



Feedback for the Singapore Budget 2012

Calling for an inclusive budget to support a caring society



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Calling for an inclusive budget to support a caring society

Feedback for the Singapore Budget 2012 from the Association of Women for Action and Research (AWARE), submitted to REACH, MCYS

Introduction

AWARE thanks the Government for inviting views from the public before the Singapore Budget 2012 is announced.

AWARE has, for 25 years, been advocating for an inclusive society where people are not excluded, on the basis of gender, from making life choices and accessing opportunities for a fulfilling life. To ensure a truly inclusive society, women's issues must be addressed fully as the nation's issues. AWARE thus calls for an inclusive budget for the year 2012 that adequately meets the needs of all women in Singapore, regardless of age, marital status and disabilities. This is aligned with the State's commitment and obligation to the United Nations Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).

Women are still the primary caregivers of their families, including not only children and parents, but even parents-in-law and disabled siblings. Although the majority of women are in the labour force, their caregiving burdens often cause them to stop or take a slower track at work, resulting in lower incomes and less CPF for them, with the consequence of greater vulnerability than men at the same age.

AWARE calls for a national budget that is inclusive and supportive of a society that cares for all vulnerable groups, particularly older women, persons with disabilities and those in financial distress. No one should fall through the cracks.

AWARE's concerns

A. Comprehensive healthcare for an ageing population

Singapore's population is expected to age at an increasingly faster rate. By 2020, an estimated 15% of the population or some 600,000 people would be above the age of 65.¹ Currently, the proportion of residents aged 65 and above stands at 9.3% of the population.²

Singapore women are living longer than men – their average life expectancy is 84.1 years, while men's average life expectancy is 79.3 years.³ The feminization of ageing is a global

¹ Tan, 2012.

² National Population and Talent Division, *Population in Singapore 2011*, p. 6.

trend, which means that the economic and health issues of the elderly impact more significantly on older women. Elderly women tend to be in worse physical condition than their male counterparts, and face lifelong disabling illnesses.⁴ Research shows that compared to women in other developed countries such as Australia and Japan, a higher percentage of Singapore women (14.4%) have shortened life expectancy due to ill-health.⁵ This percentage is much lower for Australian women (9.1%) and Japanese women (8.1%).⁶

The 2011 labour statistics show that women make up nearly two-thirds of the economically inactive residents in Singapore.⁷ Women are also earning less than men,⁸ and at retirement have less than half of the CPF that men have,⁹ with the consequence that women have significantly less Medisave, which may be insufficient for their medical bills.

In 2010, the Government's expenditure on healthcare was only 1.3% of GDP.¹⁰ In contrast, in other developed Asian economies, such as Korea and Hong Kong, government spending ranges between 3-4% of GDP.¹¹ Furthermore, in these countries, government expenditure as a percentage of total healthcare spending is between 50% and 65%, compared to 32% in Singapore (2005).¹²

In 2000, the World Health Organisation ranked the effectiveness of Singapore's healthcare system 6th among the 191 member states at that time¹³ but a dismal 101st – 102nd in fairness of healthcare financing.¹⁴ The Government-mandated healthcare financing system (Medisave, Medishield and Medifund) is not a major source of payment for health. Much of healthcare expenditure in Singapore is funded out of pocket. Patients in Singapore pay about 55% out of pocket, compared to 30% in other advanced Asian economies, including Taiwan, Japan, Hong Kong and Korea.¹⁵

Furthermore, the 3 Ms and Eldersshield do not provide much support for the current batch of older women. Among elderly women with CPF accounts, it was found that more than half of them worked for less than half a year.¹⁶

³ Department of Statistics Singapore, *Population Trends 2011*, p. vi.

⁴ AWARE and Tsao Foundation for Successful Ageing, 2005, pp. 8-9.

⁵ Soin, 2011, p. 2.

⁶ Ibid.

⁷ Ministry of Manpower, *Singapore Workforce 2011*, p. 17.

⁸ 'MOM Report on Labour Force in Singapore 2011 Table 21' <http://www.mom.gov.sg/statistics-publications/national-labour-market-information/publications/Pages/statistical-tables-2011.aspx#em>

⁹ AWARE and Tsao Foundation for Successful Ageing, 2005, pp. 4-5.

¹⁰ 'MOH Government Health Expenditure' http://www.moh.gov.sg/content/moh_web/home/statistics/Health_Facts_Singapore/Government_Health_Expenditure.html

¹¹ Bhaskaran et al., 2012, p. 38.

