





#### Preface



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As the nation's leading agency for public health and healthcare research, the Korea Disease Control and Prevention Agency (KDCA) remains committed to protecting the health and safety of the public through evidence-based policies.

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I am pleased to present the 2024 KDCA White Paper, which outlines our key initiatives and achievements throughout the year aimed at protecting the health and lives of people in Korea.

Guided by our vision for 2024—"Toward a Safer and Healthier Future"—KDCA has worked tirelessly to advance Korea as a global leader in health security and contribute to building a healthier, more resilient society.

## First, KDCA has revised and enhanced Korea's infectious disease response system to better prepare for emerging infectious disease threats.

In September, we established the Pandemic Influenza Preparedness and Response Plan, laying out a comprehensive framework for responding to future pandemic influenza. To ensure the safe management of high-risk biological agents, KDCA opened Korea's first Biosafety Level 3 (BSL-3) Hands-On Training Center, offering practical training programs. We also strengthened global partnerships by signing MOUs with key countries and expanding Official Development Assistance (ODA)-based collaborations

## Second, KDCA unveiled mid- to long-term strategies to control infectious diseases in daily life and eliminate key health threats.

In April, we launched the Second Implementation Plan for Re-Eradication of Malaria (2024–2028), which aims to eradicate malaria in Korea by 2030. Since January 2025,

hepatitis C antibody testing has been incorporated in the National Health Examination to enable early detection and proper treatment. We also continued our efforts to ensure healthy early childhood development through routine immunization campaigns, resulting in increased vaccination coverage among six-year-olds for three consecutive years.

Third, we have advanced our chronic disease management and strengthened protection for vulnerable groups through a community-based approach.

KDCA conducted major health surveys, including the National Health and Nutrition Survey, Youth Risk Behavior Survey, and Community Health Survey, to monitor public health trends and regional disparities, providing a foundation for evidence-based policy. We also expanded support for patients with rare diseases by identifying new conditions and incorporating them into national support programs. Additionally, with the enactment of the Injury Prevention and Management Act, we bolstered our national safety net and introduced guidelines tailored to high-risk groups to reduce injuries and illness during extreme weather events, including cold and heat waves.

Fourth, KDCA has proactively supported research and development in healthcare,

Through the Clinical & Omics Data Archive (CODA), we have made 618 clinical datasets and 250,000 omics cases available to foster private-sector healthcare research. Moreover, we launched an mRNA vaccine development support initiative to enable the domestic production of vaccines within 100 or 200 days of a future pandemic outbreak.

I would like to express my sincere gratitude to all those who have contributed to protecting public health and to everyone involved in the publication of this White Paper. KDCA will continue to stand with the public as we strive to build a safer and healthier future for all.

Thank you.

Dr. Lim Seungkwan

## 2024 KDCA WHITE PAPER



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#### Vision and Mission

## Vision 2024

#### TOWARD A SAFER AND HEALTHIER FUTURE

#### **MISSION**

Central agency specializing in scientific evidence-based public health management and healthcare research and development (R&D)

Service

Collaboration

#### VALUE

Security

Communication



Protect people from infectious diseases and build a safe society

## STRATEGY



Reduce the national disease burden through effective chronic disease management



Secure research and development capacity in healthcare to prepare for and respond to disease risks

#### Core Tasks



## Protect people from infectious diseases and build a safe society

- Strengthen the proactive emergency response system against emerging and imported infectious diseases
- Develop infectious disease risk analyses, assessments, and prediction models, conduct research on risk factors
- Prevent and control epidemic infectious diseases, such as respiratory, waterborne, and vector-borne infectious diseases
- Expand the national immunization program and strengthen the framework to implement immunization
- Foster infectious disease response personnel including epidemiologists, and enhance their professionalism
- Develop and implement strategies for chronic infectious disease eradication, including tuberculosis and viral hepatitis
- Enhance the national diagnostic testing capacity for infectious diseases
- Improve the control system for healthcare—associated infections and strengthen antimicrobial resistance control





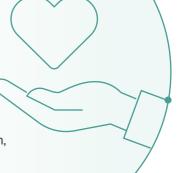
## Reduce the national disease burden through effective chronic disease management

- Generate evidence for chronic disease prevention and management, including by conducting health surveys at the national and regional levels
- Extend support coverage for children and young people with rare diseases and enhance residence—centered diagnostic support
- Prevent and manage injuries and sudden cardiac arrest
- Strengthen the prevention and control of chronic diseases, including ensuring early detection and addressing health disparities
- Establish a foundation for health hazard responses and conduct investigations and research
- Conduct climate-health impact assessments and promote adaptation measures

## Secure healthcare research and development capacity to prepare for and respond to disease risks

- · Secure core technologies for vaccines and therapeutics against infectious diseases
- Build a research foundation for advanced regenerative medicine
- Establish a national integrated bio big-data system and promote the sharing and open access of healthcare research resources
- Strengthen the capacity for disease preparedness and response through global healthcare research and development cooperation







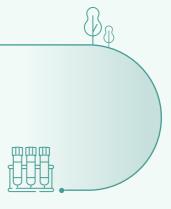




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## 2024 KDCA Key Achievements

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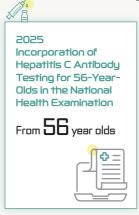


## Part. 1 Disease Prevention and Control

#### Infectious Disease Prevention and Control

## () Incorporating Hepatitis C Antibody Testing into the National Health Examination

In July 2024, KDCA announced that hepatitis C antibody testing would be included in the National Health Examination starting in January 2025. The test has been offered to individuals aged 56, a group identified as having a higher prevalence of hepatitis C.





