



Singapore

Geography

Capital

Singapore

Global Positioning

South-eastern Asia, islands between Malaysia and Indonesia. Due to Singapore's strategic positioning in the sea, the islands have been described as a "focal point for Southeast Asian sea routes."

Geographical & Natural Outline

The geographical lay out of Singapore includes the main island (Singapore) as well as 63 islets within Singapore's territorial waters. Singapore is located on the Southern tip of the Malaysia. The terrain consists of low hills, and the climate shows high temperatures and humidity almost year round.¹

Major Cities/Urbanisations

N/A

¹ "Singapore Climate & Location, Singapore Map & Geography • About Singapore." Singapore Expats. Accessed November 23, 2017. <https://www.singaporeexpats.com/about-singapore/climate-and-location.htm>. Date of publication unavailable.



People & Society

Nationality

Singaporean

Ethnic Groups

Chinese 76.1%, Malay 15%, Indian 7.4%, other 1.5% (2016)

Languages

Mandarin (official) 36.3%, English (official) 29.8%, Malay (official) 11.9%, Hokkien 8.1%, Cantonese 4.1%, Tamil (official) 3.2%, Teochew 3.2%, other Indian languages 1.2%, other Chinese dialects 1.1%, other 1.1% (2010 est.)

Religions

Buddhist 33.9%, Muslim 14.3%, Taoist 11.3%, Catholic 7.1%, Hindu 5.2%, other Christian 11%, other 0.7%, none 16.4% (2010 est.).

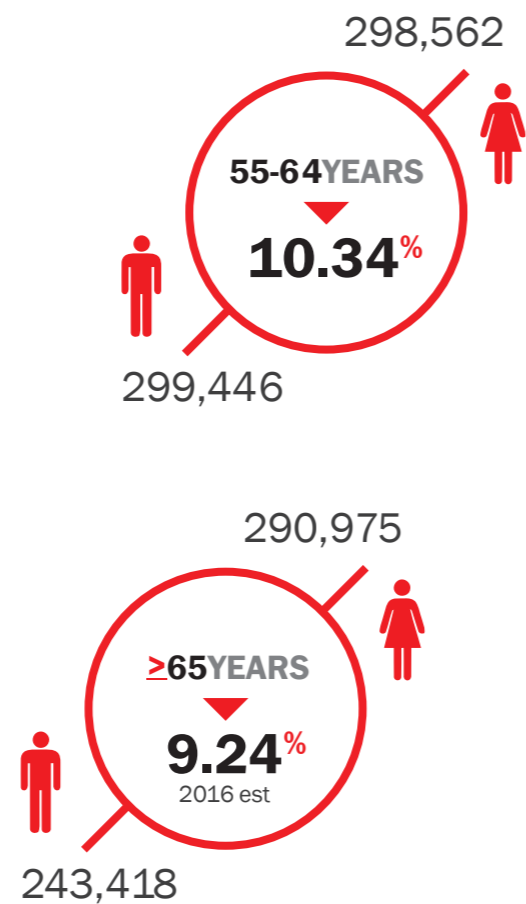
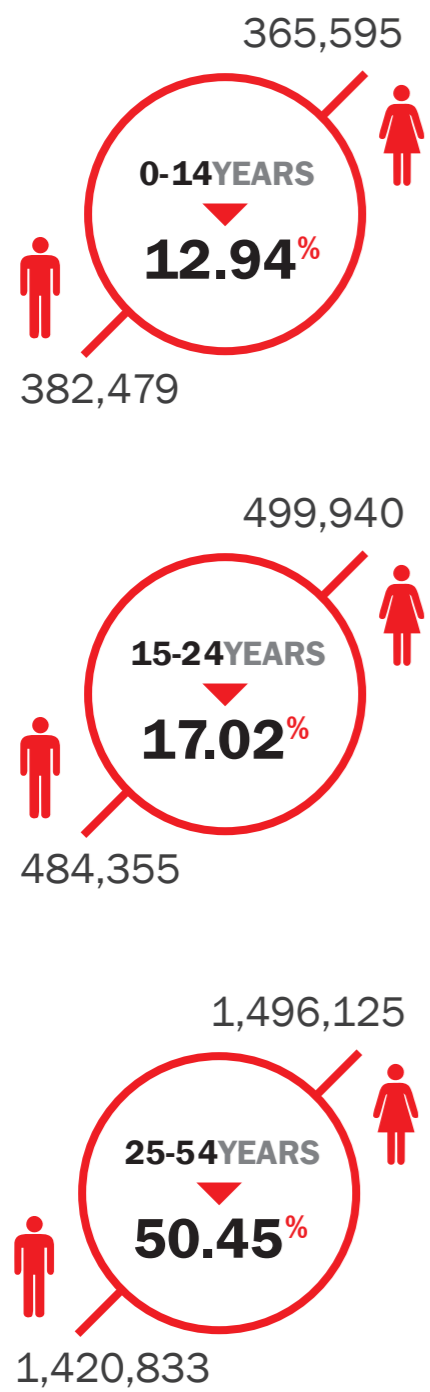
Population

5,781,728 (2016 est.)

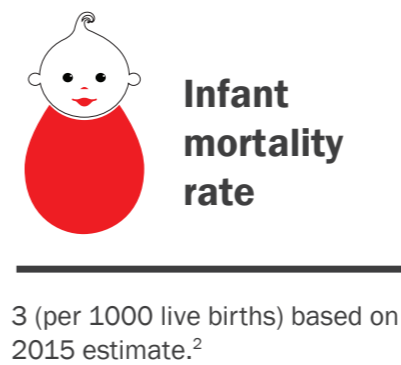
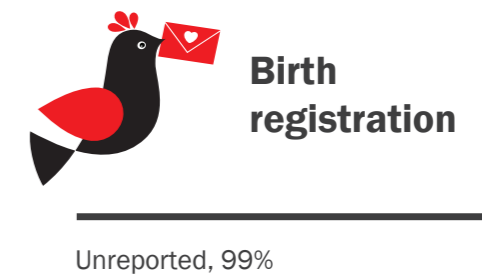
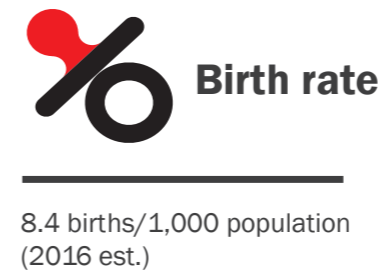
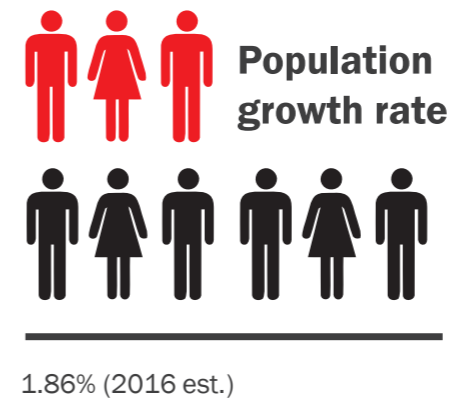


demographics

The age group of men and women throughout the years.



legend



²“Mortality rate, under-5 (per 1,000 live births).” The World Bank. Accessed January 30, 2017. <http://data.worldbank.org/indicator/SH.DYN.MORT>. Copyright 2016.

government type/political stance

Singapore gained independence from Malaysia on 9 August 1965, thus making Singapore an independent republic.³ Upon gaining independence, Singapore’s political system has been largely dominated by the People’s Action Party (PAP). Although the PAP was originally engaged in communist politics, the party has since upheld a Social Democracy, which has been described as “authoritarian, pragmatic, rational and legalistic.” Functionally, the government operates as a highly centralized system that is primarily governed by bureaucrats rather than politicians. Dedication and loyalty to the State, as well as the previously established policies of the State, are taken into deep consideration during the election/appointment process(es). Notably, most positions of political power in Singapore’s government offices can only be attained through appointment rather than election.

The role of the Parliament in government affairs is of particular importance in Singapore. Together, the President of Singapore and the Parliament comprise the Legislature. The Westminster system of parliamentary democracy is currently in place in Singapore, which requires that members of Parliament are voted into office at the General Elections. The politician (head of a political party in this case) who secures the highest number of seats in Parliament is then deemed the Prime Minister, thus allowing him to hire Ministers of his choosing from the Cabinet. Following this process, the

Parliament maintains control over the states laws, finances, and the general functionality of governing parties and Ministries. Parliament also maintains control over the Constitution, which acts as the supreme law of Singapore.

Due the single-party structure of the Singapore Government, and the longstanding political dominance of the PAP, it is likely a challenge to make changes to the State’s social welfare framework. Without the consent and full support of the PAP, changes to the legal and judicial system of Singapore cannot be made.⁴ As the PAP has maintained control over the Singapore Government since independence, the party’s political, legal, and social framework(s) of the State has become concretized, making the system near impossible to penetrate, and leaving little space for innovation or systemic shifts in the approach to government.

Executive Branch

Chief of State: President Halimah Binti Yacob (since 14 September 2017)

Head of government: Prime Minister Lee Hsien Loong (since 12 August 2004); Deputy Prime Ministers Teo Chee Hean (since 1 April 2009) and Tharman Shanmugaratnam (since 21 May 2011)

Cabinet: The Cabinet is appointed by the President on the advice of the Prime Minister. The Cabinet is responsible for government policies, as well as the monitoring of administrative affairs/duties. The Prime Minister of Singapore

acts as the head of the Cabinet, while other Ministers comprise the body of the Cabinet. Ministries under the Cabinet include, but are not limited to: the Ministry of Culture, Community and Youth, the Ministry of Social and Family Development, the Ministry of Defence, the Ministry of Education, the Ministry of Health, the Ministry of Foreign Affairs, the Ministry of Home Affairs and the Ministry of National Development.⁵

Elections/appointments: The president is directly elected by simple majority popular vote for a single 6-year term. Thou, Prime Minister Lee is in favour of reserving the next presidency for Malay candidates. The Prime Minister has released this statement based on the fact that there has not been a Malay president in five terms, which means that another non-Malay presidency would go against the mandatorily diverse model of the Singaporean political system. Sources state that the model proposed ensures minority representation in the Government, as each Presidential Election will be reserved for a minority race that has not been represented throughout the past 5 consecutive terms. While Singaporean government officials have acknowledged that Singapore is not a post-racial society, the system of government is designed to operate as “race-neutral.”⁶ The last presidential election was a walk-over as no other presidential candidate was issued the Certificate of Eligibility.⁷

Legislative Branch

The Legislative Branch is comprised of a Unicameral Parliament, with 101 seats; 89 members directly elected by popular vote, 9 nominated by the president, and up to 9 - but currently 3 - non-constituency members from opposition parties to ensure political diversity. Members serve 5-year terms.

Judicial Branch

Highest Court(s): Supreme Court (consists of the president or chief justice and 16 justices and organized into an upper tier Appeal Court and a lower tier High Court)

Judge selection and term of office:

All judges are appointed by the president. They are selected from a list of candidates recommended by the prime minister after consultation with the chief justice. It should be noted that justices are appointed for life.

Subordinate Courts:

District, magistrates’, juvenile, family, community, and coroners’ courts; small claims tribunals⁸

Is the governing party likely to change in the next election?

The PAP’s dominance over Singaporean politics has not shifted since Singapore gained independence from Malaysia in 1965, which suggests that the party is likely to continue winning general elections by a landslide. While the PAP faces opposition by the Workers’ Party, the results of the last general election

suggest that voters continue to favour the PAP. In the 2016 general election, the PAP received 69.9% of the votes. This marks a drastic increase from the previous election in 2011, wherein the PAP received 60.1 percent of the votes. The PAP also took 83 of the total 89 seats in 29 constituencies. Reports state that the sudden rise in votes for the PAP may be due to the success of recent government policies, specifically those concerning housing, that were implemented by the party during the last term. A long-standing sense of dedication and loyalty to Lee Kuan Yew, the prior secretary general of the PAP, may have also played into the results of the general election.⁹ Voters have been lenient towards the PAP since Lee Kuan Yew’s death in March of 2015.¹⁰

Despite the popularity of the PAP with Singapore’s voters, political critics and journalists have highlighted the downfalls of the party. Given the high cost of living in Singapore and relatively low (and steadily decreasing) wages, individuals/families have reported feeling stressed and unhappy under the current socio-political structure. While most opposition parties have promised an increase in wages, as well as increased education and health subsidies, the PAP continues to receive the majority of votes. Therefore, the results of the 2016 election came as a surprise to political spectators, as the opposing parties appeared to have the current interests and needs of Singapore’s lower and middle classes

in mind. With an increasing poverty rate of almost 30%, Singaporeans are reportedly fearful of the effects that a drastic change in government may have on the State’s economy. In fear of what political change may due to the State’s economic standing, voters who would normally swing to the left continue to vote for the conservative PAP, as an economic crash would drastically affect the lives of lower-middle class families.¹¹

³ “History of the Republic of Singapore.” Wikipedia. September 13, 2016. Accessed January 28, 2017. https://en.wikipedia.org/wiki/History_of_the_Republic_of_Singapore.

⁴ “Introduction to Singapore’s Political System.” Singapore’s Political System | Immigration | GuideMeSingapore – GuideMeSingapore by Hawksford. Accessed October 13, 2017. <https://www.guidemesingapore.com/business-guides/immigration/get-to-know-singapore/introduction-to-singapores-political-system>. Copyright 2008-2017.

⁵ “Introduction to Singapore’s Political System.” Singapore’s Political System. Accessed October 04, 2017. <https://www.guidemesingapore.com/business-guides/immigration/get-to-know-singapore/introduction-to-singapores-political-system>. Copyright 2008-2017.

⁶ Ming, Tom Ee. “Hiatus-triggered model ‘strikes the right balance for Singapore’.” TODAYonline. September 16, 2016. Accessed October 11, 2017. <http://www.todayonline.com/singapore/govt-will-adopt-hiatus-triggered-model-e-sure-minority-representation-presidency>.

⁷ U-Wen, Lee. “Halimah Yacob declared president-elect after walkover victory”. Channel NewsAsia. Retrieved 13 September 2017

⁸ “The World Factbook: SINGAPORE.” Central Intelligence Agency. January 12, 2017. Accessed January 28, 2017. <https://www.cia.gov/library/publications/the-world-factbook/geos/sn.html>.

⁹ Tan, Sumiko. “GE2015: PAP vote share increases to 69.9%, party wins 83 of 89 seats including WP-held Punggol East.” The Straits Times. September 12, 2015. Accessed October 04, 2017. <http://www.straitstimes.com/politics/ge2015-pap-vote-share-increases-to-699-party-wins-83-of-89-seats-including-wp-held-punggol>.

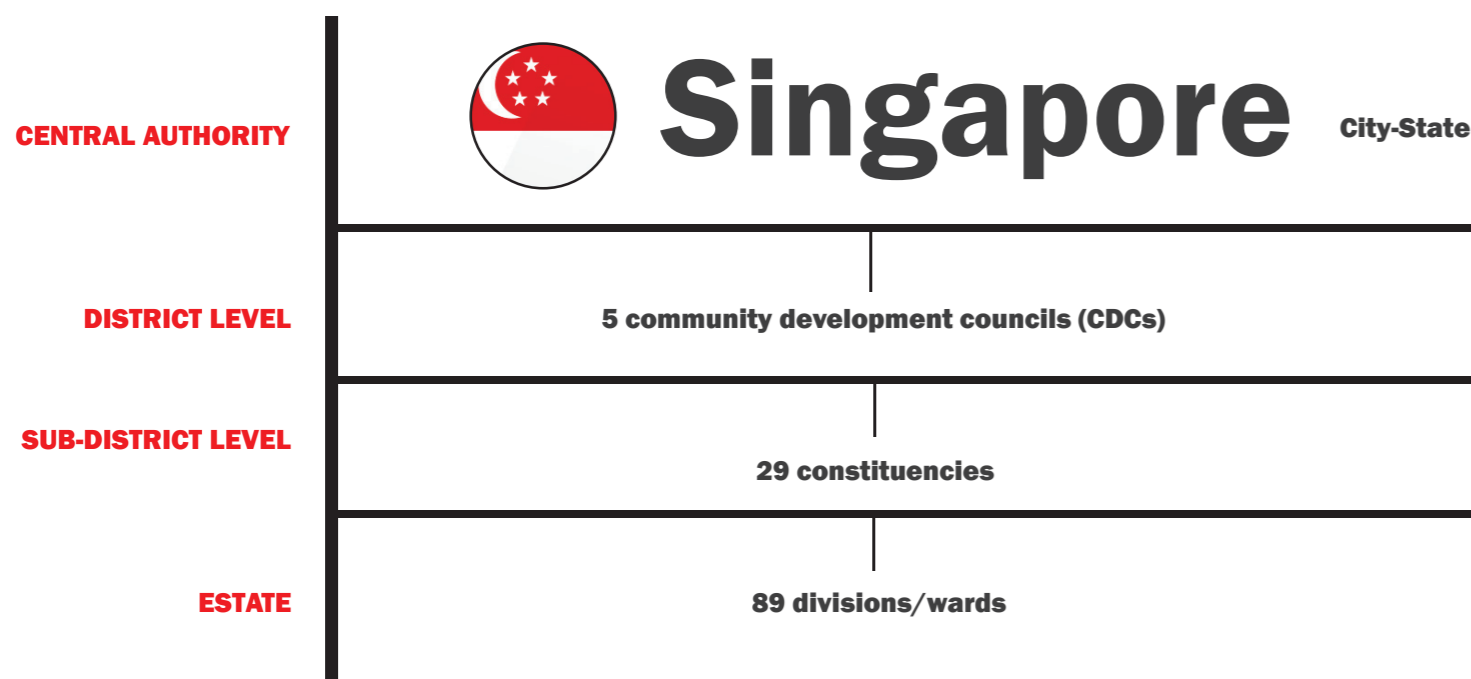
¹⁰ Ngerng, Roy. “What Happened at Singapore’s General Election 2015?” The Heart Truths. September 12, 2015. Accessed October 04, 2017. <https://thehearttruths.com/2015/09/12/what-happened-at-singapores-general-election-2015/>.

