ABSTRACT

Since the COVID-19 pandemic, Taiwan reported a total of 776 cases of COVID-19 (Dong et al., 2020) in comparison with its neighbouring countries, Japan and the Philippines which reported 210,769 and 465,724 cases of COVID-19 respectively, until 24 December 2020. Looking at the curve of the COVID-19 pandemic among various countries, Taiwan had indeed distinguished herself and stood out considering her well-contained COVID-19 infection despite it being a widespread infection in other countries.

INTRODUCTION

The positive outcome of the Taiwan government and citizens’ responses showed that the containment of an easily transmissible respiratory infection is possible despite its proximity to China, where the outbreak is first recognized in Wuhan. Some factors enable Taiwan to be able to control the transmission of the COVID-19 effectively (Ministry of Health and Welfare, 2020).

The establishment of a centralized system is one of the factors of Taiwan being a pioneer in combating COVID-19 (Ministry of Health and Welfare, 2020). Taiwan had accumulated beneficial and real experience in working against easily spread respiratory infections after the severe acute respiratory syndrome (SARS) outbreak in 2013. After the pandemic, the Taiwan government amended the Communicable Disease Control Act
which specifies the necessity to coordinate all resources and manpower as a whole, leading to the establishment of the Central Epidemic Command Center (CECC) in 2015. The National Health Command Center (NHCC) is a unified central command system that includes the Central Epidemic Command Center (CECC), the Biological Pathogen Disaster Command Center (BPDCC), the Counter-Bioterrorism Command Center and the Central Medical Emergency Operations Center. NHCC addresses public health emergency and serves as a centralized and comprehensive platform for preventing major epidemics (Taiwan Centers for Disease Control, 2018).

In addition, Taiwan's timely border control helped in containing the spread of COVID-19. Starting from 31 December 2019, Taiwan began to conduct on-board health checks of passengers on direct flights from Wuhan. The entry of Chinese nationals from the outbreak regions in China was banned starting in January 2020 and entry of all Chinese nationals from China, Hong Kong, and Macao was all banned in February 2020 (Ministry of Health and Welfare, 2020). Other than China, Taiwan monitored the international COVID-19 situation and adjusted the travel notice for each country accordingly. To effectively track the high-risk groups of people, the National Health Insurance Administration (NHIA) integrated patients’ past 14-day travel history from National Immigration Agency (Wang et al., 2020). Other than allowing identification of possible infection in an individual, it prompts the healthcare personnel to act quickly in detecting the suspected cases of COVID-10 infection.

On top of that, another marked feature of the Taiwan response was appropriate and timely resource allocation. The CECC sustained mass masking in Taiwan under a name-based mask distribution system to ensure every citizen has a fair and adequate supply of face masks (Lin et al., 2020). The widespread use of face masks prevents respiratory-droplet transmission of COVID-19 from one to another. Other than increasing the production of face masks using military personnel, the CECC also capped the price of masks to prevent the possible spiking in price due to the inevitable high demands at the time of pandemic (Wang et al., 2020).

The success story of Taiwan in mitigating COVID-19 infection cannot be completed without citizens who cooperate and comply with the government policy. Retaining the experience from SARS 2013, both the government and the citizens are aware of the consequences of the possible turmoil with the pandemic. Most of the citizens understand the importance of wearing face masks, washing their hands and acting accordingly with their role in preventing themselves from being a breach in infection control. The high awareness and respected etiquette of the Taiwan citizens in facing the COVID-19 pandemic can be evident when the citizens themselves started ‘I’m okay, you go first’ activity, showing courtesy when buying face masks when they leave the face masks for susceptible people such as elderly and people with co-morbid conditions (Ministry of Health and Welfare, 2020, 5 June). Other than the cooperation from the citizens, the Taiwan government also mandated the citizens to wear masks in public areas in which maintaining social distances are relatively less plausible such as public transportation, healthcare centres, education centres, recreational areas and so on. Otherwise, those who are not complying with the laws would be fined under the law enforcement from 3,000 New Taiwan Dollars (NT$) to 15,000 NT$ (equivalent to RM433 and RM2,164) (Taiwan Centers for Disease Control, 2020, 11 December).

CONCLUSION

The success of Taiwan effective infection control of COVID-19 can be attributed to the Taiwan government’s vigilance and promptness in action and the citizens’ virtue.
From the announcement of the COVID-19 pandemic in December 2020, Taiwan had not announced movement control and yet the infection is well-controlled in Taiwan. Other than increasing the healthcare burden not only in term of physical health and also mental health, the COVID-19 pandemic had also tremendously affected the economy worldwide. The prompt and effective regulations and actions by the Taiwan government in combating COVID-19 can be the concrete and constructive guidance for other countries in mitigating the infection, and control and contain the spreading of upcoming communicable disease in the future.

REFERENCES


Taiwan Centers for Disease Control. (2020, 11 December). Community prevention. https://www.cdc.gov.tw/En/Category/MPage/BgR5zAZYjXqhnj1mz2HPDw

Thank You

To all reviewers of BJMS for Volume 15, Issue 2, May 2021

Assoc. Prof. Dr Naing Oo Tha
Assoc. Prof. Dr Nazri Bin Daud
Dr Edza Aria Wikurendra
Dr Hotimah Masdan Salim
Dr Irfan Mohamad
Dr Jiann Lin Loo
Dr M. Tanveer Hossain Parash
Dr Nik Alyani Nik Abdul Adel
Dr Nornazirah Azizan
Dr Nur Izzati Ishak
Dr Saba Ansari
Dr Shaila Kabir