## 02 Establishing the Second Implementation Plan for Re-Eradication of Malaria (2024-2028)



On April 25, 2024, KDCA unveiled the Second Implementation Plan for Malaria Re-Elimination (2024–2028). The plan outlines four strategic directions and ten core tasks aimed at achieving the goal of eliminating malaria in Korea by 2030.





#### Response to Infectious Disease Emergencies

## (Grand Prize) at the 2024 Safe Korea Exercise (SKX)

In 2024, KDCA led a joint exercise involving relevant ministries to review and strengthen the national response system and capacity for infectious disease disasters.







#### O2 Comprehensive Revision of the Pandemic Influenza Preparedness and Response Plan (PIP)



In September 2024, KDCA completed a comprehensive revision of the PIP. The plan aims to minimize the health and socioeconomic impact of pandemic influenza, including widespread outbreaks, disease severity, and mortality.

#### Preparedness Resources Surveillance & Investigation · Stockpile essential therapeutics and supplies · Expand the number of sentinel surveillance sites sufficient for six months · Broaden the surveillance scope for influenza · Ensure access to diagnostic testing and antiviral viruses treatment within 24 hours Vaccines One Health Approach · Enable vaccine production within 100 of 200 · Identify zoonotic risks before transmission to days of a pandemic outbreak humans · Enhance immunogenicity and advance the · Strengthen real-time joint response systems development of adjuvant technologies Response Initial Phase **Expansion Phase** Recovery Phase Support recovery and strengthen Minimize transmission Prevent severe cases and deaths preparedness for future outbreaks

## Part. 1 Disease Prevention and Control

#### Infectious Disease Risk Analysis

## (1) Expanding Access to Infectious Disease Big Data and Fostering its Use in Research and Forecasting



KDCA is expanding access to infectious disease big data to support private-sector research. It hosted a symposium on data-driven infectious disease analysis and forecasting where key findings from COVID-19 big data and forecasting models were shared among relevant stakeholders.









## O2 Providing Education on Infectious Disease for Public Officials



Annual education programs are being provided for public officials at both central and local levels to improve their understanding of infectious diseases. These trainings aim to strengthen their capacity in prevention, control, and emergency response to infectious disease threats.







#### Infectious Disease Diagnosis and Analysis

# O) Opening of Korea's First Biosafety Level 3 (BSL-3) Hands-On Training Center and Providing Practical Training



To strengthen the national biosafety workforce, KDCA established Korea's first BSL-3 hands-on training center. The center offers specialized practical training for researchers and biosafety officers handling high-risk pathogens.

Opening of BL3 hands-on training center BL3 hands-on training: donning and doffing PPE, and spill response procedures







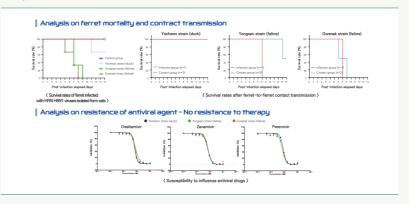
## O2 Characteristics of HPAI H5N1 infections in domestic cats in the Republic of Korea



Animal model experiments using the HPAI H5N1 virus isolated from domestic cats involved in mass mortality cases showed increased pathogenicity and infectivity in mammals compared to poultry isolates. Notably, ferret—to—ferret transmission via direct contact suggests the potential for mammalian spread (*Kim et al., Emerging Infectious Disease, 2024.10*).

Analysis on characteristics of isolated feline HPAI H5N1 in Korea





## Part. 1 Disease Prevention and Control

#### Infectious Disease Prevention and Control

## ()] Ensuring a Healthy Early Life Through National Childhood Immunization — Achieving Higher Vaccination Rates



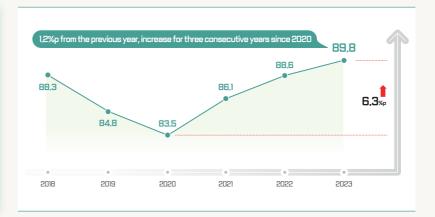
The vaccination rate among 6-year-old children has increased for three consecutive years (based on approved national vaccination statistics as of July 2024).

· Nationwide vaccination advocacy, school vaccination verification, dissemination of information via text messaging, and stable operation of designated medical institutions contributed to this achievement.

## Full vaccination rates by age in 2023



#### Full vaccination rates for 6-year-olds by year

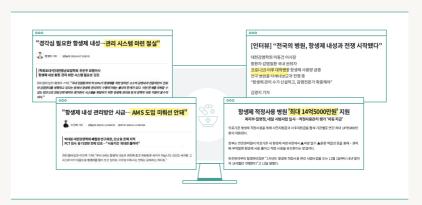


# O2 Minimizing Misuse of Antimicrobials in Medical Institutions Through a Pilot Project to Promote the Proper Use of Antimicrobials



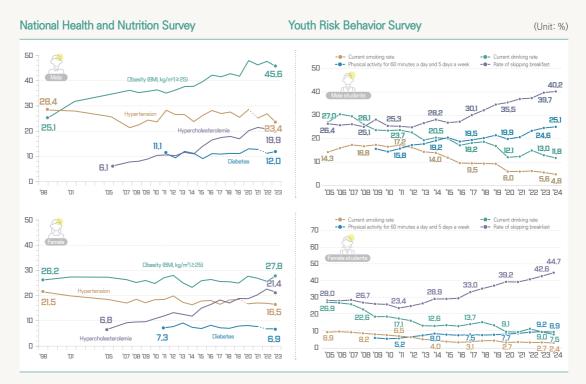
A pilot project introducing "a reimbursement scheme for appropriate antimicrobial use under the National Health Insurance Service" was launched in November 2024 to prevent AMR.