¹² Ibid.

¹³ World Health Organisation. *The World Health Report 2000 Health Systems*, p.154, <http://www.who.int/whr/2000/en/>.

¹⁴ World Health Organisation. *The World Health Report 2000 Health Systems*, p.189, <http://www.who.int/whr/2000/en/>.

¹⁵ Bhaskaran et al., 2012, p. 35.

¹⁶ Chia et al, 2008, p 23.

The 1995 National Survey in Singapore shows that 54% of seniors aged 55 and above depended on their children's Medisave to pay for their healthcare, while 2% depended on their spouse's Medisave. Of these dependent seniors, 65% were older women.¹⁷ While 30% of men could rely on their own Medisave, only 7% of women could do so.¹⁸ While information about the extent to which the elderly depend on their children's Medisave needs to be updated, it is still generally the case that compared to men, women earn less, have less CPF and less Medisave, as well as less access to employment health benefits or private insurance.

With the total fertility rate in Singapore falling from 1.6 in 2000¹⁹ to 1.2 in 2011,²⁰ ageing Singaporeans cannot continue to rely on disappearing family support. Even spousal support may be lacking for the increasing number of people who remain single. Statistics of the resident population for the years 2000 and 2010 show a growing proportion of singles (increasing from 30% to 32%) and those divorced or separated (increasing from 2.5% to 3.3%). Conversely, the proportion of married persons has declined from 62% to 59% in the same time period.²¹

Caregiving is gendered. In a recent study, it was found that caregiving at home was carried out mainly by female family members (excluding domestic help) – 43% by daughters, compared to 17% by sons, and 12% by wives compared to 3% by husbands.²²

Statistics also show that the average balance in a Medisave account is just \$16,900.²³ This can be rapidly depleted by the treatment of major illnesses. Medishield coverage also ends once a Singaporean turns 85.

The second and third deciles of employed households in Singapore earn average monthly incomes of \$2,681 and \$3,757 respectively²⁴ and they spend 5.5% of their monthly household expenditure on healthcare.²⁵ While monthly incomes of these amounts may be sufficient for basic everyday needs, these do not sufficiently provide for longer term healthcare, especially for chronic illnesses, which entail cumulative costs.²⁶

AWARE's recommendations on comprehensive healthcare for an ageing population

1. All Singaporeans over 85 should be provided with free Medishield coverage for life. Though private shield life coverage is available, the premiums are very high – for

¹⁷ AWARE and Tsao Foundation for Successful Ageing, 2005, pp. 4-5.

¹⁸ Phua, 2001, pp. 177 – 178.

¹⁹ Huang, 2010, <http://www.channelnewsasia.com/stories/singaporelocalnews/view/1039681/1/.html>

²⁰ Department of Statistics Singapore, *Key Annual Indicators*, <http://www.singstat.gov.sg/stats/keyind.html>

²¹ Department of Statistics Singapore, *Population Trends 2011*, p. 44.

²² Chia et al, 2008, pp. 5 and 29.

²³ Ministry of Health, 'Health Care Financing'

http://www.moh.gov.sg/content/moh_web/home/statistics/Health_Facts_Singapore/Healthcare_Financing.html

²⁴ Department of Statistics Singapore, *Key Household Income Trends 2010*, p. 4

²⁵ 'MOH Consumer Price Indices (CPI) & Household Healthcare Expenditure'

http://www.moh.gov.sg/content/moh_web/home/statistics/Health_Facts_Singapore/Consumer_Price_Indices_CPI_and_Household_healthcare_Expenditure.html

²⁶ Bhaskaran et al., 2012, p. 36.

- example, the annual premium for the NTUC Enhanced Income Shield beyond the age of 85 starts at about \$2,400 (about \$200 per month).
2. As the average balance in a Medisave account is just \$16,900, Medisave accounts should be periodically topped up from budgetary surpluses, in proportion to the age of the recipient as well as household income.
 3. It should be mandated that a specified percentage of a husband's CPF be deposited into his stay-at-home wife's Medisave account or incentives (e.g. tax reliefs or additional top ups) should be provided for husbands to top up their stay-at-home wives' Medisave account.
 4. The Government's portion of health care expenditure should be increased to at least 20% of people's healthcare expenses to reduce their out-of-pocket expenses.
 5. AWARE welcomes the Government's initiative to increase the number of eldercare centres to 8,000 by 2020. This increase should be matched by the recruitment and training of adequate staff in numbers and expertise.
 6. Waiting time for admission into a nursing home should be shortened significantly. The current waiting time is 49 days.
 7. Subsidies should be given for the long-term care of elderly family members, on the same basis as for the childcare subsidy which is pegged to the monthly income of \$3500.
 8. Singles – men or women – who are caregivers and who employ foreign domestic workers should be given tax relief on the levy they pay to MOM.
 9. Subsidies for regular caregivers of the elderly should recognize that the caregivers may be part of an extended family, rather than only immediate family members, when such is indeed the case.

