

## **ABSTRACT:**

Taiwan has a population of 23,386,883 and the vast majority of people live in the lowlands near the western coast of the main island. Taiwan, the Republic of China, consists of the island of Taiwan (an island 160 km off the Asian mainland in the Pacific), Taiwan is a democratic country with relatively low levels of crime and unrest. Average income per capita is US\$19,315 (Directorate-General of Budget, Accounting and Statistics, 2014). There are 1,329 psychiatrists in 2013, and there is one psychiatrist to serve 17,597 persons in average which proportion is higher than average in the world, on average, there is one psychiatrist to serve 200,000 or more people (World Health Organization, 2011). But still lower than that in developed countries.

In Taiwan, 1,125,113 people are registered with disabilities, of whom 10% are diagnosed as patients with mental disabilities (Ministry of Health and Welfare, 2014).

Most patients with mental disabilities (83%) live with their families, and 53% of these patients are unmarried (Department of Statistics, Ministry of Interior, 2014). The number of patients with mental illnesses receiving outpatient treatment increased from 1,666,958 in 2001 to 2,291,858 in 2012 (Ministry of Health and Welfare, 2013).

In Taiwan, the prevalence rates of bipolar disorder and schizophrenia were 0.06-0.45% (Bih et al., 2008; Chien et al., 2004) and 0.3-0.6%, respectively (Chien et al., 2004).

In 1990, the Mental Health Act (MHA) was introduced to provide legislative recognition that people with mental illness have rights to reasonable treatment (Chou, 2012). The initial purpose of the MHA

is explained in the first chapter: “to promote the mental health of the population, prevent and treat mental illnesses, protect patients’ rights and interests, support, assist patients living in community and maintaining society’s harmony and peace”. It attempts to balance rights, but there are many sections asking for compliance with medication with few alternatives.

World Health Organization Secretariat (2012) introduces one of human rights protection for people with mental health conditions, by: developing policies and laws that protect and promote human rights and establishing independent monitoring mechanisms so as to improve conditions in health facilities, in line with international human rights standards such as the United Nations.

The Mental Health Act, which was amended in 2007, aims to increase the protection of the human rights of mental patients. This Act attempts to balance the rights in the initial stage, with some requirements for patients in many areas, including following the medical advice of psychotropic therapy. The Act also stipulates that compulsory hospitalization for severe mental illness (SMI) should be determined by two designated psychiatrists; compulsory hospitalization is mainly for SMI patients with having or the potential to hurt oneself or others. Meanwhile, an emergency placement should be started during the evaluation to strengthen the protection of human rights for the SMI patients. According to the newly developed regulations, in addition to an evaluation by two designated certified psychiatrists, whether a SMI patient requires compulsory hospitalization will also be reviewed and decided by the committee (the psychiatric disease mandatory assessment and community care review committee, PDMACCRC) of mandatory evaluation; likewise, compulsory treatment should be required that this patient should be a case with severe mental illness, not only this psychiatric patient has or has the potential to hurt oneself or others. This PDMACCRC includes

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