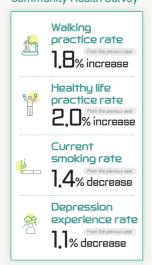


#### Chronic Disease Prevention and Control

()] Generating Evidence–Based Health Policy Through National and Regional Health Surveys to Assess the Public Health Status and Identify Health Disparities among Regions



#### Community Health Survey



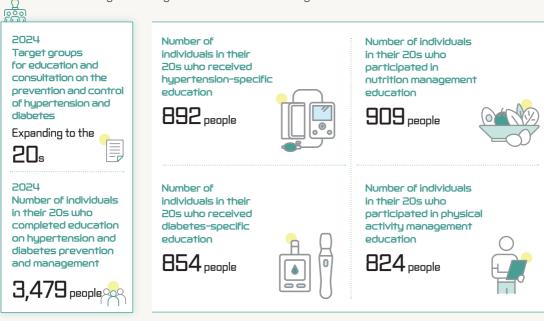


## Part. 1 Disease Prevention and Control

#### Chronic Disease Prevention and Control

## 02 Implementing a Project to Strengthen Chronic Disease Prevention and Management and Address Health Inequities

KDCA has expanded prevention and control efforts for hypertension and diabetes, including extending education and counseling services to individuals in their 20s.

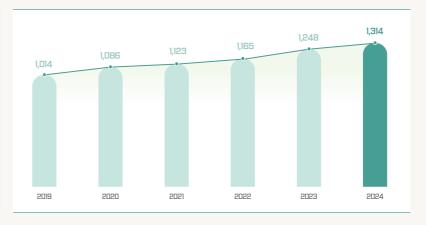


## 03 Enhancing Support for Patients With Rare Diseases



With the number of newly identified rare diseases rising from 1,248 in 2023 to 1,314 in 2024, the National Rare Disease Support Program has been expanded to include coverage for 66 additional conditions.





#### Managing Health Hazard Factors

## ()] Developing and Disseminating Guidelines for Preventing Injuries and Cardiac Arrest Based on Surveillance Data

The guideline contributes to the reduction of health risks from injuries and cardiac arrest by developing and disseminating timely prevention measures tailored to objects and seasons, based on surveillance system analysis.









## O2 Developing and Sharing Public Health Guidelines for Highrisk Groups to Minimize Health Risk due to Climate Crisis



The guideline outlines actions for high-risk groups—including seniors, pregnant women, children, individuals with chronic conditions, and outdoor workers—to avoid health risks during cold and heat waves.







#### International Cooperation in Disease Control

Ol Strengthening International Cooperation with Major Nations and Agencies to Promote Mutual Assistance





## O2 Providing Technical Support to Strengthen Capabilities in Response to Global Public Health Risks

It provides one-on-one, in-depth training sessions and shares achievements to technically support health vulnerable nations.

A program to nurture experts in core diagnosis and analysis (July 2024)

Korea-Mongolia Joint Symposium (Mongolia, September 2024)









#### Communication with the Public

## Ol Strengthening Digital Communication Channels Tailored to the General Public

In the post-COVID-19 era, tailored digital communication has earned recognition in a public contest.









Korea Disease Crushing Agency

Beep

Tester at Korea Disease Crushing Agency

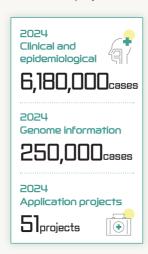
## Part. 2 Healthcare Research and Development

#### Advancing Precision Medicine through Bio Big Data

## Ol Sharing and Leveraging Healthcare Research Data



The Clinical & Omics Data Archive (CODA) collects 6.18 million cases of clinical and epidemiological information and 250,000 cases of Omics information (4.1PB) through 51 projects in 2024.



#### Use of healthcare research data (Cumulative)



## O2 Securing and Utilizing Human Bioresources through Korea Biobank Project (KBP)



The Korea Biobank Project (KBP) collected human bioresources from 1.23 million participants, supported 5,446 research projects in healthcare R&D, resulting in a total of 2,231 publications and patents.

Collecting bioresources from 1.23 million participants

Distributing bioresources to 5,446 research projects in healthcare R&D



#### Achievements by utilizing human bioresources



#### Conducting Convergence Research and Building Scientific Grounds to Overcome Chronic Diseases

#### $\cap$ 1 Producing Exercise Booklets Designed for Parkinson's Disease Patients and Distributing to Public Health Centers in Local Communities



KDCA has developed exercise intervention programs for Parkinson's patients, evaluated the effectiveness, and created educational materials for distribution in local communities.



#### 02 Study on the Impact of Consumption of Ultra-processed Food on Childhood Obesity



As the consumption of ultra-processed food (UPF) is associated with greater risk of insulin resistance and fatty liver disease, reducing UPF consumption is important to prevent obesity and metabolic diseases (Lee et al., Nutrients 2024).

Providing health information on risks of ultra-processed foods for obese children and adolescents (Dec. 2024)







#### Research and Development in Response to Infectious Diseases

# O) Sharing R&D Achievements in Infectious Disease Treatments and Strengthening Multi-Ministerial Cooperation (Dec. 19, 2024)

KDCA, the Ministry of Health and Welfare, and the Ministry of Science and ICT discussed on R&D achievements in infectious disease treatments and future cooperation measures, including exchanging technical expertise.







