

---

Title	Women and health issues in Singapore
Author(s)	Agnes Chang Shook Cheong
Source	49 <sup>th</sup> Annual Convention of the International Council of Psychologists, 11 – 15 August 1991, San Francisco, USA

---

Copyright © 1991 The Author

This document may be used for private study or research purpose only. This document or any part of it may not be duplicated and/or distributed without permission of the copyright owner.

The Singapore Copyright Act applies to the use of this document.

Citation: Chang, A. S. C. (1991, August). *Women and health issues in Singapore*. Paper presented at the 49<sup>th</sup> Annual Convention of the International Council of Psychologists, San Francisco, USA.

This document was archived with permission from the copyright holder.

ep 325  
aanb 81

WOMEN AND HEALTH ISSUES IN SINGAPORE

Agnes Chang Shook Cheong

Paper presented at the  
49th Annual Convention of the  
International Council of Psychologists  
held in San Francisco, USA from August 11-15, 1991

49th ANNUAL CONVENTION  
INTERNATIONAL COUNCIL OF PSYCHOLOGISTS  
SAN FRANCISCO, USA  
August 11-15, 1991

WOMEN AND HEALTH ISSUES IN SINGAPORE

Agnes Chang Shook Cheong  
National Institute of Education  
Nanyang Technological University  
Singapore

In its 26 years of independence, Singapore has achieved much progress in its trade and industry. Parallel to this quantum leap in our trade and industry is the Government's push for better health services. As its citizens are the only natural resource Singapore has, it is imperative for Singapore to ensure that its people are healthy. It is the long-term objective of the Government to make Singapore into a regional health centre.

WOMEN IN THE LABOUR FORCE

As the ratio of males and females in Singapore is approximately 1:1, the percentage of women in the labour force is also exceptionally high for a developing country. In 1980, 44.3% of women were actively engaged in the labour force. As more women become better educated, the female work force also swells steadily over the last ten years. In the 1990 census, it was reported that 50.3% of the female population are working (Fig. 1). Women employees in government service, statutory boards and more established private firms enjoy medical schemes which cover personal illnesses, accidents, maternity care and dental care. Unlike their male counterparts, the medical schemes are not extended to the immediate members of the family of women, except for single mothers.

LIFE EXPECTANCY

The life expectancy of Singapore citizens is generally comparable to those in the developed countries. For women, our life expectancy is 76.5 years while men's life expectancy is 71.9 (Ministry of Health 1989 Statistics, Table 1). The large amount of funds channelled into Preventive Medicine is bearing fruit.

FALLING FERTILITY

The Antenatal Care, Domiciliary After Care (DAC) Service, Well Women Clinic, Family Planning and Health Education are well established in Singapore and are well-publicized by the Ministry of Health.

Pregnant women generally avail themselves to the Antenatal Care and hence the mortality rate is very low for the last few years. There is only 0.1 still birth out of every 1,000 life-

births (Table 2). Mothers-to-be are advised carefully on food, exercise, breast-feeding, bottle-feeding and general childcare.

As more women are working, the average marriage age of women has also inevitably gone up. The stress and demands in working life have also made their toll on the total fertility rate. Birth rates have gone down steadily from 1983 to 1987 (Tables 3 & 4). The government is alarmed and incentives in the form of tax rebates are offered to women to have more children. There is also the trend of graduate men "marrying down" to women who are less qualified than they are. In 1990, it was found that 25% of female graduates are staying single. Graduate women are also marrying later, resulting in smaller family size (Table 4). Statistics show that the Government efforts are bearing fruit and the birth rate is steadily climbing up again. The Government is also playing cupid in setting up the Social Development Unit whose duty is to create opportunities for Graduate singles to meet and interact. Fertility clinics are also set up in Private as well as Government Hospitals. These clinics carry out research on helping childless couples to have their own children.

#### MAJOR CAUSES OF DEATHS

In recent years, deaths from heart attacks and cancer top the chart on death causes in Singapore (Table 5). As society becomes more affluent and life more hectic, people also consume more animal fat in their diet. Fat-rich and meat-rich diets are linked to heart problems, some types of cancer and cerebrovascular illnesses. There is evidence that there is a steady increase in Singapore women suffering from Breast and Cervical cancer. Campaigns have been launched yearly to advise women to do self-examination on breast cancer and to take the Pap Smear regularly. High blood pressure and diabetes are also on the increase among women. The Well Women Clinic is set up to take care of screening women for cancers of the cervix and breasts and for high blood pressure and diabetes mellitus.

#### SMOKING

As smoking is linked to lung cancer, the Singapore Government has taken steps to discourage smoking among its citizens and ban smoking in most public places. Educating smokers on the dangers of smoking to their health and the people living and working with them helps to alert smokers to their responsibilities to self and their loved ones. Women smokers seem to belong mainly to two camps: those with little education and those with tertiary education (Table 7).

