lighten their premium burden.

210. Ensuring the rights of the people with disabilities to take out the life insurance:

(I) The FSC urges the LIAROC to revise the Guidelines for Insurers to Insure People with Disabilities. It prohibits insurance companies from rejecting the insured with disabilities for solicitation and policy underwriting without justified reasons. The FSC also revises the Regulations Governing Business Solicitation, Policy Underwriting and Claim Adjusting of Insurance Enterprises. The Regulations explicitly prohibit insurance companies to treat a specific applicant or

Patients and Obtaining Their Consent for Surgery and Anesthesia Performed by the Medical Institution of 2004: (IV) The physician shall inform patients of all important information of the condition, surgery and anesthesia, respect the patient's self-determination and explain to them with common words and gentle attitude instead of exaggerating and intimidating words and attitude. (V) Other members of the medical team shall explain to patients based on their scope of practice and specialty and assist patients in understanding the possible circumstances of surgery and anesthesia and specific issues they need to pay attention to. They shall request the physician responsible for the surgery to answer questions from the patient or family member if the issue is beyond them.

⁴⁰ The central competent authority pay full amount of the premium for the insured with profound and severe disabilities, half amount of the premium for the insured with medium disabilities and a quarter amount of the premium for the insured with mild disabilities.

policyholder unfairly or treat an insured unfairly because of his or her disability, and the risk shall be assessed only based on actuarial factor and statistical data when the insurance contract is entered into. The FSC will impose fines or corrective actions on insurance companies violating the aforementioned regulations proportionate with the seriousness of the circumstances.

- (II) The FSC aims to protect the disadvantaged groups and help them purchase basic insurance at an affordable premium and fill the gap due to insufficient social insurance or relief system. It has urged insurance companies to provide microinsurance services. The Directions for Insurance Companies to Engage in Microinsurance Business provide that people with disabilities meeting the disability criteria defined in the PDRPA are qualified for taking out microinsurance (Table 25.14).
- (III) In June 2016, the FSC invited relevant agencies to discuss specific measures and urged the Non-Life Insurance Association of the R.O.C. (NLIA) and LIAROC to establish a hotline for insurance enrollment complaints and require insurers to set up a contact window to process appeals as soon as possible. It requests insurance companies to hold the employee training on CRPD issues and urges distributors to assist people with disabilities for accessing insurance service.

VIII. Medical care service friendly to people with disabilities

- 211. The MOHW has established the Regulations Governing for Disables Medical Services in Hospitals according to the PDRPA. Local competent authorities in charge of health shall appoint hospitals to set up special clinics for people with disabilities according to the population size and health-seeking need of people with disabilities. Hospitals shall at least set up the dental outpatient clinics exclusive for people with disabilities and the special clinics for developmental delay treatment.
- 212. The hospital accreditation standards require hospitals to provide information of medical treatment and consultation via a wide range of channels and protect the rights to seek medical treatment of patients. Hospitals shall provide the public with medical care information, guidance service, hospital bed pushing and wheelchair borrowing. They shall also offer proper communication services based on the patient needs by translating the spoken language or foreign language for patients, providing sign language translation for people with hearing impairment and offering lip reading, handwriting and transcription services,

writing tablets, communication boards and information in braille and large print (18 point and above) for people with visual impairment.

213. The MOHW posts the image file of the “braille and graphic medicine bag sticker” on the homepage of the MOHW Food and Drug Administration Website. The sticker has braille, graphics and text printed on it to ensure the medication safety for the people with visual impairment. The Ministry makes the image file available to medical care institutions, Taiwan Pharmacist Association, local pharmacists associations, community pharmacy, and local private groups for download. It works with its Hospital and Social Welfare Organizations Administration Commission to design the format of medicine bags (with large print and high contrast design and QR Code printed at the lower right corner) to meet the requirements of the people with visual impairment. Twenty-seven MOHW hospitals have tried accessible medicine bags since August 2015.

IX. Prevention of HIV/AIDS and major infectious disease

214. The policies and plans for the prevention and control of communicable diseases have been established. Government agencies carry out the prevention and control strategies and take the following measures to raise the awareness of HIV/AIDS prevention and control among people with disabilities.

- (I) Holding seminars on sex education and prevention and control of HIV/AIDS for welfare institutions for people with disabilities: The government held a Seminar on the Professional Knowledge in Sex Assault and HIV/AIDS Prevention and Control for Welfare Institutions for People with Disabilities in July 2015, and organized an HIV/AIDS prevention and control course during the Contact Meeting of National Welfare Institutions for People with Disabilities held in October 2015. The government aims to enhance the professional knowledge of supervisors and staff of welfare institutions for people with disabilities about provision of care services for HIV infected patients.

- (II) The government subsidizes the Collective of Sex Workers and Supporters (COSWAS) and provides health education on HIV/AIDS prevention and control for people with disabilities. It aims to create a friendly health education space and remove the stigma and specialization of HIV/AIDS.

215. Special education schools make plans to prevent and control communicable diseases and emerging diseases according to relevant laws and regulations. They

list explicit implementation processes, management strategies and response plans for prevention and control to monitor and respond to emerging epidemics.

216. Special education schools discuss health promotion issues on campus every semester in accordance with laws and regulations. They carry out the prevention and control strategies of Dengue fever, HIV/AIDS and seasonal influenza, and promote MERS-CoV health education. These schools also strengthen the campus environment management, provide promotion and website information, organize health education activities, and enrich the students with basic knowledge about healthy life.

Article 26

Habilitation and rehabilitation

217. Government agencies shall provide personal support and care services based on the needs and assessment of people with disabilities so as to improve their quality of life, social participation and independent living. Hence, the government provides services and programs for habilitation and rehabilitation in the field of employment, education and medical treatment.

I. Education support service

218. The government requires competent authorities to establish the Individualized Education Program from Preschool to Senior High School (IEP) or the Individualized Support Program for People with College Degree or Higher (ISP) in accordance with the Special Education Act. These programs are for students with disabilities receiving special education service. Disability specialists observe and interview with these students and carry out the educational assessment and medical diagnosis to confirm that they have special needs in learning. Therefore these students would be able to obtain the identification from the CRIPDS and receive the special education service. The government will provide appropriate education services based on their learning characteristics and needs. It provides education assistive technology and enhances their learning outcomes based on their needs according to the principle “evaluation of needs, circulation of assistive technology, repair service, professional consultation”. The principle is for the service cycle of education assistive technology (Table 26.1 and Table 26.2).

II. Habilitation and rehabilitation support service

219. The MOHW has established the Regulations on Providing Personal Care Service for the People with Disabilities and local governments work with private

organizations in order to help people with acquired disabilities who are in need of life support. The psychological support and service are provided during the critical period to rebuild the ability to live independently and attempt to reduce the future need of care services. In the meantime, services such as the community living services and the services of Community Operation Facilities during daytime are provided according to the evaluation result of the needs and the will of the individual, aiming at integrating people with disabilities in the community and enhancing the opportunities of social participation. Since 2012, the MOHW has subsidized local governments to implement life rehabilitation service plans for people with visual impairment. Pre-service trainings for social workers, orientation and mobility specialists, living skill trainers and assistive device assessment specialists are carried out regularly (Table 26.3 and Table 26.4).

220. People with disabilities may apply for the subvention of mobility aids after their needs have been evaluated, confirmed and approved. From 2012 to 2015, the number of people with disabilities who received subvention for their personal mobility aids increased from 22,472 to 25,452.
 221. The government has established the Regulations Governing Award of Institutions and Organizations Related to Psychiatric Care in accordance with Article 39 of the Mental Health Act to award mental health related institutions and associations (Table 26.5) for their engagement in service of patients' community care, support and rehabilitation. It also awards them for providing transition resources of medical treatment, employment, social welfare and education. Local governments offer the community follow-up care service to mental health patients (Table 26.6) to support their life in the community.
 222. Welfare organizations for people with disabilities aim to maintain the health and fulfill the needs of people with disabilities. They offer life care training and daily-life assistive device training based on their needs and professional evaluation. According to the Mental Health Act, the government shall set up or encourage private sectors to establish mental health care institutions to provide health care services based on actual needs. The government shall also set up the standards for the review and evaluation.
- III. Establishment of criteria, development of techniques and share of technical information about assistive devices
223. The MOEA has established 87 national accessibility standards for people with

disabilities, and gives them to other agencies and institutions for reference. Fifty-nine of the standards are for assistive devices⁴¹, 23 for accessible design and 5 for accessible equipment. The Ministry will continuously formulate and establish standards and assist in the improvement of the ability to inspect and verify the safety and performance of the assistive products to make sure if they meet relevant requirements during the development and manufacturing processes. The Ministry organizes universal design contests of assistive products and rates friendly and excellent commercial assistive products to promote assistive devices made in Taiwan and expand the applicability of the universal design principles and product safety regulations.

224. The MOST subsidizes research personnel of universities, colleges and institutes to create evaluation tools for rehabilitation, including early intervention and rehabilitation assessment to develop assistive devices for people with disabilities. The MOST also provides a technical service platform and commercialization support to drive industrialization of the assistive technology. From 2011 to 2014, the MOST subsidized 334 projects of assistive devices to the amount of TWD218.9 million.
225. The MOHW takes concrete measures to reinforce the exchange and integration of the resources for assistive services among different agencies. MOHW builds the portal for assistive services, holds regular meetings for integration of assistive devices, and provides a communication platform for the agencies in charge of promoting the industry to develop assistive devices. In addition, the Ministry holds discussions with the MOL about job redesign and the sharing system for the aids that people with disabilities need for their daily life. The MOHW Integration and Resource Promotion Center of Multi-Functional Assistive Device collects information about the needs of assistive devices at the user end and cooperates with the MOST to develop assistive technology products that are most suitable for meeting the needs of the user.
226. The MOEA assists the suppliers in developing assistive products with a market niche by carrying out a program for promoting the assistive technology industry. It helps them introduce technological aesthetics and ergonomics, develop the critical module, technology, product and system, strengthen the comfort, convenience and aesthetics for users and increase the utilization of the assistive

⁴¹ 33 types of wheelchairs, 9 types of canes and walking aids, 14 types of prostheses and 3 assistive devices.

product. The Ministry encourages domestic companies to create mutual benefits and interact with each other. It helps these companies make breakthroughs in commercialization and expand their marketing channels. The Ministry held 4 promotion activities and marketing strategy workshops for development of hi-tech assistive devices from 2011 to 2014. It also helped 5 companies join the Taiwan International Medical & Healthcare Exhibition. In future, the Ministry will continue to hold technology sharing meetings and promotion activities for the assistive device industry every year, lead suppliers to take part in international exhibitions, and create more market opportunities.

Article 27

Work and employment

227. The ESA, LSA, Act of Gender Equality in Employment, Occupational Safety and Health Act and PDRPA prohibit discrimination against people with disabilities. They emphasize the right to work of people with and without disabilities on an equal basis. The government takes employment support measures to protect the rights to work of people with disabilities. It also provides special civil service examinations for the people with disabilities to protect their rights to take part in national examinations and work in the government. Examination is a unique and original system among the international employment policies for people with disabilities. To help people with disabilities who just passed the special examination adapt themselves to the workplace of the public sector and improve their adaptability and stability during the work, the government, in addition to organizing workshops for the recruited people and the agencies that need the manpower in 2016, required personnel of local governments in charge of the vocational rehabilitation and case management for people with disabilities to show their care to the performance of the people with disabilities during the practical training, and utilize local vocational rehabilitation resources effectively to help people with disabilities overcome obstacles at work, ensure their adaptive employment, and participate in the society. There were 25 cases involved in employment discrimination against people with disabilities in 2015. The Employment Discrimination Review Committee decreed three of the cases and imposed a penalty on the accused. Sixteen cases were rejected by the Employment Discrimination Review Committee, five were withdrawn, and one was not accepted.

228. Article 5 of the LSA expressly provides that, “No employer shall, by force, coercion, detention, or other illegal means, compel a worker to perform work.” The Act protects the employees working for business enterprises governed by the Act. Article 21 of the LSA specifies that, “A worker shall be paid such wages as determined through negotiations with the employer, provided, however, that such wages shall not fall below the basic wage⁴²”. The Act guarantees the basic wage during the regular working time for people with disabilities and average workers.

229. The Survey on the Labor Force Status of People with Disabilities by the MOL in 2014 showed that there were 1,077,249 people with disabilities over the age of 15 and the number of labor force persons was 212,171. The labor force participation rate of the people with disabilities was 19.7% and it was lower than that of the civilian population (58.5%). The unemployment rate of people with disabilities was 11% and it was higher than that of the civilian population (3.9%). The MOI implemented the same survey in August 2011. The labor force participation rate of the people with disabilities in the 2014 survey was 0.6 percentage point higher than the figure in the 2011 survey, and the unemployment rate of people with disabilities was 1.4 percentage point lower than the figure in the 2011 survey. The number of employees with disabilities in the 2014 survey was 15,058 more than that in the 2011 survey. People with Moving Functional Limitation (85,379), Internal Organ Loss Function and Related Disabilities (22,145) and with Intellectual and Developmental Disability (20,701) were the top three categories of employees with disabilities. The overall employment rate of people with disabilities was growing (Table 27.1 and Table 27.2). There were 136,274 paid employees with disabilities and the average regular earnings per month was TWD 24,340. The number of atypical employees with disabilities (part-time, temporary and dispatched work) was 44,282, occupying 32.5% of all paid employees with disabilities. The average regular earnings per month for these people were TWD 16,046 (Table 27.3).

I. Diverse employment service and vocational training

230. The government provides employment information and service for people with disabilities who have work ability and employment intention to help them work independently in the competitive job market. The government subsidizes local governments, works in cooperation with private organizations and provides individualized job placement and other work support to help people with

⁴² The current basic wage is TWD 20,008 and the hourly wage is TWD 126.

disabilities who have work ability and employment intention but cannot work independently in the competitive job market (Table 27.4 and Table 27.5).

231. The MOL implements different vocational training programs, provides living allowance during vocational training and utilizes job redesign to help people with disabilities overcome obstacles to participation in training courses. It cooperates with private organizations to carry out training, encourages people with disabilities to take inclusive vocational training courses together with the general public (Table 27.6), and provides occupational training courses exclusively for people with disabilities (Table 27.7). The Ministry helps people with disabilities live a stable life during the training by providing them with living allowance for full-time vocational training⁴³.
232. The MOL established the vocational rehabilitation service system for the people with disabilities in 2007. It utilizes case management to provide them with individualized, consecutive and integral services, and integrate resources of vocational rehabilitation service. The Ministry aims to strengthen the function of the case manager for vocational rehabilitation and enhance the service quality. It has promoted the new case management system for vocational rehabilitation since 2014, and redefined the vocational rehabilitation case manager as the counselor, manager, coordinator and promoter. The Ministry offers the vocational rehabilitation case management service from the viewpoint of career, increases the chance to ally with the individuals, promotes case empowerment and self-determination, and helps the individual to finish career planning.
233. The MOL uses psychological tests, preference tests, functional assessment tools, scenario tests and vocational try-outs to understand the vocational potential, interest, skill and work personality of the people with disabilities who are unsure about their direction but are willing to work, and their needs for assistive devices and services. It provides specific vocational rehabilitation service or advice for people with disabilities to find appropriate jobs.
234. The MOL has established the Implementation Program of Job Accommodation for People with Disabilities, provides prevocational and post-vocational services, and subsidizes TWD 2,000 for the personnel of local governments in charge of supported employment service to use in the job redesign to help people with

⁴³ The subsidy is 60% of the basic monthly wage and its period is up to 12 months within two years.

disabilities maintain continuous and stable employment. The Ministry has a regional job redesign program team to handle case referrals, visits, needs assessments, planning for authorized collection, reformation and recovery of assistive devices. It organizes job redesign creativity contests every two years and was invited to the 2016 Assistive Technology for Care and Health (ATCare 2016) to help the public better understand the job redesign for people with disabilities (Table 27.8).

235. The MOL has taken new measures since 2015. It allows self-employed individuals in all industries to apply for vocational assistive devices, expands the applicability to personnel assistance, offers more services to improve working conditions (including transcription), and provides personnel assistance in the workplace for people with severe physical disabilities. The Ministry holds meetings to review the application for job redesign and invites representatives of organizations for people with disabilities to attend the meetings and review cases to protect the rights and interests of people with disabilities.

236. The MOE has a vocational transition and guidance service center to provide professional support services of inter-school occupational guidance and help high-school students with disabilities receive career transition services after graduation. It has appointed 30 vocational counselors to help students with disabilities nationwide, and provides them with internship guidance at school and employment transition services after graduation. Special education teachers and vocational counselors cooperate to find the right job for them. They work in cooperation with the labor affairs system, provide information on employment and vocational training courses for students with disabilities, and enhance the follow-up and guidance activities after graduation (Table 27.9).

237. During the integrated inspection of colleges and universities, the MOE examines and tracks how they implement career guidance at school and take transition and supported employment measures for students with disabilities. In 2016, it authorized experts and scholars to implement a career exploration and employment transition program for students with disabilities to build a comprehensive transition guidance system.

II. Employment support

238. Article 38 of the PDRPA requires that public and private organizations with a total number of employees reaching a certain scale must hire a particular

proportion of employees with disabilities to comply with the quota-based employment regulations. The public organization with more than 50 employees must hire 2% of employees with disabilities. The government made changes in July 2009 and required that the public organization with more than 34 employees must hire 3% of employees with disabilities. The private organization with more than 100 employees must hire 1% of the employees with disabilities. The government changed the provisions in July 2009 and requested that the private organization with more than 67 employees must hire 1% of employees with disabilities. The public and private organizations hiring one employee with severe disabilities shall be calculated as two. The government will continue to discuss on the rationality of employment quota and proportion (Table 27.10).

239. The MOL reviewed the job analysis on seven major organizations including police administrations and fire departments according to Article 38 of the PDRPA. The analysis covered 339 organizations/institutions and 9,175 personnel headcounts. The Ministry reduced the number of job types from 37 to 28 and 95% of the personnel headcounts remained eliminated based on the examination result of the analysis. It made amendments, incorporated the aforementioned reduction and percentage in the PDRPA Enforcement Rules, and released the Enforcement Rules.
240. The government has incorporated the quota-based employment in the performance evaluation of local governments. It has announced the list of the organizations with insufficient personnel headcounts every month since April 2011. The government guides these organizations and informs them about the sources of the people with disabilities as well as the job arrangement and work environment they need. It guides employers to hire people with disabilities and provides rewards, job redesign measures and supported employment services to assist the employers in hiring people with disabilities.
241. The Regulations on the Implementation and Subsidizations of Entrepreneur Counseling for People with Disabilities require local governments to provide allowances for the interest of the business creation loans, startup consultation, startup guidance, startup professional knowledge workshops and other startup services for people with disabilities. Women with disabilities from the age of 20 to 65 or people with disabilities from the age of 45 to 65 may apply to the MOL for the Phoenix Micro Start-Up Loan if they have ever participated in the entity startup workshops that the government organized over the past three years, hire

less than 5 employees (responsible person excluded), the term of the tax statement registration or incorporation registration does not exceed 2 years.