#### Strengthening the Foundation for Clinical Research on Infectious Disease Response

## Ol Developing Scientific Clinical Evidence-Based Guidelines on Long COVID-19 Diagnosis in Korea (Apr. 1, 2024)



The guideline contains a definition of long COVID based on clinical evidence at home and abroad, testing methods following clinical manifestation, treatment protocols, and prevention strategies based on clinical evidence.



## Part. 2 Healthcare Research and Development

#### Healthcare Research and Development

## 01

## Establishing a Global Collaborative Research Framework for Tuberculosis



By establishing research network, it provides the foundation for joint global research for tuberculosis researchers in Korea.

Introducing research in Korea at RePORT Consortium (Aug. 20 – Aug. 23)

Holding 2024 Tuberculosis Research Symposium (Dec. 11)







## O2 Establishing Integrated Human Microbiome Database

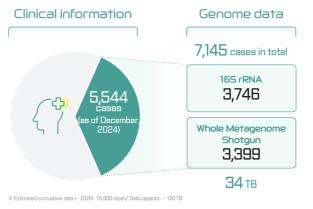


The database manages, discloses, and utilizes standardized human microbiome.

Website (kmp.nih.go.kr)

#### Status of the Data



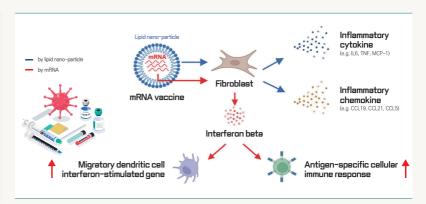


#### Healthcare Research and Development

## O) Identifying Innate Immunological Enhancement Mechanism Induced by COVID-19 mRNA Vaccination

It verified early innate immune response mechanisms through single-cell transcriptome analysis at the injection site.

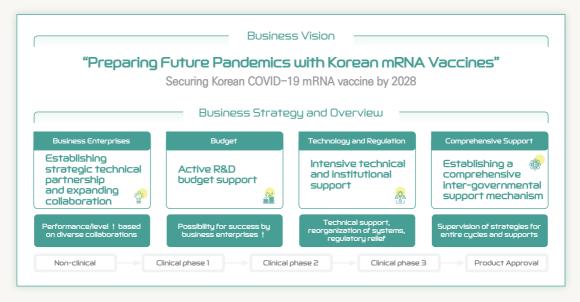




# O2 Exemption from Preliminary Feasibility Study for the mRNA Vaccine Development Support Project (2025 - 2028) Aimed at Commercialization



(Commercialization) Localizing COVID-19 mRNA vaccine products and generating effect of import substitution by 2028.





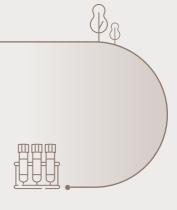




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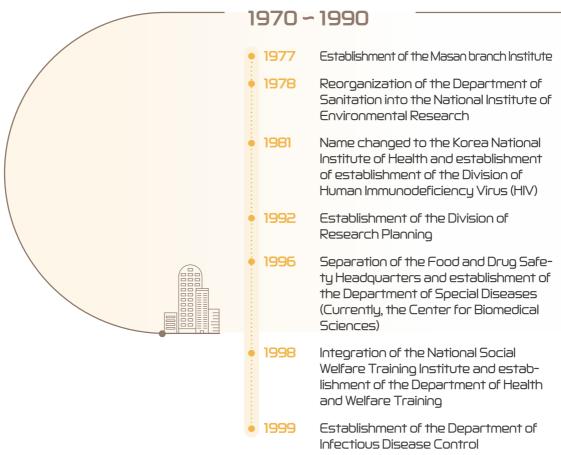


## Part. 1 KDCA History

1966

# History 1945 ~ 1960 1945 Establishment of the Model Public Health Center, the Joseon Quarantine Laboratory the National Chemical Laboratory 1959 Integration into the Korea National Institue of Health 1963 Integration of the National Quarantine Laboratory, the National Chemical Laboratory, the Health Worker Training Center, and the National Laboratory of Herbal Medicine into the Korea National Institute of Health

