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# Social Policy Country Briefs

Singapore



Linh Truong

## The Long-Term Care System in Singapore



Global Dynamics  
of Social Policy CRC 1342



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# THE LONG-TERM CARE SYSTEM IN SINGAPORE

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## 1. COUNTRY OVERVIEW



Source: OnTheWorldMap.com

- » Sub-Region : South-eastern Asia
- » Capital: Singapore
- » Official Language(s): Malay, Chinese, Tamil, and English
- » Population size: 5.7 million (World Bank 2019)
- » Share of the rural population: N/A
- » Gross domestic product: 373.217 million USD (World Bank 2019)
- » Income group : High income (World Bank 2019)
- » Gini Index: N/A
- » Colonial period and independence (if applicable): Great Britain (1867 – 1942; 1945 – 1954); Japan (1942 – 1945) (Lepoer et al. 1991)

## 2. LONG-TERM CARE DEPENDENCY

### a. Population statistics

**Table 1.** Older population in Singapore

|                | Total number | Share of total population |
|----------------|--------------|---------------------------|
| Population 60+ | 800.000      | 14%                       |
| Population 70+ | 289.000      | 5.1%                      |
| Population 80+ | 135.000      | 2.4%                      |

Sources: United Nations 2019a and 2019b, data refers to 2020

## b. National definition and measurement of long-term care dependency

According to Chin and Phua (2016), long-term care means several and different services provided to the senior citizens who suffer from chronic diseases or other disabilities, offered in care facilities such as nursing homes. A person is severely disabled when he/she cannot perform the activities as follows: self-washing in the shower or other circumstances, self-dressing, self-feeding, going to the restroom, walking, etc. (CareShield Life and Long-Term Care Bill 2019).

### 3. FIRST PUBLIC SCHEME ON LONG-TERM CARE

#### a. Legal introduction

Name and type of law:

Central Provident Fund (Withdrawals for EldersShield Scheme) Regulations 2002

The date the law was passed:

30.09.2002

Date of *de jure* implementation:

30.09.2002

Brief summary of content:

The ElderShield Insurance scheme was introduced to help severely disabled citizens in terms of an expense coverage.

#### b. Characteristics of the long-term care scheme at introduction

The insurance program ElderShield was introduced in 2002 through government regulation. It is designed for Singapore citizens who suffer from severe disabilities from the age of 40. Premiums for ElderShield are taken from Medisave accounts – a personal saving account for healthcare matters with the contributions from employers and employees. The beneficiaries of this program are provided 300 Singapore Dollars (approximately 184 Euros) per month for a maximum of five years to pay for their care services, whether it is home-care by family members, personal caretakers, or care at residential facilities by voluntary welfare organizations. (Teo et al. 2003; Chia et al. 2008; Chin & Phua 2016)

### 4. SUBSEQUENT MAJOR REFORMS IN LONG-TERM CARE

No major reforms have taken place since the introduction of the ElderShield insurance scheme in 2002. However, there is the CareShield Life and Long-Term Care Bill introduced in 2019 to incorporate the ElderShield scheme into a legal document (CareShield Life and Long-Term Care Bill 2019).

### 5. DESCRIPTION OF THE CURRENT LONG-TERM CARE SYSTEM

#### a. Organizational structure

There are several cash-based long-term care programs for the people to choose from, namely, ElderShield, CareShield Life, Medisave Care, Elderfund, Interim Disability Assistance Programme for the Elderly or Pioneer Generation Disability Assistance Scheme, etc. (Chia et al. 2008; Chin & Phua 2016; Ministry of Health of Singapore 2020; Agency for Integrated Care 2020). Each of these programs has a different set of eligibility criteria for its beneficiaries. The long-term care system in Singapore is independent of the healthcare system, although both are under the supervision of the Ministry of Health, Ministry of Manpower and the Central Provident Fund

Board (Central Provident Fund (Withdrawals for EldersShield Scheme) Regulations 2002 & CareShield Life and Long-Term Care Bill 2019).

#### b. Service provision

The service provision of the long-term care sector is organized either formally or informally depending on the needs of the beneficiaries and their families themselves. They have the option to hire foreign care-takers, have services provided directly by family members or by voluntary welfare organizations in nursing homes or other residential facilities, etc. (Chia et al. 2008; Chin & Phua 2016).

#### c. Financing

The financing sources for long-term care in Singapore composed of financial support from the government through subsidies, community support, insurance premiums which are funded via private insurers (Aviva, Great Eastern, and Income) or personal savings (Ministry of Health of Singapore 2020; Chia et al. 2008; Chin & Phua 2016).

#### d. Regulation

The long-term care system in Singapore is regulated by the government. Each long-term care program has different eligibility requirements for its participants. The long-term care benefits in Singapore are usually in cash form and can be spent freely by the benefit recipients (Chin et al. 2008, Ministry of Health of Singapore 2020).

### 6. LIST OF ADDITIONAL RELEVANT LAWS

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