

# Convention on the rights of the child

CRC Article 2、3、6、9、24~28、33

Concluding observations Art 27、65、66、67

## NGOs:

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**Topic: The confusion of the terms “Xin-Bieh” (性別)(sex/gender) & “Ping-Deng”(平等)(Equality/Equity) has influences the gender equality education. (CRC Article 2 、 28 , Concluding observations Art 27 、 27)**

**Situation**

According to CEDAW 3<sup>rd</sup> “CONCLUSIONS AND RECOMMENDATIONS of the International Review Committee” The committee has agreed with the issue that the NGO raised about the confusion of the Chinese term (性別) (sex/gender) and it’s inconsistent interpretation in different documents or laws of the government. The committee expressed their concern in their “CONCLUSIONS AND RECOMMENDATIONS”: “the inappropriate conceptual and practical use of the terms “sex” and “gender” in Taiwan”, and ask the government to clarify the use of the Term in Chinese.

However, the government use all kinds of excuses to cover their mistakes, and refuse to clarify the meaning of the Chinese term “性別” (sex/gender).

***Meaning and use of the terms “sex” and “gender”***

10. The IRC is concerned with the inappropriate conceptual and practical use of the terms “sex” and “gender” in Taiwan. In the CEDAW jurisprudence the Convention refers to sex-based discrimination, but also covers gender-based discrimination against women. The term “sex” refers to biological differences between men and women. The term “gender” refers to socially constructed identities, attributes and roles for women and men and society’s social and cultural meaning for these biological differences resulting in hierarchical relationships between women and men and in the distribution of power and rights favoring men and disadvantaging women.

**11. The IRC recommends the Government to align all the legislative texts and policy documents and promote the correct and consistent understanding of the terms “sex” and “gender” in line with CEDAW Convention and the Committee’s General Recommendation No. 28.**

“CONCLUSIONS AND RECOMMENDATIONS of the International Review Committee”

The 3<sup>rd</sup> CEDAW International Review

**Discussion**

The confusion over the term “Xin-Bieh” (性別)(sex/gender) has created substantial controversy in Taiwan:

1. For example, the controversial case recently happened is: " Transgender people request to change the “Xin-Bieh” (性別)(sex/gender) column in their ID card without sex reassignment surgery.”

The dispute was caused by the different interpretation of the definition of the “Xin-Bieh” (性別)(sex/gender) column of the ID card. Originally the “Xin-Bieh” (性別) of identity card is judged by biological sex, so the law requires that the

registration can be changed after surgery. However, if “Xin-Bieh” (性別) is defined as gender, it becomes “(social) gender” that can be subjectively identified. The two terms are different in English, while the government use the same Chinese term “Xin-Bieh” (性別) to translate the two terms that have different meanings, resulting in confuses.

The definition of “Xin-Bieh” (性別)(sex/gender) is unclear, and the use of the same term for biological sex and social gender will cause a lot of confusion and controversy in actual laws and life.

**The Executive Yuan explained: "Not all Chinese words “Xin-Bieh” (性別) are translated as gender or as sex, which must be judged according to the context of the content."**

In this case, who has the final say? Whose interpretation is the correct answer? If the statute does not provide a clear definition for judgment, then everyone can have his/her own interpretation.

If this is the case, it is expected that there will be more disputes similar to the " Transgender people request to change the “Xin-Bieh” (性別)(sex/gender) column of their ID card without sex reassignment surgery." in the future.

And there will be issue of transgender in women’s sports competition, which will threaten the girl’s right and result in inequality for female athletes in sport competitions.

2. The lack of clear definition of “Xin-Bieh” (性別)(sex/gender) has caused confusion and controversy in the education:

The “Gender Equity Education Act” does not define the term “Xin-Bieh” (性別). It only mentions the definition of "gender equity education", which is also ambiguous, leading to confusion and controversy in society.

Article 2 does not explain what it means to teach children to 『尊重多元性別差異』 (in it’s English version—gender diversity). The interpretation could be “respect for the LGBT differences” or respect for the differences in different gender). In Chinese, 多元性別差異 could be interpreted in two different ways: (1) as the differences of LGBT (**which means LGBT group according to the website of the Executive Yuan**), or (2) the gender diversity.

Is “『多元性別』” a collective term for a certain group (LGBT)? Or, should “『多元性別差異』” be interpreted as "gender diversity"-which including physical, psychological, and social gender? (in the English version of Gender Equity Education Act, the term is translated into “gender diversity”. However, there is no Chinese definition.)

The term 『多元性別』 (diverse genders) is also used in the curriculum guidelines, textbooks, and teaching materials, while the term in different materials imply different meanings. The teachers are also confused and don’t know how to teach, and parents are also sceptical about the focus of gender equality education.

The great controversy cause by unclear definition has seriously affected the promotion of gender equality education.

If we follow the Executive Yuan’s usage of the term 『多元性別』, then the Article 2 of “Gender Equity Education Act” become—teaching "respect for

differences of LGBTI"? Then, does it mean that gender equality education does not include men and women?

3. The Executive Yuan responded to the CEDAW committee's concern on the "definition" of "Xin-Bieh" (性別) with a "translation" list, **and biological sex is completely ignored in the list.**

**Besides,** there is no translation or definition of the term 『多元性別』 "diverse genders" on the Executive Yuan website.

4. The same problem is happened to the word "平等" (Equality or Equity) . The same Chinese term is used to mean different English terms. This problem is also recognized by the CEDAW committee. However, the government do not correct the mistakes.

***Gender Equity Education Act***

40. The IRC is concerned that the English title of the Gender Equity Education Act does not correctly reflect the terminology of CEDAW and that the translation creates confusion in understanding the concept of gender equality in education.

**41. The IRC recommends that the Government change the translated name of the legislation into Gender Equality Education Act.**

"CONCLUSIONS AND RECOMMENDATIONS of the International Review Committee"

The 3<sup>rd</sup> CEDAW International Review

**Suggestion**

1. The government should held additional public meetings for open discussions of the terms: The issue of definition of the Chinese term "Xin-Bieh" (性別) or "multiple genders"(多元性別) and the term "平等"(Equity or Equality) is related to all laws and education, and thus related to the rights of men and women, boys and girls. All scholars and experts who are interested in this matter should be invited to the discussions.
2. It is suggested that, since the Chinese term "性別"traditionally mean biological sex, so "gender" should be translated as "社會性別"—the socially constructed meaning based on sex.
3. Terms in all Legislations or documents should be consistent, otherwise, not only will the public be at a loss, and disputes will continue, and it will be impossible to **communicate effectively with** international members.
4. If the actual meaning is "equity", other Chinese word should be used to distinguish it from "equality", which should be clearly stated in the statute and the word "equality" should be clearly defined - distinguishing between "equity" and "equality", as well as "equity" and "substantial equality".
5. The rank of the gender equality education law should not be just a temporary [measure], and the law should be named after the ultimate goal. "Gender Equality Education Act" can fully cover the connotation of this law.