Name changed to the Korea National Institute of Health

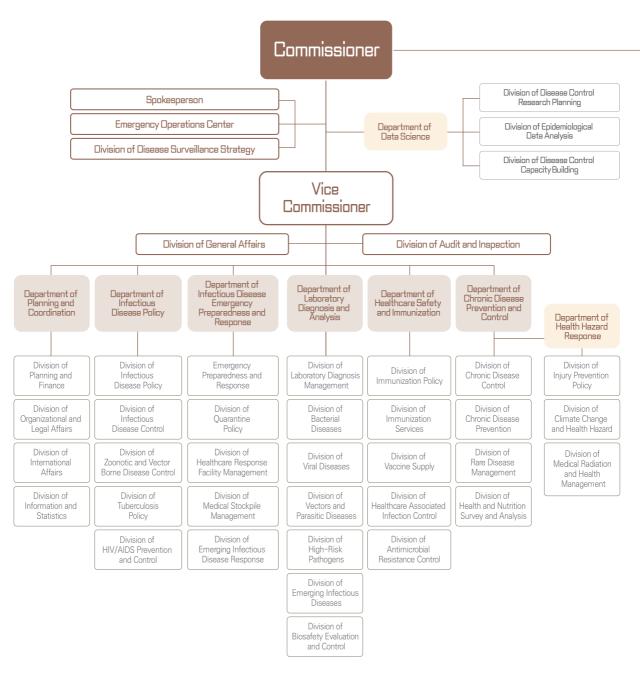


	2002	Foundation of the Central Genome Research Center (Currently, the Department of Precision Medicine)
(	2004	Reorganization and expansion into the Korea Centers for Disease Control and Prevention (KCDC) with the National Institute of Health (NIH) and 13 national quarantine stations
•	2005	Division reorganization (Foundation of the Divison of Life Science Research Management, Divison of Biosafety Evaluation & Control, and Divison of Bioscience Information)
•	2007	Establishment of the Public Health Emergency Response Team
	2009	Structural reorganization (Foundation of the Division of Respiratory Virus Infection)
	2010	Relocation to Osong in December and establishment of the Division of Organ Donation Support, the Division of Organ Transplant Management and the Center for Korean Network for Organ Sharing
-	2000	
(	2011	Establishment of the Division of Health and Nutrition Survey and operation of specialized laboratory (BL3 facility)
	2012	Establishment of the Division of Vaccine Research, construction of The National Biobank of Korea and expansion of Korean Cohort Study and Research Infrastructure
	2014	Establishment of the National Center for Medical Information and Knowledge, the Division of Allergy and Chronic Respiratory Diseases and the Division of Medical Science Knowledge Management
	2015	Establishment of the Division of Medical Radiation and the Division of Tuberculosis Epidemic Investigation
•	2016	Elevation of the KCDC to the vice-ministerial level, establishment of the Emergency Operations Center (EOC) and the Division of Risk Communication, the Division of Risk Analysis and International Cooperation, the Division of Infectious Disease Diagnosis Control and the Team of General Affairs
•	2017	Structural Reorganization (Established one department and four divisions) (The Department of Planning and Coordination, the Division of Planning for Future Infectious Diseases, the Division of Healthcare Associated Infection Control, the Division of Chronic Disease Prevention, and the Division of Rare Disease Management)
	2019	Division reorganization (Name changed to the Division of Climate Change and Health Protection, the Division of Public Health Emergency and Bioterrorism, the Division of Emerging Infectious Disease Response, the Division of Infectious Disease Policy Coordination and the Division of Zoonotic and Vector Borne Disease Control)
	2020	Elevation to the Korea Disease Control and Prevention Agency (KDCA) and structural reorganization (Adding the position of Vice Commissioner; 16 divisions under three bureaus and departments; two divisions under one department; one laboratory; five Regional Centers for Disease Control and Prevention; and one office)
	2024	Structural Reorganization The Division of Disease Surveillance Strategy, and the Division of Immunization Policy
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## Part. 2 KDCA Organizational Chart

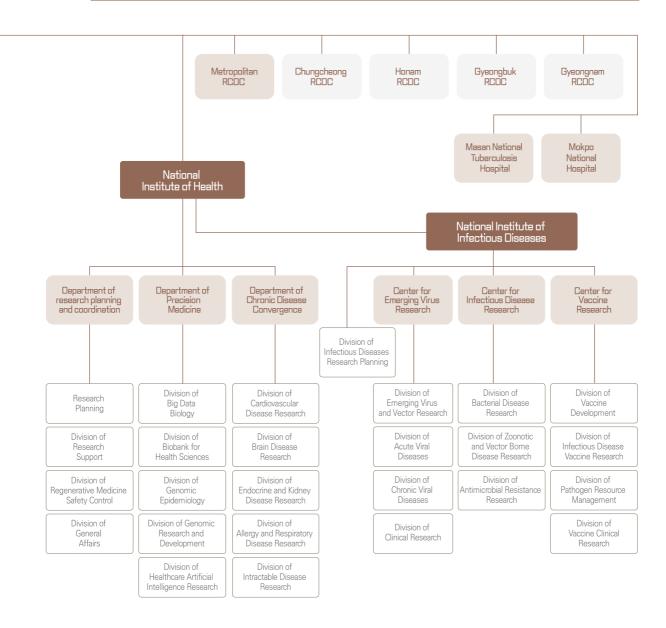
## 1. Organizational Chart and Staffing (As of December 2024)

5 Departments, 41 Divisions, 34 Affiliated Institutions



## | 1,595 employees in Total (473 at Headquarters, 1,122 at Affiliated Institutions |

Category	Total	Head quarters	National Institute of Health National Institute of Infectious Diseases		Regional Centers for Disease Control and Prevention (RCDC)	National Quarantine Station	National Tuberculosis Hospital
Total	1,595	473	204	96	186	520	212
Political service	1	1	-	_	-	-	-
Research service	347	139	155	84	50	1	2
General service	1,247	333	49	12	136	519	210