¹¹ Ibid.

administrative divisions

As a city-state, Singapore is governed under 5 different Community Development Councils; namely the North East CDC, North West CDC, South East CDC, South West CDC and Central Singapore CDC. Each district is then further divided into 29 electoral constituencies to final 89 divisions/wards.

NOTE: The electoral boundaries of Singapore are relatively fluid, and are reviewed prior to each general election.



Economy

Gross Domestic Product (GDP)
\$486.9 billion (2016 est.)

Real Growth Rate
1.7% (2016 est.)

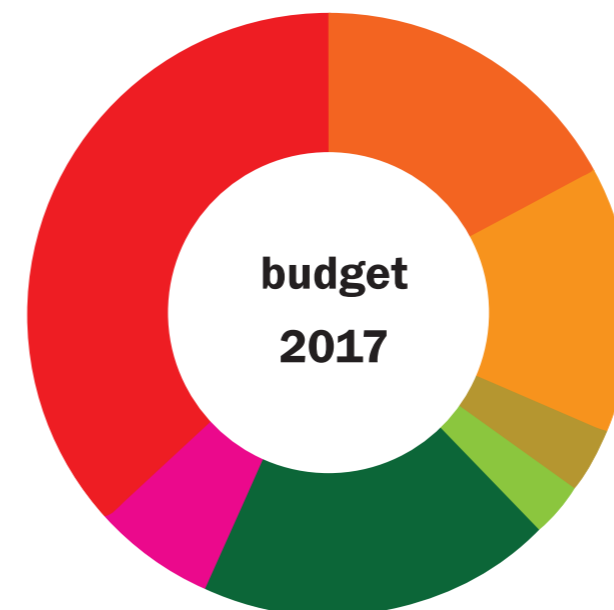
Composition by sector
na

Unemployment Rate
2.1% (2016 est.)

Population below Poverty Line

Technically, Singapore does not have an officially recognized poverty line. However, upwards of 105,000 Singapore residents have an average household income of less than SGD1,500 (approximately USD1,108¹²). Given the State's average cost of living (household expenditure), which was estimated to be approximately SGD1,250 for a four-person household in 2009, individuals and families earning under SGD1,500 would likely fall under the poverty line if the government had established one. These statistics also highlight the growing wealth gap, as Singapore has one of the highest annual incomes per person in the world at SGD\$65,000 (USD48,000).¹³

Inflation Rate (CPI)
-0.8% (2016 est.)¹⁴



- 17.2%** Education (\$12,900,000,000)
- 14.3%** Health (\$10,734,897,600)
- 3.4%** Social and Family Development (\$2,526,854,700)
- 2.9%** Culture, Community and Youth (\$2,159,786,200)
- 18.9%** Defence (\$14,206,805,500)
- 6.4%** National Development (\$4,800,385,100)
- 36.9%** Other

Budget

Singapore's Government budget (2017) is divided into four sections: Social Development, Security and External Relations, Economic Development and Government Administration. The total amount allotted for budget expenditure is SGD75,072,388,300 (USD55 billion). Large quantities of the Government budget were distributed to various ministries throughout 2017, with the Ministry of Defence and the Ministry of Education listed as the primary recipients. According to the Singapore Budget (2017), the Ministry of Defence was allotted SGD14,451,805,500 (USD11 billion), the Ministry of Education was allotted SGD12,900,000,000 (USD9.7 billion), and the Ministry of Social and Family Development was allotted a total of SGD2,526,854,700 (USD2 billion).¹⁵

Foreign aid

Information unavailable.

International debt

USD1.76 billion¹⁶

¹² Conversion calculated 12/10/2017

¹³ Chan, Robin. "The invisible poor." AsiaOne. October 27, 2013. Accessed October 12, 2017. <http://www.asiaone.com/singapore/invisible-poor>.

¹⁴ "The World Factbook: SINGAPORE." Central Intelligence Agency. January 12, 2017. Accessed January 28, 2017. <https://www.cia.gov/library/publications/the-world-factbook/geos/sn.html>.

¹⁵ Singapore. Ministry of Social and Family Development. Singapore Budget 2017. 2016/2017. Accessed October 24, 2017. http://www.singaporebudget.gov.sg/data/budget_2017/download/05%20Government%20Expenditure%202017.pdf.

¹⁶ "Why does Singapore have such a high external debt of US\$1.76 trillion?" The Online Citizen. September 15, 2016. Accessed January 28, 2017. <http://www.theonlinecitizen.com/2016/09/15/why-does-singapore-have-such-a-high-external-debt-of-us1-75-trillion/>.

social care sector

The Ministry of Social and Family Development (MSF) acts as the overarching agency for all social care matters including the welfare and protection of children and young people in Singapore. MSF oversees cross-sectoral collaboration efforts with government and non-government operated agencies, societies, and organizations in Singapore. Due to the vast array of social welfare support services made available by MSF, the Ministry is decentralized and organized into three major divisions

- 1) Social Development and Support
- 2) Family Development and Support
- 3) Corporate Support

Each division of MSF is comprised of multiple subdivisions that handle a spectrum of social welfare service provisions. The majority of family, child and youth services are carried out by subdivisions of the Social Development and Support unit. In particular, the Rehabilitation and Protection Group (RPG) one of 13 subdivisions oversees

- Adult Protective Services (APS)
- Child Protective Services (CPS)
- Children in Care Service (CIC)
- Clinical and Forensic Psychology Services (CFPS)
- Probation & Community Rehabilitation Service (PCRS)
- Youth Residential Services (YRS)

While there are numerous MSF units that provide family and child services, the RPG is responsible for establishing and maintaining the policy and delivery frameworks for child protection, child/family welfare, and management of juvenile delinquency. Being at the front line, RPG is aware of the social landscape and influence the other subdivisions on the policy development and resource allocation. Thus making the RPG a key actor in the delivery of family and child-centred support services.

MSF also oversees a network of 24 Social Service Offices (SSOs), which are designed to make social welfare/assistance more accessible to residents in need. The formation of the SSOs was initiated in 2013 as the government's efforts in bringing about integrated social service model to the communities where they are able to access social assistance within their housing estates. Services offered by SSOs include but are not limited to financial assistance, job matching and family services. Future plans include collaboration with the health sector i.e. data sharing in enabling hospitals to know whether the residents are on any assistance schemes from SSOs and provide a subsidize rate to healthcare services. SSOs can also be reached and/or located via the SSO hotline (1800-222-0000).¹⁷

MSF's family support services are carried out by community based Family Service Centres (FSCs). There are now 47 FSCs across Singapore, all of which are staffed by social service professionals. Notably, FSCs are operated by Voluntary Welfare

Organizations (VWOs) and supported by MSF, the National Council of Social Service (NCSS) and the Singapore Totalisator Board. FSCs also work alongside with SSOs. All families and individuals can seek support and/or assistance from FSCs, although the FSCs are primarily made available for low-income families/individuals. Services such as casework, group work and community work are offered by the FSCs.¹⁸

In order to provide the best available support to children in need, MSF has designed a framework for assessing the needs of vulnerable or "at risk" children. According to MSF's system, children who have experienced extreme neglect, sexual abuse, or severe injury require statutory child protection intervention. Children who have experienced parental neglect, inappropriate discipline, or limited access to medical care are seen as children in need of specialized community-based child protection. Finally, children who are in situations of "high family stress" (economic, emotional or otherwise) are categorized as being in need of community based care services. Because children in different contexts require attention and care that is specific to their situation(s), there are agencies designed to handle each of the aforementioned categories of special protection needs.

The Child Protective Services (CPS) of MSF is responsible for investigation and intervention in cases where child abuse or neglect is suspected. CPS is also responsible for locating or determining an alternative care placement as well as care plan for children and young



people in need of special protection as well as recommending the support services needed for the family. The "high risk" cases are taken up by the CPS¹⁹ intervention teams while "moderate – low risk" cases are referred to other child care/social support agencies based on the report compiled by CPS. Therefore, children in need of statutory child protection receive assistance through CPS via designated programmes/ services enlisted by MSF.

Less severe cases of children in need i.e. categorized as "moderate-low risk" are assisted via community-based protection intervention programmes and connected to either one of the two

Community-Based Child Protection Specialist Centres (CPSCs) or a Family Violence Specialist Centre (FVSC). For low-risk cases, the children and families are referred to community agencies i.e. FSCs near their housing estate.²⁰ The process through which CPS determine a child's need for alternative care requires the involvement of the Child Abuse Protection Team (CAPT). CAPT is responsible for reviewing the child's case and determining whether or not the child is indeed in danger or at risk. Once a decision is made by CAPT, a care plan is drawn up by the team. The permanency planning component of care provision is then handled by the Child Abuse Review Team (CART), which may include a more in depth assessment of the child's need for an Out of Home Placement (OHC) care programme. In all cases where child abuse, neglect or other circumstances of family stress arise, CPS makes an effort to work with the family/perpetrator in order to arrange a suitable rehabilitation or therapy programme based on the person's needs.²¹

¹⁷ "Divorce Support." Ministry of Social and Family Development. December 20, 2016. Accessed October 12, 2017. <https://www.msf.gov.sg/Divorce-Support/Divorce-Support/Support-Services/Pages/Social-Services.aspx>.

¹⁸ "Family Service Centres." Ministry of Social and Family Development. December 20, 2016. Accessed October 12, 2017. <https://www.msf.gov.sg/policies/Strong-and-Stable-Families/Supporting-Families/Pages/Family-Service-Centres.aspx>.

¹⁹ "Protecting Children in Singapore." Ministry of Social and Family Development. 7. June 2016. Accessed January 30, 2017. <https://www.msf.gov.sg/publications/Pages/Protecting-Children-in-Singapore.aspx>.

²⁰ Ibid. 10.

²¹ Ibid. 12.

institutional care

Home for Children and Young Persons / Voluntary Children's Home (VCHs) / Juvenile Rehabilitation Centre (JRC) / Place of Detention / Place of Safety, Place of Temporary Care & Protection, Remand Home

The operation and development of all institutional care facilities in Singapore is overseen by MSF. Matters concerning VWO licensing, resource allocation and funding also sit within MSF's purview. As MSF is responsible for policy development and implementation in areas concerning family and child welfare/protection, MSF and related subdivisions of the Ministry maintain control over most of the institutional care sector. With such grip, VWOs generally co-run residential and institutional care centres.

Under MSF's terminology, the main institutional care facilities are referred to as Home for Children and Young Persons (or commonly known as Voluntary Children's Homes (VCHs)). According to MSF's criteria for admission into the Homes, residential and/or institutional care is made available to children/youth from dysfunctional families, children/youth in need of shelter, children/youth who have been abused or experienced neglect in their homes, children/youth in need of special protection and care, children/youth who have been or are currently in conflict with the law, and children/youth who are deemed to be beyond parental control. There are currently 21 VCHs in Singapore, some of which accept both boys and girls, while others are all-girls or all-boys. Age restrictions and special circumstances/needs are also taken into account by Child and Youth Welfare

Homes. Therefore, MSF and supporting VWOs established residential care facilities that are specifically for the listed vulnerable children and youth – respectively.²²

In order to offer residential care placement that can address the needs of children with more challenging behaviour, MSF have laid plans to establish four new Small Group Homes (SGHs). These SGHs will maintain a smaller care ratio, and staff will reportedly be highly trained to care for children in special circumstances and children who have been subjected to particularly traumatic experiences. They will cater to children below the age of 12 years old within a group of 15 residents. Existing VCHs have expressed their interest to be converted to smaller care facilities as part MSF policy shift to reduce the number of present VCHs/capacity i.e. institutional care to make up 30% of alternative care option for children with the remaining 70% being placed in foster care placements or other family-based care options (including efforts in family preservation and reunification). Two of such VCHs are Marymount Centre and Chen Su Lan Methodist Children's Home have been identified and supported by MSF to run the Pilot Small Group Care (PSGC) mid 2017.²³ The programme funding will cover the rental of designated state building, employment of 12 care staff, 1 social worker and a deputy head to provide 24 hour care and supervision of the children between the age of 7 and 12 years old. The referral for placements of the children would come from MSF after assessing the children needs where the admission would vary from 12-18 months. After which the children will be reintegrated back with families, placed

in foster care or moved into another Children's Home.

The idea for “small-group therapeutic homes” was first mooted by previous MSF Minister Dr Vivian Balakrishnan in 2011. In 2012, the government announced a budget of SGD13 mil (USD9.6mil) to the establishment of 6 such homes. To date there are only two existing group homes of such. A recent government tender for the establishment of the remaining 2 (as Marymount & Chen Su Lan have secured their bid) have been announced in the last quarter of 2017 and the results have yet to be announced.

Set up in 2011, the DaySpring's Residential Treatment Centre (RTC) under HCSA community Services (i.e. VWO) realized the urgency in engaging children with high complex behavioural issues before the government's SGH initiative was announced. Dayspring RTC has since been providing therapy for girls aged between 12 and 16 who have been physically, sexually or emotionally abused repeatedly. The girls undergo a live-in programme of 12-18 months followed by a 6-month after-care programme within a group of 16.²⁴ It is the first highly intensive clinical approach with hand-on therapies who oversee the girls' progression everyday based on an American therapeutic model. The programme involve counselling and group work session on trauma system therapy, alternate schooling (for girls who are not able to catch up with the mainstream education system) and a 6-Phase Value System in rebuilding their self-worth and resilience. In addition, numerous volunteers offer

varying talent-enrichment programmes to develop the girls' potentials. More significantly, the aftercare programme ensure the girls are assured with additional support for reunification with families and/or adjust to independent living upon exiting care.

MCYC Community Services (i.e. VWO) created Home Sweet Home, in response to MSF initial appeal for the formation of SGHs in 2012. Home Sweet Home indicated that it utilizes Trauma Systems Therapy (TST) as the treatment model to help children who display severe behavioural problems, having experienced complex trauma and attachment issues.²⁵ Field findings were unable to extract much information with regard to the entity thou it was noted that MCYC offers a range of services including student care centres, youth & family welfare as well as a fostering agency. Raising question on what would be MCYC priority in working towards facilitating home based care option and/or eventual reintegration back with families or institutionalization of the children in the substantially funded SGHs model i.e. placement allowance for each child per month is reported to be at USD12,000 (USD8,800).

MSF has also allocated additional SGD7mil (USD5.1mil) for a structured four-year training course that is to be completed by care staff who will be employed by the newly developed specialized care facilities in providing more rigorously trained personnel. While reports state that MSF is in the process of reviewing care standards to ensure that family-based care is prioritized, the allocation of such a large sum of

money – as well as the addition of four Homes – has put MSF's intentions into question. On a practice level, it is also questionable on whether it would be advisable in placing a group of “high needs” children with challenging behaviour within a care facility i.e. SGH where there is hardly/limited opportunities to experience typical family routine or emulate positive behaviour among peers. The initiative prove to be an interesting development in the provision of out-of-home care to be monitored in the next coming years on the impact of care on the children.

Licensing Of Homes For Children And Young Persons

Under the CYPA, all care facilities are required to obtain a license. Homes for Children and Young Persons must also adhere to the regulations stated within the CYPA and MSF's Standard of Care for Homes. The unit under MSF responsible for registration of Children and Young Person's Homes is the Sector Licensing and Regulation Division. The Sector Licensing and Regulation Division is further broken down into three regulatory branches:

- Residential Care Regulatory Branch
- Sector Regulation Branch
- Risk Management Branch

The Residential Care Regulatory Branch is tasked with licensing Homes for young persons and children, as well as shelters/homes for the elderly. Meanwhile, the Sector Regulation Branch is responsible for overseeing social and welfare related charities and Institutions for Public Character (IPCs). The Risk Management Branch is more

concerned with finances, particularly audit and risk management practices.²⁶

Sections 52A through 52Q of the CYPA state the legal procedures by which licencing and registration of homes for children and young persons must be carried out. According to the Act, applications for issuance or renewal of operation licenses must be submitted to the child protection Director for approval. In cases where an organization/agency/etc. seeks to renew their licence, the application for licence renewal must be submitted six months prior to the expiry date of the previously obtained licence. Applications for licensure can be refused by the Director for a variety of reasons. If the premises of the children's home are considered to be unfit for the centre/organization's purposes, or the centre does not fit the requirements laid out by the Singapore government, applications are subject to rejection by the Director.

If the applicant's request for licencing is approved, the applicant must pay a licencing fee. There does not appear to be a set amount for the licensure fee, rather it is determined based on the context of the license/operator/etc. Once the licence is approved and obtained by the operators of the children's home, it is valid for a period of 2 years – unless it is revoked by the issuing authority. Those who are granted a licence to operate a children's home are required to put their licence on display in the facility, in such a way that ensures all persons who enter the premises are able to view the licence. If holders of an operating licence fail to put the licence on display, a fee of SGD1,000 (USD740) can be issued for the offence. The Director

²² “Child Protection & Welfare.” Ministry of Social and Family Development. December 20, 2016. Accessed October 12, 2017. <https://www.msf.gov.sg/policies/Strong-and-Stable-Families/Nurturing-and-Protecting-the-Young-Child-Protection-Welfare/Pages/default.aspx>.