**Topic: Numbers of children died of child abuse increase year by year , while the legislator said ART (artificial reproductive technology) babies can help increasing the birth rate. Wrong strategies for family policies. (CRC Article 2、3、6)**

**Situation**

1. Reporting cases of child abuse and neglect increase year by year

1.兒少受虐人數

單位：人

年別	總計	男		女		0-未滿3歲		3-未滿6歲		6-未滿9歲		9-未滿12歲		12-未滿15歲		15-未滿18歲	
		男	女	男	女	男	女	男	女	男	女	男	女	男	女	男	女
2016	9,461	4,156	5,305	737	560	594	504	718	617	814	628	780	1,485	513	1,511		
2017	9,389	3,626	5,763	552	497	480	480	577	470	714	625	786	1,746	517	1,945		
2018	9,186	3,542	5,644	515	405	469	450	598	512	688	639	764	1,734	508	1,904		
2019	11,113	4,832	6,281	565	449	634	596	955	667	917	676	946	2,010	815	1,883		
2020	12,610	5,475	7,135	628	518	750	685	1,064	779	973	746	1,076	2,254	984	2,153		

資料來源：衛生福利部

2. Nearly 30 children died of child abuse every year

3.重大兒虐案件死亡人數

單位：人

年別	總計	受虐致死	殺子自殺
2016	27	17	10
2017	29	16	13
2018	15	10	5
2019	23	10	13
2020	21	10	11

資料來源：衛生福利部

說明：重大兒虐係指兒少遭受家內嚴重虐待或殺子自殺。

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3.Types of child abuse

(1) 家內案件兒少受虐類型

單位：人次(2016年)，人(2017-2020年)

年別	總計	男		女		身心虐待								不當管教		目睹家暴		兒少物質濫用	
		遺棄		身體虐待		精神虐待		性虐待		疏忽		不當管教		目睹家暴		兒少物質濫用			
		男	女	男	女	男	女	男	女	男	女	男	女	男	女	男	女		
2016	6,537	3,389	3,148	38	36	589	469	177	238	52	459	610	544	1,631	1,160	292	242	0	0
2017	5,247	2,661	2,586	31	13	382	333	121	150	66	530	572	497	1,408	996	81	67	0	0
2018	5,221	2,684	2,537	30	13	369	306	108	143	64	553	559	487	1,475	969	79	66	0	0
2019	7,139	3,815	3,324	20	16	507	379	158	169	116	713	659	580	2,282	1,399	73	68	0	0
2020	7,992	4,151	3,841	17	30	2,094	1,489	212	248	102	785	750	633	896	551	80	105	0	0

資料來源：衛生福利部

## Discussion

### 1. Children and teenagers have basic human rights

When children suffer from abuse, neglect, harm, health threats, or their rights are illegally deprived, they should be protected in accordance with Children's Welfare and Rights Protection Law.

### 2. Insufficient budget of family education center

The budget of the Family Education Center in New Taipei (2018) was 28.88 million dollars. A citizen receives only NT 7 and a family only receives NT 18 a year for family education. The budget of the Family Education Center in Taichung (2018) was 18.3 million dollars, a citizen receives NT 6, and a family receives NT 18 a year for family education. The budget of the Family Education Center in Kaohsiung (2017) was 19.68 million dollars. A citizen receives only NT 7, and a family only has NT 18 a year for family education. The budget of the Family Education Center in Taoyuan (2016) is only 15.54 million dollars. A citizen receives NT 7, and a family receives only NT 19 a year for family education. (attachment 1)

The government does not pay much attention to family education, so the social problems have emerged one after another. It also caused many children dead before they could grow up. Two main issues of family education are pre-marital education and post-marital parental education. Child abuse to death has often been heard in these days. What did the government do when the media and the public blamed parents for child abuse? We don't see it because the budget was not enough for improving the family education.

### 3. In the age of low birth rate, every child is precious, but we saw nearly 30 children died of child abuse every year.

Can we and government save these lives in time? Surprisingly, our government subsidized artificial reproductive technologies to create babies to rescue low birth rate! (Attachment 2) This method is so unrealistic.

First, ART is expensive and the successful rate is low (only 33%); °

Second, the data of other countries and Taiwan indicated that the ART offspring have higher rate of birth defects, tend to get metabolic disease (such as diabetes and hypertension) and cancer than natural conceived offspring. The ART babies have higher health risks (Attachment 3).

Third, if the funds are invested in family education, it can protect and help the living children right away, instead of seeking uncertain and unborn ART babies.

## Suggestion

### 1. Preventing Child Abuse and Neglect (American CDC attachment 4)

Strategy	Approach
Strengthen economic supports to families	<ul style="list-style-type: none"><li>• Strengthening household financial security</li><li>• Family-friendly work policies</li></ul>
Change social norms to	<ul style="list-style-type: none"><li>• Public engagement and education campaigns</li></ul>

support parents and positive parenting	<ul style="list-style-type: none"> <li>• Legislative approaches to reduce corporal punishment</li> </ul>
Provide quality care and education early in life	<ul style="list-style-type: none"> <li>• Preschool enrichment with family engagement</li> <li>• Improved quality of child care through licensing and accreditation</li> </ul>
Enhance parenting skills to promote healthy child development	<ul style="list-style-type: none"> <li>• Early childhood home visitation</li> <li>• Parenting skill and family relationship approaches</li> </ul>
Intervene to lessen harms and prevent future risk	<ul style="list-style-type: none"> <li>• Enhanced primary care</li> <li>• Behavioral parent training programs</li> <li>• Treatment to lessen harms of abuse and neglect exposure</li> <li>• Treatment to prevent problem behavior and later involvement in violence</li> </ul>

2. Increasing budget of family education and encouraging pre-marital counseling  
Pre-marital counseling-is important, and it should be started as early as in the college or in the senior high school. Most of the modern families are nuclear families (no grandparents), and there is no adequate family support and no one can teach the young couples how to be good parents. They learn parenthood from the internet, but some of the information may be wrong and will harm the children. (interviewed with a senior social worker)
3. Preschool protection measures  
You can screen for child abuse when the children get vaccines. Not only pay attention to injections, but also pay attention to their physical and mental development and parents. (interviewed with a senior social worker)
4. Increase child psychiatrists and child psychotherapists  
Due to the shortage of child psychiatrists and psychotherapists, the follow-up mental rehabilitation plan for many abused children is extremely lacking, causing great problems in the future. They may even become perpetrators when they grow up. (interviewed with a senior social worker)

Attachment 1 A citizen receives only NT 7 a year. Does the government not value family education?  
<https://tw.appledaily.com/forum/20181205/C3X7PIL7Y4TM6UGYIPDNQJATKU/>

Attachment 2 The problem of low birth rate damages national security .  
 Legislator Guan: The government only subsidizes 6 IVF births in 6 years  
<https://news.ltn.com.tw/news/politics/breakingnews/3306781>

attachment 3 The rights for infant born by ART

attachment 4 Preventing Child Abuse and Neglect: A Technical Package for Policy, Norm, and Programmatic Activities  
<https://www.cdc.gov/violenceprevention/pdf/CAN-Prevention-Technical-Package.pdf>



Attachment 1 A citizen receives only NT 7 a year. Does the government not value family education?