242. Article 38, Paragraph 1 of the PDRPA, revised on February 1, 2011, provides that, "If an enterprise establishes a subsidiary enterprise in accordance with the Company Act, when the number of employees with disabilities has reached over 20% of the total employees, it is allowed to calculate the fixed employee number mentioned in the paragraph above." Accordingly, the MOL, MOEA, Ministry of Culture (MOC), FSC and MOTC promulgate their own Regulations Governing Supports and Incentives for Regulated Business Entities to Establish Affiliates and Hire People with Disabilities.
243. The MOL takes incentive measures to enhance the willingness of the employers to hire people with disabilities. The employer who hires a person with disabilities and consecutively unemployed for more than 30 days will be granted a subsidy every month if the employment lasts for more than 30 days and the employer meets related requirements. The subsidy will be granted no longer than 12 months. The Ministry also encourages the employer to enhance the accessibility at the workplace and improve the work conditions in consideration of the statuses and needs of the employees with disabilities.
244. There are many information sources available to the people who need a job, plan to change jobs or seek the opportunity for further study. For example, many websites of the governments have a special employment area providing recruitment information on the webpage. Some government agencies construct special vocational training and support websites for the unemployed, and many colleges and universities provide information on study, application for jobs, further study, or examination or licenses and permits on their websites. Hence, requesting government agencies, their subsidiary units (institutions) and schools to apply for conformance level of accessibility is very helpful to ensure providing a website design that is friendly and accessible to the people with disabilities and can help them make use of more employment opportunities for their carrier.
245. Article 8 of the Public Welfare Lottery Issue Act gives first priority for lottery retailer licenses to the people with disabilities but with working ability, indigenous, and low-income single-parent families. Till the end of 2014, the number of people with disabilities occupied 70% (about 42,000 persons) of all the lottery retailers. To maintain the rights and interests of the legal lottery

retailers who determine to engage in this business and protect the image of the public welfare lottery, the issuing institution has established the "Guidelines for Selection and Management of Public Welfare Lottery Retailers" and the "Regulations Governing the Review and Management of the Public Lottery Retailers, Agents and Relevant Personnel", and conducts on-site inspection of the retailers every month with additional irregular checking measures to enhance the management of lottery retailers.

III. National examination

246. The government provides the Civil Service Special Examination for the Disabled (hereinafter referred to as the "Special Civil Service Examinations for the Disabled", SCSED) regularly and selects the places for examination in different districts (Table 27.11). Among all the examinees with disabilities in 2013, for example, 59 people (20.34%) with disabilities of the lower limbs passed the examination followed by 49 people (16.90%) with hearing impairment and 43 people (14.83%) with disabilities of the upper limbs. Examinees with visual or hearing impairment must previously undergo physical examination in accordance with the law, and this requirement has now been abolished in favor of these people. Not only that, the government establishes project teams for improvement of the examination for people with disabilities and reviews relevant issues on an ongoing basis.
247. The government has established the Protection Guidelines for Disabled Rights in National Examinations to protect the right of the people with disabilities to take examination fairly, legalize the protection of their rights and interests, help them understand relevant measures in advance, and give them assistance in the examination. The government also has a Protection Review Team for the Rights of People with Disabilities in National Examination to review the application that they make for protection measures.
248. The Directorate-General of Personnel Administration, Executive Yuan composed the Manual of workplace support and remind guidelines for people who passed SCSED in consideration of the actual needs of employing agencies, major group of the people who passed the SCSED, summary of the job redesign items and contact persons. The manual can help employing agencies understand each group of the people with disabilities who passed the examination and the resources that the administrative departments can provide for them to help the people with disabilities adapt themselves to the workplace (Table 27.12 and Table 27.13).

249. According to the “Training Program for People with Disabilities Who Passed the Special Examination”

(1) A workshop for the practical training facilitators and personnel officials related to the SCSED must be attended before they report for duty after passing the examination. In addition to the special training regulations applicable to the people with disabilities, the workshop must contain the key points that the facilitators and personnel officials need to know to support the people with disabilities, commonly asked questions, solutions, and available resources.

(2) The Civil Service Protection & Training Commission requests the practical training agency to provide required support and assistance for the people with disabilities in consideration of their statuses and needs (including job redesign and application for assistive devices), and sends designated personnel to pay an on-site visit to understand the training status.

250. The National Development Council (NDC) executed the survey of the usability of government information system among public servants with disabilities in 2016. The main goals for this survey were to eliminate the difficulties and obstacles that public servants with disabilities may encounter in handling public affairs, improve the benefits at their workplaces, enhance their opportunities for fair participation, and promote the accessibility to the information system of the government agencies. Based on the survey, the government can understand how they use the government information system and their needs for their work. To provide a basis for the responsibility unit of government to develop their IT systems, the NDC furthermore has formulated the draft Guidelines for the Government Agencies to Design Accessible Official Systems with reference the Accessible Web Development Guidelines. For the long-term goal, the NDC will focus on promoting "universal design" and "inclusive design" of the IT system via review of the plans and provision of advisory comments to ensure its availability to all public servants.

IV. Sheltered employment service

251. Article 34, Paragraph 2 of the PDRPA requires the competent authority to provide sheltered employment services, in accordance with the results of occupational guidance assessment, for people with disabilities who have willingness but not independently competitive, mandatory for long-term employment supports to enter the competitive employment market (Table 27.14).

252. The MOL subsidizes sheltered workplaces for their expenses on required facilities and equipment, rents for buildings (including land) and vehicles, costs for professional and management personnel, and operating funds. It also urge local governments to form advisory teams and invite experts who have practical experience in the operation of sheltered workplaces to pay on-site visits and make advisory suggestions about service and improvement of the marketing, operation and financial management.
253. To urge the agencies that are obligated to purchase, implement and promote the Regulations for Obligated Purchasing Units or Institutions to Purchase the Products and Services Provided by Disability Welfare Institutions, Organizations or Sheltered Workshops, the MOHW builds the Prior Purchase Information Platform to provide these agencies with the information on the purchase, amount and purchase item, and give an opportunity to the disability welfare institutions, organizations or sheltered workshops to update their products and services. The number of the institutions and workshops that met the requirements of the Regulations increased from 273 in 2008 to 401 in 2015 (Table 27.15 and Table 27.16).

V. Labor unions and cooperatives

254. The government has established the Labor Union Act with reference to the Two Covenants⁴⁴ and the Convention No. 87 of the International Labour Organization (ILO). The Act expressly grants all laborers the right to organize and join labor unions. In addition to the corporate union, employees with disabilities hired business enterprises may organize or join other professional unions that cover their professional skills, or may organize an industrial union together with the workers in the industry concerned, or organize a national confederated labor union organization together with the abovementioned labor unions. For example, the National Labor Union of Professional Masseurs and the National Alliance of Lottery Vendors, Republic of China, are the national confederated labor organizations formed by the people with disabilities.
255. The MOL provides subvention to labor unions every year as an incentive to provide educational training for their members, develop their union organizations, promote the Three Labor Acts (Labor Union Act, Collective Agreement Act and Act for Settlement of Labor-Management Disputes), and enhance the awareness

⁴⁴ International Covenant on Civil and Political Rights and International Covenant on Economic, Social and Cultural Rights.

of fair employment. It requires the labor unions that receive the subvention to incorporate the “development of labor organizations, relevant regulations” and “fair employment” as a core in their labor training courses to protect the rights of laborers to organize, bargain collectively, and have disputes, and help them understand the ESA and other laws and regulations regarding the equal rights at the workplace.

256. Article 1 of the Cooperatives Act defines the cooperative association that has the legal person status and is organized based on the principle of equality, mutual aid and joint operation. It is a form of enterprise through which disadvantaged people such as women, youth, senior citizens, and people with disabilities have full participation and development. The cooperative also provides an effectiveness mechanism to gather limited resources, reduce risks and create employment opportunities and incomes. The Cooperative Act provides an open, impartial and equal environment for people with disabilities to organize cooperatives.
257. To implement the PDRPA, the MOI incorporates the cooperative in which 80% of the members are people with visual impairment as the target of subvention in the MOI Guidelines on Subvention of Cooperative Enterprises. The Ministry also gives assistance for the initial cost and 3-year business expenditure, and ensures the equal right of the people with disabilities to take training courses on cooperative issues.

Article 28

Adequate standard of living and social protection

258. The Regulations of Social Insurance Premium Subsidies for Disabled is applicable to ensure adequate standard of living and social protection for them. The premium payable by individuals, such as the premium of national health insurance, civil servant and teacher insurance, labor insurance, farmer's health insurance, military personnel insurance, retiree insurance and so forth is partly shared by the government. The subsidies may be equal to one quarter, one half or the full amount of the premium depending on the level of the disability (Table 28.1).
259. According to the Regulations on the Benefit Payment of Living Assistance for People with Disabilities and the PDRPA, individual with disability identification or certification, lives in a municipality or a county (city) as his/her registered

permanent residence, stays in Taiwan for more than 183 days over the past year, and does not received subsidies for resettlement may apply for subsidy. The subsidy is determined according to the level of the disability and the financial status of the family⁴⁵. It is adjusted every four years based on the growth rate of the CPI of the last year against the CPI of the year before last prior to its adjustment as announced by the Directorate-General of Budget, Accounting and Statistics, Executive Yuan (Table 28.2).

260. In addition to the subsidization of the social insurance premium and living expenses, Article 71 of the PDRPA, in consideration of individual needs, allows to provide subsidies for assistive devices (Table 28.3), day care and residential care (Table 28.4), rent or purchase of stores or stalls, parking lot purchasing loan interest or rent, vital equipment and power expenses for necessary assistive devices (Table 28.5), and ticket fare to mitigate the financial burden of the people with disabilities in their daily life.
261. Article 3 of the Housing Act defines social housing as the houses built by the government or private sector with subsidies from the government for rent only, and at least 10% of them must be rented to persons with special conditions or identities, including people with disabilities. To meet their housing requirements, the suggested revision to the Housing Act increases the ratio to 30% in favor of more disadvantaged people.
262. According to the Regulations on Subsidization for the Rent or Loan Interest for the Disabled to Rent or Purchase Houses, local governments shall budget the subsidies for purchase or rent of houses that people with disabilities need. In 2014, for example, local governments provided TWD 3,000 to TWD 5,000 for each household as a subsidy for the rent depending on the number of people with disabilities and the area of the house, and a total of 22,406 households acquired the approval for the subsidy. As for the subvention for the interest rate of the loan on mortgage, most of the local governments set an upper limit of TWD 2.20 million and provide subvention for the difference between the interest rate of the bank or post office that offers the loan for the people with disabilities and the preferential interest rate that the Public Housing Fund offers. A total of 184

⁴⁵ Monthly TWD 8,200 for people with moderate disabilities or severer and living in a low-income household, or monthly TWD 4,700 for people with mild disabilities; monthly TWD 4,700 for people with moderate disabilities or severer, living in a near-poor household with an income less than 2.5 times the absolute standard of living, or monthly TWD 3,500 for people with mild disabilities.

households acquired such approval in 2014. As for the subvention for accessible houses, please refer to Article 19 – Living independently and being included in the community (Table 28.6).

263. The taxpayer, his/her spouse, or each of their dependents who has a disability identification or certification, or a patient as defined in Article 3, Subparagraph 4 of the Mental Health Act⁴⁶ may enjoy a special deduction for the people with disabilities (e.g. TWD 128,000 in 2015) every year for each person (Article 17 of the Income Tax Act) to support his/her livelihood, provide him/her with a tax preference, and reduce his/her tax burden. The Fiscal Information Agency of the MOF showed in its 2013 individual income tax return statistics that about 516,000 households enjoyed this special deduction that year (Table 28.7 and Table 28.8).
264. Article 12 of the Commodity Tax Act grants exemption from the commodity tax in favor of the person who purchased rehabilitation buses for the people with disabilities and finishes the registration within 5 years from June 5, 2014. This favorable taxation policy is also applicable to wheelchair accessible vehicles which conform to the Vehicle Safety Test Standard and were purchased within 5 years from February 6, 2015 (Table 28.9).
265. Article 17 of the Estate and Gift Tax Act grants an additional special deduction for the surviving spouse or parent of the decedent or the decedent's lineal descendent who falls under the provision of the PDRPA or as a mental health patient provided in Article 3, Subparagraph 4 of the Mental Health Act (Table 28.10).
266. In 1995, Article 7 of the Vehicle License Tax Act, including the tax exemption for vehicles used by people with disabilities, was amended. In 2014, Article 7 of the Act concerning conditions of the tax exemption for vehicles used by people with disabilities was amended to include the provision that vehicles used by people with disabilities who cannot drive could be owned by their spouses, direct-line relatives to a second generation, or siblings in the same household. The 2014 Article 7 amendment includes adopting a fixed exemption and other measures. These amendments can reduce the burden on people with disabilities and improve the tax system by achieving fairness and equality of taxation (Table 28.11).

⁴⁶ Severe Patient: The patient who is diagnosed and confirmed by a psychiatric specialist to present queer thoughts and odd behavior detached from reality and as a result to be incapable of managing their own affairs.

267. The additional note to Chapter 87 of the Customs Import Tariff allows a duty-free import of special motor vehicles or special mopeds with a cylinder capacity of less than 150 cubic meters that people with physical disabilities or any legally registered institution or association for such people imports for their use only. These favorable duty-free import regulations are also applicable to the parts, accessories and components for manufacture of rehabilitation vehicles for people with disabilities, motor vehicles that meet the regulations of wheelchair accessibility and are used as accessible taxis, and motor vehicles only used for local governments or other institutions or groups that provide transport service for people with disabilities under authorization of any local government to transport these people.
268. People with disabilities can join social insurance by occupation and receive insurance payment and pension in Taiwan (Table 28.12).
269. Since the disability pension benefit is currently calculated based on the insurance coverage years, the insured who has less insurance coverage years may only receive a benefit equal to the basic protection amount of TWD 4,000 when an occupational injury or disease occurs. To protect the rights to disability pension benefits, the MOL plans to add relevant provisions to the occupational accident insurance to be legislated separately, and requires the calculation of the disability pension and survivor's pension benefits based on a specific ratio of the insurance salary to ensure a basic living standard for the insured who have less insurance coverage years and his/her family dependents.
270. The Ministry of Civil Service has changed the word "deformed" to "disability" in relevant solatium-awarding regulations in response to the change of the social environment and respect for the people with disabilities.

Article 29

Participation in political and public life

271. The Central Election Commission (CEC) promotes accessible facilities at polling stations and takes assistive measures for voters with disability in accordance with Article 57, Paragraph 2 of the Civil Servants Election and Recall Act to protect their right and convenience to vote.

272. The CEC enforces the Accessible Polling Station Selection Guidelines and the Polling Station Barrier-Free Facilities Checklist to assist local election commissions selecting proper locations for polling stations. The local election commissions are required to check the polling stations in their electorates to ensure they are set up at suitable locations. Local election commissions must make an alternative plan or select another suitable location if any of the polling stations does not meet the requirements. In 2016, during the 14th Presidential and the 9th Legislative Elections, about 88% of the polling stations met these requirements, and about 12% of the polling stations that did not meet the requirements were improved by setting up simple accessible facilities and designating personnel to provide assistance. In order to provide the voters with disabilities a convenient voting environment, CEC will continuously supervise and urge local election commissions to check the accessibility of the polling stations and to select another location if they do not meet the requirement. Accessible voting booths will be set up for people with disabilities, and tactile voting devices are provided for voters with visual impairment at all polling stations. The voter's lists are sealed after the voting and ballot counting procedures are completed, and only the prosecutor and court have the authority to remove the seal. Hence, it is impossible to calculate the voting rate of specific voters.
273. After receiving the ballot, the voters shall mark their ballot and vote by themselves. However, if a voter cannot vote by himself/herself due to disability, but can express his/her will, a family member may accompany him/her at his/her request and provide assistance, or vote on his/her behalf. In the absence of family members, an administrator and a supervisor may provide assistance or vote on the voter's behalf upon request (Article 18, Paragraph 3 of the Civil Servants Election and Recall Act). Visually impaired voters who do not use the tactile voting devices to vote may cast the vote with the help of his/her family member, or an administrator and a supervisor, in accordance with the abovementioned regulation.
274. In 2015, CEC added the "Voting Rights of Voters with Disabilities and Their Protection" to the workshop for the election affairs personnel to enhance their understanding on how to assist voters with disabilities to exercise their voting rights. Training courses for electoral personnel have been provided with invited experts giving lectures about the suffrage of people with disabilities. The "Guidelines for Assistance of Voters with Disabilities" have become an additional

chapter in related teaching materials to improve the awareness of voters with disabilities.

275. In order to help the voters with visual impairment to understand the campaign visions of the candidates, local election commissions will provide acoustic election bulletin CDs (in Chinese, Taiwanese, and Hakka), in accordance with printed election bulletins, to the voters with visual impairment through affiliated organizations, township (city, district) offices and village (neighbourhood) administrations. The CEC posted the first electronic election bulletin on its website during the 14th presidential and the 9th legislative elections, to increase the transparency of the candidates' information. The simple and easy-to-read content on the page enabled the voters to access the campaign visions and other messages of the candidate easily. Voters with disabilities acquired election information from different sources, and the "Election Affairs, Incorruptibility, and Elimination of Election Bribery" activities were held during the International Day of Persons with Disabilities to enhance the dissemination of election information.
276. In order to protect the rights of the voters with hearing impairment, CEC and subordinate local election commissions will arrange sign language experts to simultaneously translate the campaign visions of the candidates during political presentations. The sub-screen of the sign language translation must be one third of the entire screen to facilitate the viewing experience of the voters with hearing impairment.
277. Article 44 of the Civil Associations Act defines a political association as an association organized by citizens of the R.O.C. with a view to help form political volition and to promote political participation for citizens based on common ideas of democratic politics. There were 306 approved (registered) political parties and 57 national political associations by November 1, 2016. The Social Welfare Party and the Deaf Nation Party established in recent are the political parties formed by people with visual and hearing impairments, respectively.
278. The labor-management meeting is an important internal mechanism in which laborers may participate. The purpose of the meeting is to encourage both labor and management to conduct voluntary consultation and cooperation, promote mutual communication within the enterprise, reduce opposite conflicts, and form a common view between both parties. At a business entity that has a labor union,

the representatives of the workers are elected at the general meeting of union members or member representatives. Otherwise, the representatives of the labor shall be elected directly by the workers. An employee from the age of 15 years has the right to elect worker representatives and the right to be elected as a worker representative. People with disabilities have equal rights to participate in the labor-management meeting and act as worker representatives. Though not being elected as worker representative, people with disabilities may ask worker representatives to raise proposals of their concerns and attend the meeting for explanation.

