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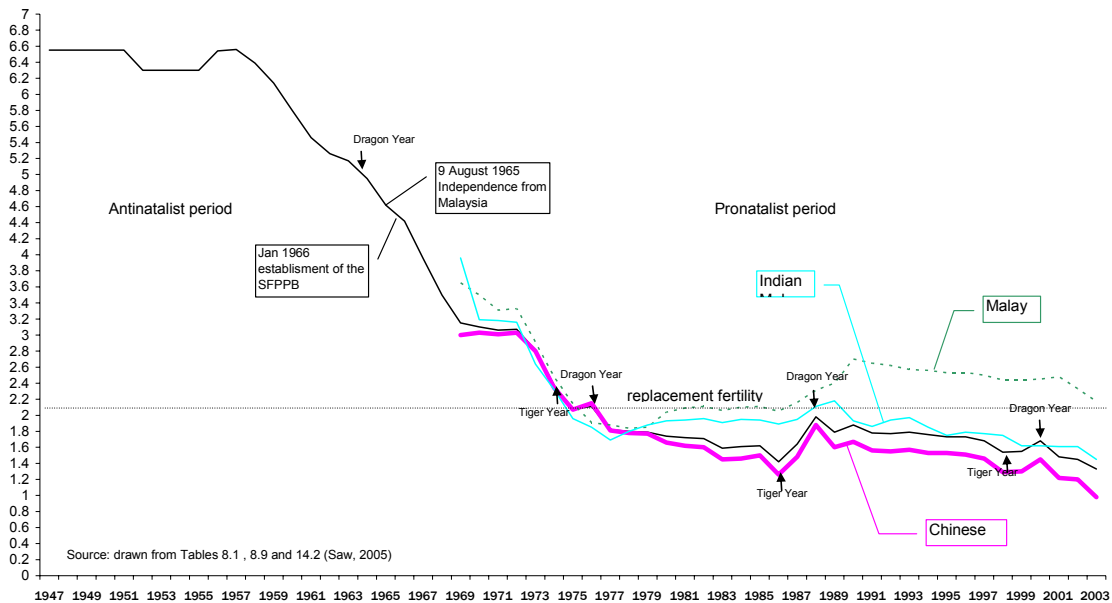
This book is a vastly expanded version of the author earlier book published in 1980 by Oxford University Press entitled “Population Control for Zero Growth in Singapore”. The book is clearly structured chronologically and divided into two parts: the Antinatalist and Pronatalist Periods. The book consists of 15 chapters with Chapters 2 to 8 reproduced from the earlier version of the book with some revisions. Therefore, for those who have read the earlier book, the second part of the book is worth reading.

Comprehensive discussions and documentation on all aspects of population policies and programmes throughout Singapore’s history make this book an indispensable source for those working and having an interest in population dynamics in low fertility countries in general and demographic modernity in particular. A growing concern with very low fertility is occurring in many developed countries and recently in many developing countries.

This book provides an interesting case study for those curious about the public policies and programmes regarding fertility and population growth. Singapore’s long-term demographic goal was to stabilize the population at a certain number by fulfilling two conditions: reducing fertility rate to the replacement level and maintaining this level indefinitely. As seen in Figure 1, drawn from the data available in Tables 8.1, 8.9 and 14.2, revolutionary shifts have taken place as a result of antinatalist and pronatalist policies and programmes in Singapore.

The author of the book argues that the comprehensive population control programmes have been responsible for sustaining and accelerating the decline of total fertility rate (TFR) in a very short period. As in many other Southeast Asian countries, the TFR was slightly stable at around 6 to 7 in 1950s. The decline of Singapore’s TFR started in 1958 as a result of the establishment of the Family Planning Association on 22 July 1949, a non-profit private body with the primary objective to improve the welfare of the family by providing contraceptive education and services. The Association depended largely on voluntary contributions and manpower for its daily administrative work, management and development. The funds of the association came from various sources with the annual grant from the government constituting a major portion. Other sources were from the annual membership subscriptions, private donations, and funds raised through special fundraising campaigns.

Figure 1. Total Fertility Rate: Singapore, 1947-2003



In its first establishment, three clinics came into operation with the operating hours between 4.30 to 6.00pm. In early 1950, it was felt that the demand for family planning services was sufficiently great to justify the setting up of more clinics. Thereafter, the number of clinics increased substantially. The book indicates that the separation of Singapore from the Federation of Malaysia on 9 August 1965 was then a turning point for this family planning policy, which became the government policy by establishing the Singapore Family Planning and Population Board (SFPPB) on 7 January 1966. The SFPPB programmes were strongly integrated into the work of the Ministry of Health.