<https://tw.appledaily.com/forum/20181205/C3X7PIL7Y4TM6UGYIPD NQJATKU/>

陶樂比/家長&家庭教育志工

身為一位小市民兼菜籃族，難以抵擋選舉期間席捲全台的韓流效應；韓市長愛家好男人的形象，喚起台灣人對家庭的重視。於是選舉後筆者興起查詢幾個直轄市「家庭教育中心」預算和職員編制的念頭。查到的結果真是讓小市民兼菜籃族感到不可思議，可以說是達到嚇死人的程度。

先來看看新北市，2018年家庭教育中心的預算為2888萬，人員編制7名。然而，新北市共有29區，總人口399萬、有156萬戶家庭，平均一名家庭教育中心人員要負責57萬人口的家庭教育業務、一個市民一年僅得到7元、一個家庭僅得到18元的家庭教育經費。

再來看看台中市，280萬的人口、97萬戶家庭、29區，2018年的家庭教育中心預算1830萬、8名職員；平均一名職員負責56萬人口的家庭教育業務、一名市民一年得到6元的家庭教育經費、一戶家庭得到18元的家庭教育經費。

高雄市呢？277萬人口、109萬戶家庭、38區，家庭教育中心預算2017年僅有1968萬、職員5名；平均一名職員要負責55萬人的家庭教育業務、一個市民一年僅得到7元的家庭教育經費、一戶家庭僅有18元的家庭教育經費。

桃園市也好不到哪裡，2016年家庭教育中心的預算僅1554萬，人員編制5名職員；然而桃園市共13個區、總人口220萬、79萬戶家庭，平均一名職員負責44萬市民家庭教育業務、一個市民一年得到7元的家庭教育費用、一戶家庭僅得到19元的家庭教育經費。

一個市民一年僅得到7元的家庭教育費用？你沒看錯，看起來好像各個市政府都約好了，一個市民一年的家庭教育經費就是「7元」，連買一個波蘿麵包都不夠；用在每個家庭一年的家庭教育經費也不超過20元，甚至不能買一杯珍奶。我們不禁要問，老百姓的納稅錢都被政府用到哪裡去了？

各階層的勞動人口辛苦繳納的稅金，僅有 7 塊錢用在自身關於家庭教育的方面、也僅有不到 20 元塊錢是用在一戶家庭的家庭教育。可以看出政府多麼不看重家庭教育。家庭不是組成社會最基本的單位嗎？為什麼一年用在一戶家庭的家庭教育經費竟然連一杯珍奶都比不過？

政府這麼不重視家庭教育，可想而知造成社會問題層出不窮，也導致許多無辜的生命在還來不及長大的時候就與這個世界永遠說了再見。為什麼呢？家庭教育的範圍中有兩項是婚前教育和婚後的親職教育；近幾年常常聽聞兒虐致死的社會案件，當媒體和大眾不斷責備狠心父母虐待兒童的時候，請問政府做了什麼來改善兒虐問題嗎？至少從編列給家庭教育中心的預算和人力來看，沒有。

政府並沒有提供應有的資源來幫助年輕人學習如何組成和經營家庭，也沒有提供適當的家庭教育來幫助父母有效扮演親職角色和發揮親職功能，用在一個家庭一年的家庭教育經費連一杯珍奶都買不起，這個政府在家庭教育方面實在是失職了！

選舉剛結束，有不少新科市長是以「重視家庭」、「愛家庭」著稱的。衷心期許這些「重視家庭」的市長們能夠重新檢視並規劃所管轄市政府的家庭教育中心預算和人員編制，不僅要提高預算編列至少比速食店的全家餐還多，也要增設職員，再怎麼說每一位家庭教育中心職員負責的業務量也不能超過一萬市民，這樣才能針對不同族群提供有效的家庭教育啊。

#### **參考連結：**

[新北市家庭教育中心預算和人員編制查詢網址](#)

[新北市政府民政局\(人口及戶數統計查詢\)網址](#)

[高雄市家庭教育中心預算和人員編制查詢網址](#)

[高雄市民政局\(人口及戶數查詢\)](#)

[台中市家庭教育中心預算和人員編制查詢網址](#)

[台中市民政局\(人口及戶數查詢\)](#)

[桃園市家庭教育中心預算和人員編制查詢網址](#)

[桃園市政府民政局\(人口及戶數查詢\)](#)

## Attachment 2 The problem of low birth rate damages national security . Legislator

Guan: The government only subsidizes 6 IVF births in 6 years\_

<https://www.ey.gov.tw/Page/448DE008087A1971/020718e7-d5db-4cb4-8047-79eb04c047b5>

臺灣少子女化問題，已是嚴重的國安問題，政府將採取更積極行動，營造更友善的生養環境。行政院長蘇貞昌今（6）日主持行政院院會，聽取衛生福利部及勞動部報告「建構安心懷孕友善生養環境」後表示，同意實施「擴大不孕症試管嬰兒補助方案」、「增加產檢次數及項目」及「放寬育嬰留停及調整工時彈性」三大政策，讓民眾安心懷孕，平安生養。

### 一、助圓夢：滿足不孕夫妻生育期待

為滿足不孕夫妻生育期待，降低接受人工生殖療程費用的經濟壓力，政府將擴大不孕症試管嬰兒補助對象為一般不孕夫妻(至少一方具我國國籍，且妻年齡未滿 45 歲)。補助金額除現行低收及中低收入戶維持每次 15 萬元補助上限外，一般夫妻首次申請補助上限 10 萬元，再次申請上限 6 萬元，每胎最多 6 次，並依年齡區間及療程範圍提供每胎不同次數及成數之補助條件，預估每年投入 26 至 32 億元，嘉惠不孕夫妻 2.3 至 2.8 萬對。