B. Comprehensive support of lower income and vulnerable groups

It is widely acknowledged that income inequality in Singapore has risen significantly in the last 10 years (from 0.43 in 2000 to 0.452 in 2010).²⁷ While many countries, including advanced Asian economies such as Japan and South Korea, have also experienced rising Gini Coefficients, what is alarming is the speed of increase in the Gini Coefficient in Singapore in the last 10 years.²⁸ Between 2001 and 2008, there have been real wage declines for the bottom 3 deciles and wage stagnation for the next 2 higher deciles.²⁹

Since the General Election of 2011, there have been some tweaks in social service programmes which have been helpful. However, to address the issue of inequality more effectively, the Government needs to 'put its money where its mouth is' and increase its budget for social programmes. It should provide more protection and support for the people in the bottom 3 deciles and vulnerable groups.

Public spending on social programmes has not kept up with the pace of economic development in Singapore. The historic trend since the 1980s is that Singapore's public

²⁷ Bhaskaran et al., 2012, p. 4.

²⁸ Ibid.

²⁹ Bhaskaran et al, 2012, p. 2.

spending on social programmes has decreased from about 25% in the 1980s to about 20% in the 1990s to 16% of GDP in 2011³⁰. This is the smallest amount among developed economies. Countries such as Hong Kong, South Korea and Taiwan have a much larger social programme and have not lost their economic competitiveness.³¹ The decline in Singapore's public spending has occurred in a context where GDP has increased by more than 5 times since the 1990s.³² Investing in social protection measures will enhance economic growth as it raises labour productivity, enhances social stability and reduces poverty.³³

Singapore is also facing an unprecedented high inflation rate of 5.2 – almost double the rate last year.³⁴ Special efforts must thus be taken to minimize the impact of inflation on lower-income households.

Though there are various assistance schemes available to help needy Singaporeans, the outreach may be limited due to the eligibility criteria, which are set too low. As of March 2011, 2,942 households were on the Public Assistance scheme, with 20,300 families receiving assistance under the National ComCare programmes.³⁵ The MCYS website reports an increase in public assistance cases from 2,929 in 2010 to 3,034 in 2011.³⁶

Figures of households on public (social) assistance in 2009 show that the number of female-headed households on this scheme is steadily increasing (from 895 in 2004 to 1,002 in 2009),³⁷ and is likely to increase further with the growing³⁸ number of single women.

Do the existing schemes adequately assist all the needy in Singapore? The subsidies generally do not apply to households who earn more than \$1,500.³⁹ But households between the 1st and 3rd deciles, earning between \$1,500 and \$3,757⁴⁰ a month are also struggling to make ends meet and are unable to accumulate sufficient savings for retirement.⁴¹ Between 2001 and 2008, the household income of this group, like the 1st decile, experienced real income decline.⁴² This growing group of low-income workers may need assistance if they run into

³⁰ Bhaskaran et al, 2012, p. 22.

³¹ Ibid.

³² Department of Statistics Singapore, *Time Series on Annual GDP at Current Market Prices*, <http://www.singstat.gov.sg/stats/themes/economy/hist/gdp.html>

³³ United Nations, *Social Protection Floor Initiative*, 2010, p. 4.

³⁴ Department of Statistics Singapore, *Time Series on CPI (2009 = 100) & Inflation Rate*, <http://www.singstat.gov.sg/stats/themes/economy/hist/cpi.html>

³⁵ Ministry of Community Development Youth and Sports (MCYS), *Making the First Five Years, ComCare Annual Report 2010*, pp. 3, 19.

³⁶ MCYS, 'Number of Public Assistance Cases', <http://app1.mcys.gov.sg/ResearchRoom/ResearchStatistics/NumberofPublicAssistanceCases.aspx>

³⁷ MCYS, 'Women and poverty: Public Assistance by Gender,' <http://app1.mcys.gov.sg/ResearchRoom/ResearchStatistics/PublicAssistancebyGender.aspx>

³⁸ In 2010, the percentage of women who were divorced or separated rose to 4.2%, while widowed persons accounted for 5.1% of the resident population in 2011 (Department of Statistics Singapore, *Population Trends 2011*).