#### ABORTION AND FAMILY PLANNING

Singapore is one country where abortion is legal. Though abortion costs only S\$5 in Government Institution, more women seek for treatment at private institutions (Table 8). Women are advised to seek advice from their doctors and the Maternal and Child Health Clinics on contraception. In Government Institutions, women seeking abortions are always counselled and

the risks explained before the treatment.

### STRESS

Many working mothers are finding it hard to balance their roles as mother, wife and responsible employee. There are constant reminders to mothers that they need to spend quality time with their children. To get ahead with their careers, women also have to spend long hours at work to prove their commitment. This has brought on stress, anxiety and guilt to a number of working mothers. Figures on these stressed women are not available. However talks on stress management are extremely popular with the professionals, administrators and executives. It may be a coincidence, but the number of divorce cases among women has also gone up from 2909 in 1989 to 3634 in 1990.

### CONCLUSION

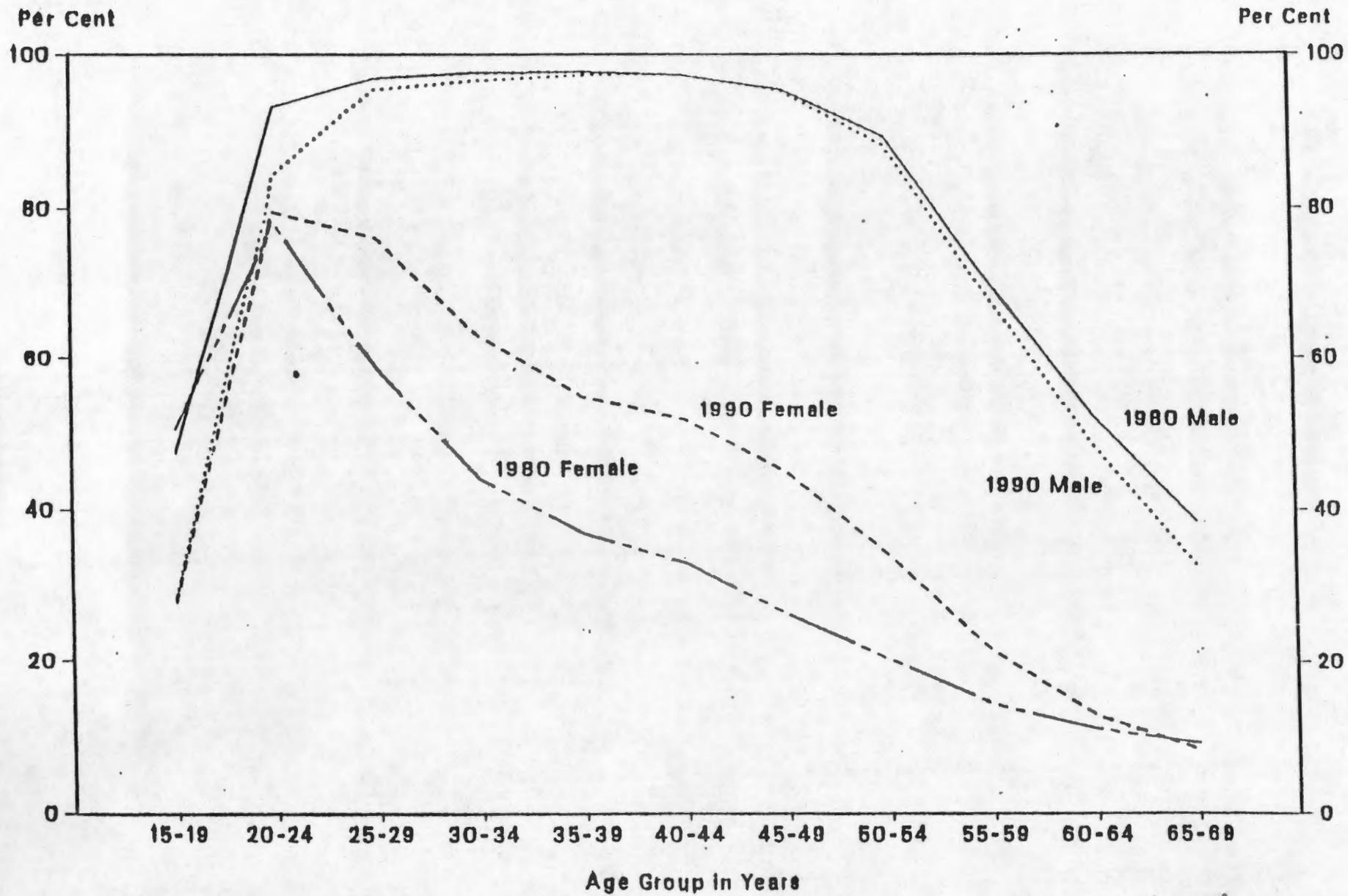
Singapore women enjoy good health services and reasonable health schemes are offered to working women. Occupational and family demands amidst social changes have created conflicts and stress to a number of career women. The increasing incidence of breast and cervical cancer is causing some concern. Putting women on the alert through campaigns and health education hopefully will help in early detection and treatment. Education on wise eating habits will help to reverse the trend on deaths from heart and cerebrovascular diseases. The Fertility problem has shown positive signs of reversal. The signals are there that we can lick the problems facing the women in Singapore. Aids is not a problem with local women. Women affected with Aids are those in the pleasure trade and usually from neighbouring countries.

