2019 Global Health Forum in Taiwan 臺灣全球健康論壇

Contents

To Live for Love

About the Forum

The “Global Health Forum in Taiwan” is an annual event, jointly held by the Ministry of Foreign Affairs, Ministry of Health and Welfare and Health Promotion Administration of Taiwan, that convenes leaders from the worlds of research, policy, and practice to brainstorm and share findings that address the various health and welfare challenges.

This year’s Forum is scheduled for Sunday and Monday, October 20-21, at the Taipei International Convention Center, on the theme of “Urban Life of the 21st Century: Sustainable, Safe and Healthy?” The event will feature a discussion of the continuous growth of the global urban population, along with the important effects on public health from global and local ecological systems and urban environmental quality, including waste processing, safe water resources, hygiene facilities, and injury or harm prevention, which also relate to poverty, the environment and health topics, as well as further in depth discussion of urbanization issues such as the Sustainable Development Goals, SDG 3, physical and mental health; SDG 11, promoting urban and human living environment tolerance, safety and security, resilience and sustainability; and SDG 13, the environment and climate.

The Forum’s main morning session will extend invitations to international experts for a discussion of the urban environment and health issues. In the afternoon there will be parallel meeting sessions exploring issues including emerging urban environment related Big Data and technological applications, the migrant population in the urban environment, urban fragility and instability, care, health and wisdom in urban living, children’s environmental health promotion, and policy promotion of care and concern for the disadvantaged facing urbanization.

General Information

Date/ 會議日期

October 20-21, 2019 (Sunday-Monday)/ 2019 年 10 月 20-21 日(星期日-一)

Forum Venue/ 會議地點

Opening Speech & Plenary I & II / 開幕演講、專題演講 I & II

1F, Room 101, Taipei International Convention Center /
台北國際會議中心 1 樓 101 室

Parallel Sessions / 平行場次

1F, Room 101, Taipei International Convention Center /
台北國際會議中心 1 樓 101 室

1F, Room 102, Taipei International Convention Center /
台北國際會議中心 1 樓 102 室

1F, Room 103, Taipei International Convention Center /
台北國際會議中心 1 樓 103 室

2F, Room 201, Taipei International Convention Center /
台北國際會議中心 2 樓 201 室

Catering/ 餐飲

Coffee break will be served outside of the meeting room; lunch box will be served at 3rd floor, Banquet Hall.
茶點將提供於會議室外，午餐請至三樓宴會廳用餐

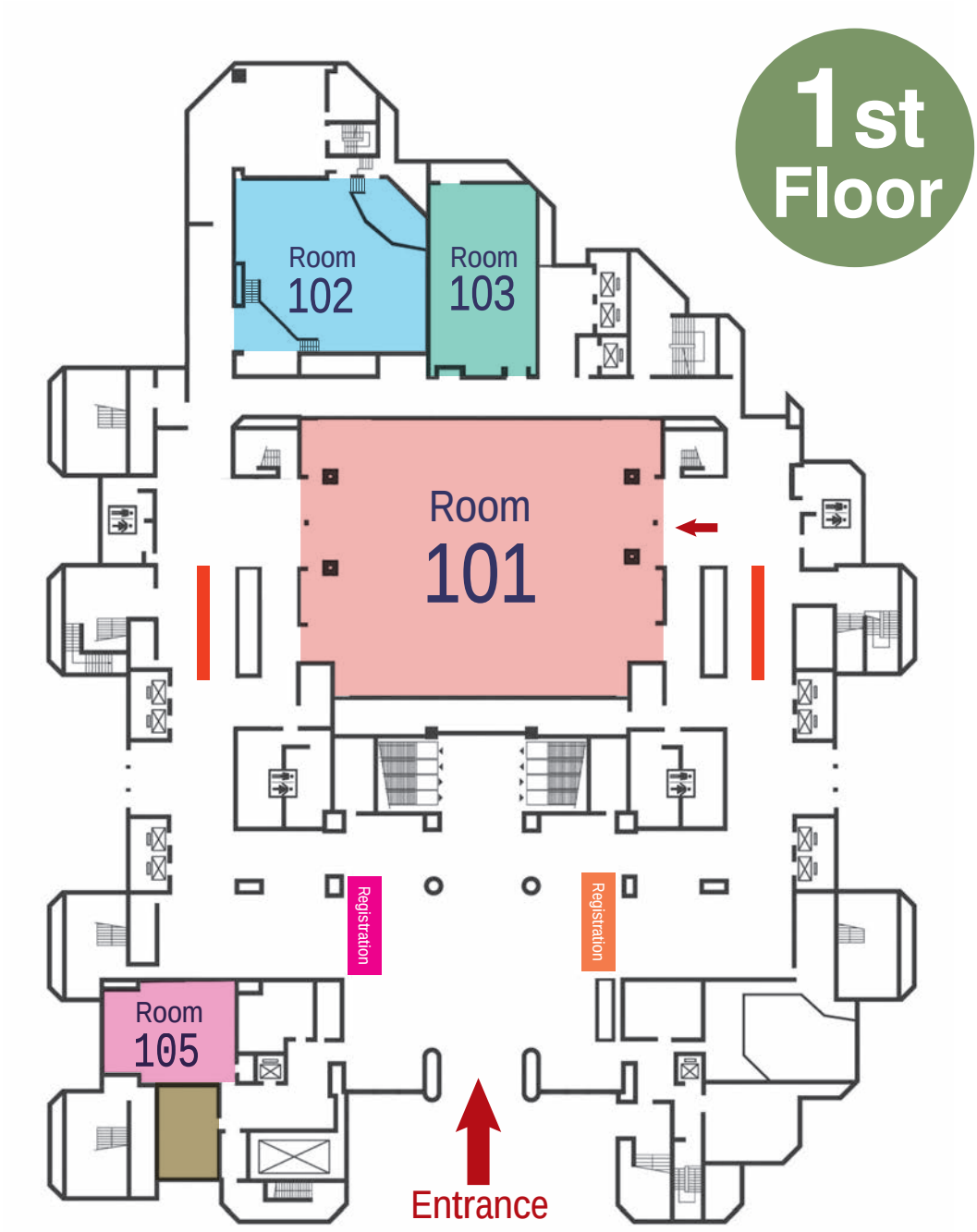
Mobile/ 行動電話

Please note that mobile phone must be switched to vibration mode during all sessions /
會議中請將手機調成靜音或關機

Organizers/ 主辦單位

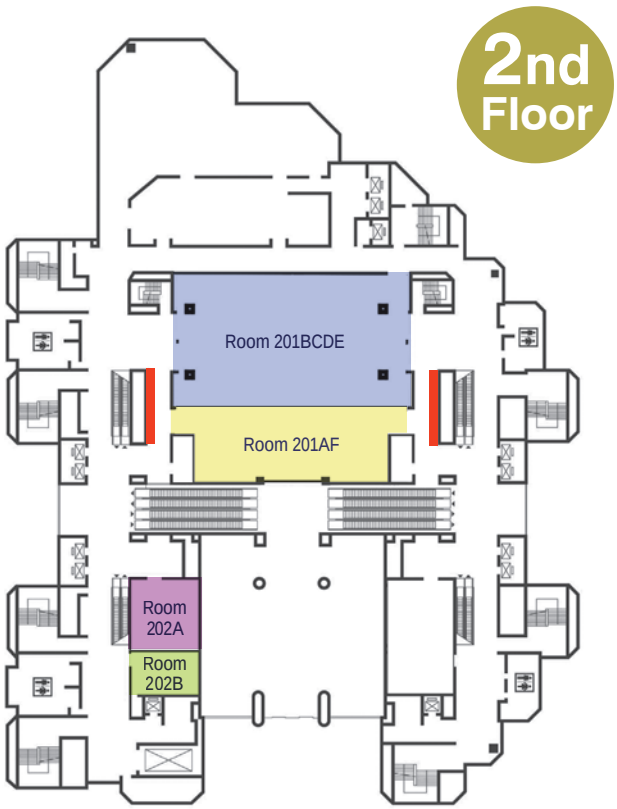
Ministry of Health and Welfare/衛生福利部
Ministry of Foreign Affairs /外交部
Health Promotion Administration, Ministry of Health and Welfare /
衛生福利部國民健康署

Floor Plan



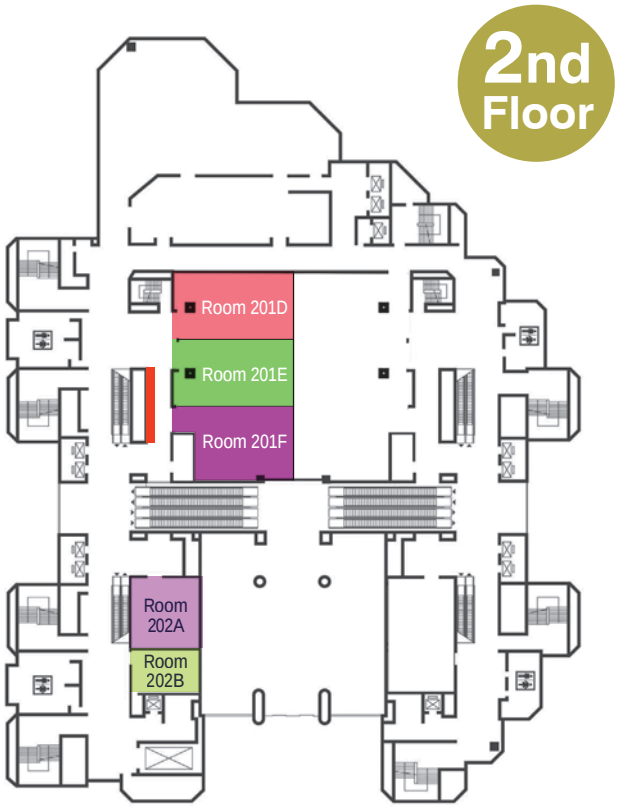
Room 101	Conference Room Plenary 1 / Plenary 2 Session 1 / Session 7	Registration VIP/ Speaker/ Moderator Registration	
Room 102	Session 2 / Session 6	Room 105	Secretariat
Room 103	Session 3 / Session 5	Muslim Prayer Room	
Coffee Break			

Floor Plan



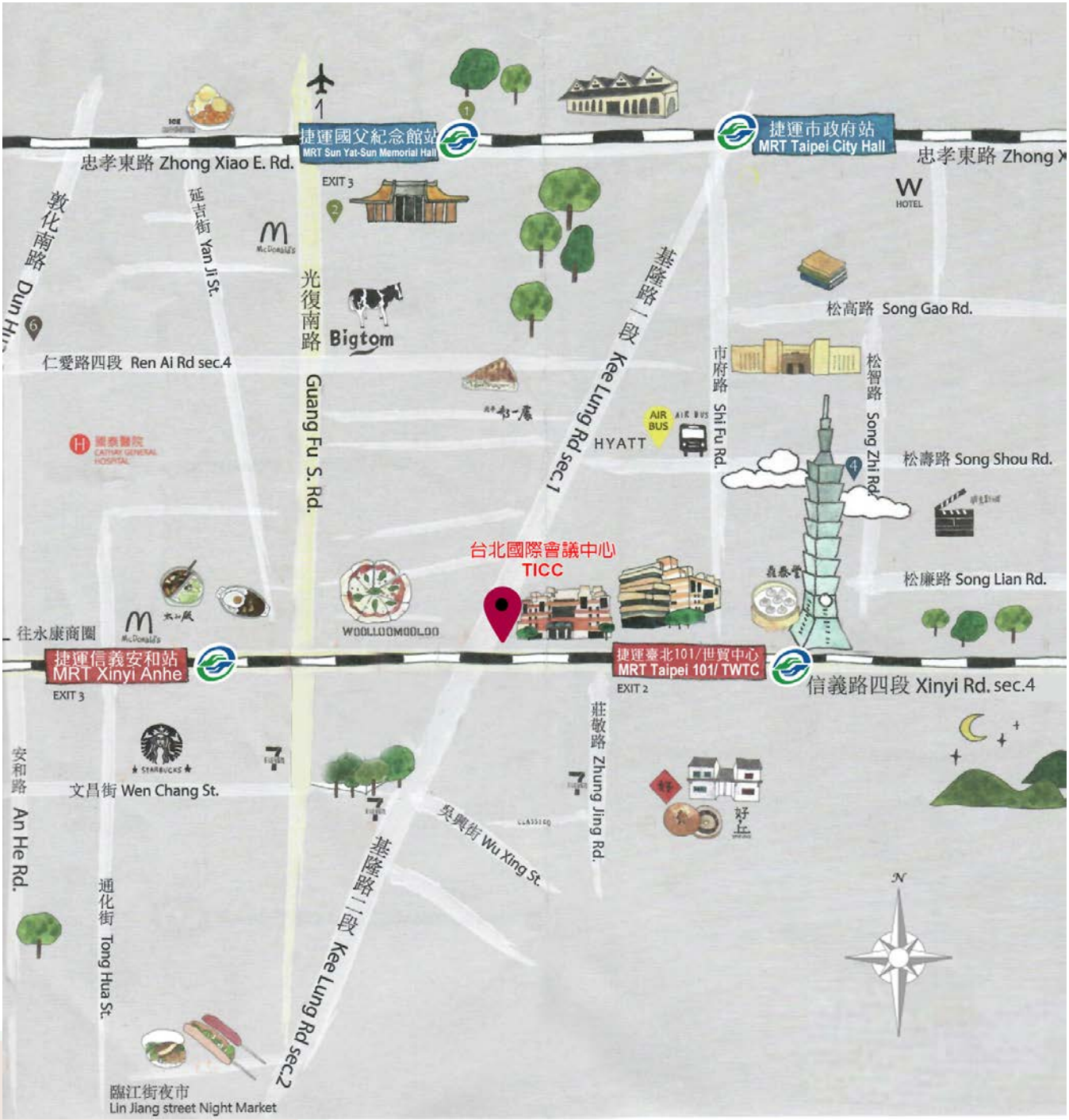
Room 201AF	Session 8	Room 202A	VIP Room
Room 201BCDE	Session 9	Room 202B	Speaker Ready Room
		Coffee Break	

✱Sunday, October 20, 2019 (invited only)



Room 201D	Session 4-1	Room 202A	VIP Room
Room 202E	Session 4-2	Room 202B	Speaker Ready Room
Room 201F	Session 4-3	Coffee Break	

Venue Map


捷運國父紀念館站
MRT Sun Yat-Sun Memorial Hall
捷運市政府站
MRT Taipei City Hall
忠孝東路 Zhong Xiao E. Rd.
忠孝東路 Zhong X
EXIT 3
W HOTEL
敦化南路 Dun Hua S. Rd.
延吉街 Yan Ji St.
光復南路 Guang Fu S. Rd.
Bigtom
基隆路一段 Kee Lung Rd sec.1
松高路 Song Gao Rd.
仁愛路四段 Ren Ai Rd sec.4
市府路 Shi Fu Rd.
松智路 Song Zhi Rd.
HYATT
AIR BUS
松壽路 Song Shou Rd.
台北國際會議中心
TICC
松廉路 Song Lian Rd.
往永康商圈
WOOLLOOMOOLOO
捷運信義安和站
MRT Xinyi Anhe
EXIT 3
捷運臺北101/世貿中心
MRT Taipei 101/ TWTC
EXIT 2
信義路四段 Xinyi Rd. sec.4
莊敬路 Zhung Jing Rd.
安和路 An He Rd.
文昌街 Wen Chang St.
吳興街 Wu Xing St.
基隆路一段 Kee Lung Rd sec.2
通化街 Tong Hua St.
臨江街夜市
Lin Jiang street Night Market
N

財團法人罕見疾病基金會簡介

罕見疾病，顧名思義，指的就是盛行率低、少見的疾病。較為人熟知的罕見疾病包括苯酮尿症、重型海洋性貧血、成骨不全症（玻璃娃娃）、黏多醣症（黏寶寶）、脊髓性小腦萎縮症（企鵝家族）等，這些疾病在國內已知的病患人數約數百人到千餘人不等，另有一些罕見疾病不僅鮮少聽聞，在全世界更是僅有數個病例。

有感於罕病病患所面對的是醫藥資源取得不易、多數疾病無藥可醫、醫療體系與社會制度可提供的幫助有限等困境，財團法人罕見疾病基金會在病患家長陳莉茵及曾敏傑等人的發起下，自 1998 年 6 月起開始籌募立案基金，在完全由民間小額捐款的協助下，於 1999 年 6 月 6 日成立，隨即開始推動醫療人權的提倡、病患權益的爭取、優生保健的推廣及政策制度的改革等項目。

之後又為了讓罕見疾病患者在醫療、藥物、生活及安養等方面獲得照護，陸續促成「罕見疾病防治及藥物法」、「罕見疾病防治及藥物法施行細則」、「罕見疾病醫療補助辦法」「罕見疾病藥物專案申請辦法」、「罕見疾病藥物供應製造及研究發展獎勵辦法」等法之設立。

罕見天籟合唱團簡介

我們相信藝術能夠撫慰人的身心靈，進而產生鼓舞的力量，勇於面對生命課題，罕見疾病基金會自 2004 年成立「罕見北區天籟合唱團」，盼能鼓勵病友開發身心潛能，豐富精神生活。基金會每年都會舉行成果發表會，用歌聲讓社會大眾感受他們堅強的生命力。

其中的罕見美少女團，是指導老師傅上珍，發掘有音樂潛力及資質的病友們，在合唱團練習後，再特別加強訓練的一群孩子，他們受邀到不少重要的場合參與演出，包括:台北君悅飯店的耶誕點燈活動、台北 NS025 周年音樂會等，歲月飛逝，當時活潑可愛的小朋友，現在已長成亭亭玉立的少女了，但她們對音樂的喜愛仍舊不變，她們如天使般的天籟之聲，讓大家看見她們對生命的期待及夢想，及罕見強韌生命力，讓更多人感受到生命和愛的力量。

至於喜歡唱詩歌的病友魏益群，每每聽到詩班的歌聲總令他感動不已，起初只是因為單純喜歡詩歌而已，因為每當傷心難過時聽到詩歌，心就會有一種被醫治的感覺，後來卻意外發現自己擁有歌唱的天賦。在加入罕見天籟唱團的練習後，益群越唱越好，也找到自己存在的生命價值：就是做對身邊的人與社會有意義的事，現在的他用歌聲與自己的生命故事四處替罕病病友作宣導，他相信他的誕生是有意義的，他希望活著的每一天，都能帶給世界力量、溫暖還有愛！

每次的表演機會，大家將會看到罕病病友們因為音樂所展現出的燦爛笑容、豐沛勇氣，以及最動人的生命樂章，更讓他們的生命找到自信心與舞台，期盼自身也能貢獻一己之力來回饋社會。因為有你，愛不罕見。

About Taiwan Foundation of Rare Disorders (TFRD)

Initiation
In June 1999, a new social terminology emerged in Taiwan's society, where the term "Rare Disease" was previously unheard of. Two parents believed in the concept that "We can't take care of our children forever, but a well-established system can." Dr. Tseng and Ms. Serena Wu, each with their own children afflicted with rare diseases, undertook the long path to fight for new rights and benefits for rare disease patients.

Mission
TFRD's mission is to improve the life of rare disease patients. We carry out our mission by assisting rare disease patients to receive proper medical treatment and rehabilitation, securing orphan drugs and special nutrients and fulfilling the needs of rare diseases patients in terms of education, employment and long-term care. As a representative for rare disease patients in Taiwan, TFRD advocates the adoption of relevant legislation that ensures rare disease patients' rights, encourages rare disease research, and raises public rare disease awareness.

Rare Disease in Taiwan
Rare disease, as its name suggests, are those diseases with very low prevalence and affects only a small number of people. In Taiwan, according to the "Rare Disease Control and Orphan Drug Act", which is legislated in 2000 as the 5th Orphan Drug Act in the world, the standard for rare diseases is if it's prevalent in less than 1/10,000.

In 2018, the government has categorized 220 diseases as officially proclaimed rare diseases. TFRD has been serving patients with 254 rare diseases affecting more than 14,000 people. So far 84 orphan drugs and 40 special nutrients have been approved by the government for treating patients.

The Introduction of Rare Chorus

We believe that arts have the power to stimulate and soothe, that raises people up and helps them confront life's challenges. Since 2004, TFRD has established the Rare Chorus in Taipei to encourage patients in fulfilling their potential and enriching their lives. Every year a concert is held and the public is able to witness first-hand the resilience of patients at the annual event.

Of chorus members, an all-girl subgroup was formed and directed by Ms. Fu. The group is composed of patients with musical talents; they receive special training after regular choral practice. In recent years, they have been invited to perform at Grand Hyatt Taipei Christmas Tree Lighting Ceremony and National Symphony Orchestra 25th Anniversary concert, etc. As time goes by, they have grown and become mature, but they still enjoy singing and are passionate about music. Their beautiful voice seems to express the expectations and dreams they have for their lives. Many audience members are touched by their singing full of the power of love.

A member of the chorus, Yi-Chun Wei, who enjoys singing, is often moved by the performance of church choirs. Initially, he simply loved to sing. Whenever he was upset, listening to choir music made him feel calm and healed. He later found himself having a gift in singing. After Yi-Chun joined the chorus, his singing improved a great deal, and he felt his life actually meant something. Namely, doing things that were of value and meaningful to people around him. Nowadays, Yi-Chun uses his singing voice and life story to raise public awareness on rare disease. He believes his birth has a mission. As long as he lives, he is set to bring strength, warmth and love to the world.

The Rare Chorus is a performance platform that showcases patients' musical interests as well as their bright smiles and admirable courage. Their lives have been transformed as a result of participating in the chorus, and they have persevered in the face of adversity. With moving stage performances held every year, they have given the society something back in return. "Because of you, love is not rare.

Agenda

2019 Global Health Forum in Taiwan
"Urban Life of the 21st Century: Sustainable, Safe and Healthy?"
Subtitle: To Live for Love

Agenda

Date: Oct. 20-21, 2019
Venue: Taipei International Convention Center

Day 1- October 20 (Sunday)

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<tr><td>09:00-09:10</td><td colspan="3">Opening address</td><td></td></tr>
<tr><td>09:10-09:20</td><td colspan="3">Group photo</td><td></td></tr>
<tr><td>09:20-09:30</td><td colspan="3">Opening Performance</td><td></td></tr>
<tr><td>09:30-10:30</td><td colspan="3">Opening Speech</td><td></td></tr>
<tr><td>10:30-10:40</td><td colspan="3">Coffee Break</td><td></td></tr>
<tr><td>10:40-12:10</td><td colspan="3">Plenary 1: Urban Environment</td><td>11:00-18:00</td></tr>
<tr><td>12:10-13:30</td><td colspan="3">Lunch Break</td><td rowspan="4">Room 201 D/E/F
Session 4
Health Promotion Administration, Environment Protection Agency and U.S. EPA
(by invitation)

Environmental Health Promotion and Policy for Children</td></tr>
<tr><td rowspan="3">13:30-17:10</td><td colspan="3">Parallel Sessions</td></tr>
<tr><td>Room 101</td><td>Room 102</td><td>Room 103</td></tr>
<tr><td>Session1
Health Promotion Administration

Urbanization, Population Aging and Technology Innovation</td><td>Session 2
Department of Mental and Oral Health

(1) Urban Mental Health: Challenges and Perspectives
(2) Oral Healthcare of Elderly Dental Patients with Cognitive Decline in Metropolitan Area</td><td>Session 3
Health Promotion Administration

Forging Ahead in a New Era of Cancer Prevention and Control</td></tr>
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Ministerial Round Table (by invitation)-Topic: Achieving Healthier Urban Environments within Available Resources.(Venue and Time: October 20th (Sunday), 16:00-17:00, 3F North Lounge)

Day 2 – October 21 (Monday)

Time	Topics				
08:00-09:00	Registration				
09:00-12:00	Plenary 2: Urban Health				
12:00-13:30	Lunch Break				
13:30-17:50	Parallel Sessions				
	Room 103	**Room 102**	**Room 101**	**Room 201AF**	**Room 201 BCDE**
	Session 5 Department of Nursing and Health Care	**Session 6 National Health Research Institutes**	**Session 7 Social and Family Affairs Administration**	**Session 8 Health Promotion Administration**	**Session 9 Health Promotion Administration**
	What a Perfect Day for People Living with Dementia - Dementia Environmental Design	Child Health in the 21st century	Urbanization： Loneliness in the Elderly	Urbanization and the Caring for the Disadvantaged - Healthcare, Orphan Drugs and Medical Reimbursement for Rare Diseases	Acute Care for Elders in a Super-aged Society: Towards Age-friendly Hospitals
17:50-18:00	Closing Ceremony and Remark				

Day 1 October 20 (Sunday) Morning

TIME	TOPIC	SPEAKER	MODERATOR
08:00-08:50 (50 min)	Registration		
09:00-09:10 (10 min)	Opening Address	**Shih-Chung Chen**, Minister of Health and Welfare, R.O.C. (Taiwan) **Distinguished Guest**	
09:10-09:20 (10 min)	**Group Photo**		
09:20-09:30 (10 min)	Opening Performance ***To Live for Love***	**The Heavenly Melody Choir of the Taiwan Foundation for Rare Disease**	
Opening speech			
09:30-09:50 (20 min)	One Health: Addressing Public Health Threats in an Increasingly Urban and Interconnected World	**Dr. Jay C. Butler, MD** Deputy Director for Infectious Diseases, Centers for Disease Control and Prevention, United States	**Dr. Jui-Yuan Hsueh**, Deputy Minister, Ministry of Health and Welfare, R.O.C. (Taiwan)
09:50-10:10 (20 min)	City Leadership for Health, Equity and Sustainable Development	**Dr. Agis Tsouros** Former Director of Healthy Cities; former Director of the Division of Policy and Governance for Health and Wellbeing, World Health Organization Regional Office for Europe	
10:10-10:30 (20 min)	Healthy Cities 2.0: towards One Planet Cities	**Prof. Trevor Hancock** First leader of the Green Party of Canada and Former Professor and Senior Scholar, School of Public Health and Social Policy University of Victoria, Canada	
10:30-10:40 (10 min)	**Coffee Break**		

TIME	TOPIC	SPEAKER	MODERATOR	
Plenary 1: Urban Environment				
10:40-11:10 (30 min)	Cities and Health: Past, Present, and Future	**Prof. Martin McKee** Professor, European Public Health, London School of Hygiene & Tropical Medicine, United Kingdom	**Dr. Jui-Yuan Hsueh**, Deputy Minister, Ministry of Health and Welfare, R.O.C. (Taiwan)	**Parallel Session** **11:00-12:30**
11:10-11:40 (30 min)	Influence of Urbanization and Migration on Cardiovascular Disease Risk Factors Among Migrant and Non-migrant African Populations: Findings from the RODAM Study	**Prof. Charles Agyemang** Professor of Global Migration, Ethnicity and Health, Academic Medical Centre, University of Amsterdam, Netherlands		**Environmental Health Promotion and Policy for Children** Room 201 D 201 E 201 F **(by invitation)**
11:40-12:10 (30 min)	Perspective of Population Aging and Urbanization in Japan	**Prof. Kenji Toba** CEO, Tokyo Metropolitan Institute for Geriatrics and Gerontology, Japan		
12:10-13:30 (80 min)	**Lunch Break**			

Day 1 October 20 (Sunday) Afternoon

Parallel Sessions				
Venue/ Host	**Room 101** Health Promotion Administration, MOHW, R.O.C. (Taiwan)	**Room 102** Department of Mental and Oral Health, MOHW, R.O.C. (Taiwan)	**Room 103** Health Promotion Administration, MOHW, R.O.C. (Taiwan)	**Room 201 D** Health Promotion Administration, Environment Protection Administration, United States EPA
Topics/ Time	**Session 1** **Urbanization, Population Aging and Technology Innovation**	**Session 2** **Urban Mental Health: Challenges and Perspectives; Oral Healthcare of Elderly Dental Patients with Cognitive Decline in Metropolitan Area**	**Session 3** **Forging Ahead in a New Era of Cancer Prevention and Control**	**Session 4** **Environmental Health Promotion and Policy for Children**
13:30-15:10 (100 min)	**Moderator:** **Dr. Ying-Wei Wang,** M.D., Dr. P.H., Director-General, Health Promotion Administration, Ministry of Health and Welfare, R.O.C. (Taiwan) **Speakers:** 1. Urbanization, Population Health and Aging **Prof. John Morley,** Professor, Saint Louis University School of Medicine, United States	**Moderator:** **Dr. Shu-Sen Chang,** Associate professor, Institute of Health Behaviors and Community Sciences, and Department of Public Health, College of Public Health, National Taiwan University, R.O.C.(Taiwan) **Speakers:** 1. Suicide Prevention in Urban and Rural Areas in Australia **Prof. Matthew Large,** Conjoint Professor and Clinical Director, the University of NSW and the Prince of Wales Hospital, Sydney, Australia	**Moderator:** **Prof. Mei-Shu Lai,** Emeritus Professor, Institute of Epidemiology and Preventive Medicine, College of Public Health, National Taiwan University, R.O.C.(Taiwan) **Speakers** 1. Using Cancer Registry Data to Drive National Cancer Strategy: 20 Years' Experience in the U.K. **Prof. Michel P. Coleman,** Head of the Cancer Survival Group, London School of Hygiene & Tropical Medicine, United Kingdom	**4-1 Moderators:** 1. **Dr. Mark Miller,** Assistant Clinical Professor, Departments of Pediatrics and Internal Medicine at the University of California San Francisco (UCSF), United States 2. **Prof. Yue-Liang Guo,** Distinguished Professor Environmental and Occupational Medicine, College of Medicine, National Taiwan University, R.O.C.(Taiwan) **4-2 Moderators** 1. **Dr. Henry Falk.**

	2. Urbanization, Aging and Health Outcomes **Prof. Jean-Pierre Michel,** Professor, University of Geneva, Switzerland 3. Universal Health Care for Frail Elderly **Prof. Kenji Toba,** CEO, Tokyo Metropolitan Institute for Geriatrics and Gerontology, Japan **Discussion**	2. Increasing Social Support for People with Mental Health Problems through Mental Health First Aid **Prof. Anthony Jorm,** Emeritus Professor, School of Population and Global Health, University of Melbourne, Australia **Discussion**	2. Using Power of Cancer Registry Data to Create Strategies for Cancer Control: Experience in USA **Dr. Robert A. Smith,** Vice President of American Cancer Society, United States 3. Using Power of Cancer Registry Data to Create Strategies for Cancer Control: Experience in Japan **Dr. Tomohiro Matsuda,** Researcher, National Cancer Center, Tokyo, Japan 4. Using Power of Cancer Registry Data to Create Strategies for Cancer Control: Experience in Korea **Prof. Young-Joo Won,** Head of Division of Cancer Registration and Surveillance, National Cancer Control Institute, National Cancer Center, Republic of Korea 5. Using Power of Cancer Registry Data to Create Strategies for Cancer Control: Experience in Taiwan **Prof. Wen-Chung Lee,** Professor, Institute of Epidemiology and Preventive Medicine, National Taiwan University, R.O.C.(Taiwan) **Discussion**	Rollins School of Public Health, Emory University, United States 2. **Ms. Martha Berger,** The U.S. Environmental Protection Agency (EPA) Office of Children Health Protection 3. **Prof. Luan-Yin Chang,** Professor, Department of Pediatrics, National Taiwan University Hospital, R.O.C. (Taiwan) **4-3 Moderators:** 1. **Ms. Nsedu Obot Witherspoon,** Executive Director, Children's Environmental Health Network (CEHN), United States 2. **Dr. Laura Anderko,** professor at Georgetown University's School of Nursing & Health Studies, United States 3. **Prof. Chang-Chuan Chan** Dean, College of Public Health (CEPH accredited), National Taiwan University, R.O.C.(Taiwan)
15:10-15:30 (20 min)	Coffee Break			

15:30-17:10 (100 min)	**Moderator:** **Prof. Kung-Yee Liang,** President, National Health Research Institute, R.O.C. (Taiwan) **Speakers:** 1. Creating a Sustainable Ecosystem for Healthy Aging Technology Innovation **Prof. Liang-Kung Chen,** Director, Center for Geriatrics and Gerontology, Taipei Veterans General Hospital, R.O.C.(Taiwan) 2. The Future Model of Long Term Care with an Intelligent Mobile Technology Platform **Prof. Po-Lun Chang,** Professor, Institute of bioMedical Informatics National Yang-Ming University, R.O.C.(Taiwan) 3. Innovative Technology and Care for Older People with Dementia **Prof. Yeh-Liang Hsu,** Gerontechnology Research Center, Yuan-Ze University, R.O.C. (Taiwan) **Discussion**	**Moderator:** **Prof. Allen Ming-Lun Hsu,** Distinguished Professor and Dean, School of Dentistry, National Yang-Ming University, R.O.C. (Taiwan) **Speakers:** 1. Orofacial Pain and Dysfunction in Older People with Impaired Cognition, especially Dementia **Prof., Frank Lobbezoo,** DDS, PhD, Academic Centre for Dentistry Amsterdam (ACTA), Netherlands 2. Challenges in Oral Care for Patients with Neuro-Cognitive Impairment **Prof. Martin Schimmel,** Professor, School of Dental Medicine University of Bern, Switzerland 3. Community-based Research Responding to a Highly Aging Society **Emeritus Prof. Tatsuji Nishihara,** Chairman and President, Kyushu Dental University, Japan **Discussion**	**Moderator:** **Prof. Hsiu-Hsi Chen,** Vice Dean, College of Public Health (CEPH accredited), National Taiwan University, R.O.C.(Taiwan) **Speakers:** 1. Cancer Strategies as Shown by the European Commission Initiative on Breast Cancer **Prof. Bettina Borisch,** Excutive Director, World Federation of Public Health Associations, Switzerland 2. American Guidelines and Quality Assurance in Breast Cancer Screening, Diagnosis, Treatment and Care **Dr. Robert A. Smith,** Vice President of American Cancer Society, United States 3. Asia Guidelines and Quality Assurance in Breast Cancer Screening, Diagnosis, Treatment and Care **Prof. Ling-Ming Tseng** Chief, Comprehensive Breast Health Center, R.O.C. (Taiwan) **Discussion**	**4-4 Moderators:** 1. **Dr. Leslie Rubin,** Associate Professor, Department of Pediatrics at Morehouse School of Medicine, United States 2. **Dr. Laura Anderko,** Professor at Georgetown University's School of Nursing & Health Studies, United States **Discussion :Regional Consultation: Identifying regional priorities**
19:00	**Welcome Banquet (by invitation)**			