³⁹ 'Community Development Council', http://www.cdc.org.sg/index.php?option=com_content&view=article&id=7&Itemid=18

⁴⁰ Department of Statistics Singapore, *Key Household Income Trends 2010*, p. 4.

⁴¹ Bhaskaran et al., 2012, p. 10.

⁴² Bhaskaran et al., 2012, p. 2.

difficulties, even if they are not the poorest of the poor. But they often find that they are not eligible for existing help schemes as their pay is above the income qualifying line.⁴³

Others who also find it tough to access these help schemes are the singles, including the unwed, divorced and widowed.⁴⁴ Another category of vulnerable women who are excluded from such assistance are the foreign wives of Singaporean men, who have not been granted permanent residency and are completely dependent on their husbands. These women are particularly vulnerable, as they often have no appropriate visas that allow them to find work easily and to earn their own income, no social network to rely on, and are sometimes hindered by language barriers.

The Workfare Income Supplement (WIS) provides bi-annual additional income to an individual earning less than \$1,700 a month. However, the WIS may not adequately provide sufficient support for immediate needs, as the cash portion of the subsidy is less than half of the amount paid to the person's CPF account.⁴⁵

AWARE's recommendations on comprehensive support of lower income and vulnerable groups

1. Public spending on social programmes should be restored to the pre-1990 level of around 20% of GDP and should gradually increase in the next few years to around 25% as the population ages. Given that there may be a surplus of between 3 - 5 billion dollars for 2011, this is an excellent time for the Government to increase its spending on social programmes.⁴⁶
2. Eligibility criteria for ComCare and Public Assistance should be revised upwards to include household incomes of more than \$1,500 per month up to the 30th percentile.
3. Financial assistance should take the inflation rate into account and should be adjusted annually.
4. Financial assistance and other social support currently available to Singaporean women should be made available to the foreign wives of Singaporeans when they are in distress as they are without any other form of support or safety net, apart from their own husbands.
5. Payouts of the Workfare Income Supplement (WIS) should be divided equally between cash and CPF to meet the immediate needs of those in financial distress.
6. Increase the amount of WIS to take into account the impact of inflation.
7. Increase the maximum qualifying average monthly income to include those up to the 30th percentile.
8. With reference to the ILO-UN Social Protection Floor Initiative, a comprehensive approach to national social security strategy should be designed, based on a diagnosis of priority needs. This would help Singapore to balance its increasingly advanced economic development with the amelioration of the negative effects of widening income inequality.

⁴³ Ong, 2011.

⁴⁴ Wee, no date, p. 2.

⁴⁵ 'Workfare Income Development Scheme,' http://mycpf.cpf.gov.sg/Members/Gen-Info/WIS/WIS_Scheme

⁴⁶ Low, 2012.

C. Widened access to subsidies for infant care and childcare

The Ministry of Community Development Youth and Sports (MCYS) has provided many schemes and incentives to support parenthood and child development. However, these schemes exclude single mothers and are less accessible to stay-at-home mothers than for working mothers.⁴⁷

There are about 2000 teenage pregnancies a year.⁴⁸ While some pregnant teenagers may choose to abort, others give birth and become young, often unmarried, mothers. It is estimated that some 500 children are registered without their fathers' names each year.⁴⁹ Though usually in great financial need, these young unwed mothers receive no financial support from the government and are excluded from most baby benefits, thereby exacerbating the possibility of them and their children falling into a downward spiraling poverty trap.⁵⁰

AWARE is heartened by the Government's push to encourage the setting up of childcare centers near either parent's workplace. At the moment, only 35 of over 900 childcare centres are in or near workplaces⁵¹. Such workplace solutions will help employees to balance work and family life. Singapore currently has the longest working hours in the world⁵² and employers are still slow to introduce measures at the workplace to help employees achieve a balance between work and family life.

The labour force participation rate of women in Singapore was only 56.5% in 2010, compared to 76.5% for men.⁵³ This rate is well behind that of China, Thailand and Sweden and is due to the persisting deficit in support given for women to be as economically active as men. For example, parents' need for affordable and adequate infant care centres is still insufficiently met.