²³ “Pilot Small Group Care (PSGC).” Chen Su Lan Methodist Children's Home. Accessed November 23, 2017. <https://www.cslmch.org.sg/psgc.html> Date of publication unavailable (copyright 2009).

²⁴ “DaySpring Residential Treatment Centre.” Like! Business. 2017. Accessed November 23, 2017. <https://www.like.sg/item/dayspring-residential-treatment-centre/>.

²⁵ “HomeSweetHome@Admiralty.” MCYC. Accessed November 23, 2017. <http://www.mcyg.sg/services/homesweethomeadmiralty/>. Date of publication unavailable.

²⁶ “Sector Licensing and Regulation Division.” Ministry of Social and Family Development. December 20, 2016. Accessed October 15, 2017. <https://www.msf.gov.sg/about-MSF/our-people/Divisions-at-MSF/Social-Development-and-Support/Social-Policy-and-Services-Group/Pages/Sector-Licensing-and-Regulation-Division.aspx>.



is also responsible for negotiating the transferral of licences from one operator of the centre/organization to another.

The amended CYPA also states that the Director and any officer under his/her command maintains the right to inspect licenced homes for children at any time. Authorized inspectors of children's homes may ask to see any/all documents and records pertaining to the management of the facility, and they reserve the right to revoke the operator's licence if condemning material surfaces during the inspection. Operators of institutions that refuse to be inspected are subject to fines exceeding SGD2,000 (USD1,485) and/or 12 months of imprisonment.

In order to maintain relevant records of the operation(s) and licencing of children's homes, the Minister (of MSF) is required to assemble a Review Board. Members of the Review Board are appointed by the Minister, and their task in maintaining a high quality of care requires that they inspect/review aspects of the facility -- spanning from the institution's standard of care to ensuring that appropriate care plans are in place for the children. The Review Board is also the unit in charge of advising the Director on matters such as the release of youth in juvenile correctional facilities, as well as the conditions of the release of the child/youth. Any remedial measures that are to be undertaken by children's homes are also dictated by the Director, which further ensures that operating institutions continue to meet the requirements established by the CYPA. Notably, the Director is the authority who maintains the right to cancel and/or revoke an operating licence, or if need be close the institution/home all

together. Therefore, under the Minister, the Director is also responsible for the transferral of all residents from a children's home that is deemed unfit for operation to another institution or place of care.

2.1 Government / state-run child care facilities

Two of the largest institutional care facilities which can accommodate nearly or more than a 100 children are run by MSF. MSF Youth Homes i.e. Singapore Boys' Home (SBH) and Singapore Girls' Home (SGH) function as a Place of Detention and a Juvenile Rehabilitation Centre (JCR) for youths who are in conflict with the law, as well as a Place of Safety for youths who are beyond parental control or in need of care and protection.²⁷

The boys and girls whom are being placed in the care facilities are of the age 14 and above. Majority of them had been caught for law-breaking / juvenile delinquency and their stay in the institution is part of a rehabilitation programme. Their cases are refer to Probation & Community Rehabilitation Service (PCRS) which put up a Pre-Sentence Report and recommendations based on the risk of re-offending, level of remorsefulness, supportive network etc to be presented to the Youth Court. In turn ratify a Probation Order (PO) for a period of 6mths to 3 years. Of which might include a short stay of 3 weeks in Place of Detention while the assessment is being undertaken and/or as a condition of the PO. However, should the young person breach any conditions listed in the Order, he/she will be committed to an average stay of 20 months and 24 months respectively.

Beyond Parental Control (BPC) cases refer to complaints laid by parents to the Court as the youths are deemed to be unmanageable and unruly. A care option listed in the CYPA Section 50, is conferred as the last resort which should be taken by parents/caregivers as it could further estrange the relationship. The youth is usually sent to attend community-based programme first for a period of 3-6months, should it failed a Social Report will be put by MSF which will then determine either the child be placed in the Place of Safety for a period not exceeding 3 years or statutory supervision under a social worker.

Upon admission, the case management is handed over to the Youth Residential Service (YRS) team to develop an Individualised Care Plan with targeted intervention in structuring the daily routine, activities, family work as well as religious classes. Notably a Therapeutic Casework Unit is assigned to work with the youths during their duration of stay. In 2016, it was reported that there is a total of 245 youths in care; 151 (boys) / 94 (girls), which has varied from 2013 figures of highest admission with total of 341 youths; 247 (boys) / 94 (girls).

2.2 Private child care facilities

Due to the structure of the institutional care sector in Singapore, which is entirely reliant on MSF or partnerships between MSF and VWOs, there are no private facilities offering out-of-home care placements. Although Children and Young Persons Homes and/or VWOs can receive private donations, the government-controlled system does not allow for the establishment of privately operated institutional or residential care facilities - particularly for alternative care options for vulnerable children.

Privately-run care facilities basically offer short term care i.e. half-day and full day child-care services including infant care services (between 2-18 months). Some day-care centres are heavily subsidized by the government, while others may receive the bulk of their funding from charging for child-care services, which is a lucrative business. Research suggests that short term child care services are utilized now more than ever before in Singapore. The need for day care services is predominantly due to a significant increase in the number of households with two working parents.

While it is common for children and infants to be placed under the care of their grandparents or other relatives for the duration of the workday, such option is no longer viable given the rise of standard of living. Practically, all family members including the elderly have to work to supplement the daily cost of living. Hence, supporting the influx of day care centres in a way assist working parents and keep Singaporean families intact. Families who do not wish to send their children to day-care centres may also hire nannies, babysitters, or live-in maids. However, the Singaporean government has made it clear that they are in favour of the use of childcare centres.

Perhaps the government's leniency towards day-care centres is due to MSF's direct involvement in the provision of short term care options. Under MSF, the Early Childhood and Development Agency (ECDA) acts as the

primary authority over all centres and programmes concerning early childhood development (applies to children 0-6). Because day-care centres, preschools, and kindergartens are launched under an MSF agency (ECDA), the government may be more inclined towards supporting and advocating for programmes/services that are regulated by MSF. Whether placing one's child in a day-care centre is truly the best option for the child is up for dispute, especially when one considers that the child may be both safer and more comfortable with a caretaker that works in their home. The high turnover rate of day-care centre staff members is also cause for concern, as this can impress a sense of instability in the child.²⁸

²⁷ "MSF Youth Homes: New Admissions." Ministry of Social and Family Development. November 03, 2017. Accessed November 24, 2017. <https://www.msf.gov.sg/research-and-data/Research-and-Statistics/Pages/MSF-Youth-Homes-New-Admissions.aspx>.

²⁸ Zhang, Kaili Chen. "Who is here for me: Substitute Child Care in Singapore?" *Journal of Child and Adolescent Behaviour* 03, no. 03 (June 22, 2015). Accessed January 20, 2017.

Oftentimes, parents are even given subsidies for placing their infants/children in day-care centres. Singaporean infants/toddlers between the ages of 2-18 months are eligible for the infant care subsidy in establishments that are licensed by the ECDA. Simply by being a certain age and having citizenship in Singapore, these toddlers would be eligible for the Basic Subsidy, which guarantees the family up to SGD600 (USD445) per month. However, subsidies seem to be made particularly accessible to working parents with children between the ages of 2 and 18 months. Mothers/ single fathers who work upwards of 56 hours per month are granted SGD600 (USD445) if their child is enrolled in full day infant care, while parents who are unemployed only receive an infant care subsidy of SGD150 (USD111). Notably, infant care subsidies are also offered to families who have enrolled their infant/toddler in half-day care. Parents who work upwards of 56 hours a month would be entitled to a subsidy of SGD300 (USD222), while non-working parents would receive a subsidy of SGD150 (USD111) for enrolling their child in half-day infant care. This discrepancy on the subsidies given between employed and unemployed parents makes one wonder what ultimately the government is wanting for families.

Statistics show that the number of parents enrolling their infants in care centres has increased drastically over the course of the past five years. In 2012, there were a total of 2,510 infants enrolled in the full day care programme, whereas there are currently 4,589 infants enrolled (2017). With the sharp spike in enrolment, the number of infant care facilities has also increased. In 2012 there were 296 establishments offering infant care services, and there

are now over 500 infant care centres (2017). The average cost of infant care has also increased from 1,325 SGD in 2012 to 1,495 in 2017. However, the services offered by ECDA infant care centres appear to be highly thought out and particular to the needs of the children/families. Reports show that there is a 1:5 ratio of infant care staff to children, and infant care centres also claim to employ nurses and/or trained Infant Care Educators. There is limited information on the activities that staff members use to engage with the toddlers, but the centres' carers reportedly "strive to meet and develop the physical, cognitive and psychosocial needs of the infant" in a safe environment.²⁹

2.3 Non-profit & community child care facilities

Under the Singaporean system, the term NGO is not generally used. Non-profit organizations are referred to as Voluntary Welfare Organizations (VWOs). All VWOs are established under the government's purview. The government, more specifically MSF, has partnered with non-profits and contribute substantially to the economic stability of these organizations. All Voluntary Children's Homes (VCHs) receive government funding, although some Homes are entirely funded by the government while others receive partial funding. While information pertaining to the exact amount of funding³⁰ distributed by MSF to VWOs is not made available, research has suggested that MSF can act as a partial funder and sole contributor – depending on the programmes and/or services rendered by VWO. Notably, the VWOs are also faith-based organizations as it is easier to appeal for funds from the community which presents itself as multi-racial and multi-religious society.

For example, Melrose Home (est. 1880s) a residential care facility operates on a budget of SGD2 mil (USD1.5mil) per year. While the government covers approximately 40% of the Melrose Home's costs, 60% of the facility's funding comes from external/private donations. The Melrose Home classifies itself as a charity, rather than a government run institution or organization, despite the fact that the home is a recipient of government funding.³¹ Sources shared that MSF would allocate a monthly of SGD1,500-2,000 (USD1,100-1,500) per child in the VCHs. While facilities mirroring the small group home obtain SGD4,000+ (USD3,000); MCYC Home Sweet Home was reported to receive a monthly placement funding of SGD12,000 (USD8,800) per child. However, for children whom had been admitted by the VWOs based on "compassionate ground" i.e. not under state care but through family/guardian request would receive SGD200 (USD150) monthly. To meet up with the increasing cost of running an institution, some VWOs resorted to employing foreigners as their care staff at lower wages than local personnel. This can exacerbate the communication issues faced by the children resulting in the latter either to act more defiant or become disengaging.

In 2013, MSF launched an out-of-home alternative care service subdivision Children in Care Service (CIC), which caters to the needs of children who are unable to continue living with their families due to safety concerns. The CIC has partnered with VWOs throughout Singapore for the purpose of managing and supervising the 21 Child and Youth Welfare Homes i.e. Voluntary Children Homes (VCHs). These Homes are designed to provide short-term and long-term residential care services to children and young persons in Singapore. VWOs are responsible for running Voluntary Children's Homes (VCH) using government funding that is distributed by MSF. Children and young persons in VCHs receive support and care from the residential care staff, as well as social workers.³² The care plans as well as referral for admission of the children remains to be determined by MSF subdivisions – Child Protective Service (CPS), Probation & Community Rehabilitation Service (PCRS) and Youth Residential Service (YRS) respectively.

As mentioned, the vast majority of investigation and intervention services of vulnerable children are primarily carried out by the CPS. However, in cases where children or young persons have been abused, the Singapore Police Force is responsible for carrying out a criminal investigation concurrently. Once a child has been taken into protective custody by the CPS, and the case has received further investigation by authorities, a long term safety plan is created. According to the MSF website, various care programmes and services are made available to children and young persons in need of alternative care, depending on the specific context and needs of the

child. Family support services are also offered throughout the investigation/assessment process before the cases are being transferred to VWOs for short/long-term care supervision. Notably, all child and family protection/care services must meet the National Standards for Protection of Children (2002).³³

2.4 Faith-based child care facilities

There are a number of faith-based care centres, organizations, fostering agencies and community outreach programmes in Singapore. All of the 21 VCHs in Singapore are faith-based. In maintaining the racial and religious harmony, it is of a common understanding that the children in need of care are placed in residential facilities according to their cultural backgrounds and beliefs. There have been exceptions to the "rule" given the limited resources in the care sector.

Many of the faith based care programmes offered in Singapore are founded on Christian values. Examples of Christian community care programmes include The Haven Home, a residential care facility established under the Salvation Army. Based on the Salvation Army's description of The Haven Home, it is unclear as to whether religious teachings/lessons/values are forced upon children under The Haven Home's care. The care facility makes the following statement in regard to the inclusion of faith in the operation of the facility:

” *An individualised care plan is developed to address each child's educational, social, spiritual and family needs.*³⁴

Similarly the AG Home for girls, a non-profit Christian organization and care facility, offers somewhat limited information on the ways in which Christian values are incorporated into the AG care programme(s).³⁵ The AG Home states that

” *Bible study, youth camps, mission trips and group work are regularly organized to nurture and encourage spiritual growth,*

but it is unclear as to whether these activities are mandatory or optional.³⁶

While a significant number of the VCHs are operated by Christian VWOs, six Muslim Homes and one Hindu Home have also been established through MSF's partnerships. The list of Muslim Children and Young Persons Homes in Singapore includes: Darul Ihsan Orphanage, Darul Ihsan Lilbanat (for girls), Jamiyah Children's Home, Muhammadiyah Welfare Home, Pertapis Children's Home, and Pertapis Centre for Women and Girls. Thus far, the only Hindu Home for Children and Young Persons in Singapore is the Ramakrishna Mission Boys' Home. Research has not yielded information concerning the existence of a Hindu Girls Home.³⁷ In all of the aforementioned faith-based facilities, religious lessons and values are imparted as a part of the children's daily routine(s) in the care facility(ies).

2.5 Are there any cartels/strategic alliances?

None. MSF is a single myopic operator. All matters with regard to out-of-home care of vulnerable child comes under the jurisdiction of the MSF and the ratification of Youth or Family Justice Courts.

²⁹ "Infant Care in Singapore." Skoolopedia. 2017. Accessed November 24, 2017. <https://skoolopedia.com/infant-care-singapore-infographic/>.

³⁰ "Children and Young Persons Homes." Ministry of Social and Family Development. December 28, 2016. Accessed January 28, 2017. <https://www.msf.gov.sg/policies/Strong-and-Stable-Families/Nurturing-and-Protecting-the-Young/Child-Protection-Welfare/Pages/Children-and-Young-Persons-Homes.aspx>.

³¹ "Melrose home: Supportive environment for underprivileged children in Singapore." Expat Living SG. July 31, 2015. Accessed January 28, 2017. <http://www.expatliving.sg/melrose-home-supportive-environment-for-underprivileged-children-in-singapore/>.

³² "Children in Care Service." Ministry of Social and Family Development. July 13, 2017. Accessed October 14, 2017. <https://www.msf.gov.sg/about-MSF/our-people/Divisions-at-MSF/Social-Development-and-Support-Rehabilitation-and-Protection-Group/Pages/Children-in-Care-Service.aspx>.

³³ "Policy on Protection & Welfare of Children." Ministry of Social and Family Development. June 05, 2017. Accessed October 14, 2017. <https://www.msf.gov.sg/policies/Strong-and-Stable-Families/Nurturing-and-Protecting-the-Young/Child-Protection-Welfare/Pages/Policy-on-Protection-Welfare-of-Children.aspx>.

³⁴ "The Haven." The Salvation Army, Singapore. Accessed January 30, 2017. http://www.salvationarmy.org/singapore/the_haven Copyright 2017.

³⁵ "Our Home: A story of Love and Grace." AG Home - Girl's Home Singapore. <http://www.aghome.org.sg/ag-home.html>. Copyright 2015.

³⁶ "Character Development." AG Home - Girl's Home Singapore. <http://www.aghome.org.sg/program-character.html>. Copyright 2015.

³⁷ "Children and Young Persons Homes." Ministry of Social and Family Development. August 01, 2017. Accessed October 10, 2017. <https://www.msf.gov.sg/policies/Strong-and-Stable-Families/Nurturing-and-Protecting-the-Young/Child-Protection-Welfare/Pages/Children-and-Young-Persons-Homes.aspx>.

73%

The results have been remarkable, with the number of foster care families in Singapore already increased by 73%. The number of children placed in foster families has also increased by 39%.

39%

politics of care

3.1 What is the current political stance/approach to care?

It is likely that certain forms of alternative care are used to a greater degree depending on the current trend of care provision. At the moment, that trend is foster care. A notable shift in the Singapore government's attitude towards care provision became visible in 2014, when MSF publically acknowledged the need to move children out of institutional care and into family-based care arrangements. A 3-year plan to establish and fund fostering agencies was formed, with a starting budget of SGD8mil (USD5.9mil). When the programme was proposed, MSF was the only formal provider of foster care services. The formation of fostering agencies under VWOs that were deemed capable of facilitating fostering arrangements was seen as a marked move towards prioritizing family-based care. MSF has indicated its intention to increase the number of foster carers from 235 to 500 since 2014. Despite the Ministry's efforts to make foster-care a more widely practiced alternative care option, the majority of children in need of out-of-home care placement are in residential facilities or "children's homes."³⁸ Recent report on MSF's Foster Care Scheme indicate extension of the Ministry's goal is to increase the number of foster caregivers to 500 by 2019.