In the early phase of the national programme all activities were emphasized on generating public awareness about the population problem and stressing the need for family planning. Therefore, the emphasis widely publicized by 1968 was “Plan Your Family” then shifted to “Singapore Wants Small Families”. In the second Five-Year Plan (1970-1975), precisely in 1972, this emphasis gave way to “Two-Child Families for Singapore”. Irrespective to the sex of the children, it subsequently changed to “Boy or Girl – Two is Enough”. During this Second Plan period, a comprehensive range of effective population policies introduced including the complete liberation of the restrictive laws concerning induced abortion, sterilization and the institutionalization of a series of tough social incentives and disincentives aimed at promoting the two-child family norm. The author discussed in detailed about the policies concerning with induced abortion and sterilization in Chapters 4 and 5. Chapter 6 discusses incentives and disincentives relating to income tax and education, paid maternity leave for the first two confinements, differentiation of accouchement fees based on child’s birth order, limiting a big size of public housing and limiting permission to work permit holders to marry Singaporeans. Singapore reached replacement fertility level in 1975. However, the strong antinatalist policies and programmes were not relaxed or reversed until the mid-eighties. The fertility rate continued to decline to reach 1.61 in 1984.

The anti-natalist programmes were made to be more relaxed by encouraging the better-educated women to have more babies and the lesser-educated to bear fewer babies. Lee Kuan Yew’s speech at the National Day Rally on 14 August 1983 (Appendix A) emphasized the need to

change "...our policies, and try to reshape our demographic configuration so that our better-educated women will have more children to be adequately represented in the next generation..."

In 1984 the Government established the Social Development Unit (SDU) in the Public Service Division of the Ministry of Finance to provide matching services to the educated men and women. The SDU was transferred to the Ministry of Community Development and Sports in the late 1990s. Other pro-natalist programme favouring the highly educated women, enhanced child relief and priority of primary school registration for children of graduate mothers, were introduced. In contrast to the mentioned three pronatalist programmes, the sterilisation cash incentive program was designed to discourage the lesser-educated women from having many children. Chapters 10 and 11 documented the relaxation of the old antinatalist policies and the introduction of limited pronatalist policies.

During the years 1987-2000 the government implemented several limited pronatalist policies such as the baby bonus scheme, public sector leave and flexible work, childcare subsidy, public housing and special tax rebates. It should be noted that these pronatalist benefits were not given to parents producing the fifth and subsequent children. The effectiveness of all the measures had not been very encouraging mainly because they were formulated to loosen some of old antinatalist measures and to introduce some limited measures. The baby bonus scheme was introduced by the then Prime Minister, Mr. Goh Chok Tong, in the National Day Rally held on 20 August 2000.

In the era of below replacement fertility, as shown in Figure 1, the Tiger and Dragon Years had shown their significant role on fertility level. This Chinese lunar calendar year also had an important role on the marriage incidence.

New pronatalist financial/non-financial incentives implemented after the National Day Rally in August 2004 were documented in details in Chapters 13 of the book. The Prime Minister, Lee Hsien Loong, speech was also documented in Appendix E. A series of new pronatalist incentives consists of two-day childcare leave for each working parent per year, lower maid levy, grandparent care-giver relief, five-day working week, equal medical benefits, and Work-Life Works! Fund. However, these 2004 package of pronatalist programmes will only have an impact on the level of fertility from late 2005 onwards, which is not available yet. As shown in Figure 1, the antinatalist policies and programmes managed to bring down the fertility rate of the three main races in Singapore to reach replacement fertility at the same time in 1975. However, it is interesting to see what happened to their fertility rate after this remarkable achievement. The Chinese and Indian fertility rates fluctuated at the below replacement level, even the Chinese in 2003 reached the lowest rate, below 1.0. The path taken by the Malay was different. After reaching the replacement level, the Malay fertility continuously declined and reached the lowest level of 1.84 in 1978 after that it was steadily back to above replacement level in 1987. The Malay fertility went up more decisively to touch 2.7 in 1990. The author argued that this trend was a response to the introduction of pro-baby incentives at the beginning of 1987. Until 2003 the Malay fertility was still above replacement level.

The book is ended by discussing the future trend of Singapore's population within the first half of the twenty-first century. One of the vital issues is that the number of population will still be increasing up to 2020 or 2025 depending the three scenario of the projection and the inevitable shrinking of the population thereafter.

Finally, this book, as indicated by the author, should enable the people of Singapore to comprehend the fundamental population issue and its adverse consequences. Furthermore, since the book constitutes a convenient source of detailed information on existing pronatalist incentives, financial or otherwise, this book is specifically useful to married couples with children or planning to have babies as they are entitled to claim. Beyond these, policy makers, researchers, and students should read this enjoyable book to understand the lessons learned from the low fertility country as it is only a matter of time that high fertility countries will probably arrive at what Singapore was at the present time.