### 二、安心生：安心懷孕 平安生產為更周全照顧所有懷孕婦女，參照醫學實證和國際作法，產檢由現行的 10 次增加至 14 次，新增妊娠糖尿病篩檢及貧血檢驗，增加 2 次一般超音波，調高產檢診察費及檢驗費用，以提高產檢品質，降低妊娠與生產併發症，減少孕婦及新生兒死亡。預估每年將投入 12.5 億元，有 16 餘萬孕婦受惠。

### 三、國家跟你一起養：友善生養職場環境為鼓勵雙薪家庭父母，能夠共同陪伴子女成長，並給予經濟支持，取得工作與家庭生活之平衡，勞動部將修正性別工作平等法、就業保險法及相關辦法，

推動以下措施：

(一) 配合衛福部規劃產檢次數增加為 14 次，產檢假由 5 日修正為 7 日，增加 2 日之薪資由政府補助。

(二) 育嬰留職停薪(津貼)可彈性申請：

- 1.育兒父母可同時申請育嬰留職停薪。
- 2.育兒父母可同時請領育嬰留職停薪津貼(含補助)，留職停薪津貼，從補助 6 成薪，調高到 8 成薪，軍公教勞一體適用。
- 3.配偶未就業，受僱者也可以申請育嬰留職停薪及津貼(含補助)。
- 4.育嬰留職停薪申請期間可以少於 6 個月(不低於 30 日)，以 2 次為限。
- 5.考量雇主人力調配，以「應提前預告雇主」為配套措施。

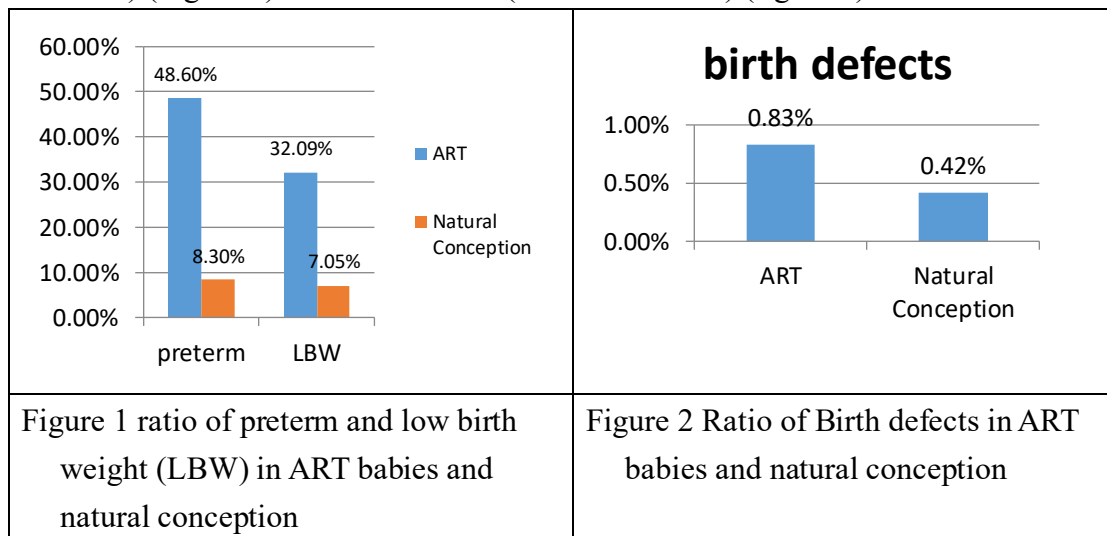
(三) 未滿 30 人之事業單位，經勞雇雙方協商後，亦得適用性別工作平等法有關減少或調整工作時間規定。

附件 3 attachment 3

The rights for infant born by ART

Situation

1. The fertility rate of Taiwan appeared at the bottom of the list of 200 countries in 2019. Taiwan has the lowest fertility rate in the world - **1.218** children per woman. The fundamental cause of the lower fertility rate in Taiwan that is because women **postponed their childbearing age**.
2. Although the current reproductive medical technologies have been rapidly developed, such as ART (assist reproductive technology) and frozen eggs idea, that seem to offer great hope to women who postpone their motherhood, and cutting-edges medical technologies seem to provide the solution for women. However, the concern on the health of ART infant has not yet been well studied. A recent study [1] done by H Chang and her workmate, revealed the health state of infant born by ART. They reported that infant born by ART shown higher risk in preterm (48.6% vs 8.3%), very low birth weight (4.12% vs 0.76%), low birth weight (32.09 vs 7.05%) (Figure 1) and birth defects (0.83% vs 0.42%) (figure 2).



3. Increasing attention has been paid to ART babies outcomes as well as mothers maternal mental problem in the international studies. Similar reports have been observed in Spain, France, Canada and the United States [2].
4. meta-analysis, published in 2013, that included 25 cohort and case-control studies reported that children born after ART are at increased risk for all cancers, and specifically for leukaemias , neuroblastomas and retinoblastomas [3].
5. Over the past decade, speculation is increasing that individuals conceived by ART may be at risk of developing metabolic syndrome, type 2 diabetes and cardiovascular disease [4-6], later in life. ART may also alter thyroid function.

Sakka et al. reported thyroid-stimulating hormone (TSH) levels were significantly higher in IVF children [7].

### **Suggestion**

Taiwan, being the first Asia country to grant same-sex marriage, we might need to take the above issues into account while rush to open to ART to all the application.

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附件 4 美國 CDC 兒虐

attachment 4 Preventing Child Abuse and Neglect:

A Technical Package for Policy, Norm, and Programmatic Activities

<https://www.cdc.gov/violenceprevention/pdf/CAN-Prevention-Technical-Package.pdf>

Preventing Child Abuse and Neglect	
Strategy	Approach
Strengthen economic supports to families	<ul style="list-style-type: none"><li>• Strengthening household financial security</li><li>• Family-friendly work policies</li></ul>
Change social norms to support parent and positive parenting	<ul style="list-style-type: none"><li>• Public engagement and education campaigns</li><li>• Legislative approaches to reduce corporal punishment</li></ul>
Provide quality care and education early in life	<ul style="list-style-type: none"><li>• Preschool enrichment with family engagement</li><li>• Improved quality of child care through licensing and accreditation</li></ul>
Enhance parenting skills to promote healthy child development	<ul style="list-style-type: none"><li>• Early childhood home visitation</li><li>• Parenting skill and family relationship approaches</li></ul>
Intervene to lessen harms and prevent future risk	<ul style="list-style-type: none"><li>• Enhanced primary care</li><li>• Behavioral parent training programs</li><li>• Treatment to lessen harms of abuse and neglect exposure</li><li>• Treatment to prevent problem behavior and later involvement in violence</li></ul>

## **Topic: Subsidizing Artificial Reproductive Technology (ART) to rescue low birth rate? - Wrong Population Policy (CRC Article 3、9、25、26、27)**

- **Human rights of ART babies (babies conceived by artificial reproductive technology) and donor-conceived babies**

### **Situation**

1. In the era of low birth rate, the government said that subsidizing ART babies can increase the birth rate (1). It is impractical because ART is expensive and the successful rate is low (only 33%).
2. ART is only legalized to heterosexual infertile couples now in Taiwan. The number of ART babies has been rising since 2012, which is reversed to the trend of low birth rate in Taiwan (2).