In an attempt to develop the foster care system, MSF has increased their efforts to recruit foster parents and establish foster care agencies. MSF's foster parent outreach/awareness

schemes have consisted of road shows, collaboration between MSF and community-based organizations, collaboration with private organizations, radio and television programmes, as well as developed partnerships with religious organizations/groups. The results have been remarkable, with the number of foster care families in Singapore already increased by 73%. The number of children placed in foster families has also increased by 39%.

These developments ultimately led to the establishment of the Safe and Strong Families Pilot Programme (SSF-P) in 2016, which is centred upon increasing the availability of family preservation and family reunification services. The SSF-P is a particularly important component of the social care sector, as it increases the odds of the child's reunification with their natural family. Only a few child care VWOs have incorporated the SSF-P into their programmes and services. Agencies offering the SSF-P include: Singapore Children's Society, Chen Su Lan Methodist Children's Home, Boys' Town, The Salvation Army and Muhammadiyah Welfare Home. MSF intends for the Programme to reach 400 families and vulnerable children by 2020.³⁹

The process through which a child's need for alternative care placement is determined is further explicated in MSF's child protection document, *Protecting Children in Singapore*. In accordance with the UNCRC, MSF states that the institutionalization of children in need

of special protection is a last resort, with temporary familial placement (formal or informal kinship care) as the primary course of action.⁴⁰ However, due to the lack of data on guardianship and kinship care, the extent to which the aforementioned policies on child protection are implemented remains unclear. Another example that information is withheld and it is unclear as to whether the aforementioned policies on child protection are properly implemented.

Notwithstanding the intended target to place two thirds of children in foster care or other family-based care options, MSF equally see the relevance of building up the capacity of the residential home settings. It recognize that some children with higher needs and requiring "specialised care" will benefit in a more structured institutionalized care setting. MSF Minister Tan Chuan-Jin announced that the government will be investing SGD7 mil (USD5.1 mil) in skilling up all residential care staff over a period of 4 years at the Rehabilitation and Protection Care Conference, Jul 2017. He mentioned that a Training Framework for Residential Care was developed by MSF in 2016 and had partnered with Social Service Institute (SSI) in delivering core training programmes which include topics such as impact of abuse and neglect, how trauma can impact a child's development and roles of residential staff in addressing the behaviours of the child. While intermediate and specialised training programmes covered areas such as family therapy and mediation.

³⁸ Philoman, Laura Elizabeth. "More vulnerable children, youth to be placed with foster families." TODAY online. October 29, 2014. Accessed January 30, 2017. <http://www.todayonline.com/singapore/more-dedicated-foster-care-support-centres-be-set-under-pilot-scheme>.

³⁹ "Strengthening family-based care for vulnerable children." Ministry of Social and Family Development. March 08, 2017. Accessed October 09, 2017. <https://www.msf.gov.sg/media-room/Pages/Strengthening-family-based-care-for-vulnerable-children.aspx>.

⁴⁰ "Protecting Children in Singapore." Ministry of Social and Family Development.13. June 2016. Accessed January 30, 2017. <https://www.msf.gov.sg/publications/Pages/Protecting-Children-in-Singapore.aspx>.



3.2 What is the social policy agenda and how advanced are developments? - what policies exist and how important are they perceived within the country?

Singapore has developed a wide range of policies on the protection of children and youth, many of which are based on the United Nations Convention on the Rights of the Child (UNCRC). According to MSF, the country's policies are in accordance with the main basic principles of care for children, including a child's right to survival; a child's right to development; a child's right to be protected; and a child's right to participate actively in his/her community.⁴¹

In 1995, Singapore acceded to the UNCRC, and policies based on the principles of the UNCRC have been continually developed ever since. A list of salient policy developments has been added to the MSF website, in order to provide an outline of the progress made by the Singaporean social care sector(s). The list includes:

- The amendment of the Penal Code in 2007 to criminalise child sexual exploitation in Singapore and other countries;
- The amendment of Article 122 of the Constitution in 2004 to allow children to acquire Singapore citizenship through their Singaporean mothers;
- The establishment of the Central Youth Guidance Office (CYGO) and the Office of Public Guardian in 2010;
- The establishment of the Community Court and the Children Care Court in 2006 and 2008 respectively;
- The establishment of the National Family Council in 2008; and
- The ratification of the 1973 ILO Convention concerning Minimum Age for Admission to Employment in 2005.⁴²

Despite the extensive efforts on the part of MSF and other government agencies to develop new policies, it is unclear as to whether or not all of the policies are effectively implemented by government and non-government organizations/agencies/units.

child protection

A spike in the number of child abuse reports in Singapore has come to the attention of MSF, child caring VWOs and various news sources. However, the increasing number of reports of children in situations of abuse is said to be due to MSF's new screening systems, rather than an actual increase in the number of abuse cases. The number of reported physical abuse cases against children has risen from 124 in 2009, to 444 in 2016 (preliminary figure). Similarly, the number of reported neglect cases rose from 103 in 2009, to 322 in 2016 (preliminary figure). Reports of sexual abuse towards children have also more than doubled during this time period, with 45 reported cases in 2009 versus the 107 cases reported in 2016.⁴³ In order to properly investigate these cases of abuse, MSF has trained over 2,500 child protection professionals to use the Ministry's newly developed tools for assessing abuse cases.

Despite substantial efforts made on the part of MSF and other child protection agencies, some extreme cases of child abuse have gone unnoticed for too long. The press in Singapore have highlighted the fact that a number of high-profile cases have occurred in recent years, drawing attention to the problem of child abuse to the general public. In 2015, a boy died after being physically abused by his mother and her boyfriend every day. Another gruesome child abuse case has since been uncovered, in which a small child was killed after his parents who repeatedly poured boiling water over him.⁴⁴

While there have not been significant changes to Singapore's legislature concerning punishment for child abuse, a recent case has received a fair amount of attention after an abusive mother's prison sentence was extended another 7 years. The mother, Noraidah Mohd Yussof, abused her son from infancy on until he died at her hands at the age of four. She was reportedly thrown into a fit of rage due to her child's difficulty with counting in Malay. The boy suffered from brain injuries caused by fractures in his skull, after his mother beat him and then picked him up by the neck and then dropped him to the floor unconscious. Although Noraidah was indeed found guilty, prosecutors have since insisted that her sentence should be extended. She was originally sentenced to 8 years in prison, but prosecutors assert that she deserves a minimum sentence of 12 years for the brutal harm she inflicted on her son.⁴⁵

Since the spike in child abuse has been acknowledged by the Singaporean government and public media outlets, there has been a push for increased information concerning the signs of abuse. News sources such as Asia One have included loose instructions as to what an individual should do if he/she believes they know a child who is being abused. Such articles stress the fact that abuse can be reported to various government-run units, including the police, Family Service Centres (FSCs), Child Protective Specialist Centres, and MSF. Information provided by those

reporting abuse is then assessed using the Child Abuse Reporting Guide (CARG), which assists in the deduction of the severity of abuse.⁴⁶

In an effort to enhance and develop the child protection system in Singapore, MSF appointed three charities/NGOs - Big Love, Heart@Fei Yue and Pave (also known as a Family Violence Specialist Centre) to specialise in managing cases that are considered of low to moderate risk in 2013. Known as Child Protection Specialist Centres (CPSCs), these centres takes on cases channelled by MSF-Child Protective Service (CPS) / Intake & Assessment Unit (which is the first point of referral for child abuse cases). The intention is to have the children remain with their families under a safe care plan drew up by CPS though under the observation of the CPSCs which are also tasked to help the parents improve their parenting capacities. This initiative has allowed the CPS to focus on high risk cases of abuse whilst allowing a greater community ownership in reaching out to families at-risk.

⁴³ "Child Abuse Investigations." Ministry of Social and Family Development. April 04, 2017. Accessed October 09, 2017. <https://www.msf.gov.sg/research-and-data/Research-and-Statistics/Pages/Child-Abuse-Investigations.aspx>.

⁴⁴ Tan, Theresa. "Spike in child abuse." The Straits Times. May 21, 2017. Accessed October 10, 2017. <http://www.straitstimes.com/singapore/spike-in-child-abuse>.

⁴⁵ Chelvan, Vanessa Paige. "Mother's jail term for child abuse nearly doubled to 14 and a half years." Channel NewsAsia. July 06, 2017. Accessed October 16, 2017. <http://www.channelnewsasia.com/news/singapore/mother-s-jail-term-for-child-abuse-nearly-doubled-to-14-and-a-half-years>.

⁴⁶ Ong, May. "Signs of child abuse and what you can do to help." AsiaOne. May 22, 2017. Accessed October 11, 2017. <http://www.asiaone.com/singapore/signs-child-abuse-and-what-you-can-do-help>.

⁴¹ "Obligations under the UN Convention on the Rights of the Child." Ministry of Social and Family Development. Accessed January 28, 2017. <https://www.msf.gov.sg/policies/Children-and-Youth/Pages/Obligations-under-the-UN-Convention-on-the-Rights-of-the-Child.aspx>. No publication date provided by MSF.

⁴² Ibid.

Due to the control that the Singaporean government maintains over mainstream media and news publications, it is almost impossible to accurately assess the true state of the care system. Moreover, the task of identifying the challenges / locating the problems within the care system is somewhat of a fruitless venture, as MSF appears more /is much more likely to point out the flaws in Singaporean families than the drawbacks of the care system. For example, a potentially controversial article on “tackling hostile parents” was published by the Straight Times in 2016. The article maintains that MSF has struggled with some families that have been under the scrutiny of CPS, mainly because the families refused to allow CPS to take their child away after an abuse report was filed. While this is evidently a serious case, the presentation of the altercation between MSF and the family is undeniably one sided. At no point in the article is there any mention made of the loosely worded CPYA, which has a particularly long list of reasons for removing a child from their parents’ care. In the article, MSF representatives state that children are only taken away from their families if there are serious concerns to the child’s well-being.⁴⁷ However, there is a distinct lack of information provided on the efforts that were made in order to assist the family prior to removing the child from parental care. This raises a number of questions as to how intervention services are being implemented in Singapore and how information is made available to families about the system.

Another significant concern is the way Singapore’s wealth is portrayed by the media, which oftentimes neglects to highlight the wealth gap, hence minimising public awareness on social issues. Because Singapore is one of the wealthiest countries in Asia, poverty does not tend to be discussed as a primary concern, but recent reports have shown that approximately one in ten families in Singapore are living in poverty. Singapore is also one of the most income disparate countries in Asia, with 114,000 residents living off of approximately SGD5 (USD3.60) a day / SGD800 (USD590) per month. Given the current cost of housing and other basic necessities, the prevalence of such low income(s) is extremely concerning.⁴⁸ Yet, rather than addressing the serious effects the wealth gap may have on lower income families, the government is prone to boasting about the progress being made by financial assistance schemes such as ComCare. The fact that a financial assistance scheme is available in Singapore is a huge step forward, but there is a severe need to further develop the social welfare sector. In order to provide families and children with the care they require to remain financially and emotionally intact, social welfare development should be a top priority of the Singaporean government.

The amount of pressure to succeed that is placed on Singaporean children is also a growing concern. Recent reports show that there has been an increase in the number of suicides in the 10 - 29 age group, with approximately 22% of children in Singapore considering suicide.⁴⁹ While the exact causes of depression in children and young adults remain somewhat unknown, heavy amounts of academic pressure have been cited as the cause for the most recent child suicide (2016). After an 11 year old boy committed suicide upon finding that he had failed the Primary School

Leaving Examination (PSLE), the current state of the education system should be re-examined as a threat to the health and well-being of Singaporean children/ young adults.⁵⁰

HOTLINE

Specialist Centres also extend help in attending to the hotline services for reporting child abuse. While there are multiple family violence report hotlines, the hotline or “helpline” designed specifically for children in vulnerable family environments is called Heart@Fei Yue. The helpline was launched in 2016, making it a fairly new development in Singapore’s care and child protection sector. The effectiveness of the helpline is still in question due to the limited hours of availability (9:30am to 5:30 pm Monday-Friday). Moreover, the helpline is not being used often, as the community may be more likely to voice their concern directly to the governmental CPS hotline.

The CPS hotline is considered to be the main child abuse report hotline in Singapore. Calls received by the CPS centre are forwarded to relevant agencies (i.e. child specialist centres) after CPS has made the initial assessment. If CPS classifies a case as being a child protection case, the unit takes on the case themselves. However, in cases where the abuse may be of moderate or low level risk to the child, family strengthening programmes are provided through community service centres. The CPS hotline has reportedly received approximately 2,000 inquiries and reports per year.

workforce for care

4.1 Who/ which agencies are offering social work qualifications?

As indicated by the Social Work Accreditation and Advisory Board (SWAAB), social work qualifications that meet their standards are only offered by two main institutions - National University of Singapore (since 1952) and SIM University (recent addition in Jul 2016; renamed as Singapore University of Social Science (SUSS) Mar 2017). The website also lists the following programmes and degrees that must meet their social work accreditation requirements:

“The Social Work qualifications that can be obtained for accreditation as a Registered Social Worker-Provisional (RSW-P) or a Registered Social Worker (RSW) are:

National University of Singapore (NUS)

- Bachelor of Arts (Social Work)
- Bachelor of Social Sciences (Honours) in Social Work
- Graduate Diploma in Social Work
- Master of Social Sciences (Social Work)
- Master of Social Work

Singapore University of Social Sciences (SUSS)

- Bachelor of Social Work
- Bachelor of Social Work (Honours)
- Graduate Diploma in Social Work
- Master of Social Work⁵¹

NUS has been the only learning institution in offering social work programme since 1952. Many of the lecturers in the Social Work Faculty are practitioners or ex civil servants and hence undoubtedly the learning modules are developed to meet to the needs of the community. Unsurprisingly, the curriculum and the development of the Social Work department in SIM University was developed by an ex-government policy maker

Typically, social work undergraduates are to clock in 800-1000 hour of field work during the course of study in the varsities. While Social Workers who have obtained their degrees from overseas must follow a different set of rules. SWAAB dictates that the following must be done in order for overseas social workers to be considered properly qualified to continue their work in Singapore: Social work qualifications that are obtained from overseas must be accredited by a recognised accrediting body in the country and year in which the qualifications were awarded.⁵²

The imperative came about after discovery that several of the foreign university/private learning universities had shut down in operations and modules taught did not meet the standards of social work practice.

A Diploma in Social Sciences (Social Work) is also offered by Nanyang Polytechnic. The Social Science courses offered by Nanyang Polytechnic are designed to prepare students to work in family services (i.e. family service centres, single-parent support centres, specialist centres, etc.), children and youth services (i.e. child protection centres, youth centres, children’s homes, etc.), eldercare services (i.e. senior centres for dementia, sheltered homes, etc.), disability services (i.e. disability hospitals, early intervention service centres, vocational training centres, etc.), correctional services (i.e. halfway houses, aftercare agencies, etc.), and healthcare services (i.e. rehab centres, hospitals, etc.). Those who are studying/have studied Social Sciences at Nanyang Polytech can continue their studies elsewhere (i.e. SUSS or overseas universities) rather than immediately entering the workplace.⁵³

⁴⁷ Tan, Theresa. “Tackling hostile parent’s part of child protection work.” The Straits Times. April 24, 2016. Accessed January 28, 2017. <http://www.straitstimes.com/singapore/tackling-hostile-parents-part-of-child-protection-work>.

⁴⁸ Cho, Christina. “Poverty in Singapore.” The Borgen Project. January 22, 2015. Accessed January 28, 2017. <http://borgenproject.org/poverty-singapore/>.

⁴⁹ “Child suicide: 22% of Singapore children think about suicide.” Singapore Parenting Magazine for baby, children, kids and parents. 2009. Accessed January 28, 2017. https://sg.theasianparent.com/singapore_children_suicide-depression/. The article was published in 2009, but changes have been made since then. The article now includes statistics from 2010.

⁵⁰ Umairah, Ifah. “Child Suicide Rates Are Going Up in Singapore – Why?” Affinity Magazine | For the Social Teen. November 26, 2016. Accessed January 28, 2017. <http://affinitymagazine.us/2016/11/26/child-suicide-rates-are-going-up-in-singapore-why/>.

⁵¹ “Accreditation.” Singapore Association of Social Workers. Accessed January 28, 2017. <http://www.swaab.org.sg/recognition>. Copyright 2015.

⁵² Ibid.

⁵³ “Diploma in Social Sciences (Social Work).” Nanyang Polytechnic. September 28, 2017. Accessed November 29, 2017. <http://www.nyp.edu.sg/schools/shs/full-time-courses/social-sciences.html>.