Article 30

Participation in cultural life, recreation, leisure and sport

279. To establish an accessible environment in the cultural and artistic field, the MOC enforces the Guidelines for Subvention and Promotion of Literary Readings and Humanistic Activities, Guidelines for Subvention and Promotion of Museum Business, Production and Broadcast Principles of Public TV Programs Accessible to People with Disabilities, One Village One Art – Implementation Guidelines and Other Regulations on Promotion of Artistic Village Plans, and Guidelines for Subvention and Support of the Digital Publishing Industry by 2015 to encourage both public and private sectors and enterprises to make plans for people with disabilities to participate in cultural activities and give them more opportunities to embrace art and culture. Taiwan Public Television Service produces programs with sign language and descriptive video services on a regular basis, and improves its production and broadcasting capability every year. The 2012 Regulations Governing Formation of the Task Force for Support of People with Disabilities to Participate in Cultural Activities are established to encourage the cultural participation among people with disabilities and protect their rights and interests in this regard.

280. Facilities and services for people with disabilities are available in buildings and integrated in their interior design to meet the requirements of laws and regulations. These convenient facilities are very helpful for people with disabilities to reach performances or exhibition halls. For this, the MOC has established the Checklist of Friendly Services and Facilities (Equipment) in Cultural Performance and Exhibition Halls, and the personnel of the halls are responsible to check its accessible equipment and service. The MOC Task Force for Support of People with Disabilities to Participate in Cultural Activities convenes meetings regularly

to discuss relevant issues, visits the halls and provides decent service, check accessible environment, make improvement suggestions, and enhance the accessible environment of the halls. For this, the Ministry selects four cultural halls as the demonstrative accessible halls⁴⁷ with reference to the category of disabilities to improve the overall accessible service capability, build accessible cultural facilities and spaces, and enhance the professional service level of the frontline personnel and volunteers in their reception of people with disabilities.

281. When visiting a fee-charging national scenic area, club or cultural/educational facility, a person with disabilities and one accompanying person can enter the scenic area free of charge. People with disabilities may also enjoy free tickets or discounts to a fixed amount when they participate in other fee-charging performance activities. Organizations may use performance spaces and halls free of charge or under preferential conditions to exhibit the creative works of people with disabilities.

I. Cultural activities

282. The MOC has organized “Accessible Reading” activities since 2014 to encourage people with disabilities to participate in literary and theatrical activities. The Ministry organizes lectures on literature and prepares special versions of the works for people with disabilities. Accessible services are also available at the site, such as transcription and sign language translation services. Theater professionals lead people with disabilities to participate in the preparation for performance, including training of the body or voice as well as methods to write a play, and guide them to demonstrate their talent in performance or writing plays. Their training results are finally presented in the performance on the stage of the theater. Captions and sign language translation service are available to introduce the contents of the performance.

283. To encourage people with disabilities to contribute their works, the MOC has organized the event of “Literature Awards – Art and Culture Award for People with Disabilities” 14 times (by 2015). The “Non-Visual Exploitation Program” provides another opportunity for people with disabilities to embrace artistic works. It combines with the contemporary art exhibition, descriptive video service, touch tour and non-visual creation to lead people with disabilities with one-one-one accompanying service of the volunteers who have received human

⁴⁷ National Taiwan Museum of Fine Arts, National Changhua Living Art Center, National Museum of Taiwan Literature, and National Taiwan Museum.

guide and non-visual creation training. This program has been implemented since 2013, and more than 150 people with disabilities participate in the program in more than 20 activities every year.

284. The MOC establishes the Operation Directions for Subsidizing Literature Reading and Humanistic Activities to promote the awareness of cultural equality since 2013. The literary readings and humanistic thought promotion activities that are helpful for improvement of the access to culture favorable to people with disabilities have the first priority to receive the subvention. Civil associations are also the major targets of subvention to help them promote cultural equality through training of talents, creation of artistic and cultural works, R&D applications, and cultural research. The MOC granted subsidies to 55 cultural equality activities for people with disabilities from 2013 to 2015.

II. Library resources

285. The MOC revised the Regulations Governing Utilization of Electronic Library Resources for People with Visual Impairment to the Regulations Governing Utilization of Digital Library Resources for People with Disabilities in November 2014, and designated National Taiwan Library as the responsible library for this task. It purchases resources to ensure the accessibility of the library, increases books through collection or outsourcing activities, and builds the “Integrated Electronic Resources Enquire System for People with Visual Impairment” that reaches a compliance level of AAA. The system integrates the book collections and other resources of major institutions for people with visual impairment to provide a single access for users. The National Taiwan Library also cooperates with other libraries, special education schools, institutions for people of disabilities, and relevant associations to promote reading, combine local and professional resources to build a national service network, ensure access of people with disabilities, and improve service benefits.
286. To ensure cultural equality and help people with visual impairment, learning disability, hearing impairment or other sensory disability use digital publications, the MOC enforces the Directions Governing the Subsidy for Counseling Digital Publishing Industry Development and requests the target of subvention to contribute the subsidized digital publications to the designated library for collection without charge.

287. Regarding the intellectual property right, Articles 44 to 65 of Taiwan's Copyright Act are the exceptions and limitations of copyright which do not constitute copyright infringement. Among such provisions, to concur with the Marrakesh Treaty established by World Intellectual Property Organization (WIPO), Article 53 of the Act was amended in 2014 to extend the scope of exceptions and limitations of copyright in favor of the visually impaired, learning disabled, hearing impaired or other persons with a perceptual disability to make works more accessible to them, which have satisfied the requirements of the Marrakesh Treaty.

III. TV programs

288. The Public Television Service Foundation of Taiwan establishes the Production and Broadcast Principles of Public TV Programs Accessible to People with Disabilities under instructions of the MOC to provide accessible TV programs. It has announced that Taiwan Public Television Service will produce and broadcast accessible TV programs not less than 50 hours per quarter. Currently, sign language translation service is provided in news programs at least 6 days a week. Programs with descriptive video service are another major point for accessible viewing environment, and real-time sign language translation is arranged for every important live broadcast program. Accessible TV programs are uploaded to the Internet through established network channels and people with hearing impairment can view the program at any time. Taiwan Public Television Service is currently holding discussions with related government agencies about training of professional talents in the field of descriptive video service to improve the quality and quantity of movies and TV programs enriched with this service.

IV. Adaptive physical education and participation in tourism and recreation

289. The government executes the improvement programs for teachers of adapted physical education to improve their professional knowledge through workshops, encourage them to engage in research of teaching methods, and help them combine theories and practical implementations to improve the teaching quality of adapted physical education. By creating an integrated teaching model through focus schools, teachers of adapted physical education can understand more about the characteristics and needs of students with disabilities. They can promote sports activities among these students with the help of organizations for people with disabilities, and encourage them to enjoy outdoor sports and form a habit of exercise in their daily lives.

290. All national park headquarters have archived the data of their fundamental facilities and improved the facilities in the “building” and “venue that the MOI has announced” in accordance with the Design Specifications of Accessible and Usable Buildings and Facilities and the Design Standards of Accessible Facilities for Gathering of MOI Administrative Officers. They have set up accessible facilities in hot scenic areas with consideration for the environmental restrictions and special ecological characteristics without violating the purpose for which the national park was established.
291. The MOI is dedicated to planning accessible journeys for tourists, and all national park headquarters, except for the Marine National Park Headquarters⁴⁸, are execute the plan. They have also made the “Barrier-free Travel Guidance Brochure of the National Park” and built the “Barrier-free Travel Website of the National Park” with a portal linked to the website of the Tourism Bureau, MOTC.
292. The 13 national scenic area administrations under the Tourism Bureau use common design methods to create universal accessible journeys for senior citizens and people with disabilities.
293. Regulations for the Provision of Subsidies by the Tourism Bureau, MOTC to Encourage the Quality Upgrading of Tourist Hotel and General Hotels, revised in February 2016, provide a basis for supporting star-class hotels to build, renovate and repair accessible facilities. The revised Directions Governing Awards of Tourism Bureau, MOTC for the brand-building of travel agencies, promulgated in May of the same year, change the basis of subvention for senior citizens and accessible journeys and encourage travel agencies to develop more premium products to meet the requirements of senior citizens and people with disabilities. The Tourism Bureau posts such information about accessible journeys on its Tourism Information Net. It has also established the Taiwan Stay Net which provides information about hotels that have accessible facilities.
294. The Council of Agriculture (COA), Executive Yuan, developed the Checklist of Barrier-free Facilities in National Forest Recreation Areas in 2009 and has completed the inspections of facilities, routes, and services in 18 national forest recreation areas per the Checklist. In 2010, COA organized accessible travel

⁴⁸ Since the Dongsha Atoll National Park does not have recreation areas and the boats and wharf facilities in the South Penghu Marine National Park are not friendly to people with disabilities, they are not incorporated in the plan so far.

activities and a contest for creating accessible accommodation environment. Alishan National Forest Recreation Area (2014), Jihben National Forest Recreation Area (2014), and Luodong Forestry Culture Park (2015) were rated as the friendly recreation areas respectively⁴⁹. COA also guides recreational farms to build accessible travel facilities.

295. The environmental education venues referred to in Article 2 of the Regulations Governing the Certification and Management of Environmental Education are mainly transformed or upgraded from existing sites. The professional services of the environmental education courses are added to the original activities at the site, and each of the services is subject to a specific competent authority. The venues can be classified into environmental facilities, water resources, and wetlands according to their environmental characteristics⁵⁰.
296. The environmental education venues must be designed with measures or hardware facilities in the accordance with their original purposes, functions and specifications and in compliance with PDRPA and the Design Specifications of Accessible and Usable Buildings and Facilities. The professional services of the environmental education courses are added to the original activities at the site. Free or preferential service, environmental arrangement and course adjustment are available at some sites to encourage people with disabilities to participate in environmental education activities. Since natural terrains, environmental characteristics, and historic buildings may easily affect the outdoor environment, an overall accessible environment is not available yet. Improvement will be made to create a friendlier environment for journeys and activities.
297. To help people with disabilities find historic sites and buildings more easily, the MOC has carried out a survey and investigation of an accessible facilities in historic sites and buildings, analysis of feasibility, and survey and assessment of the accessible environment in national historic sites. The results of these activities have been provided to local governments for reference. The Ministry continuously guides local governments to add accessible facilities during revitalization and reuse of historic sites and buildings with consideration for the

⁴⁹ Refer to Table 30.1 for improvement of the accessible facilities in forest recreation areas from 2011 to 2015.

⁵⁰ The facilities and venues are classified into cultural assets, soil and water conservation, water resources and wetlands, nature/ecology education centre, comprehensive community development, scenic area/recreation area/tourism factory, national park/city park museum/zoo, farm, and environmental/energy-saving facilities.

value of the cultural assets. This is helpful for people with disabilities to access to these cultural heritages.

298. The accessible facilities in cinemas must meet the requirements of the Design Specifications of Accessible and Usable Buildings and Facilities, and local governments are responsible for inspection of these facilities. To encourage cinema operators to provide accessible services, the MOC works with local governments to urge cinema operators and help them install these facilities for people with disabilities. The competent authority of the local government may impose a fine on cinema operations that fail to comply with the regulations or do not make improvement within the specified time frame.
299. The Construction and Planning Agency, MOI, adds provisions for mechanical amusement facilities in the Design Specifications of Accessible and Usable Buildings and Facilities to ensure their accessibility and availability to people with disabilities. Detailed legal procedures will be made after the opinions and suggestion on the specifications have been gathered and analyzed. They will be used as a basis for accessible design of mechanical amusement facilities.

Article 31

Statistics and data collection

300. The statistics and data collection are described in terms of data collection systems, data protection and data disclosure.
 - (1) Data collection systems are built in the form of official and survey statistics. The “official statistics” are conducted in accordance with the Statistics Act and the official statistics plan of each agency. For example, the MOHW requests local governments to submit data within the specified time frame in accordance with the statistics plan of the MOHW. The data collected include statistics of people with disabilities: sex, age, region, category of disability, severity of disability; statistics of government subvention: subsidies for living, day care and residential care or assistive devices; statistics from institutions for people with disabilities: number of these institutions, number of people under displacement, number of personnel. Six survey statistics have been conducted since 1993 in accordance with

Article 11, Paragraph 1⁵¹ and Paragraph 2⁵² of PDRPA. The data disclose the nurturance, medical care, education, transport and other living statuses of people with disabilities. The Ministry collected the statistical data of people with disabilities during the national consensus in 2010 by linking the results of the survey with the official registration data. It then compiled and published a supplement report about people with disabilities with reference to the statistical data.

- (2) The government enacts the 2010 PIPA to protect personal information and ensure its reasonable use. The Act governs the collection, processing and utilization of personal information to avoid infringement upon moral rights. To protect the privacy of the interviewee during the statistical survey, Article 45 of The Enforcement Rules of the Statistics Act provides that, “the statistics personnel of government agencies conducting the surveys shall keep all microdata obtained from various surveys confidential. Except statistical analysis in its entirety, the microdata cannot be used for any other purposes. If any statistics personnel disclosed a respondent's microdata resulting in damage to the rights and interests of the respondent, he/she may be disciplined in accordance with the seriousness of the damage. He/she shall also be held accountable under the law for any criminal liability incurred from disclosing confidential microdata of the respondent.”
- (3) Government agencies have established mechanisms for dissemination of regular data. The Statistical Data Dissemination Directions of Government Agencies allows the government agencies to disseminate data orally, in writing or through electronic media. For example, the MOHW collects, summarizes and compiles statistical data quarterly and disseminates them regularly on its website to help the public understand the statistics of people with disabilities.

301. The government will continuously incorporate the requirements of current policy in the statistical survey after analyzing the opinions and suggestions of people from different fields to understand the living situations and requirements of

⁵¹ The government shall periodically assess the needs of people with disabilities and conduct service investigation every five years. The items to be investigated include their living status, health care, special education, employment and occupational training, transportation and welfare. The government shall publish the investigation results and make them public.

⁵² The Executive Yuan shall incorporate people with disabilities in the population census that it conducts every ten years.

people with disabilities and improve their welfare. The government will also use IT technology to integrate inter-agency official registration data and, by doing so, have a comprehensive understanding of people with disabilities. These data are then used as a reference for the government to make policies.

Article 32

International cooperation

302. The government has been devoted to non-governmental international activities to protect the rights of people with disabilities and safeguard their equal opportunities to social, political, economic and culture participation. The following are some of the activities:

- (1) The government helps domestic Non-Governmental Organizations (NGOs) to attend international conventions for rights of people with disabilities. It helped the Eden Social Welfare Foundation to attend the 14th International Conference on Mobility and Transport for Elderly and Disabled Persons (TRANSED) in Lisbon.
- (2) The government assists in inviting leaders of major organizations for people with disabilities having international influence to visit Taiwan or hold international conventions for rights of people with disabilities. It helped the Eden Social Welfare Foundation to attend the training program that the Perkins School for the Blind held in Taiwan in August, 2013.
- (3) The government helps domestic NGOs to collaborate with International Non-Governmental Organizations (INGOs) to carry out the international cooperation for promoting rights of people with disabilities. The NGOs and INGOs worked with Handicap International to implement the Program for the Development and Strengthening of Haitian Associations to Improve the Socio-Economic Inclusion of People with Disabilities.
- (4) The government offers assistance to national NGOs to donate wheelchairs to foreign countries. It helps the Amitofo Care Centre to donate wheelchairs and accessible facilities across Asia and Africa.
- (5) The government works on the exchange and support program for people with disabilities in countries with diplomatic relations with Taiwan. It accommodated Nauruan students with disabilities who visited Taiwan and it

has proposed the Strengthening of Mental Health Care System in Fiji since 2016.

303. The MOHW announces grants to encourage national agencies, schools and groups to take part in international health affairs, improve the health capability and foster international talents in public health. The MOHW subsidizes researchers of domestic and international research institutions, universities, health institutions and legal entities. The MOHW also provides grants to private groups and international government agencies that are legal and well-functioned. It also subsidizes groups for people with disabilities to help them attend conferences and prepare relevant programs.
304. The government greatly supports the participation in exchange and cooperation with regional or international organizations in disability issues. For instance, the Asia-Pacific Economic Cooperation (APEC) had set up the APEC Group of Friends on Disability (APEC GOFD) in the Senior Officials' Meeting (SOM2) to promote disability-inclusive development in the Asia-Pacific Region in 2015 and Taiwan has actively involved in this event.
305. The MOEA carried out the Technology Development Program to support legal entities to develop critical technology and modules and help vendors to create breakthroughs in assistive technology development. The Industrial Technology Research Institute has proposed the Gait Function Improvements and Developments of Exoskeleton Robot for the Handicapped Project. It collaborates with international robot development companies to enhance the walking stability and integrate the sensor technologies. The walking speed has reached 0.3m/sec, the international level. The government hopes that the robot would be suitable for more clinical research subjects, environments and nations. It cooperates with TMSUK, Tottori University, and UPMC to promote clinical research in Taiwanese, Japanese and European medical institutions. The government also works with the School of Medicine, National Taiwan University and has created the first standard training process for walking assistive exoskeleton robot in Asia.

Article 33
National implementation and monitoring

306. The Paris Principles were adopted by the United Nations General Assembly in 1993 and all member states are encouraged to set up a National Human Rights Institution (NHRI). While the ROC government has yet to establish a national human rights commission in accordance with the Paris Principles, an ombudsman's office is regarded by the UN as a form of NHRI. As the national ombudsman's office, the Control Yuan's existing functions and powers are in conformity with most of the requirements set forth by the Paris Principles. To fully comply with the said principles, in 2015, the Control Yuan deliberated on reinforcing its statutory duties and expanding its power to investigate the private sector implicated with human rights violation and to provide remedial measures for the victims. The Control Yuan then drafted the Organic Law of Control Yuan National Human Rights Commission, which was brought forth for discussion at the Presidential Office Human Rights Consultative Committee.
307. The Control Yuan is the national ombudsman's office. It independently exercises the powers of impeachment, censure and audit, accepts citizen's written complaints and conducts investigations in accordance with the Constitution and its Additional Articles and the Control Act. In human rights infringement or violation cases, the Control Yuan shall propose corrective measures and demand government agencies to make improvement so as to protect and promote human rights and eliminate discrimination. The jurisdiction of the Control Yuan Human Rights Protection Committee includes all human rights issues. Investigations into possible human rights violation of the people with disabilities by government agencies and their public servants may be conducted by Control Yuan Members on assignment by the said committee or on their own motion. In this way, the Control Yuan monitors the national implementation of human rights instruments including the CRPD.
308. In accordance with Article 6 of the CRPD Implementation Act, Committee for the Promotion of the Rights of Persons with Disabilities, Executive Yuan has been established to promote CRPD tasks. The Committee convenes a meeting quarterly to coordinate, study, review, consult and execute CRPD promotion and educational training activities, guide government agencies to implement CRPD, research and investigate the rights and interests of people with disabilities, submit national reports, accept complaints against any action in violation of CRPD, and

deal with other CRPD-related affairs.