Ministerial Round Table (by invitation)-Topic: Achieving Healthier Urban Environments within Available Resources. (Venue and Time: October 20th (Sunday), 16:00-17:00, 3F North Lounge)

Day 2 October 21 (Monday) Morning

TIME	TOPIC	SPEAKER	MODERATOR
08:00-09:00 (60 min)	Registration		
Plenary 2: Urban Health			
09:00-09:25 (25 min)	The Role of SDGs/UHC to Address Future Urban Health Challenge	**Ying-Wei Wang, M.D., Dr. P.H.,** Director-General, Health Promotion Administration, Ministry of Health and Welfare, R.O.C. (Taiwan)	**Prof. Chyong-Huey Lai,** Professor and Vice Superintendent, Chang Gung Memorial Hospital, Linkou Branch, Chang Gung University College of Medicine, R.O.C. (Taiwan)
09:25-09:50 (25 min)	A Global Overview of The Progress and Challenges in Achieving SDG 3 and SDG 5 Among Women and Children in Urban Areas	**Dr. Padmini Murthy** Professor, Division of Health Policy & Management, Department of Public Health, New York Medical College, United States	
09:50-10:15 (25 min)	Helping the Poor, Not the Places by Using Positive Deviance Approach in Urban Health	**Prof. Masamine Jimba** Professor, Department of Community and Global Health, the University of Tokyo, Japan	
10:15-10:35 (20 min)	Coffee Break		
10:35-11:00 (25 min)	Data and Data Sources Needed to Understand the Effect of Urban Environments on Health	**Dr. Joreintje Mackenbach** Assistant Professor, Amsterdam University Medical Center, Netherlands	**Prof. Cordia Chu, AM,** Director of Centre for Environment and Population Health, Griffith University, Australia
11:00-11:25 (25min)	Healthy Placemaking in the Negev: Innovative Platform for Urban Health	**Prof. Nadav Davidovitch,** Director, School of Public Health, Ben Gurion University, Israel	
11:25-11:50 (25 min)	Apply Big Data to Urban Health	**Prof. Hsiu-Hsi Chen,** Vice Dean, College of Public Health, National Taiwan University, R.O.C. (Taiwan)	
11:50-13:30 (100 min)	Lunch Break		

Day 2 – October 21 (Monday) Afternoon

Parallel Sessions					
Venue/ Host	**Room 103** Department of Nursing and Health Care, Ministry of Health and Welfare, R.O.C. (Taiwan)	**Room 102** National Health Research Institutes, R.O.C. (Taiwan)	**Room 101** Social and Family Affairs Administration, Ministry of Health and Welfare, R.O.C. (Taiwan)	**Room 201 AF** Health Promotion Administration, R.O.C. (Taiwan)	**Room 201 BCDE** Health Promotion Administration, R.O.C. (Taiwan)
Topics/ Time	**Session 5** **What a Perfect Day for People Living with Dementia - Dementia Environmental Design**	**Session 6** **Child Health in the 21st Century**	**Session 7** **Urbanization: Loneliness in the Elderly**	**Session 8** **Urbanization and the Caring for the Disadvantaged-Healthcare, Orphan Drugs and Medical Reimbursement for Rare Diseases**	**Session 9** **Acute Care for Elders in a Super-aged Society: Towards Age-friendly Hospital**
13:30-15:30 (120 min)	**Moderator:** **Dr. Shwu-Feng Tsay,** Director-General, Department of Nursing and Health Care, Ministry of Health and Welfare, R.O.C.(Taiwan) **Speakers:** 1. WOW - They Sure Know How to Keep Me Busy Here - with Meaning, Purpose And Joy **Prof. Gail Elliot,** Gerontologist & Dementia Specialist, DementiAbility Enterprises Inc, Canada	**Moderator** **Prof. Chih-Cheng Hsu,** Investigator and Deputy Director, Institute of Population Health Sciences, National Health Research Institutes, R.O.C.(Taiwan) **Speakers:** 1. The Future of Maternal and Child Health **Dr. Michael C. Lu**, Dean, UC Berkeley's School of Public Health, United States	**Moderator:** **Dr. Tsung-Hsi Fu,** Associate Professor, Department of Social Work, National Taiwan University, R.O.C. (Taiwan) **Speakers:** 1. Building Friendly Senior Society —Senior Citizens' Welfare in Taiwan **Madam Hui-Jiuan Chien,** Director of Social and Family Affairs Administration, Ministry of Health and	**Moderator:** **Prof. Ching-Shiang Chi,** Vice-Superintendent, Tungs' Taichung Metro Harbor Hospital, R.O.C.(Taiwan) **Speakers:** 1. Rare Disease Policy and Practice in Asia Pacific: Catching Up or Leading the Way? **Dr. Durhane Wong-Rieger** President & CEO, Canadian Organization for Rare Disorders, Canada	**Moderator:** **Prof. Liang-Kung Chen**, Center for Geriatrics and Gerontology, Taipei Veterans General Hospital, R.O.C.(Taiwan) **Speakers:** 1. Delivering Improved Patient and System Outcomes for Hospitalized Older Adults through an Acute Care for Elders (ACE) Strategy **Dr. Samir Sinha,**

	2. Anticipating New Aged Care – A Dementia Perspective **Dr. Raymond Sui-Hing Yan** Chairman, Taiwan Cognitive Enhancement Association, R.O.C.(Taiwan) 3. "Finding A Balance Point", a Concept Central to Family Caregiving Processes for Persons With Dementia in Taiwan **Prof. Yea-Ing Lotus Shyu,** Distinguished Professor, School of Nursing, Chang Gung University, R.O.C.(Taiwan) **Discussion**	2. Poverty and Child Health **Prof. Tung-Liang Chiang,** Professor, Institute of Health Policy and Management College of Public Health National Taiwan University, R.O.C.(Taiwan) 3. Maternal Feeding Practice in Infancy and Toddlerhood **Prof. Li-Yin Chien** Professor & Director, Institute of Community Health Care, National Yang-Ming University R.O.C.(Taiwan) 4. Sugar-sweetened Drinks and Dietary Pattern in Children and Adolescents **Prof. Hsing-Yi Chang** Investigator, Institute of Population Health Sciences, National Health Research Institutes, R.O.C.(Taiwan) **Discussion**	Welfare, R.O.C. (Taiwan) 2. Care Poverty and Loneliness: Global Challenges for Ageing and Super-Aged Societies **Prof. Teppo Kröger** Professor and Head, Centre of Excellence in Research on Ageing and Care (CoE AgeCare), University of Jyväskylä, Finland 3. Research Expertise: Social Welfare and Services for the Elderly, Long-Term Care, Longitudinal Data Analysis **Prof. Shiau-Fang Chao** Associate Professor, Department of Social Work, National Taiwan University **Discussion**	2. Health Care, Prevention and Control of Rare Diseases **Dr. Kuo-Chung Lan,** Vice-Superintendent, Kaohsiung Chang Gung Memorial Hospital, R.O.C. (Taiwan) 3. Making Rare Diseases Count in Western Australia **Dr. Kristen Nowak,** Director, Office of Population Health Genomics, Western Australian Department of Health, Australia 4. Accelerating Orphan / Innovative Drug Development in Japan - Current status & Challenges **Mr. Shinobu Uzu** Associate Executive Director, Pharmaceuticals and Medical Devices Agency (PMDA), Japan **Discussion**	Director of Geriatrics, Sinai Health System and University Health Network, Toronto, Canada 2. The Geriatric Emergency Department (and beyond) **Dr. Brittany Ellis,** Provincial Lead of Geriatric Emergency Medicine, University of Saskatchewan Health Authority, Canada 3. Vision and Model of the Harvard Spaulding Rehabilitation Network **Jeanne Cooper RN, MPH** International Program Director, Spaulding Rehabilitation Network, United States **Discussion**
15:30-15:50	**Coffee Break**				

15:50-17:50 (120 min)	**Moderator:** **Dr. Shwu-Feng Tsay,** Director-General, Department of Nursing and Health Care, Ministry of Health and Welfare, R.O.C.(Taiwan) **Speakers:** 1. Buildings that Support 'Perfect Days' for Residents with Dementia and Staff Supporting Them **Prof. Richard Fleming,** Professorial Fellow, Faculty of Science, Medicine and Health University of Wollongong, Australia 2. Engagement Replacement Treatment for Dementia – Creating a Perfect Day with Wellbeing and Quality of Life no Matter What Stage of the Disease, Through Environment, the Arts, and Respect for the Person's Individuality and Remaining Skills and Abilities	**Moderator:** **Prof. Chao A. Hsiung,** Distinguished Investigator and Director, Institute of Population Health Sciences, National Health Research Institutes, R.O.C.(Taiwan) **Speakers:** 1. How Does Smartphone Affect Children's Health? **Yu-Hsuan Lin, M.D., Ph.D.,** Assistant Investigator/Attending Physician , Institute of Population Health Sciences, National Health Research Institutes, R.O.C.(Taiwan) 2. Impacts of Environmental Factors on Neurodevelopmental Outcomes of Children **Dr. Ping-I. Daniel Lin,** Associate Professor, Department of Health Sciences, Karlstad University, Sweden	**Moderator:** **Ms. Karine Moykens** Secretary-General Department of Welfare, Public Health and Family, Government of Flanders, Belgium **Speakers:** 1. Social Participation of Elderly Living Alone in Urban Area **Mr. Takeshi Kamino** Chairman, Nippon Active Life Club (NACL), Japan 2. Home as well as Communal: Lessons Learned from Social Housing for the Disadvantaged Elders in Taiwan **Prof. Pei-Shan Yang,** Professor, Department of Social Work, National Taiwan University, R.O.C.(Taiwan)	**Moderator:** **Prof. Ching-Shiang Chi,** Vice-Superintendent, Tungs' Taichung Metro Harbor Hospital, R.O.C.(Taiwan) **Speakers:** 1. Clinical Trials System of Orphan Drugs in Taiwan **Prof. Wuh-Laing Hwu,** Doctor, Department of Pediatrics and Medical Genetics, National Taiwan University Hospital, R.O.C.(Taiwan) 2. Value and Current Trends of Real World Evidence and Registry Data in Rare Diseases **Dr. Yi-Wen Heng,** Regional Registry Lead, JPAC & Asia, Sanofi Genzyme, Singapore	

	Dr. John Zeisel, President and CEO, Hearthstone Alzheimer Care, United States 3. At here, I am not a person with dementia. **Ms. I-Hsuan Chen** Project Manager, Taiwan Chilaulin Lifelong Learning Association R.O.C. (Taiwan) **Discussion**	3. The Diagnosis and Intervention of Internet Gaming Disorder **Prof. Chih-Hung Ko,** Director, Department of Psychiatry, Kaohsiung Medical University Chung-Ho Memorial Hospital, R.O.C. (Taiwan) 4. The Trajectories of Degree of Internet Addiction in Young Adults Aged from 17 to 22 in Taiwan: Results of the CABLE study **Dr. Dih-Ling Luh** Associate Professor, Department of Public Health, Chung Shan Medical University, R.O.C. (Taiwan) **Discussion**	3. Problems Faced by Elderly Living Alone in Taipei and Their Solutions: Doing Too Much or Not Doing Enough? **Prof. Hong-Jer Chang** Associate Professor, Long-Term Care Department, National Taipei University of Nursing and Health Sciences, R.O.C. (Taiwan) **Discussion**	3. Current status and challenges of Accessibility to Orphan Drugs Under the Nation Health Insurance in Taiwan **Prof. Ming-Chin Yang,** Professor, Institute of Health Policy and Management, National Taiwan University, R.O.C.(Taiwan) 4. Policy & KORD's multiple program for rare disease patient in Korea **Mr. Hyun-Min Shin** Chairman, Korean Organization for Rare Diseases, Republic of Korea **Discussion**	
17:50-18:00 (10 min)	Closing Ceremony and Remarks		**Ying-Wei Wang, M.D., Dr. P.H.,** Director-General, Health Promotion Administration, Ministry of Health and Welfare, R.O.C.(Taiwan)		

Opening Address: Shih-Chung Chen

Minister,
Health and Welfare, R.O.C. (Taiwan)

Education Background

1971-1977	D.D.S, School of Dentistry, Taipei Medical College

Professional Experience

1987-1990	Director, Taipei City Dentists Association
1991-1993	Executive director, Taipei City Dentists Association
1993-1995	President, Taipei City Dentists Association
1995-1996	Commissioner, medical review committee, Taipei City Health Department
1995-1999	President, Taiwan Dental Association
1993-1998, 1999-2000	Commissioner, Dentist Advisory Committee, DOH
1999-2005	Executive director, chief executive officer ,Taiwan Dental Association
1996-1999, 2005-2006	Commissioner, National Health Insurance Supervisory Committee, DOH
1996-2008	Commissioner, National Health Insurance Medical Expenditure Negotiation Committee, DOH
1999-2005, 2009-2017	Consultant, Taipei City Dentists Association
1996-2008	Commissioner, National Health Insurance Medical Expenditure Negotiation Committee, DOH
1999-2005, 2009-2017	Consultant, Taipei City Dentists Association
1999-2005, 2009-2017	Consultant , Taiwan Dental Association
2004-2017	Director, Taipei Medical University
2016-2017	National Policy Advisor to the President
2017-	Minister of Health and Welfare

Opening Speech

Moderator: Dr. Jui-Yuan Hsueh

Deputy Minister,
Ministry of Health and Welfare,
R.O.C. (Taiwan)

Education Background

1973-1980	Doctor of Medicine, Taipei Medical University
1993-1997	Bachelor of Law, National Taiwan University
1997-2001	Master of Law, National Taiwan University

Professional Experience

2002-2003	Senior Secretary, Bureau of Medical Affairs, Department of Health, Executive Yuan
2003-2004	Deputy Director-General, Bureau of Medical Affairs, Department of Health, Executive Yuan
2004-2008	Director-General, Bureau of Medical Affairs, Department of Health, Executive Yuan
2008-2015	Deputy Superintendent, Taipei Medical University Shuang Ho Hospital, Ministry of Health and Welfare
2015-2017	Director, Public Health Bureau, Pingtung County Government

Speaker: Dr. Jay C. Butler, MD

Deputy Director for Infectious Diseases,
Centers for Disease Control and Prevention,
United States

Biography

Jay C. Butler, MD is the Deputy Director for Infectious Diseases. In this capacity, he provides leadership to the efforts of CDC's three infectious disease national centers and helps to advance the agency's cross-cutting infectious disease priorities.

Dr. Butler has 30 years of experience in increasingly complex public health leadership and management positions. He graduated from North Carolina State University with a BS in zoology, received his MD at the University of North Carolina, and did internship and residency training in medicine and pediatrics at Vanderbilt. After completing CDC's Epidemic Intelligence Service in the Wisconsin Division of Health, Dr. Butler completed a preventive medicine residency with the Respiratory Diseases Branch in the National Center for Infectious Diseases, and an infectious disease fellowship at Emory University. He is board certified in medicine, pediatrics and infectious diseases, and has served in public health positions at federal, state, and tribal government, including completing more than 22 years in the Commissioned Corps of the US Public Health Service, from which he retired at the level of Captain (Medical Director) in 2012.

From 1998-2005, Dr. Butler was Director of the Arctic Investigations Program and from June 2009 to March 2010 he directed CDC's 2009 H1N1 Pandemic Vaccine Task Force, which achieved emergency vaccination of more than 80 million Americans. Dr. Butler made critical contributions to emerging infections, including serving on the Hantavirus Task Force in CDC's Viral Special Pathogens in 1993 and 1994. He held leadership roles in multiple emergency responses, including CDC's response to bioterrorist anthrax in 2001.

Dr. Butler has also held multiple leadership roles in Alaska, including Chief Medical Officer for the Alaska Department of Health and Social Services (2014-2018 and 2007-2009), State Epidemiologist (2005-2007), and Senior Director of the Division of Community Health Services for the Alaska Native Tribal Health Consortium (ANTHC)(2010-2014). He was President of the Association of State and Territorial Health Officials in 2016-2017, and has made important contributions to public health approaches to reducing harms associated with addiction.

One Health: Addressing Public Health Threats in an Increasingly Urban and Interconnected World

Jay C. Butler, MD

One Health is a collaborative, multisectoral, and transdisciplinary approach - working at subnational, national, regional, and global, levels – with the goal of achieving optimal health outcomes recognizing the interconnection between people, animals, and their shared environment. Growth and aging of the human population, increased population density associated with urbanization and agricultural practices, changes in the environment, and increases in international travel and trade have given recognized and emerging infectious diseases new opportunities to spread. Zoonotic diseases (infections acquired from animals) account for more than 60% of human infectious diseases, and more than 70% of emerging infectious diseases, including Ebola, HIV, and influenza, have an animal origin. Zoonotic diseases are estimated to be responsible for at least 2.5 billion cases of human illness and 2.7 million deaths worldwide annually. A One Health approach can create new opportunities for prevention and enable public health agencies to address health challenges faced in daily practice, including antibiotic resistant bacteria, foodborne infectious, and vectorborne diseases. Climatic events, such as the El Niño-Southern Oscillation in the Pacific Ocean can influence infectious disease outbreaks globally. Development of One Health practices involves strategically collaborating, coordinating, and communicating among clinicians, agencies, and businesses addressing human health, animal health, and environmental issues.

Speaker: Dr. Agis Tsouros

Former Director of Healthy Cities;
Former Director of the Division of Policy and Governance for Health and Wellbeing, World Health Organization Regional Office for Europe

Biography

Agis D Tsouros, MD, PhD, FFPH is a leading international expert with 30 years of experience working for WHO Europe and globally, in the fields of health policy, urban health and healthy cities, inte-rsectoral governance and health in all policies, global health, social determinants of health and equity, and health promotion. Highlights of his work include his leading role in the development of the WHO European Healthy Cities movement, the publication "The Social Determinants of Health (SDH) – the Solid Facts", which led to the establishment of the WHO Global Commission on the SDH; his central role (as chairman of the Greek National Board of Public Health)in the public health preparedness of the Athens 2004 Olympic games (this work was instrumental in mainstreaming the field of mass gathering and public health within WHO); and his leading role in development of the WHO European Policy and Strategy Health 2020. During his 27-year career in WHO, Dr. Tsouros held positions of responsibility for public health systems, tobacco control, non-communicable diseases, environmental health, urban governance for health, and national and sub-national policies for health. He has also held the position of President of the Greek CDC on a special assignment to lead its transformation process.

He is an initiator/intellectual sponsor/author/co-author of several innovative publications covering a wide range of areas: leadership and governance for health and sustainable development at all levels, health in all policies, equity and social determinants of health, health and the SDGs agenda, networking for Innovation and change, health promoting universities, health literacy, physical activity, home care, palliative care and palliative care for older people.

He is currently advising WHO Regional Offices as well as individual countries and cities worldwide on health policy, governance and diplomacy for health. He established Global Healthy Cities to promote strengthening Healthy Cities and the implementation of the new sustainable development goals agenda at the local level. Dr Tsouros is also in the process of relaunching the World Institute for Cities Diplomacy. He is currently visiting professor at the Global Institute for Health Innovation, Imperial College London.

Speaker: Prof. Trevor Hancock

First leader of the Green Party of Canada
Former Professor and Senior Scholar, School of Public Health and Social Policy, University of Victoria
Canada

Education

1978 - 1980	MHSc in public health, University of Toronto, Canada
1967 - 1973	MB,BS (medical degree), St Bartholomew's Hospital, University of London

Professional Experience

Academic

2011 - 2018	Professor and Senior Scholar, School of Public Health and Social Policy, University of Victoria
1986 - 2000	Associate Professor (Part-time, 20%), Faculty of Environmental Studies, York University

Professional

2004 - 2011	Public Health Consultant, Ministry of Health, Victoria BC
1986 - 2004	Independent Public Health Physician and Health Promotion Consultant (full time with BC Ministry of Health 2002 – 2004)
1986 - 1992	Part-time consultant, Department of Public Health, City of Toronto
1982 - 1986	Associate Medical Officer of Health, Northern Health Area, City of Toronto
1980 - 1982	Health Planner, Health Advocacy Unit, Department of Public Health, City of Toronto
1978 - 1980	Epidemiologist, Peel Regional Health Unit
1976 - 1978	Family Physician, Lakeshore Area Multi-Service Project, Etobicoke
1975 - 1976	Family Physician, Chipman, New Brunswick

Biography

Dr. Trevor Hancock is a public health physician and health promotion consultant and recently retired from his position as a Professor and Senior Scholar at the School of Public Health and Social Policy at the University of Victoria. His career has been focused on population health promotion and public health, with a particular focus on health in cities and the links between human and ecosystem health.

He is one of the founders of the global Healthy Cities and Communities movement, originated the term 'healthy public policy', and has been described as "one of the ten best health futurists in the world". In 1986/7 he was President of the Ontario Public Health Association, and chaired the Board of the Ontario Healthy Communities Association for a number of years; he is currently Vice Chair of the Board of BC Healthy Communities. He also co-founded both the Canadian Association of Physicians for the Environment and the Canadian Coalition for Green Health Care, and was the first leader of the Green Party for both Canada and Ontario in the 1980s.

He is much in demand across Canada and internationally as an author and public speaker and has served on numerous national and international expert panels. He was a Senior Editor on the Editorial Board of the *Canadian Journal of Public Health* from 2014 to 2018 and is a member of the Editorial Board of *Cities and Health*. Since December 2014 he has written a regular weekly column on population and public health for the Times Colonist, the daily newspaper in Victoria.

He was made a Honorary Fellow of the UK's Faculty of Public Health in 2015 and in 2017 he was awarded the Defries Medal, the CPHA's highest award, presented for outstanding contributions in the broad field of public health.

Healthy Cities 2.0: Towards One Planet Cities

Prof. Trevor Hancock

We are now living in the Anthropocene, a new geologic epoch that humanity has created. The new geologic layers that characterise the Anthropocene represent dramatic and rapid changes in multiple Earth systems that, together, are the ultimate ecological determinants of our health. Collectively, humanity already exceeds the Earth's bio-capacity, while high-income countries such as Canada and Taiwan have ecological footprints several times that of the Earth; we consume much more than our fair share of the Earth's resources.

Yet we have only one planet, and we have to learn to live together, in harmony with each other and the Earth, in a way that ensures a good quality of life and good health for everyone. In an increasingly urban world, cities need to be at the forefront in addressing this challenge. I call this approach Healthy Cities 2.0.

Plenary 1

Urban Environment

Moderator: Dr. Jui-Yuan Hsueh

Deputy Minister,
Ministry of Health and Welfare,
R.O.C. (Taiwan)

Education Background

1973-1980	Doctor of Medicine, Taipei Medical University
1993-1997	Bachelor of Law, National Taiwan University
1997-2001	Master of Law, National Taiwan University

Professional Experience

2002-2003	Senior Secretary, Bureau of Medical Affairs, Department of Health, Executive Yuan
2003-2004	Deputy Director-General, Bureau of Medical Affairs, Department of Health, Executive Yuan
2004-2008	Director-General, Bureau of Medical Affairs, Department of Health, Executive Yuan
2008-2015	Deputy Superintendent, Taipei Medical University Shuang Ho Hospital, Ministry of Health and Welfare
2015-2017	Director, Public Health Bureau, Pingtung County Government

Speaker: Prof. Martin McKee

Professor,
European Public Health,
London School of Hygiene & Tropical Medicine,
United Kingdom

Education

2006	DSc Queen's University of Belfast
1988 - 1990	MD Queen's University of Belfast
1985 - 1986 1988	Member of the Faculty of Community (subsequently Public Health) Medicine

Professional Experience

2014	Medical Director, London School of Hygiene and Tropical Medicine
2011	Honorary Consultant in Public Health Medicine, University College London Hospital Foundation Trust
1998 -	Director of Research Policy, European Observatory on Health Care Systems

Biography

Martin McKee qualified in medicine in Belfast, Northern Ireland, with subsequent training in internal medicine and public health. He is Professor of European Public Health at the London School of Hygiene and Tropical Medicine where he established the European Centre on Health of Societies in Transition (ECOHOST), a WHO Collaborating Centre that comprises the largest team of researchers working on health and health policy in central and eastern Europe an d the former Soviet Union. He is also research director of the European Observatory on Health Systems and Policies, a unique partnership of universities, national and regional governments, and international agencies. He has published over 1,100 scientific papers, 46 books, and 127 book chapters, with over 83,000 citations and a h-index of 129. In a 2014 bibilometric study he was identified as the most productive researcher in global health systems research. He is Past President of the European Public Health Association and he served as an editor of the European Journal of Public Health for 15 years (six as editor in chief) and is a member of 16 editorial boards. He has given many endowed lectures, including the Milroy Lecture (Royal College of Physicians), the Cochrane Lecture (UK Society for Social Medicine), Ferenc Bojan Lecture (European Public Health Association), DARE Lecture (UK Faculty of Public Health), Victor Horsley lecture (BMA), Thackrah lecture (University of Leeds), Duncan lecture (City of Liverpool), Hjelt lecture (University of Helsinki), Dixon lecture (Ulster Medical Society), Neuberger lecture (Hebrew University), Davidson and Duncan lectures ((Royal College of Physicians of Edinburgh) and Sandy Macara lecture (BMA). He has been chair of the UK Society for Social Medicine and was a trustee of the UK Public Health Association. He sits on a number of advisory boards in Europe and North America, in both the public and private sectors, including the European Commission's Expert Panel on Investing in Health, and is a former chair of the WHO's European Advisory Committee on Health Research and of the Global Health Advisory Committee of the Open Societies Foundations, based in New York. He is a Fellow of the Royal Colleges of Physicians of London, Edinburgh and Ireland and the UK Faculty of Public Health. His contributions to European health policy have been recognised by, among others, election to the UK Academy of Medical Sciences, Academia Europaea, and the US National Academy of Medicine, by the award of honorary doctorates from Hungary, The Netherlands, Greece, Sweden (twice), and the UK and visiting professorships at the Universities of Zagreb and Belgrade, the London School of Economics, and the Taipei Medical University, as well as appointment as a distinguished international scholar at the University of Pennsylvania and McMaster University, Canada. In 2003 he was awarded the Andrija Stampar medal for contributions to European public health, in 2014 the Alwyn Smith Prize for outstanding contributions to the health of the population, and in 2015 the Donabedian International Award for contributions to quality of care. In 2005 was made a Commander of the Order of the British Empire (CBE) by HM Queen Elizabeth II. He has an active following on Twitter as @martinmckee

Cities and Health: Past, Present, and Future

Prof. Martin McKee

The creation of the first cities, in Mesopotamia, had profound implications for the way in which people live their lives. Economically, there were clear advantages to be had from bringing people with specialised skills together, to create things that would have been impossible when everyone was living in small mobile communities. However, there were also consequences for the health of those moving to the new cities. What some have described as the urban penalty in health became apparent in the 19th century, as the Industrial Revolution attracted large numbers of people from agricultural communities into what, in England, were described by the poet William Blake as the dark satanic mills". The rapid growth of these cities far outpace the ability to put in place clean water, sanitation, and decent housing. Soon, they became incubators for infectious disease. However, the juxtaposition of rich and poor in the cities meant that the elite could not ignore the plight of those living in poverty. In Europe, the sanitary movement and, in due course, a generation of enlightened politicians, began to tackle the problems. By the middle of the 20th century, the health of urban dwellers was actually better than that of their rural counterparts in many countries. This was not the case in many other parts of the world. Uncontrolled urban development proceeded apace. We began to see the creation of megacities, with millions of people living in appalling conditions. Finally, the concept of urban health emerged on the scene. This has proceeded apace, aided by remarkable advances in technology, including satellite imaging and the ability, through tools like Google Street View, to assess the health promoting or damaging properties of an environment while sitting in front of a computer on the other side of the globe. Now, the question is no longer whether cities are healthier or unhealthier than their surrounding areas, but why? What aspects of the urban environment promote health and what damage it? Link to this, how can we empower city dwellers, many of whom may be among the most vulnerable in society, lacking a voice or even official recognition, to be heard and included by those who are developing solutions. In a world where more than half of the population now live in cities, we cannot achieve health for all without a major focus on the health of those who live in our increasingly large cities.

Speaker: Prof. Charles Agyemang

Professor,
Global Migration, Ethnicity and Health,
Academic Medical Centre, University of Amsterdam,
Netherlands

Education

2002 - 2005	PhD in Cardiovascular Medicine, Erasmus University of Rotterdam, The Netherlands.
2000 - 2001	MSC in Public Health, University of Edinburgh, Scotland, United Kingdom

Biography

Charles Agyemang is a Professor of Global Migration, Ethnicity & Health at Academic Medical Centre, University of Amsterdam. He received his PhD from Erasmus Medical Centre, University of Rotterdam, and Master degree at Edinburgh University Medical School. His research is focused on ethnic inequalities in cardiovascular diseases (CVDs) and CVDs in low- and middle-income countries.

He is the principal investigator of the RODAM study – European Commission funded project on gene-environmental interaction on obesity & diabetes among African migrants (http://www.rod-am.eu/), and co-investigator of the EC-funded InterConnect project. He is a fellow of the European Research Council (ERC) under the Consolidation Award Programme for top scientists in Europe.

Charles is currently the Vice President of the Migrant Health section of the European Public health Association. He is a core member of the European Hypertension Society Workgroup on Hypertension & Cardiovascular Risk in Low Resource Settings. He is an Associate Editor for Internal and Emergency Medicine, BMC Public Health, International Journal of Hypertension and serves as an Editorial Board member for several journals.
He was member of the WHO taskforce on NCDs in Migrants and also as a member and rapporteur of the Planning Committee for WHO Global Consultation on Migrant Health.
Prof. Agyemang has authored/co-authored over 270 published papers, and edited several books.

Influence of Urbanization and Migration on Cardiovascular Disease Risk Factors among Migrant and Non-Migrant African Populations: Findings from the RODAM Study

Prof. Charles Agyemang

Transitioning of societies and the resulting changes in lifestyles are thought to be a major driving force for the increasing burden of chronic non-communicable diseases (NCDs) such as cardiovascular disease and its risk factors. However, the key specific factors within this broad category of societal transition still remains to be determined.

A major feature of the current societal transition is internal migration of people from rural to urban centres in low- and middle-income countries; and migration of people across international borders. Migrant studies therefore provide a unique opportunity to understand the potential underlying causes of the increasing burden of NCDs, but current research is mainly geared toward analyzing the differences between migrants and the host populations in the countries of settlement in high high-income countries. For better understanding, there is a need to extend migrant health research across national boundaries.

This plenary lecture discusses innovative ways of studying the effect of urbanization and migration on cardiovascular risk factors beyond the common designs and the relevance of extending migrant health studies across national boundaries in the current era of increasing global migration and urbanization. Specifically, it describes the burden and different methods for conducting migrant studies to get better understanding on the rising burden of cardiovascular disease and risk factors in urban and migrant communities. The Research on Obesity and Diabetes among African Migrants (RODAM) study will be used as a case study http://www.rod-am.eu/; the methods, some results, and lessons learned, including challenges and an essential recipe for success that may guide future migrant health research will be discussed.

Speaker: Prof. Kenji Toba

CEO,
Tokyo Metropolitan Institute for Geriatrics and Gerontology,
Japan

Institution And Location	Degree	Year(S)	Field Of Study
The University OF Tokyo	Md	1978	
The University OF Tokyo	Phd	1992	Sex DIFFERENCES IN CARDIOVASCULAR RESPONSE
Department OF Geriatric Medicine, The University OF Tokyo	Assistant Professor	1985-1994	Geriatric Syndrome
Department OF Geriatric Medicine, The University OF Tokyo	Associate Professor	1996-2000	Comprehensive Geriatric Assessment
Department OF Geriatric Medicine, Kyorin University School OF Medicine	Professor AND Chairman	2000-2010	Dementia, Geriatric Medicine
National Center FOR Geriatrics AND Gerontology	Director President	2010-2014 2014-2019	Dementia, Frailty Geriatric Medicine

Perspective of Population Aging and Urbanization in Japan

Prof. Kenji Toba

In Japan, the economic recovery after World War II, brought amazing increase in health expectancy. The economic growth needs a huge manpower moved from rural agriculture area to urban industrial area.

The rapid urbanization had brought shortage of electric power, housing and public transportation. Further, air and water pollution were accompanied by rapid industrial growth. After socio-scientific solution had solved the problems, Tokyo metropolitan have got most clean air and water supply among the OECD capitals in the world. The rapid urbanization accompanied with depopulated villages all over Japan. Most serious problem of rapid urbanization is coming super aged metropolitan where aged people have to live and die alone.

Session 1

Urbanization, Population Aging and Technology Innovation

Moderator: Dr. Ying-Wei Wang, M.D., Dr. P.H.