Social Service Institute (SSI)

The Social Service Institute is another major sector development/training centre for social service in Singapore. The SSI describes itself as the “nexus of the social service ecosystem,” due to its collaborative work with other agencies and ministries in the sector. The Institute strongly advocates for training programmes that are in line with social welfare/care initiatives rolled out by MSF. In fact, the SSI is described as being the main government training arm, with lectures, workshops, courses, etc. facilitated primarily by MSF and VWO members. Additionally, the SSI works in association with NCSS and NCSS member agencies. In order to meet the needs of these various agencies and remain in line with MSF’s initiatives, the Institute offers a range of training programmes, including:⁵⁴

- Cross Sector Programmes
- Children, Youth and Family Programmes
- Disability Programmes
- Mental Health Programmes
- Eldercare Programmes
- Board Development Programmes
- Leadership Programmes
- Organisational Development Programmes
- Group Training Programmes

While some training programmes and/or workshops under the SSI are offered in order to provide social services professionals with further knowledge about the sector, the Institute also offers CET programmes. Included in the list of programmes offered by the SSI is the WSQ diploma in Social Services, a Bachelor of Education, and a few other relevant programmes to the study of social work and /or social services.⁵⁵

The SSI also appears to be one of the primary institutes involved in rewarding good practice throughout the social service sector. Awards, grants and scholarships are offered to both in-sector professionals and students/trainees who are new to the social service sector. A complete list of awards/grants/scholarships for undergraduates, graduates and professionals in social service can be found on the SSI website (link: <https://www.ssi.sg/Career-in-Social-Service/Scholarships-and-Awards>).⁵⁶

4.2 Is there an association/accreditation body for the social workers?

In 2009, MSF, the National Council of Social Service (NCSS) and the Singapore Association of Social Workers (SASW) launched The Accreditation System for Social Workers and Social Service Practitioners. The accreditation system was put in place as an effort to standardize and professionalize social work in Singapore, and to ensure that social workers and social practitioners receive the necessary training required to offer families/children/vulnerable persons quality assistance.

The SASW is overseen by the Social Work Accreditation and Advisory Board (SWAAB). The board is comprised of 11 members, including the chairman and a vice-chairman. In its essence, the accreditation system is highly dependent on the involvement of MSF, as the Ministry is in charge of appointing SWAAB. The responsibilities of the Board are cited as follows:

1. approve or reject applications for accreditation and renewal as it may think fit;
2. uphold standards of professional conduct and code of ethics of the social work profession through the accreditation system;
3. review the mechanisms needed to maintain the professional practice of social workers;
4. provide thought and professional leadership on the development of social work and its professionals in Singapore, including policies, training and development and standards of practice; and
5. provide consultations and inputs on issues affecting the profession and initiatives targeted at the development of social workers.⁵⁷

4.3. How is the social work profession perceived in the country?

Social work is a relatively well respected profession in Singapore, which is made evident by various social work awards and the inclusion of a national social work appreciation day. Through SASW and various donors (including ExxonMobil), the Outstanding Social Worker Award (OSWA) and the Promising Social Worker Award (PSWA) offer Singaporean social workers an opportunity to be recipients of a significant amount of Personal Development grant money of SGD8,000-10,000 (USD5,900-7,300) depending on the award, as well as Professional Development grant money of SGD14,000-30,000 (USD10,300-22,000) depending on the award.⁵⁸ In addition, SSI also offers a range of scholarships and awards enlisted below

- Social Service Scholarships
- Social Service Award
- Lien Scholarship for Social Service Leaders
- Leadership Development Programme
- Professional Development & Management Programme
- Skills Future Study Award for Social Service Sector
- VCF Professional Capability Grant – heavily utilized by VWOs

Press releases and news articles on noteworthy social workers/social work achievements in Singapore are also somewhat common.⁵⁹ Additionally, freshly graduated social workers (2017) are provided with a fairly high starting salary of SGD3,270 (USD2,400) in comparison to those who graduated in 2011 and offered SGD2,400 (USD1,800).⁶⁰ The increment had come about steadily over the past few years from MSF increase funding norms for its programmes and services run by VWOs needed to adjust to the salary scale between MSF personnel and equally qualified social service professionals in the VWOs. In 2015, MSF’s funding for VWO-run services was reported to be at SGD165mil (USD121mil) an increase of more than 10% than previous years. The SGD12mil (USD8.8mil) out of the SGD16mil fund increase have been set aside to raising the VWOs staff salaries to be bring them “closer to the market benchmark”.⁶¹ *Today Online* cited the pay hike to be an additional 3-19% for social service professionals. The government monetary incentive had since paid off in attracting and retaining the workforce with the number of social workers reported to be at 1,600 in 2016 – doubled from the past 4 years with the renewed interest in making Social Work a career.⁶²

⁵⁷ “Accreditation.” Singapore Association of Social Workers. Accessed January 28, 2017. <http://www.swaab.org.sg/>. Copyright 2015.

⁵⁸ “Welcome to OSWA 2016.” Outstanding Social Worker Award 2016. 2016. Accessed January 28, 2017. <http://online.sasw.org.sg/jsp/swa/welcome.jsp>.

⁵⁹ “4 social workers awarded top honours.” Channel News Asia. November 30, 2015. Accessed January 28, 2017. <http://www.channelnewsasia.com/news/singapore/4-social-workers-awarded/2306924.html>.

⁶⁰ Tai, Janice. “Fresh grads in social work get much better pay now.” *The Straits Times*. April 13, 2017. Accessed November 29, 2017. <http://www.straitstimes.com/singapore/fresh-grads-in-social-work-get-much-better-pay-now>.

⁶¹ Ng, Kelly. “Social service professionals to receive 3% to 19% pay hike.” *TODAY online*. March 13, 2015. Accessed November 29, 2017. <http://www.todayonline.com/singapore/social-service-professionals-receive-3-19-pay-hike>.

⁶² Tai, Janice. “Number of social workers doubles in last 4 years.” *The Straits Times*. January 25, 2016. Accessed November 29, 2017. <http://www.straitstimes.com/singapore/number-of-social-workers-doubles-in-last-4-years>.

⁵⁴ “Training Programmes.” Social Services Institute (SSI). 2017. Accessed November 29, 2017. <https://www.ssi.sg/Learning-Development/Training-Programmes>.

⁵⁵ “CET Programmes.” Social Services Institute (SSI). 2017. Accessed November 29, 2017. <https://www.ssi.sg/Learning-Development/Training-Programmes/CET-Programmes>.

⁵⁶ “Scholarships and Awards.” SSI - Scholarships and Awards. 2017. Accessed November 29, 2017. <https://www.ssi.sg/Career-in-Social-Service/Scholarships-and-Awards>.



To bring more talent into the sector, the government had launched the Social Service Fellowship (SSF). Where top 50 social service professionals, not limited to social workers and included therapists, psychologist, counsellors etc are appointed on a 3-year term and provided with SGD12,000 (USD8,800) yearly allowance to

” help build sector-wide capability by mentoring budding social service professionals and partnering the MSF in professional development programmes.⁶³

On top of that the National Council of Social Service (NCSS) Sun Ray Programme, which is seen as a more holistic leadership programme. Where promising practitioners with leadership potential are deployed to VWOs needing technical assistance or operational management support as part of a cross-sectoral experience as well as exposure. NCSS will identify the right candidate and help plan staff movements from the secondments. Also cover a percentage of the candidate salary. At times, individuals from the corporate sectors are engage to strengthen the corporate capabilities and governance of the VWOs.

For reasons stated above one could expect a universal standard of qualification or level of understanding on social work practice, thou there is concern that practice is sadly lacking in innovation and flexibility in grasping the complexities beyond textbook i.e. realities on the ground.

alternative care

An article published in the Journal of Child and Adolescent Behaviour provides the following definition of alternate care for children in Singapore:

” In the light of the local context, substitute or alternate care is operationally defined as care provided by caregivers (e.g., nannies, grandparents or maids) or agencies such as a day-care centre for children instead of parents or guardians.⁶⁴

This definition, however, is geared more towards defining extremely temporary child care situations (i.e. care for the afternoon, rather than for days or weeks, or years at a time). With this in mind, it is important to have a clear delineation between the definition of alternate care and the definition of alternative care in Singapore.⁶⁵

There is no officially recognized definition of alternative care of children in Singapore. Nonetheless, the service provision is governed by one main piece of legislation i.e. the Children & Young Persons Act (CYPA) which protects children below the age of 16 years. It is defined as

” An Act to provide for the welfare, care, protection and rehabilitation of children and young persons who are in need of such care, protection or rehabilitation, to regulate homes for children and young persons and to consolidate the law relating to children and young persons.



The main principles governing the Act clearly dictates in Section 3A that

” parents or guardian of a child or young person are primarily responsible for the care and welfare of the child or young person. The CYPA is reviewed from time to time to take into account the latest trends and developments on the ground. Below are some of the terms listed in the Act;

⁶³ Ibid

⁶⁴ Zhang, Kaili Chen. "Who is here for me: Substitute Child Care in Singapore?" Journal of Child and Adolescent Behaviour 03, no. 03 (June 22, 2015). Accessed January 20, 2017. <https://www.esciencecentral.org/journals/who-is-here-for-me-substitute-child-care-in-singapore-2375-4494-1000214.php?aid=55581>

⁶⁵ Zhang, Kaili Chen. "Who is here for me: Substitute Child Care in Singapore?" Journal of Child and Adolescent Behaviour 03, no. 03 (June 22, 2015). Accessed January 20, 2017. <https://www.esciencecentral.org/journals/who-is-here-for-me-substitute-child-care-in-singapore-2375-4494-1000214.php?aid=55581>

Terms	Definition
Child	A person who is below the age of 14 years.
Young Person	A person who is 14 years of age or above and below the age of 16 years.
Child or Young Person in Need of Care or Protection	<p>(a) the child or young person has no parent or guardian;</p> <p>(b) the child or young person has been abandoned by his parent or guardian and despite reasonable inquiries the parent or guardian cannot be found, and no other suitable person is willing and able to exercise care or guardianship in respect of the child or young person;</p> <p>(c) the parent or guardian of the child or young person –</p> <ol style="list-style-type: none"> is unable or has neglected to provide adequate food, clothing, medical aid, lodging, care or other necessities of life for the child or young person; or is unfit or unable or has neglected to exercise proper supervision and control over the child or young person, and the child or young person is falling into bad association, or is exposed to moral danger, or is beyond control; <p>(d) the child or young person has been, is being or is at risk of being ill-treated –</p> <ol style="list-style-type: none"> by his parent or guardian; or by any other person, and his parent or guardian, although knowing of such ill-treatment or risk, has not protected or is unlikely or unwilling to protect the child or young person from such ill-treatment; <p>(e) the child or young person needs to be examined, investigated or treated for the purpose of restoring or preserving his health or development and his parent or guardian neglects or refuses to have him so examined, investigated or treated;</p> <p>(f) the child or young person behaves in a manner that is, or is likely to be, harmful to himself or to any person and –</p> <ol style="list-style-type: none"> his parent or guardian is unable or unwilling to take necessary measures to remedy the situation; or the remedial measures taken by the parent or guardian fail; <p>(g) there is such a serious and persistent conflict between the child or young person and his parent or guardian, or between his parents or guardians, that family relationships are seriously disrupted, thereby causing the child or young person emotional injury;</p> <p>(h) the child or young person –</p> <ol style="list-style-type: none"> is a person in respect of whom a relevant offence has been or is believed to have been committed; or is a member of the same household as another child or young person in respect of whom a relevant offence has been or is believed to have been committed, and the child or young person appears to be in danger of a similar offence being committed against him, and either the person who committed or is believed to have committed the offence or who has been convicted of the offence is the parent or guardian of the child or young person or a member of the same household as the child or young person, or the parent or guardian of the child or young person is unable, unlikely or unwilling to protect the child or young person from such offence; or <p>(i) the child or young person is found to be –</p> <ol style="list-style-type: none"> destitute or wandering without any settled place of abode and without visible means of subsistence; begging or receiving alms (whether or not there is any pretence of singing, playing, performing or offering anything for sale) or loitering for the purpose of so begging or receiving alms; engaged in carrying out illegal lotteries, illegal hawking, gambling or other undesirable activities; or using or inhaling any intoxicating substance (as defined in the Intoxicating Substances Act (Cap. 146A)) for the purpose of inducing or causing in himself a state of intoxication.

Terms	Definition
Juvenile	A male or female person who is 7 years of age or above and below the age of 16 years.
Guardian	Any person who, in the opinion of the court having cognizance of any case in relation to the child or young person, or in which the child or young person is concerned, has for the time being the charge of, or control over, the child or young person.
Fit person	A person whom the court or the protector, having regard to the character of the person, thinks competent to provide care, protection and supervision of a child or young person <i>*could refer to a guardian/kin/foster parent.</i>
Assessment	An assessment to determine either the state of the health or development of the child or young person or whether the child or young person is in need of care or protection or both.
Director	Director of Social Welfare appointed under section 3(1) and, in relation to any provision in this Act in which the word is used, includes any public officer or other person who is appointed or authorised by the Director under section 3(3) to perform any of the duties or exercise any of the powers of the Director under that provision.
Protector	the Director and includes any public officer or other person who is appointed or authorised by the Director under section 3(3) to exercise the powers and perform the duties of a protector under this Act. <i>*would typically refer to MSF Child Protection Officers</i>
Home for Children and Young Persons	Any establishment the object of which is, or is held out to be, the provision of residential accommodation with board and personal care for children or young persons, for the purposes of their protection or rehabilitation or both.
Juvenile Rehabilitation Centre (JCR)	Any institution or part thereof appointed or established under Part VI as a juvenile rehabilitation centre.
Place of detention	a place provided or appointed by the Minister as a place of detention under section 55(1).
Place of safety	Any institution or part thereof appointed or established under Part VI as a place of safety.
Place of temporary care and protection (PTCP)	Any place or institution appointed or declared to be a place of temporary care and protection under section 27 or any other suitable place the occupier of which is willing temporarily to receive a child or young person committed under section 8A, 9 or 49.
Remand home	Any home or institution or part thereof provided or appointed by the Minister as a remand home under section 53(1) for the detention of juveniles sent there under the provisions of this Act.
Review Board	Review Board appointed under section 52G.
Voluntary care agreement	A care agreement entered into between the Director and the parent or guardian of a child or young person to secure the safety and welfare of the child or young person.

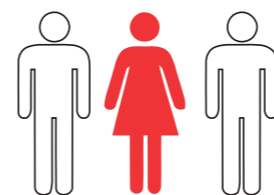
The placement of the children in alternative care are solely determined by the CPS either by voluntary admission via consent from birth families or thru the enactment of the Children and Young Persons Act (CYPA), Section 9;

” Power to remove child or young person to place of temporary care and protection, etc.

Where the Director, protector i.e. child protection officers and the police are given the authority to “without warrant” enter premises to take away a child from their family should there be a need to remove the child from an unsafety environment or in need to be examine by a medical practitioner. The child or young person would have to be presented to the Juvenile Court within 3 days upon his/her removal from the family. The Section further assert the authorities’ right to deny any contact or access to the child if it was not in the best interest of the child.



Statistics of children in alternative care



Total number of children in alternative care (total)
1,100⁶⁶

NOTE: The total number of children in care is listed by MSF at approximately 1,100 only tabulate the number of children placed in care under the MSF’s jurisdiction across the 21 Homes and Fostering Scheme. Without the inclusion of direct entrustment from families i.e. “compassionate grounds” nor the children placed in Place of Detention, Place of Safety and JCRs.



Total number of children in foster care
439

According to MSF official figure in 2016, there number of foster children had risen to 430 (from 362 in 2015⁶⁹).⁷⁰

NOTE: Number does not include private foster care arrangement by Sanctuary Care.



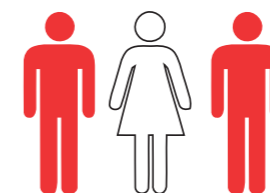
Legal age of leaving care

This remains unclear, as there are multiple definitions of adulthood according to various Singaporean laws. For example the Children and Young Person Act (CYPA) of 2001 defines children as those under 14, and young persons as those under 16 but 14 or older. Meanwhile, the Women’s Charter of 1997 defines a minor as someone under the age of 21 who is not married (and has not ever been married). However, Singapore also signed the UNCRC, which defines a child as someone under the age of 18. Ultimately, the age of majority is defined by common law as 21 years old.⁷²



Total number of children in residential/institutional care
985.

According to the MSF statistics page, there were 643 child welfare cases in residential care in 2016. children in conflict with the law in residential care.⁶⁷In addition to 245 boys and girls admitted to MSF Youth Homes (i.e. Singapore Boys’ Home and Singapore Girls’ Home).⁶⁸

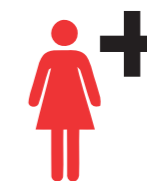


Total number of children in kinship care

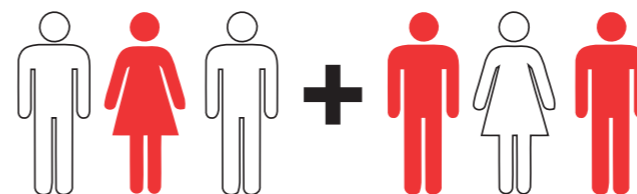
Kinship care arrangements are usually made within the family, although it may often be the first alternative care option explored by the MSF Child Protection Officers should there be a need to remove an abused child from their birthparent’s home. However, kinship care arrangements that are organized within a family are generally done without the assistance of MSF. Due to the informal nature of kinship care, there are no government records or data collections of kinship care arrangements. A 2016 article published by The Straits Times cited that approximately 100 vulnerable children are being cared for by relatives.⁷¹



Total number of boys in care
Data unavailable.



Total number of girls in care
Data unavailable.



Total number of children adopted

Based on figures published on MSF website, 387 domestic adoption placements were secured in 2016.