309. The Committee for the Protection of the Rights of Persons with Disabilities, MOHW, has been established in accordance with PDRPA. This is an inter-departmental coordination unit with the purpose of protecting the rights and interests of people with disabilities through planning, research, consultation, and coordination. The Committee also, among others, accepts requests of people with disabilities to coordinate in cases where their rights and interests have been infringed. Local governments have set up similar task forces in accordance with PDRPA to promote policies relating to people with disabilities.
310. The government respects the participation of people with disabilities in public policies and affairs. Hence, the number of experts or scholars, representatives of people with disabilities, and the representatives of disability organization in the abovementioned Committee shall not be less than the specified percentage⁵³, and the representatives of any single gender shall be no less than one third of the total number of the representatives.

⁵³ The number of the experts or scholars, representatives of people with disabilities, and the representative of the disability organizations in the Committee for the Promotion of the Rights of Persons with Disabilities, Executive Yuan shall be no less than one half, while the number of the experts or scholars, representatives of people with disabilities, and the representative of the disability organizations in the Committee for the Protection of the Rights of Persons with Disabilities, MOHW shall be no less than one third.

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Table 1.1 Population with Disabilities by Category and Grade

Unit: Person

	Grand Total			Profound			Severe			Moderate			Mild		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total	1,155,650	655,444	500,206	141,998	74,888	67,110	193,817	107,355	86,462	371,256	210,964	160,292	448,579	262,237	186,342
Visual Impairment	57,319	29,924	27,395	31	14	17	20,444	11,054	9,390	17,489	8,804	8,685	19,355	10,052	9,303
Hearing Impairment	122,906	70,539	52,367	24	12	12	19,429	10,663	8,766	34,508	20,312	14,196	68,945	39,552	29,393
Motion and Balance Impairment	3,739	2,136	1,603	5	3	2	171	82	89	816	440	376	2,747	1,611	1,136
Vocal and Speech Impairment	14,482	10,575	3,907	266	224	42	3,492	2,803	689	2,993	2,158	835	7,731	5,390	2,341
Moving Functional Limitation	375,730	222,522	153,208	5,254	3,092	2,162	46,499	26,367	20,132	134,715	80,775	53,940	189,262	112,288	76,974
Intellectual and Developmental Disability	100,797	57,504	43,293	7,910	4,389	3,521	14,971	8,308	6,663	37,678	20,698	16,980	40,238	24,109	16,129
Internal Organ Loss Function and Related Disabilities	147,856	84,922	62,934	71,367	36,805	34,562	10,241	6,121	4,120	17,890	10,938	6,952	48,358	31,058	17,300
Facial Disfigurements	4,644	3,222	1,422	—	—	—	267	140	127	755	478	277	3,622	2,604	1,018
Persistent Vegetative State	4,046	2,340	1,706	4,039	2,338	1,701	1	—	1	—	—	—	6	2	4
Dementia	46,054	17,796	28,258	4,506	1,513	2,993	11,700	4,066	7,634	17,538	6,921	10,617	12,310	5,296	7,014
Autism	13,293	11,587	1,706	308	248	60	1,231	1,002	229	2,982	2,574	408	8,772	7,763	1,009
Chronic Mental Health Conditions	124,240	60,549	63,691	2,222	1,146	1,076	20,120	10,643	9,477	67,635	34,060	33,575	34,263	14,700	19,563
Multiple Disabilities	124,215	72,451	51,764	45,493	24,796	20,697	42,990	24,845	18,145	33,777	21,438	12,339	1,955	1,372	583
Intractable Epilepsy	4,826	2,594	2,232	33	21	12	16	9	7	56	38	18	4,721	2,526	2,195
Rare Diseases	2,068	1,097	971	76	39	37	768	415	353	423	233	190	801	410	391
Others	3,646	1,965	1,681	282	141	141	1,116	637	479	884	455	429	1,364	732	632

	Grand Total			Profound			Severe			Moderate			Mild		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Unclassifiable as the result of classification system transformation	5,789	3,721	2,068	182	107	75	361	200	161	1,117	642	475	4,129	2,772	1,357

Source: Ministry of Health and Welfare

Table 1.2 Population with Disabilities by Category and Age

Units: Person; %

	Grand Total	0-2 Years	3-5 Years	6-11 Years	12-14 Years	15-17 Years	18-29 Years	30-44 Years	45-59 Years	60-64 Years	65 Years & Over
Grand Total	1,155,650	1,692	6,063	19,898	13,044	16,188	74,455	155,835	303,502	114,694	450,279
As a Percentage of the Total Population	4.92	0.28	1.00	1.61	1.79	1.89	1.94	2.73	5.57	7.55	15.32
Visual Impairment	57,319	11	47	345	288	363	2,503	5,792	11,632	6,123	30,215
Hearing Impairment	122,906	334	399	986	638	750	4,180	6,760	16,305	10,647	81,907
Motion and Balance Impairment	3,739	2	3	14	5	7	86	292	846	505	1,979
Vocal and Speech Impairment	14,482	25	277	702	204	185	696	2,020	4,825	1,811	3,737
Moving Functional Limitation	375,730	328	789	1,612	1,059	1,476	10,092	39,972	124,637	43,718	152,047
Intellectual and Developmental Disability	100,797	17	638	6,585	4,916	6,715	28,482	30,530	16,261	3,194	3,459
Internal Organ Loss Function and Related Disabilities	147,856	199	327	756	604	734	3,996	13,807	40,627	21,205	65,601
Facial Disfigurements	4,644	2	13	46	26	53	549	888	1,729	596	742
Persistent Vegetative State	4,046	4	3	11	10	22	196	652	979	432	1,737
Dementia	46,054	—	—	7	5	10	177	835	2,397	1,917	40,706
Autism	13,293	22	571	3,514	2,151	2,076	4,424	469	48	8	10
Chronic Mental Health Conditions	124,240	—	1	28	55	177	6,019	35,330	54,396	13,122	15,112
Multiple Disabilities	124,215	194	1,162	3,531	2,224	2,709	10,095	15,486	26,155	10,786	51,873
Intractable Epilepsy	4,826	11	18	76	57	114	744	1,679	1,604	290	233
Rare Diseases	2,068	214	268	272	180	136	343	279	239	65	72

	Grand Total	0-2 Years	3-5 Years	6-11 Years	12-14 Years	15-17 Years	18-29 Years	30-44 Years	45-59 Years	60-64 Years	65 Years & Over
Others	3,646	28	66	522	336	384	1,311	662	235	51	51
Unclassifiable as the result of classification system transformation	5,789	301	1,481	891	286	277	562	382	587	224	798

Source: Ministry of Health and Welfare

Table 5.1 Constitutional Interpretation of Rights for People with Disabilities

J.Y. Interpretation No.	Interpretation
290	The Justices only interpret whether the rules of the Public Service Election and Recall Law promulgated during the Period of National Mobilization for Suppression of the Communist Rebellion to restrict the educational background of candidates violate the Constitution. The current Civil Servants Election And Recall Act does not impose any restriction on educational background. The candidate with disabilities would not be disqualified due to low educational level.
417	It was debated whether people with disabilities fined for jaywalking because of their difficulty with crossing the overhead bridge and underground tunnel be exempted from the relevant regulations of the Road Traffic Management and Penalty Act. The government announced the amendments to this Act on May 18, 2011 and implemented this Act on August 1, 2011. Article 78, Paragraph 2 of the Road Traffic Management and Penalty Act provided that, “Shall a pedestrian with physical disability who relies on mobility aids violate the regulations set forth in Subparagraph 2 of the preceding paragraph because there are obstacles on sidewalks, the pedestrian shall be exempt from punishment.”
626	It is required to adopt intermediate scrutiny standards for the discrimination against biological defect beyond human control. The Justices consider that the color differentiation is substantially related to the police work and the discrimination does not infringe the principle of equal protection. The Justices would consider the restrictions on holding public offices due to biological defect constitutional if the restriction is substantially related to the ability for serving in a public office.
649	The Justices recognize that there is a significant public interest in protecting the right to work of people with visual disabilities and the objectives for preferential or

discriminatory treatment are justified under the relevant provisions of the Constitution of Republic of China (Taiwan) according to the regulations for the protection of the disadvantaged in Article 155 of the Constitution and Article 10, Paragraph 7 of the Additional Articles of the Constitution. The Justices implement stricter scrutiny standards to check whether it is possible to protect the rights to work of people with disabilities and improve their socioeconomic status by preferential or discriminatory treatment. The Justices consider that the disputed provision has become excessively restrictive to people without visual impairment and the social-economic condition of vision-impaired has yet to see any significant improvement in the long run. The Justices declared Article 37, Paragraph 1, of the Physically and Mentally Disabled Citizens Protection Act, unconstitutional. The Justices emphasized that it is an especially important public interest to protect the right of employment for people with visual disabilities. The governing authority shall adopt multiple, concrete measures to provide training and guidance for occupations deemed suitable for the people with visual disabilities and retain appropriate employment opportunities. The government announced the amendments to Article 16 of the People with Disabilities Rights Protection Act on February 1, 2011. This Article specified that anyone other than the people with visual disabilities (visual acuity functions) may not be engaged in massage industry and it became invalid on October 31, 2011. The competent authorities in charge of labor affairs shall establish guidance to improve their professional skills and management abilities and grant subsidies for the practices they operate. Medical care institutions and government agencies are not allowed to provide places for people without visual disabilities to engage in massage or physiotherapy massage services. The aforementioned agencies and institutions shall provide free space to people with visual disabilities to engage in massage or physiotherapy massage services or grant discounts to them. The government set additional regulations to the Article 46-1. When government agencies and state-run

	businesses pro-actively or delegated others attend to consulting telephone information service and the number of such employee is over ten, the number of employed people with visual disabilities shall be more than 10 of the total telephone answerers unless specified otherwise by other regulations.
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Source: Judicial Yuan

Table 6.1 Employment Rates and Labor Force Participation Rates of People with Disabilities and the Public by Gender in 2014

Unit: %

Item	Identity	Female	Male	Total
Employment Rate	People with disabilities	11.8	22.0	17.5
	The public	48.7	63.9	56.2
Labor Force Participation Rate	People with disabilities	13.1	24.7	19.7
	The public	50.5	66.8	58.5

Source: Ministry of Labor

Description:

1. The Ministry of Labor made the statistics in June 2014 and determined the employment status according to the definition of the International Labour Organization (ILO).
2. Employment rate = $\frac{\text{The number of employees}}{\text{population above 15 years of age}} \times 100\%$

Table 6.2 Students with Disabilities in Different Education Stages by Gender, Academic Years 2011-2015

Units: Person; %

Stage of Education	2011		2012		2013		2014		2015	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Grand Total	76,362 (66.18)	39,023 (33.82)	79,169 (66.58)	39,742 (33.42)	81,072 (67.14)	39,678 (32.86)	82,271 (67.57)	39,491 (32.43)	84,538 (67.88)	40,002 (32.12)
Preschool	8,711 (69.77)	3,775 (30.23)	9,996 (70.33)	4,216 (29.67)	10,687 (70.79)	4,409 (29.21)	11,014 (70.79)	4,545 (29.21)	11,124 (71.08)	4,525 (28.92)
Elementary	28,421 (66.61)	14,249 (33.39)	28,695 (67.18)	14,017 (32.82)	28,481 (67.71)	13,580 (32.29)	28,585 (68.02)	13,437 (31.98)	28,486 (68.44)	13,134 (31.56)
Junior High	17,433 (66.30)	8,860 (33.70)	17,565 (66.49)	8,853 (33.51)	18,651 (66.91)	9,223 (33.09)	19,046 (67.47)	9,182 (32.53)	18,689 (67.53)	8,985 (32.47)
General /Vocational High	14,535 (64.84)	7,880 (35.16)	15,170 (65.16)	8,111 (34.84)	15,494 (65.85)	8,035 (34.15)	15,707 (66.62)	7,870 (33.38)	17,310 (67.30)	8,411 (32.70)
College	7,262 (63.03)	4,259 (36.97)	7,743 (63.01)	4,545 (36.99)	7,759 (63.65)	4,431 (36.35)	7,919 (63.99)	4,457 (36.01)	8,929 (64.35)	4,947 (35.65)

Source: Ministry of Education

Table 6.3 Percentage of Female Students with Disabilities in Different Education Stages, Academic Years 2011-2015

Units: Person; %

Stage of Education	2011	2012	2013	2014	2015
Grand Total	1.75	1.72	1.76	1.76	1.82
Preschool	4.19	1.94	2.08	2.15	2.06
Elementary	2.05	2.14	2.20	2.25	2.27
Junior High	2.12	2.19	2.32	2.39	2.52
General /Vocational High	2.17	2.22	2.26	2.07	2.30
College	0.64	0.68	0.66	0.66	0.74

Source: Ministry of Education

Table 7.1 Children with Disabilities under 18 Years of Age by Category and Age

Units: Person; %

Category		Age	0-2 Years	3-5 Years	6-11 Years	12-14 Years	15-17 Years
Grand Total	Total	56,885	1,692	6,063	19,898	13,044	16,188
	Male	36,422	961	3,938	13,114	8,340	10,069
	Female	20,463	731	2,125	6,784	4,704	6,119
Visual Impairment		1,054 (1.85)	11	47	345	288	363
Hearing Impairment		3,107 (5.46)	334	399	986	638	750
Motion and Balance Impairment		31 (0.05)	2	3	14	5	7
Vocal and Speech Impairment		1,393 (2.45)	25	277	702	204	185
Moving Functional Limitation		5,264 (9.25)	328	789	1,612	1,059	1,476
Intellectual and Developmental Disability		18,871 (33.17)	17	638	6,585	4,916	6,715
Internal Organ Loss Function and Related Disabilities		2,620 (4.61)	199	327	756	604	734
Facial Disfigurements		140 (0.25)	2	13	46	26	53
Persistent Vegetative State		50 (0.09)	4	3	11	10	22
Dementia		22 (0.04)	—	—	7	5	10
Autism		8,334 (14.65)	22	571	3,514	2,151	2,076
Chronic Mental Health Conditions		261 (0.46)	—	1	28	55	177
Multiple Disabilities		9,820 (17.26)	194	1,162	3,531	2,224	2,709
Intractable Epilepsy		276 (0.49)	11	18	76	57	114

Category		Age	0-2 Years	3-5 Years	6-11 Years	12-14 Years	15-17 Years
Rare Diseases	1,070 (1.88)		214	268	272	180	136
Others	1,336 (2.35)		28	66	522	336	384
New ICF cannot be Unclassifiable as the result of classification system transformation	3,236 (5.69)		301	1,481	891	286	277

Source: Ministry of Health and Welfare

Table 7.2 Early Intervention Service for Children with Developmental Delay — Benefits for Preschool Children with Disabilities

Units: Person; Beneficiary; %

Year	Reported Cases			Case Management			Early Intervention Institution's Agency-Based Intervention Services (full- and part-time)	Subsidy		
	Person	Gender Ratio (Female=100)	Ratio to Overall Children with Developmental Delay	Person	Gender Ratio (Female=100)	Ratio to Overall Children with Developmental Delay	Person	Beneficiary	Gender Ratio (Female=100)	Ratio to Overall Children with Developmental Delay
2011	941	130.9	5.9	7,700	186.5	23.8	214	7959	167.4	31.3
2012	1,124	188.2	6.5	7,846	189.0	21.8	177	8020	166.0	28.7
2013	1,072	179.3	5.9	7,176	185.7	15.2	199	11496	184.1	31.7
2014	1,013	155.8	5.0	5,663	170.3	9.1	189	11121	187.4	28.3
2015	885	143.9	4.3	5,252	171.0	11.9	133	11505	184.1	25.7

Source: Ministry of Health and Welfare

**Table 7.3 Children with Developmental Delay Handled by the Child
Development Joint Evaluation Centers**

Units: Household; Person

Year	Number of Child Development Joint Evaluation Centers	Children Subject to Evaluation of Suspected Developmental Delay	Children Suffering from Confirmed Developmental Delay
2012	45	17,245	12,525
2013	45	19,485	14,461
2014	45	22,466	16,291
2015	46	23,735	16,598

Source: Ministry of Health and Welfare

Description: Most children suffered from language developmental delay and referred for intervention services.