Director-General,
Health Promotion Administration,
Ministry of Health and Welfare,
R.O.C.(Taiwan)

Education
Dr.P.H., School of Public Health & Tropical Medicine, Tulane University, U.S.A.
M.P.H., School of Public Health & Tropical Medicine, Tulane University, U.S.A.
M.D., School of Medicine, National Taiwan University, Taiwan

Professional Experience
Deputy Director, Department of Medicine, Tzu Chi University.
Director, Department of Medical Humanities, School of Medicine, Tzu Chi University.
Director, Heart Lotus Care Ward, Buddhist Tzu Chi General Hospital.
Secretary-general, Taiwan Society of Health Promotion Hospitals.
Council member, Asia Pacific Hospice Palliative Care Network.
Director, Department of Family Medicine, Buddhist Tzu Chi General Hospital.
Director, Center for Faculty Development and Instructional Resources, Tzu Chi University.
Deputy Director General, Bureau of Health Promotion, Department of Health, Taiwan.
Attending Physician, Department of Family Medicine, Buddhist Tzu Chi General Hospital.
Attending Physician, Department of Geriatrics, Taipei Hospital.
Resident, Department of Family Medicine, National Taiwan University Hospital.

Biography
Dr. Wang Ying-Wei currently serves as the Director General of Health Promotion Administration, Ministry of Health and Welfare in Taiwan. He is also the Associate Professor in the Department of Medical Humanities, Tzuchi University, Taiwan.

Professor Wang had previously served as the Secretary-General of Taiwan Society of Health Promotion Hospitals, and has been newly elected as the governance board member in the International Health Promoting Hospitals Network in June 2018. In addition, he devotes great effort to the development of hospice and palliative care and served as a council member in the Asia Pacific Hospice Palliative Care Network. With his extensive experience in the promotion of palliative care, Professor Wang won the first price in the 2010 international quality of death survey.

Prior to his current position, Professor Wang was devoted in community health promotion, elder community care, mobile medical services and community care for remote areas. On top of promoting primary health care, he also emphasizes the promotion of health in the workplace, school, and cities.

As the Director-General of the Health Promotion Administration, focused on health promotion and non-communicable disease prevention, he promotes health-friendly literacy and maximum communication effectiveness among public health centers, hospitals, civil organizations, and academia in order to elevate the accessibility to health information both for health professionals and the general public.

Speaker: Prof. John Morley

Professor,
Saint Louis University School of Medicine,
United States

Education

1972 M.B., B.Ch., Medicine, Witwatersrand University, South Africa

Current Research

Research involves developing Age Friendly Health Systems and screening for geriatric syndromes. In addition, we study the SAMP8 mouse, an Alzheimer's model, with a particular interest in antisenses as a therapy. We have recently developed the BREATH test, a new test for COPD.

Positions and Employment

2015 - 2018	The Parkway Visiting Professor, Yong Loo Lin School of Medicine (YLLSoM), National University of Singapore (NUS)
2016	Director of the Division of Endocrinology, St. Louis University Medical School, St. Louis Missouri.
1989-2019	Dammert Professor of Gerontology and Director of the Division of Geriatric Medicine, St. Louis University Medical School, St. Louis, Missouri
1989-2011	Director Geriatric Research, Education and Clinical Center, St. Louis VA Medical Center (Jefferson Barracks), St. Louis, Missouri
1985-1989	Director, Geriatric Research, Education and Clinical Center and Chief, Division of Geriatrics, Sepulveda VA Medical Center, Los Angeles and the UCLA San Fernando Valley Program; and Professor in Residence, Department of Medicine, UCLA
1981-1984	Associate Professor, Minneapolis VA Medical Center and University of Minnesota, Minneapolis
1979-1981	Assistant Professor, Minneapolis VA Medical Center and University of Minnesota, Minneapolis
1978-1979	Clinical Endocrine Fellow, Wadsworth VA Hospital, Los Angeles
1977-1978	Research Fellow in Endocrinology (J.M. Hershman, M.D.) University of California, Los Angeles
1975-1976	Registrar (resident) Internal Medicine - Baragwanath Hospital, Johannesburg
1974	Senior House Officer (first-year resident) Internal Medicine - Non-European Hospital, Johannesburg
1974	Senior House Officer (first-year resident) Gynecology - Johannesburg General Hospital
1973	Intern, Internal Medicine - Johannesburg General Hospital
1973	Intern, Surgery - Johannesburg General Hospital

Urbanization, Population Health and Aging

Prof. John Morley

In a modern world where there is a Tsunami of aging, it is important that Population Health focuses on the needs of older persons. This stretches from environmental pollutants and stressors to secondary prevention for geriatric syndromes. When this is all combined we have an Aging Friendly Health System.

Atmospheric and building pollution leads to COPD and Alzheimer's disease. We have found that physical and psychological stressors increase mortality. Screening for caregiver stress and providing support is a key to successful aging.

Our particular approach has been to screen for geriatric syndromes (i.e. frailty, sarcopenia, anorexia of aging and cognitive dysfunction) and providing algorithmic treatment protocols is important in producing Age Friendly societies. We have also developed Cognitive Stimulation Therapy groups, Exercise programs and a Circle of Friends.

The future of aging and Population Health is developing age friendly communities.

Speaker: Prof. Jean-Pierre Michel

Professor,
University of Geneva,
Switzerland

Dr Michel is emeritus professor of medicine and former head of the academic geriatric department (Geneva Hospitals and Medical University) He is also honorary professor of Medicine at Limoges University (F) and Beijing University Hospital (CN) as well as adjunct professor at Mac Gill University (Montreal – Ca) and more recently in Rabat (Morocco)..
He co-founded the European Academy for Medicine of Aging (EAMA) in 1992, the Academia Latinoamericana de Medicina del Adult major (ALMA) in 2001, the Middle East Academy of Medicine of Ageing (MEAMA) in 2002, the Asian Academy for Medicine of Ageing (AAMA) in 2011 and the South Est Asia Academy of Geriatrics in 2018. After several years of work as ambassador of the International Association of Gerontology and Geriatrics-World (IAGG-W) for Asia and the Middle East, he is now acting as Director of the IAGG-W Federation of Geriatric Education.
In parallel he was co-director of the course called "Total Nutrition Therapy – Geriatrics" from 2012 to 2017.
He got the City of Vienna (Austria) life achievement award" in 1998 and the "China Foreign Friendship Award" in 2002 and gave a talk at the Great People Hall in Beijing on this exceptional occasion. During the 2013 IAGG-World congress of Geriatric Medicine in Seoul, he received a "World award" for his long life and global achievement in geriatric medicine
He was elected President of the European Union Geriatric Medicine Society (EUGMS) in 2012 and 2013 and was the editor-in-chief its peer review journal "European Geriatric Medicine" (IF_{2016} = 1.34) from 2010 to 2017. He is now Honorary editor-in-chief this European Geriatric journal.
He was elected full board member of the French National Academy of Medicine (Paris) in 2012 and is currently acting in its International committee. He was elected foreign correspondent of the Real Academia of Medicina de España in 2018.
He has been appointed as WHO expert of the "Aging and Life course" program since 1992 and was co-author of the 1st Global WHO report devoted on "Ageing and Health" launched in 2015.
In 2016, he co-founded the European Interdisciplinary Council on Ageing "EICA", based at Venice International University in San Servolo Island (Italy). In June 2018, he was elected President of the EICA
In 2018, he was welcome as member of the International Federation of Aging scientific committee.
Until now, he has authored more than 420 peer reviewed scientific papers and multiple book chapters (almost 14'000 quotations).
In 2018 he was the 1st editor of the Oxford textbook of Geriatric Medicine (3rd Ed), which got an Award by the British Medical Association. In 2019, he edited two Springer books untitled "Healthy Ageing: midlife prevention of age-related disability" and "Adult vaccines". As chairperson of the working group established at the EU 28 level by the Science Advice for Policy by European Academies (SAPEA), he was the first author of a report on "Transforming the future of ageing" (2019).

Urbanization, Ageing and Health Outcomes

Prof. Jean-Pierre Michel

Urbanization is the process by which humans form dense settlements constructed of buildings, roads, and supporting infrastructure. Historically, urbanization was related to positive economic development and increased health, because cities generally offer better sanitation, opportunity for education and work, good infrastructure and health services. However the current urbanization process is totally different due to rapid and unstructured in-migration of people to cities which especially impacts natural/built environment, health and human wellbeing.

The environmental modifications due to urbanization influence greatly climate changes with increased temperatures, thermal stress and urban heat island effects contrasting with more frequent extreme rainfalls, widespread floods and appearance of new zoonosis. In addition air, noise, water and soil pollutions considerably affect health of the citizens. Non communicable diseases related to pollution risk factors (among them chronic obstructive pulmonary disease, lung cancer, cardio-vascular diseases and stroke) increase slightly and cause currently about 10 million of death per year.

On another hand, migration from rural to urban mainly linked to inequality in development modifies the lifelong health of migrants. Life events before migration considerably impact health and well-being in later life. Only the healthiest and most educated rural to urban migrants will be able to cope with the city life and demand. Their adaptation to the urban life is tied to individual's emotional and instrumental supports, but also the ability to socialize and adapt to life changes. Many factors as housing, diet changes, new life behaviours and increased work stress interfere and can have dramatic consequences on mental and cognitive health.
For the WHO, "Urban environments have the ability to produce health inequities that are systematic, socially produced, and unfair".

Speaker: Prof. Kenji Toba

CEO,
Tokyo Metropolitan Institute for Geriatrics and Gerontology, Japan

Institution And Location	Degree	Year(S)	Field Of Study
The University OF Tokyo	Md	1978	
The University OF Tokyo	Phd	1992	Sex DIFFERENCES IN CARDIOVASCULAR RESPONSE
Department OF Geriatric Medicine, The University OF Tokyo	Assistant Professor	1985-1994	Geriatric Syndrome
Department OF Geriatric Medicine, The University OF Tokyo	Associate Professor	1996-2000	Comprehensive Geriatric Assessment
Department OF Geriatric Medicine, Kyorin University School OF Medicine	Professor AND Chairman	2000-2010	Dementia, Geriatric Medicine
National Center FOR Geriatrics AND Gerontology	Director President	2010-2014 2014-2019	Dementia, Frailty Geriatric Medicine

Universal Health Care for Frail Elderly

Prof. Kenji Toba

There is huge differences of urbanization and universal health care system among South East Asian Countries. However, we have to prepare the common challenges in rapid aging wave in coming 20 to 30 years.

Historical Japanese situation and problems teach us the changes of challenges. Urbanization with economic growth gifted us longevity by enriched medical services. On the other hand, concentrated population and crowded hospital have lost man-to-man type services. Organ specific medicine spur the fragmented medical services further. Recent needs of personalized medicine for multi-morbid elderly bring re-evaluation of geriatric medicine and emerging home care services. We have to prepare two major challenges of urbanization in Japan; Dementia and Frailty. To solve coming common challenges in all South East Asia in future, we would like exchange information and learn with each other from now on.

Moderator: Prof. Kung-Yee Liang

President,
National Health Research Institute,
R.O.C. (Taiwan)

Education

1982	Ph.D. in Biomathematics-Biostatistics, Univ. of Washington, U.S.A.
1979	M.S. in Statistics, Univ. of South Carolina, U.S.A.
1973	B.A. in Mathematics, National Tsing Hua Univ., R.O.C.

Professional Experience

2017-	President, National Health Research Institutes
2010-2017	President, National Yang-Ming University
2006	Acting President, National Health Research Institutes, Taiwan
2003-2006	Vice President, National Health Research Institutes, Taiwan
1986-1990	Associate Professor, Dept. of Biostatistics, Johns Hopkins Univ.
1984-2010	Joint Appointment, Dept. of Epidemiology, Johns Hopkins Univ.
1982-1986	Assistant Professor, Dept. of Biostatistics, Johns Hopkins Univ.

Specialties

Statistical Genetics, Genetics Epidemiology

Awards and Honors

- American Statistical Association's Snedecor Award for best publication in Biometry for 1986 (1987)
- American Public Health Association's Spiegelman Award (1990)
- Member of Alpha Chapter, Delta Omega Society (1991)
- Elected Fellow, American Statistical Association (1995)
- Advising, Mentoring and Teaching Recognition Award, Bloomberg School of Public Health, Johns Hopkins University (1997)
- 2000 Bernard G. Greenberg Distinguished Lecturer, Department of Biostatistics, University of North Carolina (2000)
- Academician, Academia Sinica, R.O.C. (2002)
- Distinguished Alumni Award, National Tsing-Hua University (2006)
- American Public Health Association's Rema Lapouse Award (2010)
- Elected Member, The World Academy of Sciences (TWAS)(2012)
- Internaitional Statistical Institute's Karl Pearson Prize (2015)
- Elected Member, National Academy of Medicine, U.S.A. (2015)
- The Heritage Award, Johns Hopkins Alumni Association (2016)
- Elected Member, Society of Scholars, Johns Hopkins University (2016)

Speaker: Prof. Liang-Kung Chen

Director,
Center for Geriatrics and Gerontology,
Taipei Veterans General Hospital,
R.O.C.(Taiwan)

Education

2007-2013	Professor, Aging and Health Research Center, National Yang Ming University
1989-1996	MD in National Yang Ming University, Taipei, Taiwan

Professional Experience

Board Member, Long-Term Care Promotion Committee, Executive Yuan, Taiwan
Board Member, National Sustainable Development Network, Executive Yuan, Taiwan
Editor-in-Chief, Archives of Gerontology and Geriatrics
Editor-in-Chief, Aging Medicine and Healthcare
Associate Editor, BMC Geriatrics
Associate Editor, Journal of Frailty and Aging

Biography

Dr. Chen attended the National Yang-Ming University School of Medicine from 1989 to 1996, gaining his MD, and becoming the PhD of the Institute of Health Policy and Welfare, National Yang-Ming University to extend his research from biomedical domain to aging and public policy. He started his residency in orthopedic surgery in 1996, and from 1998 to 2003, his residency in family medicine at the Taipei Veterans General Hospital, and became an attending physician of the Department of Family Medicine in 2003. In 2005, he was invited to the University of Oxford as a Visiting Scholar in Department of Clinical Gerontology. Dr. Chen became the Director of Center for Geriatrics and Gerontology, Taipei Veterans General Hospital in 2006 and the Dr. Chen has published about 300 peer-reviewed articles in several domains: (1) frailty and sarcopenia, (2) insulin resistance and metabolic resistance of the older people, (3) age-friendly healthcare systems, and (4) smart health care and artificial intelligence. Dr. Chen is heavily involved in international collaboration for research and healthcare reforms for older people and he is now leading several working groups for research of older people.

Creating a Sustainable Ecosystem for Healthy Aging Technology Innovation

Prof. Liang-Kung Chen

Population aging is a global challenge that generates various impacts to societies across the world. Asia is the most populated and rapidly aging continent in the world, which is experiencing the demographic transition never occurred in human history. Traditional approaches may not sufficiently tackle all these merging challenges, and new technology innovation becomes the fundamental requirement as the solution to population aging in Asia. The developing of artificial intelligence (AI), internet of things (IoT), wearable devices, big data and mobile technology all may contribute to the technology innovation in healthy aging. World Health Organization promotes Integrated Care for Older People (ICOPE) as par of the healthcare reform and the accompanying mobile aging (mAgeing) is the strategy to implement all community-based intervention strategies. However, these technology innovations all encounter the same challenge, i.e. sustainability, either in financial or operational perspectives. In particular, in countries of universal health and long-term care, public sectors sometimes are not able to properly incentivize people for healthy aging. Technology innovation supported by well-designed ecosystem may create a new possibility. In Taiwan, collaboration of private and public sectors, academia and industry, has newly opened a new window to create a sustainable ecosystem. Supported by private insurance company, by wearing designed smart devices with proper data feedback, and the premium may be adjusted based on all healthy aging principles. Academia work closely to provide the insurance company well-developed risk prediction model based on artificial intelligence and health big data. In the meantime, public sectors are also planning implementing ICOPE and mAgeing in the communities together with the national clouds. With proper design of incentives, the whole ecosystem will construct a new healthy aging society with better sustainability and brighter future.

Speaker: Prof. Po-Lun Chang

Professor,
Institute of bioMedical Informatics,
National Yang-Ming University,
R.O.C.(Taiwan)

In professional development, Prof. Polun Chang graduated from National Tsinghua University in Hsinchu, Taiwan in 1986, and obtained his phD degree of Health System in the department of Industrial Engineering in UW-Madison, Wisconsin in 1993. Since 1996, he has been working at National Yang Ming University to support the training of medical students' informatics ability. Currently, he is a co-employed professor of the Institute of Biomedical Informatics and the School of Nursing, and a convener of the Science and Technology Group of the Aging and Health Research Center. He had also served as executive director of the Aging and Health Research Center and chair of the Integrated Health Care (Integration of medical care and nursing) Research Center at National Yang Ming University. He is deeply involved in the design of intelligent technology platform for integrated care and health management models. Since 2015, he is the president of the Taiwan Association for Medical Informatics.

Internationally, since 2014, Prof. Polun Chang has served as an adjunct professor at the School of Nursing, University of Minnesota and an international member of the HIMSS Foundation for Technology Informatics Guiding Education Reform Education Reform (TIGER).In 2013, he was the first non-American emerging leader appearing on the cover of the American Medical Informatics Association (AMIA) website. He is the representative and leader of Taiwan, China and international nursing informatics development, and serves as the chair of the 12th the International Congress on Nursing Informatics in 2014. In the same year, the mobile nursing informatics team (Ming-chuan Kuo, Cathay General Hospital), which he directed, defeated all teams led by physicians and nursing staff from the United States won the unique gold medal in American Medical Informatics Association Provider Innovation in Informatics (Pi^2) Award. They put emphasis on clinical informatics leadership, creative leadership, improved patient safety and care quality, reduced workload and increased efficiency of clinical colleagues. The research also won the Best Paper Award the International Congress on Nursing Informatics. In 2018, he was honored as a lifelong membership of the International Academy of Health Sciences Informatics (IAHSI). At present, supported by the TIGER foundation, which is the first international organization to promote the reform of nursing informatics education, the Center of Excellence in Health Informatics, leadership and Innovations (CEHILI) has been established in Taipei, and it will conduct professional training and certification of informatics competence both in Taiwan and China from 2019 to 2020.

In China, he has participated in many training sessions and lectures on different levels of nursing informatics in hospitals. He has conducted in-depth counseling and training in many university nursing schools and hospital nursing departments. In 2017, the first intelligent medical care and nursing integrated mobile support system in Shanghai was built; The mobile support system for smart home ostomy was established in Changsha and Shanxi in 2018;In 2019, the smart mobile system for case health management was designed in Nanjing. Prof. Polun Chang is familiar with the key policies and practical requirements of China's medical care and health management.

In terms of research, he is specialized in the establishment and development of nursing/clinical informatics technology capacity, the leading informatics model of long-term medical care, and the forward-looking design of smart mobile health platform. His team has good cooperation and interaction with local manufacturers, universities, research institutes and hospitals in China. Meanwhile, with Internet plus nursing theory, experience, practical technology and international research and development capabilities, he has guided many hospitals at home and abroad to establish outstanding nursing informatics teams and talents. As for leadership, he is now focusing on assisting the establishment of a successful hospital informatics capacity development model in China, to explore and train nursing informatics talents and teams, and to build an internationally leading model for health management and technology application development. Academically, he has assisted academic and clinical institutions in China to obtain national natural science projects through his professional experience in the design and integration of mobile medical technology and nursing care. He has many academic publications and books, and is an internationally renowned PhD supervisor and medical informatics expert.

Speaker: Prof. Yeh-Liang Hsu

Professor/ Director,
Gerontechnology Research Center,
Yuan-Ze University,
R.O.C. (Taiwan)

Professional Experience

Professor, Department of Mechanical Engineering, Yuan Ze University
Director, Gerontechnology Research Center, Yuan Ze University
Editor-in-Chief, Gerontechnology (official journal of International Society for Gerontechnology)
IT Director, International Society for Gerontechnology
Editor-in-Chief, Journal of Gerontechnology and Service Management (in Chinese)
Founder / CEO, Seda G-Tech Co. Ltd

Brief Biography

Professor Yeh-Liang Hsu received his bachelor's degree in mechanical engineering from National Taiwan University in 1985, and was conferred PhD by Stanford University in 1992. He then became a professor at Yuan Ze University, Taiwan, where he has had many important roles, including Secretary General and Dean of Academic Affairs.

Professor Hsu directed his research interest in design to the field of gerontechnology, and established the Gerontechnology Research Center in 2003, which is the pioneering research institute in this field in Taiwan. He has published many papers, books and patents in gerontechnology, and is a renowned academic in this field. Professor Hsu has been actively involved in the International Society for Gerontechnology (ISG). He has chaired the 9th World Conference of Gerontechnology in 2014, and is concurrently Editor-in-Chief for "Gerontechnology" and IT Director of ISG.

In 2016, Professor Hsu founded Seda GTech Co. Ltd. Working with 8 young cofounders who were his students, Professor Hsu has been pushing gerontechnology research to real products for daily applications by the older adults and caregivers.

Innovative Technology and Care for Older People with Dementia

Prof. Yeh-Liang Hsu

Facing widespread population aging, people naturally consider applying technologies to provide positive solutions in maximizing the efficiency and effectiveness of workforce and resource for the care of older adults. Gerontechnology is an emerging interdisciplinary field, which has started to receive attention worldwide. Gerontechnology Research Center (GRC) of Yuan Ze University (YZU), Taiwan, was established in 2003, the pioneering research instituted in this field in Taiwan.

A critical goal in gerontechnology product development at GRC is to support the caregivers by providing them information on the real-time status and long term pattern of the older adult. In this regard, Internet of things (IoT) and artificial intelligence (AI) are compelling tools. The AIoT senior care bedroom developed by GRC is presented. The "*Whiz* Series" homeware includes a motion-sensing bed mattress (*Whiz*Pad) for sleep monitoring/leave bed alert and motion-sensing *Whiz*Carpet for mobility monitoring/fall alert. *Whiz*Touch is an IoT light/call button. A Bluetooth IoT gateway *Whiz*Connect is developed to integrate commercial Bluetooth care products into the AIoT bedroom. The implementation of the AIoT senior bedrooms in a dementia nursing home is discussed.

The non-pharmacological intervention has been an essential approach for dementia care. Many studies showed that physical activity (PA) programs for older adults could integrate challenging cognitive activities (CA) to improve cognitive health. Combined PA and CA programs should be promoted as a modality for preventing as well as treating cognitive decline in older adults. GRC has been developing a serious game platform, "*Whiz*Toys." *Whiz*Toys is in the form of puzzle floor mats and can be freely assembled into different shapes. The older adults play games by stepping on the floor mats which send data to mobile phone game Apps. Various games are developed, including matching games, chasing games, piano games, etc. *Whiz*Toys combines physical exercise with cognitive training and multi-sensory stimulation. Standard tests such as "timed up and go (TUG)" are converted into games. The results of the games can be transmitted and recorded in the cloud for future reference. Caregivers can choose suitable games or adjust the difficulty levels of the games from the App, according to the needs, experience, and ability of the older adults. Data and feedback from the field trial of *Whiz*Toys are also discussed.

Keywords: gerontechnology, IoT, AI, non-pharmacological intervention, serious game

Session 2

(1)Urban Mental Health: Challenges and Perspectives
(2)Oral Healthcare of Elderly Dental Patients with Cognitive Decline in Metropolitan Area

Moderator: Dr. Shu-Sen Chang

Associate professor,
Institute of Health Behaviors and Community Sciences,
and Department of Public Health, College of Public Health,
National Taiwan University
R.O.C. (Taiwan)

Research interest areas: suicide research and prevention, mental health, spatial epidemiology

Education:

2007- 2010	PhD, School of Social and Community Medicine, University of Bristol, Bristol, United Kingdom
2004- 2007	MSc, Institute of Epidemiology, College of Public Health, National Taiwan University, Taipei, Taiwan
1991- 1998	MD, College of Medicine, National Taiwan University, Taipei, Taiwan

Employment:

2017 -	Associate professor, Institute of Health Behaviors and Community Sciences, and Department of Public Health, College of Public Health, National Taiwan University, Taipei, Taiwan
2013 -	Honorary assistant professor, Department of Social Work and Social Administration, The University of Hong Kong, Hong Kong
2015 - 2017	Assistant professor, Institute of Health Behaviors and Community Sciences, and Department of Public Health, College of Public Health, National Taiwan University, Taipei, Taiwan
2015 - 2015	Assistant professor, Institute of Health Policy and Management, and Department of Public Health, College of Public Health, National Taiwan University, Taipei, Taiwan
2012 - 2014	Research Assistant Professor, Hong Kong Jockey Club Centre for Suicide Research and Prevention, The University of Hong Kong, Hong Kong
2010 - 2011	Post-doctoral research fellow, School of Social and Community Medicine, University of Bristol, United Kingdom
2004 - 2007	Attending psychiatrist, Ju Shan Hospital, Taoyuan, Taiwan
2000 - 2004	Residency in psychiatry, Department of Psychiatry, National Taiwan University Hospital, Taipei, Taiwan

Licensure and Certification:
Certified psychiatrist, Department of Health, Taiwan, 2003
Licensed physician, Department of Health, Taiwan, 1998

Publications Summary
Scopus: 68 indexed publications; H-Index 24
Google Scholar: 3009 citations; H-Index 31

Speaker: Prof. Matthew Large

Conjoint Professor and Clinical Director,
the University of NSW and the Prince of Wales Hospital,
Sydney, Australia

Education

2015 Doctor of Medical Science, UNSW
1995 FRANZCP
1988 MB BS, University of Sydney,
1988 BSc (Med), University of Sydney

Professional Experience

Professor Large is a senior psychiatrist and is the clinical director of psychiatry at the Prince of Wales Hospitals in Sydney. He has 30-years-experience in public sector psychiatry in urban and rural settings. He is a conjoint professor of psychiatry and the University of NSW.

Biography

Professor Large started his professional career as a nurse before completing medical and medical science degrees in 1988. He qualified as psychiatrist in 1995. He has over 250 publications in peer-reviewed journals. His major research achievements include elucidating the relationship between first episode psychosis and violence, demonstrating the association between earlier onset of psychosis associated with cannabis use and in highlighting the limitations of suicide risk assessment in mental health.

Publications (the latest 3 articles)

1: McHugh CM, Chun Lee RS, Hermens DF, Corderoy A, Large M, Hickie IB. Impulsivity in the self-harm and suicidal behavior of young people: A systematic review and meta-analysis. J Psychiatr Res. 2019 Sep;116:51-60.
2: Chung D, Hadzi-Pavlovic D, Wang M, Swaraj S, Olfson M, Large M. Meta-analysis of suicide rates in the first week and the first month after psychiatric hospitalisation. BMJ Open. 2019 Mar 23;9(3):e023883.
3: Myles N, Myles H, Xia S, Large M, Bird R, Galletly C, Kisely S, Siskind D. A meta-analysis of controlled studies comparing the association between clozapine and other antipsychotic medications and the development of neutropenia. Aust N Z J Psychiatry. 2019 May;53(5):403-412.

Suicide Prevention in Urban and Rural Areas in Australia

Prof. Matthew Large

The presentation will first provide an overview of the relationship between urbanisation and suicide and a detailed analysis of the Australian experience of suicide in urban and rural settings.
In the second part of the presentation, the Australian response to suicide prevention will be outlined, with relevant examples of suicide prevention in urban and remote settings.

Speaker: Prof. Anthony Jorm

Emeritus Professor,
University of Melbourne,
Australia

Previous Positions

Professorial Fellow and NHMRC Senior Principal Fellow, Melbourne School of Population and Global Health, University of Melbourne, 2015-2018.

Professorial Fellow and NHMRC Australia Fellow, Melbourne School of Population Health, University of Melbourne, 2012-2014.

Professorial Fellow and NHMRC Australia Fellow, Orygen Youth Health Research Centre, Centre for Youth Mental Health, University of Melbourne, 2009-2012.

Professorial Fellow and NHMRC Senior Principal Research Fellow, ORYGEN Research Centre, Department of Psychiatry, University of Melbourne, 2005-2008.

Professor, Director and NHMRC Senior Principal Research Fellow, Centre for Mental Health Research, Australian National University, 2001-2004.

Professor, Deputy Director and NHMRC Senior Principal Research Fellow, Centre for Mental Health Research, Australian National University, 1997-2000.

Deputy Director and NHMRC Principal Research Fellow, NHMRC Social Psychiatry Research Unit, Australian National University, 1988-1996.

NHMRC Senior Research Fellow, NHMRC Social Psychiatry Research Unit, Australian National University, 1984-1988.

Senior Lecturer in Psychology, Deakin University, 1981-1984.

Lecturer in Psychology, Deakin University, 1977- 1980.

Part-time Tutor in Psychology, University of NSW, 1975-1976.

Psychologist, NSW Department of Corrective Services, 1974.

Other Positions

Honorary Associate, Department of Medicine, University of Sydney, 1987.
Consultant, World Health Organization, Division of Mental Health, Geneva, 1993.
Visiting Fellow, Centre for Mental Health Research, Australian National University, 2005-2007.
Adjunct Professor, Centre for Research on Aging, Health and Wellbeing, Australian National University, 2012.

Academic Qualifications

Bachelor of Arts (Honours Class I in Psychology), University of Queensland, 1973
Master of Psychology (Experimental Clinical), University of New South Wales, 1975
Doctor of Philosophy, University of New South Wales, 1977
Graduate Diploma of Computing, Deakin University, 1985
Doctor of Science, Australian National University, 1995

Increasing Social Support for People with Mental Health Problems through Mental Health First Aid

Prof. Anthony Jorm

Members of the public can potentially take action to assist someone in their social network who is developing a mental health problem or in a mental health crisis (e.g. they are suicidal). Mental Health First Aid (MHFA) training was developed in Australia to improve public knowledge and skills in this area. It has spread to over 25 countries, with over 3 million people trained globally. A number of randomized controlled trials have been carried out on MHFA training showing improvements in knowledge, intentions and confidence in assisting, reductions in stigmatizing attitudes and increases in helping behavior. Factors behind the program's successful spread are that it builds on the familiar first aid model, it fulfills a public need, it has been tailored to meet different needs, there is a strong partnership with research, dissemination has been devolved, and there is a sustainable funding model. Cultural adaptation and dissemination in low- and middle-income countries is a future challenge.

Moderator: Prof. Allen Ming-Lun Hsu

Distinguished Professor and Dean,
School of Dentistry,
National Yang-Ming University, R.O.C. (Taiwan)

Qualifications

Dr. Med. Dent. Dental Institute
University of Zurich, Switzerland

Dean and Distinguished Professor
School of Dentistry
National Yang-Ming University, Taiwan

President
Association for Dental Education, Asia Pacific (ADEAP)

Past President
South East Asia Association for
Dental Education（SEAADE）

Founders Board
International Federation of Dental
Educators and Associations（IFDEA）

Committee Member
World Dysphagia Summit

Chairman
Dental Residency Review Committee (RRC)
Ministry of Health and Welfare, Taiwan

Chairman
Dental Post Graduate Year Program (PGY)
Joint Commission of Taiwan

Chairman
Committee for Dental Education, Ministry of Education, Taiwan

Editor-in-Chief (2008-2012)
Journal of Dental Sciences (SCI)

Speaker: Prof. Frank Lobbezoo

DDS, PhD,
Academic Centre for Dentistry Amsterdam (ACTA),
Netherlands

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Frank Lobbezoo (1964) graduated cum laude as dentist in 1988 from the University of Utrecht (UU), The Netherlands. In 1992, he obtained his PhD degree from the UU, after which he worked for three years as a postdoctoral fellow at the University of Montreal in Quebec, Canada. As of September 1996, he works at the Academic Centre for Dentistry Amsterdam (ACTA), The Netherlands, where he was appointed as a full professor in 2005. In 2014, he was appointed as Chair of the Department of Oral Health Sciences and Vice-Dean of ACTA. Frank Lobbezoo is specialized in TMD/Orofacial Pain, President of the Dutch Dental Society (NTG), Past President of the European Academy of Craniomandibular Disorders (EACD), and Past President of the International RDC/TMD Consortium, a Network of the International Association of Dental Research (IADR). He served as Visiting Professor at the University of Adelaide in South-Australia, Australia (2006) and at the College of Dentistry of the New York University in New York, USA (2014-2015). In 2016, Frank Lobbezoo received an Honorary Professorship at the School & Hospital of Stomatology, Shandong University in Jinan, Shandong, China. In 2019, he was appointed as Honorary Skou Professor at the Department of Dentistry and Oral Health, Faculty of Health, Aarhus University (AU), Denmark.

Orofacial Pain and Dysfunction in Older People with Impaired Cognition, especially Dementia

Prof. Frank Lobbezoo

Oral health in older people with mild cognitive impairment (MCI) and dementia is poor. In association therewith, orofacial pain is a prevalent condition in this vulnerable population. In this lecture, an overview will be provided of the current knowledge on the prevalence of orofacial pain in MCI and dementia. Tools for the assessment of orofacial pain in non-verbal individuals will be described, with special focus on the Orofacial Pain Scale for Non-Verbal Individuals (OPS-NVI). This tool, that is still under construction, is based on observations of facial activities, body movements, vocalizations, and some specific orofacial behaviors that have been suggested in the literature as being associated with (orofacial) pain. The OPS-NVI has been applied in large-scale studies on the prevalence of orofacial pain and dysfunction in older people with MCI and dementia, the results of which will be presented. The most important take-home message will be that a regular oral examination by healthcare providers in people with MCI and dementia remains imperative, even if no pain is reported.