### REFERENCES

- 1 Year book of Statistics, Singapore, 1990. Singapore: Department of Statistics.
- 2 Ministry of Health Annual Report 1988. Singapore: Ministry of Health.
- 3 Report of Registration of Births and Deaths 1990. Singapore: Registration of Births and Deaths.
- 4 Fourth National Survey on Family Planning and Population in Singapore 1987.
- 5 Enmanuel, S.C; Phe, A and Chen, A.J. (1988). The impact of the Anti-Smoking Campaign in Singapore, Singapore Medical Journal, 29, pp 233-239.

CHART I

AGE-SEX SPECIFIC LABOUR FORCE PARTICIPATION RATES, 1980 AND 1990



**Table 1**  
**LIFE EXPECTANCY AT BIRTH (YEARS)**  
**1988 - 1989**

Year	All	Men	Women
1988	73.9	71.6	76.2
1989	74.2	71.9	76.5

Source: Research and Evaluation Department, MOH

**Table 2**  
**MATERNALITY MORTALITY RATE**  
**1988-1990**

Year	Rate per 1,000 Live-Births and Still Births
1988	0.1
1989	0.1
1990	0.1

Source: Report of Registration of Births and Deaths 1988

**Table 3**  
**TOTAL FERTILITY RATES**  
**1980 - 1990**

Year	Rate per 1,000 Female Population
1980	1,737
1981	1,723
1982	1,706
1983	1,589
1984	1,609
1985	1,619
1986	1,445
1987	1,636
1988	1,980
1989	1,788
1990*	1,827

Source: Yearbook of Statistics Singapore, 1990

\* The 1990 rates refer to resident live-births per thousand resident female population

**Table 4**  
**AVERAGE FAMILY SIZE OF MARRIED WOMEN BY EDUCATION**  
**1973 - 1987**

Education Attained	Year			
	1973	1977	1982	1987
<b>Total</b>	<b>3.4</b>	<b>2.8</b>	<b>2.2</b>	<b>2.0</b>
No formal education/Completed some primary education	4.5	4.0	3.4	2.7
Completed primary education/some secondary education	3.1	2.9	2.5	2.1
Completed secondary education	1.9	1.9	1.7	1.8
Completed post-secondary education	-	-	-	1.6
Completed tertiary education	1.7	1.7	1.4	1.2

Source: Fourth National Survey on Family Planning and Population in Singapore, 1987

/RE PC85 (RATE.T4)

**Table 5**  
**MAJOR CAUSES OF DEATH, 1989**

Cause of Death	Rate per 100,000 population		
	Men	Women	Total
<b>Total</b>	<b>581</b>	<b>464</b>	<b>524</b>
Ischaemic & other heart disease	140	107	124
Cancer	144	99	122
Cerebrovascular disease	52	63	58
Pneumonia	40	45	42
Injuries	53	24	39

Source: National Registration Department

/RE PC85 (RATE.T5)

**Table 6**  
**DEATHS FROM CANCERS**  
**WHICH ARE AMENABLE TO EARLY DETECTION**  
**AND TREATMENT AMONG WOMEN**  
**IN 1985 - 1988**

Year	Breast Cancer	Cervical Cancer
1985	157	67
1986	158	92
1987	178	77
1988	170	97

/RE PC85 (RATE.T6)

**Table 7**  
**SMOKING RATE BY EDUCATIONAL LEVEL**  
**1984 AND 1987**

Educational Level	ALL		MEN		WOMEN	
	1984	1987	1984	1987	1984	1987
Never Attended School	21.2	15.3	52.8	38.4	8.6	5.6
Didn't Complete Primary School	27.8	20.4	48.8	37.0	3.7	2.2
Didn't Complete Secondary School	22.0	16.0	38.6	28.1	1.4	1.0
Completed Secondary/ Post Secondary	12.7	8.2	23.5	15.5	1.2	0.6
Completed Tertiary Education	13.8	7.3	19.7	11.4	2.8	1.2

Source: 'The Impact of the Anti-Smoking Campaign in Singapore'  
 S C Emmanuel, A Phe, A J Chen • Sing Med J. 1988; 29:233-239

Table 8

**ABORTION AND STERILIZATION STATISTICS**

	1980	1985	1986	1987	1988
Number of Abortions	18,219	23,512	23,035	21,226	20,135
Government Institutions	11,280	7,335	6,314	4,749	4,012
Private Institutions	6,939	16,177	16,721	16,477	16,123
Number of Sterilization	6,266	5,490	4,768	3,652	4,569
Male	458	257	264	128	171
Female	5,808	5,233	4,504	3,524	4,398

Source: Ministry of Health Annual Report 1988