**Table 7.4 Disability Living Assistance for Low and Middle-Low Income
Households with People with Disabilities**

Units: Person; TWD

Year	Low Income Household		Middle-Low Income Household	
	Person	Amount	Person	Amount
2011	646,766	4,147,663,000	—	—
2012	717,266	5,383,384,000	—	—
2013	746,571	5,635,786,000	—	—
2014	770,785	5,800,363,000	274,527	1,169,843,000
2015	769,927	5,806,924,000	285,794	1,217,210,000

Source: Ministry of Health and Welfare

Table 7.5 Legal Aid Cases 2011-2014

Units: Case; %

Year	Cases Involving Beneficiary with Disabilities	Cases with Legal Aid Granted	Ratio to All Cases with Legal Aid Granted	Cases Involving Beneficiary with Disabilities under 18 Years of Age	Ratio to All Cases Involving Beneficiary with Disabilities
2011	2,716	24,334	11.16	122	4.49
2012	3,392	31,521	10.76	128	3.77
2013	5,671	38,952	14.56	258	4.55
2014	5,331	35,223	15.13	194	3.64

Source: Legal Aid Foundation

Table 8.1 Subsidy for the Promotional Activities Implemented by Legal Entities or Organizations to Improve the Awareness of the Disability Rights and CRPD

Units: Case; TWD

Year	Case	Total Amount Approved
2012	669	77,604,498
2013	843	24,126,800
2014	672	19,855,200
2015	526	17,316,400

Source: Ministry of Health and Welfare

Table 9.1 Beneficiaries and the Subsidies for Accessible Residence in Favor of People with Disabilities Nationwide

Unit: TWD 1,000; Beneficiary

Year	Subsidy	Beneficiary
2012	3,060	633
2013	6,125	1,190
2014	7,044	1,503
2015	7,441	1,725

Source: Ministry of Health and Welfare

Table 11.1 List of Places Requiring Fire Management

Item	Place Requiring Fire Management	Doc. Issue Date and Number	Effective Date	Remarks
1	Preschools (incl. kindergartens and day care centers before change of the system) and babysitting centers with more than 30 accommodated people	MOI Letter (89) Tai-Nei-Xiao-Zi No. 8986914, 8.14.2000	8.14.2000	The places in Item 1 were kindergartens, day care centers and babysitting centers with more than 30 accommodated people (incl. employees).
2	Boarding and guest houses with more than 100 accommodated people (only for the houses with bedrooms)			
3	Fitness and recreation centers and billiard halls with a total floor area over 500 sqm.			
4	Coffee shops with a total floor area over 300 sqm.			
5	Libraries and Museums with a total floor area over 500 sqm.			
6	MRT stations			

7	Long-term care institution (long-term care, nursing, and caring for the dementia), respite care institutions, service institutions for the elderly (limited to daycare, temporary care, short-term protection and shelter facilities), nursing home institutions and postpartum nursing care centers	MOI Announcement Nei-Shou-Xiao-Zi No. 0940092676, 1.31.2005	5.1.2005	The places originally announced were the long-term care institutions, care institutions, respite care institutions, service institutions for the elderly (limited to daycare, temporary care, and short-term protection and shelter facilities), nursing home institutions and postpartum nursing care centers.
8	HSR stations	MOI Announcement Nei-Shou-Xiao-Zi No. 0960822496, 1.30.2007	4.1.2007	
9	Temples, ancestral halls, churches and other similar establishments with a total floor area of more than 500 square meters and one or more buildings or similar accommodation or recreation spaces that can accommodate more than 100 people	MOI Announcement Nei-Shou-Xiao-Zi No. 1020821861, 3.13.2013	4.1.2013	
10	Massage centers of therapists with visual disabilities with more than 30 accommodated people	MOI Announcement Nei-Shou-Xiao-Zi No. 1020825928, 12.27.2013	1.1.2014	

Resource: Ministry of the Interior

Description: MOI Announcement Nei-Shou-Xiao-Zi No. 1020825928, 12.27.2013

Table 13.1 Personnel of the Judges Academy Participating in Workshops on Disabilities 2011-2015

Units: Session; Person

Year	Session	Person
2011	2	32
2012	2	52
2013	9	720
2014	6	329
2015	9	767

Source: Judicial Yuan

Table 13.2 Workshops Held by the Judges Academy 2011-2015

Unit: Session

Year	Session
2011	2
2012	2
2013	9
2014	10
2015	10

Source: Judicial Yuan

Table 13.3 Contracted Interpreters of the Court (by Language and Person)
2011-2014

Unit: Person

Language	Year	2011	2012	2013	2014
	Grand Total		153	170	262
Sign Language		21	20	20	17
Hakka Language		15	9	24	23
Indigenous Language		17	39	46	38
Japanese		12	10	20	22
English		21	18	51	55
Korean		1	-	1	3
Cantonese		4	3	3	4
Yunnanese		-	-	-	1
French		7	6	10	10
German		5	5	2	2
Spanish		9	9	6	4
Portuguese		1	1	1	1
Thai		9	11	17	18
Vietnamese		23	27	41	47
Indonesian		11	14	22	29
Tagalog		2	1	3	6
Khmer		2	3	3	2
Malay		1	1	1	2
Burmese		-	-	-	2

Source: Judicial Yuan

Table 14.1 People with Disabilities in Correction Agencies in 2015

Unit: Person

Disability	Grand Total	Person
		2,249
Mental Functions & Structures of the Nervous System		721
Sensory Functions & Pain; Eye, Ear and Related Structures		161
Functions & Structures of/involved in Voice and Speech		66
Functions & Structures of/related to the Cardiovascular, Hematological, Immunological and Respiratory Systems		90
Functions & Structures of/related to the Digestive, Metabolic and Endocrine Systems		55
Functions & Structures of/related to the Genitourinary and Reproductive Systems		42
Neuro-musculoskeletal and Movement related Functions & Structures		1,065
Functions & Related Structures of the Skin		14
Others (cannot be identified as previous categories)		35

Source: Ministry of Justice

Table 14.2 Stored Fingerprints of Suspected Developmentally Delayed, Developmentally Delayed, and Physically & Mentally Disabled Children and Youth

Unit: Person

Year	Person Pressing Fingerprints
2011	328
2012	240
2013	518
2014	152
2015	291

Source: Ministry of the Interior

Table 16.1 Victims with Disabilities Suffering From Intimate Partner Violence

Units: Person: %

Year	Victim	Ratio to the Victim Reported	Ratio of Female Victim with Disabilities
2011	1,393	2.8	77
2012	1,133	2.2	75
2013	1,794	3.6	80
2014	1,676	3.4	80

Source: Ministry of Health and Welfare

Table 16.2 Cases Investigated by the Control Yuan Involving Human Rights of People with Disabilities

Units: Case; %

Year	Grand Total	Case							
		Health	Adequate Living Standards and Social Security	Protection from Exploitation, Violence and Abuse	Work and Employment	Education	Right to Life	Equality and Non-Discrimination	Liberty and Security of the Person
Total Cases	30	8	7	6	2	2	2	2	1
Ratio	100	26.6	23.3	20	6.7	6.7	6.7	6.7	3.3
2011	7	2	1	2	1	0	1	0	0
2012	8	2	2	2	0	0	1	1	0
2013	5	1	2	0	1	0	0	0	1
2014	10	3	2	2	0	2	0	1	0

Source: Control Yuan

Description:

1. The reference period is based on the date on which the investigation report was approved by the standing committee of the Control Yuan.
2. The Control Yuan classifies cases according to the major investigation categories. A case may be classified into two or more categories. Here, an actual total of 20 cases were related to exploitation, violence, and abuse.

Table 17.1 Teenage Sexual Health Promotion Consulting Service Program

Units: Session; Person

Year	Session	Person
2011	70	2,447
2012	128	2,221
2013	105	3,284
2014	110	2,105
2015	85	2,203

Source: Ministry of Health and Welfare

Table 17.2 Teenager-Friendly Physician/Outpatient Services

Units: Institution; Person

Year	Medical Institution	Person
2011	30	1,549
2012	39	10,884
2013	45	6,402
2014	63	7,445
2015	70	30,297

Source: Ministry of Health and Welfare

Table 19.1 Historical Achievements of Community Residential Service

Units: Case; TWD; Beneficiary

Year	Case	Total Subsidy	Beneficiary
2011	32	21,855,350	317
2012	37	24,890,700	378
2013	38	28,739,500	401
2014	43	26,682,965	406
2015	42	26,945,900	454

Source: Ministry of Health and Welfare

Table 19.2 Taiwan Public Welfare Lottery Fund Subsidizing the Independent Living Supporting Services Provided by Local Governments

Unit: Beneficiary

Year	Beneficiary
2013	1,517
2014	11,480
2015	21,205

Source: Ministry of Health and Welfare

Description: The central government has sponsored local governments with the Taiwan Public Welfare Lottery Fund to provide independent living support services since 2012. Local governments focused on the promotion and training of professional personnel in 2012 and started providing the service in 2013.

Table 19.3 Home- and Community-Based Service for People with Disabilities

Unit: Person

Year	Home-Based	Community-Based
2011	2,529,788	3,080,752
2012	2,481,241	3,714,679
2013	2,578,992	4,782,272
2014	2,730,660	5,911,840
2015	2,993,539	5,468,566

Source: Ministry of Health and Welfare

**Table 19.4 Application of the People with Disabilities for the Integrated
Housing-Subsidization Program**

Unit: Household

Year	Housing-Purchase Mortgage Subsidy Issuance		Housing-Renovation Mortgage Subsidy Issuance		Rent Subsidy	
	Application	Application Approved	Application	Application Approved	Application	Application Approved
2011	655	517	372	221	10,528	9,695
2012	448	340	351	215	17,624	9,432
2013	565	356	270	126	16,582	10,251
2014	741	503	287	153	17,058	11,316
2015	662	481	197	111	15,831	13,331
Total	3,071	2,197	1,477	826	77,623	54,025

Source: Ministry of the Interior

Table 20.1 Expenditure on the Personal Mobility Devices Subsidized for the Beneficiaries with Disabilities

Units: TWD; Beneficiary

Year	Expenditure	Beneficiary
2012	197,304,131	22,472
2013	159,499,925	22,002
2014	173,651,011	23,709
2015	183,472,748	25,452

Source: Ministry of Health and Welfare

Table 20.2 R&D Investment in Assistive Devices

Units: TWD 10,000

Year	Amount
2011	4,238
2012	3,228
2013	4,440
2014	8,879
2015	8,479

Source: Ministry of Science and Technology

Description:

1. The above amounts include project funds for promoting the disability program from 2013 to 2015 and exclude rehabilitation-related R&D funds.
2. The funds have increased significantly after 2013 because of project funds.

Table 20.3 Subsidies for Assistive Devices in the CITD Program

Units: Household; TWD 10,000

Year	Grand Total	Household	Subsidy	Promotion Investment	Estimated Increase in Production Value
		21	2,165	36,676.9	71,075
2011	6	600	29,320.0	11,075	
2012	4	440	2,840.0	21,960	
2013	4	365	2,570.2	16,540	
2014	7	760	1,946.7	21,500	

Source: Ministry of Economic Affairs

**Table 20.4 Industrial TDP – Subsidies for Innovative Technology
Development of Assistive Devices**

Units: Case; TWD 10,000

Year	Grand Total	Case	Subsidy	Investment by Vendor
			20	2,856.5
2011		5	1,010	1,940
2012		2	110	1,408
2013		4	840	811
2014		9	896.5	1,099

Source: Ministry of Economic Affairs

Table 20.5 Organization TDP – Subsidies for Breakthrough of Assistive Technologies

Units: Case; TWD 10,000

Year	Grand Total	Case	Subsidy	Investment by Vendor
			4	12,271.5
2011		0	0	0
2012		1	3,400.0	0
2013		3	8,871.5	21,471.0
2014		0	0	3,758.3

Source: Ministry of Economic Affairs

Table 23.1 Mental and Physical Health of Adopted Children and Teenagers

Unit: Person

Year	Domestic/ Abroad	Total	Typical	Developmental Delay	Disability	Illness	Too young to identify	Others
2012	Domestic	80	69	0	0	7	3	1
	Abroad	193	79	26	12	39	36	1
2013	Domestic	100	82	9	0	4	2	3
	Abroad	166	100	16	10	24	14	2
2014	Domestic	155	137	4	1	2	10	1
	Abroad	192	111	28	8	19	24	2
2015	Domestic	143	120	5	1	0	8	9
	Abroad	158	93	18	10	10	26	1

Source: Ministry of Health and Welfare

Table 23.2 Statistics on Persons with Disabilities Accommodated in Children and Youth Placement Institutions 2011-2014

Units: Institution; Person

Year	Number of Institution	Number of Beds Approved	Person Accommodated		Children or Youth with Disability Identification Card		Children Aged 6 or Under with Developmental Delay	
			Male	Female	Male	Female	Male	Female
2011	120	4,577	1,837	1,772	179		34	
2012	123	4,816	1,858	1,691	105	91	30	16
2013	126	4,985	1,842	1,700	101	96	29	21
2014	124	4,991	1,818	1,683	116	101	35	16

Source: Ministry of Health and Welfare

**Table 23.3 Statistics on Children and Youth with Disabilities in Foster Care
2011-2014**

Units: Person; %

Year	Grand Total	Children and Youth in General	Children and Youth with Disabilities	Percentage of Children and Youth with Disabilities
2011	2,764	2,464	300	11
2012	2,754	2,458	296	11
2013	2,702	2,398	304	11
2014	2,672	2,368	304	11

Source: Ministry of Health and Welfare

Table 24.1 National Preschool Students with Disabilities

Unit: Person

Year	Person
2011	12,355
2012	12,486
2013	14,212
2014	15,096
2015	13,052

Source: Ministry of Education

Table 24.2 Students of Special Education Schools by Education Level 2011-2014

Unit: Person

Year	Grand Total	Preschool	Elementary	Junior High	General /Vocational High
2011	6,715	204	755	1,188	4,568
2012	6,755	183	779	1,164	4,629
2013	6,686	186	750	1,201	4,549
2014	6,633	186	730	1,196	4,521

Source: Ministry of Education

Table 24.3 Students of Special Education Schools in Taiwan (by Region) 2011-2014

Unit: Person

Year	Grand Total	North	Central	South	East
2011	6,715	2,114	2,013	2,126	462
2012	6,755	2,101	2,024	2,170	460
2013	6,686	2,117	2,005	2,109	455
2014	6,633	2,148	1,976	2,071	438

Source: Ministry of Education

Table 24.4 Inclusive Education Promotion Program for Senior High Schools and Below

Unit: Person

Year	Student with Disabilities
2011	91,972
2012	94,326
2013	97,030
2014	98,452
2015	103,157

Source: Ministry of Education

Table 24.5 Program for Improvement of Accessible Facilities at General and Vocational High Schools

Unit: School

Year	School Subsidized
2012	43
2013	95
2014	125
2015	96

Source: Ministry of Education

Table 24.6 Learning Aids at College and University and its Borrower

Units: Piece; Borrower

Year	Learning Aids Borrowed	Borrower
2011	584	119
2012	194	151
2013	7,669	5,086
2014	2,967	2,162
2015	7,104	4,129

Source: Ministry of Education

Table 24.7 Participants with Disabilities in Specialized Vocational Training

Unit: Participant

Year	Participant
2011	1,930
2012	1,944
2013	1,934
2014	1,783
2015	1,710

Source: Ministry of Labor

Table 24.8 Ratio of Participants with Disabilities in Inclusive Vocational Training

Unit: %

Year	Ratio
2011	1.93
2012	1.86
2013	2.21
2014	3.66
2015	3.66

Source: Ministry of Labor

Table 25.1 Prenatal Checkup Rate Specified in the General Health Act

Units: Person; %

Year	Pregnant Women Giving Live Birth	Average Checkup Rate	At least 1 Checkup Rate
2011	195,228	93.1	98.3
2012	230,606	94	98.6
2013	192,149	94.3	98.5
2014	208,264	94.3	98.6
2015	210,064	94,8	98.7

Source: Ministry of Health and Welfare

Table 25.2 Subsidies for Prenatal Genetic Diagnosis

Unit: Case; %

Year	Subsidy Case	Abnormal Case	Abnormal Case Follow-up Rate
2011	48,531	1,425	98.98
2012	55,808	1,531	99.08
2013	48,764	1,420	96.09
2014	51,422	1,565	98.45

Source: Ministry of Health and Welfare

Table 25.3 Subsidies for Examination of Genetic Diseases

Unit: Case

Year	Subsidy Case	Abnormal Case
2011	7,612	2,028
2012	7,930	2,056
2013	7,474	1,750
2014	6,630	1,989

Source: Ministry of Health and Welfare

Table 25.4 Subsidies for Newborn Screening

Units: Beneficiary; %

Year	Beneficiary	Screening Rate	Abnormal Case Confirmed
2011	197,789	99.7	3,879
2012	244,575	99.8	4,873
2013	195,032	99.8	3,820
2014	211,272	99.8	4,385
2015	213,170	99.8	2,698

Source: Ministry of Health and Welfare

Table 25.5 Case of Newborn Hearing Screening

Units: Person; %; Newborn

Year	Newborn Screened	Screening Rate	Confirmed Rate	Hearing Impairment Confirmed
2012	170,380	89.4	47.3	355
2013	190,003	97.3	81.6	684
2014	204,641	97.2	83.5	777

Source: Ministry of Health and Welfare

Table 25.6 Child Preventive Health Care Service

Units: Beneficiary; %

Year	Beneficiary	Average Use Rate every 7 times	Service Rate of Children below 1 Year of Age Accepting at least 1 Checkup Service
2012	Appr. 1.11 million	77.4	97.0
2013	Appr. 1.17 million	82.1	97.6
2014	Appr. 1.1 million	77.7	97.2
2015	Appr. 1.12 million	78.3	96.2

Source: Ministry of Health and Welfare

Table 25.7 Fertility Regulation Subsidies for Special Groups

Unit: Case

Year	Ligation	Intrauterine device (IUD)	Induced Abortion
2011	106	41	0
2012	132	37	0
2013	85	20	0
2014	96	25	0
2015	94	24	2

Source: Ministry of Health and Welfare

Table 25.8 Subvention Criteria for Medical Expenses and Assistive Devices

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
1	Electric chest percussor	15,000	11,300	7,500	Three	I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. They have respiratory insufficiency due to physical impairment and cannot cough to remove sputum. They must use the medical assistive devices listed on the left side for a prolonged period of time to breathe and improve the respiratory health.
2	Phlegm sucker	5,000	3,800	2,500	Three	II. Applicants for the subsidy shall submit the diagnosis certificate that the specialist physician issued. The certificate

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
3	Phlegm suction unit (phlegm spray)	5,000	3,800	2,500	Three	<p>shall specify the need of the device due to breathing disorder or respiratory insufficiency.</p> <p>III. Specifications or functions of medical assistive devices are as follows:</p> <p>(i) The electric chest percussor must conform to the following specifications and functions:</p> <ol style="list-style-type: none"> 1. The horsepower is lower than 1/20 HP. 2. The chest percussion frequency shall be over 20/s. 3. The registration number of the medical device must be available. <p>(ii) The phlegm sucker shall comply with the following specifications and functions:</p> <ol style="list-style-type: none"> 1. Pressure flow regulation: Infant: 60-80 mmHg Children: 80-100 mmHg Adult: 100-120 mmHg 2. The registration number of the medical device must be available. <p>(iii) Phlegm suction unit (phlegm spray) must meet the following specifications and functions:</p>

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<ol style="list-style-type: none"> 1. It delivers 2-5 μm aerosol into the lower respiratory tract to ensure the spraying effect. 2. The registration number of the medical device must be available. IV. Other regulations: <ol style="list-style-type: none"> (i) Only patients who stay at home and take care of themselves may apply for the subsidy. (ii) Applicants shall submit the copy of the warrantee to the supplier of the medical assistive device.
4	Biphasic positive airway pressure (Bi-PAP)	120,000	90,000	60,000	Five	<ol style="list-style-type: none"> I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. They have respiratory insufficiency due to lung damage or pulmonary resection. They cannot breathe and must use a respiratory medical device for a long time to improve their respiratory health. II. The following are the requirements of the application for the subsidy of medical assistive devices: <ol style="list-style-type: none"> (i) Applicants for the subsidy of medical assistive devices

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>shall submit a diagnosis certificate issued by their pulmonologist, thoracic surgeon or pediatrician. The certificate shall specify the need of the device due to breathing disorder or respiratory insufficiency.</p> <p>(ii) Applicants shall provide the assessment report of medical assistive device. The pulmonologist, thoracic surgeon, pediatrician or respiratory therapist shall assess the health condition of the applicant and specify the need of the subsidy.</p> <p>III. Specifications or functions of medical assistive devices are as follows: The supplier of the medical assistive device shall issue a warranty or rental contract. It shall specify that the device meets the following specifications and functions:</p> <p>(i) Pressure range:</p>

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>Inspiratory pressure: 4-30 cmH₂O Expiratory pressure: 2-10 cmH₂O</p> <p>(ii) Setting of the mode and inspiratory and expiratory parameters: The pressure value, number of breaths (respiratory rate), sensitivity adjustment, breathing alarm for reminder and checking (mask and tube leakage alarm, low and high pressure alarm) and built-in heated humidifier.</p> <p>(iii) Masks with a breathing apparatus.</p> <p>(iv) The registration number of the medical device must be available.</p> <p>IV. Other regulations:</p> <p>(i) The person receiving major illness and injury illness benefit of the national health insurance is not qualified for the subsidy.</p> <p>(ii) Only patients who stay at home and take care of themselves may apply for the subsidy.</p> <p>(iii) Applicants may file an application for leases devices, and are subject</p>

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>to the expiration of the subvention for this item. The subsidy must be granted based on the actual rent within the maximum amount.</p> <p>(iv) Other documents required:</p> <ol style="list-style-type: none"> 1. The applicant for purchase subsidy shall submit the original of the warranty issued by the assistive device supplier. (The original will be returned after examination and the copy will be kept.) 2. The applicant for lease subsidy shall submit a copy of the lease contract entered into with the assistive device supplier.
5	Continuous Positive Airway Pressure (C-PAP)	40,000	30,000	20,000	Five	<ol style="list-style-type: none"> I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. Patients below 19 suffering from a severe sleep-breathing disorder with an Apnea-Hypopnea Index (AHI) greater than 20 times per hour or $SpO_2 \leq 92\%$ at least 1 hour are required to use the breathing aid and qualified for the subsidy.