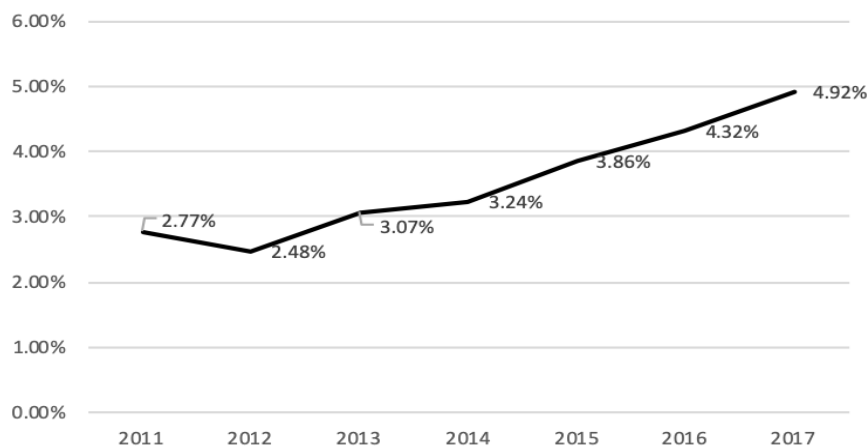


Figure 1 Percentage of births by ART from 2011-2017

3. Taiwan has legalized same-sex marriage in May 2019, and whether to legalize ART to same-sex couples to produce babies has been discussed.

### **Discussion**

#### **1. Encouraging young heterosexual people to marry as the first step to solving the low birthrate**

Taipei mayor Ko said that the low birthrate is not caused by young married couples unwilling to have children, but rather by young people unwilling to get married. In the past 25 years, the percentage of single residents aged 40 or older rose from 12 percent to 35 percent and now about one-third of the city's residents aged 40 or older are single. Encouraging young heterosexual people to marry is the first step to solving the low birthrate.



## 2. Physical health problems of ART babies

### (A) Health risks associated with ART-conceptions (2)

Children conceived by Assisted Reproductive Technology prone to low birth weight (Figure 2), preterm birth, and birth defects (Figure 3) during 2011-2017 in Taiwan

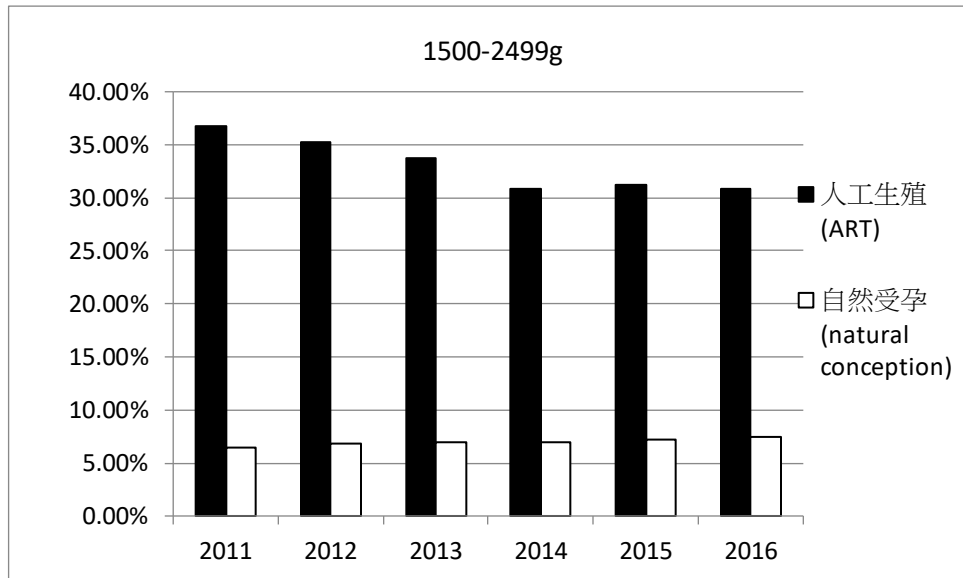


Figure 2 Children conceived by Assisted Reproductive Technology prone to low birth weight

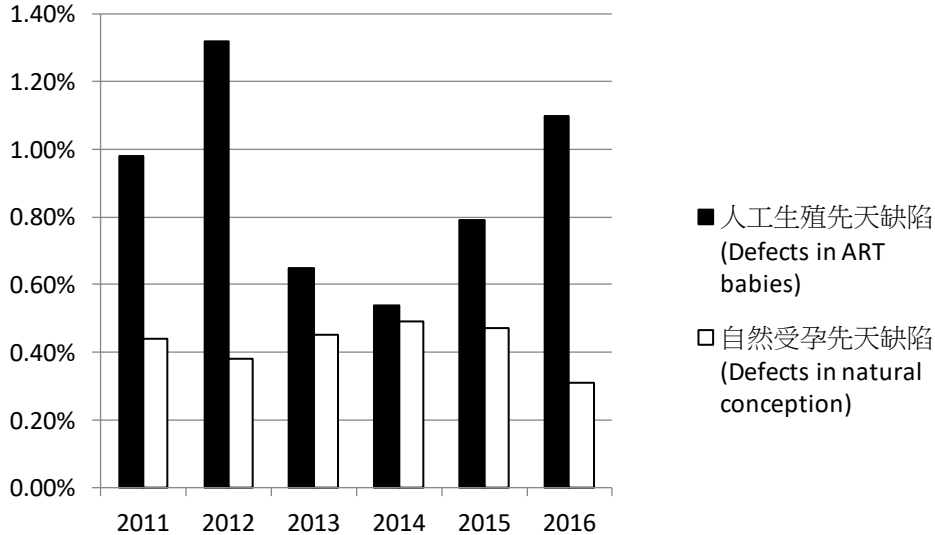


Figure 3 Children conceived by Assisted Reproductive Technology prone to birth defects

### (B) ART babies and other diseases

#### 1. Cardiovascular diseases

- a. 1. ART fetuses showed signs of cardiovascular remodeling, including a more globular heart with thicker myocardial walls, and decreased longitudinal function (4).

