In recent years, health has become a focal point of Chinese society. In 2005, the “Primary Health Care Law of the People’s Republic of China”\(^1\) and the “Mental Health Law of the People’s Republic of China”\(^2\) were launched. Public health administration was on its way to improvement.

I. *Rural Medical Services*

On August 10, 2005, Premier Wen Jiabao presided over a meeting of the State Council to discuss the fastest method to establish a new rural medical service system. Such a system had been in place since 2003 and made considerable progress in improving the health of rural residents. Farmers’ financial burdens for medical care were reduced; previously, many families had been run into the ground by mounting medical bills they could not afford to pay.

The new rural medical service system aimed to accelerate the restructuring of the current system. The government encouraged central and local areas to give rural regions financial assistance. The Ministries of Health and Finance distributed the “Notice of Experimental Rural Medical Services” to garner government support for the project. Coordination groups for the new rural medical services in each province, autonomous region and municipality were required to organize experts in researching the pros and cons of the new system.

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II. Medical Aid

After authorization by the State Council, the central finance committee created a 300 million Yuan public welfare fund for the purpose of annual urban medical aid. In 2005, the State Council requested that the Ministry of Civil Affairs, Ministry of Health, Ministry of Labor and Social Security and the Ministry of Finance establish an urban medical fund by appropriating the fiscal budget and social contributions. In response, the Ministry of Health promulgated the “Notice of the Ministry of Health on Coordinating Further Progress in the Urban Medical Assistance System”.

III. High-Risk Behavior

The Ministry of Health distributed its “Intervention in High Risk Behavior” in 2005 to educate the country about high-risk sexual practices that spread AIDS. The “Plan” recommended that various regions of China implement appropriate measures, according to local characteristics and situations, to stem the spread of the disease. The promulgation of the “Plan” symbolized the Chinese government was facing modern issues head-on and had broken free of traditional thinking.

IV. Standardizing Vaccinations and Inoculations

The State Council promulgated Order 434, “Regulations of Vaccinations and Inoculations” to protect public health and prevent disease epidemics. It was put into effect on June 1, 2005. The “Regulation” illustrated China’s detailed plans of vaccination requirements for citizens.

The “Regulations” prohibited pharmaceutical companies from forming business relationships with vaccine providers. It also stipulated that the government must compensate the families of any citizen who died from a drug reaction after receiving a Class I inoculation. Compensation was to be provided by provincial departments of finance and municipal governments. Compensation for death caused by Class II vaccines was to be provided by the companies that produced the vaccine.