Speaker: Prof. Martin Schimmel

Professor,
School of Dental Medicine University of Bern,
Switzerland

Martin Schimmel is professor for Gerodontology and Removable Prosthodontics at the Department of Reconstructive Dentistry and head of the Division of Gerodontology / School of Dental Medicine of the University of Bern (Switzerland). He obtained his undergraduate dental degree and Dr. med. dent. from the University of Mainz in Germany. The University of Geneva (Switzerland) awarded his postgraduate degrees Privat-Docent and MAS Oral Biol. He graduated as Swiss federal specialist SSO for reconstructive dentistry and founded Orophys LLC as a spin-off from the University of Bern. Martin received several academic awards including the IADR Unilever Hatton award for clinical research, senior category. Martin serves as a associate editor for Gerodontology and is member of the editorial boards of Clinical Oral Implants Research, the Journal of Oral Rehabilitation and the International Journal of Prosthodonticxas. He is president of the IADR Geriatric Oral Research Group (IADR GORG), past president of the European College of Gerodontology (ECG) and president of the Swiss Society of Gerodontology and Special Care Dentistry (SSGS). His professional career comprises wide clinical experience in private practice, university settings and geriatric hospitals. His academic interests include Gerodontology, CAD / CAM in prosthodontics, oral function and gero-implantology.

Challenges in Oral Care for Patients with Neuro-Cognitive Impairment

Prof. Martin Schimmel

With the world's population ageing, the challenges for the dental profession will be substantial in providing oral care to the older age groups. Not only will elderly adults have retained more teeth, their expectations will also be higher at a time in their lives when their ability to adapt to changes in their oral environment and general health will be increasingly diminish.

Elderly persons with neuro-cognitive impairment are particularly challenged. Stroke is considered one of the leading causes of death and acquired disability with a peak prevalence over the age of 80 years. It may cause debilitating neurological deficiencies that frequently result in sensory deficits, motor impairment, muscular atrophy, cognitive deficits and psychosocial impairment. Stroke patients demonstrate an impaired masticatory performance, possibly due to reduced tongue forces and disturbed oral sensitivity. In patients with dementia, oral care is further complicated by progressing cognitive impairment, difficulties in self-care and a progressive shift towards a diet that is often detrimental to oral and general health.

Those charged with oral care will need to be technically skilled as well as empathetic practitioners whose role will be not only in maintaining oral health. Considerations involving general health and wellbeing are increasingly important especially for patients in long term care facilities. Bedridden patients with dysphagia are at risk to develop aspiration pneumonia which may originate from dental biofilm. Thus, it seems imperative to discuss the under- and postgraduate training programs, the barriers for dental care and to take a glance of the political perspective of oral health care for the frail and elderly.

Speaker: Emeritus Prof. Tatsuji Nishihara

Chairman and President,
Kyushu Dental University,
Japan

Education

1982 - 1986	Graduate School. School of Dentistry. Tokyo Medical and Dental University, Tokyo, Japan. Received Ph.D.
1975 - 1981	School of Dentistry, Kyushu Dental College, Kitakyushu, Japan. Received D.D.S.

Employment

2018 -	Emeritus Professor, Kyushu Dental College
2018 -	Emeritus Professor, Kyushu Dental College
2013 -	Chairman and President, Kyushu Dental University
2012	Chairman and President, Kyushu Dental College
2006 - 2012.	Dean, School of Dentistry, Kyushu Dental College
2004 - 2018.	Chairman and Professor, Department of Health Promotion, Division of Infections and Molecular Biology Kyushu Dental College
1999 - 2004.	Chairman and Professor, Department of Oral Microbiology, Kyushu Dental College
1997 - 1999.	Laboratory Chief, Laboratory of Periodontology, Department of Oral Science, National Institute of Infectious Diseases, Tokyo, Japan.
1993 - 1997.	Laboratory Chief, Laboratory of Periodontology, Department of Oral Science, National Institute of Health, Tokyo, Japan.
1992 - 1993	Senior Researcher, Laboratory of Periodontology, Department of Oral Science, National Institute of Health, Tokyo, Japan.
1990 - 1992	Postdoctoral fellow at the Department of Medicine, Division of Endocrinology and Metabolism, The University of Texas Health Science Center at San Antonio, Texas, USA working with Dr. Gregory R. Mundy.
1990 - 1992	Senior Researcher, Department of Dental Research, National Institute of Health, Tokyo, Japan.
1986 - 1990	Researcher, Department of Dental Research, National Institute of Health, Tokyo, Japan.

Membership in Professional Organization

International Association of Dental Research, member
The American Society for microbiology, member
The American Society for Bone and Mineral Research, member
Japanese Association of Dental Research, member
Japanese Society for Oral Biology, President
Japanese Society for Periodontology, Emeritus Member
The Japanese Society for Microbiology, member
Japanese Society of Bone Metabolism Research, councilor

Visiting Professor

University of Dental Medicine, Yangon (Myanmar)
University of Dental Medicine, Mandalay (Myanmar)
University of Helsinki (Finland)
Srinakharinwirot University (Thailand)
Rangsit University (Thailand)
Taipei Medical University (Taiwan)

Community-based Research Responding to a Highly Aging Society

Emeritus Prof. Tatsuji Nishihara

According to the WHO, the proportion of a society's population that is comprised of persons age 65 or older is called the "aging rate". Japan now has an aging rate of 26%, and is categorized as a super-aged society. The aging of society is by no means limited to Japan and other developed countries including Taiwan.

Many virulence factors of periodontopathic bacteria may induce not only periodontal diseases but also general disorders, such as systemic infectious diseases, cardiovascular diseases, respiratory diseases, diabetes mellitus, and adverse pregnancy outcomes. Among these systemic diseases, aspiration pneumonia brings on a serious social problem. It is well known that the causative agents in aspiration pneumonia are anaerobic and aerobic bacteria in the mouth of elderly citizen.

Many dentists desire a development of new diagnostic methods in dentistry, especially periodontal diseases. We have reported that the new methods based on bio-microsensing technology appear to be useful in a clinical examination of periodontitis for the diagnosis, treatment, and estimation of future risks on physical condition. I would like to discuss on the notable conclusion about "Periodontal medicine" and its new diagnostic methods for the prevention and treatment which are developed in our laboratory.

Recently we have also developed a new method to detect hepatitis B virus (HBV) antigen using saliva instead of blood as a specimen material. New HBV-detection system has very high sensitivity and specificity, indicating an effective screening test for hepatitis B. In particular, this detection system would be easy and attractive alternative because blood sample could be replaced by saliva sample as a specimen material. Hepatitis B is an important occupational hazard for dental health care workers. Therefore, screening of HBV-carrier patients at dental offices is very effective in the improvement of working environment for dental professionals. Moreover, I focus on possibility on the application of new detection device not only to improve oral condition of elderly citizen but also to promote a prosperous and promising longevity society in Taiwan and Japan in the context of evidence-based dentistry in this presentation.

Session 3

Forging Ahead in a New Era of Cancer Prevention and Control

To Live for Love

Moderator: Prof. Mei-Shu Lai

Emeritus Professor,
Institute of Epidemiology and Preventive Medicine,
College of Public Health,
National Taiwan University,
R.O.C. (Taiwan)

Education

1987 - 1994	Ph.D., College of Public Health, National Taiwan University
1980 - 1981	MPH, School of Public Health, University of Pittsburgh
1968 - 1975	M.D., School of Medicine, National Taiwan University
1989	Specialist, Department of Internal Medicine and Family Medicine

Professional Experience

2012 - 2018	President, Taiwan Society of Cancer Registry
2002 - 2015	Director, Taiwan Cancer Registry, College of Public Health, National Taiwan University, Taiwan
2001 - 2015	Professor, Institute of Epidemiology and Preventive Medicine, College of Public Health, National Taiwan University, Taiwan
1998 - 2001	Chief Executive Officer and President, Bureau of National Health Insurance, Department of Health, Executive Yuan, TAIWAN, R.O.C.
1996 - 1998	Vice Minister, Department of Health, Executive Yuan, TAIWAN, R.O.C.
1995 - 1996	Director-General, Bureau of Health Promotion and Protection, Department of Health, Executive Yuan, TAIWAN, R.O.C.
1981 - 1982	Physician of Epidemiology, University of Pittsburgh, USA
1979 - 1981	Research Fellow, Department of Gastrointestinal Medicine, University of Pittsburgh, USA

Speaker: Prof. Michel P. Coleman

Head of the Cancer Survival Group,
London School of Hygiene & Tropical Medicine,
United Kingdom

Education

BA (Hons)	Animal Physiology, Oxford 1970
BM BCh	Medicine and Surgery, Oxford 1975
MSc	Epidemiology, London 1981
MFPHM	Faculty of Public Health Medicine, Member, UK 1985
EU	Public Health Medicine Specialist Register, 1996
FFPH	Faculty of Public Health, Fellow, UK 2006

Biography

Michel qualified in medicine at Oxford last century, and practised in hospital medicine and general practice, later becoming an epidemiologist.

He has been Professor of Epidemiology and Vital Statistics at the London School of Hygiene and Tropical Medicine since 1995. He was Head of the Cancer and Public Health Unit (LSHTM) 1998-2003, Deputy Chief Medical Statistician (Office for National Statistics) 1995-2004, and Head of the WHO UK Collaborating Centre on the Classification of Diseases 1996-2004. He has worked for the World Health Organisation at the International Agency for Research on Cancer in Lyon (1987-1991), and was Medical Director of the Thames Cancer Registry in London (1991-1995).

He has published widely on cancer and on public health, with over 450 publications (h-index 77). He has been involved in the issue of confidentiality and cancer surveillance for 30 years, both in the UK and internationally. His main interests include trends in cancer incidence, mortality and survival, and the application of these tools to the public health control of cancer.

He has been an advisor on cancer registration, research and cancer control to governments in several countries. He has taught epidemiology in many countries. He is co-Principal Investigator of the world-wide CONCORD study of cancer survival with Dr Allemani.

Speaker: Dr. Robert A. Smith

Vice President of American Cancer Society,
United States

Biography

Dr. Robert A. Smith is a cancer epidemiologist and Senior Director, Cancer Control at the National Office of the American Cancer Society in Atlanta, Georgia. He also is Adjunct Professor of Epidemiology at the Rollins School of Public Health, Emory University School of Medicine. His primary research interests are cancer epidemiology, evaluation of cancer prevention and early detection programs, multi-chronic disease models of preventive care, and quality assurance in the delivery of health services. He received his PhD from the State University of New York at Stony Brook in 1983. Prior to joining the staff at the ACS, he held positions with the Boston University School of Public Health, and the United States Centers for Disease Control and Prevention. At the American Cancer Society he leads the development of cancer screening guidelines. He is the author of over 250 peer-reviewed scientific articles, reports, and book chapters. He also is a frequent lecturer on issues related to cancer prevention and early detection.

He serves on many international and national government and professional advisory committees and working groups, including the American College of Radiology Committee on Screening and Emerging Technologies, the American College of Radiology Commission on Breast Imaging, National Colorectal Cancer Roundtable, for which he is the Co-Chair, the International Colorectal Cancer Screening Network, the International Association for the Study of Lung Cancer (IASLC) Lung Cancer CT Screening Task Force, and the Data Safety and Monitoring Committee of the United Kingdom Lung Cancer Screening Trial. He also was among the founding members of Cervical Cancer Action, an international community of organizations and individuals dedicated to working collaboratively to eliminate cervical cancer deaths worldwide.

Among his awards and honors, Dr. Smith is an Honorary Fellow of the Society of Breast Imaging, and in 2004 he was recognized by the National Breast Cancer Awareness Month Board of Sponsors for Outstanding Advances in Breast Cancer. That year he also received the Cancer Prevention Laurel for Outstanding National Leadership from the Cancer Research and Prevention Foundation. In 2011 he received the Medal of Honor from the International Agency for Research on Cancer (IARC).

Using the Power of Cancer Registry Data to Create Strategies for Cancer Control- Examples from the USA

Dr. Robert A. Smith

In the U.S., cancer is the only notifiable chronic condition, and all cases must be reported to the state. The earliest population-based registration of cancer cases in the U.S. was initiated by the Connecticut State Department of Health in 1935 and became state-wide by 1941. For the next 30 years, cancer incidence and mortality data were collected by periodic surveys in selected geographic areas, but the modern system to estimate the national burden of cancer in the U.S. was initiated by the National Cancer Institute's (NCI) Surveillance Epidemiology and End-Results Program (SEER) in 1973. The SEER system began with 5 states and 2 metropolitan areas, and now draws data from 19 geographic areas representing 34% of the U.S. population. In 1992, the Centers for Disease Control established the National Program of Cancer Registries (NPCR) to support cancer registration in all states and territories to aid local cancer control planning. These two federally funded programs work closely with the North American Association of Central Cancer Registries (NAACCR), a collaborative group of US and Canadian organizations that work together to enhance the quality of cancer registry data. In 2017, 55 population-based registries in the U.S. covering 94% of the U.S. population met NAACCR's strict standards. Additionally, the American Cancer Society and the Commission on Cancer of the American College of Surgeons maintains the National Cancer Database, a nationwide oncology database of more than 1,500 accredited cancer programs in the U.S. and Puerto Rico that represents approximately 70% of all newly diagnosed cancer cases. Cancer registration has evolved with cancer control science; whereas registries once recorded only 25 data elements, today over 200 data elements are required. As these new requirements have increased the workloads in institutions required to report data, cancer registries are constantly exploring new strategies to automate reporting electronically. While registries have enabled the opportunity to generate hypotheses, reveal new trends in disease burden, measure progress in disease control, and address important questions related to trends in incidence and mortality, burden of disease and disparities in population subgroups, cancer registries also have not kept pace with recording key information on exposures, mode of cancer detection, and a broad range of treatment variables. Moreover, registry data often are misused, leading to erroneous conclusions about the effectiveness of cancer control interventions. The presentation will highlight novel ways in which registry data have been used for cancer control and misused, leading to mistaken conclusions about trends and the effectiveness of targeted interventions.

Speaker: Dr. Tomohiro Matsuda

Researcher,
National Cancer Center, Tokyo,
Japan

Education

2003	Doctor in Epidemiology/Public Health Faculty of Medicine, Paul Sabatier (Toulouse III) university, Toulouse, France
1998	Master in Epidemiology/Public Health Faculty of Medicine, University of Tokyo, Tokyo, Japan
1996	Bachelor in Medical Law Faculty of Law, Kobe University, Kobe, Japan

Professional Experience

2019	Head, Office of Int'l Affairs, Strategic Planning Bureau
2006	Section Head, Registry Section, National Cancer Registry, Cntr. for Cancer Registries, Cntr. for Cancer Ctrl and Info. Services, National Cancer Center, Tokyo, Japan
2003-2006	Researcher, Dept. of Epidemiology, National Institute of Public Health, Saitama, Japan
2000-2003	Statistician, Researcher, Tarn Cancer Registry (INSERM U558), Toulouse, France
2000-2003	Statistician, Dept. of Med. Info., Institute Claudius Regaud Anti-cancer Center, Toulouse, France

Biography

Dr. Tomohiro Matsuda was born in Tokyo, Japan in 1973. After graduating Kobe University (1996) and Tokyo University (1998), he moved to France as a doctoral student in Paul Sabatier University in Toulouse. He joined Tarn cancer registry, and received a doctoral degree in epidemiology (2003). Dr. Matsuda landed a position of researcher in the Division of Epidemiology in the National Institute of Public Health in Japan.

Currently Dr. Matsuda works in the National Cancer Center in Tokyo as chief of the national cancer registry section, while pursuing research in descriptive cancer epidemiology, especially in incidence and survival comparison. Since 2006, he has managed a project to standardize registration methods and played a key role in enacting the Act on Promotion of Cancer Registries (2013). Dr. Matsuda has been involved in international cancer registration training programs in Korea, China, Malaysia, Indonesia, Philippines, Myanmar, etc. and in the GICR project as the director of the IARC Collaborating Center in Japan. Dr. Matsuda has been the president of the International Association of Cancer Registries, IACR, since 2016 enhancing the capacity of cancer registries worldwide.

Using Power of Cancer Registry Data to Create Strategies for Cancer Control: Experience in Japan

Dr. Tomohiro Matsuda

Despite the long history of cancer registration in Japan spanning over 60 years, the poor completeness of data has been acknowledged as a problem; mean DCN proportion of data has remained around 30%.

The Cancer Control Act, the first comprehensive national cancer control plan, was approved in 2006 in response to the voice of cancer patient groups. The Basic Plan to Promote Cancer Control Program in conformity to the Act was drawn up in 2007, in which both hospital-based and population-based cancer registration is recognized as a central component of cancer control for the first time.

Most unfortunately, however neither incidence nor survival was cited as project target at this point of time. The main goal of the Basic Plan was to decrease age-standardized cancer mortality rate under 75 years old of 20% by 2015. One percent annual decrease will naturally reduce the rate by 10%. An additional 10% decrease will be realized by tobacco control, screening and equalization of quality in cancer care. Infection (HBV, HCV, HPV, HTLV-1 and Helicobacter pylori) is one of the most important cancer risk in Japan, however, promotion of HPV vaccination was aborted because of several reports of adverse effects.

In 2012, 47 prefectures out of 47 had already implemented population-based cancer registries. At the Diet in February 2012, the then prime minister stated that the cancer registry data are the issues that it is indispensable to evaluation of a cancer control, and the fullness supporting it of the registries of the national government is also important. The Act on Promoting Cancer Registries was finally enacted on December 6th, 2013. This Act provides the implementation of a National Cancer Registry. Currently we are able to calculate reliable nationwide incidence and survival rates contributing to the national cancer control program.

The developed countries are even 10 steps ahead of us, we try catching up them and share our experience with the following countries.

Speaker: Prof. Young-Joo Won

Head,
Division of Cancer Registration & Surveillance,
National Cancer Control Institute,
National Cancer Center,
Republic of Korea

Education

2002-2006	PhD. of Public Health, Graduate School of Catholic University
1993-1997	M.P.H of Public Health, Graduate School of Yonsei University
1987-1991	B.A of Health Science, Yonsei University

Professional Experience

2019-	Chief Scientist, Division of Cancer Registration & Surveillance, NCC
2018-2022	Asia Representative, International Association of Cancer Registries (IACR)
2016-	Associate Professor, Graduate School of Cancer Science and Policy, NCC
2015-2019	Senior Scientist, Cancer Registration & Statistics Branch, NCC
2014-2016	Assistant Professor, Graduate School of Cancer Science and Policy, NCC
2012-	Head, Division of Cancer Registration & Surveillance, NCC
2009-2010	Visiting Scientist, Emory University Rollins School of Public Health, USA
2008-2009	Chief, Cancer Registration & Statistics Branch, NCC
2000-	Researcher, Branch of Cancer Registration &Statistics, National Cancer Center
1994-1997	Staff, Medical Record Department, Samsung Medical Center
1992-1994	Staff, Medical Record Department, Kangnam Severance Hospital

Biography

Young-Joo Won, PhD, MPH, CTR is the Head of the Division of Cancer Registration and Surveillance and the current PI of the National Cancer Registration and Statistics System. Dr. Won has worked with the Korea Central Cancer Registry for over 19 years and has collaborated with numerous researchers to utilize the registry population for rapid case ascertainment and other research studies. She has extensive experience with hospital and population-based registry data, registry operations, building of standardized manual, education for tumor registrar, uses of the registry for research purposes. Her current research interests include cancer registration and statistics, multiple primary cancers, rare cancer, childhood, adolescent and young adult cancers.

Using Power of Cancer Registry Data to Create Strategies for Cancer Control: Experience in Korea

Prof. Young-Joo Won

Cancer registries play a critical role in the development and implementation of cancer control programs. Rational planning is very difficult without the means of identifying primary health problems, determining priorities for preventive and curative programs, evaluating whether goals are reached in target groups, and determining what has been achieved in relation to resources expended.

Korea established its first comprehensive Cancer Control Plan (CCP) in 1996. Its goal was to lower the cancer incidence and mortality rates and to improve the quality of life of patients with cancer by promoting research, highlighting the importance of cancer treatment, supporting national cancer control programs, and enforcing professional training and education regarding cancer treatment. As a result of this systematic cancer control, cancer registry data showed that age-standardized cancer incidence rates have decreased since 2012 and mortality rates have declined since 2002. In addition, the 5-year survival rates remarkably improved from 1993–1995 to 2012–2016.

In the initiation of the third 5-Year Plan for National Cancer Control in 2016, strengthening activities for primary cancer prevention, focusing on reducing the incidence of cancer caused by avoidable risk factors, have been highlighted (Ten Codes for Cancer Prevention). In addition, tobacco control activities, such as levying cigarette tax; expanding legislative designated smoke-free areas; comprehensive campaign and education on harmful effect of tobacco use; and restriction on advertising, sponsorship, and promotion from tobacco companies, have been accelerated in Korea. The universal HBV vaccine program that has run since the early 1980s has shifted the risk toward intermediate endemicity and has led to decreased risk of liver cancer in Korea. Cancer registry data have been widely used for the evaluation and monitoring of screening programs. The effectiveness of screening can be determined by the extent of reduced mortality (or reduced incidence) achieved. In cervical cancer, screening effects are decreased invasive cases and more favorable stage distribution. To establish a systematic supporting system for increasing cancer survivors, prevalence and survival rates obtained from the cancer registry are essential.

Crucial and unbiased information on cancer profile can be deduced from statistics derived from the population-based cancer registry data. The primary outcome indicators in cancer control are incidence, mortality, survival, and prevalence. These indicators allowed planning, monitoring, and evaluation of CCP.

Speaker: Prof. Wen-Chung Lee

Professor,
Institute of Epidemiology and Preventive Medicine,
National Taiwan University,
R.O.C.(Taiwan)

Education

1990-1994 PhD in epidemiology, National Taiwan University, Taiwan
1988-1990 MS in epidemiology, National Taiwan University, Taiwan
1981-1988 MD, National Taiwan University, Taiwan

Professional Experience

Director, Graduate Institute of Epidemiology, College of Public Health, National Taiwan University (2005.12~2010.7)
Acting Director, Graduate Institute of Epidemiology, College of Public Health, National Taiwan University. (2004.8~2005.7)
Professor, Graduate Institute of Epidemiology, College of Public Health, National Taiwan University. (2000 till now)
Associate Professor, Graduate Institute of Epidemiology, College of Public Health, National Taiwan University. (1994~2000)
Lecturer, Graduate Institute of Public Health, College of Public Health, National Taiwan University. (1992~1994)
Staff, Bureau of Public Health, Department of Health, Executive Yuan, Taipei, Taiwan. (1989~1991)

Biography

Professor Lee has an MD degree. His professional specialty is epidemiologic methods. He has developed many innovative concepts and methodologies with wide applications in biomedicine and public health. A brief description of some of these is given below:

1. Methodologies for cancer epidemiology: age-period-cohort models, age-standardization methods, potential life lost methods, etc.
2. Methodologies for ultra-high dimensional big data: novel methods to detect weak associations and to control unmeasured confounding in observational studies, and to test treatment effects in randomized controlled trials.
3. Two new metric systems for gauging exposure-disease relations, one based on the sufficient component cause (causal pie) model, and the other, the Lorenz curve.
4. Nontraditional case-control studies (by creating 'counterfactual subjects'): the case-spouse study; and the case-control and case-only studies assuming Hardy-Weinberg equilibrium and gene-environment independence.
5. Bounding formulas for unmeasured confounding and population stratification bias.
6. Multiple-comparison methodologies: for genome-wide association data and gene-expression data.

Moderator: Prof. Hsiu-Hsi Chen

Vice Dean,
College of Public Health (CEPH accredited),
National Taiwan University,
R.O.C.(Taiwan)

Education

1995	Ph.D. in Biostatistics, Biostatistics Unit of Medical Research Council (MRC), Institute of Public Health, Cambridge University, UK
1992	M.Phil. in Biostatistics, Biostatistics Unit of Medical Research Council (MRC), Institute of Public Health, Cambridge University, UK
1988	M.Sc. in Epidemiology, College of Public Health, National Yang-Ming University
1986	DDS in School of Dentistry, Taipei Medical University,1986

Biography

Prof. Hsiu-Hsi Chen is an expert in evaluation of intervention program, with emphasis on population-based cancer screening and also universal vaccination program, by using a series of complex statistical modelling to deal with several thorny issues that cannot be solved by classical approaches. These include the development of different health economic decision models for cancer screening program and also vaccination program and prophylactic treatment. The recent statistical publications on the methodology of applying stochastic process to evaluation of cancer screening model published in JASA and Biometrics with Bayesian and non-Bayesian approach have facilitated the development of health economic decision models. A series of original articles cost-effectiveness (benefit) analysis based on these models have been published in international peer review articles.

Regarding international academic cooperation, Professor Chen has taken the presidency of the international Asian Cancer Screening Conference (Network) held annually since 2004. As far as collaborative research in Western countries is concerned, the long-lasting collaboration with Sweden (Falun Central Hospital), the USA (American Cancer Society), United Kingdom (Wolfson Institute of Preventive Medicine), and also Finland (School of Public Health, University of Tampere) where Professor Chen was awarded the Finland Distinguished Professor (FIDIPRO) issued by the Academy of Finland between 2007 and 2009.

Speaker: Prof. Bettina Borisch

Excutive Director,
World Federation of Public Health Associations,
Switzerland

Education

2006	MS in Public Health
1993	Privat-Docent in Pathological Anatomy at the University of Bern
1975-1982	MD, Christian Albrechts University, Kiel, Germany

Biography

Dr Borisch is an MD and a Histopathologist, MPH and Fellow of the Royal College of Pathology (UK). Her scientific research work delves into neoplastic lesions of the immune system and breast cancer. Her interests also include community-based oncology, health communication and global health including health systems, gendered aspects and implementation research.

She studied medicine and history at the Universities of Kiel (Germany) and Lausanne (Switzerland). She is appointed professor and head of the Institute of Clinical Pathology / University of Geneva in 1995. She becomes the president of the Swiss Cancer League's program against breast cancer. She completes an MPH in 2005 and orientates her activities to Public Health and Global Health. She joins the Institute of Social and Preventive Medicine in 2005 (from 2015 on: Institute of Global Health).

She is Editor in Chief of „Pathobiology"and Co-Editor of „Journal of Public Health Policy". She represents Switzerland in the European Commission Initiative on Breast Cancer (ECIBC). Other appointments include: Scientific council of the International Agency for the Research in cancer (IARC) (2011-14); Janggen-Pöhn-Stiftung; board member Swiss Society for Health Politics; board member Public Health Switzerland; Council of XPomet, Berlin; Sciana Network of Health professionals. In addition to her academic work she acts as the Director and Head of the World Federation of Public Health Associations, the only worldwide representation of Public Health, headquartered in Geneva.

She teaches pre-graduate medical students as well as several post-graduate courses at the Swiss ns international level. Her teaching also involves advocacy with patient group's organisations. She is author and co-author of over 130 publications in her fields of expertise. She regularly takes part in think tanks and fora on health and health care both national and global.

Cancer Strategies as Shown by the European Commission Initiative on Breast Cancer

Prof. Bettina Borisch

Cancer is a whole society task. The EU parliament recognized this fact in 2003 by having voted a resolution that “Calls on the Member States and on the Commission to make the fight against breast cancer a health policy priority and to develop and implement effective strategies for improved preventive health care: screening, diagnosis, treatment and aftercare in order to achieve the highest quality breast-cancer treatment throughout Europe” Among other point under (i) they also underline “improve data compilation and, at the earliest possible opportunity, set up national cancer registers which meet the standards set by the European Network of Cancer Registries, so that the EU may finally have available informative and comparable European data about the development of cancer and breast cancer”. To fulfil this political task the joint Research Center (JRC) of the EU commission got the task to develop guidelines that should be applicable all over the EU member states. That is the start of European Commission Initiative on Breast Cancer (ECIBC).

ECIBC is a person-centred initiative to improve breast cancer care. The JRC, with ECIBC, is developing the most up-to-date evidence-based recommendations on screening and diagnosis, with a platform of trustworthy guidelines for the whole care pathway.

This example will be taken to show the possibilities and challenges of implementing basic public health measures such as intelligent data collection to fulfil the downstream tasks for the health of a population.

Speaker: Dr. Robert A. Smith

Vice President of American Cancer Society,
United States

Biography

Dr. Robert A. Smith is a cancer epidemiologist and Senior Director, Cancer Control at the National Office of the American Cancer Society in Atlanta, Georgia. He also is Adjunct Professor of Epidemiology at the Rollins School of Public Health, Emory University School of Medicine. His primary research interests are cancer epidemiology, evaluation of cancer prevention and early detection programs, multi-chronic disease models of preventive care, and quality assurance in the delivery of health services. He received his PhD from the State University of New York at Stony Brook in 1983. Prior to joining the staff at the ACS, he held positions with the Boston University School of Public Health, and the United States Centers for Disease Control and Prevention. At the American Cancer Society he leads the development of cancer screening guidelines. He is the author of over 250 peer-reviewed scientific articles, reports, and book chapters. He also is a frequent lecturer on issues related to cancer prevention and early detection.

He serves on many international and national government and professional advisory committees and working groups, including the American College of Radiology Committee on Screening and Emerging Technologies, the American College of Radiology Commission on Breast Imaging, National Colorectal Cancer Roundtable, for which he is the Co-Chair, the International Colorectal Cancer Screening Network, the International Association for the Study of Lung Cancer (IASLC) Lung Cancer CT Screening Task Force, and the Data Safety and Monitoring Committee of the United Kingdom Lung Cancer Screening Trial. He also was among the founding members of Cervical Cancer Action, an international community of organizations and individuals dedicated to working collaboratively to eliminate cervical cancer deaths worldwide.

Among his awards and honors, Dr. Smith is an Honorary Fellow of the Society of Breast Imaging, and in 2004 he was recognized by the National Breast Cancer Awareness Month Board of Sponsors for Outstanding Advances in Breast Cancer. That year he also received the Cancer Prevention Laurel for Outstanding National Leadership from the Cancer Research and Prevention Foundation. In 2011 he received the Medal of Honor from the International Agency for Research on Cancer (IARC).

American Guidelines and Quality Assurance in Breast Cancer Screening, Diagnosis, Treatment and Care

Dr. Robert A. Smith

In the U.S., breast cancer is the most common cancer diagnosed in women, the second leading cause of cancer mortality, and a leading cause of premature mortality. Guidelines for breast cancer screening are issued by many organizations in the U.S., but the two dominant sources of guidance are from the United States Preventive Services Task Force, whose guidelines also are linked to minimal standards for coverage for preventive services under the Affordable Care Act, and the American Cancer Society, which has issued cancer screening guidelines in the U.S. for more than 40 years. While these guidelines appear to have important differences, they share more in common than is commonly recognized. Mammography screening is overseen by the U.S. Food and Drug Administration, which oversees compliance with regulatory requirements dictated by the Mammography Quality Standards Act (MQSA). To provide mammography services, a facility must meet quality assurance standards that relate to professional credentialing and experience, record keeping, routine quality assurance procedures and inspections, and peer review of image quality including positioning and compression. Important dimensions of quality assurance, however, are not addressed by the MQSA, including annual screening volume, interpretative skills, and standards for timing from having received an abnormal finding to resolution. Additional shortcomings related to screening are the lack of centralized registers for inviting women to screening, and monitoring follow-up. There also is no centralized monitoring of time from an abnormal finding to follow-up imaging, biopsy, and treatment if a woman is diagnosed with breast cancer. Disparities in outcomes by socioeconomic status, race/ethnicity, rural/urban status are largely attributable to system failures to deliver state-of-the-art care at each of many points in the process from detection through treatment. Numerous efforts are underway in local jurisdictions to overcome these care-delivery shortcomings through the implementation of systems, including patient navigation.

Speaker: Prof. Ling-Ming Tseng

Chief,
Comprehensive Breast Health Center,
R.O.C. (Taiwan)

Education

1982-1989	National Defense Medical Center, M.D.

Surgical & Research Training

2005-2006	Visiting Scientist of Department of Surgical Oncology & Department of Molecular& Cellular Oncology, MD Anderson Cancer Center, the University of Texas, USA
1998	Attending Surgeon, Division of General Surgery, Department of Surgery, Veterans General Hospital-Taipei, Taiwan, ROC
1996-1997	Chief Resident in Surgery in Veterans General Hospital, Taipei, ROC
1992-1996	Surgical Resident in Veterans General Hospital, Taipei

Current Appointments

2019	President of The Breast Cancer Society of Taiwan
2019	Professor, National Yang-Ming University
2019	Professor, National Defense Medical Center
2018	Impassion 030 Steering Committee Member
2017	Chief of Experimental Surgery, Department of Surgery, Veterans General Hospital-Taipei
2016	PALLAS Steering Committee Member, NeoALTTO Steering Committee Member
2016	Chief of Comprehensive Breast Health Center, Department of Surgery, Veterans General Hospital-Taipei
2010	Secretary General of The Breast Cancer Society of Taiwan
2009	Council of Taiwan association of endocrine surgeons
2007-2010	Council of The Breast Cancer Society of Taiwan
2000-2009	Secretary General of Taiwan association of endocrine surgeons
1998-	Attending Surgeon in Division of General Surgery, Department of Surgery, Veterans General Hospital-Taipei
1998-	Committeeman of Breast Cancer Committee, Taiwan Cooperative Oncology Group, Division of Cancer Research, National Health Research Institutes

Membership in Medical and Scientific Society

1.Taiwan Surgical Association
2.Taiwan Association of Gastrointestinal Surgery
3.Taiwan Association of Endocrine Surgeons
4.The Breast Cancer Society of Taiwan
5.The Chinese Oncology Society

Asia Guidelines and Quality Assurance in Breast Cancer Screening, Diagnosis, Treatment and Care

Prof. Ling-Ming Tseng

Breast cancer is rapid growing in many Asia countries in recent decades. In Taiwan, universal biennial mammography resulted in a substantial reduction 41% in breast cancer deaths and more early breast cancer compared with population-based screening for breast cancer with annual clinical breast examination. The "Cancer Prevention Law" was approved in Taiwan since 2003. The government has actively promoted the prevention and treatment of cancer. The strategies cover cancer prevention, screening, diagnosis, treatment quality, cancer database registration, hospice, and many other orientations, including strengthening cancer case management and establishing the cancer single resource service window. The seamless integration of screening, diagnosis, and treatment of cancer and improvement of cancer patients' life quality meets the recommendation of the World Health Organization. Studies showed interethnic different epidemiology and clinic-pathology of female breast cancer. Taiwan and other Asia countries have a more early-onset age of breast cancer compared to the United States and Europe. Studies from Dr. Lu's group, NTUH demonstrate that there is high hormone receptor positive and low triple negative breast cancer prevalence of young female breast cancer in Asians. Meanwhile, Asia breast cancer patients have higher frequency of luminal B subtype and TP53 mutations and more immune-active microenvironment than in the West. Epidemiologic, translational studies & clinical trials from Asia are needed to refine current breast cancer treatment strategies about prevention, diagnosis, and management which based on evidence form the West. Pan-Asian adapted ESMO Clinical Practice Guidelines for the management of patients with early breast cancer is going to be published through collaboration among Asia countries this year.