- b. Association of ART With arterial hypertension during adolescence (5).
- 2. The association between ART and neural development diseases
  - a. The incidence of diagnosed autism was twice as high for ART as non-ART births (6).
  - b. The risk of intellectual disability was increased in children born after ART (7).
- 3. *Cancers*
  - a. A moderately increased risk for cancer in children who were conceived by IVF (8).

#### **4. Mental health problems of donor-conceived babies**

Same-sex-marriage couples must use eggs and sperms donation to have donor-conceived offspring. In the past 60 years, fertility techniques have produced many donor-conceived offspring, and the drawbacks have emerged and become serious psychological and social problems of offspring.

1. When reflecting on how being donor conceived makes them feel presently, the most commonly selected words included curious, sad, and isolated. These feelings of anger, sadness, and distress often lead donor conceived individuals to seek help or advice from a therapist or other mental health professional (9).
2. At a psychotherapy conference in London focused on donor-conceived children Psychotherapist Alessandra Cavelli said that she had been spurred by the number of donor-conceived children wrestling with unanswerable questions about their identity. Aside from media frenzy about so-called “designer babies,” there had never been any public debate about the implications of the post-war revolution in fertility science. This left therapists woefully under-prepared to deal with the unique psychological circumstances of donor conceived individuals—for instance, some say that they felt more like a product than a person (10).
3. Donor-conceived offspring Stephanie said (11),” Donor conception comes forward due to the demand of intended parents with a desperate desire of having a child and an industry that makes money out of this. There is a huge conflict of interest due to the fact that the best interest of the child is inevitably undermined by it.”

“There are millions of pounds/euros/dollars pumped into the industry: fertility techniques, counselling for parents, aftercare, choices, research ... but donor-conceived people in the UK are only offered 2.5 hours with a counsellor. In other words: there is money to create donor-conceived children but when it

comes to taking responsibility or accountability for the direct consequences, hands go up in the air.”

“you can never justify that by claiming that you are suffering a self-proclaimed injustice and that as a person who is infertile, single, lesbian or gay, it is all right to inflict an actual wrong on the innocent human being that comes out of this. You don’t remove an injustice by deliberately creating an even greater injustice.” “To live free and not at the expense of others.”

### Suggestion

1. **It is recommended that Executive Yuan sets up an inter-ministerial committee on the “Policy to solve low birth rate”.** Scholars of “Child Development” and “Family and Parenting” should be invited to design policies that meet the best interests of children and families.
2. Taking into account the physical and mental health of children, the government should provide **marriage incentives** for men and women who are at the best time to get married. Encouraging young heterosexual people to marry as the first step to solving the low birthrate as Taipei mayor Ko did (12).
3. **Considering the high defect rate of ART babies, the government should encourage heterosexual marriages and having babies at the appropriate age.** We can learn the policies from Hungary. Their government has introduced a number of tax benefits to favor families in 2019. Couples that marry before the bride’s 41st birthday subsidized loans of up to 10 million forints (\$33,000). A third of the loan will be forgiven if they go on to have two children, and the entire debt wiped out if they have three. There had already been a 20% surge in the number of people getting married during the first nine months of that year. Good news was that the fertility rate for Hungary in 2020 was a 0.67% increase from 2019.
4. If a same-sex families wants to have biological offspring, they must use **donor conceptions and ART**. The mental health problems of donor-conceived offspring, and the higher physical problems of ART babies are important social issues. Is it fair to these offspring and the public to pay for treatments for these problems?
5. **The best interests of a child is to be raised by its biological parents or family.** Donor conception generates a direct conflict with this specific interest because it deliberately withholds from the child the possibility of being raised by both of its biological parents as well as denying him or her the possibility of building a meaningful relationship with them. Therefore, it is not a good solution to legalize

same-sex marriage using ART to produce offspring to solve the problem of low birth rate.

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**Topic: The risk of sexual transmitted disease (STD) in teenagers.  
(CRC Article 24 , Concluding observations Art 65 、 67)**

**Situation**

**1. Increase of gonorrhea infection in Teenagers**

Teenage infections with STDs have been very concerning in Taiwan over the years, especially that of gonorrhea (Figure 1). There was an increase of almost 90% in the number of teenagers infected with gonorrhea, yet such infection rate for adults only increased by 50% in 2020.

**2. Infection rate of syphilis in Taiwan was higher than that in Europe or in USA (Figure 2).**

Men account for the most cases of syphilis (85%) in Taiwan. In the US, African Americans and men who have sex with men have traditionally been the populations most plagued by syphilis (and they're still disproportionately affected). But other groups are now catching up too, especially women and babies, through the infection by bisexual men. (CDC United States, 2017). We may be in the same situation if we keep on promoting “Sexual Liberation”.

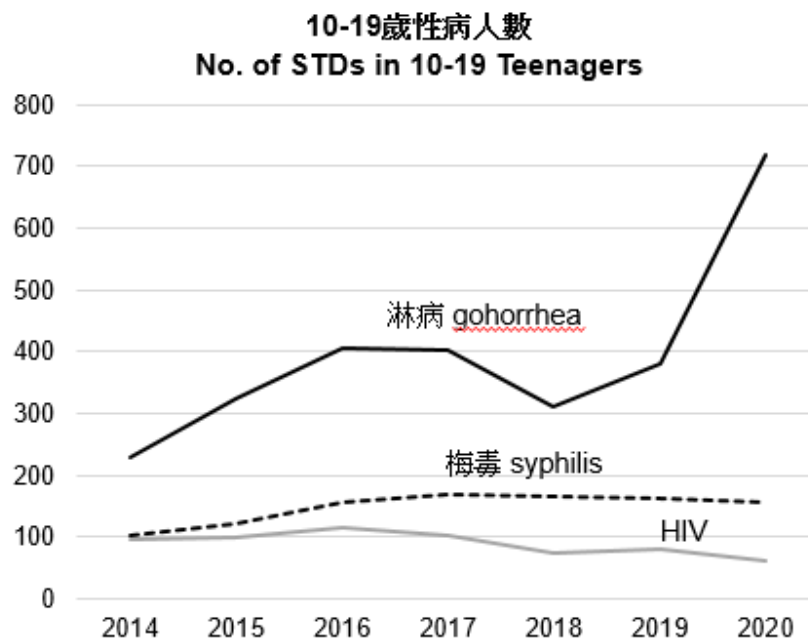


Figure 1 Teenage infections of syphilis, gonorrhea and HIV during 2014 to 2020 in Taiwan. (source: CDC in Taiwan)