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>Patients over 19 with the Apnea-Hypopnea Index (AHI) greater than 40 times per hour or Respiratory Disturbance Index (RDI) \geq 40 times per hour or SpO₂ \leq 85% at least 1 hour are required to use the breathing aid and qualified for the subsidy.</p> <p>II. The following are the regulations of the application for the subsidy of medical assistive devices:</p> <p>(i) Patients applying for the subsidy shall submit the diagnosis certificate that the pulmonologist issued. The certificate shall specify the need of the device due to breathing disorder or respiratory insufficiency.</p> <p>(ii) Applicants shall provide the assessment report of medical assistive device. The pulmonologist or respiratory therapist shall assess the</p>

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>health condition of applicants and specify the need of the subsidy.</p> <p>III. Specifications or functions of medical assistive devices are as follows:</p> <p>The warranty or rental contract that the supplier of the medical assistive device issued shall specify that the device meets the following specifications and functions:</p> <ul style="list-style-type: none"> (i) Pressure range: 4-20 cmH₂O (ii) Masks with a breathing apparatus (iii) The registration number of the medical device must be available. <p>IV. Other regulations:</p> <ul style="list-style-type: none"> (i) The person receiving major illness and injury illness benefit of the national health insurance is not qualified for the subsidy. (ii) Only patients who stay at home and take care of themselves may apply for the subsidy. (iii) Applicants may make application for lease devices, and are subject to the expiration of the subvention for this item.

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>The subsidy must be granted based on the actual rent within the maximum amount.</p> <p>(iv) Other documents required:</p> <ol style="list-style-type: none"> 1. The applicant for purchase subsidy shall submit the original of the warranty to the assistive device supplier. (The original will be returned after examination and the copy will be kept.) 2. The applicant for lease subsidy shall submit a copy of the lease contract entered into with the assistive device supplier.
6	Oximetry (oximeter)	6,000	4,500	3,000	Three	<ol style="list-style-type: none"> I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. They suffer from breathing disorder due to losing functions of primary organs. They must use the medical assistive devices listed on the left for a prolonged period of time to monitor the breathing problem. II. Patients applying for the subsidy of medical assistive device shall submit the diagnosis

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>certificate that a specialist physician issued. The certificate shall specify the need of the device due to breathing disorder or respiratory insufficiency.</p> <p>III. The registration number of the medical device must be available.</p> <p>IV. Other regulations are as follows:</p> <p>(i) Only patients who stay at home and take care of themselves may apply for the subsidy.</p> <p>(ii) The applicant shall submit the copy of the warranty that the assistive device supplier issued.</p>
7	Oxygen making machine	25,000	18,800	12,500	Five	<p>I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. They suffer from breathing disorder due to losing functions of primary organs. They must use the medical assistive devices listed on the left for a prolonged period of time to improve the breathing problem.</p> <p>II. The following are the regulations of applying</p>

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>for the subsidy of medical assistive device:</p> <p>(i) Patients shall submit the diagnosis certificate that a specialist physician issued. The certificate shall specify the need of the device due to breathing disorder or respiratory insufficiency.</p> <p>(ii) Applicants shall provide the assessment report of medical assistive device. The specialist physician or respiratory therapist shall assess the health condition of applicants and specify the need of the subsidy.</p> <p>III. The registration number of the medical device must be available.</p> <p>IV. Other regulation:</p> <p>(i) Only patients who stay at home and take care of themselves may apply for the subsidy.</p> <p>(ii) The applicant shall submit the original of the warranty that the assistive device supplier issued.</p>
8	Uninterruptible power supply (UPS)	2,500	1,900	1,300	Three	I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. They use

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>the medical assistive device to keep their airway clear and therefore need the emergency power supply.</p> <p>II. A power supply of 30 minutes of suction during power failure is required. (The sputum suction machine sucks at least 30 times and operates at least once per minute.)</p> <p>III. Other regulations are as follows:</p> <p>(i) Only patients who stay at home and take care of themselves may apply for the subsidy.</p> <p>(ii) The applicant shall submit the original of the warranty that the assistive device supplier issued.</p>
9	Pressure garment-Type A-Head & Neck	2,500	1,900	1,300	Six months	<p>I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. They need the pressure therapy because of suffering from burn, skin damage, tumor or circulatory disorder.</p>
10	Pressure garment-Type B-shoulder, Chest, Abdomen and Back	4,000	3,000	2,000	Six months	

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
11	Pressure garment-Type C-Right Upper Extremity	2,700	2,100	1,400	Six months	<p>II. The following are the regulations of applying for the subsidy of medical assistive devices:</p> <p>(i) Applicants for the subsidy of medical assistive device shall submit the diagnosis certificate that a specialist physician issued. The certificate shall specify the need of the pressure therapy.</p> <p>(ii) Applicants shall provide the assessment report of medical assistive device. The specialist physician, physical therapist or occupational therapist shall assess the health condition of applicants and specify the need of the subsidy.</p> <p>III. It is required to use tailor-made elastic material for scar pressure treatment.</p> <p>IV. Other regulations are as follows:</p> <p>(i) The subsidy is considered to be for one item when an applicant applies for the subsidy of multiple items.</p> <p>(ii) It is not required to submit the diagnosis</p>
12	Pressure garment-Type D- Left Upper Extremity	2,700	2,100	1,400	Six months	
13	Pressure garment-Type E-Waist, Hip & Leg	3,000	2,300	1,500	Six months	
14	Pressure garment-Type F- Right Lower Extremity	2,700	2,100	1,400	Six months	
15	Pressure garment-Type G-Left Lower Extremity	2,700	2,100	1,400	Six months	

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>certificate for the application within two years after the first application for the pressure garment of the same part. The application can be made again based on the service life. If the applicants need to apply for the subsidy of the pressure garment again two years later, they shall submit the diagnosis certificate and the assessment report of medical assistive device within three months prior to the application.</p> <p>(iii) The applicant shall not make more than two applications per part. The maximum subsidy is based on the standard multiplier on the left.</p> <p>(iv) The applicant shall submit the copy of the warranty that the assistive device supplier issued.</p>
16	Silicone gel sheeting (SGS)	9,000	6,800	4,500	Six months	<p>I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. They need rehabilitation due to burn and skin damage.</p>

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						<p>II. Patients applying for the subsidy of medical assistive device shall submit the diagnosis certificate that a specialist physician issued. The certificate shall specify the need of the device and the part and surface area requiring the use of the SGS.</p> <p>III. Other regulations are as follows:</p> <p>(i) It is not required to submit the diagnosis certificate for the application within two years after the first application for the pressure garment for the same part. The application can be made again based on the service life. If the applicants need to apply for the subsidy of the pressure garment two years later, they shall submit the diagnosis certificate and the assessment report of medical assistive device within three months prior to the application.</p> <p>(ii) The amount per subsidy is TWD 15 and the</p>

Subvention Regulations	<p>maximum subsidy is listed on the left side.</p> <p>(iii) The registration number of the medical device must be available.</p>
Minimum Service Life (Year)	
Maximum for Households that are not Low- or Mid-low Income (TWD)	
Maximum for Mid-low Income Household (TWD)	
Maximum Low Income Household (TWD)	
Subvention item	
No.	

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
Medical Expenses	1 Cost of the cochlear Implant surgery	120,000	90,000	60,000	Once in a life time	The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. Their needs are confirmed based on the assessment specified in the Subsidy Regulations of Daily Living Assistive Devices for People with Disabilities. They must submit the assessment report of medical assistive device.
	2 Fee for the diagnosis certificate	200	200	100		<p>I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. Their needs of medical assistive device are approved.</p> <p>II. When requesting the subsidy for the specified medical assistive device in this table, the applicant must make application for the diagnosis certificate fee simultaneously.</p>
	3 Fee for the assessment report of medical assistive device	200	200	100		<p>I. The health condition of the beneficiaries must comply with Article 2, Paragraph 1 of the Regulations. Their needs of medical assistive device are approved.</p> <p>II. When requesting the subsidy for the specified</p>

No.	Subvention item	Maximum Low Income Household (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Minimum Service Life (Year)	Subvention Regulations
						medical assistive device in this table, the applicant must make application for the diagnosis certificate fee simultaneously.

Note:

1. The assessment unit or appraisal institution appointed by the municipal, and county and city governments shall carry out the assessment of the medical assistive device. The aforementioned assessment unit or appraisal institution shall dispatch specialists to the residence of applicants to carry out the identification or assessment if the applicants have problems with personal visit to such unit or institution due to special circumstances and hardship.
2. The subsidies of medical and daily living assistive devices are calculated together. The government subsidizes four items per person every two years depending on the actual need. The municipal, and county and city governments shall provide the subsidy as a special case if the medical assistive device has not reached the minimum service life or applicants have applied for more than four items within two years and need the assistive device despite that they are disqualified for the abovementioned subsidy.
3. The diagnosis certificate must be issued within three months prior to the application.
4. The warranties for the Nos.1-7 assistive devices in this table shall indicate the specifications of the product (including the specifications or functions that this Standard specified for these assistive devices), warranty period, start and end dates (including date, month and year) and name, unified business code, responsible person and phone number of the assistive device supplier, and the registration number that the central competent authority issues for medical devices.
5. The warranties for the Nos.8-15 assistive devices in this table shall indicate the specifications of the product (including the specifications or functions that this Standard specified for these assistive devices), warranty period (no less than 3 months), start and end dates (including date, month and year) and name, unified business code, responsible person and phone number of the assistive device supplier.
6. The lease contract shall indicate the specifications (including the specifications or functions that this Standard specified for this assistive device), mode, serial numbers, service, start and end dates of the lease contract (including date, month and year), and name, unified business code, responsible person and phone number of the assistive device supplier, and the registration number that the central competent authority issues for medical devices.

Subvention Regulations	Minimum Service Life (Year)	Maximum for Households that are not Low- or Mid-low Income (TWD)	Maximum for Mid-low Income Household (TWD)	Maximum Low Income Household (TWD)	Subvention item	No.
<p>7. The low and mid-low income households in this table are defined in the Public Assistance Act.</p> <p>8. The subsidy of medical expenses in this table is basically granted in cash.</p>						

Source: Ministry of Health and Welfare

Table 25.9 People with Disabilities Receiving Adult Health Examination

Units: Person; %

Year	Person	Ratio to all People with Disabilities Qualified for the Examination
2011	153,569	27.9
2012	155,245	26.7
2013	155,881	26.7
2014	162,126	23.3

Source: Ministry of Health and Welfare

Description: The statistics from 2011 to 2013 was based on the list of people with disabilities in 2011. The statistics in 2014 was based on the actual number of people with disabilities referred by the Social and Family Affairs Administration, Ministry of Health and Welfare, every year.

Table 25.10 Number of People with Disabilities Receiving Adult Health Examination 2011-2014 – by Severity and Gender

Units: Person; %

Year	Severity	Person	Rate	Male	Rate	Female	Rate
2011	Profound	12,973	12.13	6,157	11.43	6,816	12.84
	Severe	29,039	19.79	14,803	18.76	14,236	20.98
	Moderate	53,069	19.42	27,845	18.26	25,224	20.89
	Mild	72,472	22.73	37,849	21.02	34,623	24.95
	Other	4	15.38	3	17.65	1	11.11
2012	Profound	10,461	9.67	5,001	9.16	5,460	10.19
	Severe	25,266	17.00	12,902	16.12	12,364	18.04
	Moderate	50,063	18.04	26,431	17.05	23,632	19.29
	Mild	69,450	21.50	36,361	19.90	33,089	23.58
	Other	5	19.23	2	11.76	3	33.33
2013	Profound	9,943	9.10	4,681	8.47	5,262	9.73
	Severe	23,865	15.88	12,178	15.02	11,687	16.89
	Moderate	48,813	17.34	25,782	16.38	23,031	18.57
	Mild	68,178	20.85	35,695	19.27	32,483	22.91
	Other	4	15.38	3	17.65	1	11.11
2014	Profound	13,167	9.02	6,364	8.41	6,803	9.67
	Severe	26,059	14.29	13,669	13.64	12,390	15.10
	Moderate	51,296	15.96	27,187	14.84	24,109	17.43
	Mild	71,602	19.70	37,364	17.89	34,238	22.13
	Other	2	6.25	2	8.0	0	0.00

Source: Ministry of Health and Welfare

Description:

1. Rate = (People with disabilities receiving adult preventive health examination/number of people with disabilities over 40) * 100%
2. The statistics from 2011 to 2013 was based on the list of people with disabilities in 2011. The statistics in 2014 was based on the actual number of people with disabilities referred by the Social and Family Affairs Administration, Ministry of Health and Welfare, every year.

**Table 25.11 Special Medical Service Program for the Total Amount of
Dental Visits Covered by the National Health Insurance**

Units: Person; Dental Visit; %

Year	Gender	Person	Dental Visit	Person Rate	Visit Rate
2011	Subtotal	34,655	95,930	100	100
	Male	20,212	55,736	58	58
	Female	14,443	40,194	42	42
2012	Subtotal	39,063	111,607	100	100
	Male	22,757	65,001	58	58
	Female	16,306	46,606	42	42
2013	Subtotal	43,100	134,848	100	100
	Male	25,278	79,506	59	59
	Female	17,822	55,342	41	41
2014	Subtotal	45,601	133,758	100	100
	Male	26,809	78,870	59	59
	Female	18,792	54,888	41	41

Source: Ministry of Health and Welfare

Table 25.12 Subsidies for Health Insurance Premium — by Severity

Units: Person; TWD

Year	Severity	Person	Amount	Total Beneficiary	Total Subsidy	Average Subsidy
2011	Severe	250,164	2,037,782,800	908,126	3,801,240,000	4,186
	Moderate	293,952	1,130,738,200			
	Mild	364,010	632,721,700			
2012	Severe	254,292	2,111,499,300	907,638	3,905,590,000	4,303
	Moderate	289,660	1,140,387,500			
	Mild	363,686	653,699,400			
2013	Severe	264,548	2,123,109,100	919,209	3,880,330,000	4,221
	Moderate	288,803	1,091,619,200			
	Mild	365,858	665,602,300			
2014	Severe	266,662	2,166,791,800	929,274	3,979,960,000	4,283
	Moderate	290,385	1,108,188,800			
	Mild	372,227	704,978,400			

Source: Ministry of Health and Welfare

Description: According to the Health Insurance Premium Subvention List of Local Governments, people with profound and severe disabilities receive the full subsidy, while those with moderate and mild disabilities receive half and quarter of subsidies, respectively.

Table 25.13 Subsidies for Health Insurance Premium – by Identity

Unit: Person; TWD

Year	Subsidy	Person	Amount	Total Beneficiary	Total Subsidy	Average Subsidy
2011	Low-Income household	84,359	116,080,000	182,581	386,870,000	2,119
	Veteran	67,504	50,560,000			
	Person in mid-low Income households over 70 years	19,227	148,140,000			
	Others	11,491	72,090,000			
2012	Low-Income household	86,574	119,130,000	187,842	412,120,000	2,194
	Veteran	64,068	47,990,000			
	Person in mid-low Income households over 70 years	18,385	142,410,000			
	Others	18,815	102,590,000			
2013	Low-Income household	85,085	117,080,000	190,331	429,700,000	2,258
	Veteran	62,406	46,740,000			
	Person in mid-low Income households over 70 years	18,509	140,260,000			
	Others	24,331	125,620,000			

2014	Low-Income household	87,133	150,390,000	193,341	465,380,000	2,407
	Veteran	62,066	46,490,000			
	Person in mid-low Income households over 70 years	18,912	146,090,000			
	Others	25,320	122,410,000			

Source: Ministry of Health and Welfare

Description: Other subsidies include the mid-low income households, unemployed workers and their dependents, underage children and youth in mid-low income households and offshore residents over 65. The rate of mid-low income households is higher in the statistics. There were 3,383 beneficiaries with a subsidy to the amount of TWD 11.96 million in 2011, 9,519 beneficiaries with a subsidy to the amount of TWD 34.71 million in 2012, 12,431 beneficiaries with a subsidy to the amount of TWD 44.61 million in 2013, and 13,919 beneficiaries with a subsidy to the amount of TWD 50.2 million in 2014.