Plenary 2

Urban Health

Moderator: Prof. Chyong-Huey Lai

Professor and Vice Superintendent,
Chang Gung Memorial Hospital,
Linkou Branch, Chang Gung University College of Medicine,
R.O.C. (Taiwan)

Dr. Chyong-Huey Lai is Professor and Vice Superintendent of Chang Gung Memorial Hospital (CGMH), Linkou Branch, and Distinguished Professor of Chang Gung University College of Medicine, Taoyuan, Taiwan. She is also the Vice Chair of the Research and Development Committee at Chang Gung Medical Foundation (2012-present). She served Chairperson of Drug Advisory Committee, Taiwan Food and Drug Administration (2013-2018). She was President of Taiwan Medical Women's Association (2014-2017). Dr. Lai obtained her M.D. degree from College of Medicine, National Taiwan University in 1982. She was Chairperson of Department of Obstetrics and Gynecology (2000-2007), CGMH. She was President of the Taiwan Association of Gynecologic Oncologists (2002-2004) and a Council Member of International Gynecologic Cancer Society (2002-2006). Under her leadership, the Gynecologic Cancer Research team of CGMH engaged in many clinical and basic researches for improving management of gynecologic cancer care and in translational researches. Her team participates actively in multi-center clinical trials. Dr. Lai served the founding President of Asian Gynecologic Oncology Group (AGOG) 2005 to 2015, and has continued her service as Honorary Chairperson and Advisor of the AGOG since November 2015. She is also Chair of Cervical Disease Committee of the Taiwan Cooperative Oncology Group (TGOG) (2009 till present). Dr. Lai's areas of research are cervical cancer prognosis, screening, HPV molecular epidemiology, molecular imaging, genomic medicine, and gynecologic cancer biology and therapeutics. She received Excellence Award from the National Science Council, Taiwan in 2007 and 2010, respectively for her contribution in medical research. She serves several editorial boards, such as "Gynecologic Oncology" (2005 till present), Biomedical Journal (1996 till present), Journal of Formosan Medical Association (since 2014), and "International Journal of Gynecological Cancer" (2001-2008).

Moderator: Prof. Cordia Chu

Director,
Centre for Environment and Population Health,
Griffith University,
Australia

Education

1986	PHD in Sociology and Medical Anthropology, Queensland University
1973	M.A. in Folklore (Health Beliefs and Practices), Indiana University
1969	B.S.SC. with Honours in Sociology and Social Work, Chinese University of Hong Kong

Professional Experience

Research Expertise

- Settings-based Integrated Planning for Environment and Population Health
- Research Design and Planning
- Health Promotion Theory and Strategies
- Community Development and Empowerment in Reproductive Health
- Community Needs Assessment and Health Policy Formation
- Workplace Health Promotion and Safety Management

Current Teaching Areas

Research Design and Planning
Social and Behavioural Determinants of Health
Health Promotion Strategies and Planning

Academic Distinctions and Awards

2008	Queensland Government Education and Training International Award for Best Practices in international collaborations
1999,2000	Excellence in Teaching, Certificate of Commendation, "Honours and Postgraduate Supervision"., Griffith University
1999	Best Lecturer Award by the Student Society of Psychology sponsored by the School of Applied Psychology, Griffith University

Honorary Appointments:

2007-	Honorary Fellow, Australian Institute of Environmental Health
2006-	Adjunct Professor, Institute of Population Research, Faculty of Law, Zhejiang University, China
1997-2000	Honorary Advisor to the School of Public Health, Beijing Medical University
1994-2002	Centre Associate, Centre for Health Promotion, University of Toronto

Speaker: Dr. Ying-Wei Wang, M.D., Dr. P.H.

Director-General,
Health Promotion Administration,
Ministry of Health and Welfare,
R.O.C.(Taiwan)

Education
Dr.P.H., School of Public Health & Tropical Medicine, Tulane University, U.S.A.
M.P.H., School of Public Health & Tropical Medicine, Tulane University, U.S.A.
M.D., School of Medicine, National Taiwan University, Taiwan

Professional Experience
Deputy Director, Department of Medicine, Tzu Chi University.
Director, Department of Medical Humanities, School of Medicine, Tzu Chi University.
Director, Heart Lotus Care Ward, Buddhist Tzu Chi General Hospital.
Secretary-general, Taiwan Society of Health Promotion Hospitals.
Council member, Asia Pacific Hospice Palliative Care Network.
Director, Department of Family Medicine, Buddhist Tzu Chi General Hospital.
Director, Center for Faculty Development and Instructional Resources, Tzu Chi University.
Deputy Director General, Bureau of Health Promotion, Department of Health, Taiwan.
Attending Physician, Department of Family Medicine, Buddhist Tzu Chi General Hospital.
Attending Physician, Department of Geriatrics, Taipei Hospital.
Resident, Department of Family Medicine, National Taiwan University Hospital.

Biography
Dr. Wang Ying-Wei currently serves as the Director General of Health Promotion Administration, Ministry of Health and Welfare in Taiwan. He is also the Associate Professor in the Department of Medical Humanities, Tzuchi University, Taiwan.

Professor Wang had previously served as the Secretary-General of Taiwan Society of Health Promotion Hospitals, and has been newly elected as the governance board member in the International Health Promoting Hospitals Network in June 2018. In addition, he devotes great effort to the development of hospice and palliative care and served as a council member in the Asia Pacific Hospice Palliative Care Network. With his extensive experience in the promotion of palliative care, Professor Wang won the first price in the 2010 international quality of death survey.

Prior to his current position, Professor Wang was devoted in community health promotion, elder community care, mobile medical services and community care for remote areas. On top of promoting primary health care, he also emphasizes the promotion of health in the workplace, school, and cities.

As the Director-General of the Health Promotion Administration, focused on health promotion and non-communicable disease prevention, he promotes health-friendly literacy and maximum communication effectiveness among public health centers, hospitals, civil organizations, and academia in order to elevate the accessibility to health information both for health professionals and the general public.

Speaker: Dr. Padmini Murthy

Professor,
New York Medical College,
United States

Dr. Murthy is a physician (a trained obstetrician and gynecologist) and an activist who did her residency in Obstetrics and Gynecology. She has practiced medicine and public health for the past 28 years in various countries. She has been working in various arenas of the health care industry. And worked as consultant for UNFPA. She has a MPH and a MS in Management from New York University. Dr. Murthy serves as the Medical Women's International Association NGO representative to the United Nations. She has served as a member of the Executive Council of the NGO CSW Committee of NY, and the DPI NGO executive committee of NY at the United Nations. She has been elected as Secretary General of medical Women's International association which has women physician members from 80 countries.

Dr Murthy has developed a complete on line certificate on global health and has been able to reach out to international students. Dr. Murthy is widely published and is the author and editor of Women's Global Health and Human Rights (Jones and Bartlett publisher) which is used as a text book worldwide and she serves as a peer reviewer for several publications. Her poetry book Mini's Musings was published in 2012.She is currently working on her 3rd book on the use of technology in promoting health. She has made over 200 presentations on women's and children's health nationally and internationally in scientific conferences and in the United Nations and countries where she has been invited.to.

She has been working to promote safe motherhood and other health initiatives focused on women in India, Malawi and Grenada. Dr. Murthy has been the recipient of numerous national and international awards. She was the 1st American woman physician to receive the Jhirad Oration Award (in Seoul, Korea) conferred at an international conference in recognition of her service and work to MWIA. She has also been the recipient of the Soujouner Truth Pin which is given to those women who excel in community service. In June 2015, she was presented Millennium Milestone Maker Award at the 9th Annual Women's Symposium at Sias University, China. In 2016 She was the first Indian born American in over 70 years to receive the Elizabeth Blackwell Medal from American Medical Women's Association for her work in promoting women's health globally. She is the recipient of the Lalita Pawar memorial award in 2016 conferred by the Association of Medical Women in India Nagpur for her work in promoting women' s health and human rights. In 2017 Murthy was conferred the prestigious Dr Homi Colabawall Oration in Mumbai India for her work on promoting women's health. In 2018 she received a mentor ship award from the Australian medical students and Exceptional Woman of Excellence Award at the Women economic Forum in New Delhi and award for promoting human rights of women from Taiwanese Medical association at Health Literacy conference. In March 2019 Murthy received a for a second consecutive year a mentorship award for mentoring Australian medical students from the Notre Dame University in Sydney Australia. She is also the 2019 recipient of the Human Spirit and Cultural Harmony award from African Views and the Board of Trustees of the National Council of Traditional rulers of Africa

Murthy is currently chair elect of the International Health Section of the American Public Health Association which is one of the largest associations of public health professionals in the world.

Murthy is married to a physician and is the mother of a daughter who works in international development and education.

A Global Overview of the Progress and Challenges in Achieving SDG 3 and SDG 5 among Women and Children in Urban Areas

Dr. Padmini Murthy

Universal Health Coverage is on the forefront of the global agenda and has gained momentum globally among various stakeholders and the e highest attainable standard of health is a fundamental right of every person. Gender-based discrimination, however, undercuts this right. It can render women more susceptible to sickness and less likely to obtain care, for reasons ranging from affordability to social conventions keeping them at home. In order to make UHC a reality the social determinants which contribute to the progress and challenges of achieving the targets of SDGs 3 and 5 in urban areas will be discussed in this presentation. On September 25, 2015 at the United Nations Generally Assembly the 2030 Agenda "Transforming Our World: The 2030 Agenda For Sustainable Development "was adopted by over 150 heads of state who were present. As we know the focus of "Goal 11 is to make cities and human settlements inclusive, safe, resilient and sustainable provides an unparalleled opportunity for the attainment of collective and inclusive progress, and for the achievement of sustainable development in the world."[1]

Some of the challenges faced at local and national levels in urban areas while implementing the SDG 3 and SDG 5 for women are 1. Lack of specific policies which address women's health and the needs of the girl child. 2. Lack of access to basic health care services and lifesaving medications due to unequal distribution in urban areas. 3. Unsafe environments with increasing overcrowding in urban slums without basic sanitation clear air and, adequate water supply. 4. Lack of opportunities for girls and women to attend schools, pursue gainful employment and reach their full due to continued gender-based discrimination .5. Cultural norms and practices that prevent women and girls from availing the same quality of health care facilities as boys and men.

A snapshot of the progress made in meeting the SDG 3 and SD 5 targets specific to women and the girl child in urban areas of Asia, Africa, Caribbean Latin America, Caribbean and Western Pacific will be discussed in the time line from 2015 till the present.
In conclusion a brief discussion of recommendation by global stakeholders and an overview of the efforts being made by *Governments, UN agencies, Civil Societies, Academia, Think Tanks and Foundations* to scale up meeting the targets of SDGs 3 and 5 will be highlighted .

1. United Nations (2018) . UN High Level Political Forum on Sustainable Development . Accessed August 11th 2019 https://sustainabledevelopment.un.org/content/documents/197282018_background_notes_SDG_11_v3.pdf

Speaker: Prof. Masamine Jimba

Professor,
Department of Community and Global Health,
the University of Tokyo,
Japan

Dr. Masamine Jimba worked as a physician for two years and subsequently studied public health in Tokyo and Boston. He received his master's degree from The National Institute of Public Health in Japan in 1989 and Ph.D. from Hamamatsu University School of Medicine in Japan in 1995.

Dr. Jimba's research interests cover health promotion, global health, human security, and other broad public health issues in the world. He has published more than 260 articles and more than 10 book chapters. His is currently interested in positive deviance approach as they show us a way to know hidden truth in real life and support context-specific actions in the field.

Dr. Jimba has rich experience in the field of global health. From 1994 to 1996, he worked as a WHO Health Coordinator for the Gaza Strip and the West Bank. Then, from 1996 to 2001, he worked in rural Nepal as a team leader of the School and Community Health Project by the Japan International Cooperation Agency and the Japan Medical Association. After coming back to Japan in 2002, he started to work in the university and has been working on health projects in Asia, Africa and Latin America. He is also the Presidents of the Japan Association for International Health and of the Asia-Pacific Consortium for Public Health, and an executive member of several organizations.

Helping the Poor, Not the Places by Using Positive Deviance Approach in Urban Health

Prof. Masamine Jimba

According to Plato, “any city, however small, is in fact divided into two, one the city of the poor, the other of the rich.” It might have been true 2500 years ago, but in many current cities in the world, any city cannot be simply divided into two. Each city has three types of populations belonging to: upper, middle, and lower income groups. Urban health must cover all them, but the poor tend to be left behind as they may be homeless, undocumented migrants, living in the slum or other impoverished places. Where improving such environment of the places are difficult, positive deviance approach has been taken to improve health and wellbeing of those who had been left behind. It was effective for TB control of homeless people in Japan, mental health of migrants in Netherland, children’s nutrition in India, and others. However, most of these successes have not been scaled up throughout the world, partly because “among cities, failures seem similar while successes feel unique (Glaeser E. Triumph of the City, 2011, p223). What we need may not be scaling up the same success of one city to other cities, but to produce unique successful solutions in different cities. Positive deviance approach can give us a way to make such solutions, by helping poor people, not poor places (Glaeser E, p255).

Speaker: Dr. Joreintje Mackenbach

Assistant Professor,
Amsterdam University Medical Center,
Netherlands

Education

2012 - 2016	PhD (with distinction) in Epidemiology, VU University Medical Center, Amsterdam, the Netherlands.
2010 - 2012	MSc in Public Health, Erasmus University Medical Center & Rotterdam, the Netherlands
2010 - 2012	MSc in Health Economics, Policy & Law, Erasmus University, Rotterdam, the Netherlands
2006 -	BSc in Health Policy & Management, Erasmus University Rotterdam, the Netherlands

Professional Experience

2017 -	Assistant Professor at the department of Epidemiology and Biostatistics, Amsterdam University Medical Centers, the Netherlands.
2016 - 2017	Postdoctoral researcher at the department of Epidemiology and Biostatistics, Amsterdam University Medical Centers, the Netherlands.
2012 - 2016	PhD candidate at the department of Epidemiology and Biostatistics, Amsterdam University Medical Centers, the Netherlands

Biography

Dr. Mackenbach is a registered epidemiologist at the Department of Epidemiology and Biostatistics at the Amsterdam Public Health research institute in the Netherlands. She is currently working as assistant professor on the upstream determinants of lifestyle behaviours and chronic disease risk, and supervises four PhD students. Dr. Mackenbach servers as academic editor at Public Health Nutrition and editorial board member at the International Journal of Behavioral Nutrition and Physical Activity.

In 2017, Dr. Mackenbach received a personal research grant from NWO. With this Veni grant, she investigates how food environments influence food choices, and why this may differ between regions and subgroups. In addition, Dr. Mackenbach is project manager of the Supreme Nudge project, a 5-year project financed by the Dutch Heart Foundation and ZonMw, that uses environmental interventions to improve cardiometabolic health. In addition, she is recipient of an Amsterdam Public Health seed grant in 2017 (focused on food pricing) and two Amsterdam Public Health seed grants in 2019 (focus on GPS).

Dr. Mackenbach obtained her PhD in 2016 (cum laude) with a thesis on 'obesogenic environments'. This thesis was conducted within the European SPOTLIGHT project. During her PhD, Dr. Mackenbach was recipient of the EMGO+ travel grant, which allowed her to visit the department of Public Health at the Otago University in Wellington, New Zealand in 2013. She is also recipient of an EASO travel grant, the EASO New Investigator Public Health Award 2017, and Young Forum Gastein scholarships in 2014, 2015 and 2019.

Full profile and publication list available via https://research.vumc.nl/en/persons/joreintje-mackenbach

Publications

- Mackenbach JD, Dijkstra SC, Beulens JWJ, Seidell JC, Snijder MB, Stronks K, Monsivais P, Nicolaou M. Socioeconomic and ethnic differences in the relation between dietary costs and dietary quality: the HELIUS study. Nutr J 2019;18(1):21.
- de Groot R, Hoenink JC, Mackenbach JD, den Braver NR, Pinho MGM, Brassinga D, Prinsze FJ, Timmer TC, de Kort WLAM, Brug J, van den Hurk K, Lakerveld J. The association between population density and blood lipid levels in Dutch blood donors. Int J Health Geogr 2019;18(1):3

Data and Data Sources Needed to Understand the Effect of Urban Environments on Health

Dr. Joreintje Mackenbach

What do we know about urban environments affecting health?

Cities display characteristics that can both promote and hinder health. On the one hand, urban living offers many opportunities such as better education, more jobs and economy of scale in the provision and effectiveness of health care services. On the other hand, urban areas also pose risks due to lack of proper sanitation and housing, poorly planned transport and food systems and greater stress. Insight into these 'urban health advantages' and 'urban health penalties' is crucial for the planning and regeneration of cities across the world. At the same time, there a large variation in urban health outcomes which may partly be due to the clustering of certain population groups in cities, and partly due to the clustering of environmental factors such as walkability and access to health services. I will first discuss what we know about urban environmental factors influencing health.

What data and data sources are needed to monitor these effects and successfully implement policies and interventions?

Data on urban environmental factors and health outcomes can be obtained in different ways. Handheld air pollution measuring devices, land registries, remote sensing, physical street audits, virtual street audits, health registries, population surveys, ecological momentary assessments and GPS tracking devices all provide different data, of which some are more reliable, costly, feasible and useful for public health purposes. I will provide some examples of studies using different data sources and what insights they have provided. This will cover studies on air and noise pollution, food environments, walkability, greenspaces, UV radiation and housing. Additionally, I will highlight some innovative ways of collecting data on urban environments.

Speaker: Prof. Nadav Davidovitch

Director,
School of Public Health,
Ben Gurion University,
Israel

Biography

Nadav Davidovitch, MD, MPH, PhD is an epidemiologist and public health physician. He is a Full Professor and Director, School of Public Health at the Faculty of Health Sciences, Ben-Gurion University of the Negev in Israel. He teaches on health policy, public health, one health/ecohealth, health promotion, the Israeli healthcare system, public health ethics, and global health.

Prof. Davidovitch served as Public Health Officer at the Central District, Public Health Services, Ministry of Health, Israel and he has just finished his second term as Chair, Israeli Public Health Physician Association. He was a Fulbright visiting professor at Department of Sociomedical Sciences, School of Public Health, Columbia University (2005-2006) and a visiting professor at the School of Public Health, University of Illinois – Chicago (2008 and 2016). His current research deals with health policy; health inequities; health and immigration; vaccination policy; environmental health and public health history and ethics.

Prof. Davidovitch serves on several international and national committees, among them: Executive Committee, European Public Health Association; Head of Middle East Chapter, International Society for Environmental Epidemiology; Israel national advisory committee for health promotion; joint committee on environmental health (Israel Ministry of Health and Ministry for the Protection of the Environment); Israeli Health Impact Assessment Working Group. He authored or co-authored over 130 papers and book chapters, coedited six volumes and books and published his work in leading medical and health policy journals, such as the New England Journal of Medicine, Lancet, Clinical Infectious Diseases, Emerging Infectious Diseases, Journal of Pediatrics, Vaccine, Social Science and Medicine, and Law & Contemporary Problems.

Healthy Placemaking in the Negev: Innovative Platform for Urban Health

Prof. Nadav Davidovitch

Background: Health disparities plague Israel's south, the Negev Desert. Ben Gurion University of the Negev together with the Negev Now Network and Drexel University (USA) teamed up with the Israeli Ministry of Health, local municipalities and NGOs to address this challenge by developing a context-driven approach to health promotion: Healthy Placemaking. Healthy Placemaking refers to a collaborative process by which we can shape the public realm in order to maximize shared values, and promote the health and well-being of the community. We engage with faculty, students and partners in various ways including community engagement, masterclasses, hackathons and problem based learning. The main philosophy behind these activities is to develop together innovative ways to promote healthy placemaking processes, to inspire people to collectively reimagine and reinvent public spaces as the heart of every community in order to improve the well-being of a neighborhood, city, or region.

Objectives: We draw upon theory, existing infrastructure, and the physical, cultural and social identities in the Negev to establish patterns of healthy placemaking in marginalized neighborhoods. We utilize the community-university relationship to train healthy placemakers and launch model projects in public spaces.

Results: Projects initiated during the training, included community gardens, women's fitness groups and youth bike clubs, all in impoverished neighborhoods, as well as intersectoral health forums in the Negev's main cities. Participating NGOs are partnering with agencies with whom they've never collaborated before, practitioners and students are thriving in the shared classroom and participation rates in their projects are high. During last year a Food Lab initiative has focused on food waste, nutrition and sustainability. It was developed in order to facilitate creative patterns of health promotion activities related to nutrition and food, by paying particular attention to food and nutrition policies and practices in the community, taking into consideration the physical, cultural, and social identities that define a place, and support its ongoing evolution. The initiative involved a variety of goals and disciplines. Our goal is to broaden the initiative to be adapted to a variety of settings in the Negev, with a strong focus on schools, to be integrated with other healthy placemaking existing activities.

Conclusions: The chemistry between the various stakeholders, including students and NGOs, exceeded expectations. Global and local wisdom and action were woven in ways that blurred boundaries between student and practitioner, expert and "target audience." Participants bridged the university-community divide and demonstrated how context-sensitivity and collaborative learning spurs creative and effective healthy placemaking.

Speaker: Prof. Hsiu-Hsi Chen

Vice Dean,
College of Public Health,
National Taiwan University,
R.O.C. (Taiwan)

Education

1995	Ph.D. in Biostatistics. Biostatistics Unit of Medical Research Council (MRC), Institute of Public Health, Cambridge University, UK
1992	M.Phil. in Biostatistics. Biostatistics Unit of Medical Research Council (MRC), Institute of Public Health, Cambridge University, UK
1988	M.Sc. in Epidemiology, College of Public Health, National Yang-Ming University
1986	DDS in School of Dentistry, Taipei Medical University,1986

Biography

Prof. Hsiu-Hsi Chen is an expert in evaluation of intervention program, with emphasis on population-based cancer screening and also universal vaccination program, by using a series of complex statistical modelling to deal with several thorny issues that cannot be solved by classical approaches. These include the development of different health economic decision models for cancer screening program and also vaccination program and prophylactic treatment. The recent statistical publications on the methodology of applying stochastic process to evaluation of cancer screening model published in JASA and Biometrics with Bayesian and non-Bayesian approach have facilitated the development of health economic decision models. A series of original articles cost-effectiveness (benefit) analysis based on these models have been published in international peer review articles.

Regarding international academic cooperation, Professor Chen has taken the presidency of the international Asian Cancer Screening Conference (Network) held annually since 2004. As far as collaborative research in Western countries is concerned, the long-lasting collaboration with Sweden (Falun Central Hospital), the USA (American Cancer Society), United Kingdom (Wolfson Institute of Preventive Medicine), and also Finland (School of Public Health, University of Tampere) where Professor Chen was awarded the Finland Distinguished Professor (FIDIPRO) issued by the Academy of Finland between 2007 and 2009.

Apply Big Data to Urban Health

Prof. Hsiu-Hsi Chen

Monitoring urban health with advanced technology such as Big Data, IoT, and Artificial Intelligence plays an important role in the enhancement of the liveability of “Smart Cities”. From the literature, the vast of the Big Data that shapes urban health is obtained from the elaboration of the finding from two main avenues, sensors installed in cities and health data. However, the exploration of urban health has been limited by the interpretation of sensor data from IoT devices and heath data, separately without integrating sensor data with health data as a whole.

Here, we first focus on how to make use of various kinds of health data to assess all the contexts defined within urban health from demographic features, personal attributes, life styles, health-seeking behaviour, health services, and medical care in commensuration with the properties of Big Data in terms of 4V. Several examples are demonstrated by the better use of big health data and health risk assessment analysis to assess the impact of these urbanized characteristics on disease burden, life expectancy, and economical outcomes (such as years of life lost (YLL), and disability adjusted life years (DALYs)).

We then propose how to consolidate a networks of sensor data obtained from IoT with different dimensions (including urban climates and pollutants) with integrated health data as a unifying model for the improvement of urban liveability while planning Smart City.

Session 5

What a Perfect Day for People Living with Dementia - Dementia Environmental Design

Moderator: Dr. Shwu-Feng Tsay

Director-General,
Department of Nursing and Health Care,
Ministry of Health and Welfare,
R.O.C.(Taiwan)

Education
PhD, Institute of Public Affairs, National Sun Yet-Sen University, Taiwan
MPH, School of Public Health, Johns Hopkins University, USA
MSN, School of Nursing, National Taiwan University, Taiwan

Experiences
Deputy Director-General , Health Bureau, Taichung City Government
Deputy Director-General, Department of Health, Taiwan
Director, Division of Health Promotion, Health Bureau, Kaohsiung City Government

Expertise
Policy Planning、Nursing Policy、Long-Term Care

Biography
Her expertise is about health policy planning and evaluation. She is committed to nursing human resources development, accreditation of nursing homes and special healthcare system for indigenous people and off-island areas. She has developed the unique model for Taichung Aging Friendly City during 2012-2015 and initiative National Dementia Action Plan in Taiwan in 2017. She is experienced about the Train-the-Trainer model for education and the evidence-based practice.

Speaker: Prof. Gail Elliot

Gerontologist & Dementia Specialist,
DementiAbility Enterprises Inc.,
Canada

Education

1993	Therapeutic Touch Sheridan College, Oakville
1989	Validation Therapist Certification Cleveland, Ohio
1981	Master Of Arts in Gerontology University of South Florida, Tampa, Florida
1980	Bachelor of Applied Sciences (B.A.Sc.) University of Guelph, Guelph, Ontario

Employment History

2012 -	Founder, DementiAbility Enterprises Inc., Burlington, ON, Canada
2012 - 2013	Consultant, Curriculum Development, McMaster University, Hamilton, ON
1994 - 2012 (Retired)	Assistant Director, Centre for Gerontological Studies, McMaster University, Hamilton, ON
1994 - 2012	Thesis Supervision/Independent Study, McMaster University, Hamilton, ON
1993 - 1994	Self-employed: Consultant in Gerontology
1984 - 1993	Coordinator, Gerontology Programs Sheridan College, Oakville, Ontario
1985	Produced a RETIREMENT PLANNING VIDEO
1982 - 1984	Ottawa West Senior Citizen Support Service Ottawa, Ontario Position: Executive Director
1981 - 1982	self-employed
1979	Bestview Health Care Centre, Orillia, Ontario
1978	Self-Employed - Government Funded Project Orillia, Ontario
1980 - 1981	Research Project, University of South Florida, Florida, USA

WOW - They Sure Know How to Keep Me Busy Here - with Meaning, Purpose and Joy

Prof. Gail Elliot

Research from diverse disciplines has provided clear evidence that behaviours commonly associated with dementia (referred to as BPSDs or responsive behaviours) are strongly connected to unmet needs. When multidisciplinary research related to brain, environments and behaviour is presented in the context of person-centred care, the needs of individuals can be understood and subsequently addressed. DementiAbility has created a model (the WOW Model) that focuses on knowing the person, past and present (the first W in the WOW = "Who"), making "Observations" (which requires knowledge about memory, brain and behaviour) and connecting these details when making decisions about "What to do". This session will identify the key components of the WOW Model and discuss how it can be used to address needs/behaviours according interests, skills and abilities, with the goal of enabling abilities, combating excess disability, enhancing independence and adding meaning, purpose and joy to the lives of those in our care. Wouldn't it be nice if all people living with dementia said with a smile, "They sure keep you busy here"?

Speaker: Dr. Raymond Sui-Hing Yan

Chairman,
Taiwan Cognitive Enhancement Association,
R.O.C.(Taiwan)

Education

1988-1977	Bachelor of Medicine, Taipei Medical College

Professional Membership

2018-	Chairman , Taiwan Cognitive Enhancement Association
1999-	Taiwan Society of Critical Care Medicine
1990-	Taiwan Association of Gerontology and Geriatrics
1988-	Taiwan Neurological Society
2008-	Board of Director, Taiwan Dementia Society
2004-	Board of Director, Taiwan Alzheimer's Disease Association
1997-2005	Board of Director, Taiwan Epilepsy Society
1999-2001	Board of Director, Taiwan Neurological Society

Hospital Appointment

2017 -	Section Chief of General Neurology, Department of Neurology, Far Eastern Memorial Hospital
2009-2016	Department Chief of Internal medicine, Renai Branch, Taipei City Hospital
2006-2016	Section Chief of Neurology, Renai Branch, Taipei City Hospital
2000-2005	Attending Neurologist, Section of Neurology, Kaohsiung Veterans General Hospital
1996-	Clinical Associate Professor, National Yang-Ming University
1989-2000	Chief, Section of Neurology, Cardinal Tien Hospital –Taipei
1989	Clinical Fellow, Departement of Neurology, Neurological Institute, Veteran General Hospital-Taipei

Postgraduate Training

1994-1995	Research Fellowship, Department of Neurology, Massachusetts Hospital, Harvard medical School, Boston
1988-1989	Chief Resident, Department of Neurology, Neurological Institute, Veteran General Hospital-Taipei
1984-1988	Resident, Department of Neurology, Neurological Institute, Veteran General Hospital-Taipei

Anticipating New Aged Care – A Dementia Perspective

Dr. Raymond Sui-Hing Yan

Dementia is rapidly becoming a serious health issue, affecting more than 50M people worldwide. The problem is magnified when we consider the affects that dementia patients have on their families, careers, and society as a whole. The last new pharmaceutical treatment for Dementia, which only offers symptomatic relieve to the patients, was launched over 13 years ago. Many compounds have failed in phase III. As of now, there are no foreseeable new pharmacological treatments for Dementia, symptomatic or otherwise. Under these circumstance, as a neurologist who have been diagnosing, treating, and caring for dementia patients for over 25 years, I am constantly traveling around the world, exploring and understanding how different experts, in multidisciplinary field, are treating Dementia patients in different context. In absence of a cure, how are we finding different risk factors such as vision and hearing, and using this knowledge to delay, or even prevent the on-set of Dementia. When once speaks of prevention in Dementia, 2 particular elements are widely discussed: active learning, and regular exercise. Combined with healthy diet, good quality sleep, less stress, and an active social network, there six elements make up the core pillars of Dementia prevention and delay, not only for the patients we see now, but also for the new wave of elderly that we will be facing in the near future. How do we, as physicians, healthcare workers and providers, explore these six elements, to provide patient centered Dementia care in a respectful and sustainable way? That is our task.

Speaker: Prof. Yea-Ing Lotus Shyu

Distinguished Professor,
School of Nursing,
Chang Gung University,
R.O.C.(Taiwan)

Education

1992-1995	PhD in Gerontological Nursing, Oregon Health Sciences University, Portland, OR, USA.
1986-1988	MS in Aging Family Nursing, Oregon Health Sciences University, Portland, OR, USA.
1981-1985	BS in Nursing, National Taiwan University, Taipei, Taiwan.

Professional Experience

2018-	Distinguished Professor, School of Nursing, Chang Gung University, Taoyuan, Taiwan
2016-	Research Fellow, Department of Orthopedic Surgery, Linkou Chang Gung Memorial Hospital, Taoyuan, Taiwan
2016-	Consultant, Department of Nursing, Kaohsiung Chang Gung Memorial Hospital, Kaohsiung, Taiwan
2016-	Professor, Department of Gerontology and Health Care Management, Chang Gung University of Science and Technology, Taoyuan, Taiwan
2008-	Professor and Group Project Leader, Healthy Aging Research Center, Chang Gung University, Taoyuan, Taiwan
2005-	Joint Appointment Professor, Graduate Institute of Clinical Medicine, Chang Gung University, Taoyuan, Taiwan
2001-	Professor, School of Nursing, Chang Gung University, Taoyuan, Taiwan
2000-2005	Chair, School and Graduate Institute of Nursing, Chang Gung University, Taoyuan, Taiwan

Biography

Yea-Ing L. Shyu is a Professor in the School of Nursing and a group research-project leader in the Healthy Aging Research Center at Chang Gung University, Taiwan. She also serves as a consultant to the Nursing Department of Chang Gung Memorial Hospital at Kaohsiung, Taiwan.

Dr. Shyu's research has focused on family caregiving for people with dementia and care models for older persons recovering after hip-fracture surgery. More than 20 of her 3- to 5-year research projects have been funded by Taiwan's National Health Research Institute and Ministry of Science and Technology, and she has published 185 peer-reviewed publications. She has served as an expert in aging for the International Council of Nurses (2010-2017). She has been intensely involved in policy making for long-term care at both the national and local government levels in Taiwan. After sharing her research findings with policy makers, she was invited to serve as consultant for the Ministry of Health and Welfare (Taiwan) and the Department of Health, Taipei City Government (Taiwan). In 2017, Dr. Shyu was inducted into Sigma Theta Tau's International Nurse Researcher Hall of Fame. With her current intensive involvement in policy making and clinical/academic activities, the findings from her research have influenced clinical practice and knowledge about caring for the older people in Taiwan.