## 台歐美 HIV/梅毒/淋病 比較

新增感染人數/ 十萬人感染率 Per 10,000	HIV	梅毒 Syphilis	淋病 Gonorrhea	備註
台灣 (Taiwan)	1,348 5.77	9,390 40.17	7,379 31.56	2021年度統計 (本國籍+非本國籍) 2021年人口：2337.5萬
歐盟 (Europe)	14,971 3.7	33,927 7	100,673 26.4	HIV：2020年度統計 梅毒淋病：2018年度統計
美國 (USA)	36,801 11	38,992 11.9	616,392 188.4	2019年度統計 2019年人口：32830萬 梅毒淋病採CDC比率

資料來源：衛福部傳染病查詢系統、美國CDC、歐盟ECDC

<https://nidss.cdc.gov.tw/Home/Index> (資料查詢日：2022-02-13，此系統查詢結果可能隨著查詢修正而變)  
<https://www.cdc.gov.tw/File/Get/bID4qR4bRSQ--bPnFzreQ> (HIV月報111-01，PDF第5頁，2021年男男間不安全性行為1042例，佔83.63%)  
<https://www.ecdc.europa.eu/en/publications-data/hiv-aids-surveillance-europe-2021-2020-data> (PDF第12頁，EU/EEA)  
<https://www.ecdc.europa.eu/en/publications-data/syphilis-annual-epidemiological-report-2018> (PDF第2-3頁，EU/EEA)  
<https://www.ecdc.europa.eu/en/publications-data/gonorrhoea-annual-epidemiological-report-2018> (PDF第2頁，EU/EEA)  
<https://www.cdc.gov/hiv/statistics/overview/ataqlance.html> (2019年美國新增HIV 36801，男男性行為+男雙性行為佔69%)  
<https://www.cdc.gov/std/statistics/2019/tables/1.htm> (2019年統計數據，Gonorrhoea - Primary and Secondary Syphilis，HIV十萬人口感染率以人口數計算)  
<https://www.cdc.gov/std/statistics/2019/overview.htm#Syphilis> (美國2019年P&S梅毒報告中MSM男男性行為佔41.6%，男雙性行為佔5.5%)  
<https://www.cdc.gov/std/statistics/2019/overview.htm#Gonorrhea> (美國2019年淋病報告中MSM男男性行為約為MSW女女性關係的42%)

Figure HIV/Syphilis/Gonorrhea in Taiwan, Europe and USA

### Discussion

- (1) Vaginal and cervical epithelium in adolescent girls is immature. It takes 20 years to develop more mature protective layers (Grossman, 2009) In the case of unsafe sex, the adolescent girls are prone to get sexually transmitted diseases (STDs) due to the immature genital organs (Sellors & Sankaranarayanan, 2003)
- (2) “Condom Sex equals Safe Sex” are taught in schools. However, it is a myth and misleads the students to a risk situation in getting sexually transmitted diseases (STDs). In fact, for HIV/AIDS, there’s only up to 80% protection with condoms (Weller & Davis-Beaty, 2012) (Figure 3)
- (3) However, the pathogens of other STDs may grow on the skin hair, and they can transmit to sex partners through the skin uncovered by the condoms (Figure 3). For gonorrhea, there is only 51-62% protection with condom use (Boily et al., 2009; Grossman, 2009).

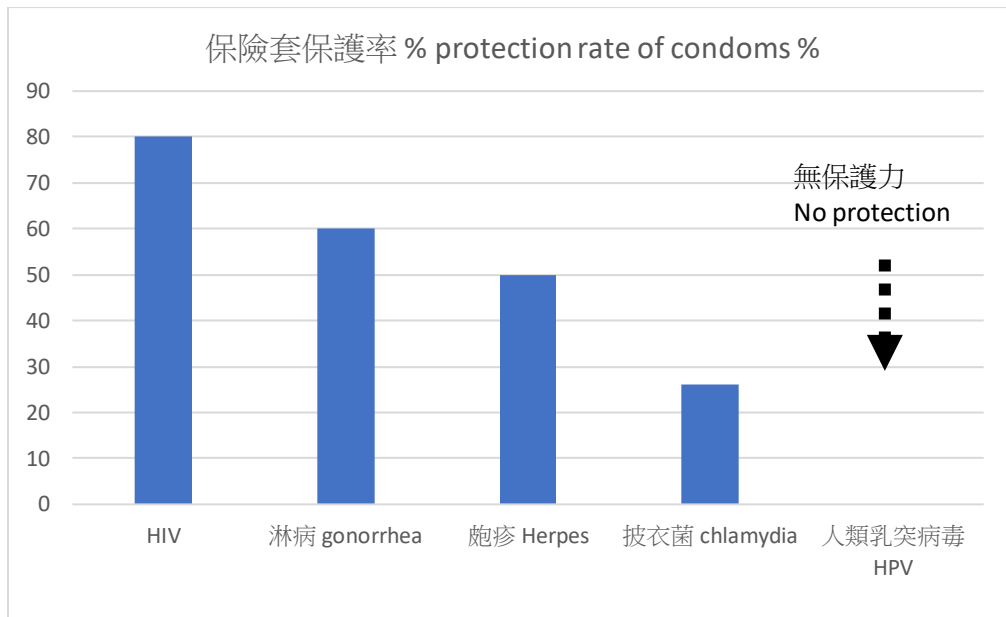


Figure 3 The protection rate of condoms in HIV and STDs

### **Suggestion**

- (1) Sexuality education should include both diseases prevention and holistic education. As a human being, sexual behavior is closely related to affections and relationships. We should not only promote the use of condoms, but also teach girls about the value and attitude about sex. And we should fully inform the girls about facts of STD, and that "Abstinence(delay sex)" and "Be faithful (to partner)" is more effective than condom in STD prevention.
- (2) Please include professionals in "Public Health", "Medicine", "Sexual Education" and other professionals to design the framework of gender equity education. Medical knowledge of STD prevention and treatment, as well as values and attitudes towards sexuality should be included to prevent STDs.
- (3) The government should also beware of the syphilis in women and infants spreading from MSM (by bisexual men).

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**Topic: Marijuana ranked fourth in youth drug abuse, and the situation was grim in Taiwan (CRC Article 33)**

**Situation**

**1. Marijuana ranked fourth in drug abuse among minors under the age of 19, or among young people aged 20-29 in 2020 (Figure 1)**



Figure 1 Ranking of drug abuse in 2020 (source: Ministry of Health and Welfare)

**2. Politicians promoted legalizing "medical marijuana", but their ultimate goal was legalizing "recreational marijuana".**

It seemed that only "legalizing medical marijuana" was being promoted, however, the ultimate goal was legalizing "recreational marijuana" (1) and "full open of marijuana" (2), regardless of the health risks of marijuana. They promoted “medical marijuana” in the name of health, but the truth was this was a cheating behavior.