⁶⁶ Huiwen, Ng. “Third fostering agency to be ready by next June.” The Straits Times. November 19, 2016. Accessed January 22, 2017. <http://www.straitstimes.com/singapore/third-fostering-agency-to-be-ready-by-next-june>.
⁶⁷ “Children in Care - Children and Young Persons in Residential Care.” Ministry of Social and Family Development. July 27, 2017. Accessed October 16, 2017. <https://www.msf.gov.sg/research-and-data/Research-and-Statistics/Pages/Children-in-Care-Children-and-Young-Persons-in-Residential-Care.aspx>.
⁶⁸ “MSF Youth Homes: New Admissions.” Ministry of Social and Family Development. November 03, 2017. Accessed November 29, 2017. <https://www.msf.gov.sg/research-and-data/Research-and-Statistics/Pages/MSF-Youth-Homes-New-Admissions.aspx>.
⁶⁹ “Foster Children and Foster Parents.” Children in Care. April 27, 2016. Accessed January 22, 2017. <https://www.msf.gov.sg/research-and-data/Research-and-Statistics/Pages/Children-in-Care-Foster-Children-and-Foster-Parents.aspx>.
⁷⁰ Huiwen, Ng. “Third fostering agency to be ready by next June.” The Straits Times. November 19, 2016. Accessed January 22, 2017. <http://www.straitstimes.com/singapore/third-fostering-agency-to-be-ready-by-next-june>.
⁷¹ Huiwen, Ng. “Third fostering agency to be ready by next June.” The Straits Times. November 19, 2016. Accessed January 22, 2017. <http://www.straitstimes.com/singapore/third-fostering-agency-to-be-ready-by-next-june>.
⁷² “Protection of Children in Singapore: An Overview.” Children’s Society. 2005. https://www.childrensociety.org.sg/resources/front/template/scs/files/child_protection.pdf

structure of care for children & young persons with disabilities

There is a wide range of programmes for infants, children, and young persons with disabilities and/or special needs. The agency dedicated with assisting children and young people with disabilities is SG Enable. According to SG Enable’s website, the key functions of the agency are:

- Enhancing information and referral services for child and adult disability schemes;
- Administering grants and support to persons with disabilities and their caregivers;
- Improving transition management across different life stages;
- Enhancing employability and employment options for persons with disabilities; and
- Rallying stakeholder support in enabling persons with disabilities⁷³

SG Enable offers an Early Intervention Programme for Infants and Children (EIPIC), which includes services such as therapy, educational support, activities that may prevent children from developing secondary disabilities, and referrals to government funded EIPIC centres across Singapore. All of the aforementioned services are developed to provide support for children between the ages of 0 and 6. A referral is required from doctors stationed at specific hospitals (from the Child Development Unit at KK Women’s and Children’s Hospital, National University Hospital or Singapore General Hospital). Without a referral, infants and children coping with disabilities cannot apply for the EIPIC programme.⁷⁴ EIPIC provides developmental and therapy services tailored for children suffering from developmental problems - from physical, intellectual and learning disabilities to autism spectrum disorders. Thus far, reports have shown that EIPIC has been remarkably successful, with 2,600 children with disabilities assisted by the programme in 2015 alone. Since the programme’s launch, the number of centres offering EIPIC has increased drastically. There are currently 17 centres offering the programme, with three new EIPIC centres scheduled to open in 2016/2017. The need for EIPIC centres is only increasing with time, which is mirrored by the demand for more EIPIC centres. The average waiting time for a slot in an EIPIC programme is approximately six months.⁷⁵

In addition to the EIPIC programme, mildly disabled children who do not require intense intervention could be referred to Development Support Programmes (DSP). DSP supports pre-schoolers with mild developmental needs in their classrooms for a period of

- i) 6 to 10 weeks (Learning Support Package)
- ii) 10 to 15 weeks (Therapy Intervention Package)

⁷³ “About Us.” SG Enable. Accessed January 27, 2017. <https://www.sgenable.sg/pages/content.aspx?path=%2Fabout-us%2F>. Copyright 2015.
⁷⁴ “Early Intervention Programme for Infants & Children (EIPIC).” SG Enable. Accessed January 27, 2017. <https://www.sgenable.sg/pages/content.aspx?path=%2Ffor-children%2Fearly-intervention-programme-for-infants-children-eipic%2F>.
⁷⁵ Tan, Theresa. “2,600 kids helped through early intervention scheme last year.” The Straits Times. May 29, 2016. Accessed October 16, 2017. <http://www.straitstimes.com/singapore/2600-kids-helped-through-early-intervention-scheme-last-year>.





Both programmes are designed to help children learn to read, develop motor skills, social skills, and improve speech. About 2,000 children have benefited in more than 300 preschools since the programme was piloted in 2012. After subsidies, Singaporeans pay between SGD5 and SGD200 (USD4 – 150) per month for packages under the programme. Plans for further expansion of the programme have been made, with at least 20 new centres scheduled to be established under My First Skool. Once these new centres are launched, approximately 90% of My First Skool Centres will have adopted Development Support Programmes.⁷⁶

An Integrated Child Care Programme (ICCP) for children (age 2-6) with mild to moderate disabilities is also made available through SG Enable. The ICCP is described as a service that is designed to provide children with a social/educational environment that prepares them for mainstream child care and education. Unlike the aforementioned programmes, the ICCP does not have a strenuous list of applicant restrictions and requirements.⁷⁷

For a list of welfare organizations that provide therapy services to children with disabilities, see the following link: <https://www.sgenable.sg/pages/content.aspx?path=/for-children/therapy-for-young-children/>

In addition to therapy services for children and young people with disabilities, residential homes are also offered as a form of intervention. Residential care is made available to children and young persons under the age of 16.⁷⁸ In order to qualify for residential care, the child/young person must have developmental, intellectual, physical, and/or sensory disabilities. Notably, children and young persons who are prone to fits or psychosis are not allowed to apply for placement in residential care.⁷⁹ This presents a significant issue with the care system, as most families with children suffering from severe disabilities may not have sufficient resources to help them take care of the child or keep the child safe. The application for admission are to be submitted to SG Enable which would then liaised with the various Children Disabilities Homes (CDHs) in determining the best suited level of care which could be provided to the child.

For a list of Children Disabilities Homes (CDHs), see the following link: <https://www.sgenable.sg/uploads/Matrix%20-%20CDH.pdf>

family-based care

6.1 What is the definition of family-based care? How is it defined? Is there emphasis/priority on it?

Efforts to prioritize family based care and family preservation services come from the Inter-Ministry Workgroup on Child Protection (IWCP). Although the IWCP is chaired by MSF, the structure and function of the workgroup says a great deal about the childcare sector as a whole. The IWCP is described as an inter-agency platform for child protection. The workgroup is comprised of representatives from various government run agencies, social service agencies, and statutory boards. Together, these major actors in the care sector are responsible for setting

“ the strategic policy direction for service planning and development in child protection, as well as defines the roles and responsibilities of various partners.

Because they play such a large role in the framework for alternative care of children in Singapore, the IWCP's attitude towards family-based care is of great significance. Therefore, it should be noted that the group's foremost guiding pillar of practice is maintaining child-centric and family oriented care services.⁸⁰ Other recent developments in the care sector include statements made by Minister Tan of MSF which are heavily centered upon the need for stronger family based care services. For example, Mr Tan was quoted in a Channel News Asia article, saying:

“ MSF will strengthen support for vulnerable families so that they can overcome their challenges and become more stable and resilient. We will look into new ways of engaging such families early, and work with social service agencies to assess their needs holistically to provide more coordinated and effective assistance.⁸¹

According to the latest MSF protocol document on child protection - Protecting Children in Singapore, the preservation of familial relationships and bonds is prioritized by the current care system. Out-of-Home Care (OHC) i.e. alternative care option is only utilized in situations where a child or young person's safety is in question. The primary course of action for vulnerable children and families is the provision of care and support for the family as a whole, which is generally carried out through one of MSF's family safety plans. If family preservation through social welfare (including counselling, parenting lessons/support, educational assistance services, etc.) is not an option, MSF uses kinship care as an alternative form of family-based care. If, for whatever reason, the child does not have close relatives or friends who are willing to take him/her in, the child is placed in the foster care system.

Based on MSF's child protection strategies, residential or institutional care options for children are only used as a last resort. In all cases, the Children in Care (CIC) Service is responsible for arranging OHC for vulnerable children. CPS and CIC then make a collaborative effort to ensure that permanency planning has been incorporated to the child's care arrangement.⁸² According to MSF, the framework for childcare and family support system(s) in Singapore is highly guided by the UNCRC, particularly the four main principles of the CRC: non-discrimination, the best interests of the child, survival, development and protection, and finally child participation.⁸³

6.2 Is there a real need for family based service? Justify answer; what indicators suggest this?

The need for family based services has been addressed by MSF and partnered child welfare organizations. In light of foster care and residential/institutional care being used as the two most common forms of alternative care, there is currently a push to make foster care the most utilized form of alternative care. Efforts to expand the foster care sector are spearheaded by the Children in Care Service (CIC) under MSF. The primary goal of the CIC is to cultivate a continuum of out-of-home care (OHC) options, with increased emphasis on OHC placements into families and community-based care arrangements. The CIC has been actively recruiting foster families in the hopes of expanding the sector, which will ultimately allow for more family-based care placements. As the care sector currently stands, institutional care is still utilized more than foster care.⁸⁴

⁷⁶ Chia, Alice. "Help expands for children with mild developmental needs." TODAYonline. August 28, 2016. Accessed October 16, 2017. <http://www.todayonline.com/singapore/programme-children-mild-developmental-needs-be-expanded>.

⁷⁷ "Integrated Child Care Programme (ICCP)." SG Enable. Accessed January 27, 2017. <https://www.sgenable.sg/pages/content.aspx?path=%2Ffor-children%2Fintegrated-child-care-programme-iccp%2F>. Copyright 2015.

⁷⁸ "Therapy for Young Children." SG Enable. Accessed January 27, 2017. <https://www.sgenable.sg/pages/content.aspx?path=%2Ffor-children%2Ftherapy-for-young-children%2F>. Copyright 2015.

⁷⁹ "Children Disability Homes." SG Enable. Accessed January 27, 2017. <https://www.sgenable.sg/pages/content.aspx?path=%2Ffor-children%2Fhomes-for-children-with-disabilities%2F>. Copyright 2015.

⁸⁰ "Protecting Children in Singapore." Ministry of Social and Family Development. 14. June 2016. Accessed January 30, 2017. <https://www.msf.gov.sg/publications/Pages/Protecting-Children-in-Singapore.aspx>.

⁸¹ Sng, Edric. "Expect more marriage, parenting support in 'pro-family' Singapore: MSF, NPTD." Channel News Asia. January 20, 2016. Accessed January 24, 2017. <http://www.channelnewsasia.com/news/singapore/expect-more-marriage/2440902.html>.

⁸² "Protecting Children in Singapore." Ministry of Social and Family Development. 12. June 2016. Accessed January 30, 2017. <https://www.msf.gov.sg/publications/Pages/Protecting-Children-in-Singapore.aspx>.

⁸³ Ibid. 6.

⁸⁴ "Children in Care Service." Ministry of Social and Family Development. July 13, 2017. Accessed October 14, 2017. <https://www.msf.gov.sg/about-MSF/our-people/Divisions-at-MSF/Social-Development-and-Support/Rehabilitation-and-Protection-Group/Pages/Children-in-Care-Service.aspx>.

Ms Audrie Siew, MSF's Director of Children in Care Services, said a lack of foster parents is the biggest obstacle to the Government's target of having two-thirds of children in foster care be placed with foster parents, as opposed to residential care, by 2020.⁸⁵

6.3 Is there poor practice or short-fall of service? are standards very high; is the sector strong? If there is a need; then why? – Short-falls come from; Govt/Private/NGO?

Due to the Singapore Government's tightened control over media, particularly news sources, over the last 5 years, information concerning the down-falls of the MSF is rarely made available to the public. Few news sources are willing to undermine the Singapore Government. In fact, journalists who choose to expose information about Singapore generally have their statements removed from the internet within 24 hours. Research has yielded only one critical review of an MSF-run social welfare programme.⁸⁶

According to the critique, the Singaporean government has proudly stated that SGD130 mil (USD92 mil) went towards funding ComCare schemes for families in need, some criticism has arisen around the efficacy of the programme. Although the figure may seem like a large sum of money, once it is divided amongst 87,000 beneficiaries, the sum seems insufficient at best. A breakdown of the ComCare fund dispersal shows that families ultimately only receive SGD4.15 (USD3) per day. This is hardly enough assistance to make a significant difference in a family's financial situation, especially when one considers the high cost of living in Singapore.⁸⁷

Peculiar to the Singapore public administration, any research/study undertaken to examine government's initiatives or evaluate effectiveness of policies implemented by a private entity either academic or corporation are

considered "confidential". Researchers are made to sign a clause agreement where they (i.e. academics) are denied of publishing their findings. Hence, the government retains most of the important data and information which is crucial to review the actual state of social care landscape. Information which could be easily selected and navigated to be fitting/align with their national social agenda.

6.4 If there is a need; then is this politically and professionally acknowledged? Or is the need resented and concealed?

As stated previously in section 6.3, the Singapore Government maintains a high degree of control over the media, which makes critical reports of the Singapore social welfare and care systems difficult to find. MSF continues to report that strides towards a more family-based care focused system are being made, whilst acknowledging that the capacity of family-based care system (including foster families, adoptive families, etc.) is not yet sufficient for drastic growth to take place in the sector. However, MSF has reportedly increased efforts to raise awareness on the need for foster carers in Singapore. Since MSF began their family-based care expansion efforts in 2013/2014, the number of foster carers has increased by 73 percent, and the number of children placed in foster care has increased by 39 percent. With these figures in mind, MSF's push for foster care over residential care appears to be successful thus far.⁸⁸ Therefore, the need for a stronger family-based care system appears to be acknowledged by the Singapore Government. Nevertheless, it is crucial to note the emphasis

that is being placed on foster care developments, as it seems as though this may be the form of family-based care that the government is most partial to. While there have been developments in family preservation efforts, such as the Safe and Strong Families Pilot Programme (see below in Section 6.5), these developments appear to be fairly new in comparison to the push for foster care. In this sense, family preservation services seem to have taken the back-seat in the process of rolling out new family-based care initiatives.

6.5 What model(s) of family based care is used?

Family strengthening i.e. preventing admission into institutional care

In the effort to prevent vulnerable families from separating, MSF developed the Community Care Endowment Fund (ComCare), a programme that offers support for those in a permanent state of economic struggle (i.e. persons with disabilities, persons who are unable to work), families in need of some temporary financial support, and families who are coping with a wide range of issues that continue to perpetuate a cycle of poverty. The effectiveness of the ComCare schemes has been documented to some degree, although a good deal of the available information on the schemes is provided by MSF employees. According to MSF's reports, the ComCare schemes have assisted many Singaporean families (87,000 beneficiaries in 2015), and ComCare's involvement in family preservation has only increased with time. An MSF representative writes that SGD130 mil (USD went towards funding ComCare schemes in the fiscal year of 2015.

⁸⁵ Leow, Annabeth & Goy Priscilla. "Third fostering agency, run by PPIS, aims to place 75 children". The New Paper. 11 May 2017. <http://www.np.sg/news/singapore/third-fostering-agency-run-ppis-aims-place-75-children>

⁸⁶ McKenzie, Jessica. "Singapore Expands Government Control Over Internet News." TechPresident. June 03, 2013. Accessed October 23, 2017. <http://techpresident.com/news/23954/singapore-expands-media-control-over-internet-news>.

⁸⁷ "Is ComCare helping needy Singaporeans by giving them \$4.15 per day?" TR EMERITUS RSS. December 14, 2016. Accessed January 26, 2017. <http://www.tremeritus.com/2016/12/14/is-comcare-helping-needy-singaporeans-by-giving-them-4-15-per-day/>.

⁸⁸ "Strengthening family-based care for vulnerable children." Ministry of Social and Family Development. March 08, 2017. Accessed November 23, 2017. <https://www.msf.gov.sg/media-room/Pages/Strengthening-family-based-care-for-vulnerable-children.aspx>.

Between 2014 and 2015, MSF reported a 10 percent increase in the number of families receiving help through ComCare.⁸⁹

Other community-based early intervention programmes rolled out include KidSTART, a free marriage preparation program (PREP), and the Child Development Account First Step grant. In particular, KidSTART introduced by Early Childhood Development Agency (ECDA) differs from other governmental family assistance services and in that parents receive financial support before their child(ren) is/are born. If needed, families under KidSTART’s care will continue to receive financial aid for the purpose of ensuring that families have access to community resources, parent support programmes, parenting education and coaching, appropriate educational placement for children, etc. Notably, the cost spent in helping each child ranges from a few hundred to a few thousand dollars a year, depending on the programmes and services that the child needs.

NOTE: Early Childhood Development Agency (ECDA) serves as the regulatory and developmental authority for the early childhood sector in Singapore, overseeing key aspects of children’s development below the age of 7, across both kindergartens and child care centres. ECDA is an autonomous agency jointly overseen by the Ministry of Education (MOE) and the Ministry of Social and Family Development (MSF).

KidStart will also stands out from other programmes in the sense that it includes a highly structured Home Visitation Programme (HVP). The HVP offers home-based preventative care by means of assigning home visitors to regularly visit children between the ages of 0 and 3, who have been identified as living within a vulnerable family.

Descriptions of the service indicate that parent-child bonding is at the core of the programme. HVP Visitors are also responsible for ensuring that the health of the child is up to par, and the child is experiencing age-appropriate mental and physical development. A Preschool Child Development Programme (PCDP) will also be woven into KidStart. Services offered through the PCDP will be somewhat similar to that of the HVP, with the inclusion of heightened management/coordination between teachers, parents and the child. Teachers will also be provided with more advanced screening tools for the detection of complications such as arrested development. Additionally, KidStart offers a programme that is specifically targeted towards parents in need of assistance, entitled the Child-Parent Development Programme (CPDP). In this area of the programme, parents are encouraged to engage in parent support groups, play groups and various parenting workshops, in an effort to increase parent-child bonding and communication.

