

A1. Grassroots Matters: Beyond the State in East Asian Healthcare

A1:1 Wayne Soon, *Grassroots Politics Matter: Towards a New History of Universal Health Care in Taiwan*

Taiwan is recognized for having one of the best healthcare systems globally, supported by its impressive national health insurance established in 1995. This system provides universal coverage with low premiums and no restrictions on choosing healthcare providers. The common narrative suggests that the authoritarian Chinese Nationalist Party government-initiated healthcare reforms in the 1990s in response to the impending democratization, which the party facilitated. However, this presentation challenges that top-down political narrative by highlighting the contributions of provincial legislators, political dissidents, patients, international healthcare economists, and the media in accelerating healthcare reforms in Taiwan since the 1970s. In particular, I examine how opposition members in the provincial assembly unveiled fraud, waste, abuse, and hypocrisy in the healthcare system in the 1970s, challenging the state-led utopian representation of health insurance in the country.

Learning Objectives

- To understand the role of health insurance in shaping medicine in Taiwan and East Asia
- To contest a developmental-state narrative to healthcare reforms in East Asia
- To identify new actors beyond the state in shaping healthcare in East Asia

A1:2 Po-Hsun Chen, *Needling about the ‘One China’: The Policies to Acupuncture Anaesthesia and Trans-Pacific Scientific Acupuncture Research in Cold War Taiwan*.

Situated within the political landscape of anti-Communism and the contest for the ‘One China’ reputation, this global focus on China’s acupuncture anaesthesia placed significant pressure on the Taiwanese government. The prominence of China’s acupuncture anaesthesia not only demonstrated technological progress in China but also challenged the portrayal of Chinese culture and medicine as orthodox, which the single-party Kuomintang (KMT) claimed for Taiwan. This paper highlights notable transformations: First, the national policy shifted from supporting an individual medical diplomacy mission to organising an institutional scientific research project. Second, the KMT government adopted neurophysiology from the US to counter the challenge of China’s acupuncture anaesthesia to Taiwan’s nationhood.

The first part highlights a senior acupuncture expert, Wu Wei-Ping (1916—1991), who travelled to European and Southeast Asian countries to give lectures and practise acupuncture. Wu’s trip to Cambodia to treat the head of state, Marshal Lon Nol, was supported by the KMT government in 1971. The second part explains the policy in 1973, when the KMT government launched a national research project to study acupuncture anaesthesia at several medical centres: National Taiwan University Hospital, Tri-Service General Hospital, and Taipei Veterans General Hospital. Additionally, the government recruited overseas Chinese scholars trained in the U.S. to return to Taiwan for this national project: Ha Hong-Chien (1924-2021) from National Yang-Ming College of Medicine in 1973, Fu Tsu-Ching (1940s-2000s) from National Taiwan University College of Medicine in 1974, and the parallel project carried out by female overseas Chinese scholar Tsuei Julia J. (1926-2018) from the University of Hawaii after 1975.

Learning Objectives

- Develop the capacity for critical thinking about the nature, ends and limits of medicine.
- Identify successes and failures in the history of medical professionalism.
- Understand the dynamic history of medical ideas and practices, their implications for patients and health care providers, and the need for lifelong learning.
- Recognize the dynamic interrelationship between medicine and society through history.
- Acquire a historically nuanced understanding of the organization of the U.S. healthcare system, and of other national health care systems.

A1:3 Eunjeong Ma, *Robotizing healthcare in South Korea: A case of rehabilitation robots*

In recent decades, with the aging population and the increasing proportion of individuals living alone and experiencing social isolation, the South Korean government has actively invested in the development and deployment of robotic care to address such demographic trends and a shortage of healthcare professionals. This paper traces the historical trajectory of robotic care since the early 2000s, from intelligent social robots like ‘Silbot’ to rehabilitation robots such as ‘Morning Walk.’ Two national research centers, Korea Institute of Science and Technology and the National Rehabilitation Center, play central roles in the development and commercialization of these robotic systems. Rehabilitation robots are broadly defined to include robotic systems designed to serve and assist individuals both with and without disabilities. The scope of services envisioned for these systems ranges from supporting daily activities and communicative interactions through social robots to restoring physical and cognitive functions via therapeutic and assistive robots. These robotic systems are designed and deployed to replace or supplement domains of healthcare traditionally performed by human healthcare professionals.

The paper is broadly divided into two parts. The first part situates the trajectory of robotization in elderly care within political and social contexts from 2000 onward. The second part focuses on rehabilitation robots from the perspectives of users and patients. To do so, the paper combines documentary analysis with observations at rehabilitation centers and interviews with users at such centers. The documents analyzed include policy reports, industry reports, and professional documents generated by these centers and researchers. By situating the robotization of healthcare within the public domain in its political and historical contexts and highlighting users' voices, the paper aims to provide a deeper understanding of how healthcare in the public sphere has been (re)shaped in a high-technology society.

Learning Objectives

- Understand the integration of robotic care in the context of South Korea’s changing demographic and healthcare landscapes.
- Understand the social, political, and technological factors that have influenced the integration of robotic systems into elderly and rehabilitation care since 2000 in South Korea.
- Understand user perspectives, experiences, and expectations with robotic systems in healthcare.