Table 25.14 People with Disabilities Enrolling Microinsurance

Unit: Person

Item		Grand Total of Insured Per Year									
		2011		2012		2013		2014			
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Age	Below 18	162	248	219	312	286	410	516	348	2,472	1,882
	19-64	7,991	3,797	8,360	4,640	8,669	5,157	5,899	9,133	11,425	14,015
	Over 65	42	50	68	85	80	120	177	109	597	332
	Total	8,195	4,095	8,647	5,037	9,035	5,687	6,592	9,590	14,494	16,229
Disability Category (Article 5 of the People with Disabilities Rights Protection Act	Mental Functions & Structures of the Nervous System	310	418	422	593	564	814	1,089	741	1,513	1,093
	Sensory Functions & Pain; Eye, Ear and Related Structures	204	274	238	331	327	479	567	390	745	519
	Functions & Structures of/involved in Voice and Speech	72	86	81	102	111	135	149	124	221	203

Item		Grand Total of Insured Per Year								2015	
		2011		2012		2013		2014			
		Male	Female	Male	Female	Male	Female	Male	Female		
	Functions & Structures of/related to the Cardiovascular, Hematological, Immunological and Respiratory Systems	27	7	27	9	27	11	18	29	55	64
	Functions & Structures of/related to the Digestive, Metabolic and Endocrine Systems	127	54	129	57	132	62	71	138	98	170
	Functions & Structures of/related to the Genitourinary and Reproductive Systems	92	30	99	43	108	52	70	125	97	131

Item	Grand Total of Insured Per Year									
	2011		2012		2013		2014		2015	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Neuromusculoskeletal system and Movement related Functions & Structures	304	345	398	487	466	635	793	544	1,109	745
Functions & Related Structures of the Skin	3	3	3	2	7	22	22	7	41	33
Multiple disabilities ¹	245	195	320	296	355	379	439	395	680	581
Unable to be Identified ²	6,811	2,683	6,930	3,117	6,938	3,098	3,374	7,097	9,935	12,690
Total	8,195	4,095	8,647	5,037	9,035	5,687	6,592	9,590	14,494	16,229

Item		Grand Total of Insured Per Year									
		2011		2012		2013		2014		2015	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Residential Area (based on the “Comprehensive Development Plan” of the National Development Council)	North (Keelung, Taipei, New Taipei City, Taoyuan and Hsinchu)	2,111	1,389	2,308	1,918	2,455	2,138	2,600	2,742	6,909	6,487
	Central (Miaoli, Taichung, Changhua, Nantou, Yunlin and Chiayi)	2,897	1,463	3,046	1,705	3,201	1,946	2,196	3,361	3,792	4,581

Item	Grand Total of Insured Per Year									
	2011		2012		2013		2014		2015	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
South (Tainan, Kaohsiung, Pingtung and Penghu)	1,941	776	2,003	884	2,036	945	1,100	2,127	2,689	3,499
East (Ilan, Hualien and Taitung)	1,198	463	1,242	525	1,295	653	683	1,307	1,087	1,605
Offshore (Kinmen and Lianjiang)	48	4	48	5	48	5	13	53	17	57
Total	8,195	4,095	8,647	5,037	9,035	5,687	6,592	9,590	14,494	16,229

Source: Taiwan Insurance Institute

Description:

1. Since some of the insured people do not belong to a single category, they are marked as “multiple disabilities”.
2. People with financial disadvantage “H” are those with disabilities defined in the People with Disabilities Rights Protection Act, or the members of the registered civil associations or institutions for people with disabilities, or the people served by the these associations or institutions.

Table 26.1 Borrow of the Learning Aids at Senior High Schools and Below

Units: Piece; Person

Year	Number of Borrowed Learning Aids	Person
2011	9,801	6,100
2012	2,926	2,107
2013	8,149	5,295
2014	3,575	2,534

Source: Ministry of Education

Table 26.2 Assistive Technology for Students with Disabilities at Colleges and Universities

Unit: Piece; Person

Year	Assistive Device Assessment (including follow-up assessment)	Number of Borrowed Devices	Braille Computer Consultation, Maintenance and Training
2014	927	3,033	Above 13,000
6.30.2015	317	2,247	5,836

Source: Ministry of Education

Table 26.3 Outcome of Life Rehabilitation Service 2013-2015

Unit: Person; TWD 1,000

Year	Person	Service Count	Fund
2013	3,406	31,546	54,306
2014	2,004	56,804	58,069
2015	1,846	59,916	79,557

Source: Ministry of Health and Welfare

Table 26.4 Outcome of Community-based Service 2012-2015

Units: Location; Person

Year	Service Location	Person
2012	208	1,694
2013	243	2,192
2014	301	2,655
2015	420	6,386

Source: Ministry of Health and Welfare

Table 26.5 Award Plan for Mental Health Institutions

Unit: Household

Year	Household Awarded
2012	9
2013	9
2014	12
2015	9

Source: Ministry of Health and Welfare

Table 26.6 Follow-up Care Service Statistics

Unit: Person

Year	Person
2012	130,802
2013	134,317
2014	141,801
2015	142,416

Source: Ministry of Health and Welfare

Table 27.1 Labor Force Status of Persons with Disabilities 2011 and 2014

Units: Person; %; TWD

	August 2011	June 2014
Person with Disabilities over the age of 15	1,036,422	1,077,249
Labor Force	198,277	212,171
Labor Force Participation Rate	19.1	19.7
Unemployment Rate	12.4	11
Average Salary	23,512	24,340
Employee/Person with Disabilities over the age of 15	16.77	17.53

Source: Ministry of Labor

Table 27.2 Employees with Disabilities by Disability Category

Unit: Person

Category	August 2011	June 2014
Visual Impairment	8,576	9,040
Hearing Impairment	17,717	16,836
Motion and Balance Impairment	338	236
Vocal and Speech Impairment	3,263	3,380
Moving Functional Limitation	82,216	85,379
Intellectual and Developmental Disability	15,790	20,701
Internal Organ Loss Function and Related Disabilities	18,865	22,145
Facial Disfigurements	1,451	1,482
Dementia	290	335
Autism	458	854
Chronic Mental Health Conditions	13,898	17,994
Multiple Disabilities	8,883	7,556
Intractable Epilepsy	1,188	1,680
Rare Diseases	212	304
Others	641	737
Unclassifiable as the result of classification system transformation	New system yet to be implemented	182

Source: Ministry of Labor

Table 27.3 Paid Employees with Disabilities and Average Monthly Regular Earnings

June 2014

Units: Person; %; TWD

Item	Paid Employee		Average Monthly Regular Earnings
	Person	%	
Total	136,274	100.0	24,340
Typical Employee	91,992	67.5	28,332
Atypical Employee	44,282	32.5	16,046
Part-Time	20,550	15.1	13,755
Temporary	18,045	13.2	17,839
Dispatched Work	4,312	3.2	19,284
Other	1,658	1.2	16,707

Description: Since it is allowed to select multiple types of atypical jobs, the total number is greater than the number of atypical employees.

Source: Ministry of Labor

Table 27.4 Historical Outcomes of the General Employment Service

Unit: Person

Year	Job Seeker	Employee Referred
2011	51,407	25,188
2012	48,896	21,816
2013	43,917	19,962
2014	37,751	19,468
2015	38,899	20,751

Source: Ministry of Labor

Table 27.5 Historical Outcomes of the Supported Employment Service

Unit: Person

Year	Successful Referral	Stable Employment
2011	3,818	1,948
2012	3,904	2,244
2013	5,016	2,010
2014	4,725	2,068
2015	4,183	1,918

Source: Ministry of Labor

Table 27.6 Historical Outcomes of Inclusive Training for People with Disabilities

Unit: Person

Year	Participant of the Training	Participant Finishing the Training	Employee Finishing the Pre-Employment Training Course
2011	2,916	2,696	1,022
2012	2,973	2,734	1,016
2013	4,176	3,729	1,331
2014	6,594	6,100	2,241
2015	6,101	5,320	1,584

Source: Ministry of Labor

Table 27.7 Historical Outcomes of the Training Course for People with Disabilities

Unit: Person

Year	Participant of the Training	Participant Finishing the Training	Employee Finishing the Cultivation Training Course
2011	1,930	1,811	611
2012	1,944	1,791	732
2013	1,934	1,753	791
2014	1,783	1,577	808
2015	1,710	1,503	751

Source: Ministry of Labor

Table 27.8 Historical Outcomes of the Job Redesign

Unit: Case

Year	Subtotal	Workplace Improvement	Work Equipment or Tool Improvement	Vocational Assistive Device Provided	Working Condition Improvement	Working Method Adjustment	Others
2011	847	85	134	388	331	16	0
2012	1,062	78	133	400	432	19	0
2013	1,390	105	172	443	573	30	0
2014	2,117	66	157	648	1054	49	90

Source: Ministry of Labor

Table 27.9 Students of General and Vocational High Schools and Special Education Schools Receiving Vocational Guidance and Referral 2011-2014

Unit: Person

Year	Person
2011	13,841
2012	9,309
2013	8,748
2014	12,759

Source: Ministry of Education

Table 27.10 Number of Respondent Organizations and Persons in Quota Employment

Unit: Person

Year	National Respondent Organization	Statutory Employee	Actual Employee
2011	15,416	50,796	68,409
2012	15,776	51,770	69,823
2013	16,116	52,661	72,132
2014	16,401	54,039	74,411
2015	16,631	54,757	79,809

Source: Ministry of Labor

Table 27.11 Test Takers Having Registered for and Having Taken the Special Civil Service Examination for the Disabled, Admitted Employees, and Admission Rate 2011-2015

Units: Person; %

Year	Registered Test Taker			Actual Test Taker			Admitted			Admission Rate		
	Male	Female	Subtotal	Male	Female	Subtotal	Male	Female	Subtotal	Male	Female	Subtotal
2011	3,865	2,831	6,696	3,062	2,235	5,297	195	116	311	6.37	5.19	5.87
2012	4,193	3,198	7,391	3,171	2,408	5,579	205	131	336	6.46	5.44	6.02
2013	3,708	2,717	6,425	2,682	1,968	4,650	163	127	290	6.08	6.45	6.24
2014	3,018	2,204	5,222	2,165	1,590	3,755	140	97	237	6.47	6.10	6.31
2015	3,350	2,304	5,690	2,307	1,618	3,925	123	70	193	5.33	4.33	4.92

Source: Ministry of Examination

Table 27.12 People with Disabilities Finishing the Practical Training of Special Civil Service Examinations for the Disabled

Units: Participant; %

Year	Participant Signed up	Participant Finishing the Practical Training	Completing Rate (%)
2011	303	297	98.02%
2012	321	319	99.38%
2013	280	280	100%
2014	219	216	98.63%
Total	1,123	1,112	99.02%

Source: Civil Service Protection & Training Commission

Table 27.13 General Statistics of Disabled Civil Servants 2011-2015

Units: Person; %

	2011	2012	2013	2014	2015
All Civil Servants	343,323	343,861	346,059	347,816	347,552
Male	208,888	206,784	205,852	204,827	202,669
Ratio of Male Civil Servants	60.84	60.14	59.48	58.89	58.31
Female	134,435	137,077	140,207	142,989	144,883
Ratio of Female Civil Servants	39.16	39.86	40.52	41.11	41.69
Senior Rank (Detail) Civil Servants	10,038	8,439	8,503	8,549	8,800
Male	7,294	6,087	6,052	5,963	6,048
Ratio of Male Senior Rank (Detail) Civil Servants to All Male Civil Servants	3.49	2.94	2.94	2.91	2.98
Female	2,744	2,352	2,451	2,586	2,752
Ratio of Female Senior Rank (Detail) Civil Servants to All Female Civil Servants	2.04	1.72	1.75	1.81	1.90
Disabled Civil Servants	4,954	6,432	6,833	7,323	7,389
Ratio of Disabled Civil Servants to All Civil Servants	1.44	1.87	1.97	2.11	2.13
Male	3,100	4,277	4,468	4,763	4,818
Ratio of Male Disabled Civil Servants to All Male Civil Servants	1.48	2.07	2.17	2.33	2.38
Female	1,854	2,155	2,365	2,560	2,571
Ratio of Female Disabled Civil Servants to All Female Civil Servants	1.38	1.57	1.69	1.79	1.77

	2011	2012	2013	2014	2015
Senior Rank (Detail) Disabled Civil Servants	107	120	145	158	165
Ratio of Senior Rank (Detail) Disabled Civil Servants to All Senior Rank (Detail) Civil Servants	1.07	1.42	1.71	1.85	1.88
Male	84	107	123	135	142
Ratio of Male Senior Rank (Detail) Disabled Civil Servants to All Male Senior Rank (Detail) Civil Servants	1.15	1.76	2.03	2.26	2.35
Female	23	13	22	23	23
Ratio of Female Senior Rank (Detail) Disabled Civil Servants to All Female Senior Rank (Detail) Civil Servants	0.84	0.55	0.9	0.89	0.84
By Examination Type					
Number of People Passing the Special Civil Service Examination for the Disabled	1,556	1,769	2,212	2,452	2,576
Ratio of People Passing the Special Civil Service Examination for the Disabled	31.41	27.5	32.37	33.48	34.86
Number of People Passing Other Examinations or Appointed by Other Decree	3,398	4,663	4,621	4,871	4,813

	2011	2012	2013	2014	2015
Ratio of People Passing Other Examinations or Appointed by Other Decree	68.59	72.5	67.63	66.52	65.14

Source: All Civil Servants Database

Table 27.14 Historical Statistics of Sheltered Workshops, Job Vacancies and Current Employees

Unit: Person

Year	Sheltered Workshop	Job Vacancy	Current Employee
2011	112	1,665	1,482
2012	118	1,765	1,639
2013	127	1,883	1,770
2014	137	1,952	1,781
2015	135	1,907	1,812

Source: Ministry of Labor

Table 27.15 Institution or Sheltered Workshop Participating in the Preferential Procurement Program 2013-2015

Unit: Institution/Sheltered Workshop

Year	Institution or Sheltered Workshop Participating in the Preferential Procurement
2013	355
2014	385
2015	401

Source: Ministry of Health and Welfare

Table 27.16 Procurement Amount of the Welfare Organization and Sheltered Workshop for People with Disabilities 2012-2014

Unit: TWD

Year	Amount
2012	664,493,812
2013	649,708,946
2014	696,358,970
2015	720,978,658

Source: Ministry of Health and Welfare

Table 28.1 Health Insurance Premium Subsidies for People with Disabilities

Units: Person; TWD Thousand

Year	Subsidy	
	Average Monthly Beneficiary	Amount
2011	694,790	3,263,619
2012	907,962	3,905,585
2013	919,209	3,880,329
2014	927,018	3,981,914
2015	934,594	3,998,785

Source: Ministry of Health and Welfare

Table 28.2 Living Allowance for People with Disabilities

Units: Person; TWD Thousand

Year	Allowance	
	Average Monthly Beneficiary	Amount
2011	346,226	16,894,129
2012	348,484	20,153,890
2013	348,316	20,428,207
2014	350,526	20,527,742
2015	350,813	20,562,152

Source: Ministry of Health and Welfare

Table 28.3 Assistive Device Subsidies for People with Disabilities

Unit: Person; TWD Thousand

Year	Subsidy	
	Beneficiary	Amount
2011	76,288	721,466
2012	77,422	728,825
2013	70,564	678,229
2014	75,057	729,240
2015	74,393	761,390

Source: Ministry of Health and Welfare

Table 28.4 Subsidies for Day and Residential Care of People with Disabilities

Units: Person; TWD Thousand

Year	Subsidy	
	Average Monthly Beneficiary	Amount
2011	32,564	5,377,807
2012	33,779	6,135,805
2013	37,298	6,482,358
2014	39,199	7,065,412
2015	38,354	7,646,639

Source: Ministry of Health and Welfare

Table 28.5 Subsidies for Vital Equipment and Power Expenses for Necessary Assistive Devices

Unit: Person; TWD Thousand

Year	Subsidy	
	Beneficiary	Amount
2013	4,004	3,526
2014	9,976	29,930
2015	13,913	34,207

Source: Ministry of Health and Welfare

Table 28.6 Subvention for the Rent and Loan Interest for People with Disabilities

Unit: Household

	2012	2013	2014		2015	
	Rent	Rent	Rent	Purchase	Rent	Purchase
Household Approved	10,515	10,029	22,406	184	11,517	190
Amount Subsidized	The municipal, city and county governments determine a subsidy to the amount of TWD 3,000 to 5,400 per household by head count or house size TWD.	The municipal, city and county governments determine a subsidy to the amount of TWD 3,000 to 5,000 per household by head count or house size TWD.	The municipal, city and county governments determine a subsidy to the amount of TWD 3,000 to 5,000 per household by head count or house size TWD.	Most of the city and county governments set an upper limit of loan up to TWD 2.2 million for the mortgage interest subvention. They refer to the calculation base of the Public Housing Fund TWD and provide subvention for the difference between the interest rate of the bank or post office	The municipal, city and county governments determine a subsidy to the amount of TWD 1,400 to 5,400 per household by head count or house size TWD.	Most of the city and county governments set an upper limit of loan up to TWD 2.2 million for the mortgage interest subvention. They refer to the calculation base of the Public Housing Fund and provide subvention for the difference between the interest rate of the bank or post office

				that offers the loan for the people with disabilities and the preferential interest rate that the Public Housing Fund offers.		that offers the loan for the people with disabilities and the preferential interest rate that the Public Housing Fund offers TWD.
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Note:

1. Analysis of the subsidies for the rent and mortgage interest for people with disabilities in 2015: http://www.cpami.gov.tw/chinese/index.php?option=com_content&view=article&id=19707&catid=183&Itemid=76
2. Analysis of the subsidies for the rent and mortgage interest for people with disabilities in 2014: http://www.cpami.gov.tw/chinese/index.php?option=com_content&view=article&id=19283&Itemid=76
3. Analysis of the subsidy on the rent and mortgage interest for people with disabilities in 2013: http://www.cpami.gov.tw/chinese/index.php?option=com_content&view=article&id=18025&Itemid=76.
4. Analysis of the subsidy on the rent and mortgage interest for people with disabilities in 2012: http://www.cpami.gov.tw/chinese/index.php?option=com_content&view=article&id=16346&Itemid=76.