Despite KidStart being a newly developed initiative, with the government initial investment of SGD20mil (USD14.7mil) into the three-year pilot programme in levelling the playing field for disadvantaged children it has been reported to have received “promising” feedback as announced by Prime Minister Lee Hsien Loong.⁹⁰ Social care experts have welcomed the initiative and call for extension to wider beneficiaries. It has reached out to about 400 families since its implementation Jul 2016 in⁹¹ 5 identified housing areas with concentrated low-income and vulnerable families, namely Bukit Merah, Kreta Ayer, Boon Lay, Taman Jurong and Geylang Serai.⁹²

Family assistance i.e. family tracing / reintegration / reunification etc

Minister Tan of MSF recently announced the launch of the Safe and Strong Families (SSF) pilot programme. The aim of the newly established pilot programme is to assist 400 families with family preservation and reunification services over the course of (the next) three years. The programme is described as being dissimilar to other available programmes in the sense that it is designed to provide home-based care services that can help to prevent children in at-risk homes from being moved to out-of-home care. MSF states that the programme is to consist of frequent family monitoring by the assigned case managers (at least once a week), counselling (also conducted/overseen by case managers), increased access to community services and resources, and parental coaching. The structure of the programme is targeted towards ensuring that families receive the appropriate amount of care and assistance that they require to become self-sufficient again. Therefore, the Safe and Strong Families pilot aids families for a period of 6 months (for family strengthening cases under SSF-P) to one year (for family reunification cases under SSF-R).⁹³ Safe and Strong Families Preservation services (SFF-P) are offered by the following agencies in Singapore:

- Montfort Care
- AMKFSC Community Services Ltd
- Kampong Kapor Family Service Centre

Family reunification programmes under MSF tend to be combined with larger family preservation services and schemes. From the small amount of available information on reintegration and reunification programmes, it appears as though the recently launched Safe and Strong Families Reunification programme (SSF-R) is the most relevant. By design, SFF-R is comprised of two key components: family reunification and family preservation. The timeliness of care placements also appears to be one of the main focal points of the programme, as SFF-R is designed to reduce the length of the child’s stay in OHC placement.⁹⁴ The SFF-R is provided by a number of VWOs in Singapore, including

- Singapore Children’s Society
- Chen Su Lan Methodist Children’s Home
- Boys’ Town
- The Salvation Army
- Muhammadiyah Association

Kinship care

In the context of Singapore’s child protection/care system, kinship care is treated as the best possible alternative care option for vulnerable children/families. Because kinship arrangements offer children the opportunity to remain connected to their family, their sense of identity is often preserved throughout the caring process.⁹⁵ However, there is almost no information available on kinship care in Singapore. This may be due to the informal nature of kinship care arrangements, or it may be that MSF does not document the kinship care process to the same degree as other forms of alternative care. In either case, the official number of children in kinship care is not provided by MSF, a formal definition of kinship care is not provided,

and the legal regulations/policies guiding kinship care are not made available.

Foster care

Since 1956, MSF has developed a Fostering Scheme that operates as an alternative care option for children who cannot be placed into kinship care. Based on the highly emphasized development of the foster care sector in recent years, it appears as though the sector has not been as strong in the past. Notably, the foster carers are called “foster parents” taking on a cultural significance where unregulated fostering have been the norm in the past as it was not uncommon for families to entrust the care of their children to their neighbours in the villages. And till present, many in the community is of the impression that fostering is a “baby-sitting” arrangement. Expectedly, there have been allegations of abuse against the foster carers in the past (not necessarily brought to the limelight as it would likely have an adverse effect on the recruitment strategy) and suspicious that foster families see the Scheme as means of supplementing the household income.

The scheme is designed for children under the age of 18 who are living without parental care or guidance for one (or more) of the following reasons: their parents are deceased, their parents are incarcerated, their families are economically unstable and therefore unable to care for them, their parents suffer from physical or mental disabilities and/or illnesses that impair their parenting capabilities, the children have been neglected or abandoned, or the children have been subjected to abuse.⁹⁶ It is required that prospective foster parents apply through the ministry Children in Care (CIC), and await

approval before beginning of a foster placement. Those who wish to become foster parents must also meet certain criteria laid down by MSF as well clear of background check with the Police force and a Health screening (expenses covered by MSF).

Primarily, the foster parenting criteria is focused on issues such as one’s residency status in Singapore, income (min, \$2,000/USD1,470) per month), medical suitability, educational achievements (applicants must have a secondary school education), and ability to provide a safe, nurturing environment for the child in care. The criteria also states that applicants should be married, however the wording implies that it is possible to become a single foster parent, depending on the context.⁹⁷ Either an MSF officer or appointed foster assessment agency would conduct the assessment over a period of 6 months with one office interview and another home visit to establish the suitability of the applicants. Once approved, the foster parents are expected to attend foster parenting training; receive a monthly allowance S\$936 (USD690) or S\$1,114 (USD820) for a child with special needs, a Medical Fee Exemption Card (MFEC); and support and visitation from Foster Care Officers (FCOs) under CIC; as well as gaining access to a 24 hour Fostering Emergency Hotline, and subsidies for childcare and enrichment classes.⁹⁸ Generally, foster care placement is seen as a temporary solution, but the option for long term placement and/or eventual adoption is sometimes made available to foster families. However, by design foster care is meant to serve as a temporary care arrangement, and MSF’s goal is to reunite the child with his/her parents.⁹⁹

⁸⁹ Chuan-Jin, Tan. “Family is where the heart is.” MSF Conversations. December 31, 2016. Accessed January 26, 2017. <https://msfconversations.wordpress.com/2016/12/31/family-is-where-the-heart-is/>.

⁹⁰ Lee, Amanda. “KidStart pilot to be ramped up after ‘promising’ feedback.” Today Online. November, 30 2016. <http://www.todayonline.com/singapore/kidstart-pilot-be-ramped-after-promising-feedback>

⁹¹ “A good Start for Every Child.” Fact Sheet on KidStart. ECDA. <https://www.ecda.gov.sg/PressReleases/Pages/FACT-SHEET-ON-KIDSTART.aspx>

⁹² “KidSTART initiative to help children from vulnerable families.” Channel News Asia. April 12, 2016. Accessed January 24, 2017. <http://www.channelnewsasia.com/news/singapore/kidstart-initiative-to/2688318.html>.

⁹³ Tai, Janice. “Parliament: Pilot programme to help keep troubled families together.” The Straits Times. April 12, 2016. Accessed January 26, 2017. <http://www.straitstimes.com/politics/parliament-pilot-programme-to-help-keep-troubled-families-together>.

⁹⁴ “Social Worker (Family Reunification Service).” E-services.ncss.gov.sg. Accessed October 16, 2017. <https://e-services.ncss.gov.sg/Career/Job/Detail/fb3e39ca-c785-e611-8112-000e296ee03a>.

⁹⁵ “Protecting Children in Singapore.” Ministry of Social and Family Development. 12. June 2016. Accessed January 30, 2017. <https://www.msf.gov.sg/publications/Pages/Protecting-Children-in-Singapore.aspx>.

⁹⁶ “Fostering.” About the Fostering Scheme. March 18, 2015. Accessed January 21, 2017. <https://www.msf.gov.sg/Fostering/Pages/About-the-Fostering-Scheme.aspx>.

⁹⁷ “Fostering.” Criteria for Foster Parents. Accessed January 22, 2017. <https://www.msf.gov.sg/Fostering/Pages/Criteria-for-Foster-parents.aspx>. Publication date not listed by MSF.

⁹⁸ “Fostering.” About the Fostering Scheme. March 18, 2015. Accessed January 21, 2017. <https://www.msf.gov.sg/Fostering/Pages/About-the-Fostering-Scheme.aspx>.

⁹⁹ “Fostering.” FAQs. March 18, 2015. Accessed January 21, 2017. <https://www.msf.gov.sg/Fostering/Pages/FAQs.aspx>.

It is now possible for interested foster parent candidates to work with local fostering agencies. The provision of foster care services through local agencies is a fairly new development in the sector. Up until 2015, foster care services were managed and provided solely by MSF. By partnering with foster care agencies (FAs), MSF plans to strengthen and broaden their community outreach programmes. FAs take on significant responsibilities in the sector, such as providing foster parents with support services and programmes. Examples of these support programmes may include counselling, parenting advice and foster training, as well as assistance in integrating the child into the foster family.¹⁰⁰ The FAs had been provided with a substantive sum of SGD50,000 (USD36,700) per month with a detailed programme framework i.e. detailing practice guideline as well as resource allocation in delivering the foster care provisions. The programme is to be managed by 5 staff comprising of 1 Manager; 1 Admin and 3 Social Workers to handle a baseline caseload of 75 foster families per month to be allocated/referred by CIC. In addition to conducting assessment of new foster parents application thou MSF remains the central body in approving the foster parents' application and decision maker in placing and matching a child under the care of identified foster family as well as determining their return/frequency of contact to birth families. In addition, partnering with SSI, MSF have formalise the training provided to foster parents and FAs.

In 2014, Ministry of Social and Family Development (MSF) announced an SGD8 million (USD5.9mil) three-year pilot that would appoint voluntary welfare organisations (VWOs) to set up fostering agencies to allow for vulnerable children and youths living in institutional homes to be cared for by foster families.

The first two foster care agencies established in Singapore are run by MCYC Community Services Society and Boys' Town, both of which are considered to be VWOs. Reportedly, the involvement of the aforementioned organizations in providing greater access to foster care is directly related to the three-year government funded foster care pilot scheme, which was announced in 2014. Despite government efforts to expand the foster care sector, the estimated number of children in foster care was only listed 330 in 2015. Executive Director of Boys' Town, Ms Irene Loi reported that both FAs were unable to recruit a single foster carer during their first year of formation. She indicated that there the community found the idea of foster care "strange" as did not want to take on the responsibility of caring for someone's else child. She added that there were also many restrictions (such as having window grilles, not same sex couple and instances where family are expected to have a domestic helper to assist with the care) imposed under MSF guidelines hence shining away potentially good carers.

The aim of the foster care programme is to develop the capacity to care for 500 children by 2020. When compared to the number of children in alternative care homes (800 in 2015), it appears as though the scheme intends to make foster care arrangements account for a larger percentage of alternative care placements in Singapore.¹⁰¹ Thus far, MSF's scheme has gone in the intended direction, with more recent figures showing that there are now 439 vulnerable children who have been placed in foster families. Moreover, MSF has announced that a third foster care agency is scheduled to open in Aug of 2017. The third fostering agency will be operated by the Singapore Muslim Women's Association (PPIS). Still, MSF is responsible for providing a majority of the foster care arrangements in Singapore, with local fostering agencies accounting for only 150 foster children.¹⁰²

Thou notably, despite 61 years of practice Singapore has does not any legislative framework with regard to the care provisions in comparison to counterparts Philippines (Foster Care 2012) and Indonesia (Government Regulation (PP) 44/2017 on Foster Care Implementation). What is more discerning is the fact the foster carers are taken as substitute "parents" rather than carers. An ex civil servant officer recalled being told by an MSF supervisor that the role of the foster parents were simply to "provide shelter, feed and send the children to school". Despite, the circumstances of the children who come to the system would likely experienced some level of abuse / trauma. The history of the children / profile of the children are not shared with the foster families. For fear that prospective foster parents would not come forward or if the application is approved would not care for the children. Hence, there many instances of disrupted and placements during the course of years as foster parents were often unprepared, ill-equipped and in most instances felt misinformed of the circumstances of their engagement and pull out of the Scheme. In addition, there have been instances of alleged abuse by foster families and yet the children remain because of shortage of foster care placements.

Field missions unravelled the frustrations shared by foster parents who reported not receiving MSF support/assistance during the foster care placement itself. Many felt overwhelmed as often the placement takes place rather suddenly and without much preparation nor information provided with regard to the background i.e. nature/routine/habits of child. Given that the children are likely to have experienced abuse or trauma, foster parents grappled when the effects of the abuse/trauma manifest within days of placement. At lost they would call the FCOs assigned to them who would merely give assurance that they are doing a good job without offering much practical tips on how to manage the foster child behavioural issues which presents itself from being violent aggression, withdrawal/disengagement, self-harming, binging, bedwetting etc.

Another foster family recalled reaching out for help from MSF on numerous occasions when their 7 year old foster child began hitting, punching and head-butting them. The emotional meltdown would occur 3-4 times a week lasting from few minutes to hours. The child was previously placed in a small group home after multiple foster care placements broke down. On one occasion, the foster child turned aggressive and went into a rage striking and battering the couple for hours on the eve of festivities. The couple had called the CIC emergency hotline asking for help as fear the child would hurt himself to no avail. Instead they were advised (at a later date) that they should have contacted the police. At their end wits, they brought the child in to KKH Children's Hospital where the child was diagnosed having psychotic tendency and was prescribed medication alongside regular therapy. The couple was finally given some time off when the foster child was place on respite care with the Home he

¹⁰⁰ "Fostering." Selected Fostering Agencies. March 18, 2015. Accessed January 22, 2017. <https://www.msf.gov.sg/Fostering/Pages/Selected-Fostering-Agencies.aspx>.

¹⁰⁰ "Fostering." Selected Fostering Agencies. March 18, 2015. Accessed January 22, 2017. <https://www.msf.gov.sg/Fostering/Pages/Selected-Fostering-Agencies.aspx>.

¹⁰¹ Tai, Janice. "First two dedicated agencies to support foster families to be set up by June." The Straits Times. February 26, 2015. Accessed January 22, 2017. <http://www.straitstimes.com/singapore/first-two-dedicated-agency-to-support-foster-families-to-be-set-up-by-june>.

¹⁰² Huiwen, Ng. "Third fostering agency to be ready by next June." The Straits Times. November 19, 2016. Accessed January 22, 2017. <http://www.straitstimes.com/singapore/third-fostering-agency-to-be-ready-by-next-june>.

was previously admitted. However, the couple were suddenly informed that the child would not be returning under their care despite the attachment formed and their resourcefulness in seeking external help. Rather than having to a case discussion in addressing some of the presenting issues by placing more supportive structure around the foster parents – MSF had decided for a quick fix in placing the child back to institutional care.

Nonetheless, Muchamed Elfian and wife, Salinah Parsiri who has been MSF foster parents since 2009 shared positive experience in having proactive Child Protection Officer (CPO) and FCO who were able to advocate and push for rather “unconventional” foster care arrangement. A case in point was when MSF for the first time agreed on a “mother-child” foster care placement. Where a 15 year old birth mother stayed together in Elfian’s household together with her 2 year old toddler son as the mother was homeless. Thou the placement lasted for 3 months, various supportive services were put in place and conditions were worked out between the authorities, foster parents and birth mother, such as psychological sessions for the birth mother, supervised access with family members, curfew etc. It allowed the young mother to pick up parenting skills while observing Salinah care for her son. This included knowing the difference in preparing the milk formula instead of feeding child with condensed milk. In addition, the foster family were given the exception to care for 2 foster children of the same age.

Where a child they had cared previously return to the care of birth mother only to be contacted by the birth mother 2 years later asking the family for help. Because of the previous attachment to the child, MSF agreed to place under Elfian’s family care once again. The couple affirmed that besides having the backing from the particular officers (as they shared the experiences were different with other officers), the couple have an informal foster parents’ support group where they are able get advice and encouragement in holding up with some of the challenges in caring for the children. Presently, they are also caring for another foster child whom initial foster parents had indicated intention to adopt but withdrew after discovering the child suffers from a genetic disorder which require regular medical attention. The birth mother has Down syndrome and the extended family is not keen to have the child. Elfian and Salinah had since legally adopted the child in 2015.

Appointed fostering agencies

Boys’ Town

www.boystown.sg

MCYC Community Services Society

www.mcyg.sg

PPIS Singapore Muslim

Women’s Association

www.ppis.sg

Needless to say, private foster care arrangement (only one in Singapore) also exist and is undertaken by Boys’ Town known as Sanctuary Care (SC).

The alternative fostering service provision was first established under a charity Sanctuary House in 2005 by a group of volunteers to care for babies temporarily either to be return under the care of the birth mothers or placed out for adoption. However, in 2016 Sanctuary House Board of Directors decided to be co-opted by Boys’ Town as the VWO struggled in the recruitment of foster carer as well as retaining staff.¹⁰³ Since the incorporation, the SC fostering care provision is managed by a separate team (from Boys’ Town MSF Fostering Scheme) and do not receive any funding grant from MSF/the government. The foster care placements cater to children whose

“families need assistance during a crisis such as during incarceration, illness or as a result of a crisis pregnancy.”¹⁰⁴

And heavily reliant on the expatriate community whom would usually provide temporary care of less than a year i.e. respite or emergency as their stay in Singapore is over a limited period of time. It is purely a volunteering basis where the foster carers do not receive any allowance under the MSF Fostering Scheme thou SC provides the carers with utmost support in assisting them with the care of children. The help does not stop short in redistributing donated baby powder, diapers, strollers etc but also in on-call at the time of crisis and providing on-the-support respite care/assistance in shuttling the children to school/ medical appointment/access time with family etc if the foster carers are unable to do so. Most of the children are under the age of 7 years old.