Publications

Kuo, W.-Y., Shyu, Y.-I., L.* Wang, J.-S., Chen, M.-C., Wu, C.-C., & Chen, M.-L. (2019). Adherence to home-based rehabilitation in older adults with diabetes after hip fracture. Nursing Research, 68(5), 383-389. doi:10.1097/NNR.0000000000000371 (SCI & SSCI)

Tseng, M.-Y., Liang, J., Wang, J.-S., Yang, C.-T., Wu, C.-C., Cheng, H.-S., Chen, C.-Y., Lin, Y.-E, Wang, W.-S., & Shyu, Y.-I. L.* (2019). Effects of a diabetes-specific care model for hip fractured older patients with diabetes: A randomized controlled trial. Experimental Gerontology, 126, 110689. doi:10.1016/j.exger.2019.110689 (SCI)

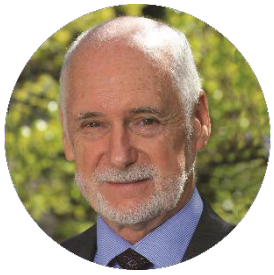
"Finding A Balance Point," a Concept central to family caregiving processes for persons with dementia in Taiwan

Prof. Yea-Ing Lotus Shyu

Using a grounded theory approach, we developed a conceptual framework to explain the caregiving process in Taiwanese families taking care of older persons. The basic process used by Taiwanese caregivers to achieve or preserve an interactive equilibrium in caregiving while facing competing needs was “Finding a balance point.” This process can be explained using the analogy of *tiao biaan dan*. *Biaan dan* is a flat carrying pole, usually made of bamboo, which laborers or farmers in Taiwan use to balance objects while transporting them on their shoulders. The laborer must balance the weights of the two objects by continuously adjusting the position of his or her *biaan dan* to maintain balance and continue walking forward. Similarly, family caregivers need to adjust their daily priorities and efforts among competing needs while moving forward with everyday life. For example, a caregiver needs to find a balance point between the competing needs of doing housework and fulfilling the needs of the care receiver. Caregivers who do better in finding a balance point between competing needs can often plan ahead for upcoming competing needs, rehearse their choices and flexibly use a wide variety of different balancing strategies. We found that caregivers who did better in finding a balance point had more positive caregiving consequences, including better quality of care for disabled elders, better caregiver outcomes, and less negative impact on the family as a whole. Based on our findings, we developed the Finding a Balance scale to measure the degree to which a caregiver can simultaneously handle competing caregiving demands. We then established adequate reliabilities and appropriate validities of the Finding a Balance scale and an optimal cutoff score. This validated scale provides an assessment tool to explore competing responsibilities, conditions, and difficulties for family caregivers of elders with dementia in Taiwan. In a different study, we tested a model of the developed conceptual framework. We found that associations of caregiving demand with role strain and depressive symptoms were mediated by balancing the competing needs of the care receiver and other responsibilities. To help family caregivers in balancing competing needs, we developed different Interventions, e.g., a caregiver-training program, and smart care for persons with dementia- were found to be effective in helping caregivers balance competing needs, decreasing caregivers’ depressive symptoms and enhancing their health-related quality of life. This model may also be applicable for explaining the family caregiving process and developing related interventions for older persons in Chinese culture-influenced areas.

Speaker: Prof. Richard Fleming

Professorial Fellow
Faculty Science, Medicine and Health
University of Wollongong
Australia



Education

2010 - 2013	PhD in Care Planning and Environmental Design for People Living with Dementia, Wollongong University, Australia
1972 - 1975	British Psychological Society Diploma in Clinical Psychology, London, UK
1965 - 1969	B.Tech. (Hons) London, UK

Professional Experience

2019 -	Professorial Fellow and consultant
2016 - 2019	Professorial Fellow and Executive Director of Dementia Training Australia
2010 - 2016	Director of the NSW/ACT Dementia Training Study Centre
2007 - 2014	Leader of the Design and Technology Node for the Primary Dementia Collaborative Research Centre, UNSW
1995 - 2010	Founder and Director of the HammondCare Dementia Centre
1993 - 1995	Dementia Consultant
1991 - 1993	Regional Health Services Planner, SE Region NSW Health
1987 - 1991	Regional Coordinator Mental Health Services, SE Region NSW Health
1979 - 1987	Head of Department of Psychology, Kenmore Hospital, Goulburn, Australia

Biography

Richard Fleming was born in England and studied psychology in London. Following graduation with an Honours Degree from Brunel University he worked in publishing research, exploring the motivation of readers of women's and special interest magazines. He then studied Clinical Psychology and worked in the first Community Psychology in the UK, specializing in the care of residents of old people's homes. He immigrated to Australia in 1979, taking on the position of Head of Psychology in a large psychiatric hospital. He became involved in the deinstitutionalization of psychiatric patients in the 1980s and led the development of community-based services for people with dementia. Following a period of working as an independent consultant he joined HammondCare, establishing their Dementia Centre. This led on to his appointment as a Professorial Fellow at the University of Wollongong and his roles as Director of the Dementia Training Study Centre and Dementia Training Australia. In June 2019 he resigned from the Directorship of Dementia Training Australia to pursue his research and consultancy interests.

Publications

Sun, J., & Fleming, R. (2017). Characteristics of the built environment for people with dementia in east and southeast asian nursing homes: A scoping review. International Psychogeriatrics. Vol 30(4), Apr, 2018 pp. 469-480.

Tartarini, F., Cooper, P., & Fleming, R. (2018). Thermal perceptions, preferences and adaptive behaviours of occupants of nursing homes Building and Environment ; Vol. 132, pp. 57-69.

Eckermann S, Phillipson L, Fleming R. (2018) Re-design of Aged Care Environments is Key to Improved Care Quality and Cost Effective Reform of Aged and Health System Care. Applied Health Economics and Health Policy. In Press, 2018 Language: English. Springer International Publishing DOI: 10.1007/s40258-018-0435-1

Buildings that Support 'Perfect Days' for Residents with Dementia and Staff Supporting Them

Prof. Richard Fleming

In the mid-1980s a set of principles for guiding the design of residential care facilities for people with dementia emerged from work on the de-institutionalisation of psychiatric hospitals. These principles have evolved over the years and are now fundamental to the standards of design expected by the Australian Ministry of Health. This presentation will introduce participants to these principles and highlight those that have been shown through research to be of particularly useful in maximizing the quality of life of people with dementia. The presentation will go on to explore the extent to which the implementation of these principles can be seen in in the literature on environmental design of Asian dementia facilities. A review of 1806 possible articles resulted in the identification of 48 that provide an overview of how these principles have been applied. This has resulted in the identification of the differences between Asian dementia facilities and those that are being built in Australia and provides an opportunity for reflection on the extent to which these principles are relevant in the Asian context.

The review supports the conclusion that the principles can be used to describe and explore the nature of Asian dementia facilities and provide a starting point for a discussion on what is important to ensure that people living with dementia in Asian residential facilities can enjoy ‘Perfect Days’.

Speaker: Dr. John Zeisel

President and CEO,
Hearthstone Alzheimer Care,
United States

Dr. Zeisel is a national and global leader in the compassionate and ethical care of elders living in Assisted Living with an emphasis on those living with Alzheimer's and other dementias. He consults with owners and architects internationally to plan environments that most effectively meet the needs of persons living with dementia and those who care for them. He is the Founder of Hearthstone, a firm that manages memory care communities, and the I'm Still Here® Foundation, a not-for-profit organization.
Dr. Zeisel's decades of research and practice has resulted in award-winning design and planning guidebooks, successful developments, prototype facilities, as well as books and articles used by designers, developers, and service providers internationally, including the internationally best-selling book I'm Still Here®: a groundbreaking approach to dementia care.
Dr. Zeisel received a Ph.D. in Sociology from Columbia University, a Loeb Fellowship at Harvard's Graduate School of Design, and an honorary Doctor of Science degree (Hon. D.Sc.) from Salford University in the UK. He has been on the faculty of Harvard's Department of Architecture, has taught at Yale and McGill Universities, and is both Visiting Professor and Special Advisor to the Salford University ship at the University of Minnesota Architecture School and a Fellowship at the National Institute for Advanced Studies near The Hague in the Netherlands.

His professional affiliations include and have included serving on the Board of Directors of Abe's Garden, a not-for-profit in Nashville, the Patient Care and Family Support Committee of the Massachusetts Alzheimer's Association, the Conference Planning Committee of the New York City Office of Aging's Alzheimer's Unit, and the International Advisory Board of the Academy for Health and Design. As a founding member of the Board of Directors of the Academy for Neuroscience in Architecture, he promotes evidence-based design for health.
His significant publications, which have been translated into various languages include: I'm Still Here: a new approach to dementia care; Inquiry by Design: Environment / Behavior /Neuroscience for architects, interiors, landscape and planning; and numerous article in prestigious refereed professional journals.
Institute for Dementia. He was awarded the Cass Gilbert Visiting Professor.

Engagement Replacement Treatment for Dementia – Creating a Perfect Day with Wellbeing and Quality of Life No Matter What Stage of The Disease, through Environment, the Arts, and Respect for the Person's Individuality and Remaining Skills and Abilities

Dr. John Zeisel

Everyday people with dementia cry out, in their own way: "I'm still here". Most care partners do not hear that cry because stigma and custom leads them to believe the person is not there – that the person's ability to remember, relate, and act with some reason have been affected to a degree that makes the person unmanageable. Other care partners believe that "behaviors" commonly associated with dementia such as anxiety, agitation, aggression, and above all apathy (what I call the 4 "A"s of Alzheimer's in my book titled "I'm Still Here") are a result of the condition of dementia itself and that without medications cannot be controlled.

Engagement Replacement Treatment for Dementia is an approach based on different premises. Those premises are: 1. That the person with dementia is capable of reasonable action if she or he is engaged in an activity that interests her, which can be some activity she is used to doing in the past and has residual interest in, or a "new" activity that interests her such as making music or dancing. 2. That the 4 "A"s and other commonly associated "challenging behaviors" are mainly a result of boredom, nothing to do, and being treated like a non-person, not primarily a result of the condition of dementia. 3. That when engaged in meaningful activity, in appropriate physical settings, the person with dementia will exhibit many fewer challenging behaviors – that engagement with meaningful activities can be used as a tool to replace the 4 "A"s and other challenging behaviors responding to the person's cry of "I'm still here."

Several types of engagement will be presented: Leading reading groups; participating in improvisational theatre; plying games constructed from cultural experiences of the group; structured music / movement / and emotion events; activities that draw on hard-wired skills like those that help others – children and animals; and contact with farm animals.

Speaker: Ms. I-Hsuan Chen

Project Manager,
Taiwan Chilaulin Lifelong Learning Association,
R.O.C. (Taiwan)

Education
University of Glasgow, Scotland, UK
Master of International Accounting and Financial Management, June 2015

National Chung Hsing University, Taichung, Taiwan
Bachelor of Applied Economics, June 2014
Double Majors: Accounting

Work Experience
CHI LAU LIN AGED CARE, Taichung, Taiwan
Administration Assistant, September 2016-Present

KPMG, Taipei, Taiwan
Auditor, September 2016-June 2018

CHI LAU LIN AGED CARE, Taichung, Taiwan
Administration Assistant and Project Manager, September 2018-Present

At here, I am not a person with dementia

Ms. I-Hsuan Chen

We all know that dementia is an irreversible disease; hardly can a person with dementia remain the way he or she used to be. Therefore, understanding who exactly they are in status quo, helping them to adapt to their current life; retrieving their happiness and dignity are what we are striving for.

In Chi Lau Lin, we are still finding the best way to take care the dementia cases, since the symptoms and conditions of the dementia would vary among cases. And currently we put the sub-healthy elderlies and mild or moderate dementia cases together in a class. It seems to us that the sub-healthy elderlies would gain self-assurance when they know that they can be great companions for the dementia; on the other hand, the elderly with dementia could postpone the speed of deterioration via group restrictions.

A dementia friendly environment could substantially reduce the stress in taking care of the dementia cases, and promote their living standard. Chi Lau Lin aimed at designing a friendly environment where people can feel the warmth, relaxation, and comfort. Within this six-story building, we classified it into seven areas, and each area has it own design and atmosphere. Also, a lot of elements of the art therapy are embedded in our environment. Elderly may not look at those art pieces in details, but it creates a more comfortable atmosphere.

All of our classes are designed based on the physical fitness, and we will do the physical fitness test every three-month to evaluate the efficiency of the classes. Since the core value of our company is to promote health so that we can live a senior life with vitality, independence, and dignity. We believe that without vitality, there is no way we can achieve independence and dignity, and that is why we can’t stress the importance of the physical fitness enough. Moreover, the body-mind-spirit balanced, recognition training, and social participation will also be added to the class.

Chi Lau Lin believes that all services should be human-centered. Therefore, providing the accessible and dementia friendly environment in not enough, we need to have more empathy and respect when taking care of them. It is our vision that everyone could live a senior life with independence and dignity.

Session 6

Child Health in the 21st Century

To Live for Love

Moderator: Prof. Chih-Cheng Hsu

Investigator and Deputy Director,
Institute of Population Health Sciences,
National Health Research Institutes,
R.O.C.(Taiwan)

Education and Degrees

1996-2000	DrPH, major in community health sciences Tulane School of Public Health and Tropical Medicine, USA
1990-1992	MPH, major in preventive medicine College of Public Health, National Taiwan University, Taiwan
1979-1986	MD, School of Medicine, National Yang-Ming University, Taiwan

Professional Experience

2014-	Investigator and Deputy Director, Institute of Population Health Sciences, National Health Research Institutes, Taiwan
2006-2014	Associate Investigator, Institute of Population Health Sciences, National Health Research Institutes, Taiwan
2001-2006	Assistant Investigator, Division of Health Policy Research, National Health Research Institutes, Taiwan

Research Interest

1. Risk factors and prevention of diabetic nephropathy
2. Epidemiology of diabetes and chronic kidney diseases
3. Geriatric syndrome, frailty, sarcopenia, and dementia
4. Tobacco control

Speaker: Dr. Michael C. Lu

Dean,
UC Berkeley's School of Public Health,
United States

Education and Training

1994 - 1998	Residency Training in Obstetrics & Gynecology, U.C. Irvine
1989 - 1994	Doctor of Medicine (M.D.), U.C. San Francisco
1989 - 1992	Master of Public Health (M.P.H.) in Epidemiology, U.C. Berkeley Master of Science (M.S.) in Health and Medical Sciences, U.C. Berkeley
1988 - 1989	Completed one year of the Master of Public Policy (M.P.P.) program, John F Kennedy School of Government, Harvard University
1984 - 1988	Bachelor of Art (B.A.) in Political Science and Human Biology, Stanford University

Professional Employment

2019 -	Dean, School of Public Health, University of California, Berkeley
2017 - 2019	Senior Associate Dean for Academic, Faculty & Student Affairs Professor, Department of Prevention and Community Health Milken Institute School of Public Health George Washington University
2012 - 2017	Director Maternal and Child Health Bureau Health Resources and Services Administration (HRSA) U.S. Department of Health and Human Services
2012 - 2017	Professor (on leave of absence to HHS)
2006 - 2011	Associate Professor
1998 - 2005	Assistant Professor Department of Obstetrics & Gynecology David Geffen School of Medicine at UCLA Department of Community Health Sciences Fielding School of Public Health at UCLA

Selected Honors and Awards

2018	University of California Berkeley *Influential Alumni Award*
2016	University of California, Berkeley *School of Public Health Alumnus of the Year Award*
2015	U.S Department of Health and Human Services *2015 HHS Innovates Award*
2015	U.S. Department of Health and Human Services *Health Resources and Services Administration (HRSA) Administrator's Award for Equal Opportunity Achievement Award*
2013	U.S. Department of Health and Human Services *Hubert H. Humphrey Service to America Award*
2015 -	Best Doctors in America

The Future of Maternal and Child Health

Dr. Michael C. Lu

OBJECTIVE. The purpose of this presentation is to start a global conversation about the future of maternal and child health (MCH). In the coming decade, we will have unprecedented opportunities to improve MCH, but we will also face unprecedented threats to MCH worldwide.

METHODS. I will discuss what we must do today to assure the conditions for a healthy future for all women, children, and families.

RESULTS. Future MCH research must become more transdisciplinary, translational, and precise. Future MCH practice must become more women-centered, child-centered, and family-centered. Technological innovations could dramatically transform our work in MCH while big data could enhance predictive analytics and precision health; our challenge will be assuring equitable access. We must prepare future MCH workforce for where MCH is going to be, and not just where it is or has been. The greatest gains in MCH will continue to come from fighting social injustices and improving social conditions, which will require advancing MCH in all policies.

DISCUSSION. We can take actions today to grow opportunities and avert threats; prepare our workforce; and lead the future of MCH in keeping with our mission, vision and values.

Speaker: Prof. Tung-Liang Chiang

Professor,
School of Public Health,
Institute of Health Policy and Management College of Public Health
National Taiwan University,
R.O.C. (Taiwan)

Education Background

1974-1978	B.P.H., National Taiwan University, Taiwan
1981-1984	Sc.D., School of Hygiene and Public Health, Johns Ho pkins University, USA

Professional Experience

1988-1990	Advisor, NHI Planning Taskforce, Council for Economic Planning and Development, Executive Yuan, ROC
1994-1999	Director, Institute of Health Policy and Management, National Taiwan University
1997-1999	Director, Population Studies Center, National Taiwan University
2005-2011	Dean, College of Public Health, National Taiwan University
2014-2016	Executive Director, Higher Education Evaluation and Accreditation Council of Taiwan

Biography

Tung-liang Chiang is Professor and former Dean of the College of Public Health, National Taiwan University. His research interest focuses on health equity and health reforms. He is one of three pioneer architects of Taiwan's National Health Insurance, which was inaugurated in 1995. Since 2003 he has been PI of the Taiwan Birth Cohort Study, following a nationally representative sample of 24,200 babies born in 2005.

Publications

- Chiang WL, Chiang TL. Effect of national health insurance on poverty reduction in Taiwan. Taiwan J Public Health 2016; 35:164-171.
- Chen GD, Chiang WL, Shu BC, Guo YL, Chiou ST, Chiang TL. Associations of Caesarean delivery and the occurrence of neurodevelopmental disorders, asthma or obesity in childhood based on Taiwan birth cohort study. BMJ Open 2017; 7(9):1-9.
- Chiu YC, Li YF, Wu WC, Chiang TL. The amount of television that infants and their parents watched influenced children's viewing habits when they got older. Acta Paediatr 2017; 106:984-990.

Poverty and Child Health

Prof. Tung-Liang Chiang

Poverty matters to everyone, particularly the child. Children living in poverty are often deprived of their capabilities needed to survive, develop, and thrive. This presentation consists of three parts. Firstly, I will report the prevalence of child poverty around the world, including Taiwan. Secondly, I will illustrate risk factors for child poverty using data from the Taiwan Birth Cohort Study (TBCS). The TBCS, launched in 2003, is the first large-scale longitudinal study of children in Taiwan. Thirdly, I will examine the effect of early poverty on children's health before age 3, and, from the life course perspective, the association between early and later childhood health. Poverty is a major social determinant of child health; we have to create a world free from child poverty, as UNICEF advocates.

Speaker: Prof. Li-Yin Chien

Professor & Director,
Institute of Community Health Care,
National Yang-Ming University,
R.O.C.(Taiwan)

Experience
Director, International Health Program, NYMU
Editor, Journal of Nursing Research (SCI Journal)
Associate editor, BMC Health Services Research (SCI Journal)
Committee Member, Children's Health Promotion Committee, Ministry of Health and Welfare
Rater, McMaster online rating of evidence (MORE)
Committee Member, Research and Development Consulting Committee, Health Promotion Administration

Specialty
Public Health, Community Health Nursing

Research Interests
Maternal and Child Health, Health Promotion, Complementary and Alternative Medicine

Maternal Feeding Practice in Infancy and Toddlerhood

Prof. Li-Yin Chien

Background: Maternal feeding behavior is crucial to the formation of eating behavior, and poor feeding practices may be associated with the current epidemic of children obesity and underweight. However, few studies have examined maternal responsive feeding and feeding practices on infants' and toddlers' growth status in a Chinese population.
Objective: The study objectives were to (1) describes responsive feeding and its' association with infant growth and maternal depressive symptoms during the first 3 months postpartum; (2) examine the association between maternal depressive symptoms and responsive feeding, and the potential mediating effect of self-efficacy and outcome expectancy linking depression and feeding behavior; (3) investigate the association between maternal feeding behavior and rapid weight gain from birth to 18 months.
Method: This prospective cohort study was conducted from March 2015 through December 2017. Through face-to-face interview, we enrolled 800 pregnant women in the second-trimester from five medical institutions in northern Taiwan. The participating women were followed at 3, 6, 12, and 18 months postpartum. Maternal depressive symptoms were measured by the Edinburgh Postnatal Depression Scale with a cutoff score of 10. The child's growth status was transformed into weight-for-length Z (WLZ) scores. Rapid weight gain was defined as a change in the WLZ $\geqq$+0.67. Responsive feeding, which was represented by unforced feeding and feeding on demand, was measured through self-developed questionnaires.
Results: Multiple linear regression revealed that certain characteristics—postpartum depressive symptoms, primipara, maternal age greater than 35 years, and decreased infant WLZ score—were negatively associated with responsive feeding during 3 months postpartum; while exclusive breastfeeding was positively associated with responsive feeding. Responsive feeding was positively correlated with the Edinburgh Postnatal Depression Scale, and negatively correlated with self-efficacy and outcome expectancy. Bootstrapping result indicated that depressive symptoms negatively affected self-efficacy and outcome expectancy. Self-efficacy and outcome expectancy then positively affected responsive feeding. The main effect of postpartum depressive symptoms at 1 month on responsive feeding became insignificant after self-efficacy and outcome expectancy were included as mediators. Unforced feeding at 18 months postpartum was significantly and negatively related to rapid weight gain from birth to 18 months. There were also significant and negative association between feeding on demand at 3, 6 months postpartum and rapid weight gain from 6 to 18 months. Higher maternal age, pre-pregnancy BMI being overweight and obese were each positively related to rapid weight gain from birth to 12 months. Infants whose weight status at birth was underweight were more likely to have rapid weight gain from birth to 6 months, birth to 12 months, and birth to 18 months comparing to infants whose weight status at birth was normal. Infants whose weight status at 6 months was overweight were more likely to have rapid weight gain from birth to 18 months comparing to infants whose weight status at birth was normal. Those mothers who reported more worries about infants being overweight at 12 months had higher risk for infant rapid weight gain from birth to 12 months. Those mothers who reported more worries about infants being underweight at 18 months had lower risk for infant rapid weight gain from birth to 18 months. Infants, whose mother was a full-time employee and continued breastfeeding for 6 to 12 months postpartum, had lower risk of rapid weight gain from birth to 18 months. Infants whose mother was a part-time employee had higher risk of rapid weight gain from birth to 18 months comparing to those whose mother had no job.
Conclusion: During the first 3 months postpartum, health professionals should educate mothers on responsive feeding, especially for first-time and non-exclusive breastfeeding mothers, as well as those with depressive symptoms, advanced maternal age, and infants with slower growth. Screening for postpartum depressive symptoms may be useful when health education on infant feeding is conducted. Nurses can equip parents with appropriate information about responsive feeding as early as possible, with special emphasis on mothers who were older, were overweight/obese, worked part-time, and had more worries about their infant's weight as well as on infants whose weight status at birth was underweight and during infancy was overweight. Community health practitioners can also provide appropriate feeding information for public in order to avoid rapid weight gain among infants and toddlers. Maternal self-efficacy and outcome expectancy needs to be enhanced, especially among mothers with depressive symptoms.

Speaker: Prof. Hsing-Yi Chang

Investigator,
Institute of Population Heath Sciences,
National Health Research Institutes,
R.O.C.(Taiwan)

Education and Training

Dr. PH, University of North Carolina (Biostatistics)
MPH, University of North Carolina (Biostatistics)
B. S., National Chunhsing University (Forestry)

Professional Experiences

2013 -	Investigator, Institute of Population Heath Sciences, National Health Research Institutes
2005 - 2013	Associate Investigator, Center for Health Policy Research and Development, National Health Research Institutes
2000 - 2005	Assistant Investigator, Division of Health Policy Research, National Health Research Institutes
1997~2000	Postdoctoral Research Fellow of Institute of Biomedical Sciences, Academia, Sinica, Taipei, Taiwan, R.O.C.

Research Interests

Dr. Chang's research interest is the time trend and development of health/risk behaviors. To achieve this, she has conducted the National Health Interview Survey (NHIS) since 2001 and the Child and Adolescent Behaviors in Long-term Evolution (CABLE) since 2006. She is also a co-pi in the Nutrition and Health Survey in Taiwan. She is able to apply her training in biostatistics to integrate the survey outcomes for her research goal.

Using the survey results she is able to examine the temporal changes of prevalence of diabetes and the self-care behaviors among diabetes, the changes of smoking rate overtime, etc. Those are important in monitoring effectiveness of health policies and providing evidence for designing prevention and intervention programs. Using the longitudinal follow-up data, she examined the incidence and the risk factors of experimental smoking among teenagers. She has worked on risk prediction models providing prediction formula to the Industrial Research Institutes for health screening. Given her training in biostatistics, she is able to apply or modify statistical methods in dealing with complicated epidemiological data, such as comparing surveys using different sampling designs or examining the trajectories of certain behaviors.

In terms of other methodologies, Dr. Chang has developed method to estimate the distribution of nutrient intakes of the population accounting for large within individual variations. This is applied to the estimation of consumption rates of various food groups, the essential element in risk assessment. She also modified the FAO method in estimating proportion of malnutrition in Taiwan. The resulted calculation method has been used by the Council of Agriculture. She developed method to compare results based on different sampling schemes. That made the international comparisons or examining time trend possible.

Dr. Chang has published over 100 peer-reviewed articles since joint NHR in 2000. List of publications can be found at http://ir.nhri.org.tw/handle/3990099045/661.

Sugar-sweetened Drinks and Dietary Pattern in Children and Adolescents

Prof. Hsing-Yi Chang

Taiwan has a high density of convenience stores and beverage shops, which makes sugar-sweetened beverages (SSBs) very accessible. We examined the changes of SSB intakes and patterns over 14 years, especially in those younger than 18 years. We observed that mean weekly SSB intake significantly declined between surveys from 12 to 10.7 times per week, over 99% of teens reported having at least one SSB in the past week. Intake of coffee or tea (mostly sweetened) increased significantly over 14 years. It seemed those with higher frequencies of SSB intakes had worse dietary pattern, e.g. eating breakfast or vegetables daily. Both high intake amount and frequencies are associated with high uric acid. High uric acid level is a risk factor for cardiovascular disease in adults. Although SSB is banned in schools, there is room for improvement. Attention should be given to demographic factors associated with high SSB intakes, so that prevention policy would be designed targeting the high risk group.

Moderator: Prof. Chao A. Hsiung

Distinguished Investigator and Director,
Institute of Population Health Sciences,
National Health Research Institutes, R.O.C.(Taiwan)

Education

1973-1975	PhD in Statistics, Columbia University, U.S.A.
1972-1973	M.A. in Statistics, Columbia University, U.S.A.
1968-1972	B.S. in Mathematics, National Tsing-Hua University, Taiwan

Professional Experience

2017-	Program director, 「Developing Innovative Models for Smart Long-term Care Technology and Services」flagship project
2015-	Program director, 「Bioinformatics Core Facility for Biotechnology and Pharmaceuticals」project
2010-	Distinguished Investigator and Director, Institute of Population Health Sciences, National Health Research Institutes, Taiwan
2008-2010	Distinguished Investigator and Acting Director, Institute of Population Health Sciences, National Health Research Institutes, Taiwan
2005-	Adjunct Professor, Institute of Statistics and Department of Life Science, National Tsing-Hua University, Taiwan
2002-2014	Distinguished Investigator and Director, Division of Biostatistics and Bioinformatics, National Health Research Institutes, Taiwan
1998-1999	Acting Director, Department of Research Resources, National Health Research Institutes, Taiwan

Biography

Dr. Hsiung's current research interests include genetic epidemiology and genomics research. Her research team has established the Healthy Aging Longitudinal Study in Taiwan (HALST). Many aspects of aging including nutrition, life style, biomarkers etc. have been studied through this cohort study. Her research team has also participated in the international genetic study – Stanford-Asian Pacific Program in Hypertension and Insulin Resistance (SAPPHIRe), and later extended to TAICHI study on Metabochip, THRV study on rare variants in hypertension among Chinese. Collaborating with several medical centers in Taiwan, rich clinical, environmental and genetic data were collected and analyzed. The research team has also established the Genetic Epidemiological Study of Lung Adenocarcinoma (GELAC) with six hospitals in Taiwan. Recently they have collaborated with NCI of NIH-US on non-smoking female lung cancer and other topics. The research team has published a series papers on genetic determinants of lung cancer, including the recent papers published in *Nature Genetics, PLoS Genetics, Human Molecular Genetics* etc. They have also worked on pharmacogenomics topics for lung cancer. The work was published in *AJRCCM*.

Speaker: Dr. Yu-Hsuan Lin

Assistant Investigator/Attending Physician,
Institute of Population Health Sciences,
National Health Research Institutes,
R.O.C.(Taiwan)

Education

2013-2015	Doctor of Philosophy (Ph.D.), Institute of Brain Science, National Yang-Ming University, Taiwan
2001-2008	College of Medicine, Chang-Gung University, Taiwan

Professional Experience

2017-	Assistant Investigator/Attending Physician, Institute of Population Health Sciences, National Health Research Institutes, Taiwan
2017-	Adjunct Visiting Staff, Department of Psychiatry, National Taiwan University Hospital, Taiwan
2017-	Assistant Professor, Department of Psychiatry, College of Medicine, National Taiwan University, Taiwan
2017-	Assistant Professor, Institute of Health Behaviors and Community Sciences, College of Public Health, National Taiwan University, Taiwan
2016-2017	Attending Physician, Department of Psychiatry, National Taiwan University Hospital
2013-2016	Product Physician, Medical Affairs Division, Pfizer Taiwan
2009-2013	Chief Resident and Resident physician, Department of Psychiatry, National Taiwan University Hospital

Biography

Dr. Yu-Hsuan Lin graduated from Chang-Gung University, and received his psychiatry residency in National Taiwan University Hospital. After acquired board certified psychiatrist qualification, he has been serving as a Product Physician in Pfizer Taiwan. He also received his Doctor of Philosophy degree in Institute of Brain Science, National Yang-Ming University. Dr. Lin's predominant method in research is bio-signal analysis, especially power spectral analysis in heart rate variability and cardiopulmonary coupling. His main clinical and academic interests include employee assistant program, sleep medicine, cyber-psychology, and design of mobile application (App).

Dr. Lin has published 37 articles in international scientific journals (H index = 15), such as, American Journal of Psychiatry, Neurology, JMIR Mhealth Uhealth., Medicine, Sleep Medicine, and PLoS ONE. His major research topic is physiological and psychological impacts on medical interns during on-call duty. The website of sleep medicine textbook "Principles and Practice of Sleep Medicine" reported Dr. Lin's research on the important topic. In addition to academic research, he also wrote dozens of editorial on newspaper and participated in legislating for physicians' work-hour limits in Taiwan.

Dr. Lin is also interested in the cyber-psychology, including Internet addiction, smartphone addiction, and phantom vibration/ringing syndrome of mobile phone. In addition to scientific research, he designed mobile app with patent in Taiwan and served as the deputy editor of the PsychPark E-paper for online mental health service. Now, Dr. Lin is the supervisor in Taiwanese Society of Internet Addiction Prevention.

Since Dr. Lin was a medical student, he has gained several academic awards, such as "Excellent Paper Award" in the annual meeting of Taiwan Society of Sleep Medicine and The Foundation of Taiwan Medical Development Awards for Outstanding Writings. He was awarded the best poster in the World Congress of Biological Psychiatry in Kyoto, and the Paul Janssen Research Award in 2013.

How Does Smartphone Affect Children's Health?

Dr. Yu-Hsuan Lin

Traditionally, difficulties in long term measurement of human behavior have led researchers to extrapolate from animal studies. However, with the global prevalence of smartphones in recent years, we can now seek to the direct study of human behavior and mind via the "digital footprints" automatically collected from our daily interactions with smartphones. These digital footprints not only provided an objective, real-time, and ecological source of measurement, but also provided insights into human behavior and mind. The digital footprints on smartphones can be seen as a new opportunity for behavioral and psychological research, for example, the emerging fields of cyberpsychology, psychoinformatics, and digital phenotyping.

This review introduces several studies that applied smartphone passive data to interpret common human behaviors. These studies focused on three major behavior: online leisure, sleep, and working hours. The merits of using digital footprints on smartphones are presented later in the article: higher user retention, avoidance of bias from recall or time distortion, and enhanced temporal resolution. In addition to interpreting human minds and behaviors, smartphone data also shows potentials in immediate interventions or personalized treatments.

Speaker: Dr. Ping-I. Daniel Lin

Associate Professor,
Department of Health Sciences,
Karlstad University,
Sweden

Education

2008 - 2012	Resident in Psychiatry, National Taiwan University Hospital, Taipei, Taiwan
2006 - 2007	Post-doctoral fellow in Molecular Genomics. Cold Spring Harbor Laboratory, Cold Spring Harbor, New York, U.S.A.
2004 - 2006	Post-doctoral fellow in Statistical Genetics. Center for Human Genetics, Duke University Medical Center, Durham, North Carolina, U.S.A.
2005	PhD in Mental Health (with a focus on Genetic Epidemiology). Bloomberg School of Public Health, Johns Hopkins University, Baltimore, Maryland, U.S.A.
2002	PhD dissertation title: Parsing the Genetic Underpinnings of Bipolar Disorder by Age of Onset MHS in Mental Health (with a focus on Psychiatric Epidemiology). Bloomberg School of Public Health, Johns Hopkins University, Baltimore, Maryland, U.S.A.
1998	MD National Taiwan University, Taipei, Taiwan

Academic or Professional Appointment

2019	Visiting Scholar, Department of Psychiatry – Center for Behavioral Genomics, University of California, San Diego, USA
2018 -	Associate Professor, Department of Health Sciences, Karlstad University, Karlstad, Sweden
2016 -	Senior Lecturer, Department of Health Sciences, Karlstad University, Karlstad, Sweden
2016 -	Visiting Professor, Master Program for Clinical Pharmacogenomics and Pharmacoproteomics, Taipei Medical University, Taiwan
2012 - 2016	Assistant Professor, (joint appointment with Department of Psychiatry and Behavioral Neuroscience, University of Cincinnati College of Medicine), Division of Biostatistics and Epidemiology, Department of Pediatrics, Cincinnati Children's Hospital Medical Center, Cincinnati, Ohio, USA
2011	Visiting Assistant Professor, Autism and Neurodevelopment Program at University of California, San Francisco, California, USA
2007 - 2008	Assistant Professor, Program of Genomic Medicine, Department of Medicine, University of Maryland School of Medicine (joint appointment with Maryland Psychiatric Research Center), Baltimore, Maryland, U.S.A.