## 2. Division Overview

	Category	Roles and Responsibilities
	Spokesperson	Develop and coordinate public communication plans for major policies, and provide related consultation and support
	Emergency Operations Center	Receive and manage infectious disease emergency reports around the clock, including monitoring and information dissemination
	Department of Data Science	<ul> <li>Provide scientific evidence to inform disease control policies</li> <li>Collect, analyze, and utilize disease-related data and train professionals in infectious disease response</li> </ul>
	Division of Disease Surveillance Strategy	Plan and develop strategies for disease surveillance, and collect and analyze global infectious disease surveillance data
	Department of Planning and Coordination	Develop major work plans and manage budgeting, legislative affairs, organizational planning, and performance evaluation
		Coordinate international cooperation and operate information systems
	Division of Audit and Inspection	<ul> <li>Conduct internal audits and investigations of complaints and misconduct, and promote integrity, discipline, and anti-corruption measures in public service</li> </ul>
	Division of General Affairs	<ul> <li>Manage personnel, payroll, education, security, official seals, records, and civil affairs</li> <li>Oversee contracts, procurement, occupational safety and health, emergency planning, facility operations, civil petitions, and stateowned property management</li> </ul>
Head quarters	Department of Infectious Disease Policy	<ul> <li>Develop infectious disease control plans and policies and oversee laws</li> <li>Oversee surveillance and prevention of water- and foodborne diseases, respiratory infections, tuberculosis, HIV/AIDS, and others</li> </ul>
qual ters	Department of Infectious Disease Emergency Preparedness and Response	<ul> <li>Lead and manage national response to infectious disease crises, including imported diseases</li> <li>Manage essential medical resources, designated beds, and Class 1 infectious diseases (excluding diphtheria)</li> </ul>
	Department of	Oversee the national diagnostic system for infectious diseases
	Laboratory Diagnosis and Analysis	<ul> <li>Conduct laboratory testing, pathogen and vector analysis, and surveillance</li> </ul>
	Department of	Operate and evaluate the National Immunization Program and ensure vaccine safety
	Healthcare Safety and Immunization	<ul> <li>Procure and stockpile vaccines, and manage vaccine supply</li> <li>Prevent and control healthcare-associated infections and antimicrobial resistance</li> </ul>
	Department of Chronic Disease Prevention	Establish chronic disease prevention and control systems, and implement prevention projects
	and Control	Manage rare diseases and conduct national and regional health surveys
		<ul> <li>Build a system for injury prevention and control, and monitor injuries and sudden cardiac arrest</li> </ul>
	Department of Health Hazard Response	<ul> <li>Respond to climate-related health risks and unidentified non- communicable diseases</li> </ul>
	1 102010 1 100001130	Conduct research on the harm of tobacco use
		<ul> <li>Improve safety of healthcare environments through medical radiation management</li> </ul>

	Category	Roles and Responsibilities
	Department of Research Planning and Coordination	<ul> <li>Plan research projects, manage research outcomes, and provide research support</li> <li>Support the operation of the National Institute of Health and ensure safety management for advanced regenerative medicine clinical research</li> </ul>
	Department of Precision Medicine	<ul> <li>Manage and utilize research data in health and medical science, bio big data, human-derived materials, and biobank resources</li> <li>Plan and manage the Korean Genome Cohort Study, develop genome analysis technologies, and conduct artificial intelligence research in healthcare</li> </ul>
National	Department of Chronic Disease Convergence	<ul> <li>Conduct research on prevention, diagnosis, and treatment methods for chronic diseases</li> <li>Establish research infrastructure for stem cell and regenerative medicine</li> </ul>
Institute of Health	Division of Infectious Diseases Research Planning	Develop and plan national infectious disease R&D strategies and roadmaps
	Center for Emerging Virus Research	<ul> <li>Conduct research to develop core therapeutic and diagnostic technologies for novel, variant, acute, and chronic viral infectious diseases</li> <li>Operate infectious disease cohorts and conduct clinical treatment research</li> </ul>
	Center for Infectious Disease Research	<ul> <li>Conduct research on bacterial infectious diseases and related diagnostics and therapeutics</li> <li>Conduct research on antimicrobial resistance and related diagnostics and therapeutics</li> </ul>
	Center for Vaccine Research	<ul> <li>Plan national vaccine R&amp;D policies</li> <li>Conduct research on improving and developing vaccines for emerging infectious diseases and major infectious diseases</li> </ul>
Regional Centers for Disease Control and Prevention (RCDCs)		<ul> <li>Manage the operation of regional CDCs and affiliated quarantine stations</li> <li>Support infectious disease prevention and response efforts and epidemiological investigations in the regions</li> <li>Conduct quarantine and diagnostic testing and implement regional surveys related to chronic diseases</li> </ul>
National Quarantine Station		<ul> <li>Perform quarantine inspections and control measures for inbound travelers and transport vehicles</li> <li>Manage public health within quarantine zones and oversee quarantine statistics</li> </ul>
National Tuberculosis Hospital		<ul> <li>Provide clinical care and conduct clinical research for tuberculosis patients</li> <li>Promote national and global collaborative tuberculosis research projects</li> </ul>

## Part. 3 KDCA Budget Overview

#### 1. Overview

(Unit: KRW 1 million)

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
Total	1,630,321	1,266,128	-364,193	-22.3
General account	603,772	448,736	-155,036	-25.7
Masan National Tuberculosis Hospital	20,403	20,261	-142	-0.7
Mokpo National Hospital	24,606	19,483	-5,123	-20.8
National Health Promotion Fund	977,633	773,741	-203,892	-20.9
Emergency Medical Fund	3,907	3,907	_	_

Based on gross expenditure

## 2. General Account

(Unit: KRW 1 million)

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
Total	603,772	448,736	-155,036	-25.7
KDCA personnel expenses	82,475	84,860	2,385	2.9
NIH personnel expenses	16,391	18,077	1,686	10.3
General operating cost	858	849	-9	-1.0
Department of Data Science - operating cost	80	47	-33	-41.3
Department of Planning and Coordination – operating cost	99	98	-1	-1.0
Department of Infectious Disease Policy – operating cost	76	57	-19	-25.0
Department of Infectious Disease Emergency Preparedness and Response - operating cost	70	54	-16	-22.9
Department of Infectious Disease Diagnosis Control – operating cost	86	94	8	9.3
Department of Healthcare Safety and Immunization – operating cost	100	81	-19	-19.0