**3. Constitutional court reporter Interpretation No. 790 has halved the sentence for planting marijuana, which may become a breach for young people to get marijuana**

In a case, the court believed that the cultivation of marijuana was for his own use. According to Article 59 of the Criminal Law and the Interpretation No. 790, his sentence was shortened twice, and drug felony was changed to probation (3). It may become a breach for young people to get marijuana.

## **Discussion**

### **1. It is necessary to discriminate “Marijuana Medications” and “Medical Marijuana”. (4)**

“Marijuana medications” had get approval from the Food and Drug Administration (FDA), endured extensive animal research, clinical trials in human followed. They were accurately dosed for specific conditions and diagnoses. Maximal doses were established. Drug interactions were studied. They are closely regulated from the chemistry lab to the pharmacy.

“Medical Marijuana” is the use of the leaves, flowers, buds or extracts of the *Cannabis* plant to treat diseases or symptoms. The FDA does not recognize, regulate or approve the marijuana plants as medicine.

### **2. Project-application of CBD for medical usage can prevent abuse of cannabis (marijuana).**

Children with Dravet syndrome and Lennox-Gastaut syndrome with intractable epilepsy have the need to use CBD (Cannabidiol, cannabis extract). There are about 40 people being diagnosed Dravet syndrome in Taiwan (5). The incidence of Dravet syndrome is about 1 in 100,000, and Lennox-Gastaut syndrome is 1 in 10,000. That is, there are more than 200 Dravet syndrome patients and more than 2,000 Lennox-Gastaut syndrome in Taiwan. (6). The Ministry of Health and Welfare said that these patients can apply the drugs after the doctor’s diagnosis. The application should be submitted by doctors in teaching hospitals according to "controlled drug act" and the "Regulations for Approval of Specific Medical Products’ Manufacturing or Importing as a Special Case " (7). However, no agency has imported the drugs, and patients must be approved and import the drugs by themselves. It is difficult to be approved, and only 33 people have successfully approved in the past three years (6).

### **3. Cannabis is addictive and affects brain function**

- A. The use of marijuana has adverse effects on the body and mind according to the data from the National Institute on Drug Abuse (NIDA) (7). Marijuana is addictive and affect brain function (8), not as harmless as everyone thinks.
- B. A research reported by RCSI University of Medicine and Health revealed that there were declines of approximately 2 IQ points over

time in those who use cannabis frequently compared to those who didn't use cannabis. Further analysis suggested that this decline in IQ points was primarily related to reduction in verbal IQ. (9)

- C. The teen brain is actively developing and continues to develop until around age 25. Marijuana use during adolescence and young adulthood may harm the developing brain. (10) Negative effects of teen marijuana use include: difficulty thinking and problem-solving, problems with memory and learning, reduced coordination, difficulty maintaining attention, and problems with school and social life.

### Suggestion

- 1. The “Marijuana Medications” or CBD application process should be improved to benefit patients who really need to use it.**
- 2. The mechanism of CBD in treating intractable epilepsy is still unclear, so medical use of CBD should not be fully opened.**  
Though CBD can treat some intractable epilepsy, dyskinesia and pain, the mechanism is still unknown. (11). The side effects may be unpredictable and un-controllable if we do not fully understand the mechanism of CBD. Therefore, the UK is conservative about medical usage of CBD (12).
- 3. We should pay attention to “ Decriminalization of marijuana” and “Legalization of marijuana”.** These two demands are very harmful to the health of young people.

### Attachment

- (1) 3q 支持大麻合法化 水餃感謝祭

Legislator 3Q thanked for supporting legalizing marijuana.

<https://www.facebook.com/events/s/3q%E6%94%AF%E6%8C%81%E5%A4%A7%E9%BA%BB%E5%90%88%E6%B3%95%E5%8C%96%E3%84%98%E6%B0%B4%E9%A4%83%E6%84%9F%E8%AC%9D%E7%A5%AD/1100012473685211/>

- (2) 【大麻是魔更是藥 5】和安非他命同列二級毒品 藥用大麻合法難度高  
[Cannabis is a magic but also a medicine 5] It is a second-class drug as amphetamines. It is difficult to legalize medical marijuana

<https://www.mirrormedia.mg/story/20200717cul006/>

- (3) 王牌房仲兼當大麻小農？符合 2 條件讓他毒品重罪變緩刑 A real estate

agent became a cannabis farmer? Drug felony changed to probation

<https://udn.com/news/story/7315/6117667>

(4) 大麻的真相 Marijuana, An Honest Look at the World's Most Misunderstood Weed (2021) 希伯崙股份有限公司

(5) 【大麻是魔更是藥 1】罕病小女孩一週痙攣 3 百次 用了大麻油只剩一次

[Cannabis is a magic but also a medicine 1] Girl with rare disease had seizures 300 times a week before using cannabis oil, but now only once a week after using cannabis oil.

<https://www.mirrormedia.mg/story/20200717cu1002/>

(6) 大麻 THC 成分藥物罕病先行，衛福部公告頑固型癲癇病兒可專案使用  
Children with rare diseases, such as intractable epilepsy, can use THC (cannabis drugs), announced by Ministry of Health and Welfare.

[https://www.twreporter.org/a/cannabis-for-medical-use-taiwan?fbclid=IwAR3DalzhWLSJz0AxpunOh7iA7JAML-3T4bjk253gP9KMyLin\\_afVtgJv4NE](https://www.twreporter.org/a/cannabis-for-medical-use-taiwan?fbclid=IwAR3DalzhWLSJz0AxpunOh7iA7JAML-3T4bjk253gP9KMyLin_afVtgJv4NE)

(7) 開放醫療用大麻？ 衛福部回答了

Legalizing Medical marijuana? Ministry of Health and Welfare answered.

<https://news.tvbs.com.tw/life/1320504>

(8) Cannabis Addiction and the Brain: a Review J Neuroimmune Pharmacol. 2018; 13(4): 438–452.

(9) Frequent cannabis use by young people linked to decline in IQ

<https://www.sciencedaily.com/releases/2021/01/210128134755.htm>

(10) CDC-What You Need to Know About Marijuana Use in Teens

<https://www.cdc.gov/marijuana/health-effects/teens.html>

(11) Therapeutic potential of medicinal marijuana: an educational primer for health care professionals *Drug Healthc Patient Saf.* 2018; 10: 45–66.

(12) Cannabis: the facts <https://www.nhs.uk/live-well/healthy-body/cannabis-the-facts/>