Biography

My training is a combination of genetic epidemiology and psychiatry. The skill set I have has allowed me to analyze high-dimensionality combinatorial molecular and clinical data using various statistical models and bioinformatics tools. My publications have thus far been cited by 1,582 studies. I have served as a principal investigator or co-investigator of projects of the genetic epidemiological research projects on neuropsychiatric disorders supported by extramural funds. During the recent five years, I have worked with experts in the fields of eye tracking and functional MRI scans to initiate multi-modal studies on behavioral traits with a focus on aggressive behaviors and emotion dysregulation. I just received a 6-million-USD grant, as a sub-contracted investigator, from Patient-Centered Outcome Research Institute (PCORI) to work with four medical institutes to evaluate treatment effects of adolescent suicides during 2019-2024. This new grant exemplifies my contributions to neuropsychiatric research at the international scale. My long-term career goal is to develop integrative epidemiologic research programs to evaluate complex hypotheses regarding the link between risk factors and clinical heterogeneity in neuropsychiatric disorders.

Impacts of Environmental Factors on Neurodevelopmental Outcomes of Children

Dr. Ping-I. Daniel Lin

It has been well acknowledged that environmental factors can influence the brain development, particularly during the early childhood. However, little is known about the role of genetic and epigenetic factors in environmental impacts on neurodevelopmental outcomes. In this presentation, I will discuss how we could use epidemiological data to answer some of the key questions. The purpose of the first study is to examine whether prenatal exposure to terbutaline, a beta adrenergic receptor agonist, could interact with certain genetic variants to influence the risk of autism spectrum disorder (ASD). The gene-drug interactions can also be demonstrated through the pathway analysis results. I will then discuss the findings from the second study, which aims to investigate how prenatal exposure to a mixture of multiple chemical compounds may influence the cognitive functions in the 7-year-old children through epigenetic controls of neurodevelopmental genes. The results show that approximately 10% of the effect of multiple phalates on the IQ score was mediated by DNA methylation of a glutamate receptor gene.

Speaker: Prof. Chih-Hung Ko

Director,
Department of Psychiatry,
Kaohsiung Medical University,
Chung-Ho Memorial Hospital,
R.O.C. (Taiwan)

Affiliation

2015-	Director of department of Psychiatry, Kaohsiung Medical University Hospital, Kaohsiung City, Taiwan
2015-	Professor of department of Psychiatry, Faculty of Medicine, College of Medicine, Kaohsiung Medical University, Kaohsiung City, Taiwan
2009-	Director of department of Psychiatry, Kaohsiung Municipal Hsiao-Kang Hospital, Kaohsiung City, Taiwan (R.O.C.).

Education

Graduate Institute of Medicine, Kaohsiung Medical University.
College of Medicine, Kaohsiung Medical University.
Board certification: Board of Psychiatry(Taiwan)

Research Interest

Internet gaming disorder
Premenstrual dysphoric disorder
Adult attention deficit & hyperactivity disorder
Functional magnetic imaging

The Diagnosis and Intervention of Internet Gaming Disorder

Prof. Chih-Hung Ko

The gaming disorder was recruited in ICD 11 at 2018 as an official diagnostic criteria. It also define the Hazardous gaming to describe gaming behavior leading to physical or mental risk. The classification had provide a different approach to gaming disorder. Based on previous evidence based information, cognitive control, emotional regulation, and rewarding sensitivity were the three most mentioned mechanism of gaming disorder. Based these evidence, an integrated interventions to pay attention to these three dimensions should be provided in preventive and intervention programs. In the presentation, we will present our diagnostic approach and intervention for clinical patient of gaming disorder.

Speaker: Dr. Dih-Ling Luh

Associate Professor,
Department of Public Health,
Chung Shan Medical University,
R.O.C. (Taiwan)

Education

1993-1999	PhD in Graduate Institute of Health Policy and Management, National Taiwan University, Taiwan. 1999, Taipei, Taiwan
1989-1991	MS in Graduate Institute of Public Health, National Taiwan University, Taipei, Taiwan
1987-1988	Bachelor in Department of Public Health, China Medical College, Taichung City, Taiwan

Professional Experience

2000-	Assistant Professor, Department of Public Health, Chung Shan Medical University, Taiwan.

Biography

Dih-Ling Luh is an associate professor of Public Health at Chung Shan Medical University. Her work focuses specifically on the Health-related behavior and health promotion. Her recent publication can be found in Prevention Science, BMJ Open, Epidemics, and Tobacco induced diseases journal.

Internet Addiction from High School to College and Its Association with Health-Related Behaviors in Childhood and Adolescence: Results From A 15-Year Follow-Up Study

Authors: Dih-Ling Luh, Wen-Chi Wu, Lee-Lan Yen, Hsing-Yi Chang

Internet addiction has become a vital public health issue. It is observed to be associated with personalities and unhealthy behaviors, such as substance use, drinking, skipping breakfast, irregular sleep, aggressive behavior, etc. The American Psychiatric Association designates internet addiction a mental disorder in the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-V).

Little is known about the longitudinal development of internet addiction. Therefore, we will depict the trajectories from age 17 to 22. We also test the hypothesis that childhood screen time and substance use is associated with internet addiction trajectories. Whether certain behaviors tend to cluster together is worth of further study.

Session 7

Urbanization: Loneliness in the Elderly

Moderator: Dr. Tsung-Hsi Fu

Associate Professor,
Department of Social Work,
National Taiwan University,
R.O.C. (Taiwan)

Tsung-hsi Fu is Associate Professor, Department of Social Work, National Taiwan University. His research interests are in the areas of social security and ageing, especially around long-term care and pensions. He has published a number of books and articles on ageing in East Asia. He is particularly interested in comparative approaches, including analyses between Asian countries. His recent edited volume (with Rhidian Hughes) Ageing in East Asia: challenges and policies for the twenty-first century (publish by Routledge) is available in English and traditional Chinese.
Selected recent publications:

Fu, Tsung-his, Shih-Jiunn Shi and Hung-Yang Lin, 2019. NTU Management Review, 29(2): 173-200. (in traditional Chinese).

Fu, Tsung-hsi, 2018. Ageing policies in Taiwan: recent achievements and unsolved challenges. In Thomas R. Klassen, Masa Higo, Nopraenue S. Dhriathiti and Theresa W. Devasahayam (eds.), Ageing in Asia-Pacific: Interdisciplinary and comparative perspectives, Ch. 6. Singapore: Routledge.

Fu, Tsung-hsi and Gyu-Jin Hwang , 2017. Reforming public pensions in democratizing Korea and Taiwan: actors, institutions and policy outcomes. Journal of Asian Public Policy, DOI: 10.1080/17516234.2017.1353941.

Shao, Ai-Ju and Tsung-hsi Fu, 2017. Equity on old-age benefit system: comparisons of IRR and multipliers across civil servants' generations. Taiwan Economic Forecast and Policy, 48(1): 75-103. (correspondence, in traditional Chinese)

Fu, Tsung-hsi, Shih-Juan Shi, Hwang-Yang Lin and Chuo-Lan Cheng, 2016. Development and reform of pension automatic adjustment mechanism in developed countries. NTU Social Work Review, No. 33. (in traditional Chinese).

Fu, Tsung-hsi, 2015. Three models of National Pension in Asia: Japan, South Korea and Taiwan compared. Paper presented at The First Annual International Symposium on Aging and Old-Age in Asia-Pacific. Fukuoka: University of Kyushu.

Hwang, Gyu-Jin and Tsung-hsi Fu, 2015. Pension Politics in East Asia: The Cases of Korea and Taiwan. Paper presented at 12th East Asian Social Policy Network Annual Conference. Singapore: National University of Singapore, 2015/6/30-31.

Chen, Jwu-Shang , Tsung-His Fu, Wan-I Lin and Jyh-Cherng Shieh, 2013. The Legislation and Practice of "Post-disaster Charity Fundraising Act" in Taiwan: The Empirical Legal Study from Nationwide Fundraising Activities after Typhoon Morakot. CCU Law Review, 129: 301-380. (in traditional Chinese).

Shieh, Jyh-Cherng, Tsungh-hsi Fu, Jwu-Shang Chen,Wan-I Lin, 2013. A Road Far Away from the Aboriginal Hometown? Rethinking the Post-disaster Relocation Policy of Typhoon Morakot. NTU Social Work Review. 26: 41-86. (in traditional Chinese).

Fu, Tsung-hsi, 2013. The development and challenges of civil servant pension in Taiwan. Public Administration Review, 6: 27-51. (in simplified Chinese).

Fu, Tsung-Hsi, Wan-I Lin, and Jyh-Cherng Shieh, 2013. The Impact of Post-Disaster Relocation on Community Solidarity: The Case of Post-Disaster Reconstruction after Typhoon Morakot in Taiwan. World Academy of Science, Engineering and Technology, 1963-1966.

Speaker: Madam Hui-Jiuan Chien

Director of Social and Family Affairs Administration,
Ministry of Health and Welfare,
R.O.C. (Taiwan)

Education
College of Law, National Chengchi University
M.A. Department of Political Science, National Taiwan University

Experience
Director-General of National Immigration Agency, Ministry of Interior Affairs
Director-General of Child Welfare Bureau, Ministry of the Interior Affairs
Ministry of the Interior Affairs Counselor and Executive Secretary of Domestic Violence and Sexual Harassment Prevention Committee
Director-General of Department of Social Affairs, Ministry of the Interior Affairs

Building Friendly Senior Society —Senior Citizens' Welfare in Taiwan

Madam Hui-Jiuan Chien

Many countries are facing challenges of the ageing population. Taiwan has become an aged society since March 2018. Until July 2019, the number of the elderly population was 3,524,098, accounting for 14.94% of the total population. And according to National Development Council's estimation, Taiwan will turn into super-aged society in 2026. It only takes 25 years from "ageing" to "aged" in Taiwan, which is much faster than Europe and America.

In order to meet the senior citizens' needs, the government provides economic security, plenty of senior citizens' social welfare and multiple care services. First of all, the economic security includes National Pension and provides the elderly with mid-to-low income subsidies so that to sustain their basic life quality. Second, the senior citizens' social welfare includes different types of services such as the senior citizens' activity center, learning classes, mobile leisure services, community care stations, and care services for seniors living alone etc.. These services all help the seniors to age in place. Third, the government provides multiple care models for the senior citizens who are disabled or dementia. The multiple care services are able to make the seniors get well care and also help the family caregivers reduce the burden. All the mentioned above is to build a friendly senior society which the seniors can have dignity, safety and energy life.

Speaker: Prof. Teppo Kröger

Professor and Head,
Centre of Excellence in Research on Ageing and Care (CoE AgeCare),
University of Jyväskylä,
Finland

Education

1993-1997	PhD in Social Sciences, University of Tampere, Finland
1985-1990	Master of Social Sciences, University of Tampere, Finland

Professional Employment

2018 -	Head of the Centre of Excellence in Research on Ageing and Care
2011-	Professor of Social and Public Policy, University of Jyväskylä, Finland
2006-2011	Academy Research Fellow, Academy of Finland/University of Jyväskylä, Finland
2003–2006	Senior Lecturer, University of Jyväskylä, Finland
1993–1996, 1998–2003	Research Fellow, University of Tampere, Finland
1989–1992	Social Worker, Municipality of Säynätsalo, Finland
2006-	PI of a number of research projects with grants of over 4 million euro in total

Biography

Teppo Kröger is Professor of Social and Public Policy at the Department of Social Sciences and Philosophy of the University of Jyväskylä. He leads the Centre of Excellence in Research on Ageing and Care (CoE AgeCare) and co-ordinates the Research Group on Care Policy (CARPO). He has participated in the work of several Nordic, European and global research projects and networks and made research visits to universities in Australia, Britain, Italy, Japan, Sweden and Taiwan. In his research, Teppo Kröger analyses care policy from local, comparative and global perspectives. His studies have focused on, for example, social care for older people, integration of formal and informal care, conditions of care work and reconciliation of caring and paid employment. In his work he integrates different theoretical and empirical approaches from social policy, social gerontology, disability studies, family sociology and governance studies. He has drafted new conceptual perspectives for the analysis of care policy, including the concepts of welfare municipality, weak universalism, dedomestication, demographic panic, care capital and care poverty.

Care Poverty and Loneliness: Global Challenges for Ageing and Super-Aged Societies

Prof. Teppo Kröger

Population ageing and urbanization are global megatrends that are transforming the experience of old age all over the world. Some countries like Japan and Finland have already reached the state of being super-aged societies, having over 20% of their population aged 65 or over, and many more nations are currently ageing rapidly. Taiwan, too, is expected to become a super-aged society soon, in 2026. At the same time, the share of urban population has progressed with speed, reaching already 78% in Taiwan, 85% in Finland and 92% in Japan.

Urbanization is a risk for increasing loneliness of older people in two ways. First, a large part of older people have traditionally lived in the countryside, often together or close to their children and grandchildren but, due to the concentration of jobs in cities, younger generations are moving into urban areas and thus the distances between older people and their offspring are long in many families. On the other hand, also the number of older people living in cities is gradually increasing. In an urban environment, social networks are often thinner than in rural areas, which increases the risk of some older people to remain without social contacts. On the other hand, cities provide also new opportunities for social activities through their wider provisions of, for example, cultural and sport activities and also through their more developed day-care and senior activity centers. Urbanization of old age may also provide opportunities for the generations to stay in regular contact with each other.

Care poverty is a new concept that is linked to loneliness but not identical with it. The term of care poverty refers to a situation where an older person has needs for support in daily life but support is unavailable or insufficient, both from informal and formal sources. Care poverty may be connected to lack of economic means, that is, to poverty, but it may be caused by a lack of close family members or by poorly developed welfare provisions that do not guarantee necessary care to all people in old age. Being left without adequate care is major risk for health and well-being for older people, leading to unnecessary institutionalization and even increased mortality. Especially older people living alone have an increased risk for care poverty and thus loneliness is connected to the lack of adequate daily support. Due to its serious consequences, eradication of care poverty should be the main goal of care policies. The attainment of this objective requires different measures in urban and rural environments but the knowledge-base for such a policy progress is still under development. However, in all environments the availability of affordable and high quality home care as well as support for informal family carers are necessary key policy components. These measures reduce not just care poverty but loneliness, as well.

Speaker: Prof. Shiau-Fang Chao

Associate Professor,
Department of Social Work,
National Taiwan University,
R.O.C.(Taiwan)

Education
Ph.D., University of at Albany, SUNY

Biography
Shiau-Fang Chao's research began with aging and mental health and with particular expertise in (a) disability in later life and its impact on depression and life satisfaction, (b) the roles of formal and informal support and their relative effectiveness in enhancing mental health among Chinese elderly.

Dr. Chao has been conducting research using longitudinal data analysis methods, and her works have been published in top-ranked journals in both gerontology and disability (e.g., The Gerontologist, Aging & Mental Health, and Journal of Intellectual Disability Research).

Dr. Chao currently expands her interests to two directions. One is to investigate the effects of environmental factors on activity participation and emotional well-being of disabled older adults living in long-term care facilities by adopting the International Classification of Functioning, Disability, and Health model (ICF).

The second is to examine successful aging in the workplace among care attendants in long-term care facilities. The aim of this research is to develop more comprehensive strategies to sustain valuable aged workforce and to meet the caring needs of older individuals. Both researches listed above have been supported by National Science Council (NSC).

Are We on the Right Track? Environment, Activity Performance and Their Associations with Sense of Community Cohesion among Older Adults with Disabilities

Shiau-Fang Chao

Objectives: Community cohesion reflects interdependency among community residents and sense of belonging to the community. With growing attentions on the loneliness of older population, an increase in sense of community cohesion offers a potential opportunity to combat loneliness later in life. The current study focuses on disabled older adults, who are considered particularly vulnerable to loneliness and weak community cohesion. By adopting the ICF model, this study explores possible paths toward enhancing the sense of community cohesion for older adults with disabilities through the influences of environment and activity performance.

Methods: Data were collected from a nationwide and proportionate stratified sample of 1,280 community-dwelling older adults aged 65 and over with disabilities in Taiwan. Hierarchical linear modeling was performed to assess the hypothesized relationships, with variations among counties, townships, and individuals considered.

Results:

1. Older individuals with more ADL limitations reported lower levels of community cohesion than those with fewer ADL limitations.
2. More facilitators in attitudinal environment and informational & informal assistance, as well as fewer barriers in police & formal services were related to higher sense of community cohesion.
3. Better performance in instrumental and social activities was related to higher sense of community cohesion.
4. The benefit of participation in group and exercise activities was more significant among older persons with fewer ADL limitations.

Conclusions:

The findings underscore the importance of evaluating multidimensional environmental barriers and facilitators and various activity performance for supporting the community cohesion of disabled older adults. Efforts should be made to make attitudinal and informational environment friendlier, and also to reduce barriers to access formal services in order to promote the sense of community cohesion of older adults with disabilities.

Moderator: Ms. Karine Moykens

Secretary-General,
Department of Welfare,
Public Health and Family,
Government of Flanders,
Belgium

Education and Training
Master of Arts in Classical Philology
University of Ghent (Universiteit Gent)

Current Positions

2019-	Member of the Board of Directors at PMV (ParticipatieMaatschappij Vlaanderen – Private Equity Fund Flanders)
2018-	Member of the Board of Directors at Flanders Festival (Festival van Vlaanderen)
2018-	Member of the Board of Directors at Smals (ict)
2016-	Managing director of the Flemish Agency for Data Sharing in Health Care (VASGAZ)
2014-	Member of the College of Chairman (management College steering the Flemish Government Administration as a whole)
2014-	Administrator-General in charge of VIPA (Agency of the Flemish Government that financially supports built infrastructure in health and care facilities)
2014-	Secretary-General of the Department of Welfare, Public Health and Family

Career

2004-2007	Deputy Head of Cabinet of Ms. Inge Vervotte, Minister of Welfare, Public Health and Family
2007-	Chairwoman of the board of directors of "Het Poortje vzw" (relaxation area for persons with disabilities)
2008	Head of Cabinet of Mr. Steven Vanackere, Minister of Welfare, Public Health and Family and i.a. responsible for Institutional Reforms
2009-2013	Head of Cabinet of Mr. Jo Vandeurzen, Minister of Welfare, Public Health and Family
2009	Head of Cabinet of Ms. Veerle Heeren, Minister of Welfare, Public Health and Family
2015-	Government Commissioner — Public Psychiatric Hospital in Rekem
2016-	Member of the Community Council of the Red Cross

Speaker: Mr. Takeshi Kamino

Chairman,
Nippon Active Life Club (NACL),
Japan

Education

1965-1969	Wakayama University, Japan
1961-1964	Ise-Highschool, Japan

Professional Experience

2018 -	Vice-chairman of Japan Association for Age-free Society
2012-2017	Nalc chairman
	Nalc Vicechairman
2008-2012	Nalc Executive Director
1996-1999	Home Electric Appliances Fair Trade Conference Executive Director
1969-2005	Panasonic Corporation

Social Participation of Elderly Living Alone in Urban Area

Mr. Takeshi Kamino

Japanese society is aging faster than any countries in the world. The number of elderly people will be 7 million in 2025 in Japan.

In Japan, we developed many new residential areas around the big cities, as our economy developed rapidly. After 50 Years, the big city has become big aging society in which old couples live lonely with no children. We call it as nuclear family phenomenon. 10 years ago, the solitary death of elderly has become a big social problem in the new towns of Tokyo & Osaka. NALC, recognizing such problem seriously, organized patrol party to minimize solitary death.

In Osaka, government has taken actions to help elderly actively participate in social activities, but elderly living alone is still left out. NALC investigate the realities of the social participation of elderly living alone in their 35 bases of Osaka. We are very surprised! They (elderly living alone) are very active for social participation. 78% of them take part in some activities! I will report realities.

Speaker: Prof. Pei-Shan Yang

Professor,
Department of Social Work,
National Taiwan University,
R.O.C.(Taiwan)

Education

1990-1997	Ph. D. from Columbia University, School of Social Work
1987-1989	MSW from Columbia University, School of Social Work
1982-1986	BA from National Taiwan University, Department of Foreign Languages and Literature

Professional Background

Academia

2017	Chair, NTU, Department of Social Work
2013	Professor, NTU, Department of Social Work
2003-2013	Associate Professor, NTU, Department of Social Work
1997-2003	Assistant Professor, NTU, Department of Social Work
1989-1995	Certified Social Worker, Jewish Home & Hospital, Bronx, NY, USA

Professional Services

2019-2020	Commissioner of Senior Citizens' Welfare Promotion Subcommittee, Taipei City Government
2018-	Board Member, Catholic Beunen Foundation
2017-2019	Commissioner of Family Violence and Sexual Assault Prevention Committee, Ministry of Health and Welfare
2017-2019	Commissioner of Senior Citizens' Welfare Promotion Subcommittee, Kaohsiung City Government
2013-2015	Commissioner of the Long Term Care Advisory Committee, Taipei City Government
2012-2015	Commissioner of the Lottery Fund Committee, Ministry of Finance
	CEO, Social Policy Research Center, National Taiwan University
2011-2013	College of Social Sciences
	CEO, Center for Social Policy Research, National Taiwan University
2006-2007	College of Social Sciences
	Board Member, Catholic Foundation of Alzheimer's Disease
2002-2017	Related Dementia
	Commissioner of the Elderly Welfare Advisory Committee
2003-2012	Department of Social Affairs, Ministry of Interior
	Commissioner of the Elderly Welfare Advisory Committee
2004-2006	Taipei City Government
	Commissioner of the Elderly Welfare Advisory Committee
2004-2007, 2014-2016	Kaohsiung City Government

Home as Well as Communal: Lessons Learned from Social Housing for the Disadvantaged Elders in Taiwan

Prof. Pei-Shan Yang

Loneliness is a significant health hazard in the aged society around the world. Taiwan is no exception. The population aged 65 and above has reached 14% in 2018 and is expected to reach 20% in 2026. Meanwhile, family and household structure has changed with living alone elders increasing steadily and age of household heads rising. Though living alone per se may not be a problem, some socially and financially disadvantaged living alone elders in metropolitan cities face life challenges, especially in housing. United Nations (2009) has declared that all citizens should have the right to adequate housing as one of the basic human rights. In recent years, social housing has been identified as a remedy. There have been several demo projects mostly in Taipei City and New Taipei City. This presentation will be based on my qualitative research commissioned by the Ministry of Health and Welfare in 2017-18.
Themes:

(1) Recent social housing projects appeared to be a more integrated model. The disadvantaged elders are mixed with other residents to avoid labeling. The good side is that loneliness has been significantly reduced while living with people of different age. The not so good side is that the number of each categories of disadvantaged residents is too low to justify the provision of specialized services.
(2) The current focus of social housing is on the provision of land and housing units by the governments. The administration is mostly outsourced to private housing agencies with no particular understanding of the psycho-social needs of the disadvantaged elders. Social housing is not simply a house or home. It is also communal. More resident-based services should be integrated into the housing projects in order to enhance the quality of life of elders.
(3) On the macro level, health and age-friendly city should be the overarching principle for all housing. Different sectors of participants, such as non-for-profit organizations, private business with CSR commitment, or neighborhood organizations, should be encouraged with earmarked public subsidies to provide social housing.

Speaker: Prof. Hong-Jer Chang

Associate Professor,
Long-Term Care Department,
National Taipei University of Nursing and Health Sciences,
R.O.C. (Taiwan)

Education

1993-1997	PhD in Social Work at Washington University, St. Louis, USA.
1990-1992	MSW at Columbia University, New York City, USA.
1983-1987	MDIV at Drew University, New Jersey, USA.

Dr. Chang's current focus of research includes disability care, elder abuse, risk factors associated with disability in stroke patients, long-term care quality, and outcome evaluation.

Problems Faced by Elderly Living Alone in Taipei and Their Solutions: Doing Too Much or Not Doing Enough?

Prof. Hong-Jer Chang

It has been well documented that Elderly people living alone suffered emotional stresses such as loneliness, anxiety, distress, and depressive mood. A variety of programs have been developed to address their needs. One particular program was initiated approximately two decades ago due to incidents involving elders' passing away and their bodies decomposed without being discovered for days. The program mandated by Taipei municipal government to launch full scale of home visitation and phone calling to elderly people living alone in the city. Every single elder might receive several calls or visits in a single day by worker or staff from various branches of city government. At one point, the denial of civil liberty for them was also called to ensure that no single elder passed away alone without being discovered. This creates a number of legal as well as ethical issues. Despite criticism from different sectors of the society, the program lives on to this day. This presentation examines the program, including its initiation, further development, current status, and social, political, and cultural contexts for its rise. It raises a critical question regarding whether the city is doing too much or not doing enough?

Session 8

Urbanization and the Caring for the Disadvantaged- Healthcare, Orphan Drugs and Medical Reimbursement for Rare Diseases

To Live for Love

Moderator: Prof. Ching-Shiang Chi

Vice-Superintendent,
Tungs' Taichung Metro Harbor Hospital,
R.O.C.(Taiwan)

Brief Autobiography

Dr. Ching-Shiang Chi is a professor of Paediatric Neurology and the vice superintendent at Tungs' Taichung MetroHarbor hospital. He served as the President of Taiwan Epilepsy Society from 2007 through 2009 and the President of Taiwan Child Neurology Society from 2005 through 2008. Currently, he is president of AOCNA(The Asian and Oceanian Child Neurology Association). Dr. Chi is involved in a number of clinical research on mitochondrial diseases, neurometabolic diseases, epilepsy and CNS infectious diseases. He has published many articles in professional journals and received numerous awards for his contributions. He actively participates as an instructor in the continuing medical education programs of ILAE-ASEPA.

Present Appointment

2018-	Professor, College of Life Science, National Chung Hsing University
2017-	President of AOCNA(The Asian and Oceanian Child Neurology Association)
2007-	Vice superintendent/Professor, Tung's Taichung Metroharbor Hospital

Career Highlight

2007-2009	President of Taiwan Epilepsy Society
2005-2008	President of Taiwan Child Neurology Society
1983-2007	Director, Department of Pediatrics, Veterans General Hospital , Taichung, Taiwan

Academic Background

1982-1983	Visiting fellowship, Department of Neurology, College of Physicians and Surgeons at Presbyterian Hospital, New York City
1979-1983	Attending Physician, Department of Pediatrics, Veterans General Hospital , Taipei, Taiwan
1975-1979	Resident and Chief Resident, Department of Pediatrics, Veterans General Hospital, Taipei, Taiwan
1969-1975	National Defense Medical School, Taipei, Taiwan

Honor and Awards

The 6th national golden palm tree award of early intervention of child with developmental delay 2008

2008	National award of center of disease control (CDC,Taiwan)
2005	The outstanding teacher, National Yang Ming Medical University
1993	The Best Doctor of Academic Achievement, VGH, Taichung, Taiwan

Professional Affiliation / Membership

Taiwan Child Neurology Society
Taiwan Epilepsy Society
ICNA (International Child Neurology Association)
AOCNA (Asian Oceanian Child Neurology Association)
Taiwan Pediatric Association
Taiwan Neurological Society
Chinese Medical Association-Taipei

Speaker: Dr. Durhane Wong-Rieger

President & CEO,
Canadian Organization for Rare Disorders,
Canada

Education

1979-1982	PhD, Psychology, McGill University, Montreal, Canada
1977-1978	MA, McGill University, Montreal, Canada
1968-1972	BA, Barnard College, Columbia University, USA

Professional Experience

2016-	Chair, Rare Disease International
2013-	President & CEO, Canadian Organization for Rare Disorders
2006-	President & CEO, Institute for Optimizing Health Outcomes
2000-2006	President & CEO, Anemia Institute, Toronto, Canada
1984-1999	Professor, University of Windsor, Canada

Publications

- Wong-Rieger D Changes in patient knowledge, attitudes and usage preferences regarding biosimilars: Focus on diabetes. (2018). Canadian J Diabetes 42(5):S26
- Payne J, Williams S, Maxwell D … Wong-Rieger D et al. (2018) Familial hypercholesterolaemia patient support groups and advocacy: A multinational perspective. *Atherosclerosis* vol. 277 377-382.
- Dharssi S, Wong-Rieger D, Harold M, Terry S. Review of 11 national policies for rare diseases in the context of key patient needs. *Orphanet Journal of Rare Diseases* 2017, 12:63. DOI: 10.1186/s13023-017-0618-0
- Wood D, Asma S, Bettcher D … Wong-Rieger et al (2017). Global coalition for the fight against heart disease and stroke. *The Lancet*. 390(10108), 2130-2131.

Rare Disease Policy and Practice in Asia Pacific: Catching Up or Leading the Way?

Dr. Durhane Wong-Rieger

The policy and practice of rare diseases in Asia Pacific are as diverse as the rare disease populations found in the countries spanning the region. In 1972, Japan introduced the world's first initiatives directed at rare (intractable) diseases, with official definition and legislation in 1995. In comparison, orphan drug legislation was implemented in the USA in 1983 and in the European Union in 1999. Introduced in 2000, Taiwan rare disease national policy has provided a broad scope of services and support for individuals and families affected by rare disease, whereas France implemented Europe's first national plan for rare diseases in 2005. Unfortunately, across the Asia-Pacific region, recognition for rare diseases has been uneven and has generally lagged the Western countries, reflecting the challenges of the region in population size, economic development, healthcare capacity, ethnicity and culture, and, to a large extent, patient advocacy. One of the downsides of the neglect for rare diseases in Asia Pacific is the neglect for many diseases that are primarily found in SE Asian populations. Notably, the Taiwan Rare Disease Foundation, founded in 1999, is one of the earliest and most successful patient networks not just in the region but worldwide. With the launching of the APEC Rare Disease Framework in 2018 and the official recognition of rare disease in the United National Declaration on Universal Health Coverage in 2019, now is the time to seize the opportunity for all countries in Asia Pacific to implement national programs to address the urgent needs of individuals and families affected by rare diseases.

Speaker: Dr. Kuo-Chung Lan

Vice-Superintendent,
Kaohsiung Chang Gung Memorial Hospital,
R.O.C. (Taiwan)

Biography

Dr. Kuo-Chun, Lan was a graduate of College of Medicine, China Medical University. He also received his PhD degree from Graduate Institute of Clinical Medical Sciences, Chang Gung University. He completed the residency training of Obstetrics and Gynecology and research fellow of reproductive medicine in Kaohsiung Chang-Gung Memorial Hospital. His major research interests include clinical and basic reproductive medicine, molecular biology, Medical genetics. He has many research papers in reproductive medicine and gets lots of research awards. Now he is associate professor and Director of Division of Reproductive Endocrinology and Infertility of Department of Obstetrics and Gynecology and vice superintendent of Kaohsiung Chang-Gung Memorial Hospital.

Publication

1. Chang SY, Lien KC, Huang FJ, Kung FT, Tsai MY. Comparable clinical outcomes of tubal embryo transfer for oligoastheno-teratozoospermia treated with intracytoplasmic sperm injection and for female infertility treated with in vitro fertilization. Chang Gung medical journal 2000;23:253-9.
2. Hsieh CH, ChangChien CC, Lin H, Huang EY, Huang CC, Lan KC *et al.* Can a preoperative CA 125 level be a criterion for full pelvic lymphadenectomy in surgical staging of endometrial cancer? Gynecologic oncology 2002;86:28-33.
3. Huang FJ, Huang HW, Lan KC, Kung FT, Lin YC, Chang HW *et al.* The maturity of human cumulus-free oocytes is positively related to blastocyst development and viability. Journal of assisted reproduction and genetics 2002;19:555-60.
4. Lan KC, Lin YC, Huang FJ, Kung FT, Hsieh CH, Chang SY. Comparison of metaphase II oocytes after stimulation with recombinant follicle-stimulating hormone and urinary follicle-stimulating hormone in a pituitary down-regulation regimen. Fertility and sterility 2002;78:639-41.
5. Tan PH, Yang LC, Shih HC, Lin CR, Lan KC, Chen CS. Combined use of esmolol and nicardipine to blunt the haemodynamic changes following laryngoscopy and tracheal intubation. Anaesthesia 2002;57:1207-12.

Health Care, Prevention and Control of Rare Diseases

Dr. Kuo-Chung Lan

In 2000, Taiwan promulgated the “Prevention of Rare Disease and Orphan Drug Act”, becoming the fifth nation in the world to introduce legislation specifically to protect the rights of rare disease patients, This Act is enacted for the prevention of the occurrence of rare diseases; for the early diagnosis of rare diseases; for the strengthening healthcare of rare disease patients; for assisting patients in gaining access to specific drugs for the treatment of rare diseases and special nutritional foods essential for the maintenance of life; and for encouraging and ensuring the supply, manufacturing, research and development of such drugs and foods.