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
Department of Chronic Disease Prevention and Control – operating cost	58	55	-3	-5.2
Bureau of Health Hazard Response – operating cost	50	50	-	_
General operating cost (earmarked)	2,832	2,616	-216	-7.6
Department of Data Science – operating cost (earmarked)	60	51	-9	-15.0
Department of Planning and Coordination – operating cost (earmarked)	1,981	1,900	-81	-4.1
Department of Infectious Disease Policy – operating cost (earmarked)	50	54	4	8.0
Department of Infectious Disease Emergency Preparedness and Response – operating cost (earmarked)	54	58	4	7.4
Department of Infectious Disease Diagnosis Control – operating cost (earmarked)	56	66	10	17.9
Department of Healthcare Safety and Immunization – operating cost (earmarked)	58	51	-7	-12.1
Department of Chronic Disease Prevention and Control – operating cost (earmarked)	94	106	12	12.8
Department of Health Hazard Response – operating cost (earmarked)	32	35	3	9.4
National Institute of Health - operating cost	535	510	-25	-4.7
National Institute of Health – operating cost (earmarked)	791	1,014	223	28.2
RCDCs-operating cost	457	373	-84	-18.4
RCDCs-operating cost (earmarked)	2,950	3,045	95	3.2
National Quarantine Station – operating cost	908	922	14	1.5
National Quarantine Station – operating cost (earmarked)	1,642	1,608	-34	-2.1
Operation of KDCA information infrastructure (informatization)	3,975	3,837	-138	-3.5
ODA for infectious disease control	2,045	2,045	-	_

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
Support for Hansen's disease patients	11,416	11,652	236	2.1
Regional disease response and control	1,583	1,869	286	18.1
Strengthening epidemiological investigation capacity	641	657	16	2.5
Capacity building for infectious disease response workforce	2,532	2,472	-60	-2.4
Establishment of disease research infrastructure	1,673	1,492	-181	-10.8
Management of disease surveillance strategy	570	570	_	_
Comprehensive management of emerging infectious disease emergencies	185,345	8,052	-177,293	-95.7
Quarantine control	12,265	12,949	684	5.6
Establishment of regional specialized infectious disease hospitals	6,388	53	-6,335	-99.2
Construction and operation of integrated support system for infectious disease prevention and control	3,365	2,575	-790	-23.5
Operation of national reference laboratories	24,591	18,192	-6,399	-26.0
Biosafety management and specialized laboratory operations	3,560	3,641	81	2.3
Survey on children's oral health status	649	649	-	_
Development and operation of the national health knowledge accumulation system for disease prevention (IT-based)	2,916	3,014	98	3.4
Injury prevention and control	5,007	4,574	-433	-8.6
Medical radiation safety management	730	776	46	6.3
Establishment of a safety net for biotechnology	263	383	120	45.6
Support for disease research and management	1,467	1,563	96	6.5
Operation of a management system for regenerative medicine safety	595	563	-32	-5.4
Operation of medical library	2,200	2,285	85	3.9
Establishment of a platform for regulating disease-related gene expression	780	780	-	-

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
Establishment of National Cardiovascular Center	330	720	390	118.2
Operation of National Biobank of Korea	3,875	3,875	-	_
Establishment of healthcare big data showcase (Informatization)	738	545	-193	-26.2
Operation of National Institute of Infectious Diseases	297	297	-	_
Supports for International Vaccine Institute (ODA, R&D)	20,139	12,779	-7,360	-36.5
Establishment of a platform for international cooperation in infectious disease research (R&D)	691	791	100	14.5
Planning, evaluation and management costs of KDCA funded R&D projects (R&D)	671	751	80	11.9
Construction and operation of national immunity survey system	2,200	2,200	-	-
Operation and management of National Culture Collection for Pathogens (NCCP)	1,777	1,777	-	-
Establishment of national healthcare research infrastructure (R&D)	20,066	21,214	1,148	5.7
Research and development of infectious disease control technology (R&D)	24,130	38,343	14,213	58.9
Phenotype analysis research (R&D)	3,018	4,982	1,964	65.1
Research on chronic disease management technology development (R&D)	18,417	20,227	1,810	9.8
Comprehensive management of biological resources (R&D)	8,870	8,880	10	0.1
Technology development project on overcoming viral infectious diseases, which can cause national crisis (R&D)	13,298	-	-13,298	Net decrease
Development of healthcare heterogeneous data system and AI (R&D)	5,012	4,932	-80	-1.6
Public vaccine development support project (R&D)	11,093	11,329	236	2.1
Research and development project on hospital-associated human microbiome (inter-ministerial, R&D)	6,105	5,745	-360	-5.9

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
R&D project on advancing inter-ministerial infectious disease quarantine system (R&D)	1,900	1,667	-233	-12.3
Research on sequelae of COVID-19 (R&D)	5,000	4,100	-900	-18.0
Project on establishing national integrated bio big data 1 (R&D)	21,755	23,934	2,179	10.0
Disease prevention and control research in response to fine dust (R&D)	4,243	4,246	3	0.1
Project on establishing national integrated bio big data 2 (R&D)	1,157	1,245	88	7.6
Technology development on advancing infectious disease response capabilities in medical field (R&D)	-	1,412	1,412	Net increase
Project on supporting the development of mRNA vaccine in response to pandemics (R&D)	-	25,387	25,387	Net increase
Project on supporting the rapid technological development in response to high-priority infectious diseases (R&D)	-	3,375	3,375	Net increase
Multi-ministerial national bio-resource advancement project (R&D)	3,243	3,478	235	7.2
Social service system support	880	873	-7	-0.8
Maintenance of KDCA IT equipment (Informatization)	6,881	6,461	-420	-6.1
Informatization operation and maintenance of National Institute of Health	427	619	192	45.0
Support for KDCA public workers	24,192	25,862	1,670	6.9
Policy research and development	240	240	_	_
Global public health emergency response (ODA)	4,728	3,686	-1,042	-22.0
International cooperation in disease control	439	829	390	88.8
Public communication on disease control	561	561	-	-