The foster care placements request are usually referred to SC by the main public hospital Kandang Kerbau Hospital (KKH) (i.e. where there is an abortion counselling unit), FSCs as well as Prison Aftercare Services or lawyers whose clients are to be sent for immediate incarceration. Most often, it is the case of struggling single mothers who finds it hard to secure a job or a home and simply needing some help to get back on their feet again. SC social workers work alongside with the birth mothers/families and foster carers on an agreed time-line and expectations to ensure the reunification of the child with family. They also ensure regular weekly contact between child and family to maintain the familial bonds. Both birth families and foster carers meet at the point of placement to not only exchange tips on child’s routine, favourite meals etc but also to allay the former’s fears in placing the child under the care of a “stranger”.

Ms Gillian McConnell, SC Social Worker concluded that local families tended to put all resources in their own children given the competitive nature (i.e. kiasuism culture) where they are afraid of losing out in the society. Hence, in addition to the limited time being duo-income working adults in the households, many shine away in coming forward to be a foster parent/carer. She mentioned that the foster care assessment of new applicants takes about 6 weeks to complete where the applicants are interviewed about 3-4 times. Regrettably, they struggle to recruit new foster carer for their programme and at the moment have less than 15 available foster carers as many of the expatriate community who have been the main carers have either moved back to country or origin/moving away from Singapore.

Foster carers Taznim Moideen and her husband Ali A Sherazee who has been with SC for nearly 4 years and only expatriate Muslim family have cared for three new born babies since commended SC team for the supervision and support for each care placement. Taznim shared how they had initially took in a respite placement fostering care arrangement as means to observe how their two daughters (aged 7 and 3 years old then) would adapt to the new role they had taken on. The experience gave them the confidence to take on long-term subsequent long term arrangement. Despite not having given any form of allowance (unlike MSF foster carers), Taznim is appreciative of the social workers level of commitment in working alongside with them as well as birth mothers in the eventual return of the children back to their own families. She added that SC would also provide for the foster children medical fees, toys, clothes, stroller, diapers, milk powder etc which had been donated to the agency. The help rendered by the agency had indeed encouraged them and aided with providing continued care for the children. Presently, they are in the process of adopting one of the foster child whom they had cared for 19 months as despite counselling and referral for additional family support, the natural mother decided on giving up her parental rights.

Adoption

Adoption services are generally carried out through agencies that have partnered with MSF. Prospective adoptive parents can work with one of MSF’s accredited adoption agencies in order to adopt a child under state care, or they can adopt through alternative contacts (agencies, online sources, private adoptions, etc.).

All adoptions must be in accordance with the Adoption of Child Act (ACA), and the unit in charge of signing off on adoptions is the Family Court of Singapore. Before adopting a child, it is legally required that the child’s ties with their parents are severed through notarized parental consent. Other adoption requirements include: residency status (married couples must be residents of Singapore in order to adopt), age (25 years or older, with a 21 year age difference between the parents and the child, but no more than 50 years older than the child), and spousal consent (required in cases where only one partner wishes to adopt). In keeping with most country adoption laws, single men are not legally allowed to adopt a girl. As mentioned previously, adoptions through MSF accredited agencies also require a home study report and a pre-adoption briefing (PAB).¹⁰⁵ Although most of the requirements listed by MSF appear to be primarily for Singaporean applications, Singapore ratified the Hague Convention in 2016.¹⁰⁶ Nevertheless, there are some limitations, such as the restriction of adoption rights to UK nationals (as of 2014). Prospective adoptive parents from countries that maintain inter-country adoption agreements with Singapore are required to submit an endorsed letter of support.¹⁰⁷ Additional

¹⁰³ Tan, Theresa. “Sanctuary for kids closing its doors.” The Straits Times. March 26, 2016. Accessed November 29, 2017. <http://www.straitstimes.com/singapore/sanctuary-for-kids-closing-its-doors>.

¹⁰⁴ “Charity Spotlight: Sanctuary Care Fostering Services for Families in Need.” Sassy Mama. April 17, 2017. Accessed November 29, 2017. <https://www.sassymama.com/sassy-mama-supports-sanctuary-care-foster/>.

¹⁰⁵ “Adoption.” Who can adopt? Accessed January 27, 2017. <https://www.msf.gov.sg/Adoption/Pages/Who-can-Adopt.aspx>. Date of publication not specified by MSF.

¹⁰⁶ “Singapore Ratifies Hague Convention on Choice of Court Agreements.” Ministry of Law Singapore. June 02, 2016. Accessed January 27, 2017. <https://www.mlaw.gov.sg/content/minlaw/en/news/press-releases/singapore-ratifies-hague-convention-on-choice-of-court-agreement.html>.

¹⁰⁷ “Adoption.” Who can adopt? Accessed January 27, 2017. <https://www.msf.gov.sg/Adoption/Pages/Who-can-Adopt.aspx>. Date of publication not specified by MSF.



restrictions and regulations may arise in cases where the adoption agency is not MSF accredited. Despite the extensive list of requirements for adoptive parents, there are few requirements that must be fulfilled by the child. Reportedly, the main requirements for the child are as follows: the child is under the age of 21, and all foreign born children must obtain a Dependent's Pass from MSF before the adoption process can begin.¹⁰⁸

In Singapore, the total number of adoptions was 387 in 2016.¹⁰⁹ Compared to 2004, the number of adoptions in Singapore has dropped by around 50%. It was reported that almost half of the adopted children then were locally born.¹¹⁰ Various reports suggest the low number of adoptions can be attributed to the low birth rate, the low number of local babies given up for adoption (abortion is legal and there is good contraceptive options available), as well as a fall in adoption of babies from neighbouring countries over the past recent years.¹¹¹¹¹²

More recently, there has been a growing trend where prospective adopters are looking for babies to adopt via online platforms. It is reported that some prospective adoptive parents (PAPs) are hesitant about dealing with adoption agencies (local and foreign) which can charge high fees i.e. between SGD25,000 to 35,000 (USD18,000-26,000) and prefer to deal directly with the birth parents. Although it is illegal to pay the birth parents for giving up their child for adoption, it is a common practice for adopting couples

to reimburse birth mothers for pre-natal and post-natal expenses, including hospital delivery bills. These detailed breakdown of all financial transactions, including agent fees and reimbursement to parents are then provided to the Court. Some adopters lamented that the process is too long. Hence, PAPs sometimes contact and strike up deals with the birth parents that may not be wholly legal.¹¹³

An article on *Asia One*, a 40 year old PAP cited that whilst she could understand the rationale behind the preparatory steps, her husband & herself do not have the time. The same couple went on to advertise their interest in identifying a baby for adoption on line. Within the first 2 weeks of the their ad appearing, the couple received 8 offers from birth mothers two of whom asked for money. The Adoption of Children Act prohibits any payment/reward to the biological or adoptive parents for the adoption of the child, except with the sanction of the Court. Details and receipts must be provided to the court.

In another linked article by the same publication, a birth mother who gave up her baby for adoption shared her narrative. The mother shared that she posted online to find adopters for her baby after experiencing severe financial and marital difficulties. It was reported that she used a lawyer but had not approached any adoption agency. The baby was placed with a couple who paid SGD8,000 (USD5,700). There is ongoing debate about whether the adoption is legal.

Accredited adoption agencies

TOUCH Community Services Limited
adoption.tcs.org.sg
Fei Yue Community Services
www.fyccs.org
Apkim Centre For Social Services
www.apkim.sg
Lutheran Community Care Services
www.lccs.org.sg

Guardianship

There is limited information on the use of guardianship as an alternative form of care in Singapore. Guardianship is a form of alternative care that is mentioned only in circumstances where the child is adopted, or both of the child's parents have passed away. In the context of adoption, guardianship goes hand-in-hand with the legal principles of the adoption process. Therefore, adoptive parents become the child's legal guardians once the adoption has been approved. In cases where a child's parents are deceased, a guardianship agreement (often made with relatives or close family friends) is generally laid out before the parents pass away. Parents may appoint legal guardians to their children in case of emergency, but children who do not have legal guardians assigned to them will fall under the care of the government.¹¹⁴ All matters pertaining to guardianship falls under

the jurisdiction of the Family Justice Courts (FJC), which is described as being "comprised of the Family Division of the High Court, the Family Courts and the Youth Courts and is administered by the Presiding Judge of the FJC."¹¹⁵ The most relevant law pertaining to guardianship in Singapore is the Guardianship of Infants Act (enacted in 1934, revised in 1985).¹¹⁶

¹⁰⁹ "Adoption." Ministry of Social and Family Development. February 22, 2017. Accessed October 23, 2017. <https://www.msf.gov.sg/Adoption/Pages/Adoption-Statistics.aspx>.

¹¹⁰ "Adopt a local baby." Lovely Baby & Child Adoption Services. 2010. Accessed October 23, 2017. <http://www.lovelybabyadoption.com/adopt-a-local-baby.html>.

¹¹¹ "Adoption - How do I adopt a child in Singapore?" SingaporeLegalAdvice.com. June 08, 2017. Accessed October 23, 2017. <https://singaporelegaladvice.com/law-articles/how-do-i-adopt-a-child-in-singapore/>.

¹¹² The Asian Parent. "Adoption in Singapore drops by half - we look at the reasons why." Singapore Parenting Magazine for baby, children, kids and parents. Accessed October 23, 2017. <https://sg.theasianparent.com/falling-a-low-adoption-rate-in-singapore/2/>.

¹¹³ "What you need to know about Adopting a Child in Singapore." SingaporeMotherhood.com. August 08, 2016. Accessed October 23, 2017. <https://singaporemotherhood.com/articles/2016/08/child-adoption-singapore/>.

¹¹⁴ "Wills and Guardianship in Singapore: How to take care of your kids!" Sassy Mama. February 13, 2014. Accessed January 28, 2017. <https://www.sassymamas.com/wills-and-guardianship-in-singapore-how-to-take-care-of-your-kids/>.

¹¹⁵ More help for children and families. Report. April 6, 2016. [https://www.familyjusticecourts.gov.sg/NewsAndEvent/Documents/FJC%20Workplan%202016%20Press%20Release%20\(with%20Fact%20sheets\).pdf](https://www.familyjusticecourts.gov.sg/NewsAndEvent/Documents/FJC%20Workplan%202016%20Press%20Release%20(with%20Fact%20sheets).pdf).

¹¹⁶ "Guardianship of Infants Act." Singapore Statutes Online. March 30, 1987. Accessed January 28, 2017. <http://statutes.agc.gov.sg/aol/search/display/view.w3p?page=0;query=DocId%3A%228af1c185-ad9a-45d1-afb5-de944cdd60P%22%20Status%3A%20Published%20Depth%3A0%20%20TransactionTime%3A20151007000000;rec=0>.



legal considerations

The legal system in Singapore does not require NPO/VWOs to register. However, NPOs operating without registration cannot raise funds through people or organizations outside of the NPO. Unregistered NPOs can also encounter issues with the taxation process, as they may not be legally eligible for tax exemption. Given the magnitude of these restrictions, NPOs are likely to experience greater ease in operating if they are registered as a public company limited by guarantee, a society, or a charitable trust.

The type of registration required for any given NPO varies based on the size of the organization, legal liabilities associated with the services offered by the organization, and the intended mode of funding/fund raising. Public companies limited by guarantee can register with the Accounting and Corporate Regulatory Authority (ACRA), under the Singapore Companies Act. Societies can be registered with the Registrar of Societies (ROS), under the Singapore Societies Act. The process of registering a charity differs slightly, as charities are considered to be licensed rather than registered. A charity can receive their licence through the Monetary Authority of Singapore (MAS), under the Singapore Companies Act.¹¹⁷ The involvement of MSF and other government ministries concerned with child protection are not mentioned in the registration process description.

In 2011 a further amendment of the Children and Young Persons Act (CYPA) led to new laws surrounding the licensing requirements for children's homes. Once the amendments were put into effect, all children's homes operated by VWOs were required to obtain a licence. Additionally, the Director of Social Welfare and the "Protector" were granted the authority to revoke VWO licenses if the organization fails to run the home well.¹¹⁸

¹¹⁷ Parallelus. "Singapore Non-Profit Organisation Registration." Asia Company Setup. Accessed January 29, 2017. <http://www.asiacompanysetup.com/singapore-non-profit-organisation-registratio.html>. Copyright 2011

¹¹⁸ Ministry of Community Development, Youth and Sports. "CHILDREN AND YOUNG PERSONS ACT TO BE AMENDED TO PROVIDE FOR HIGHER STANDARD OF CARE, PROTECTION AND REHABILITATION." News release, March 05, 2008. <http://www.nas.gov.sg/archivesonline/data/pdfdoc/20080305965.pdf>.

National Laws, Policies, Regulations, Codes Etc.

Penal Code
Widows' and Orphans' Pension Act
Legitimacy Act
Guardianship of Infants Act
Adoption of Children Act
Women's Charter
Employment (Children and Young Persons) Regulations
Child Care Centres Act
Children and Young Persons Act (CYPA)

Status of Children
(Assisted Reproduction Technology) Act
Family Justice Act
Prevention of Human Trafficking Act
Early Childhood Development Centres Act

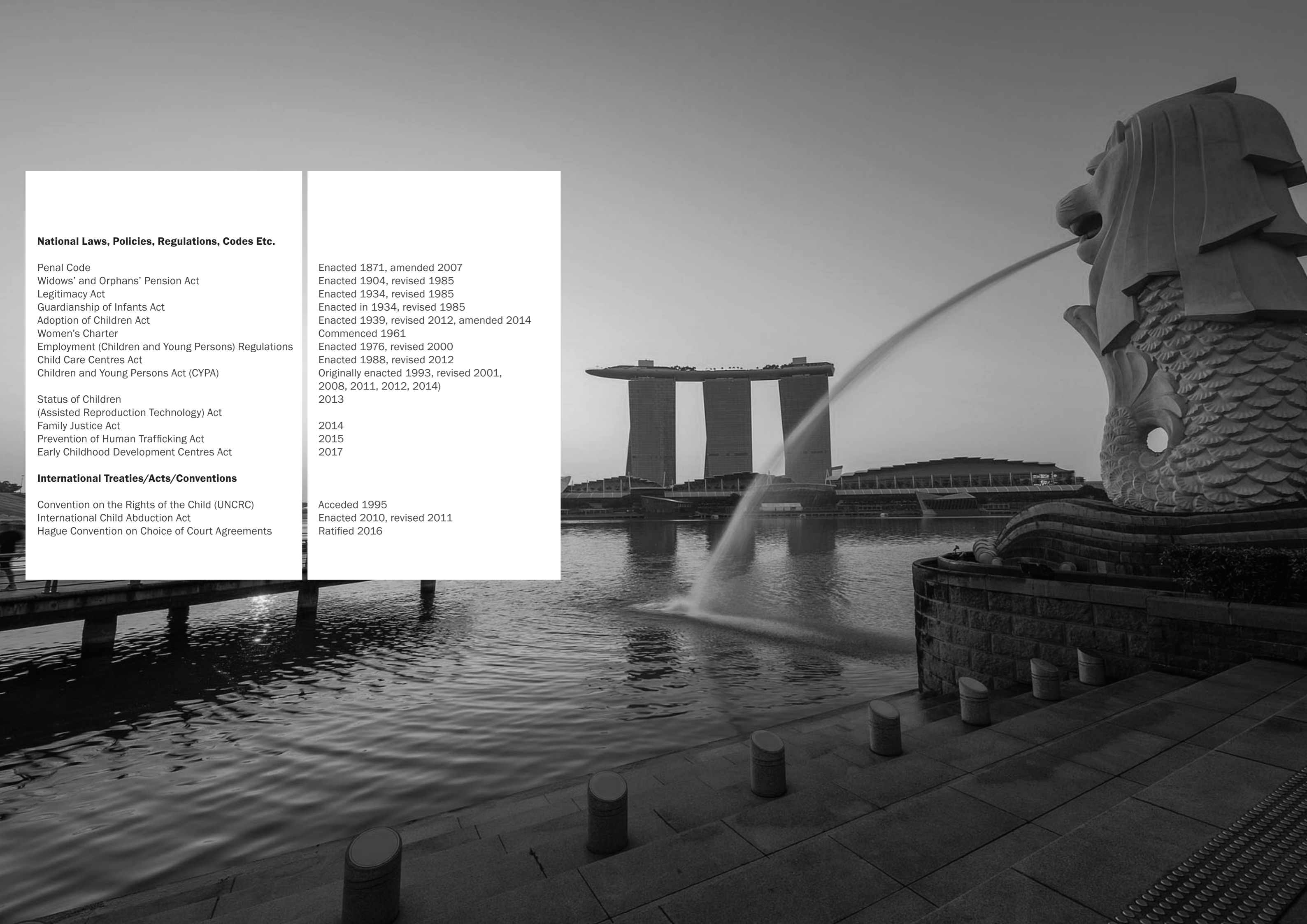
International Treaties/Acts/Conventions

Convention on the Rights of the Child (UNCRC)
International Child Abduction Act
Hague Convention on Choice of Court Agreements

Enacted 1871, amended 2007
Enacted 1904, revised 1985
Enacted 1934, revised 1985
Enacted in 1934, revised 1985
Enacted 1939, revised 2012, amended 2014
Commenced 1961
Enacted 1976, revised 2000
Enacted 1988, revised 2012
Originally enacted 1993, revised 2001,
2008, 2011, 2012, 2014)

2013
2014
2015
2017

Acceded 1995
Enacted 2010, revised 2011
Ratified 2016



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