The competent authority of the Act is the Ministry of Health and Welfare. Rare disease patient care is coordinated by three agencies under the Ministry, i.e. the National Health Insurance Administration, the Food and Drug Administration, and the Health Promotion Administration (HPA). In Taiwan, the Review Committee for Rare Diseases and Orphan Drugs is organized according to the “Prevention of Rare Diseases and Orphan Drug Act”. The committee review and recognized the prevalence of rare diseases as fewer than 1/10,000. As of Jun. 2019, the Committee had reviewed, certified and declared 223 rare diseases. They had also listed 75 orphan drugs and 40 special nutrient foods essential for the maintenance of life.

To construct a comprehensive prevention and healthcare network, the Ministry of Health and Welfare designates and publicly announces notifiable rare diseases; establishes a case reporting system; includes rare diseases in the National Health Insurance program and in the categories of major illnesses and injuries; subsidizes medical costs non-reimbursable by the National Health Insurance program; subsidizes and supplies special nutrient foods as well as emergency orphan drugs for rare diseases; provides services and subsidies of prenatal diagnosis and newborn screening; establishes genetic counseling centers; provides psychological supports; and subsidizes the research, education and publicity related to prevention and treatment of rare diseases.

Kaohsiung Chang-Gung Memorial Hospital is one of the professional institutions entrusted by HPA. After obtaining the consent of patients or their legal representative, the professionals visit and inform regarding the related impact of diseases, as well as to provide psychological support, childbirth care, and care consultation. To facilitate comprehensive, accessible, and continuous care for patients and their families, the care service team focuses on four orientations, including disease care, social resources referral, physical and mental care, and family support system.

Speaker: Dr. Kristen Nowak

Director,
Office of Population Health Genomics,
Western Australian Department of Health,
Australia

Biography

Kristen is the Director of the Office of Population Health Genomics (OPHG) within the Western Australian Department of Health. The OPHG has a strong focus on the translation of evidence-based genomic and screening technology into the health system, and a longstanding emphasis on improving the healthcare journey of people living with rare diseases (e.g. development of the Western Australian Rare Diseases Strategic Framework 2015 – 2018). Kristen's team is currently leading the development of a Health Genomics Strategy for Western Australia, with rare diseases being a strong focus. Similarly, Kristen's office is the Secretariat for the Western Australian Ministerial Council for Precision Health, established by and reporting to the state's Minister for Health. This Council will have precision health initiatives that aid people living with rare diseases as a strategic priority.

Nationally, Kristen is the WA member for the Standing Committee on Screening, and the Project Reference Group on Health Genomics. She is also chair of the national Newborn Bloodspot Screening Program Management Committee, for which the OPHG is secretariat (and played an integral role in the development of the Newborn Bloodspot Screening National Policy Framework). Kristen is a member of the Scientific and Medical Advisory Committee for Australia's peek rare diseases patient advisory group, Rare Voices Australia. Internationally, Kristen is the Western Australian Department of Health representative for the International Rare Diseases Research Consortium.

Kristen has over 20-year-experience as a medical researcher in the rare diseases field, focusing on finding new disease genes, understanding disease pathobiology, and devising and evaluating potential therapies (>75 peer-reviewed publications in these areas; has received >AUD5M research funding). Kristen has been an Australian National Health & Medical Research Council CJ Martin Fellow and an Australian Research Council Future Fellow. She is currently an Honorary Research Fellow at the Harry Perkins Institute of Medical Research continuing her research into rare genetic diseases. She is also an Adjunct Senior Lecturer at the University of Western Australia where she lectures in multiple aspects of genetics and rare diseases.

Kristen's committee experience includes being a board member of Scitech (Western Australia's Science Discovery Centre promoting science, technology, engineering and maths around the state; 2016 –), Member of the Western Australian Council for Science and Innovation (2009 – 2010), and Executive Director of the Australian Society for Medical Research (2007 - 2013). Kristen has been Convener or organising committee member for multiple conferences and workshops, and has participated in a variety of other committees in a voluntary capacity. Kristen is a passionate ambassador for rare diseases and the importance of medical research, and has given scores of public talks about the topic, as well as conducted and facilitated many media initiatives.

Kristen's awards include Western Australian Young Australian of the Year (Science & Technology; 2000); Western Australian Premier's Young Scientist of the Year (2007); Western Australian Young Tall Poppy of the Year (2010); and World Muscle Society Young Myologist of the Year (2012).

Making Rare Diseases Count in Western Australia

Dr. Kristen Nowak

Being a public health priority, rare diseases are commonly life-threatening or chronically debilitating, incurable, cannot be prevented, have no effective treatments and are associated with significant pain and suffering. The development of the Western Australian Rare Diseases Strategic Framework 2015–2018 was significant for Western Australians living with a rare disease, their carers, families and the clinicians, researchers and policy-makers who support them, as it was the first strategy for rare diseases in Australia. The Office of Population Health Genomics (OPHG) within the Western Australian Department of Health (WADOH) led and coordinated the Framework's development and implementation. The Framework provides coordination, coherence and a clear direction for a range of rare disease, to benefit the health and wellbeing of people living with rare diseases. The Framework promotes a person-centred approach, respectful of and responsive to the needs of people living with rare diseases, actively involving them in decision-making, promoting their care coordination and providing access to information and support. The Framework also strives for a high quality health system for people living with rare diseases, progressing equitable and integrated health care and supporting health professionals to deliver quality care for patients living with rare diseases. Another focus of the Framework's is to foster world-class research on rare diseases, provide much needed evidence for rare diseases in areas such as epidemiology, health system use, clinical and translational research. Some of the Framework's initiatives include improvements in clinical coding for rare diseases within the health system; establishment of an Undiagnosed Diseases Program; development and evaluation of a transition clinic navigator position to aid people with rare and complex diseases more effectively transition from paediatric to adult hospitals; and commencing a program to allow patients with rare and uncommon cancers to access clinical trials locally based on the genetic signature of their tumours. The Framework remains an active document, especially relating to ongoing initiatives aligned with Western Australia's *Sustainable Health Review Final Report*, and those relevant to a newly formed Health Minister's Council for Precision Health. Additionally, the Framework's outcomes are informing the current development of a *National Rare Diseases Framework and Action Plan* for Australia.

Speaker: Mr. Shinobu Uzu

Associate Executive Director,
Pharmaceuticals and Medical Devices Agency (PMDA),
Japan

Mr. Shinobu UZU is Associate Executive Director for new drug review, PMDA since April 2018. After obtaining a master degree from Faculty of Pharmacy, University of Tokyo, he has around thirty years' experiences in the Ministry of Health, Labour and Welfare (MHLW) and Pharmaceuticals and Medical Devices Agency (PMDA). From 2008 to 2011, he was involved in international affairs as ICH Steering Committee Member and APEC LSIF Regulatory Harmonization Steering Committee Member of MHLW. From 2011 to 2014, he was in charge of evaluation of new drugs as director of Office of New Drug I, PMDA. From 2014 to March 2018, he dealt with safety management of pharmaceuticals as director of safety division, Pharmaceuticals and Food Safety Bureau, MHLW and Chief Safety Officer of PMDA.

Accelerating Orphan / Innovative Drug Development in Japan - Current status & Challenges -

Mr. Shinobu Uzu

Orphan designation system in Japan officially started with the 1993 revision of the Pharmaceutical Affairs Law. It was also a major turning point that the law would cover from health regulations to industrial promotion. Since then, the development of orphan drugs has progressed, but unmet medical needs still exist. In Japan, expedited drug development schemes such as Sakigake designation scheme and conditional early approval system were introduced to promote the early launch of innovative drugs.

On the other hand, in order to support the development of innovative drugs, it is necessary to update our knowledge. Therefore, PMDA has established Regulatory Science Center and is promoting collaboration with academia. It is also effective to utilize patient registries and international information sharing

In my presentation, I will explain the current status and challenges for orphan drug development from the above points.

Speaker: Prof. Wuh-Laing Hwu

Doctor,
Department of Pediatrics and Medical Genetics,
National Taiwan University Hospital,
R.O.C.(Taiwan)

Professor Hwu completed his medical and PhD degrees at College of Medicine, National Taiwan University. He completed his residency at NTUH. He has also done fellowship at the Department of Genetics at Johns Hopkins University, and was a Visiting Scientist at the Department of Medical Genetics at Mayo Clinic. He was the Department Head of Medical Genetics at NTUH from 2006 to 2012, and was the Inaugural President of the Taiwan Human Genetics Society from 1999 to 2002. He is a Board Member of the Taiwan Foundation for Rare Disorders.

Professor Hwu set up the Newborn Screening Program for Pompe Disease in Taiwan, one of the first in the world, and has dedicated much of his research and clinical efforts in the diagnosis, management, and gene therapy for patients with rare genetic diseases. His recent interests include employing next generation sequencing (NGS) and artificial intelligence to facilitate the diagnosis of genetic disease and related conditions.

Selected publications:

Lee NC, **Hwu WL**, Muramatsu SI, Falk DJ, Byrne BJ, Cheng CH, Shih NC, Chang KL, Tsai LK, Chien YH. A Neuron-Specific Gene Therapy Relieves Motor Deficits in Pompe Disease Mice. Mol Neurobiol. 2018 Jun;55(6):5299-5309.

Chien YH, Lee NC, Tseng SH, Tai CH, Muramatsu S, Byrne BJ, **Hwu WL**. Efficacy and safety of AAV2 gene therapy in children with aromatic L-amino acid decarboxylase deficiency: an open-label, phase 1/2 trial. Lancet Child Adolesc Health 2017 Dec; 1: 265–73

Chien YH, Chiang SC, Weng WC, Lee NC, Lin CJ, Hsieh WS, Lee WT, Jong YJ, Ko TM, **Hwu WL**. Presymptomatic Diagnosis of Spinal Muscular Atrophy Through Newborn Screening. J Pediatr. 2017 Nov;190:124-129.e1

Lee NC, Lee YM, Chen PW, Byrne BJ, **Hwu WL**. Mutation-adapted U1 snRNA corrects a splicing error of the dopa decarboxylase gene. Hum Mol Genet. 2016 Dec 1;25(23):5142-5147

Lee NC, Muramatsu S, Chien YH, Liu WS, Wang WH, Cheng CH, Hu MK, Chen PW, Tzen KY, Byrne BJ, **Hwu WL**. Benefits of Neuronal Preferential Systemic Gene Therapy for Neurotransmitter Deficiency. Mol Ther. 2015 Oct;23(10):1572-81.

Chien YH, Lee NC, Chen CA, Tsai FJ, Tsai WH, Shieh JY, Huang HJ, Hsu WC, Tsai TH, **Hwu WL**. Long-term prognosis of patients with infantile-onset Pompe disease diagnosed by newborn screening and treated since birth. J Pediatr. 2015 Apr;166(4):985-91.

Lee NC, Chien YH, Hu MH, Liu WS, Chen PW, Wang WH, Tzen KY, Byrne BJ, **Hwu WL**. Treatment of Congenital Neurotransmitter Deficiencies by Intracerebral Ventricular Injection of an Adeno-Associated Virus Serotype 9 Vector. Hum Gene Ther. 2014 Mar;25(3):189-98.

Lee NC, Shieh YD, Chien YH, Tzen KY, Yu IS, Chen PW, Hu MH, Hu MK, Muramatsu S, Ichinose H, **Hwu WL**. Regulation of the dopaminergic system in a murine model of aromatic L-amino acid decarboxylase deficiency. Neurobiol Dis. 2013 Apr;52:177-90.

Hwu WL, Muramatsu S, Tseng SH, Tzen KY, Lee NC, Chien YH, Snyder RO, Byrne BJ, Tai CH, Wu RM. Gene therapy for aromatic L-amino acid decarboxylase deficiency. Sci Transl Med. 2012 May 16;4(134):134ra61.

Chien YH, Lee NC, Huang HJ, Thurberg BL, Tsai FJ, **Hwu WL**. Later-onset Pompe disease: early detection and early treatment initiation enabled by newborn screening. J Pediatr. 2011 Jun;158(6):1023-1027.e1.

Clinical trials of orphan drugs in Taiwan

Prof. Wuh-Laing Hwu

Development of new treatments for rare disorders has achieved substantial success in recently years. Governments in many countries, including in Taiwan, encourage the development of orphan drugs, and pharmaceutical companies also exhibit great enthusiasm. The successful rate of developing new drugs for rare disorders is higher than for common diseases, probably due to the better understanding of disease etiology for genetic diseases. Sometimes, a clinical trial is the first available treatment for a rare disorder, and enrollment into a clinical trial can be important for patients. The genetic disease societies in Taiwan, in collaborative with patient organizations, actively introduced clinical trials for rare disorders to Taiwan over the past years. My group in the National Taiwan University Hospital also developed the first treatment for aromatic L-amino acid decarboxylase (AADC) deficiency. AADC deficiency is a rare inherited disease with a relatively increased prevalence in South East Asia due to a severe founder mutation IVS6+4A>T (c.714+4A>T). Patients with severe mutations of the DDC gene do not develop head control, cannot sit, stand, or speak before they die of respiratory complications a few years of age. We started a gene therapy in 2012 with intra-putamen injection of AAV2-hAADC to treat these patients, which improves the motor function of patients 12 months after treatment. The surgery is a standard procedure proved in the treatment of Parkinson disease, and the AAV2 vector is save. Commercialization of this treatment is currently undergoing. Furthermore, the success from the development of gene therapy for AADC deficiency will encourage future expansion of gene therapy applications to other rare disorders.

Speaker: Dr. Yi-Wen Heng

Regional Registry Lead,
JPAC & Asia, Sanofi Genzyme,
Singapore

Education

2011	Doctor of Philosophy, Biological Sciences Nanyang Technological University, SG
2007	Bachelor of Science in Biological Sciences (First Class Honors) Nanyang Technological University, SG
2004	Diploma in Medical Technology (With Merit) Singapore Polytechnic, SG

Relevant Professional Certifications

Project Management Professional, Project Management Institute
Lean Six Sigma Green Belt, International Association for Six Sigma Certification
Good Clinical Practice, Barnett International
Singapore Guidelines for Good Clinical Practice, National Healthcare Group Singapore
Responsible Care and Use of Laboratory Animals, Singapore Health Services

Career Profile

Regional Registry and Medical Program Manager, Japan-Asia Pacific at Sanofi
(Feb 2015 to current)

- Managed all operational activities for Medical Programs, including company sponsored and investigator initiated studies, across Japan and Asia Pacific (JAPAC) Medical Affairs (MA) function; overseeing budget, timelines and reporting. Worked closely with global and local affiliates to ensure executional excellence of regional/country plans in alignment with global plans.
- Identify and managed collaboration activities with cross functional team to support reimbursement, market access, label expansions strategies, development of peer reviewed publications, updating of treatment guidelines, market authorizations for Post Marketing Commitments
- Implemented the roll out of global training plans and documentation into the region in close collaboration with the local affiliates. Developed regional educational materials for external and internal stakeholders to support Registry program awareness.
- Spearheaded and organized the monthly JAPAC Journal Club for internal stakeholders, including assessment and selection of key topics from Global Medical Communication team to ensure relevance to regional business needs.
- Organized and Lead Regional Registry Advisory Board Meetings with Key Opinion Leaders.
- Lead involvement in the selection, quality assessment, service performance tracking of vendor, including contracting, scope and negotiations. Supported internal project team resourcing needs.
- Assisted in developing, implementing, maintaining and monitoring Standard Operating Procedures (SOPs) as necessary to ensure high quality activities and processes within JAPAC region
- Managed metrics and reports across JAPAC MA function and ensured meaningful selection of KPI and trending data to support business decisions for leadership team.

Value and Current Trends of Real World Evidence and Registry Data in Rare Diseases

Dr. Yi-Wen Heng

Randomized controlled trials (RCT) are considered the most scientifically rigorous method of hypothesis testing for evaluating the effectiveness of interventions. They were and are still regarded as the gold standard in the drug development process. Real-world data (RWD) and evidence has, in recent times, gained increasing acceptance in complementing RCT data, and particularly more so for rare disease therapeutics where unique challenges hinder clinical trials efficiencies such as low patient numbers, limited understanding of disease pathology and progression, variability in disease presentation, and a lack of established endpoints. These make operating rare disease clinical trial more complex and a costly endeavor with increased risks of failure. RWD, include sources such as electronic medical records, insurance claims data, patients registries, questionnaires and new health technologies such as smart wearables and home measurement devices, are increasingly becoming a relied upon research tool at every phase. Patients, payors and regulators are demanding evidence about how treatments work in the real-world settings. Regulatory agencies have come to understand that many concerns regarding real-world data quality can be addressed through the careful design and application of appropriate analysis methodologies. This has led to development of new guidelines in recent times that aim to provide a more standardized and transparent approach for evaluating RWD in the drug approval process. As companies continue to navigate the ever changing regulatory environment, the increased appreciation of real-world evidence has bring about a more positive prospect than ever for the role of Registries/RWD in rare diseases drug research.

Speaker: Prof. Ming-Chin Yang

Professor,
Institute of Health Policy and Management,
National Taiwan University,
R.O.C.(Taiwan)

Education

1986-1989	Doctor of Public Health, School of Public Health, University of Texas
1984-1986	Master of Public Health, School of Public Health, University of Texas
1975-1979	Bachelor of Public Health, National Taiwan University (NTU)

Related Experience

2018-	Associate Editor, Value in Health Regional Issue
2017-2019	Associate Dean, College of Public Health, NTU
2016-2017	Director, MPH Program, College of Public Health, NTU
2013-2016	Scholar Representative, Joint Establishment of the NHI Drug Items and Fee Schedule
2008-2011	Chairperson, National Health Insurance (NHI) Medical Expenditure Negotiation Committee
2006-2008	Director, Department of Planning and Management, NTU Hospital
2003-2005	President, Taiwan Society of Pharmacoeconomics and Outcomes Research
1999-2002 2008-2010	Chairperson, Institute of Health Care Organization Administration
1991-2016	Associate Professor, College of Public Health
1995-1996, 2001-2004	Chief, Section of Evaluation, NHI Task Force, Department of Health (DOH)
1993-1995	Chief, Section of Training and Education, NHI Task Force, DOH
1991-1993	Chief, Section of Health Care System, NHI Task Force, DOH
1990-1991	Lecturer, College of Public Health, NTU
1982-1984	Junior Specialist, Department of Planning and Management, NTU Hospital

Current status and challenges of Accessibility to Orphan Drugs Under the Nation Health Insurance in Taiwan

Prof. Ming-Chin Yang

In Jun 1999, Taiwan Federation of Rare Diseases started to operate and advocate rare disease patient's right. In Jan 2000, Rare Disease and Orphan Drug Act passed legislation, which make Taiwan as the fifth country to pass the Act related to rare disease. According to this Act, the government has the obligation to provide proper health care for rare disease patients.

The definition of a rare disease should have a Prevalence rate fewer than 1/10,000 population, has a genetic origin, and Is difficult to diagnose and treat. The number of rare diseases announced by the Ministry of Health and Welfare increased from 58 in 2000 to 220 in 2017.

According to the latest Taiwan Food and Drug Administration (TFDA) statistics report, by March 2018, there were 102 ingredients applicable to The Rare Disease and Orphan Drug Act. As of June 2019, there were 66 ingredients that had been reimbursed by the National Health Insurance (NHI). Growth rate of orphan drugs expenditure ranged from 11% to 25% in the past decade. In 2018, the total orphan drug expenditure is around USD 196M.

The major challenge of orphan drugs reimbursement is that immediate access to orphan drugs become harder and harder. For example, among 81 Orphan Drug Designation granted items, only 52 (64%) received reimbursement approval. A reform of the review process is required to ensure rare disease patients to receive adequate drugs in a timely fashion.

Speaker: Mr. Hyun-Min Shin

Position Chairman,
Korean Organization for Rare Diseases,
Republic of Korea

Related Experience

2016-	Committee member of Special Exception project in NHIS (National Health Insurance Service)
2008-	Advisory committee member of KODC (Korea Orphan & Essential Drug Center Drug Center)
2008	Export Committee member of the department for rare medical device in KFDA (Korea Food & Drug Administration)
2004-2016	Export Committee member of rare disease patient`s center in KCDC (Korea Centers for Disease Control and Prevention)
2004-2005	Advisory committee member of We Start Movement Headquarters
2001-	Chairman of KORD (Korean Organization for Rare Diseases)
2001-2016	Advisory committee member of medical support project for rare disease patients in MW (Ministry of Health & Welfare)

Achievements

Awarded a volunteer service award for The 21st Gil prize by Women doctors (Korean Medical Women`s Association. 2011)

Awarded a merit of National Healthcare business for The 37th Health Day (Prime minister`s citation. 2009)

Awarded a merit of medical support project for rare disease patients (Ministry of Health & Welfare minister`s citation. 2006)

Session 9

Acute Care for Elders in a Super-aged Society: Towards Age-friendly Hospital

To Live for Love

Moderator: Prof. Liang-Kung Chen

Director,
Center for Geriatrics and Gerontology,
Taipei Veterans General Hospital,
R.O.C.(Taiwan)

Education

2007-2013	Professor, Aging and Health Research Center, National Yang Ming University
1989-1996	MD in National Yang Ming University, Taipei, Taiwan

Professional Experience

Board Member, Long-Term Care Promotion Committee, Executive Yuan, Taiwan
Board Member, National Sustainable Development Network, Executive Yuan, Taiwan
Editor-in-Chief, Archives of Gerontology and Geriatrics
Editor-in-Chief, Aging Medicine and Healthcare
Associate Editor, BMC Geriatrics
Associate Editor, Journal of Frailty and Aging

Biography

Dr. Chen attended the National Yang-Ming University School of Medicine from 1989 to 1996, gaining his MD, and becoming the PhD of the Institute of Health Policy and Welfare, National Yang-Ming University to extend his research from biomedical domain to aging and public policy. He started his residency in orthopedic surgery in 1996, and from 1998 to 2003, his residency in family medicine at the Taipei Veterans General Hospital, and became an attending physician of the Department of Family Medicine in 2003. In 2005, he was invited to the University of Oxford as a Visiting Scholar in Department of Clinical Gerontology. Dr. Chen became the Director of Center for Geriatrics and Gerontology, Taipei Veterans General Hospital in 2006 and the Dr. Chen has published about 300 peer-reviewed articles in several domains: (1) frailty and sarcopenia, (2) insulin resistance and metabolic resistance of the older people, (3) age-friendly healthcare systems, and (4) smart health care and artificial intelligence. Dr. Chen is heavily involved in international collaboration for research and healthcare reforms for older people and he is now leading several working groups for research of older people.

Speaker: Dr. Samir Sinha

Director of Geriatrics
Sinai Health System and University Health Network, Toronto
Canada

Education

2009-2010	Business of Medicine Certificate Johns Hopkins University – Carey School of Business, Baltimore, USA
2009-2010	Faculty Development Program in Teaching Skills Johns Hopkins University School of Medicine, Baltimore, USA
2008-2009	Faculty Development Program in Curriculum Development Johns Hopkins University School of Medicine, Baltimore, USA
2009-2010	Erickson Fellow in Clinical Geriatrics, Education and Leadership Johns Hopkins University School of Medicine, Baltimore, USA
2005-2008	Postgraduate Internal Medicine Residency University of Toronto Hospitals, Toronto, Canada
2002-2008	Doctor of Philosophy (D.Phil) in Sociology Oxford Institute of Ageing, Department of Sociology, University of Oxford, United Kingdom
2001-2002	MSc in Economic and Social History (Medical History) Faculty of Modern History, University of Oxford, United Kingdom
1998-2002	Doctor of Medicine (MD) Faculty of Medicine, University of Western Ontario, London, Ontario, Canada
1998-2000	Bachelor of Science (Medical Research) Faculty of Medicine, University of Manitoba, Winnipeg, Manitoba, Canada
1995-1998	Bachelor of Science (Life Sciences) Degree Faculty of Arts and Sciences, Queen's University, Kingston, Ontario, Canada
1983-1995	Manitoba Secondary Schools Diploma St. John's-Ravenscourt School, Winnipeg, Manitoba, Canada

Education and Training Certifications

2017	Fellow, American Geriatrics Society (AGSF)
2010	American Board of Internal Medicine (Geriatric Medicine) Fellow, Royal College of Physicians of Canada (Geriatric Medicine)
2009	American Board of Internal Medicine (Internal Medicine)
2009	Fellow, Royal College of Physicians of Canada (Internal Medicine)
2008	Licentiate of the Medical Council of Canada

Awards, Distinctions and Scholarships

2019	American Geriatrics Society Award for Highest Rated Abstract in Health Services & Policy Research
2018	Health Quality Transformation Abstract of Distinction Award
2018	H. Garfield Visiting Lecturer at Queen's University
2017	Fellow, American Geriatrics Society (AGSF)
2017	Western University's Be Extraordinary Campaign Representative
2017	The Senator David A. Croll Memorial Wellness Lecturer
2017	UCSF Division of Geriatrics, Visiting Professorship

Delivering Improved Patient and System Outcomes for Hospitalized Older Adults through an Acute Care for Elders (ACE) Strategy

Dr. Samir Sinha

Older adults represent 17.1% of Canada's population but 40% of its hospital admissions and 60% of hospital days every year. They represent the Canadian health care system's greatest users and it is clear that while its users have changed, the system hasn't. In dealing with a hospital system that was designed 50 years ago when the average Canadian was 27 years of age, it is becoming clear that we need to adapt it to meet the needs of the older patients with increasingly complex needs that now rely on it the most. Furthermore, acute care hospitals are now widely recognized as potentially high-risk environments for older adults.

In 2010, Toronto, Canada's Mount Sinai Hospital, conceived its Acute Care for Elders (ACE) Strategy as a multi-component evidence-informed intervention to improve the care of hospitalized older adults. Adopting an 'elder-friendly hospital' approach to the way it envisioned and delivered its care, it began implementing community-based, emergency department, inpatient and ambulatory models that sought to recognize and address geriatric care issues in a proactive and systematic way that could achieve better patient, system and financial outcomes.

In this talk, Dr Sinha will outline the ACE Strategy's four core guiding principles and highlight examples of the unique interventions that Mount Sinai Hospital implemented within the hospital and within the community itself. He will also present the outcomes achieved through this approach with over 12,000 patients over a 6-year period that showed its ability to reduce its rate of admissions, lower hospital lengths of stay, readmissions and the direct cost of care per patient. Dr Sinha will further discuss in his talk the benefits of implementing integrated evidence-based models across the continuum of care; share some lessons learned on advancing the care of older adults in a complex healthcare landscape; and how his team is now supporting the implementation of ACE Strategy models of care and care practices across Canada and beyond.

Overall Presentation Objectives:

1. Demonstrate how current care delivery paradigms are problematic and require an elder friendly approach.
2. Introduce the Acute Care for Elders (ACE) Strategy as a care model that can deliver better patient and system outcomes.
3. Share some lessons learned on advancing the care of older adults in a complex healthcare landscape.

Speaker: Dr. Brittany Ellis

Provincial Lead of Geriatric Emergency Medicine,
University of Saskatchewan Health Authority,
Canada

Education

2014-2019	Emergency Medicine FRCPC University of Ottawa and The Ottawa Hospital (Can).
2017-2018	Fellow Geriatric Emergency Medicine University of Toronto and Sinai Health Systems (Can).
2017-2018	Diploma in Mountain Medicine Mountain Medicine Society of Nepal (Nep) Accreditation: Union Internationale des Associations d'Alpinisime (UIAA), International Society of Mountain Medicine (ISMM) and International Commission for Alpine Rescue (IKAR)
2010-2014	Bachelor of Medicine & Surgery (MB ChB) (Honours) Warwick Medical School - University of Warwick (UK)
2008-2009	Executive Diploma - Public Sector Management (Level 7) Chartered Management Institute (UK)
2006-2007	Master of Science - Public Health University of Edinburgh (UK)
2003-2006	Bachelor of Science (Distinction) - Microbiology & Immunology University of Saskatchewan (Can)

Professional Experience

2019-	Emergency Physician Saskatoon, Saskatchewan Saskatchewan Health Authority
2019-	Provincial Lead: Geriatric Emergency Medicine Saskatchewan Health Authority
2010	Public Health Advisor: Young People & Local Government National Health Service (NHS) - Health Scotland (UK)
2008-2010	Project Lead – Local Policy Improvement for Dementia Services University of Stirling, Fife Council & NHS Fife (UK)
2008	Research Assistant – Evaluation of Have a Heart Paisley (A complex health intervention aimed at reducing rates of CAD in at risk groups). The University of Edinburgh (UK)
2007	Research Assistant – Evaluation of Healthy Respect & Zero Tolerance Programs (Two programs designed to improve sexual health, relationship building and respect in children and young people). Napier University/ Medical Research Council (UK)

The Geriatric Emergency Department (and beyond)

Dr. Brittany Ellis

The modern day emergency department (ED) was born to fill a need for acutely unwell people to gain access to urgent medical care. Formerly based on the premise of "single problem, single solution" medicine, the use of and services provided by the emergency department has expanded from primarily clinical care to requiring a host of inter-professional team members including social workers, physiotherapists, pharmacists, mental health specialists, and more. The perception and role of the modern emergency department has shifted and it now represents the nexus of care, where people present and require access to a variety of health and social care services. With this shift of paradigm comes new challenges, as well as new opportunities for emergency services providers.

In her talk Dr. Ellis will build upon the Acute Care for the Elderly Strategy presented by Dr. Sinha, and discuss the role of the emergency department in caring for older people who present with a complex array of needs. She will share ways in which departments and teams across Canada are developing their services and concentrating on improving care both in and outside the emergency room. With a focus on appropriate, accessible and collaborative care, Dr. Ellis will use real examples to highlight innovative ways that the unique needs of older people are being met.

Objectives:

1. Review the principles of geriatric friendly emergency departments
2. Discuss the concept of appropriate ED use, and how it differs from ED diversion
3. Explore the transitions in care older people make when accessing and leaving the ED, and ways this can be improved
4. Highlight how working across traditional care divides (e.g. community vs hospital) can benefit service users and service providers

Speaker: Ms. Jeanne Cooper RN, MPH

International Program Director,
Spaulding Rehabilitation Network,
United States

Education

2007	Associate in Science: Nursing, Community College of Allegheny County
2004	Master of Public Health, Graduate School of Public Health, Concentration: Behavioral and Community Health Services, University of Pittsburgh
1994	Bachelor of Arts: Clinical Sociology, Minor: Psychology, Indiana University of Pennsylvania

Professional Qualifications

A high performing leader with outstanding interpersonal skills and a proven ability to create and implement initiatives and programs to further grow and establish global patient-centered health services. Possessing a deep understanding of international patient travel logistics/ safe patient transfer, cross-cultural communication, global medical tourism, and fostering business relationships. Demonstrated success developing interdepartmental collaboration teams/ outside vendor relations and communication streams/processes to facilitate exceptional, time-sensitive patient experience satisfaction outcomes.

Areas of Expertise

Program Development
Operations
Strategic Planning
Monitoring and Evaluation
Team Building & Collaboration
International Relations
Financial Budgets
Contracts/ Agreements
Administration Skills

Professional Experience

Spaulding Rehabilitation Network (Srn), Boston, Ma
Director, International Program (2018- Present)

Brigham And Women'S Hospital (Bwh), Boston, Ma
Assistant Director, Business Development (2016 – 2018)

University Of Pittsburgh Medical Center (Upmc), Pittsburgh, Pa
Director, Upmc Global Care (2010-2016)

Penn State Milton S. Hershey Medical Center, Hershey, Pa
Staff Nurse (2010)

Staff Nurse, Neuroscience Integrated Care Unit (2009-2010)

Closing Remark: Dr. Ying-Wei Wang, M.D., Dr. P.H.

Director-General,
Health Promotion Administration,
Ministry of Health and Welfare,
R.O.C.(Taiwan)

Education
Dr.P.H., School of Public Health & Tropical Medicine, Tulane University, U.S.A.
M.P.H., School of Public Health & Tropical Medicine, Tulane University, U.S.A.
M.D., School of Medicine, National Taiwan University, Taiwan

Professional Experience
Deputy Director, Department of Medicine, Tzu Chi University.
Director, Department of Medical Humanities, School of Medicine, Tzu Chi University.
Director, Heart Lotus Care Ward, Buddhist Tzu Chi General Hospital.
Secretary-general, Taiwan Society of Health Promotion Hospitals.
Council member, Asia Pacific Hospice Palliative Care Network.
Director, Department of Family Medicine, Buddhist Tzu Chi General Hospital.
Director, Center for Faculty Development and Instructional Resources, Tzu Chi University.
Deputy Director General, Bureau of Health Promotion, Department of Health, Taiwan.
Attending Physician, Department of Family Medicine, Buddhist Tzu Chi General Hospital.
Attending Physician, Department of Geriatrics, Taipei Hospital.
Resident, Department of Family Medicine, National Taiwan University Hospital.

Biography
Dr. Wang Ying-Wei currently serves as the Director General of Health Promotion Administration, Ministry of Health and Welfare in Taiwan. He is also the Associate Professor in the Department of Medical Humanities, Tzuchi University, Taiwan.

Professor Wang had previously served as the Secretary-General of Taiwan Society of Health Promotion Hospitals, and has been newly elected as the governance board member in the International Health Promoting Hospitals Network in June 2018. In addition, he devotes great effort to the development of hospice and palliative care and served as a council member in the Asia Pacific Hospice Palliative Care Network. With his extensive experience in the promotion of palliative care, Professor Wang won the first price in the 2010 international quality of death survey.

Prior to his current position, Professor Wang was devoted in community health promotion, elder community care, mobile medical services and community care for remote areas. On top of promoting primary health care, he also emphasizes the promotion of health in the workplace, school, and cities.

As the Director-General of the Health Promotion Administration, focused on health promotion and non-communicable disease prevention, he promotes health-friendly literacy and maximum communication effectiveness among public health centers, hospitals, civil organizations, and academia in order to elevate the accessibility to health information both for health professionals and the general public.

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