An MCYS survey in 2009 showed that fathers were not as involved as mothers in the lives of their children, despite 99% of all respondents stating that they feel that parenting responsibilities should be shared equally between men and women. To achieve gender-equitable parenting, there is a need to change the limited stereotype of fatherhood, based on an equally limited stereotype of how men should behave, as well as to put in place policies and measures to encourage and support active parenting by men.⁵⁴

⁴⁷ It is acknowledged by the Government that stay-at-home mothers receive considerably less subsidies for infant care and childcare, compared to working mothers, although justifications have been given for the disparity, <http://appl.mcys.gov.sg/PressRoom/Subsidiesprovidedforstayathomemothers.aspx>

⁴⁸ 'Remarks by Dr Ng Eng Hen, Minister for Education and Second Minister for Defence on Sexuality Education Programmes in School,' <http://www.moe.gov.sg/media/speeches/2009/05/21/remarks-by-dr-ng-eng-hen-on-se.php>

⁴⁹ Tan, 2007.

⁵⁰ Wee, no date, p. 2.

⁵¹ Ong, 2012.

⁵² International Labour Organisation, 2009, p. 6.

⁵³ Ministry of Manpower, *Report on Labour Force in Singapore 2010*, p. T2.

⁵⁴ MCYS Singapore Fatherhood Public Perception Survey 2009 – survey of 2,200 men.

AWARE's recommendations on widened access to subsidies for infant care and childcare

1. Access to childcare subsidies, motherhood benefits and housing benefits should be widened to include all mothers, without discrimination against unwed mothers or stay-at-home mothers.
2. More childcare facilities at workplaces should be promoted.
3. Infant care should be expanded and made more affordable.
4. A high quality of childcare services should be assured to encourage mothers to return to work.
5. Flexible working arrangements should be promoted by providing more effective incentives to employers to introduce such measures.
6. Paid paternity leave of two weeks should be made mandatory.
7. Single fathers with dependent children should qualify for the same tax relief on the levy paid by employers of foreign domestic workers, a perk currently enjoyed by mothers only.
8. One month of the current four-month maternity leave should be converted to parental leave to be taken by either spouse.⁵⁵
9. Active parenting by men should be promoted and misinformed stereotypes of fatherhood and manhood should be dispelled.

D. Enabling persons with disabilities to be equal members of an inclusive society

Persons with disabilities are estimated as comprising about 4% of the population, including those with physical impairment, visual impairment, hearing impairment and intellectual impairment.⁵⁶ However, a MCYS paper notes the current lack of reliable statistics on the prevalence of disability in Singapore, as the Central Registry of Disabled Persons was closed in 1987 and was, in any case, only a register of users of disability services, rather than a full register of persons with disabilities. There are currently only estimates based on extrapolations from disability prevalence rates of other countries as proxies or surveys of selected age groups, especially those below six years of age.⁵⁷

The need to compile data on the prevalence of disability is urgent, since the proportion of the disabled in the population will increase, given the growing number of the elderly who are becoming semi-ambulant or non-ambulant⁵⁸ or are stricken by other disabilities. Research shows that in 1997, more than half of those aged 60 and above suffered from a disability, with disability increasing with age.⁵⁹ Women aged 65 and above are becoming disabled at

⁵⁵ AWARE Survey on Parenting Leave in Singapore, February 2011.

⁵⁶ 'Singapore Disability Sports Council Overview,' <http://www.sdsc.org.sg/who-we-are/overview.html>

⁵⁷ MCYS, 'Definition of Disability and Prevalence Rate of Persons with Disabilities in Singapore', app1.mcys.gov.sg/Portals/0/Files/EM_Chapter1.pdf

⁵⁸ Older people are considered 'semi-ambulant' if they need some assistance such as walking aids to help them move about. Those who are 'non-ambulant' are the least physically mobile, and are mostly bed bound or wheelchair-dependent.

⁵⁹ Yadav, 2001, p. 362.

double the rate of men, with twice as many semi-ambulant and non-ambulant females as there are semi-ambulant / non-ambulant males.⁶⁰ A majority of women aged 75 and over suffered from a disability of their legs.⁶¹

In 2011, only 220 disabled persons under 60 years received public assistance ranging from \$400 to \$1,050 per month, depending on household size.⁶² The Centre of Enabled living also has funds to assist families with a disabled family member. However, these funds are only available for families whose monthly household income stands at \$1,300 or less.⁶³ Disabled people in families with slightly higher household incomes but who are still poor are thus not supported at all.