## 3. National Health Promotion Fund

(Unit: KRW 1 million)

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
Total	977,633	773,741	-203,892	-20.9
Infectious disease prevention, control and support	20,150	21,476	1,326	6.6
Prevention of HIV/AIDS and sexually transmitted disease	16,314	16,430	116	0.7
National tuberculosis prevention	38,775	39,051	276	0.7
Strengthening capacity for terrorism preparedness and response	8,590	10,045	1,455	16.9
Establishment of regional hub diagnostic infrastructure	7,338	7,338	-	-
Disease investigation management, and laboratory surveillance network operation	2,129	2,129	-	_
Vector and parasite diagnosis, surveillance and analysis	2,274	2,284	10	0.4
Implementation of national immunization program	801,022	601,831	-199,191	-24.9
Chronic disease prevention and control	14,236	13,925	-311	-2.2
Establishment of chronic disease control system	12,345	10,395	-1,950	-15.8
Supports for patients with rare disease	36,722	31,340	-5,382	-14.7
Korea National Health and Nutrition Examination Survey (KNHANES)	5,435	5,181	-254	-4.7
Research on risk of smoking prevention	2,460	2,473	13	0.5
Genome and epidemiology study for health promotion and disease prevention	4,738	4,738	-	-
Research on chronic disease prevention and control	3,652	3,652	-	-
Chronic infectious disease cohort project	1,453	1,453	-	-

## 4. Emergency Medical Service Fund

(Unit: KRW 1 million)

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
Total	3,907	3,907	_	_
Operation and management of hospital beds designated by the government	3,907	3,907	-	_

X Source: The funds were allocated by the Ministry of Health and Welfare, which oversees them under the Emergency Medical Service Act. the Emergency Medical Service Act

## 5. Masan National Tuberculosis Hospital

(Unit: KRW 1 million)

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
Total	20,403	20,261	-142	-0.7
Personnel expenses	7,259	7,844	585	8.1
General operating cost	1,164	1,128	-36	-3.1
Clinical research expenses (R&D)	92	92	-	_
National health insurance contributions (profit/ loss)	272	283	11	4.0
Hospital management and operations (profit/ loss)	4,037	4,011	-26	-0.6
Establishment of information system (IT-based, profit/ loss)	189	199	10	5.3
Revenue transfer expenses	760	362	-398	-52.4
Basic operating expenses (operating expenses (earmarked) – capital)	180	179	-1	-0.6
Establishment of information system (IT-based, capital)	196	100	-96	-49.0
Hospital management and operations (capital)	6,254	6,063	-191	-3.1

## 6. Mokpo National Hospital

(Unit: KRW 1 million)

Category	2024 (A)	2025 (B)	Change (B-A)	Percentage (%)
Total	24,606	19,483	-5,123	-20.8
Personnel expenses	5,952	6,382	430	7.2
General operating cost	1,040	1,060	20	1.9
Clinical research expenses (R&D)	65	60	-5	-7.7
National health insurance contributions (profit/ loss)	225	234	9	4.0
Hospital management and operations (profit/ loss)	2,726	2,633	-93	-3.4
Major IT projects (IT-based, profit/ loss)	114	115	1	0.9
Revenue transfer expenses (profit/ loss)	7	7	-	_
Basic operating expenses (operating expenses (earmarked) - capital)	106	99	-7	-6.6
IT operating expenses (capital)	16	16	_	_
Major IT projects (IT-based, capital)	107	114	7	6.5
Hospital management and operations (capital)	14,248	8,763	-5,485	-38.5

## Part. 4 KDCA Statutes

#### Laws and Regulations under the Jurisdiction of KDCA (as of December 2024)

Laws (9)
Infectious Disease Control and Prevention Act (Joint jurisdiction with MOHW)
Quarantine Act
Tuberculosis Prevention Act
Framework Act on Health and Medical Services (Joint jurisdiction with MOHW)
Public Health and Environment Research Institute Act
Act on the Promotion of Collection, Management, and Utilization of Pathogen Resources
Medical Service Act (Joint jurisdiction with MOHW)
Rare Disease Management Act (Joint jurisdiction with MOHW)
Prevention of Acquired Immunodeficiency Syndrome Act

## Laws Implemented by KDCA under the Ministry of Health and Welfare's Jurisdiction (as of December 2024)

Laws (9)			
Framework Act on Health Examination			
Dental Health Act			
National Health Promotion Act			
National Nutrition Management Act			
Act on Dissection and Preservation of Corpses			
Bioethics and Safety Act			
Act on the Prevention and Management of Cerebrovascular and Cardiovascular Diseases			
Cancer Control Act			
Regional Public Health Act			

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Address KDCA, Osong Health Technology Administration

Complex, 187, Osongsaengmyeong2-ro, Osong-eup, Heungdeok-gu, Cheongju-si, Chungbuk, Korea 28159

TEL +82-43-719-7221, 7229, 7223

FAX +82-43-719-7040 Hompage www.kdca.go.kr

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