**Table 28.7 Beneficiaries of Special Deduction for the People with Disabilities
of Individual Income Tax and Increase of Disposable Income (I)**

Unit: Household/TWD 1,000

Tax Bracket (TWD 10,000)	2011		2012	
	Beneficiaries	Increase of Disposable Income	Beneficiaries	Increase of Disposable Income
0	164,473	0	158,634	0
0-50	184,469	1,030,026	199,580	1,114,027
50-113	76,071	574,254	86,610	648,817
113-226	41,910	483,086	47,482	528,002
226-423	15,664	279,341	16,423	289,529
423-500	2,024	47,609	2,024	47,091
500-1000	3,421	99,688	3,468	101,088
Above 1000	1,141	49,312	1,161	50,957
Total	489,173	2,563,317	515,382	2,779,511

Source: Ministry of Finance

Description:

1. Taxable year: 2011 and 2012
2. Special deduction for the people with disabilities: TWD 104,000 per person per year

**Table 28.8 Beneficiaries of Special Deduction for the People with Disabilities
of Individual Income Tax and Increase of Disposable Income (II)**

Units: Household/TWD 1,000

Tax Bracket (TWD 10,000)	Beneficiaries	Increase of Disposable Income
0	179,925	0
0-52	192,956	1,119,004
52-117	80,816	626,775
117-235	42,321	489,761
235-440	14,320	264,905
440-500	1,365	32,773
500-1000	3,185	95,213
Above 1000	1,075	48,012
Total	515,963	2,676,443

Source: Ministry of Finance

Description:

1. Taxable year: 2013
2. Special deduction for the people with disabilities: TWD 108,000 per person per year

**Table 28.9 Rehabilitation Buses Exempted from the Commodity Tax for the
People with Disabilities and the Amount of Tax Exemption**

Units: Bus; TWD 1,000

Year	Bus	Tax Exemption
2011	245	16,691
2012	116	8,519
2013	237	20,442
2014	176	18,850

Source: Ministry of Finance

Description: Tax exemption for wheelchair accessible vehicles conforming to the Vehicle Safety Test Standard began in 2015 and relevant statistics is unreachable.

Table 28.10 Special Deduction of Inheritance Tax for People with Disabilities

Units: TWD 1,000

Year	Tax Deduction
2011	2,913,110
2012	3,554,770
2013	3,414,410
2014	4,437,240

Source: Ministry of Finance

Table 28.11 Number of Vehicles Qualifying for Exemption in the Vehicle License Tax Act for People with Disabilities and Amount of Tax Exemptions

Unit: Number of Vehicles; TWD 1,000

Year	Number of Vehicles	Tax Exemption
2011	594,040	6,194,381
2012	607,619	6,376,423
2013	625,867	6,608,798
2014	634,109	6,674,258

Source: Ministry of Finance

Table 28.12 Social Insurance Eligibility and Qualification

Subject	Eligibility and Qualification
Rights of laborers	<p>Disability pension: The insured who suffer from ordinary or occupational injury/sickness and meet the requirements of the disability benefit standard regulation or are people with disabilities defined in the People with Disabilities Rights Protection Act may claim for the disability pension with dependent allowance if they are assessed as incapable of work for the rest of their life. The people with disabilities who do not meet the requirements for loss of work capability for the rest of the life have been qualified for the disability pension since August 2013. Depending on the loss of the work capability, they may apply for disability pension if they lose more than 70% of the work capability and cannot return to the work anymore as individually assessed by professionals.¹</p> <p>Old-age pension: The insured who are at least 60 years of age with a total insurance coverage over 15 years may claim for old-age pension benefits. They may claim for a lump sum payment if their total insurance coverage has not reached 15 years. The insured (including those with disabilities) may claim for reduced pension benefits 5 years in advance if their insurance coverage has reached 15 years but have not reached the claiming age to ensure their financial security.</p> <p>Retirement pension: Employers shall on a monthly basis contribute labor pension, the amount of that shall not be less than 6% of the worker's monthly wage to individual account of labor pension at the Bureau of Labor Insurance. The pension shall</p>

¹ Articles 53, 54 and 54-1 of the Labor Insurance Act.

Subject	Eligibility and Qualification
	not be affected by job changing. Workers who are sixty years or older may claim for payment to the Bureau of Labor Insurance. Considering the workers with disabilities in physical and mental conditions, Labor Pension Act amended to protect their rights in 2014. Workers who receive disability pension or mental/physical disability pension may claim for the retirement pension in advance.
Rights of Military Personnel	The Act of Insurance for Military Personnel provides that the insured may claim for 6 to 40 basic points if they become disabled in action, while on duty, or due to sickness or accident.
Rights of public servants	<p>The Civil Service Retirement Act ensures a stable basic life for public servants who suffer from disabilities caused by injury or disease directly resulting from performing official duties and are unable to continue in service but has seniority less than the retirement age. These public servants may claim for a lump sum payment of 5 years if their seniority is less than 5 years. They may claim for a monthly retirement payment of 20 years if their seniority is less than 20 years. They may receive an additional allotment of 5 to 15 basic points for a lump-sum retirement payment based on their disability if their injury or disease results from any danger encountered during execution of official duties.²</p> <p>Public servants with disabilities who do not meet the requirements for compulsory retirement specified in Article 6 of the Civil Service Retirement Act may apply for the severance pay according to Article 7 of the Civil Service Retirement Act. They may receive the severance pay according to the calculation basis of the lump sum payment.</p>

² Articles 6 and 10 of the Civil Service Retirement Act establish flexible criteria for monthly retirement payment. These Articles specify particular regulations for retirement criteria (compulsory involuntary retirement). In other words, there is no age limit for the monthly retirement payment.

Subject	Eligibility and Qualification
	<p>(However, this does not quite different from the caring purpose of the elderly in the retirement system.)</p> <p>It is allowed to apply for solatium when civil servants are injured, maimed or dead during execution of duties according to the Regulations Governing the Awards of Solatium to a Civil Servant Injured, Deformed or Died Due to Performing Duties. Prompt payment of solatium ensures that these civil servants and their family may maintain an appropriate living standard. They may also receive social protection for occupational safety and healthy working condition (Table 28.13 and Table28.14).</p>
Rights of farmers	<p>Disability benefit:</p> <p>If the disability of the insured meets the requirements of the disability payment standard, they may apply for one-time disability payment based on their monthly insured amount, level of the disability and payment standard if diagnosed as permanently disabled by the medical institution the insurance company establishes or designates. Farmers may maintain their well-being despite the reduction or loss of farming capability due to disability and their rights are secured (Table 28.15).³</p> <p>Welfare allowance for elderly famers:</p> <p>Elderly farmers may apply for the welfare allowance if they are 65 years of age or older, have stayed in the Republic of China for more than 183 days each year over the past 3 years, and have a total insurance coverage of more than 6 months.⁴ The government adjusts the welfare allowance</p>

³ Article 36 of the Farmer Health Insurance Act.

⁴ The insured farmers whose seniority is over 15 years may claim for a full allowance of TWD 7,256. Insured farmers may receive the half allowance of TWD 3,628 if they have been participating in the Farmers Health Insurance program and had paid premiums for a cumulative total of more than six months but less than 15 years at the time of application for the welfare benefit for elderly farmers. The government does not issue any welfare allowance to the insured farmers whose total combined individual income exceeds TWD 500 thousand above and beyond income from farming for the

Subject	Eligibility and Qualification
	once every four years based on the price index to safeguard the financial security of the farmers.
⁵ Nationals who have not covered by the occupational insurances	Article 33 of the National Pension Act specifies that the insured who have disability identification or certification of severe disability or above and are harmed or suffer from disease while participating in the national pension insurance may apply for mental/physical disability basic guaranteed pension payment if they are diagnosed as unable to work by a medical instruction for disability identification. If the insured have the disability identification or certification o before participating in the national pension insurance, have stayed in the Republic of China for more than 183 days each year over the past 3 years, are diagnosed as unable to work by a medical instruction for disability identification, and none of the exclusion provisions applies, they may apply for the mental/physical disability basic guaranteed pension payment while participating in the insurance program according to Article 35 of the National Pension Act ⁶ (Table

preceding tax year. Insured farmers may not receive any welfare allowance if their total combined value of the land and houses they own exceeds TWD 5 million.

⁵ Article 7 of the National Pension Act provides that citizens aged between 25 to 65 years of age with their household registered in ROC shall join the national pension insurance program if they have not participated in social insurance or received any old age benefit of social insurance. People with disabilities qualified for the insurance shall become the insured people of the national pension insurance. A total of 242,340 people with disabilities participated in the insurance by 2014.

⁶ The government granted TWD 4,700 per person per month in 2014 for the basic guaranteed amount of the mental/physical disability pension payment and the mental/physical disability basic guaranteed pension payment. This amount was 43.24% of TWD 10,869, the minimum cost of living in 2014 in Taiwan. The government establishes the social benefit and social assistance system to provide the basic economic security for people with disabilities, in the hope to prevent the impact on the basic economic life due to inflation or price fluctuation. Article 54-1 of the National Pension Act provides that the government shall announce the adjustment of the basic guaranteed amount of the mental/physical disability pension payment and the mental/physical disability basic guaranteed pension payment every four years according to the growth rate of CPI. However, the government shall not make any adjustment when the growth rate of the consumer price index is zero or negative. The national pension system is a part of the social insurance system and it aims to safeguard the basic economic security of the citizen. The beneficiaries may only request for either the mental/physical disability basic guaranteed pension payment or the mentally/physically disability living subsidy. Beneficiaries who collect the mental/physical disability pension may also claim for the mental/physical disability living subsidy but cannot receive the basic guaranteed amount of the mental/physical disability pension payment.

Subject	Eligibility and Qualification
	28.16, Table 28.17, Table 28.18, Table 28.19 and Table 28.20).

Table 28.13 Statistics of Compulsory Involuntary Retirement Cases 2011-2015

Unit: Case

Year	Compulsory Involuntary Retirement	Compulsory Involuntary Retirement due to the Difficulty in Performing Duties
2011	73	6
2012	76	7
2013	74	5
2014	85	6
2015	70	6
Total	378	30

Source: Statistics from the information system of the Ministry of Civil Service

Table 28.14 Disability Solatium Claims

Units: Case; TWD

		Total	2012	2013	2014	2015
Central	Case	5	2	1	1	1
	Amount	2,781,860	900,000	600,000	1,160,000	121,860
	Average amount per case	556,372	450,000	600,000	1,160,000	121,860
Local	Case	11	5	2	2	2
	Amount	8,120,000	5,460,000	1,160,000	1,500,000	0
	Average amount per case	738,181.82	1,092,000	580,000	750,000	0
National	Case	16	7	3	3	3
	Amount	10,901,860	6,360,000	1,760,000	2,660,000	121,860
	Average amount per case	681,366.25	908,571.43	586,666.67	886,666.67	40,620

Source: Ministry of Civil Service (Statistical data are collected from human resource organizations of the central and local competent authorities.)

Table 28.15 Standards of the Farmer's Health Insurance Disability Benefits

Units: Case; TWD

Year	Case	Total Amount	Average Approved Amount
2011	20,867	3,662,965,860	Above 175,000
2012	20,166	3,894,815,600	Above 193,000
2013	17,654	3,432,470,000	Above 194,000
2014	16,771	3,291,397,200	Above 196,000

Source: Ministry of the Interior

Table 28.16 The Insured of the National Pension Insurance

Unit: Person

Year	Total Insured	Person with Disability			
		Subtotal	Severe and above	Moderate	Mild
2011	3,783,731	250,688	97,956	82,583	70,149
2012	3,725,626	248,294	99,120	80,608	68,566
2013	3,677,601	246,392	100,335	78,657	67,400
2014	3,584,020	242,340	98,456	77,866	66,018

Source: Ministry of Health and Welfare

Table 28.17 Premium Collection of the National Pension Insurance

Unit: %

Year	Usual Insured	Person with Disability		
		Severe and above	Moderate	Mild
2011	56.78	100	70.88	62.65
2012	56.25	100	70.51	62.16
2013	55.73	100	70.34	61.71
2014	55.56	100	70.45	61.66

Source: Ministry of Health and Welfare

Description: Accumulated since implementation of the insurance in October 2008

**Table 28.18 Beneficiaries of National Pension Insurance Payment,
Mental/Physical Disability Pension Payment, and Mental/Physical Disability
Basic Guaranteed Pension Payment**

Unit: Person

Year	Total	Disability Pension Payment		Disability Basic Guaranteed Pension Payment
		National Pension Insurance	Labor Insurance Combined with National Pension Insurance	
2011	26,453	3,170	71	23,212
2012	27,436	4,125	117	23,194
2013	26,697	4,767	168	21,762
2014	27,204	5,246	218	21,740

Source: Ministry of Health and Welfare

**Table 28.19 Amount of National Pension Insurance Payment,
Mental/Physical Disability Pension Payment, and Mental/Physical Disability
Basic Guaranteed Pension Payment**

Unit: TWD

Year	Total	Disability Pension Payment (TWD)		Disability Basic Guaranteed Pension Payment
		National Pension Insurance	Labor Insurance Combined with National Pension Insurance	
2011	1,229,663,928	111,284,986	84,668	1,118,294,274
2012	1,476,884,381	178,903,430	130,147	1,297,850,804
2013	1,521,233,487	215,016,562	231,464	1,305,985,461
2014	1,484,367,167	239,971,357	323,321	1,244,072,489

Source: Ministry of Health and Welfare

**Table 28.20 Average Age of National Pension Insurance Payment,
Mental/Physical Disability Pension Payment, and Mental/Physical Disability
Basic Guaranteed Pension Payment**

Unit: Age

Year	Disability Pension Payment			Disability Basic Guaranteed Pension Payment		
	Male	Female	Average	Male	Female	Average
2011	54.05	54.89	54.4	45.75	48.96	47.34
2012	54.61	55.23	54.87	45.95	49.41	47.66
2013	55.1	55.96	55.46	46.04	49.61	47.79
2014	55.48	56.41	55.87	46.24	50.1	48.13

Source: Ministry of Health and Welfare

Description: The average age of the aforementioned payments is based on the age of the beneficiaries when the statistics is calculated.

Table 30.1 Improvement Projects for the Accessible Environment in Forest Recreation Areas 2011-2015

Year	Forestry Bureau	Project Name	Facilities
2011	Hsinchu	Improvement Works for the Accessible Environment of the Guanwu National Forest Recreation Area	Accessible parking space and accessible wooden path
		Improvement Works for the Accessible Environment of the Forest Recreation Area	Establishment and renovation of accessible restroom and parking space and access ramp
	Dongshi	Renovation for the Accessible Trail in the Basianshan National Forest Recreation Area	Accessible trail
	Nantou	Improvement Works for Accessible Facilities and Accessible Trail in the Aowanda National Forest Recreation Area	Accessible facilities and accessible trail
	Chiayi	Construction for the Administration Promotion Hall of the Chukou Nature Center	Establishment of accessible restroom and ramp, tactile paving and elevator
2012	Dongshi	Construction for the Restroom, Lookout, Social Pavilion and Trail of Basianshan	Accessible restroom
		Construction for the Restroom, Lookout, Social Pavilion and Trail of Basianshan	Access ramp
		Construction for the Restroom, Lookout, Social Pavilion and Trail of Basianshan	Accessible parking space
	Chiayi	Improvement Works for the Entry of the Accessible Ramp in the Travel Community of the Alishan National Forest Recreation Area	One accessible ramp each for Wenshan Hotel, Kaofeng Hotel and Hefeng Hotel in the travel community

		Refurbishment for the Vehicle-Pedestrian Separation of the Zhushan Sunrise Viewing Trail in the Alishan National Forest Recreation Area	A wooden path, a flagstone trail, 6 decks and 22 benches
		Construction for Phase 2 of the Vehicle-Pedestrian Separation for the Zhushan Sunrise Viewing Trail in the Alishan National Forest Recreation Area	A wooden path, a granite path, 2 decks and a truss bridge
		Construction for the Forest Operating Facility (auxiliary of the restroom at the 87.5 km spot of the Highway 18.	Accessible restroom
		Landscape Improvement Works for the Alishan First Control Point	Accessible restroom and ramp and tactile pavings
		Landscape Improvement Works for the Shopping Area in the Alishan National Forest Recreation Area	Access ramp
	Taitung	Improvement Works for the Accessible Facilities of the Jihben Nature Center	The improvement works for the accessible trail and the construction of a deck
2013	Luodong	Improvement Works for the Accessible Facilities of the Restroom at Jiuzhize	Accessible restroom
	Hsinchu	Construction and Improvement Works for the Accessible Facilities and Sewage Equipment of the Ranger Station at Neidong	Improvement works for the accessible restroom and the construction of an access ramp
	Dongshi	Refurbishment and Improvement Works for the Basianshan Trails	Accessible trail
	Chiayi	Landscape Improvement Works for the Simple Market at Alishan	Accessible restroom and an elevator
		Landscape Improvement Works for the Alishan Tourist Center	Accessible restroom and ramp

		Construction for the Restroom of the First Parking Lot at Alishan	2 accessible restrooms and 1 accessible ramp to the second floor
		Construction for Phase 3 of the Vehicle-Pedestrian Separation for the Zhushan Sunrise Viewing Trail in the Alishan National Forest Recreation Area	A steel arch bridge and 3 decks
2014	Dongshi	Refurbishment and Improvement Works for the Consultation Office and Duty Room at the 35 km Spot of the Daxueshan National Forest Recreation Area	Refurbishment of the roof of the accessible restroom
		Improvement Works for the Surrounding Facilities of Kunyang at Hehuanshan	Access ramp
		Improvement Works for the Surrounding Facilities of Kunyang at Hehuanshan	Accessible parking space
	Nantou	Construction for the Trail and Maintenance for the Accessible Facilities of the Aowanda National Forest Recreation Area	Accessible trail
	Chiayi	Refurbishment for the Ecosystem Education Hall of Alishan	Establishment of accessible facilities (connected chair for indoor use and elevating platform for outdoor use) and accessible restrooms
		Landscape Improvement Works for the Xianglin Service Area of Alishan	Accessible restroom and access ramp and an elevator
	Pingtung	Refurbishment and Maintenance for the Waterfall Trail and Mountainside Trail of the Shuangliu National Forest Recreation Area	Establishment of an access ramp to the restroom
		Refurbishment for the Water Supply and Relevant Facilities of the Kenting National Forest	Establishment of an accessible restroom

		Recreation Area	
		Construction for the Elevator of the Sea Viewing Tower in the Kenting National Forest Recreation Area	Establishment of braille equipment
	Taitung	Improvement Works for the Plant Habitat in the Jihben National Forest Recreation Area	Improvement works for the pavement and route
2015	Dongshi	Refurbishment for the Second Hotel and Surrounding Facilities	Accessible sanitary facilities
	Chiayi	Improvement Works for the Pavement of the Large and Small Parking Lots in Alishan	Accessible parking space: One for the small parking lot, one for the travel community, one for the Tseyun Temple, one for the area next to the Alishan Station and two for the area across the Jhaoping Station
		Improvement Works for the Wooden Path near the Shoujhen Temple in Alishan	A wooden path and 2 benches

Source: Council of Agriculture, Executive Yuan