The policy emphasis on families as the first line of care and support for persons with disabilities needs to take current realities into consideration. Significant proportions of the semi-ambulant and non-ambulant elderly live alone, without spouses or children. Among the semi-ambulant elderly, 5% of the men and 6% of the women do so, while 3% of the non-ambulant (male and female) live apart from their families.⁶⁴

While people with disabilities who are able to work are encouraged to do so, training grants to upgrade the skills of a disabled worker are limited only to those whose household monthly income is \$700 or less.⁶⁵ The Open Door Fund (ODF) provides a grant of up to S\$100,000 per company to encourage employers to hire persons with disabilities by supporting them in job redesign and the modification of the physical workspace. A network of pro-disability employers, the Enabling Employers Network, was set up in 2007 to promote employment of persons with disabilities in various sectors.

While AWARE welcomes the Government's Enabling Masterplan 2012- 2016 to review and chart services and programmes in the disability sector,⁶⁶ the Government should consider acceding to the Convention on the Rights of Persons with Disabilities and its Optional Protocol, with particular attention given to the needs of women and girls with disabilities.⁶⁷

While some money has been spent to make public transportation more accessible to the mobile persons with disabilities,⁶⁸ public transportation does not address the needs of the non-ambulant, who are thus compelled to take taxis at a much higher cost.

⁶⁰ AWARE and TSAO Foundation for Successful Ageing, 2005, p. 9.

⁶¹ Yadav, 2001, p. 363.

⁶² MCYS 'Number of Public Assistance Cases by Category', <http://app1.mcys.gov.sg/Assistance/PublicAssistancePAScheme.aspx>

⁶³ 'Centre for Enabled Living Schemes Overview,' www.cel.sg/Schemes_Overview.aspx

⁶⁴ AWARE and Tsao Foundation for Successful Ageing, 2005, p. 9.

⁶⁵ See, for example, the Microsoft Unlimited Potential Professional Training Grant.

⁶⁶ Ong, 2011.

⁶⁷ United Nations, 'Convention on the Rights of Persons with Disabilities,' <http://www.un.org/disabilities/default.asp?id=150>.

⁶⁸ Almenoar, 2011.

AWARE's recommendations on enabling persons with disabilities to be equal members of an inclusive society

1. The Government should provide free or subsidized medical benefits for persons with disability – including, for example, financial support for the cost of rehabilitation, medicines, treatment and health insurance.
2. Infrastructural and vehicular improvements should be made to meet the transportation needs of all persons with disabilities for whom existing buses and trains are not a viable option.
3. The Government should provide public transport subsidies or concessions for the disabled.
4. Direct financial assistance should be provided to all persons with disabilities, rather than to families who may not necessarily be their care-givers.
5. Housing grants should be given for persons with disabilities who choose to live independently.
6. A caregiver grant should also be given to the disabled carer of another disabled person, such as a semi-ambulant person looking after a non-ambulant person.
7. Measures to protect women and girls with disabilities from all forms of violence at home and in the community should be promoted in all institutions, services and programmes.
8. The effectiveness of the Open Door Fund grants should be monitored so as to increase the number of companies willing to hire persons with disabilities.

E. Publicly available database of vulnerable groups in Singapore society

There is a serious lack of publicly available data about vulnerable groups in Singapore. Such data need to be sufficiently detailed, consistent, regularly updated and disaggregated by sex, age and citizenship. Without such data, it is difficult to assess the needs of different groups in society, to analyse changing social dynamics and to see if priority needs are adequately met.

With reference to the ILO-UN Social Protection Floor Initiative, a comprehensive approach to national social security strategy can be designed only on the basis of a comprehensive database of vulnerable groups and a diagnosis of priority needs. This will help to ensure that no one in Singapore falls through the cracks through having needs unmet.

AWARE's recommendations on a publicly available database of vulnerable groups in Singapore society

1. Research resources with scientific support should be mobilised to collect data of vulnerable groups in Singapore, so as to provide data that is sufficiently detailed, consistent, regularly updated and disaggregated by sex, age and citizenship.
2. Data on the prevalence rate of disability in Singapore should be collected and analysed systematically, with a periodic review of the definition of 'disability' to ensure ongoing relevance.

3. Data should specify the degree to which the health and well-being of different sectors of the population are being compromised, including their exposures to risk factors, as well as an assessment of whether their needs are adequately met by current provisions.
4. Analysis of the disaggregated data should be undertaken at regular intervals to monitor situational dynamics and to make policy adjustments to meet changing needs.
5. This database of vulnerable groups should be made available to the public, together with clear documentation of budget allocations to the different groups.

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